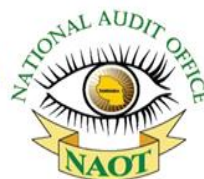# THE UNITED REPUBLIC OF TANZANIA
NATIONAL AUDIT OFFICE

FOLLOW-UP ON THE IMPLEMENTATION OF RECOMMENDATIONS ON THE SIXTEEN PERFORMANCE AUDIT REPORTS ISSUED AND TABLED BEFORE THE PARLIAMENT IN APRIL 2018 AND 2019
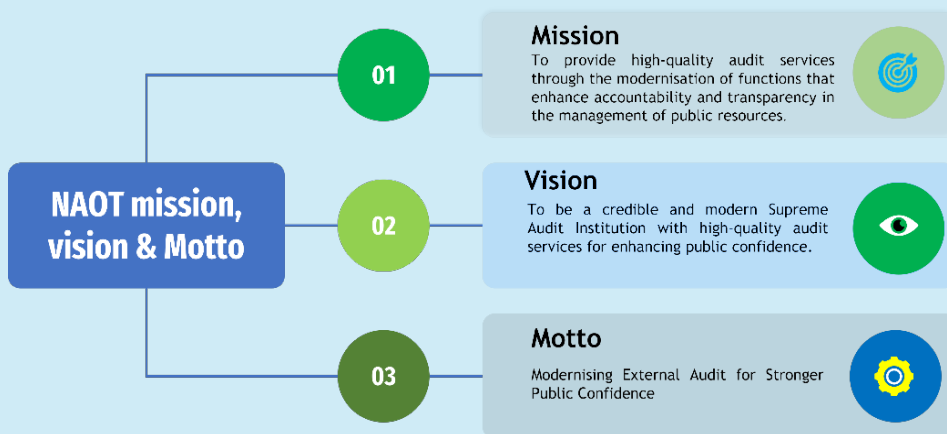

CONTROLLER AND AUDITOR GENERAL
MARCH 2023

About National Audit Office

The statutory mandate and responsibilities of the Controller and Auditor General are provided for under Article 143 of the Constitution of the United Republic of Tanzania, 1977 and in Section 10 (1) of the Public Audit Act, Cap. 418.

NAOT mission, vision & Motto

01 Mission
To provide high-quality audit services through the modernisation of functions that enhance accountability and transparency in the management of public resources.

02 Vision
To be a credible and modern Supreme Audit Institution with high-quality audit services for enhancing public confidence.

03 Motto
Modernising External Audit for Stronger Public Confidence

### CORE VALUES

Independence and objectivity
We are an impartial public institution, independently offering high-quality audit services to our clients in an unbiased manner.

Teamwork Spirit
We value and work together with internal and external stakeholders.

Results-Oriented
We focus on achievements of reliable, timely, accurate, useful, and clear performance targets.
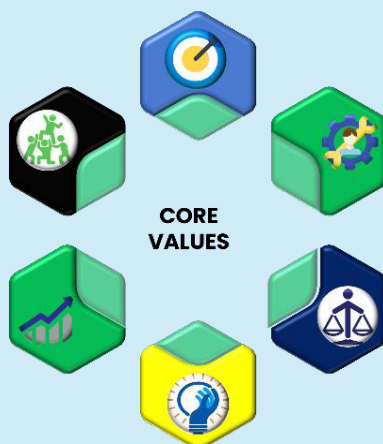
Professional competence
We deliver high-quality audit services based on appropriate professional knowledge, skills, and best practices

Integrity
We observe and maintain high ethical standards and rules of law in the delivery of audit services.

Creativity and Innovation
We encourage, create, and innovate value-adding ideas for the improvement of audit services.

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PREFACE

I am pleased to present a Follow-up Report on the implementation of the recommendations from the previous Performance Audit Reports. This report covers sixteen (16) individual Performance Audit Reports. The related recommendations were given to nineteen (19), Government entities namely: President's Office – Regional Administration and Local Government; Vice President's Office; Ministry of Agriculture; Tropical Pesticides Research Institute; Ministry of Lands, Housing and Human Settlements Development; Ministry of Finance and Planning; Ministry of Water; National Irrigation Commission; Ministry of Investment and Trade; Tanzania Fertilizer Regulatory Authority; Tanzania Official Seed Certification Institute; Ministry of Health; National Health Insurance Fund; Ministry of Energy; Ministry of Livestock and Fisheries; and Ministry of Education, Science and Technology.

I have the honour to submit this Follow-up Report on the Implementation of the Recommendations from the previously issued Performance Audit Reports to Her Excellency, Hon. Dr. Samia Suluhu Hassan, the President of the United Republic of Tanzania, and through her, to the Parliament of the United Republic of Tanzania, as per Article 143 of the Constitution of the United Republic of Tanzania, 1977 and Section 34(1) and (2) of the Public Audit Act CAP 418 [R.E. 2021].

This report provides our main stakeholders, namely; Members of Parliament and the Government of the United Republic of Tanzania, with the analysis of the progress of the Audited Entities in responding to the recommendations made in the Performance Audit Reports, which were tabled and adopted by the Parliament in April 2018 and 2019. The rationale behind this report is to make the Parliament aware of the implementation status of the recommendations made in the previous Performance Audit Reports.

In essence, this follow-up report has enabled me to provide independent assurance to the Parliament concerning the implementation status of the previously issued recommendations on areas such as Management of Electronic Waste; Management of Pesticides in Agricultural Activities; Management of Plots Allocation; Sustainable Management of Marine Resources in the Marine Protected Areas in Tanzania; Management of Provision of Sewage Services in Urban Areas; Provision of Support Services for Small and Medium Enterprises;

Management of Construction Activities on Irrigation Projects; Management of Water Supply Projects from Borehole Sources; Availability and Accessibility of Good Quality Agricultural Inputs (Seeds And Fertilizers) to Farmers; Maintenance of Power Generation Plants; Management of Education for Pupils with Special Needs; Provision of Referral and Emergency Healthcare Services in Higher Level Referral Hospitals; Monitoring of Building Works in Urban Areas; Provision of National Health Insurance Services; Management of Water Projects in Rural Areas; and Preparedness for Implementation of Sustainable Development Goals.

The main objective of the follow-up audits was to examine the identified problems in the respective areas; establish whether the allocated resources were spent based on the principles of economy, efficiency and effectiveness as intended and found appropriate by the Parliament of the United Republic of Tanzania.

While my Office conducts audits and issues reports on the performance of Ministries, Departments and Agencies, Local Government Authorities, Public Authorities and Other Bodies' programmes and activities based on the relevant laws, rules and regulations governing such programmes and activities; the ultimate responsibility for ensuring there is efficiency, economy and effectiveness in the use of public resources rests with the respective Accounting Officers. At the same time, it is the responsibility of the Accounting Officers to ensure that the observations and recommendations raised by the Controller and Auditor-General are timely acted upon.

I would like to appreciate the commitment of my staff and cooperation accorded to my audit teams by the Accounting Officers and their staff, which has facilitated the timely completion of the follow-up audit.

I hope that the National Assembly and public at large will find the information provided in this report relevant and useful in holding the Government accountable for the use of public funds and delivery of services to Tanzanian citizens.

Charles E. Kichere
Controller and Auditor General
United Republic of Tanzania
March, 2023

LIST OF ABBREVIATIONS AND ACRONYMS

AMCOS	:	Agricultural Marketing Cooperative Society
AQRB	:	Architects and Quantity Surveyors Registration Board
ARD	:	Agricultural Research Development System
ASA	:	Agricultural Seed Agency
ATIMIS	:	Agricultural Trade Management Information System
BA	:	Business Associations
BADEA	:	Arab Bank for Economic Development in Africa
BCAS	:	Biological Control Approval Sub-Committee
BDS	:	Business Development Service
BEMIS	:	Basic Education Management Information System
BMC	:	Bugando Medical Centre
BPS	:	Bulky Procurement and Supply
CBOs	:	Community Based Organizations
CCROs	:	Certificates of Customary Right of Occupancy
COSTECH	:	Commission for Science and Technology
CRB	:	Contractors Registration Board
CSOs	:	Civil Society Organizations
CSP	:	Corporate Strategic Plan
DC	:	District Council
DEM	:	Department of Environmental Management
DMRs	:	Dar es Salaam Marine Reserves
EACO	:	East African Communication Organization
EIA	:	Environmental Impact Assessment
EMA	:	Environmental Management Act
EMD	:	Emergency Medical Department
EPC	:	Engineering, Procurement and Construction
ERB	:	Engineers Registration Board
ESRF	:	Economic and Social Research Foundation
FFS	:	Fertilizers and Fertilizer Supplement

FSDT	:	Financial Sector Development Trust
FSS	:	Fertilizer Subsidy Scheme
FYDP	:	Five-Year Development Plan
GIS	:	Geographical Information System
GPS	:	Global Positioning System
HI	:	Hearing Impairment
ICT	:	Information and Communication Technology
IFC	:	International Finance Corporation
ILMIS	:	Integrated Land Management Information System
IMS	:	Information Management System
INGOs	:	International Non-Governmental Organization
KCMC	:	Kilimanjaro Christian Medical Centre
KPIs	:	Key Performance Indicators
LGAs	:	Local Government Authorities
LPO	:	List of Purchase Order
LRUC	:	Local Residence User Certificates
LTSC	:	Long Term Service Contract
M&E	:	Monitoring & Evaluation
MCs	:	Municipal Councils
MDAs	:	Ministries, Departments and Agencies
MIMP	:	Mafia Island Marine Park
MIS	:	Management Information System
MITI	:	Ministry of Industry, Trade, and Investments
MLHSD	:	Ministry of Lands, Housing and Human Settlements Development
MoA	:	Ministry of Agriculture
MoE	:	Ministry of Energy
MoEST	:	Ministry of Education, Science and Technology
MoFP	:	Ministry of Finance and Planning
MoH	:	Ministry of Health
MoLF	:	Ministry of Livestock and Fisheries

MoU	:	Memorandum of Understanding
MoW	:	Ministry of Water
MoWI	:	Ministry of Water and Irrigation
MPAs	:	Marine Protected Areas
MPRU	:	Marine Parks and Reserve Unit
MTEF	:	Medium Term Expenditure Framework
MZRH	:	Mbeya Zonal Referral Hospital
NAOT	:	National Audit Office of Tanzania
NBS	:	National Bureau of Statistics
NCC	:	National Construction Council
NEAP	:	National Environmental Action Plan
NECTA	:	National Examination Council of Tanzania
NEDF	:	National Entrepreneurship Development Fund
NEMC	:	National Environmental Management Council
NGOs	:	Non-Governmental Organizations
NHIF	:	National Health Insurance Fund
NIMP	:	National Irrigation Master Plan
NIRC	:	National Irrigation Commission
NPPAC	:	National Plant Protection Advisory Committee
NSS	:	National Statistical System
NRWSSP	:	National Rural Water Supply and Sanitation Program
OPD	:	Out Patient Department
OSHA	:	Occupational Safety and Health Authority
PARTS	:	Pesticides Approval and Registration Technical Committee
PHS	:	Plant Health Services
PM2	:	Pesticides Management
PMU	:	Procurement Management Unit
PO-RALG	:	President's Office – Regional Administration and Local Government
PPRA	:	Public Procurement Regulatory Authority
QDS	:	Quality Declared Seed

RAS	:	Regional Administrative Secretariat
RBM	:	Risk Based Maintenance
RS	:	Regional Secretariat
RTK	:	Real Time Kinematic Positioning
RUWASA	:	Rural Water Supply and Sanitation Agency
SACCOS	:	Savings and Credit Cooperative Societies
SCU	:	Seed Coordinating Unit
SDGs	:	Sustainable Development Goals
SIDO	:	Small Industries Development Organization
SMART	:	Specific, Measurable, Achievable, Relevant, and Time-Bound
SMEs	:	Small and Medium Enterprises
SNE	:	Special Needs Education
SQAs	:	School Quality Assurers
SSIDP	:	Small-Scale Irrigation Development Project
TACMP	:	Tanga Coelacanth Marine Park
TADB	:	Tanzania Agricultural Development Bank
TANCAID	:	Tanzania Capacity-building for Irrigation Development
TANePS	:	Tanzania National electronic Procurement System
TANESCO	:	Tanzania Electric Supply Company
TAPROS	:	TANESCO Procurement System
TARI	:	Tanzania Agricultural Research Institute
TARURA	:	Tanzania Rural and Urban Road Agency
TBS	:	Tanzania Bureau of Standard
TCRA	:	Tanzania Communication Regulatory Authority
TDCs	:	Technology Development Centers
TFDA	:	Tanzania Food and Drugs Authority
TFRA	:	Tanzania Fertilizers Regulatory Authority
TIN	:	Taxpayer Identification Number
TIRDO	:	Tanzania Industrial Research and Development Organization
TIS	:	Tanzania Integrated Statistical Portal

TMW	:	Takwimu za Elimu ya Watu Wazima na Elimu Nje ya Mfumo Rasmi
TNA	:	Training Needs Assessment
TOSCI	:	Tanzania Official Seed Certification Institute
TPHPA	:	Tanzania Plant Health and Pesticides Authority
TPRI	:	Tropical Pesticides Research Institute
TRA	:	Tanzania Revenue Authority
TSA	:	Takwimu za Shule/ Madarasa ya Awali
TSS	:	Takwimu za Shule za Sekondari
UEEE	:	Used Electric and Electronic Equipment
UNEP	:	The United Nations Environment Programme
UNITAR	:	United Nations Institute for Training and Research
UWSSAs	:	Urban Water Supply and Sanitation Authorities
VLC	:	Village Liaison Committee
VPO	:	Vice President's Office
DoE	:	Division of Environment
WSDP	:	Water Sector Development Programme
WSPs	:	Water Stabilization Ponds

EXECUTIVE SUMMARY

Performance audit seeks to improve the accountability and performance of government organizations. It provides an objective and constructive assessment of the extent to which the Audited Entities have utilized the available resources in carrying out their responsibilities with due regard to economy, efficiency and effectiveness.

Follow-up of the recommendations from the Performance Audit conducted by the Controller and Auditor General (CAG) is a necessary process for ensuring that such recommendations are addressed and that citizens receive the appropriate feedback on the Value-for-Money of various programmes and activities conducted by Ministries, Departments and Agencies.

The main objective of the follow-ups was to assess how the Audited Entities implemented the recommendations issued by the Controller and Auditor General. Specifically, follow-up examines the corrective measures taken by the Audited Entities on the recommendations issued, the governance systems and reporting arrangements for monitoring the level of implementation of the performance audit recommendations issued by the Controller and Auditor General.

Therefore, this report presents the results of the follow-ups on the implementation of the recommendations from 16 Performance Audit Reports that were tabled to the Parliament in April, 2018 and 2019. The issued recommendations were from the following Performance Audit Reports:

(a) Electronic Waste Management;
(b) Management of Pesticides in Agricultural Activities;
(c) Management of Plots Allocation;
(d) Sustainable Management of Marine Resources in Marine Protected Areas;
(e) Preparedness for Implementation of Sustainable Development Goals in Tanzania;
(f) Management of Provision of Sewage Services in Urban Areas;
(g) Provision of Support Services for Small and Medium Enterprises in Tanzania;
(h) Management of Construction Activities on Irrigation Projects;
(i) Management of Water Supply Projects from Borehole Sources in

Tanzania;

(j) Availability and Accessibility of Good Quality Agricultural inputs (Seeds and Fertilizers) to Farmers;

(k) Maintenance of Power Generation Plants;

(l) Management of Education for Pupils with Special Needs;

(m) Management of Provision of Referral and Emergency Healthcare Services in Higher Level Referral Hospitals;

(n) Monitoring of Building Works in Urban Areas;

(o) Management of Provision of National Health Insurance Services; and

(p) Management of Water Projects in Rural Areas.

Results of the Follow-Ups

30% of the Audit Recommendations were either not fully or partially implemented

Follow-up results indicated that as of December 2022, 32 out of 197 recommendations (equivalent to 16%) were fully implemented, 105 recommendations (equivalent to 53%) were partially implemented, while 60 recommendations (equivalent to 30%) were not implemented. Furthermore, it was indicated that 137 out of 197 recommendations (equivalent to 70%) were either fully or partially implemented. Table **1** shows the state of implementation of the issued performance audit recommendations to various Audited Entities categorized as *fully, partially, and not implemented*.

Table 1: Extent of Implementation of Issued Performance Audit Recommendations by Respective Entities

Name of Entity	Status of Implementation				
	No. of Issued Recommendations	Fully Implemented	Partially Implemented	Fully or Partially Implemented	Not Implemented
President's Office - Regional Administration and Local Local Governance (PO-RALG)	33	6	13	19	14
Ministry of Water	28	5	14	19	9
Ministry of Agriculture (MoA)	15	0	7	7	8
Ministry of Health	15	4	10	14	1
Vice President's Office (VPO)	12	1	8	9	3
Ministry of Finance and Planning	12	4	2	6	6
Small Industries Development Organization	11	1	7	8	3
Tanzania Electric Supply Company (TANESCO)	11	1	4	5	6
Marine Parks and Reserve Unit (MPRU)	9	0	8	8	1
Tanzania Fertilizers Regulatory Authority (TFRA)	8	1	7	8	0
National Health Insurance Fund (NHIF)	7	2	5	7	0
Tanzania Plant Health and Pesticides Authority (TPHPA)	6	2	3	5	1
Ministry of Lands, Housing and Human Settlement Development	6	0	3	3	3
Ministry of Education, Science and Technology (MoEST)	6	4	2	6	0
National Irrigation Commission (NIC)	5	0	2	2	3
Tanzania Official Seed Certification Institute (TOSCI)	5	1	3	4	1
Ministry of Industry, Trade and Investments	3	0	3	3	0
Ministry of Energy	3	0	2	2	1
Ministry of Livestock and Fisheries Development (MLFD)	2	0	2	2	0
Total	197	32	105	137	60
Percent (%)		16	53	70	30

Source: Auditors' Analysis of Implementation Status of the issued Recommendations (2022)

From **Table 1.1** it is shown that:

137 out of 197 (equivalent to 69.5%) of issued Recommendations were either Fully or Partially Implemented

In total, there were 137 recommendations, of which 32 were fully implemented and 105 were partially implemented. This, in total, represents 70% of the 197 recommendations issued.

Controller and Auditor General

32.1% of the Recommendations which were either Fully or Partially Implemented falls under the Implementation/Execution Function

Further analysis indicates that, out of 137 recommendations that were either fully or partially implemented, 28 recommendations (equivalent to 20.4%) were in the planning category, 44 recommendations (equivalent to 32.1%) were in the implementation/execution category, 29 recommendations (equivalent to 21.2%) were in the monitoring and evaluation category, 17 recommendations (equivalent to 12.4%) were in the coordination category, and 19 recommendations (equivalent to 13.9%) were in the development category.

A summary of the extent to which the recommendations from each audit reports were implemented is provided as follows:

(a) Electronic Waste Management

A total of 19 recommendations were issued in this performance audit, 12 recommendations were directed to the Vice President's Office (VPO) and 7 recommendations were directed to the President's Office – Regional Administration and Local Government (PO-RALG). The overall follow-up results indicated that, of all issued recommendations, 1 recommendation was fully implemented, 12 recommendations were partially implemented, and 6 recommendations were not implemented.

(b) Management of Pesticides in Agricultural Activities

A total of 13 recommendations were issued in this performance audit, 7 recommendations were directed to the Ministry of Agriculture (MoA) and 6 recommendations were directed to the Tanzania Plant Health and Pesticides Authority (TPHPA). The overall follow-up results indicated that, of all issued recommendations, 2 recommendations were fully implemented, 5 recommendations were partially implemented, and 6 recommendations were not implemented.

(c) Management of Plots Allocation

A total of 12 recommendations were issued in this performance audit, 6 recommendations were directed to the Ministry of Lands, Housing and Human Settlements Development (MLHSD) and 6 recommendations were directed to

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the President's Office – Regional Administration and Local Government (PO-RALG). The overall follow-up results indicated that, of all issued recommendations, 7 recommendations were partially implemented, and 5 recommendations were not implemented.

(d) Sustainable Management of Marine Resources in Marine Protected Areas

A total of 11 recommendations were issued in this performance audit, 2 recommendations were directed to the Ministry of Livestock and Fisheries (MLF) and 9 recommendations were directed to the Marine Parks and Reserve Unit (MPRU). The overall follow-up results indicated that, of all issued recommendations, 10 recommendations were partially implemented, and 1 recommendation was not implemented.

(e) Preparedness for Implementation of Sustainable Development Goals in Tanzania

A total of 16 recommendations were issued in this performance audit, 12 recommendations were directed to the Ministry of Finance and Planning (MoFP) and 4 recommendations were directed to the President's Office – Regional Administration and Local Government (PO-RALG). The overall follow-up results indicated that, of all issued recommendations, 4 recommendations were fully implemented, 3 recommendations were partially implemented, and 9 recommendations were not implemented.

(f) Management of Provision of Sewage Services in Urban Areas

A total of 9 recommendations were issued in this performance audit, and were all directed to the Ministry of Water (MoW). The overall follow-up results indicated that, of all issued recommendations, 2 recommendations were fully implemented, 4 recommendations were partially implemented, and 3 recommendations were not implemented.

(g) Provision of Support Services for Small and Medium Enterprises in Tanzania

A total of 14 recommendations were issued in this performance audit, 3 recommendations were directed to the Ministry of Industry, Trade and Investment, and 11 recommendations were directed to the Small Industries Development Organization (SIDO). The overall follow-up results indicated that, of all issued recommendations, 1 recommendation was fully implemented, 10 recommendations were partially implemented, and 3 recommendations were not implemented.

(h) Management of Construction Activities on Irrigation Projects

A total of 7 recommendations were issued in this performance audit, 5 recommendations were directed to the National Irrigation Commission (NIRC) and 2 recommendations were directed to the Ministry of Agriculture (MoA). The overall follow-up results indicated that, of all issued recommendations, 4 recommendations were partially implemented, and 3 recommendations were not implemented.

(i) Management of Water Supply Projects from Borehole Sources in Tanzania

A total of 7 recommendations were issued in this particular audit, and all of them were directed to the Ministry of Water.

The overall follow-up results on the implementation of the issued audit recommendations indicated that, out of 7 issued recommendations, 2 of them were fully implemented (equivalent to 29 percent) 3 were partially implemented (equivalent to 42 percent) and 2 (equivalent to 29 percent) were not implemented.

(j) Availability and Accessibility of Good Quality Agricultural inputs (Seeds and Fertilizers) to Farmers

A total of 19 recommendations were issued in this performance audit, 6 recommendations were directed to the Ministry of Agriculture (MoA), and 8 recommendations were directed to the Tanzania Fertilizers Regulatory Authority (TFRA), and 5 recommendations were directed to the Tanzania

Official Seed Certification Institute (TOSCI). The overall follow-up results indicated that, of all issued recommendations, 2 recommendations were fully implemented, 13 recommendations were partially implemented, and 4 recommendations were not implemented.

(k) Maintenance of Power Generation Plants

A total of 14 recommendations were issued in this performance audit, 3 recommendations were directed to the Ministry of Energy and 11 recommendations were directed to the Tanzania Electric Supply Company (TANESCO). The overall follow-up results indicated that, of all issued recommendations, 1 recommendation was fully implemented, 6 recommendations were partially implemented, and 7 recommendations were not implemented.

(l) Management of Education for Pupils with Special Needs

A total of 11 recommendations were issued in this performance audit, 6 recommendations were directed to the Ministry of Education, Science and Technology (MoEST) and 5 recommendations were directed to the President's Office – Regional Administration and Local Government (PO-RALG). The overall follow-up results indicated that, of all issued recommendations, 6 recommendations were fully implemented, 2 recommendations were partially implemented, and 3 recommendations were not implemented.

(m) Management of Provision of Referral and Emergency Healthcare Services in Higher Level Referral Hospitals

A total of 10 recommendations were issued in this performance audit and were all directed to the Ministry of Health (MoH). The overall follow-up results indicated that, of all issued recommendations, 9 recommendations were partially implemented, and 1 recommendation was not implemented.

(n) Monitoring of Building Works in Urban Areas

A total of 11 recommendations were issued in this performance audit and were all directed to the President's Office – Regional Administration and Local Government (PO-RALG). The overall follow-up results indicated that, of all issued recommendations, 4 recommendations were fully implemented, 4

recommendations were partially implemented, and 3 recommendations were not implemented.

(o) Management of Provision of National Health Insurance Services

A total of 12 recommendations were issued in this performance audit, 5 recommendations were directed to the Ministry of Health (MoH) and 7 recommendations were directed to the National Health Insurance Fund (NHIF). The overall follow-up results indicated that, of all issued recommendations, 6 recommendations were fully implemented, and 6 recommendations were partially implemented.

(p) Management of Water Projects in Rural Areas

A total of 12 recommendations were issued in this performance audit and were all directed to the Ministry Water (MoW). The overall follow-up results indicated that, of all issued recommendations, 1 recommendation was fully implemented, 7 recommendations were partially implemented, and 4 recommendations were not implemented.

Reasons for Non-implementation of Issued Recommendations

Based on the above observations, the audit evaluated the cause for failure to fully implement the issued audit recommendations, and it was revealed that such failure was manifested by the following:

Absence of Unit or Section Responsible for Overseeing the Implementation of Recommendations

The audit team observed that, at least all 19 Audited Entities did not have a Section or Department which had a role of tracking and overseeing the implementation of the issued performance audit recommendation.

This was attributed to the long duration that the Audited entities took to provide evidences in respect to the implementation status of the issued recommendations. This implies that, even though recommendations were received by the top management of the audited entities, management did not assign anyone the task of ensuring that the recommendations were adequately implemented.

Controller and Auditor General

Inadequate Involvement of Top Management and Audit Committees in Monitoring Implementation of Audit Recommendations

Furthermore, during the meetings with the officials, it was noted that there was no clear coordination within the entities. Also, there were no records or minutes that indicated the status of implementation of the issued audit recommendations, and discussed by the top management of the Audit Committees.

Consequently, it took quite some time for the entities to provide responses regarding the implementation status of the recommendations since the contact persons had to take time to identify Section, Department or staff that was responsible.

Absence of Reporting Mechanism for the Performance Audit Recommendations

There were weak reporting Mechanisms on the Implementation Status of Recommendations. It was noted that the audited entities lacked good reporting mechanisms for reporting the implementation status of the given recommendations.

This implies that little efforts were put by audited entities to further report on the implementation status of the recommendations within their organizations.

Lack of Detailed Plans and Strategies for Implementation of Audit Recommendations

During the exit meetings between the NAOT and the Management of the audited entities, the audited entities received the audit recommendations and came up with preliminary implementation plans. In those preliminary plans, the audited entities came up with broad activities and timelines from which the recommendations were expected to be implemented.

However, through the interviews conducted with Officials from the audited entities, it was noted that their entities did not have a detailed plan showing how the issued recommendations were going to be implemented. It was also revealed that, apart from the preliminary plans that were prepared during the

Controller and Auditor General

exit meetings, there were no other plans which were prepared by the audited entities to further guide them and allocate responsibilities to specific units that would track the progress of implementing the recommendations. No one was clearly accountable for this matter.

Inadequate Coordination and Communication on the Implementation Status of Issued Recommendations

The follow up team observed that the Internal Audit functions within the Audited Entities was inadequately aware of issues regarding the implementation of performance audit recommendations. However, it was noted that this only came to the knowledge of internal auditors during the entry meeting when the Management of NAOT introduced the follow-up assignment.

Absence of Recommendation Registers in the Audited Entities

Furthermore, the Audit noted that the reasons for not paying attention for preparation of the implementation status reports by the audited entities was due to the absence of the recommendation registers to capture all performance audit recommendations.

Following lack of functioning recommendations, registries largely made it difficult for the Audited Entities to respond and provide answers on time with regard to the implementation status of the audit recommendations. This was further evidenced by the fact that even when the audited entities were issued with the letters requesting for the implementation status of the audit recommendations, they had no records in their offices. However, they had to request such records from NAOT.

Lack of Monitoring Plans and Key Performance Indicators

It was noted that, the monitoring system in place lacked monitoring plans and performance indicators that could be used to assess the level of implementation of the given recommendations. Moreover, the Entities lacked focal persons or responsible sections that would lead and track the implementation status of the previously issued performance audit recommendations.

Conclusion

The overall conclusion of this follow-up audit is that the actions taken by Audited Entities in response to the previously issued performance audit recommendations have, to some extent, addressed the issues to which the recommendations were made. What is generally indicated by the follow-up audit results is that at least quarter of the issued recommendations were not implemented.

The audit found out that inadequate implementation of the issued recommendations is mainly caused by various factors such as: insufficient governance structures within the Audited Entities, lack of clearly established responsibilities and reporting arrangements in these entities and inappropriateness of the processes and systems for monitoring the implementation of the issued recommendations within the audited entities.

Not only that but also, the Audited Entities are still operating without having specific responsible sections or individuals to coordinate the implementation of the issued recommendations. In addition, such entities lacked the updated recommendation registries and detailed plans for implementation of the issued recommendations. Generally, these factors were observed to contribute to the insufficient implementation of the previously issued performance audit recommendations.

Recommendations

The Prime Minister's Office is advised to ensure that all Ministries, Independent Departments, Agencies and Local Government Authorities:

(i)   Establish sound governance structures and mechanisms for tracking and monitoring the implementation status of the issued performance audit recommendations;

(ii)   Prepare action plans stating how the Audited Entity will ensure that the partially and not implemented recommendations are addressed on a timely basis;

(iii) Ensure that the submitted Performance Audit Reports are effectively disseminated to the responsible Divisions or Departments within the Audited Entities and explain what they are out to do. Where possible,

the Reports should also be disseminated to the existing governance systems such as Internal Audit, Audit Committee for proper follow-up and actions; and

(iv)   Establish monitoring mechanisms or tracking systems that will ensure the implementation status of all issued audit recommendations is regularly checked and timely reported to the management of the audited entities for necessary actions.

CHAPTER ONE

INTRODUCTION

1.1   Background

Performance audits seek to improve the accountability and performance of government organizations. They provide objective and constructive assessments of the extent to which the Audited Entities have utilized their resources in carrying out their responsibilities with due regard to economy, efficiency and effectiveness.

The Office Controller and Auditor General has been carrying out a number of performance audits in the government entities. Based on the findings and conclusions made in those audits, CAG issues recommendations that, if implemented, can assist in improving the performance of government entities and ensure that public resources are economically, efficiently, and effectively managed and utilized.

Likewise, Regulation 77 (5) of the Public Audit Regulations, 2009 [GN No. 47/2009] mandates the Controller and Auditor General to conduct follow-ups on the recommendations issued to the government entities by conducting performance audits. In this regard, CAG conducted a follow-up audit to determine the levels of implementation for the recommendations from sixteen (16) performance audit reports, namely:

1) Electronic Waste Management;
2) Management of Pesticides in Agricultural Activities;
3) Management of Plots Allocation;
4) Sustainable Management of Marine Resources in Marine Protected Areas;
5) Preparedness for Implementation of Sustainable Development Goals in Tanzania;
6) Management of Provision of Sewage Services in Urban Areas;
7) Provision of Support Services for Small and Medium Enterprises in Tanzania;
8) Management of Construction Activities on Irrigation Projects;
9) Management of Water Supply Projects from Borehole Sources in Tanzania;

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10) Availability and Accessibility of Good Quality Agricultural inputs (Seeds and Fertilizers) to Farmers;
11) Maintenance of Power Generation Plants;
12) Management of Education for Pupils with Special Needs;
13) Management of Provision of Referral and Emergency Healthcare Services in Higher Level Referral Hospitals;
14) Monitoring of Building Works in Urban Areas;
15) Management of Provision of National Health Insurance Services; and
16) Management of Water Projects in Rural Areas.

1.2 The rationale for Follow-up on the Implementation of Audit Recommendations

Follow-ups are conducted to provide stakeholders (Members of Parliament and the Government of the United Republic of Tanzania) with the analysis of the progress made by the Audited Entities with regard to the implementation of recommendations issued in the performance audit reports which were tabled and adopted by Parliament. Normally this is done for the purpose of reporting back to the Parliament the level of implementation of the issued audit recommendations.

Follow-ups on the implementation of the audit recommendations enable CAG to provide the necessary independent assurance to the Parliament concerning the implementation status of the issued recommendations on different areas.

Therefore, follow-up on the implementation of the audit recommendations examine the identified problems in the respective areas; establish whether allocated resources have been spent with due regard to the economy, efficiency and effectiveness as intended and as approved by the Parliament.

1.3 Design of the Follow-ups Audits on the Implementation of Audit Recommendations

The follow-up audits were designed in such a way that they provided the required information to the CAG regarding the implementation status of the issued recommendations. This report covers the objectives and scope of the

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follow up audits on the implementation of the audit recommendations as detailed hereunder: -

1.3.1 Objectives of the Follow-up Audits on the Implementation of Issued Recommendations

Main Objective of Follow-up

The main objective of follow-up audits is to assess how the Audited Entities have implemented the recommendations issued by the Controller and Auditor General.

Specific Objectives

The specific objectives of follow-up audits are to:

a) Examine corrective measures taken by the Audited Entities through the implementation of the recommendations issued by CAG;

b) Assess the governance systems for monitoring CAG's performance audit recommendations; and

c) Examine reporting arrangements on implementation of the performance audit recommendations issued by CAG.

Scope of the Follow-up Audits

The follow-up audits covered 197 recommendations issued in sixteen performance audit reports which were implemented by 19 Audited Entities. These 16 audits were the ones whose reports were tabled before the Parliament in 2018 and 2019, as described in **Table 1.1.**

Table 1.1: List of Sixteen Audit Reports whose Recommendations were Followed-Up

Title of the Performance Audit Report	Audited Entity/Entities
Performance Audit on Electronic Waste Management	• Vice President's Office (VPO) • President's Office – Regional Administration and Local Government (PO-RALG)

Title of the Performance Audit Report	Audited Entity/Entities
Performance Audit on the Management of Pesticides in Agriculture	• Ministry of Agriculture • The Tropical Pesticides Research Institute
Performance Audit on the Management of Plots Allocation	• Ministry of Lands, Housing and Human Settlements Development • President's Office – Regional Administration and Local Government (PO-RALG)
Performance Audit on Marine Protected Areas Management	• Marine Parks and Reserve Unit (MPRU) • Ministry of Livestock and Fisheries Development (MLFD)
Performance Audit on Preparedness for Implementation of Sustainable Development Goals	• Ministry of Finance and Planning • President's Office – Regional Administration and Local Government (PO-RALG)
Performance Audit on Provision of Sewage Services in Urban Areas	• Ministry of Water and Irrigation • President's Office – Regional Administration and Local Government (PO-RALG)
Performance Audit on the Provision of Support Service for Small and Medium Enterprises	• Ministry of Industry, Trade and Investments • Small Industries Development Organization (SIDO)
Performance Audit on the Management of Construction Activities on Irrigation Projects	• National Irrigation Commission (NIRC) • Ministry of Agriculture
Performance Audit on the Management of Water Supply Projects from Borehole Sources in Tanzania	• Ministry of Water
Performance Audit on Availability and Accessibility of Good Quality Agricultural Inputs (Seeds and Fertilizers) to Farmers	• Ministry of Agriculture • Tanzania Fertilizers Regulatory Authority (TFRA) • Tanzania Official Seed Certification Institute (TOSCI)
Performance Audit on Maintenance of Power Generation Plants	• Ministry of Energy • Tanzania Electric Supply Company (TANESCO)

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Title of the Performance Audit Report	Audited Entity/Entities
Performance Audit on Management of Education for Pupils with Special Needs	• Ministry of Education, Science and Technology (MoEST) • President's Office – Regional Administration and Local Government (PO-RALG)
Performance Audit on Management of Provision of Referral and Emergency Healthcare Services in Higher Level Referral Hospitals	• Ministry of Health
Performance Audit on Monitoring of Building Works in Urban Areas	• President's Office – Regional Administration and Local Government (PO-RALG)
Performance Audit on Management of Provision of National Health Insurance Services	• Ministry of Health • National Health Insurance Fund (NHIF)
Performance Audit on the Management of Water Projects in Rural Areas	• Ministry of Water

Source: Performance Audit Reports Tabled to the Parliament (2018 and 2019)

The follow-up audits confined to reviewing recommendations detailed in the original performance audit reports mentioned in **Table 1.1** and their respective responses, commitments and implementation status.

1.4 Stages to Follow-up in the Implementation of the Issued Audit Recommendations

The follow-up audits on the implementation of the issued audit recommendations were conducted through the following six steps, as presented on **Figure 1.1**:

Figure 1.1: Steps for Follow Up on the Implementation of the Issued Audit Recommendations

Sending letters to the audited entities requesting for the implementation status of the issued performance audit recommendations

Review of the implementation status responses with their corresponding supporting evidences from the audited entities

Submission of the verification letters including a matrix on the implementation status of the issued performance audit recommendations with auditors' comments to the audited entities for their review

Developing a matrix for the implementation status of the issued recommendations by consolidating all received responses for each specific audit

Verification and factual clearance on the responses

Developing a follow – up report on the implementation status of the issued performance audit recommendations

Source: Performance Audit Manual (2022)

1.5   Methods for Data Collection and Analysis

During the follow-up audits on the implementation of recommendations, various methods of data collection and analysis during were deployed. These methods are as presented below:

1.5.1 Methods of Data Collection

The audit collected both qualitative and quantitative data to provide robust evidence and data on the level of implementation of the issued recommendations. The audit gathered information through interviews, document reviews and physical verifications, as explained below:

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Interviews

Interviews were conducted with the audited entities' senior and operational management personnel to understand the processes and clarify issues regarding the implementation of the issued performance audit recommendations from the identified reports. The interviews assisted in obtaining verbal responses about the activities that were carried out in responding to the issued performance audit recommendations.

Document Reviews

The audit reviewed the implementation status of the previously issued performance audit recommendations to explore the progress. The document reviews provided evidence regarding matters agreed upon during the original individual performance audits, commitments made by the audited entities and initiatives, and corrective measures taken so far to address the respective recommendations.

Physical Verifications

Different Entities, Regional Secretariats and LGAs were visited to assess the level of implementation of the various projects or physical structures or items that were supposed to be installed or acquired by the audited entities.

1.5.2 Methods of Data Analysis

The collected evidence and data were reviewed and analyzed to verify the implementation of the issued recommendations by cross-checking their relevance based on the identified actions and milestones indicated by the respective Audited Entities. Information that entailed the overall assessments on the implementation status was summarized, described, and presented in Tables and Charts.

1.6 Criteria for Ranking the Level of Implementation of Recommendations

Implementation of the issued recommendations was measured using levels and classification of recommendations as described in **Figure 1.2** below:

Figure 1.2: Levels of Implementation of Performance Audit Recommendations

Fully Implemented Recommendation	• When the audited entity provides sufficient and appropriate evidence to support all elements of the recommendation.
Partially Implemented Recommendation	• When the audited entity provides some data and evidence which support the implementation, but not all elements of the recommendation are addressed
	Partially - Satisfactory: This is when audited entity provides most of the required evidence to support implementation of the recommendations that have been done within the required/acceptable time duration
	Partially - not satisfactory: This is when the Audited Entity provides evidence which shows only preliminary measurable steps have been taken to address the recommendation; or when only some few elements of the evidence have been issued
Not Implemented Recommendation	• When the audited entity provides evidence which does not support meaningful movement towards implementation of a recommendation, or no evidence is provided, where implementation might take time and it is in the process but there is nothing that can be measured
Recommendation Overtaken by Event	• When the recommendation made has been overtaken by other circumstances which are likely to make the recommendation irrelevant or to have less impact at that particular time

Source: Performance Audit Manual (2022)

To analyze the level of implementation, classification of each of the issued recommendations was made based on:

- Nature of audit recommendation; and
- Length of time needed to implement the issued recommendation.

Nature of the audit involved analyzing the nature of issues that the concerned recommendation was all about. These include planning, budgeting, implementation, monitoring and evaluation, performance measurement, coordination, policy-making, etc.

Length of time needed to implement the issued recommendation to its completion was also used as another criterion.

Figure 1.3 provides three categories used to classify the implementation levels about the duration required for implementing the issued performance audit recommendations.

Figure 1.3: Classification of Recommendations Relating to Time

Short term Recommendations

- Recommendations that take less than 6 months to be fully implemented. These are recommendations that do not need much time and budget to implement.

Medium term Recommendations

- Recommendations that take between 6 and 18 months to be fully implemented. These are the recommendations that need considerable time and budget to implement.

Long term Recommendations

- Recommendations that take between 18 and 36 months to be fully implemented. These are the recommendations that need enough time and budget to implement. Similarly, these recommendations involve seeking various approvals from higher authorities to the audited entities or involve development of various guides or implementation policies.

Source: Auditors' Analysis (2022)

1.7 Data Validation Process

The Audited Entities, which were issued with the respective recommendations and which were the subjects of the follow-up audits, were allowed to go through the draft findings and analyses made during the follow-ups and were allowed to comment on the accuracy and correctness of the information and statistics presented. Confirmation of the accuracy of the figures used and information presented in the audit report was also considered.

1.8 Standards Used for the Follow-up

The follow-up audit work was conducted following the International Standards of Supreme Audit Institutions on performance auditing. ISSAI 300 provides for principles of performance audit, and specifically, ISSAI 3000/5.5 provides guidelines on how to conduct follow-up audit.

The standards require the follow-up audits to be planned and performed to enable the auditors to obtain sufficient and appropriate evidence to serve as the basis for reporting the outcomes of the issued recommendations and providing feedback to Supreme Audit Institutions.

It also requires that the results of the follow-up audits are appropriately reported to provide feedback to the Parliament on the level of implementation and corrective actions to be taken where relevant.

1.9   Structure of the Report

This report comprises of nineteen (19) chapters, as shown below;

CHAPTER 2 Provides Status on Implementation of Issued Recommendation on the Performance Audit on Electronics Waste Management	**CHAPTER 3** Provides Status on Implementation of Issued Recommendation on the Performance Audit on the Management of Pasticides in Agriculture	**CHAPTER 4** Provides Status on Implementation of Issued Recommendation on the Performance AudiManagement of Plots allocation
CHAPTER 5 Provides Status on Implementation of Issued Recommendation on the Performance Audit on Management of Marine Protected Areas	**CHAPTER 6** Provides Status on Implementation of Issued Recommendation on the Performance Audit on the Preparedness for Implementation of Sustainable Development Goals	**CHAPTER 7** Provides Status on Implementation of Issued Recommendation on the Performance Audit on Provision of Sewage Services in Urban Areas
CHAPTER 8 Provides Status on Implementation of Issued Recommendation on the Performance Audit on Provision of Support Service for Small and Medium Enterprises	**CHAPTER 9** Provides Status on Implementation of Issued Recommendation on the Performance Audit on Management of Construction Activities on irrigation projects	**CHAPTER 10** Provides Status on Implementation of Issued Recommendation on the Performance Audit on Management of Water Supply Projects from Borehole Sources in Tanzania
CHAPTER 11 Provides Status on Implementation of Issued Recommendation on the Performance Audit on Availability and Accessibility of Good Quality Agricultural Imputs (Seeds and Fertilizers) to Farmers	**CHAPTER 12** Provides Status on Implementation of Issued Recommendation on the Performance Audit on Maintenance of Power Generation Plants	**CHAPTER 13** Provides Status on Implementation of Issued Recommendation on the Performance Audit on Management of Pupils with Special Needs
CHAPTER 14 Provides Status on Implementation of Issued Recommendation on the Performance Audit on Provision of Referral and Emergency Healthcare Services in Higherl Level Referral Hospitals	**CHAPTER 15** Provides Status on Implementation of Issued Recommendation on the Performance Audit on Monitoring of Building Works	**CHAOTER 16** Provides Status on Implementation of Issued Recommendation on the Performance Audit on Provision of National Health Insurance Services
CHAOTER 17 Provides Status on Implementation of Issued Recommendation on the Performance Audit on Management of Water Projects in Rural Areas	**CHAPTER 18** Governance Structure for Implementation of Performance Audit Recommendations	**CHAPTER 19** Conclusion and Recommendations

Controller and Auditor General

CHAPTER TWO

FOLLOW-UP ON THE IMPLEMENTATION OF RECOMMENDATIONS ON THE ELECTRONIC WASTE MANAGEMENT

2.1   Background to the Audit

Performance Audit Report on Electronic Waste Management was tabled before the Parliament of the United Republic of Tanzania in March 2018. The overall objective of the audit was to assess whether the Vice President's Office - Division of Environment (VPO-DoE) and President's Office - Regional Secretariat and Local Government (PO-RALG) effectively manage E-waste in the country.

2.2   Audit Scope

The main audited entities were the Vice President's Office - Union and Environment and the President's Office - Regional Administration and Local Government (PO-RALG). The VPO was included in the audit because it is the institution which is responsible for the management of environment and the producer of all legal framework guiding E-waste management in the country. The PO-RALG was included in the audit because it is the institution which is responsible for overseeing operations of LGAs as well as the main implementer of legislation developed by VPO regarding E-waste management for ensuring safe human health and environment.

The main activities covered in this audit were the capacity of VPO and PO-RALG to manage E-waste, strategies, plans and targets set for E-waste management, coordination of activities with regards to E-waste management as well as monitoring and evaluation of E-waste management activities by the VPO and the PO-RALG.

The audit covered the period of four fiscal years, from 2013/14 to 2016/2017.The period was chosen to portray the trend on the implementation of E-waste management conducted by the VPO and the PO-RALG. Data were collected from E-waste management stakeholders including, National Environmental Management Council (NEMC) and Tanzania Communication Regulatory Agency (TCRA). Also, four City Councils and three Municipal Councils were visited for data collection. These were;

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Tanga, Arusha, Mbeya and Mwanza cities as well as Kinondoni, Ilala and Temeke Municipal Councils.

2.3   Main Audit Findings

(a) Inadequate Legal and Institutional Frameworks for Supporting E-waste Management

During the audit, it was found that mechanisms to support sustainable growth of E-waste management was still lacking and the existed legal and institutional framework did not fully support effective management of E-waste. The management of E-waste at the time of this report was considered as a sub-set under the hazardous waste control and management regulations.

(b) Non-allocation of Funds for E-waste Activities

Interviews held with officials from NEMC and seven visited LGAs indicated that, funds for E-waste activities were not included in the annual budgets. Through the review of 2013/2014-2016/2017 annual budgets from NEMC and the seven visited LGAs revealed that, for the period under the audit, NEMC and six LGAs did not allocate funds for E-waste related activities. Only Mbeya City Council was allocated with TZS 2.7 million out of 227.8 million in the financial year 2016/17.

(c) Lack of Competent Human Resource to Manage E-waste Management

It was revealed that NEMC as a government agency responsible for management of E-waste in the country had insufficient number of competent staff to deal with E-waste. Moreover, it was noted from the reviewed training reports of seven visited LGAs that, in total all LGAs had 78 environmental officers who were trained on management of municipal waste, but training did not cover E-waste related issues.

(d) Inadequate Equipment and Personal Protective Gears for Waste Handlers

The Audit Team found that, waste handlers in the visited LGAs were not adequately protected as they were found ready for work without having

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protective gears. For instance, waste handlers in Mbeya City Council were found to have at least three pairs of (safety boots, overall, safety helmets and gloves) for waste handling while in the other three city councils (Arusha, Tanga and Mwanza) the waste handlers had no protective gears.

(e) Procedure for Equipment and Facilities for Handling E-waste not Followed

The site visit made to three private waste collection contractors and three Community Based Organizations in four LGAs (Mbeya, Arusha and Mwanza City Council as well as Ilala Municipal Council) witnessed that, municipal waste collectors (mixed with E-waste) were not following the guidelines for hazardous waste of 2013.

Furthermore, it was noted during site visits in Mbeya City Council that, the government ministries, departments, agencies and institutions did not follow the procedures for handling E-waste. Findings revealed that Mbeya City Council piled up all electronic equipment found to be out of use (photocopiers, computers, printers, telephones) together in the store room. The Audit Team also observed the waste transportation trucks to be either partially covered or totally not covered while on the way to dumpsites or landfills.

(f) Lack of Designated Facilities for Disposal of E-waste

The audit team visited four dumpsites in Mbeya, Mwanza, Tanga City Councils and Ilala (Pugu Kinyamwezi dumpsite) and one sanitary land fill in Arusha City Council. In all these Cities, it was found that there was no designated E-waste facility, and the practice in these LGAs was that E-waste was mixed with other waste. The team observed E-waste being dumped in the councils' dumpsites and sanitary land fill together with other waste collected in the respective councils.

(g) Unrealistic Strategies for Minimizing or Managing E-waste

Review of the proposed E-waste Management Policy of 2012 revealed that, VPO and NEMC's strategies on E-waste minimization and management were unrealistic and ambitious. For example, VPO developed an ambitious strategy of establishing 2 to 4 collection and take back centres for E-waste

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by 2013. It was found that these centers were not yet established up to the time of this audit. The review of VPO and NEMC annual budgets and plans of (2013/14 to 2016/17) revealed that, the establishment of collection centres and take back system was not reflected in the budgets.

In addition, the LGAs had not included E-waste reduction activities in their plans/targets. The reviewed annual plans of the seven visited councils from the financial year 2013/2014 to 2016/2017, indicated that none of the councils had targets and plans for sanitation and hygiene (environmental cleanness), but the component related to E-waste minimization or management was left unattended.

(h) Lack of E-waste Management Plans

Review of NEMC and seven LGAs' annual action plans and inspection checklists for the three financial years from 2013/14 to 2016/2017 showed that, issues of E-waste management were excluded. Therefore, NEMC and LGAs implemented plans which did not address all key environmental problems existing in the society. This could be one of the reasons for E-waste handlers to continue operating their activities illegally without the fear of not being caught by the government authorities.

(i) Lack of Formal System for Recording of E-waste Generated, Collected and Disposed

Review of environmental management files of seven visited LGAs showed that, all seven LGAs had no records of E-waste generated for the whole period under the audit in their respective areas. The only records available were for the municipal solid waste which was recorded at the dumpsite.

(j) Inadequate Awareness Creation and Capacity Building to the Public and E-waste Dealers

Review of NEMC Headquarters and VPO action plans showed that, VPO awareness campaign conducted focused on environmental conservation and solid waste management but E-waste problems were not covered. Also, during interviews with NEMC and VPO Officials, it was revealed that, the avenue used to deliver the awareness messages was through major events

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and national ceremonies such as world environmental day, and peasants' day.

(k) Inadequate Awareness Creation and Capacity Building to E-waste Dealers by LGAs

Through the interview held with Environmental Officers in each of the seven visited LGAs revealed that, no capacity building was conducted to the dealers of e- waste, municipal waste contractors, scrap metals dealers and electronic equipment craftsmen during the audit period. The audit team further reviewed the training programmes and budgets of seven visited LGAs and noted that, none of them planned and budgeted for such capacity building programmes.

(l) Limited E-waste Information Sharing

The Audit Team found that, sharing of E-waste information among various stakeholders was limited. This was evidenced by the report developed by VPO in 2014 on state of environment, which among other things; the report highlighted the state of E-waste in the country. Although the report was widely published in the VPO's website, other institutions such as Regional Secretariats, City and Municipal Councils were not well informed about this report. However, during interviews with VPO officials, it was confirmed that, up to the time of this audit the report was not shared to other stakeholders.

(m) Absence of Environmental Function in Regional Secretariat's Organization Structure

Regional Secretariats (RSs) in the visited Regions did not have function for coordinating environmental issues. Interviews with Directors for Economic and Productive Sectors Section from four visited Regional Secretariats (Mbeya, Mwanza, Tanga and Arusha) revealed that, environmental issues were handled within the above mentioned section and thus there was a need to have an environmental officer(s) within the section. However, in all four Regional Secretariats visited, there was no Regional Environmental Officer(s).

(n) Duplication of Responsibilities among Stakeholders with Interest in E-waste Related Issues

The audit team found out that E-waste related issues such as, public awareness on environment workplace staff safety, firefighting equipment inspection and waste inspection were implemented by more than one institution. The PO-RALG (through Regional Secretariats), VPO/NEMC, LGAs, OSHA, as well as MoH were all observed to address the issue of waste inspection.

(o) Limited Inspections on E-waste Related Activities By NEMC

The audit noted that, there were limited planed inspections conducted by NEMC Headquarters focusing on E-waste. A review of Inspection Report from NEMC headquarters showed that inspections of E-waste related activities were done to E-waste dealers who wanted to renew their licenses and those seeking licenses for E-waste collection, transporting and recycling.

(p) Weak Reporting System on E-waste Related Activities by Actors

NEMC did not compile and submit the reports to VPO as required. The analysis of issues reported in seven progress reports prepared by three visited NEMC Zonal Offices showed that, the focus was on environmental compliance and enforcements activities. E-waste related issues were not addressed along the environmental compliance and enforcement activities.

According to the reviewed LGAs' progress reports from 2013/2014 to 2016/2017; all seven LGAs were preparing general environmental cleanness reports. The reports were submitted to RS on quarterly basis. Although E-waste was regarded as part of municipal hazardous waste, yet the prepared and submitted reports contained no E-waste management or minimization related item.

(q) Inadequate Evaluation of E-waste Management Performances

It was expected that, NEMC under VPO to conduct survey on state of environment and publish the report in every two years. This means that, through surveillance of environment, VPO and NEMC could conduct E-waste management evaluation to estimate amount of e- waste generated,

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collected, transported, dismantled, recycled and disposed of and determine appropriate intervention where need be. However, the audit found that, the surveys on the state of environment were not conducted and published periodically as required.

2.4   Overall Audit Conclusion

The Government's failure to manage E-waste was attributed to none existence of legal and institutional framework as well as regulations specifically to support E-waste management. Similarly, there were no specific strategies for minimization of E-waste. Consequently, NEMC and LGAs' capacity in dealing with E-waste is not efficient and effective. There was limited E-waste information sharing among various stakeholders due to the reason that NEMC had not established a formal system for that. Moreover, there was no effective system for monitoring E-waste activities.

2.5   Results of the Follow-up on the Implementation of Recommendations

This part presents implementation status of issued recommendations to the Vice President's Office and PO-RALG on the performance audit on E-waste management in the country. Implementation status has been grouped in three categories, namely; *fully, partially or not implemented* recommendations. The details of the implementation status are explained in the following subsections.

2.5.1 Overall Implementation of the Issued Recommendations

A total of nineteen (19) recommendations were issued in this audit, twelve (12) recommendations were directed to the VPO and seven recommendations were issued to the PO-RALG. The overall follow-up results on the implementation of the issued audit recommendations indicated that out of nineteen (19) recommendations, one (1) recommendation was fully implemented, twelve (12) recommendations were partially implemented, six (6) recommendations were not implemented, and none of the issued recommendations was overtaken by event. **Table 2.1** provides the level of implementation for all issued audit recommendations per the audited entity**.**

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Table 2.1: Level of Implementation per the Audited Entity

Name of the Entity	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
VPO	12	1	8	3	0
PO-RALG	7	0	4	3	0
Total	**19**	**1**	**12**	**6**	**0**

Source: Auditors' Analysis of Responses from VPO and PO-RALG (2022)

On the other hand, it was noted that out of nineteen (19) recommendations that were issued and their distribution in the categories was as follows: eleven (11) recommendations were in the implementation category; five (5) recommendations were in the development category; one (1) recommendation in the category of planning; one (1) recommendation was for the category of monitoring and evaluation; and the category of coordination had one (1) recommendation. **Table 2.2** provides the level of implementation for all issued audit recommendations per categories of recommendations.

Table 2.2: Level of Implementation per Category of Recommendations

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	1	0	0	1	0
Implementation/ Execution	11	0	8	3	0
Monitoring and Evaluation	1	0	1	0	0
Coordination	1	0	1	0	0
Development	5	1	2	2	0
Total	**19**	**1**	**12**	**6**	**0**

Source: Auditors' Analysis of Responses from VPO and PO-RALG (2022)

Table 2.2 indicates that one (1) recommendation in the planning category was not implemented, eight (8) out of eleven (11) recommendations in the implementation category were partially implemented and three (3) recommendations were not implemented. Also, it is indicated that one (1) recommendation in the monitoring and evaluation category was partially

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implemented, one (1) recommendation in the coordination category was partially implemented, and for recommendations in the development category, one (1) recommendation was fully implemented, two (2) recommendations were partially implemented, and two (2) recommendations were not implemented.

2.5.2   Results of Follow-Up of Recommendations Issued to the VPO

The results on the implementation of the issued audit recommendations to the VPO indicated that out of twelve (12) recommendations, one (1) recommendation was fully implemented eight (8) recommendations were partially implemented, three (3) recommendations were not implemented, and none of the recommendations were overtaken by event. **Table 2.3.** indicates the overall implementation status per category of recommendations issued to the VPO.

Table 2.3: Level of Implementation per Category of Recommendations Issued to the VPO

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	1	0	0	1	0
Implementation/Execution	8	0	7	1	0
Monitoring and Evaluation	0	0	0	0	0
Coordination	0	0	0	0	0
Development	3	1	1	1	0
Total	**12**	**1**	**8**	**3**	**0**

Source: Auditors' Analysis of Responses from VPO (2022)

Table 2.3 indicates that one (1) recommendation in the planning category was not implemented, out of eight (8) recommendations in the implementation category, seven (7) recommendations were partially implemented and one (1) recommendation was not implemented. Also, out of three (3) recommendations in the development category, one (1) recommendation was fully implemented, one (1) recommendation was partially implemented, and one (1) recommendation was not implemented. In addition, neither of the issued recommendations were in categories of

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monitoring nor coordination. The following subsection provides details of recommendations issued to the VPO

Details of Recommendation that was Fully Implemented

Recommendation 10: VPO should ensure that, NEMC consider developing tools for measuring their performance regarding E-waste minimization and management

This recommendation required VPO to ensure that NEMC developed tools for measuring their performance regarding E-waste minimization and management. In the action plan developed to implement this recommendation, VPO planned to request NEMC to develop the M&E tools for measuring their performance regarding E-waste minimization and management by 2019/20. Through review of the implementation status, it was noted that VPO had enforced the NEMC to develop the tracking forms that were used on submission of bi-annual reports to VPO. Moreover, the audit team was informed that NEMC currently was undertaking inspections to all permit holders to verify compliance with the conditions issued along with the permit. Therefore, this recommendation was fully implemented.

Details of Recommendations that were Partially Implemented

The audit team noted that eight (8) recommendations were partially implemented. These recommendations were:

Recommendation 1: VPO should ensure that, E-waste guiding tools (policy, Bill, Regulation and Guideline) are approved, made available to all interested stakeholders and be implemented

This recommendation required VPO to ensure that E-waste guiding tools i.e., policy, bill, regulation and guideline were approved, and made available to all interested stakeholders and be implemented. In the action plan developed to implement this recommendation, VPO planned to finalize the existing draft regulation and guidelines. Similarly, it was noted that the policy, National Environmental Action Plan (NEAP) and State of Environment Report (SoER) were in review for more inclusion of e-waste management issues by the end of the financial year 2018/19.

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Through reviewing of the implementation status, it was noted that VPO had developed the National Environmental Policy of 2021 (replacing the old National Environmental Policy of 1997), Regulation of 2021, and the guidelines to include the issue of E-waste management. However, it was further noted that, despite the approved policy and regulation, the guideline was not yet approved. Therefore, this recommendation was partially implemented.

Recommendation 2: VPO should ensure that the proposed United Nations Environment Programme (UNEP) budget framework   is adopted so as to enable appropriate funds allocation for E-waste management stream

This recommendation required VPO to ensure that the proposed UNEP budget framework was adopted so as to enable appropriate funds allocation for E-waste management stream. In the action plan developed to implement this recommendation, VPO planned to conduct bilateral discussions with UNEP to find a way of accessing funds for the e-waste project by the end of the financial year 2018/19.

Through reviewing of the implementation status, it was noted that VPO accessed fund from GIZ while implementing a pilot project on the management and control of the importation of Used Electric and Electronic Equipment (UEEE) by using Technical Guideline of the Basel Convection on Control of Trans boundary Movement of Used Electric and Electronic Equipment (Reduce Project). It was further noted that the project was being implemented in partnership with World Resource Forum, The United Nations Institute for Training and Research (UNITAR) and United Republic of Tanzania through the Vice President's Office. However, the audit team noted that there was no evidence to substantiate whether the proposed UNEP budget framework for appropriate funds allocation for E-waste management stream was in place. Therefore, this recommendation was partially implemented.

Recommendation 3: VPO should ensure that, NEMC appoint specific staff to deal with E-waste are identified and prioritize training staff on E-waste management issues

This recommendation required VPO to ensure that NEMC appointed specific staff to deal with E-waste. This was supposed to go along with the initiatives to identify and prioritize staff training on E-waste management issues. In the action plan developed to implement this recommendation, VPO planned to request NEMC to appoint specific staff to deal with E-waste issues by the end of the financial year 2019/20.

Through reviewing of the implementation status, it was noted that NEMC appointed an Officer to deal with e-waste management issues, though, there was no evidence to indicate that staff were trained on E-waste management issues. Therefore, this recommendation was partially implemented.

Recommendation 4: VPO should ensure that, NEMC map out the informal E-waste dealers (Refurbishes, Recyclers, and Sellers) and have a data base for easy management of their operations to be able to track the generation, collection and disposal of E-waste materials

This recommendation required VPO to ensure that NEMC mapped out the informal E-waste dealers i.e., refurbishes, recyclers, and sellers, and have the database for easy management of their operations to be able to track the generation, collection, and disposal of E-waste materials. In the action plan developed to implement this recommendation, the VPO planned to cooperate with NEMC to map out the informal E-waste dealers and establish the database by the end of the financial year 2018/19.

Through reviewing of the implementation status, it was noted that the VPO through NEMC had established the database of e-waste dealers with permits issued as per the requirement of Environment Management (Control and Management of Electrical and Electronic Equipment Waste) Regulations, 2021. However, there was no evidence availed to support the stated status of implementation for this recommendation. Therefore, this recommendation was partially implemented.

Recommendation 7: VPO should advice NEMC to lower the cost of registration to   welcome more entrepreneurs   who are willing to engage in E-waste business

This recommendation required VPO to advice NEMC to lower the cost of registration in order to attract more entrepreneurs who were willing to engage in E-waste business. In the action plan developed to implement this recommendation, the VPO planned to review the cost of registration to enable dealers operate their business smoothly whilst the government got the income it deserved from the business by the end of the financial year 2018/19.

Through reviewing of the implementation status, it was noted that the VPO reviewed the regulations for fees, charges, and the permit fees for entrepreneurs engaged in e-waste business and ensured that it had been reduced, though, there was no evidence to substantiate whether the stated extent of implementation was achieved. Therefore, this recommendation was partially implemented.

Recommendation 8: VPO should ensure that, NEMC assesses the impact of E-waste to both human health and environment and share the information with other stakeholders

This recommendation required VPO to ensure that NEMC assessed the impact of E-waste to both human health and environment and shared the information with other stakeholders. In the action plan developed to implement this recommendation, VPO planned to request NEMC to make e-waste a priority issue during the Environmental Impact Assessment (EIA) process by the end of the financial year 2019/20.

Through reviewing of the implementation status, it was noted that the VPO would ensure the implementation of this recommendation through enforcement of the Regulation 26 (1)(a) of the Environmental Management (Control and Electronic Equipment Waste) Regulations, 2021 that requires any person who apply for a permit to store e-waste undertake EIA Certificate or Certificate of Environmental Audit to NEMC. However, there was no evidence to establish whether this recommendation was fully implemented. Therefore, this recommendation was partially implemented.

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Recommendation 9: VPO should ensure that, NEMC establishes and operates a Central Environmental Information System for sharing Information among stakeholders

This recommendation required VPO to ensure NEMC established and operated a Central Environmental Information System for sharing information among stakeholders. In the action plan developed to implement this recommendation, the VPO planned to develop the project through World Bank. Also, VPO planned to ensure that establishment of the Central Environmental Information System for sharing information among stakeholders would be among the activities to be accomplished by the end of the financial year 2019/20.

Through reviewing of the implementation status, it was stated that as of 30th June, 2022 the VPO established the Central Environmental Information System; however, there was no evidence to indicate that this system was in place. Therefore, this recommendation was partially implemented.

Recommendation 12: VPO should ensure reporting system is strengthened and be followed accordingly

This recommendation required VPO to ensure available reporting system was strengthened and adhered to. In the action plan developed to implement this recommendation, the VPO planned to strengthen the reporting system and information sharing of environment management. Also, it was further stated that environmental management reporting system is prescribed in the Environmental Management Act (EMA) of 2004 with environmental officers and committees from village to ministerial levels.

Through reviewing of the implementation status, it was noted that the VPO is currently developing the guideline for environmental information sharing from all stakeholders. Though, the audit team noted that the developed guideline was not approved or implemented. Therefore, this recommendation was partially implemented.

Details of Recommendations that were Not Implemented

Recommendation 5: VPO should ensure disposal centres and take back system are established in the country

This recommendation required VPO to ensure that disposal centres and take back system were established in the country. In the action plan developed to implement this recommendation, the VPO planned to remind Local Government Authorities (LGAs) to establish collection centres and to ensure dealers of e-waste establish collection centres along with adherence to the regulations and guidelines by the end of the financial year 2019/20.

Through reviewing of the implementation status, it was noted that as of 30th June, 2022 the VPO established the Environmental Management (Control and Management of Electric and Electronic Equipment Waste) Regulations, in 2021. It was further stated that this regulation empowered LGAs and gave them the mandate to ensure effective management of e-waste as stipulated under Regulation 12 of the Environmental Management (Control and Management of Electric and Electronic Equipment Waste) Regulations, 2021.

Similarly, it was indicated that VPO developed the draft guideline on Extended Producer Responsibility which highlights matters on how take back centers for E-waste would be established and operated. However, it was noted that the developed draft guideline was planned to be finalized in the financial year 2022/23. Therefore, this recommendation was not implemented because there was no evidence to indicate the available strategies to ensure establishment of the disposal centers and take back system.

Recommendation 6: VPO should ensure that East African Communication Organization (EACO)-regional E-waste Management strategy is adopted and develop targets and plans for achieving the zero-negative impact of E-waste

This recommendation required VPO to ensure that EACO-regional E-waste Management Strategy was adopted and developed targets and plans for achieving the zero-negative impact of E-waste. In the action plan developed to implement this recommendation, the VPO planned to mainstream the

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EACO-regional E-waste Management Strategy in the national plans and strategies by the end of the financial year 2019/20.

Through reviewing of the implementation status, it was noted that VPO nominated one of its Principal Officer to present the National E-waste Management Steering Committee and a Member of the East African Communications Organization (EACO) so as to ensure the Regional E- Waste Management Strategy was mainstreamed in the National Plans. Therefore, this recommendation was not implemented because there was no evidence to substantiate mainstreaming of the strategies in the national plans.

Recommendation 11: VPO should ensure that, NEMC update the inspection manual and consider including E-waste related issues in the manual
This recommendation required VPO to ensure that NEMC updated the inspection manual and consider including the E-waste related issues in the manual. In the action plan developed to implement this recommendation, VPO planned to request NEMC to update the inspection manual and consider including E-waste related issues in the manual by the end of the financial year 2018/19.

Through reviewing of the implementation status, it was noted that VPO would update the manual in the current financial year of 2022/23 and would be finalized by April, 2023. Therefore, this recommendation was not implemented because as of the end of the financial year 2018/19 the manual was not updated as per the planned timeline.

2.5.3 Results of Follow-up of Recommendations Issued to the PO-RALG

The following subsection provides details of recommendations issued to the PO-RALG.

The results on the implementation of the issued audit recommendations to PO-RALG indicated that out of seven (7) recommendations, none of the recommendations were fully implemented, four (4) recommendations were partially implemented, three (3) recommendations were not implemented, and none of the recommendations were overtaken by event. **Table 2.4** provides the overall implementation status per category of recommendations issued to the PO-RALG.

Table 2.4: Level of Implementation per Category of Recommendations Issued to the PO-RALG

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	0	0	0	0	0
Implementation/Execution	3	0	1	2	0
Monitoring and Evaluation	1	0	1	0	0
Coordination	1	0	1	0	0
Development	2	0	1	1	0
Total	**7**	**0**	**4**	**3**	**0**

Source: Auditors' Analysis of Responses from PO-RALG (2022)

Table 2.4 indicates that out of the three (3) recommendations which were in the implementation category, one (1) recommendation was partially implemented and two (2) recommendations were not implemented. Also, out of two (2) recommendations in the development category, one (1) recommendation was partially implemented and one (1) recommendation was not implemented. Similarly, for the monitoring and evaluation, and the coordination categories, each had one (1) recommendation which was partially implemented.

2.5.5 Details of Implementation of Recommendations Issued to the PO-RALG

Details of Recommendations that were Partially Implemented

Recommendation 2: PO-RALG should ensure that LGAs appoint specific staff to deal with e-waste as well as ensuring that e-waste management issues for staff training are identified and prioritized

This recommendation required PO-RALG to ensure that LGAs appointed specific staff to deal with E-waste and ensure that e-waste management issues for staff training are identified and prioritized. In the action plan

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developed to implement this recommendation, PO-RALG planned to establish and approve the E-waste Regulations through the VPO.

Through reviewing of the implementation status, it was noted that PO-RALG indicated that there were environmental officers in LGAs under the Department of Environment Management (DEM) who deal with all kind of waste (solid, liquid, hard waste) though not specifically on E-waste alone. It was further noted that there was no coordination and monitoring between PO-RALG and LGAs regarding the management of E-Waste.

However, the audit team found out that there were no personnel specifically appointed to deal with the management of E-waste issues. Also, there was no evidence to indicate that there was training provided to the appointed staff. Therefore, this recommendation was partially implemented.

Recommendation 3: PO-RALG should ensure that, LGAs map out the informal E-waste dealers (Refurbishes, Recyclers, and Sellers) and have a database for easy management of their operations in order to be able to track the generation, collection, and disposal of E-waste materials

This recommendation required PO-RALG to ensure LGAs mapped out the informal E-waste dealers i.e., refurbishes, recyclers, and sellers and have the database for easy management of their operations in order to be able to track the generation, collection, and disposal of E-waste materials. In the action plan developed to implement this recommendation, PO-RALG planned to map informal waste dealers in some of the municipalities in the Dar es Salaam region in collaboration with NEMC. The mapping activities would continue to other Local Government Authorities.

Through reviewing of the implementation status, PO-RALG stated that, mapping out of the informal dealers would not be done for the entire country but in some regions with high rate of e-waste collection. It was further stated that, the database for dealers was currently hosted by NEMC and PO-RALG has no access to, and when dealers' information of certain areas is required, it has to be done through submitting the request to NEMC.

Therefore, this recommendation was partially implemented because mapping out of informal dealers was done to all regions rather to the regions with high rate of e-waste collections. In addition, it was noted that the established database for e-waste dealers was limited and owned by NEMC.

Recommendation 4: PO-RALG should establish environmental function and appoint environmental officers at the level of Regional Secretariat

This recommendation required PO-RALG to establish environmental function and appoint environmental officers at the level of regional secretariat. In the action plan developed to implement this recommendation, PO-RALG planned to review the existing "Functions and Organization Structure for PO-RALG, Regional Secretariats and Local Government Authorities. The review was supposed to take into consideration the different changes including environmental issue in order to meet the current demand.

Through reviewing of the implementation status, it was noted that PO-RALG had been reviewing structure without consideration of the environment issues. It was further noted that environmental issues were managed through the Economic and Productive Sector Department which had neither the identified roles in its structure to reflect management of the environmental issues nor specific personnel to deal with environmental issues.

On the other hand, the available natural resources or forest officers would be required to be responsible to deal with environmental issues when arises. Therefore, this recommendation was partially implemented because there was no evidence to indicate that there were specific personnel appointed to deal with environmental issues.

Recommendation 7: PO-RALG should ensure that reporting system is strengthened and be followed accordingly

This recommendation required PO-RALG to ensure that reporting system was strengthened and adhered to. In the action plan developed to implement this recommendation, PO-RALG planned to address this recommendation based on the existing reporting system which required the

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system to start from Local Government Authority to Regional Secretariat then PO-RALG for further submission to other MDAs had been adhered.

Through reviewing the implementation status, it was noted that PO-RALG did not effectively strengthen the reporting system. Therefore, this recommendation was partially implemented because the existing reporting system did not take into account the manner in which the issue of management of e-waste could be reported.

Details of Recommendations that were Not Implemented

Recommendation 1: PO-RALG should ensure that the proposed UNEP budget framework is adopted to enable appropriate funds allocation for E-waste management stream

This recommendation required PO-RALG to ensure that the proposed UNEP budget framework is adopted to enable appropriate funds allocation for E-waste management stream. In the action plan developed to implement this recommendation, PO-RALG planned to manage and access UNEP budget framework. However, it was noted that, the guideline had not been updated because PO-RALG and LGAs made use of the budget guideline which were issued by the Ministry of Finance and Planning annually. Therefore, this recommendation was not implemented.

Recommendation 5: PO-RALG should ensure that, LGAs consider developing tools for measuring their performance regarding E-waste minimization and management

This recommendation required PO-RALG to ensure that LGAs considered developing tools for measuring their performance regarding E-waste minimization and management. In the action plan developed to implement this recommendation, PO-RALG planned to establish and approve the E-waste Regulations through the VPO.

Through reviewing of the implementation status, it was noted that PO-RALG approved the regulation but the regulation was not submitted by VPO to PO-RALG thereafter to LGAs in order to be included in their strategic plans or plans in the respective environmental sections and departments. Therefore, this recommendation was not implemented.

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Recommendation 6: PO-RALG should ensure that, LGAs update their environmental by-laws to address E-waste management and minimization activities

This recommendation required PO-RALG to ensure that LGAs updated their environmental by-laws to address E-waste management and minimization activities. In the action plan developed to implement this recommendation, PO-RALG planned to implement this recommendation pending the approval of the E-waste Regulations by VPO.

Through reviewing of the implementation status, it was noted that PO-RALG had in place the measures to ensure that LGAs updated their environmental by-laws. The response from VPO portrayed that there was no new by law formed to address the e waste management but there some by law drafted from LGAs waited for the approval. The PO-RALG used old by-laws nevertheless these bylaws did not consider E-waste itself but it was included like any other waste. Therefore, the recommendation has not yet been implemented.

2.6 Specific Conclusion

Based on the analysis of the implementation status of the previously issued recommendations, the audit team concluded that the VPO and PO-RALG did not make enough efforts in implementing the issued recommendations. This is due to the fact that only one out twelve (12) issued recommendations were fully implemented.

Therefore, the Managements of VPO & PO-RALG are urged to enhance efforts on areas such as planning, execution, coordination, monitoring and evaluation to ensure that all recommendations are implemented to the fullest, and the sector experiences growth and improvement in the management of E-waste.

2.7 Specific Recommendations

Recommendations to the Vice President's Office (VPO) and PO-RALG

The Vice President's Office and the President's Office - Regional Administration and Local Government are urged to:

i. establish mechanisms to enable effective implementation of the issued implementation from the performance audit reports; and

ii. strengthen the coordination mechanism with other Ministries, institutions, authorities and key stakeholders on the implementation of the issued recommendations.

CHAPTER THREE

FOLLOW-UP ON THE IMPLEMENTATION OF RECOMMENDATIONS ON THE MANAGEMENT OF PESTICIDES IN AGRICULTURAL ACTIVITIES IN TANZANIA

3.1   Background to the Audit

Performance Audit Report on the Management of Pesticides in Agriculture was tabled to the Parliament in April, 2018. The objective of the audit was to determine whether the Ministry of Agriculture through the Crop Development Division and the Tropical Pesticides Research Institute (TPRI) efficiently managed the quality of pesticides to safeguard against human health risks and environmental degradation in order to ensure sustainability of land productivity.

3.2   Audit Scope

The main audited entity was the Ministry of Agriculture. This is due to the reason that within the Ministry of Agriculture there are Crop Development Division and the Tropical Pesticides Research Institute charged with the duty of managing the quality and use of locally manufactured and imported pesticides in the country and reporting to the Ministry.

The audit focused mainly on the availability of registered pesticides in the market; adequacy of coordination and monitoring activities for registration of pesticides, training and inspection activities; proper implementation of pesticides registration; training to farmers, Pesticides sellers and agricultural extension officers; and adequacy of inspection of Pesticides sellers to verify whether there was a proper pesticides' distribution and use in the country.

The audit covered a period starting from July 2015 to December, 2017. For the purpose of obtaining strong evidence, other key players such as President's Office - Regional Administration and Local Government (PO–RALG), selected Local Government Authorities, Ports of Entry, Pesticides sellers and Farmers' Associations were covered. Regions and Local Government Authorities (LGAs) visited were Arusha, Simiyu, Tabora, Morogoro, Mtwara and Njombe.

3.3 Main Audit Findings

(a) Presence of Un-registered and Certified Pesticides in the Market

The audit noted that unregistered pesticides were found in all Districts and Regions of Tanzania. This was reported to be very common in Regions and Districts that were bordering other countries for example, in Mtwara, Mbeya, Kigoma, Tanga, Kagera and Arusha Regions. There were pesticides namely; Abamite, Doom, Boss, Lava, Lethal, and Romectin that were sold in the market without being registered by TPRI. It was further reported that, these pesticides were not fit for Tanzania market, as they were not tested by TPRI to examine their efficacy as far as Tanzania agricultural environment was concerned.

(b) Illegal Importation of Pesticides

There were pesticides that were illegally imported in the country without following procedures such as obtaining and paying for importation permits as well as being registered by TPRI. This happened because of the weaknesses in the inspections conducted at the Ports of Entry.

(c) Inadequate Implementation of Mechanism to Ensure that Only Registered Pesticides are Sold in the Market

Established mechanisms to ensure that only registered pesticides are sold and used in the market were not adequately implemented. This was because list of registered pesticides was not frequently updated and shared to all key users; and inadequate inspections conducted on pesticides sellers and Ports of Entry.

The list of registered pesticides was not periodically updated, because Pesticides Approval and Registration Technical Committee (PARTS) and National Plant Protection Advisory Committee (NPPAC) meetings were not frequently conducted since funds were not adequate and timely released. These delays in registering pesticides prompted distributors and pesticides sellers to illegally sell their pesticides without being registered.

(d) Insufficient Inspection Conducted to Pesticides Sellers and Ports of Entry

There was no documented inspection policy and procedures in place to elaborate what, how and when to inspect as well as processes of taking actions against defaulters. Similarly, there were no risk data base showing location, types of pesticides sold and stock of pesticides in the shops. As a result, conducted inspection activities did not take into consideration risky items such as remoteness of some regions, pesticides formulation and quantity.

(e) Inadequate Coordination of Pesticides Training, Registration and Inspection Activities

There were no coordination framework and plans to facilitate coordination of activities regarding registration of pesticides; training to farmers, pesticides sellers and agricultural extension officers; and inspections conducted to pesticides sellers.

(f) Inadequate Monitoring of Pesticides Training, Registration and Inspection Activities

Inadequate monitoring was conducted on the pesticide's registration, training and inspection activities. Furthermore, there were no implementation reports sent to the Ministry of Agriculture either from TPRI or PO-RALG regarding status of implemented activities in pesticide training, inspection and registration.

3.4   Overall Audit Conclusion

The Ministry of Agriculture through Crop Development Division and Tropical Pesticides Research Institute is not adequately managing the quality of imported and locally produced pesticides. The Ministry did not control distribution and usage of pesticides which causes health and environmental effects as well affecting the quality and quantity of produced agricultural crops.

3.5 Results of the Follow-up on the Implementation of Recommendations

This part presents the implementation status of the issued recommendations to the Ministry of Agriculture (MoA) and the Tanzania Plant Health and Pesticides Authority (TPHPA) formally known as the Tropical Pesticides Research Institute (TPRI). Implementation status has been grouped in three (3) categories namely; *fully, partially or not implemented* recommendations. The details of the implementation status of the issued audit recommendations are explained in the following subsections.

3.5.1 Overall Implementation of the Issued Recommendations

A total of thirteen (13) recommendations were issued in this audit. Seven (7) recommendations were directed to the Ministry of Agriculture (MoA), and six (6) recommendations were directed to TPHPA. The overall follow-up results on the implementation of the issued recommendations indicated that out of thirteen (13) recommendations, two (2) recommendations were fully implemented, five (5) recommendations were partially implemented, and six (6) recommendations were not implemented. **Table 3.1** indicates the level of implementation for all issued recommendations per the audited entity.

Table 3.1: Level of Implementation per the Audited Entity

Name of the Entity	Total Number of Issued Recommendations	Level of Implementation of Recommendations		
		Fully implemented	Partially Implemented	Not implemented
MoA	7	0	2	5
TPHPA	6	2	3	1
Total	**13**	**2**	**5**	**6**

Source: Auditors' Analysis of Responses from MoA and TPHPA (2022)

On the other hand, it was noted that out of the thirteen (13) recommendations, two (2) recommendations were in the planning category, five (5) recommendations were in the implementation category, three (3) recommendations in were in the monitoring category, one (1) recommendation in the coordination category, and two (2) recommendations in the development category. **Table 3.2** provides the

level of implementation for all issued audit recommendations per categories of recommendations.

Table 3.2: Level of Implementation per Category of Recommendations

Category of Recommendation	Total Number of issued Recommendations per Category	Level of implementation of Recommendations		
		Fully implemented	Partially Implemented	Not implemented
Planning	2	0	0	2
Implementation	5	2	2	1
Monitoring	3	0	1	2
Evaluation	0	0	0	0
Coordination	1	0	1	0
Development	2	0	1	1
Total	**13**	**2**	**5**	**6**

Source: Auditors' Analysis of Responses from MoA and TPHPA (2022)

Table 3.2 indicates that two (2) recommendations in the planning category were not implemented, out of five (5) recommendations in the implementation category, two (2) recommendations were fully implemented, two (2) recommendations were partially implemented, and one (1) recommendation was not implemented. Also, out of three (3) recommendations in the monitoring category, one (1) recommendation was partially implemented and two (2) recommendations were not implemented. Out of the two (2) recommendations in the development category, one (1) recommendation was partially implemented and one (1) recommendation was not implemented. On the other hand, one (1) recommendation in the coordination category was partially implemented.

3.5.2 Results of Follow-Up of Recommendations Issued to the Tanzania Plant Health and Pesticides Authority

The results on the implementation of the issued audit recommendations to TPHPA indicated that out of six (6) recommendations, two (2) recommendations were fully implemented, three (3) recommendations were partially implemented, and one (1) recommendation was not implemented. **Table 3.3** indicates the overall implementation status per category of recommendations for recommendations issued to TPHPA

Table 3.3: Level of Implementation per Category of Recommendations Issued to TPHPA

Category of Recommendation	Total Number of issued Recommendations	Level of implementation of Recommendation		
		Fully implemented	Partially Implemented	Not implemented
Planning	0	0	0	0
Implementation	3	2	1	0
Monitoring	1	0	1	0
Evaluation	0	0	0	0
Coordination	0	0	0	0
Development	2	0	1	1
Total	**6**	**2**	**3**	**1**

Source: Auditors' Analysis of Responses from TPHPA (2022)

Table 3.3 shows that out of three (3) recommendations in the implementation category, two (2) recommendations were fully implemented and one (1) recommendation was partially implemented. One (1) recommendation in the monitoring category was partially implemented. Also, for two (2) recommendations in the development category, one (1) recommendation was partially implemented and one (1) recommendation was not implemented.

Details of Recommendations that were Fully Implemented by TPHPA

Recommendation 1: Set up mechanism to facilitate periodical update and record of all registered pesticides and ensure that the updated list of registered pesticides and accompanied recorded information are accessible to all users

This recommendation required TPHPA to develop a mechanism that would facilitate periodic updates and records of all registered pesticides and ensure that the updated list of registered pesticides and accompanying recorded information were accessible to all users. In the action plan developed to implement this recommendation, TPHPA would conduct two annual meetings of Pesticides Approval and Registration Technical Sub-committee meeting (PARTS), Outbreak Pest Sub-committee (OPS), Plant Quarantine Phytosanitary Services, Biological Control Approval Sub-committee (BCAS) and National Plant Product Approval Committee (NPPAC) to facilitate two publications per year of a list of Registered Pesticides (Gazzetting).

Through reviewing of the implementation status, it was noted that as of 30th June, 2022, TPHPA conducted one annual meeting of PARTS, BCAS and one extraordinary meeting of NPPAC. Likewise, through the review of submitted minutes of the meetings, it was found out that TPHPA managed to conduct annual meetings of PARTS, BCAS and Extraordinary meetings of NPPAC that were used to update and recorded the registered pesticides.

Furthermore, it was indicated that TPHPA managed to develop database of Pesticides Stock Management System accessible to anyone through (http:/psms.tpri.go.tz/#/) and it provided the list of all registered pesticides accompanied with their information. Therefore, this recommendation was fully implemented because TPHPA managed to ensure pesticides are annually registered, updated, and the list of all registered pesticides is accessible to users.

Recommendation 4: TPRI should strengthen mechanism in place to ensure pesticides sellers are inspected before commencement of pesticides business

This recommendation required TPRI to strengthen mechanism in place to ensure pesticides sellers were inspected before commencing business of pesticides. In the action plan to implement this recommendation, TPHPA planned to inspect pesticide selling premises and train pesticide dealers before being licensed.

Through reviewing of the implementation status, it was noted that TPHPA conducted routine inspections and outreach inspections to pesticides dealers. Also, TPHPA conducted special task operation/inspections in four (4) regions, namely; Mtwara, Morogoro, Lindi and Ruvuma. The regions were those noted to report incidences of pesticides business malpractices.

Furthermore, a review of Quarterly Implementation Report of TPHPA, 2021/22, indicated that the inspection to pesticide sellers was done in the financial year 2021/22 and the status of inspection was marked as sufficient. Therefore, this recommendation was fully implemented because the inspection to pesticide dealers was strengthened and the number of inspections increased in the financial year 2021/22.

Details of Recommendations that were Partially Implemented by TPHPA

Recommendation 2: Update and improve the existing registration procedures and establish registration procedures of pesticides in the country and ensure that the registered pesticides are adequately regulated during the implementation

This recommendation required TPHPA to update and improve the existing registration procedures and establish registration procedures for pesticides in the country and ensure that registered pesticides were adequately regulated during the implementation. In the action plan developed to implement this recommendation, TPHPA planned to conduct two annual meetings of PARTS, OPS, PQPS, BCAS and NPPAC to facilitate two publications per year of a list of Registered Pesticides (Gazetting). The existed pesticide legislation has been changed to enact new legislation; Plant Health Act No.4 of 2020 whose Regulations are under draft. This aimed to improve the existing registration procedure of the pesticides.

Through the review of the implementation status, it was noted that as of 30th June, 2022, TPHPA established Plant Health Act No.4 of 2020 which started operating since March, 2021; while the draft Regulations are waiting for signature by the Minister for Agriculture.

In addition, through the review of the submitted evidence revealed that, TPHPA through the parent Ministry enacted new legislation; Plant Health Act No.4 of 2020 and its Regulations to improve the existing registration procedures for pesticides. However, it was noted that as of June, 2022 the Regulation corresponding to this Act was not operational as it was still in a draft stage. Therefore, this recommendation was partially implemented, given the fact that, the updated pesticide registration procedures have not been put into operation, since the approval of the Plant Health Regulations that would stipulate these registration procedures was still in progress.

Recommendation 3: TPRI should ensure that health and environment risks associated with pesticides used in the country are periodically identified, evaluated and reported to the Ministry of Agriculture

This recommendation required the Tropical Pesticides Research Institute (TPRI) to ensure that health and environment risks associated with pesticides used in the country were periodically identified, evaluated and

reported to the Ministry of Agriculture. In the action plan developed to implement this recommendation, TPRI planned to enhance awareness creation on the health effects caused by pesticides, monitor pesticides exposure to human health and environmental risk assessment.[1]

Through the review of the implementation status, it was noted that as of 30th June, 2022 TPRI conducted testing of blood acetylcholinesterase enzyme of the agricultural workers in various horticultural and coffee farms to monitor pesticides exposures. Furthermore, through the review of submitted report on farmers' health test from pesticides effect indicated that, health testing to Agricultural workers was only conducted to farmers in large plantation in two (2) regions, namely; Arusha and Kilimanjaro regions while none from farmers in small and medium scale farmers were considered for being monitored of their health from pesticides contamination.

Insights drawn from the report on farmers' health test implied that farmers for large, medium size, and small-scale plantations in twenty-four (24) out of twenty-six (26) regions of Mainland Tanzania were not tested to identify their health status. Furthermore, through the review of the submitted Final Technical Report on Capacity Building to Small Scale Farmers on Safe use of Pesticide in response to human health conducted in March and June, 2021 indicated that, the awareness creation to farmers on health effect cause by pesticides was done in two (2) out of twenty-six (26) regions, namely Kilimanjaro and Manyara and was attended by 300 farmers and 101 farmers respectively. However, it was noted that, there was no evidence to substantiate that environmental monitoring and evaluation of risks from pesticide to the environment was done. Therefore, this recommendation was partially implemented.

Recommendation 5: TPHPA should ensure re-inspection is timely conducted before renewal of pesticides business permit to determine compliance with pesticides business requirement and implementation of corrective actions issued to pesticides sellers

This recommendation required TPHA to ensure re-inspection of pesticides sellers was timely conducted before renewal of pesticides business permit to determine compliance with pesticides business requirement and

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[1] The timeline for the implementation of this recommendation was not set

implementation of corrective actions issued to pesticides sellers. In the action plan developed to implement this recommendation, TPHPA planned to conduct re-inspection before renewal of pesticide business permit.

Through the review of the implementation status, it was noted that, TPHPA had not conducted re-inspection of pesticide sellers for three consecutive years from the financial year 2018/19 to 2020/21. However, it was noted that, for the financial year 2021/22, TPHPA conducted re-inspection to pesticide sellers to all quarters of the financial year 2021/22.

In addition, it was noted that, the conducted inspections did not cover all geographical zones, instead they covered the Southern Highlands, Lake, Coastal, Western and Central Zones. The regions which were covered by the inspections were Ruvuma, Mbeya, Rukwa, Songwe, Tabora, Morogoro, Shinyanga, Geita, Mwanza, Simiyu, Mara, and Njombe. The regions which were not covered by the inspections were those of the Northern zone, namely; Arusha, Kilimanjaro, Manyara, and Tanga. **Table 3.4** summarizes coverage in the conducted re-inspection by TPHPA from the financial year 2018/19 to 2021/22.

Table 3.4: Extent of Conducted Re-Inspection to Pesticides Sellers by TPHPA from 2018/19 to 2021/22

Period Covered	Regions covered	Zones covered
July – September, 2021	Ruvuma, Mbeya, Songwe, Njombe, Rukwa and Morogoro	Southern Higlands (Ruvuma, Mbeya, Songwe and Njombe), Coastal Zone (Morogoro) and Western zone (Rukwa)
September – December, 2021	Ruvuma, Mbeya, Rukwa, Njombe, Songwe and Tabora	Southern Highlands (Ruvuma, Mbeya, Njombe and Songwe), Central zone (Tabora) and Western zone (Rukwa)
January – March, 2022	Ruvuma, Mbeya, Rukwa, Songwe and Tabora	Southern Highlands zone (Ruvuma, Mbeya and Songwe), Central zone (Tabora) and Western zone (Rukwa)
April – June, 2022	Ruvuma, Mbeya, Rukwa, Songwe and Tabora	Southern highlands zone (Ruvuma, Mbeya and Songwe), Western Zone (Rukwa) and Central zone (Tabora)
April – June, 2022	Morogoro, Tabora, Shinyanga, Geita, Mwanza, Simiyu and Mara	Coastal zone (Morogoro), Lake zone (Shinyanga, Geita, Simiyu, Mwanza and Mara) and Central zone (Tabora)

Source: Auditors' Analysis of the Conducted Re-inspection to Pesticides Sellers (2021/22)

Therefore, this recommendation was partially implemented because two zones namely the Eastern and Northern zones were not covered in the conducted re-inspection exercise.

Details of Recommendation that was Not Implemented by TPHPA

Recommendation 6: TPHPA should update and improve the existing procedures guiding inspection and re-inspection of pesticides in the country and ensure that corrective actions against defaulters are taken in accordance to the law

This recommendation required TPHPA to ensure that existing procedures guiding inspection and re-inspection of pesticides in the country were updated and ensure that corrective actions against defaulters were taken in accordance with the law. In the action plan developed to implement this recommendation, TPHPA planned to develop inspection guidelines for use to ensure uniformity in enforcement inspection at regions by training TPHPA Inspectors in the respective regions through being coordinated by TPHPA Legal actions for non-compliance.

Through the review of the implementation status, it was noted that, there were no initiatives in place to ensure the implementation of what was planned by TPHPA in the action plan. TPHPA further revealed that, the guidelines were planned to be developed in the financial year 2022/2023 when the Plant Health Regulations would become operational, though nothing was noted to have been done in this respect. However, the audit team had the view that, the guideline could have been prepared without waiting for the operationalization of the Plant Health Regulations to ensure the conducted inspections to pesticide sellers were being adequately guided.

Consequently, absence of updated and improved procedures for guiding inspections resulted into lack of prioritized inspections that focused more on risky areas such as remote areas or areas with incidents of frequent use of the counterfeit pesticides. It was further noted that, this was contributed by the fact that even the risk-based inspection plans were yet to be prepared by TPHPA during the time of follow-up. Therefore, this recommendation was not implemented.

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3.5.3 Results of Follow-Up of Recommendations Issued to the Ministry of Agriculture (MoA)

The results on the implementation of the issued audit recommendations to Ministry of Agriculture (MoA) indicated that out of seven (7) recommendations, two (2) recommendations were partially implemented and five (5) recommendations were not implemented. **Table 3.5** indicates the overall implementation status per category of recommendations for recommendations issued to the MoA.

Table 3.5: Level of Implementation per Category of Recommendations Issued to Ministry of Agriculture

Category of Recommendation	Total Number of issued Recommendations per Category	Level of implementation of Recommendation		
		Fully implemented	Partially Implemented	Not implemented
Planning	2	0	0	2
Implementation	2	0	1	1
Monitoring	2	0	0	2
Evaluation	0	0	0	0
Coordination	1	0	1	0
Development	0	0	0	0
Total	**7**	**0**	**2**	**5**

Source: Auditors' Analysis of the Implementation Status (2022)

Table 3.5 shows that two (2) recommendations in the category of planning were not implemented. Out of those two (2) recommendations in the category of planning, one (1) recommendation was partially implemented and one (1) recommendation was not implemented. In the category of monitoring, there were two (2) recommendations and both were not implemented. The category of coordination had one (1) recommendation which was partially implemented.

Details of Recommendations that were Partially Implemented by the Ministry of Agriculture

Recommendation 2: The Ministry of Agriculture should strengthen mechanism in place to ensure that pesticide sellers, farmers and agricultural extension officers are periodically trained on the proper use and handling of pesticides

This recommendation required the Ministry of Agriculture (MoA) to strengthen mechanism to ensure pesticide sellers, farmers and agricultural extension officers are periodically trained on the proper use and handling of pesticides. In the action plan developed to implement this recommendation, MoA planned to identify training needs and conduct training on the annual basis.

Through the review of the implementation status, it was noted that as of 30th June, 2022 MoA through TPHPA/TPRI conducted training on Pesticides Management to sellers, farmers, and agriculture extension officers to ensure proper use and handling of pesticides. Likewise, it was further noted that MoA through TPRI/TPHPA prepared training plan for pesticide management in the financial year 2021/22 and conducted trainings in 11 regions namely Kigoma, Mbeya, Ruvuma, Arusha, Morogoro, Shinyanga, Mwanza, Dar es salaam, Dodoma, Pwani and Kagera.

However, it was noted that, there was no prepared training needs as per the submitted action plan on the issued audit recommendation that could have been used as a road map during preparation of annual training plans. In addition, MoA had not prepared training plan for the financial year 2018/19, 2019/20 and 2020/21. Therefore, this recommendation is partially implemented due to the reason that MoA did not manage to conduct training need analysis and plan for training every financial year.

Recommendation 6: Ministry of Agriculture should develop a coordination mechanism that will take into account and guarantee that all government entities responsible for implementation of registration, training and inspection of pesticides are working together and avoid duplication of efforts

This recommendation requires the Ministry of Agriculture to develop a coordination mechanism that would take into account and guarantee that all government entities responsible for registration, training and inspection of pesticides were working together and avoid duplication of efforts.

To implement this recommendation, MoA in its action plan stated that it would conduct meetings with all Government entities responsible for implementation of pesticide management issues. However, the analysis of the responses submitted by the Ministry of Agriculture indicated that, MoA had conducted one stakeholders' meeting that was held on 4th March, 2022. The meeting was attended by service providers representative, pesticide dealers, pesticide industry, academia, CSOs and Government Officials.

However, the Ministry had not prepared stakeholders' meeting plans that would indicate that the stakeholders' meetings would be frequently conducted and covers targeted stakeholders based on structured plans. Non development of stakeholders' meetings plans by MoA led to inadequate implementation of this recommendation by just conducting a single stakeholder meeting for a period of 4 years since the audit was tabled to the Parliament in April, 2018.

The audit team, therefore, concluded that the recommendation was partially implemented since MoA did not develop coordination mechanisms such as meeting plans to ensure all stakeholders were covered and that more interventions were needed to ensure that the recommendation would be fully implemented.

Details of Recommendations that were Not Implemented by the Ministry of Agriculture

The audit team noted that five (5) out of seven (7) recommendations were not implemented by the Ministry of Agriculture. These recommendations are as explained below:

Recommendation 1: The Ministry of Agriculture should establish policies on pesticides in the country and ensure that the registered pesticides are adequately regulated during the implementation

The recommendation requires the Ministry of Agriculture to establish policies on pesticides in the country and ensure the registered pesticides are regulated during the implementation. In the action plan developed in order to implement this recommendation, the Ministry of Agriculture indicated that it would incorporate pesticides management in the Agricultural Policy during the Agriculture Policy Review.

The implementation status of the recommendation by the Ministry of Agriculture showed that, as of 30th June, 2022, the Agricultural Policy was not yet reviewed and that Agriculture Policy of 2013 is in use. Therefore, the Audit Team considered this recommendation as not implemented since the Ministry of Agriculture has not managed to incorporate pesticide management issues in the Agriculture Policy as it was planned.

Recommendation 3: The Ministry of Agriculture should monitor and evaluate the effectiveness of pesticide training provided to pesticide sellers, farmers and Agricultural Extension Officers

The recommendation requires the Ministry of Agriculture to monitor and evaluate the effectiveness of pesticides trainings provided to pesticide sellers, farmers and agricultural extension officers. In the action plan developed to implement this recommendation, the Ministry of Agriculture indicated that, in collaboration with TPRI and PO-RALG, it would have developed a monitoring mechanism to carry-out monitoring accordingly by June, 2019.

Through the analysis of the implementation status of the recommendation submitted by the Ministry of Agriculture, it was noted that as of June 30th 2022, TPRI/TPHPA had conducted periodical monitoring inspections to pesticide sellers and users for evaluating the effectiveness of pesticides trainings. However, through the review of submitted evidences, the Audit Team noted that MoA did not develop mechanism for monitoring and evaluating the effectiveness of trainings which were offered to farmers, pesticide sellers and agricultural extension officers. It was further noted that the inspections conducted by TPHPA/TPRI were not meant to monitor and evaluate training effectiveness as stated.

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Therefore, the Audit Team considered this recommendation as not being implemented since MoA did not evidently show if it had managed to develop a mechanism for monitoring and evaluating training provided by TRPI as it was planned to be completed by June, 2019.

Recommendation 4: The Ministry of Agriculture should ensure that risk based inspection plans for proper implementation of inspection to pesticide sellers and Ports of Entry are developed and guide the focus of inspectors

The recommendation required the Ministry of Agriculture to ensure that risk based inspection plans for proper implementation of inspection to pesticide sellers and Ports of Entry were developed and used to guide the focus of inspectors. In respect to the recommendation, MoA presented an action plan indicating that PHS in collaboraton with TPRI would develop the risks based inspection plan.

The Ministry of Agriculture in response to this recommendation described that; as of 30th June, 2022 an effort was made to merge PHS and TPRI in order to form the Authority known as TPHPA for the purpose of strenghtening the inspection and regulating the pesticides business. However, MoA did not manage to avail to the audit team the documented evidence such as established risk based inspection plan, minutes for the meeting held between between MoA, TPRI and PHS and other correspondences so as to critically assess the level of implementation of the issued audit recommendation.

Considering the fact that no evidence was submitted to the audit team to validate the implementation of the recommendation, the audit concluded the this recommmentation was not implemented at all.

Recommendation 5: The Ministry of Agriculture should ensure avaliability and proper allocation of qualified pesticide inspectors to ensure maximum and effective coverage of pesticide sellers and Ports of Entry during the inspections

MoA was required to ensure the avaliability and proper allocation of qualified pesticide inspectors for the maximum and effective coverage of pesticide sellers and Ports of Entry during the inspections. In implementing this recommendation, MoA planned to conduct specialized training on safe

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use and handling of pesticides based on training needs.

In its response the Ministry of Agriculture indiacted that, the specialized training on safe use and handling of pesticides were conducted by TPRI/TPHPA. However, no evidence was availed to the audit team to justfy the records of specilized training conducted, basis of allocation of qualified pesticide inspectors to pesticides sellers and Ports of Entry. Considering the fact that no evidence was provided to the audit team to validate the implementation of the recommendation, therefore, the audit concluded that the recommentation was not implemented at all.

Recommendation 7: The Ministry of Agriculture should establish monitoring and evaluation framework that will ensure that there are set key performance indicators, Monitoring and Evaluation Implementation Plans, timely perfomance reporting of registration, training and inspection of pesticides

The recommendation requires the Ministry of Agriculture to ensure that it established the monitoring and evaluation framework that would ensure that there were set key performance indicators, M&E implementation plans, timely performance reporting of registration, training and inspection of pesticides. The Audit Team noted that, the Ministry of Agriculture in collaboration with TPRI, PO RALG planned to develop M&E framework in order to address this recommendation.

The review of the submitted responses from the Ministry of Agriculture regarding the implementation status of this recommendation, it was indicated that, as of 30th June, 2022, TPRI/TPHPA in collaboration with MoA developed the M&E framework for implementation and monitoring plans.

Through the analysis of the evidences submitted by the Ministry of Agriculture to support its response revealed that, MoA did not make efforts to address this recommendation. The Ministry did not submit any proof of documented evidence to support the provided statement. Therefore, the Audit Team concluded that this recommendation was not implemented by the Ministry of Agriculture and that more efforts would be needed to address the issued audit recommendation.

3.6 Specific Audit Conclusion

Based on the analysis of the implementation status, it is concluded that the Ministry of Agriculture and the Tanzania Plant Health and Pesticides Authority had taken efforts to implement CAG's Performance Audit recommendations. This conclusion is based on the follow-up results presented in the previous sections, which show that out of 13 issued recommendations, two (2) recommendations (26%) were fully implemented, five (5) recommendations (38%) were partially implemented, and six (6) recommendations (46%) were not implemented.

Therefore, seven (7) out of thirteen (13) recommendations (54%) were either partially or not implemented. Thus, the Management of the Ministry of Agriculture and TPHPA need to employ more efforts to ensure that all recommendations are fully implemented as they present valid and actionable solutions to various issues affecting their performance.

3.7 Specific Recommendations

Recommendations to the Ministry of Agriculture

The Ministry of Agriculture (MoA) is urged to:

i. Ensure that there are adequate follow-ups and monitoring to ensure effective implementation of the issued recommendations; and

ii. Incorporate the plans for implementing performance audit recommendations in its Annual Plan.

Recommendations to the Tanzania Plant Health and Pesticides Authority (TPHPA)

The Tanzania Plant Health and Pesticides Authority (TPHPA) should:

i. Develop a mechanism for monitoring and reporting the status of implementation of the issued performance audit recommendations; and

ii. Incorporate the plan of implementing performance audit recommendations in its Annual Plan.

CHAPTER FOUR

FOLLOW-UP ON THE PERFORMANCE AUDIT RECOMMENDATIONS ON THE MANAGEMENT OF PLOTS ALLOCATION

4.1 Background to the Audit

Performance Audit Report on the Management of Plots Allocation was tabled to the Parliament of the United Republic of Tanzania in April, 2018. The overall objective of the audit was to assess whether the Ministry of Lands, Housing and Human Settlements Development (MLHHSD) and the President's Office - Regional Administration and Local Government (PO-RALG) through Local Government Authorities (LGAs) were adequately managing the plots allocation in order to enhance affordability and availability of sufficient plots for human settlements development in the country.

4.2 Audit Scope

The audited entities were the Ministry of Lands, Housing and Human Settlements Development (MLHHSD) and the President's Office-Regional Administration and Local Government (PO-RALG). The two (2) ministries were the audited entities due to the reason that MLHHSD is responsible for the development of land policies, guidelines, strategies to implement land plans and overseeing their implementation. While on the other hand, PO-RALG is responsible for ensuring that land policies, laws, regulations and guidelines issued by the Ministry of Lands, Housing and Human Settlements Development were properly and effectively implemented by the Local Government Authorities.

The Audit covered system for plots allocation such as preparation of detailed layout plans, surveying plots, measures to ensure accomplishment of projects on time, analysing and projecting future demands for plots, having functioning database. Similarly, the audit focused on supervision of plots allocation activities; capacity to manage activities regarding plots allocation such as setting aside funds, having adequate skilled personnel and equipment for plots allocation. It also covered coordination mechanism between MLHHSD, PO-RALG, LGAs and utility providers, monitoring, evaluation and performance reporting of plots allocation activities.

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The Audit covered a period of three financial years from 2014/15 to 2016/17. Data were collected from seven (7) regions, namely; Dar es Salaam, Tanga, Manyara, Ruvuma, Katavi, Singida and Mwanza.

4.3   Main Audit Findings

During the audit the following weaknesses were noted:

(a) Demand for Plots was Higher than the Supply

The Ministry of Lands, Housing and Human Settlements Development (MLHHSD), President's Office - Regional Administration and Local Government (PO-RALG) and visited Local Government Authorities (LGAs) did not assured the availability of land plots to meet the demand. The audit team found out that, the executed projects on plots allocation had never met the demand of the people. Failure to have plots that meet the demand of people resulted into having un- planned and informal settlements.

(b) The Cost for Plots was not Affordable to all Classes of People in the Country

The Audit found that the demand of the plots was higher than the supply and the cost of plots was not affordable to all classes of people. This was due to the reason that in all plots' projects conducted, the unit cost of plot was contributed by plot sizes whereby costs were significantly lower for higher density residential plots and rising steeply with increasing plot size.

(c) There were Some Indications of Land Speculators Buying Plots

The audit found that, people who applied were allocated with plots. However, there were some indications that, some people who were allocated with plots were not really in need of the land. This is because people, who were allocated with plots, did not develop the plots within the stipulated time and rate of transfer of certificates of right of occupancy were high.

(d) Multiple Allocations of Plots

The audit found that, the mode used for plots allocation allowed one plot to be allocated to more than one person. This was the case since there were ethics violation which led to the problem becoming intentional, poor coordination whereby different officials and organizations were involved in the allocations of plots, and absence of functioning Land Management Information System to track land allocation issues.

(e) Inadequate Provision of Utility Services on the Allocated Plots

The audit found that, the utility services on the allocated plots in the visited LGAs were planned but inadequately rendered. This was caused by poor coordination between LGAs and utility services providers; also, failure of the LGAs to have effective strategies on development of towns/urban areas could have influenced people to acquire serviced plots in their settlements. Non provision of utility services resulted in little motivation for the citizens to develop the acquired plots in the settlements.

(f) Inadequate Planning by the PO-RALG and MLHHSD

The audit found that, there were inadequate planning for plots allocation by the PO-RALG and the MLHHSD. This was due to the absence of capacity to prepare General Planning Schemes and Detailed Plans. The General Planning Schemes would have provided the overall land use (spatial) development framework for the LGAs in preparing detailed layout plans. Lack of General Planning Schemes and Detailed Plans resulted in scarcity of plots for allocation.

(g) Absence of Measures in Place to Ensure Plot Project were Accomplished on Time

The audit found that, land related projects were not implemented as planned. This was due to inadequate budget for plots allocation activities, skilled personnel for the preparation of layout plans and survey equipment, delay in paying compensation to the respective residents, encroachment on designated land by farmers and livestock keepers, lack of awareness to

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residents, and delay in paying plot acquisition costs. Failure to accomplish land related projects on time which resulted in scarcity of plots.

(h) Land Allocation Projects were not Adequately Supervised by MLHHSD and PO-RALG

The audit team found that, supervision of plots allocation activities by MLHHSD and PO-RALG was not adequately conducted. The focus was mainly on land rents collections rather than checking on the plans and executions so as to provide guidance to the LGAs to take corrective measures. This led to failure of taking corrective actions in time.

(i) Inadequate Resources for Managing Plots Allocation Activities

The audit noted that, the Ministry of Lands, Housing and Human Settlements Development, PO-RALG and LGAs did not set aside adequate funds for the management of plots allocation activities, MLHHSD and PO-RALG were lacking a well-defined measure of allocating staff, and LGAs did not have adequate equipment such as Real Time Kinematic positioning for measuring relative positions using Global Navigation Satellite System (RTK-GPS) and Total Stations. As a result, plots allocation activities were not adequately financed. This was contributed by lack of emphasis on the general budget allocation by the Government.

(j) PO-RALG, MLHHSD, LGAs and Utility Providers did not have a Designed and Well-functioning Coordination Mechanism Among them

The audit found that, PO-RALG, MLHHSD, LGAs and utility agencies did not have a designed and well-functioning coordination mechanism among them. There was no proper channel of communication and initiatives by stakeholders so as to effectively attain their common objective of allocating plots to applicants in the country.

(k) PO-RALG and MLHHSD did not Plan for Monitoring, Evaluation and Performance Reporting of Plots Allocation Activities

The audit noted that, there was a weakness in systematic data collection and effective use of Monitoring and Evaluation (M&E) results in the planning

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of PO-RALG activities. Inadequate planning for plots allocation activities was caused by failure of the Ministries to have effective institutional framework that would ensure that, the planning authorities were timely monitored and the actual constraints in plots for allocation were identified.

(l) The PO-RALG and MLHHSD were Lacking Functioning Monitoring, Evaluation and Performance Reporting Framework on Plots Issues

The audit team found that, PO-RALG and MLHHSD were lacking functioning monitoring, evaluation and performance reporting framework on plots issues as these were not often reported as expected. Lack of functioning monitoring, evaluation and performance reporting framework on plots issues was caused by inadequate implementation of M&E strategy that would have provided stakeholders with information related to plots allocation. This led to the failure of the Ministries to perform adequately due to poor monitoring and evaluation system.

(m) There were no Specific Set Performance Indicators, Target, Goals on Specific Issues of Plots Allocation and the Methods of Achieving Them

MLHHSD and PO-RALG did not have specifically set performance indicators, target, goals on specific issues of plots allocation and the methods of achieving them. This was caused by the failure of the Ministries to set specific budget to work on set performance indicators. Therefore, it resulted into the PO-RALG being unable to carry-out monitoring activities on issues regarding to plots allocation.

PO-RALG and MLHHSD did not execute their Monitoring, Evaluation and Performance Reporting Roles as Expected. This was due to lack of functioning monitoring, evaluation and performance reporting framework and developed plans for plots activities as well as inadequate budget for the implementation of the monitoring activities. Thus, it resulted in the failure by the Ministries to identify challenges regarding to plots allocation.

4.5   Overall Audit Conclusion

The Ministry of Lands, Housing and Human Settlements Development and the President's Office – Regional Administration and Local Government through Local Government Authorities did not adequately manage plots allocation activities to ensure affordability and availability of sufficient plots for human settlements development in the country. Similarly, there were inadequate human resources, financial resources and equipment for planning, surveying and allocation of residential plots in the country. Furthermore, the MLHHSD and PO-RALG have not planned for monitoring, evaluation and performance reporting of plots allocation activities and so they did not execute their monitoring, evaluation and performance reporting roles as expected.

4.6   Results of the Follow-up on the Implementation of the Recommendations

This part presents the implementation status of issued recommendations to the Ministry of Lands, Housing and Human Settlements Development (MLHHSD) and President's Office - Regional Administration and Local Government (PO-RALG) in the four levels of implementation which are *fully implemented*, *partially implemented*, *not implemented*, and those that have been *overtaken by event*. Also, this part provides the extent of implementation based on the categories of recommendations. The details of the implementation status of the issued recommendations are explained in the following subsections.

4.6.1 Overall Implementation of the Issued Recommendations

A total of twelve (12) recommendations were issued in this audit, six (6) recommendations were directed to the MLHHSD and six (6) recommendations were directed to PO-RALG. The overall follow-up results on the implementation of the issued recommendations indicated that out of twelve (12) recommendations, seven (7) recommendations were partially implemented and five (5) recommendations were not implemented. **Table 4.1** provides the level of implementation for all issued audit recommendations per the audited entity.

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Table 4.1: Level of Implementation per the Audited Entity

Name of the Entity	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
MLHHSD	6	0	3	3	0
PO-RALG	6	0	4	2	0
Total	**12**	**0**	**7**	**5**	**0**

Source: Auditors' Analysis of Responses from MLHHSD and PO-RALG (2022)

Table 4.1 indicates that, out of the six (6) recommendations issued to the MLHHSD, three (3) recommendations were partially implemented and three (3) recommendations were not implemented. Likewise, for the six (6) recommendations issued to the PO-RALG, four (4) recommendations were partially implemented and two (2) recommendations were not implemented.

On the basis of categories of recommendations, it was noted that out of the twelve (12) recommendations, two (2) recommendations were in the planning category, four (4) recommendations were in the execution category, four (4) recommendations were in the monitoring/evaluation category, one (1) recommendation in development category, and one (1) recommendation in coordination category. **Table 4.2** provides the level of implementation for all issued audit recommendations per categories of recommendations.

Table 4.2: Level of Implementation of Recommendations by Category

Category of Recommendation	Total Number of Issued Recommendations	of Recommendations		
		Fully Implemented	Partially Implemented	Not Implemented
Planning	2	0	1	1
Execution	4	0	3	1
Monitoring and Evaluation	4	0	2	2
Development	1	0	0	1
Coordination	1	0	1	0
Total	**12**	**0**	**7**	**5**

Source: Auditors' Analysis of Responses from MLHHSD and PO-RALG (2022)

Table 4.2 indicates that, of the two (2) recommendations in the planning category, one (1) recommendation was partially implemented and one (1) recommendation was not implemented. Also, of the four (4) recommendations in the execution category, three (3) recommendations were partially implemented and one (1) recommendation was not implemented. Similarly, of the four (4) recommendations in the monitoring and evaluation, two (2) recommendations were partially implemented and two (2) recommendations were not implemented. One (1) recommendation in the development category was not implemented, and one (1) recommendation in the coordination category was partially implemented.

4.6.2 Results of Follow-Up of Recommendations Issued to Ministry of Lands, Housing and Human Settlements Development (MLHHSD)

The results on the implementation of the issued audit recommendations to the Ministry of Lands, Housing and Human Settlements Development (MLHHSD) indicated that out of six (6) recommendations, four (4) recommendations were partially implemented and two (2) recommendations were not implemented. **Table 4.3** indicates the overall implementation status per category of recommendations for recommendations issued to the MLHHSD.

Table 4.3: Level of Implementation per Category of Recommendations issued to MLHHSD

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	0	0	0	0	0
Implementation/Execution	3	0	2	1	0
Monitoring and Evaluation	2	0	1	1	0
Coordination	0	0	0	0	0
Development	1	0	0	1	0
Total	**6**	**0**	**3**	**3**	**0**

Source: Auditors' Analysis of Responses from MLHHSD (2022)

Table 4.3 indicates that, out of the three (3) recommendations in the implementation/execution category, two (2) recommendations were partially implemented and one (1) recommendation was not implemented. Also, out of two (2) recommendations in the monitoring and evaluation category, one (1) recommendation was partially implemented and one (1) recommendation was not implemented. Likewise, one (1) recommendation in the development category was not implemented.

Details of Recommendations that were Not Implemented

Recommendation 5: MLHHSD was required to Ensure there is a Functioning Monitoring, Evaluation and Performance Reporting Framework to Guarantee Periodical Execution of Monitoring, Evaluation and Performance Reporting of Plots Activities

This recommendation required the MLHHSD to ensure that there was establishment of a functioning mechanism for monitoring, evaluation and performance reporting framework to guarantee periodical execution of monitoring, evaluation and performance reporting of plots activities. In the action plan developed to implement this recommendation, MLHHSD planned to develop data base upon which M & E would base to assess the extent of output and impact created. Also, MLHHSD planned to develop wide – embracing M & E framework for projects, programs and policies.

Through the review of the implementation status, it was noted that, the MLHHSD indicated to have a functioning framework in place for monitoring and evaluation (M&E) along with the prepared M&E plan at the beginning of the financial year 2018/19. It was further noted that, performance reporting was done on a quarterly and semi-annually basis; also, the Annual Performance Reports were prepared at the end of the year. There was no evidence to substantiate the implementation of the aforementioned activities. Therefore, this recommendation was not implemented.

Recommendation 6: MLHHSD was required to ensure performance indicators, targets, goals for plots allocation are set and implementation strategies are in place

This recommendation required the MLHHSD to ensure that Performance Indicators, targets, and goals for plots allocation were set and their implementation strategies were in place. In the action plan developed to implement this recommendation, MLHHSD planned to strengthen initiatives of regularization, completion of demarcation surveys and preparation of CCROs for rural areas by involving the private sector to hasten planning and surveying of land parcels towards the 400,000 titles target.

Through the review of the implementation status, it was noted that, the MLHHSD indicated to have a result framework in place with indicators, targets and goals included. However, despite the responses, MLHHSD did not submit supporting documents to justify what the Ministry reported to have been done. Accordingly, this recommendation is considered as not implemented because MLHHD did not submit a result framework, which contained indicators, targets and goals, that was in place.

Details of Recommendations that were Partially Implemented

Recommendation 1: MLHHSD should conduct analysis of the current and future demands for plots in the country and devise a mechanism for meeting the established current and future demands for plots

This recommendation required MLHHSD to conduct analysis of the current and future demands for plots and devise a mechanism for meeting the established current and future demands for plots. In the action plan developed to implement this recommendation, the MLHHSD planned to sensitize the public to contribute to the cost of producing land parcels/plots.

The MLHHSD indicated that it had conducted plots need assessment based on the population density projections. However, it was further noted that the MLHHSD started projections of land plots for the years 2022, 2030, 2040 to 2050. Despite the submitted status, the submitted evidence and

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documents lacked authority as they were not current working documents to enable the Audit Team to validate their contents.

The write-ups of the said programme were not submitted for verification. For this matter, this recommendation was considered as partially implemented.

Recommendation 2: MLHHSD to provide and disseminate guidance to cost establishment for serviced plots, standard plots to be sold and profitability margin for those selling plots

MLHHSD was required to provide and disseminate guidance to cost establishment for services plots and other plots to be sold. The response submitted by MLHHSD indicated that the Ministry had prepared the guidelines for land plots cost estimates and had issued a Draft Guideline on Plots Price Assessment in 2016.

However, review of the submitted draft guidelines revealed that the guidelines were still in draft form, and thus their authenticity needed to be verified through necessary approvals. In addition, there was no evidence to verify that the prepared guidelines were disseminated to the respective groups of people e.g., those selling plots.

Therefore, the Audit Team concluded that this recommendation was not implemented because the MLHHSD was still in progress of developing the guidelines on plots price assessment, which was initiated six years back before even this audit was tabled.

Recommendation 3: MLHHSD should ensure a well-functioning database for plots allocation is in place and the database is regularly updated

The Ministry was required to ensure there was in place well-functioning database for plots allocation and the database is regularly updated. The Ministry's response indicated that ILMIS had been rolled-out in the Dar es Salaam and Dodoma regions where in other regions were still using MOLIS v3 system.

However, in its response MLHHSD submitted that it intended to roll-up the Integrated Land Management Information System (ILMIS) programme in the remaining 24 regions and that preparation works had been done. Hence, the recommendation was considered as partially implemented.

Recommendation 4: MLHHD should ensure there is a designed and well-functioning coordination mechanism among key stakeholders on plots allocation and it is operationalized to allow the involvement of all stakeholders in the planning and execution phases of the Plots allocation activities

The Ministry was required to establish a functioning coordination mechanism among key stakeholders in the planning and execution phases of the plot's allocation activities. The Ministry reported to have established in every LGAs and at the Ministry's/Central level a Land Allocation Committee. To ensure involvement of stakeholders at all levels, the committee is composed by members representing other sectors, which MLHHSD deems appropriate.

In addition, the response also indicated that the Ministry had issued the guideline on the implementation of the Village Land Act in 2016. However, the submitted guideline was still in draft form to date. The Audit Team concluded that this recommendation was partially implemented because the MLHHD had not managed to ensure the developed guideline was approved.

4.6.3 Results of Follow-Up of Recommendations Issued to the President's Office – Regional Administration and Local Government (PO-RALG)

The results on the implementation of the issued audit recommendations to the PO-RALG indicated that out of six (6) recommendations, four (4) recommendations were partially implemented, and two (2) recommendations were not implemented. **Table 4.4.** indicates the overall implementation status per category of recommendations for recommendations issued to the PO-RALG.

Table 4.4: Level of Implementation of Recommendations issued to PO-RALG by Category

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	0	0	0	0	0
Implementation/Execution	4	0	3	1	0
Monitoring and Evaluation	2	0	1	1	0
Coordination	0	0	0	0	0
Development	0	0	0	0	0
Total	**6**	**0**	**4**	**2**	**0**

Source: Auditors' Analysis of Responses from PO-RALG (2022)

Table 4.4 shows that out the four (4) recommendations in the implementation/execution category, three (3) recommendations were partially implemented, while one (1) recommendation was not implemented. Also, out of two (2) recommendations in the monitoring and evaluation category, one (1) recommendation was partially implemented and one (1) recommendation was not implemented.

Details of Recommendations that were Not Implemented

Recommendation 4: Ensure that Planning Authorities' capacity to manage plots allocation activities are enhanced by setting aside needed funds, adequate skilled personnel and equipment

This recommendation required PO-RALG to ensure that Planning Authorities had capacity to manage plots allocation activities. Also, to ensure that there were funds, skilled personnel and equipment to manage plots allocation functions. In the action plan developed to implement this recommendation, PO-RALG planned to set aside funds to subsidise plot allocation through budget allocation, appropriate recruitment - UTUMISHI and procurement of equipment.

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Through the review of the implementation status, it was noted that PO-RALG submitted that the government through PO-RALG and MLHHSD planned to recruit Staff with adequate skills as per the Government Establishment for LGAs. Also, the PO-RALG had distributed equipment in some LGAs in the financial years 2019/20 and 2021/22 based on the fund from the Government of Tanzania and the World Bank Program.

The audit team assessed the submitted documents such as Strategic Plans 2021/22 to 2025/26, annual plans and budgets for financial years 2018/19 to 2021/22, it was noted that PO-RALG neither set aside funds nor included a budget item to cater for plots allocation activities carried-out by LGAs. Furthermore, it was noted that in LGAs, there were established Plots Allocation Committees vested with the mandate to plan and implement plots allocation activities through the respective Committees.

However, there was no evidence which was submitted to verification of such plans or budgets. Through the Interviews held with Officials from PO-RALG who were responsible for overseeing the LGAs' performance, it was noted that some of these LGAs were provided with equipment for plots allocation. However, there was no evidence to verify the distribution of the claimed equipment. Due to the reasons above, this recommendation was considered as not implemented.

Recommendation 6: Conduct regular visits to the Planning Authorities for the supervision, monitoring and evaluation of plots allocation activities in order to identify associated challenges and take corrective measures as may be required

This recommendation required PO-RALG to conduct regular visits to Planning Authorities for supervision, monitoring and evaluation activities. In the action plan to implement this recommendation, PO-RALG planned to use its Monitoring and Evaluation Framework to work on the recommendation by the financial year 2018/19.

Through the review of the implementation status, it was noted that, PO-RALG indicated to have the Monitoring and Evaluation framework for plots allocation and was being implemented in LGAs. Despite the fact that PO-

RALG submitted the monitoring and evaluation framework, it was still in draft form.

Therefore, the implementation of this recommendation after review of the mentioned documents could not be verified. However, as up to the time of this report, PO-RALG had not provided the requested documents to support their responses. Furthermore, it was also noted that time for implementation of the recommendation had lapsed since 2018/19. Due to the above, this recommendation was considered as not implemented.

Recommendations that were Partially Implemented

Recommendation 1: Devise a mechanism that will require all Planning Authorities to ensure that plots that meet the demand of people (number of plots and available utility services) are available and affordable to all classes of people

This recommendation required PO-RALG to devise a mechanism to ensure that plots' needs met the demand of the people. In the action plan developed to implement this recommendation, PO-RALG planned to set aside funds to subsidize plot allocation, revive the plot development revolving fund to facilitate plots allocation activities to meet peoples' demand, involve private sector and Government to minimize plot allocation cost.

In the response to this recommendation, PO-RALG showed that, through the Program for Planning, Surveying and titling of surveyed plots in 52 LGAs, there would be plots available and the project would involve provision of utility services in the allocated plots.

However, it was noted that there was delay in implementing the recommendation for two to four years contrary to the agreed action plan and no supporting document was submitted. In addition, the audit team was not been provided with program document for Planning, Surveying and titling which showed the objectives of the program for the surveyed plots in 52 LGAs. Furthermore, the budget for planning, surveying and titling of surveyed plots was available for the year 2021/22, and it amounted to TZS

52 billion and the activities were to be implemented by PO-RALG in collaboration with MLHHSD.

Details on the received financing from the World Bank from the financial year 2021/22 to 2025/26 for the program were submitted which showed the amount set aside for planning, surveying and titling, for that reason, this recommendation was considered as partially implemented.

Recommendation 2: Design guidelines and procedures that will provide guidance to LGAs when coordinating with utility providers towards provision of services in plots allocation projects

This recommendation required the PO-RALG to design guidelines and procedures to provide guidance to LGAs. In the action plan developed to implement this recommendation, PO-RALG submitted that the procedures for plots allocation services were covered in the guidelines for the preparation and implementation of General Planning Schemes and Detailed Schemes for new areas, Urban Renewal and Regularization, Draft Urban Development Policy and directives would be given to LGAs to involve utility agencies towards provision of services in plots allocation projects.

Through the review of the implementation status, it was noted that, as of 30th June, 2022, PO-RALG acknowledged that the Government through MLHHSD and PO-RALG prepared the guidelines on preparation and implementation of General Planning Schemes and the Guideline on provision of Building Permit and construction management in LGAs. A review of the submitted guidelines indicated that, PO-RALG had submitted guidelines for the Preparation and Implementation of General Planning Schemes and Detailed Schemes for New Areas, Urban Renewal and Regularization which provided detailed guidance to LGAs when coordinating with utility providers towards provision of services in plots allocation projects.

PO-RALG also submitted the Guideline on Provision of Building Permits and construction management in LGAs. However, PO-RALG did not submit evidence showing whether the directives given to LGAs to involve utility Agencies towards provision of services in plots allocation projects were disseminated, accepted or are being applied by LGAs and other utility Agencies such as TANESCO, Urban or Rural Water Authorities for

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implementation. Due to that, this recommendation was considered as partially implemented.

Recommendation 3: Carry-out periodical checks and reviews to ensure that plots are allocated according to demand, on time and avoid the problem of multiple allocations of the same plot to more than one person

The recommendation required PO-RALG to carryout physical checks and reviews to minimize double allocation of plots.

PO-RALG planned to address the recommendation through the Integrated Lands Management and Information System (ILMIS) and Geographical Information System (GIS), through Land Rent Information System, and through PO – RALG Monitoring and Evaluation Framework by financial year 2018/19.

However, the response on the status on the implementation of issued recommendation showed that, PO-RALG did not respond to issues of periodical checks and reviews but only used ILMIS as its control tool for double allocation and monitor how they were being carried out. The follow-up audit team noted that, PO-RALG did not submit evidence to indicate whether it carried out periodic checks at LGAs level to ensure that plots allocation activities were well monitored. Furthermore, ILMIS system was not used to pull regular or periodic reports showing the status of plots allocation activities in the country.

Therefore, since there were no periodical checks reports and review reports to respond to the need of the recommendation, this particular recommendation was regarded as being partially implemented.

Recommendation 5: Device a mechanism to be used by LGAs in involving the private sector in plots allocation projects so as to increase the supply of plots that will ultimately satisfy the demand of the people

The recommendation required PO-PORALG to devise a mechanism for LGAs to use in encouraging private companies to be involved in land plot allocation process.

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Reviewed PO-RALG's responses on the way the recommendation was implemented, the responses indicated that PO-RALG would prepare guidelines for involving private sector in plots Allocation through PPP node. Also, all registered Companies with their respective Boards were to be involved in Valuation, Planning, Surveying and Titling of Plots.

However, the analysis of the submitted reports and interview held with PO-RALG showed that, PO-RALG's response did not demonstrate any details for any mechanism of engaging in private companies.

The follow up team was not provided with documents as the evidence for the team to be able to effectively assess the implementation of this recommendation and for that matter, this recommendation was considered as being partially implemented.

4.7   Specific Conclusion

Based on the analysis of the implementation status of the previously issued recommendations, the audit concludes that despite the efforts demonstrated by both MLHHSD and PO-RALG in ensuring that the issued performance audit recommendations are fully implemented, much is required to ensure that all issued recommendations are fully implemented. Based on the analysis of the received responses, MLHHSD and PO-RALG need to have a mechanism to ensure that the issued recommendations are fully implemented. This is because in all twelve (12) issued recommendations only seven (7) recommendations were partially implemented while five (5) recommendations were not implemented.

Rigorous efforts are required to ensure that the issued recommendations are fully implemented, and hence there is likelihood that if the issued recommendations are not fully addressed will lead to ineffective management of plots allocation in the country. NAOT will continue making follow-ups in all recommendations to ensure full implementation of the issued recommendations.

4.8   Specific Recommendations

Both the Ministry of Lands, Housing and Human Settlements Development and President's Office – Regional Administration and Local Government are urged to:

i.   deploy more efforts to ensure that all recommendations are fully and satisfactorily implemented; and

ii. prepare an action plan on how partially and not implemented recommendations will be addressed on a timely basis.

CHAPTER FIVE

FOLLOW-UP ON THE IMPLEMENTATION OF RECOMMENDATIONS ON THE MANAGEMENT OF MARINE RESOURCES IN THE MARINE PROTECTED AREAS IN TANZANIA

5.1   Background to the Audit

Performance Audit Report on the Management of Marine Resources in Marine Protected Areas was tabled to the Parliament of the United Republic of Tanzania in March 2018. The overall objective of the audit was to assess whether MPRU effectively protects and conserves marine resources within Marine Protected Areas (MPAs) to ensure sustainability.

5.2   Audit Scope

The main audited entity was Marine Parks and Reserves Unit (MPRU), which is a semi-autonomous body under the Ministry of Livestock, and Fisheries (MLF). MPRU is responsible for overall management of Marine Protected Areas (MPAs). The audit covered a period of three financial years from 2014/15 to 2016/17. Data were collected from four MPRU; MPAs namely Mnazi Bay Ruvuma Estuary Marine Park (MBREMP), Tanga Coelacanth Marine Park (TACMP), Mafia Island Marine Park (MIMP) and Dar es Salaam Marine Reserves System (DMRs). As overseer of the matter pertaining to fisheries and environment, Ministry of Livestock and Fisheries (MLF), respectively were involved in data collection.

5.3   Main Audit Findings

(a)   MPRU did not adequately Control Access to Marine Resources in Marine Protected Areas

MPRU did not adequately control access to marine resources in Marine Protected Areas. Access control in Marine Protected Areas (MPAs) is manifested in three major areas, which are issuance of permits or permit system, control of investment activities within protected areas and installation of physical demarcation within protected areas.

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(b) Permit System for Resource Use Activities Ineffectively Operates

Two out of three parks did not adhere to required regulations in issuance of Local Residence User Certificates (LRUC) to residents and Resource User Certificate for non-residents to control and regulate utilization of marine resources within protected areas. Inadequate control of investment and recreational activities within protected areas, the audit found that hotels and other investments present in MPAs were inadequately scrutinized either through EIA or environmental audits as per requirements. Out of 54 investments available in all parks, it was only 1 Project (i.e., Hotel at Shungimbili) in MIMP that had gone through the EIA process.

(c) Ineffective Monitoring of Marine Resources and Control Systems

This Ineffectiveness was observed in all parks. In Mafia Island Marine Park (MIMP), no inspection was carried out on hotels and recreational activities that took place within their area. MIMP had more than nine (9) hotels; however, in all three years there was no evidence of any environmental compliance inspection that was carried out. MBERP managed to conduct an inspection visit to a gas plant within their vicinity and discovered improper discharge of effluents to the sea without proper treatments and procedures as per regulations. This was reported to NEMC for further actions. For the case of Ineffective patrol activities, only MIMP consistently exceeded the set target of 52 patrols per year.

The remaining Patrol performance of other parks ranged between 10.5% and 43.6%. The low patrol performance provided room for increased illegal uncontrolled, unreported and unregulated activities in Marine Protected Areas. For example, over 240 fishers have camped in Nyororo Island in Mafia which is a protected area. Regarding to the Resource monitoring, none of the MPAs monitored the condition of all parameters of biophysical and marine resources. MPAs concentrated on monitoring fish catch and coral reef leaving aside other key important aspects such as water and sediment quality, sea grass bed, invertebrates' density and indicator species such as coelacanth, and sea turtle.

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(d) Ineffective Coordination for Participatory Conservation and Protection of Marine Resources

Activities related to protection of marine resource were not well coordinated between MPAs and other stakeholders. Village Liaison committees were not timely re-established after the expiry of their three years tenure. As a result, their involvements in conservation activities were limited. Only 20% of villages that were within the visited Marine Protected areas had Village Liaison Committees (VLC). In addition to that there were no Advisory committee in TACMP and MBREMP. The Audit concluded that MPRU through MPAs had not adequately controlled access to protected areas using its permit system. In addition, MPRU had not ensured proper monitoring of marine resources.

Besides that, MPRU had not adequately coordinated stakeholders' involvement in marine protection and conservation. The current access control system in marine protected areas did not guarantee protection of the resources found within these protected areas and provided loopholes for unauthorized people to enter and harvest resources from protected areas. MPAs did not monitor the resources constituently as there were no scheduled timelines for resource monitoring in all protected areas.

Additionally, monitoring was more concentrated on fish catch data and status of coral reefs neglecting other important aspects like nesting sites, hotspot and other marine resources habitats. Coordination between MPAs and other stakeholders was not adequate and therefore, provided loopholes for a variety of weaknesses in conservation of the protected areas.

5.4   Overall Audit Conclusion

MPRU through MPAs had not adequately controlled access to protected areas using its permit system. In addition, MPRU had not ensured proper monitoring of marine resources. Besides that, MPRU had not adequately coordinated stakeholders' involvement in marine protection and conservation. The current access control system in marine protected areas did not guarantee protection of the resources found within these protected areas and provided loopholes for unauthorized people to enter and harvest resources from protected areas.

MPAs did not monitor the resources constituently as there were no scheduled timelines for resource monitoring in all protected areas. Additionally, monitoring was more concentrated on fish catch data and status of coral reefs neglecting other important aspects like nesting sites, hotspot and other marine resources habitats. Coordination between MPAs and other stakeholders was not adequate and therefore, provided loopholes for a variety of weaknesses in conservation of the protected areas.

5.5 Results of the Follow-up on the Implementation of Recommendations

This part presents the implementation status of issued recommendations to the Ministry of Livestock and Fisheries, and Marine Parks and Reserve Unit on the management of marine resources in the marine protected areas in Tanzania. Implementation status has been grouped into three categories namely; *fully, partially or not implemented* recommendations. The details of the status of the implementation are explained in the following subsections.

5.6   Overall Implementation of the Issued Recommendations

A total of eleven (11) recommendations were issued in this audit, two (2) recommendations were directed to the Ministry of Livestock and Fisheries and nine (9) recommendations were directed to Marine Parks and Reserve Unit (MPRU). The overall follow-up results on the implementation of issued audit recommendations indicated that none of the recommendations were fully implemented, 10 (10) recommendations were partially implemented, and one (1) recommendation was not implemented. **Table 5.1** provides the level of implementation for all issued audit recommendations per the audited entity**.**

Table 5.1: Level of Implementation per the Audited Entity

Name of the Entity	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
MoLF	2	0	2	0	0
MPRU	9	0	8	1	0
Total	**11**	**0**	**10**	**1**	**0**

Source: Auditors' Analysis of Responses from MoLF and MPRU (2022)

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On the other hand, it was noted that out of the eleven (11) recommendations, six (6) recommendations were in the planning category, two (2) recommendations were in the monitoring and evaluation category, and three (3) recommendations were in the coordination category. **Table 5.2** provides the level of implementation for all issued audit recommendations per the categories of recommendations.

Table 5.2: Level of Implementation per Category of Recommendations

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	6	0	5	1	0
Implementation/ Execution	0	0	0	0	0
Monitoring and Evaluation	2	0	2	0	0
Coordination	3	0	3	0	0
Development	0	0	0	0	0
Total	**11**	**0**	**10**	**1**	**0**

Source: Auditors' Analysis of Responses from MoLF and MPRU (2022)

Table 5.2 shows that out of the six (6) recommendations in the planning category, five (5) recommendations were partially implemented and one (1) recommendation was not implemented. Also, all two (2) recommendations in the monitoring and evaluation category were partially implemented. Likewise, all three (3) recommendations in the coordination category were partially implemented.

5.6.1 Results of Follow-Up of Recommendations Issued to the Ministry of Livestock and Fisheries

The results on the implementation of the issued audit recommendations to the Ministry of Livestock and Fisheries (MoLF) indicated that all two (2) recommendations were partially implemented. **Table 5.3.** indicates the overall implementation status per category of recommendations for recommendations issued to the MoLF.

Table 5.3: Level of Implementation per Category of Recommendations Issued to the MoLF

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	0	0	0	0	0
Implementation/ Execution	0	0	0	0	0
Monitoring and Evaluation	0	0	0	0	0
Coordination	2	0	2	0	0
Development	0	0	0	0	0
Total	**2**	**0**	**2**	**0**	**0**

Source: Auditors' Analysis of the Responses from MoLF (2022)

Table 5.3 shows that all two (2) recommendations were in the coordination category and were all partially implemented.

Details of Recommendations that were Partially Implemented

Recommendation 1: The Ministry of Livestock and Fisheries (MoLF) should ensure the advisory committees are established and operate in all MPAs to enable MPRU to have all instruments for effective operations of co-management within protected areas

This recommendation required the Ministry of Livestock and Fisheries (MoLF) to ensure that the advisory committees were established and operated in all MPAs to enable MPRU to have all instruments for effective operations of co-management within protected areas. MoLF did not indicate the action plan developed to implement this recommendation.
Through reviewing the implementation status, it was noted that, MoLF indicated that the Board of Trustees and Advisory Committees of MPRU had been established in all Marine Protected Areas (MPAs), and they were operating to achieve co-management objectives of the MPAs. It was further noted that, the Board of Trustees was appointed on 20th June, 2020 and was still operational.

Also, it was stated that for Mnazi Bay Ruvuma Estuary Marine Park (MBREMP), the Advisory Committee was appointed on 22nd May, 2018. On the other hand, it was mentioned that the Advisory Committee for Tanga

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Coelacanth Marine Park (TACAMP) was appointed on 14th June, 2018; while on 1st January, 2019, the Advisory Committee was appointed at Mafia Island Marine Park (MIMP). Furthermore, it was noted that the tenure of the members of Advisory Committees had lapsed, and therefore, had requested for the appointment of the same through the Letter with Reference. No. CAB.7/45/06/21.

In addition, it was further noted that, on 22nd June, 2018, one member of the Advisory Committee was appointed through Letter with Reference No. CAB.7/45/06/12 showed that on 14th June, 2018, the Ministry of Livestock and Fisheries appointed a member to be one of the members to form an advisory committee for TACMP. Though, there was no evidence to verify that other members also were appointed to be members of the Advisory Committee for TACMP. Moreover, the tenure of three years of the Committee was noted to have lapsed or expired since June, 2021.

On the other hand, it was noted that MoLF appointed members of the Advisory Committee for Mafia Island Marine Park (MIMP); through a Letter with Reference Number CAB.7/45/02/14 dated 5th July, 2019. The tenure of three years for the Committee lapsed or expired on 31st December, 2021. A letter with reference number CAB.7/45/06/21 to request for the reappointment of the committees were not provided to auditors. There was no evidence to verify the appointment of Committees and their operationalization to all MPAs as per the requirement of the recommendation. Therefore, this recommendation was partially implemented.

Recommendation 2: The Ministry of Livestock and Fisheries (MoLF) should support MPRU to institute legal working tools like regulations and establishment of Advisory Committees to ensure that MPRU can effectively operate and achieve effective operations of co-management within protected areas

This recommendation required the Ministry of Livestock and Fisheries (MoLF) to support MPRU to institutionalize legal working tools like regulations and establishment of Advisory Committees to ensure that MPRU can effectively operate and achieve effective operations of co-management within protected areas. MoLF did not indicate the action plan developed to implement this recommendation.

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Through reviewing the implementation status, it was noted that, MoLF indicated establishment of the MPRU Board of Trustees and Advisory Committees and were operating to achieve co-management objectives of the MPAs. Also, it was further noted that on 30th June, 2021, MPRU Regulations were reviewed and gazzeted through GN. No.496B (The Marine Parks and Reserves (User Fees) (Amendment) Regulations, 2021.

The review of minute sheet dated 20th June, 2020 showed that the Ministry established the Board of Trustees. However, there was no evidence on its operationalization. Further, there was no evidence on the reappointment of the advisory committees after expiry of the three years tenure at TACMP and MIMP whereas there was no information provided for the status of the existence of advisory committees to other MPAs.

Furthermore, the Ministry submitted a report of a meeting held on 28th February, 2022 which was aiming to appoint representatives of the Village Advisory Committee for Tanga Coelacanth Marine Park. However, there was no evidence to show that they were approved by the approving authority after they were elected for nomination to act on the positions.

There were also letters submitted as the evidence for appointment of the members of advisory committees. However, the review showed that all the submitted letters were only proposing or nominating persons for appointment of membership. The list of letters with their dates are presented in **Table 5.4** hereunder.

Table 5.4: List of Letters Submitted as Evidence

Reference No.	Date of Letter
BF.94/258/02/07	27th September, 2021
HW/MUH/F.65/24/11	14th September, 2021
AB.06/44/02/70	17th February, 2021
AB.06/44/02/69	17th February, 2021

Source: Submitted Letters and Email from the Ministry of Livestock and Fisheries (2022)

Also, an extract of an email dated 13th December 2021 which referred that there was a letter with Reference Number AB.06/44/02/65 that was dated 19th August, 2021 nominated three persons for appointment of a member for Tanga Coelacanth Marine Park. However, there was no evidence to show that those nominated candidates, as per all those letters, were appointed for membership of the Advisory Committees.

Considering the above stated reasons, the recommendation was regarded as partially implemented unless otherwise more evidence could be provided.

5.6.2 Results of Follow-Up of Recommendations Issued to the Marine Park Reserve Unit (MPRU)

The nine (9) recommendations were issued to the Marine Park Reserve Unit (MPRU), eight (8) recommendations were partially implemented and one (1) recommendation was not implemented. **Table 5.5** provides the level of implementation for all issued recommendations per categories of recommendations.

Table 5.5: Level of Implementation per Category of Implementation

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	6	0	5	1	0
Implementation/ Execution	0	0	0	0	0
Monitoring and Evaluation	2	0	2	0	0
Coordination	1	0	1	0	0
Development	0	0	0	0	0
Total	**9**	**0**	**8**	**1**	**0**

Source: Auditors' Analysis of the Responses from MPRU (2022)

Table 5.5 indicates that out of six (6) recommendations in the planning category, five (5) recommendations were partially implemented and one (1) recommendation was not implemented. Also, all two (2) recommendations in the monitoring and evaluation category were partially implemented. One (1) recommendation in the coordination category was partially implemented.

Details of Recommendations that were Not Implemented

Recommendation 4: MPRU should establish and document intelligence system for information gathering and use it for risk-based planning and implementation of patrol activities

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This recommendation required MPRU to establish and document intelligence system for information gathering and use it for risk-based planning and implementation of patrol activities. In the action plan developed to implement this recommendation, MPRU indicated that it would formalize the system of gathering information for planning and implementation of patrol activities.

Through reviewing the implementation status, it was noted that, MPRU continued to use traditional intelligence system in collaboration with the government security organs to combat illegal activities within MPAs. It was further noted that, they were in the exercise of reviewing MPRU Act of 1994, the institute would account for a specific provision covering incentive and protection of informers and whistle blowers.

However, the said traditional intelligence system was in place during the conduct of this audit, while the illegal activities were there too. This means that the recommendation was issued so that the observed shortcomings including illegal fishing and harvesting of other resources in the protected areas were adequately addressed to control the observed problems. Further, it was noted that MPRU took initiatives by the reviewing the MPRU Act which was still in the process, yet to be finalized meaning that there was no improvement to the observed gaps as of June 2022. In view of the above, this recommendation was not yet implemented.

Details of Recommendations that were Partially Implemented

Recommendation 1: MPRU should establish a system that will integrate license applicant information with information given by VLC

This recommendation required MPRU to establish a system that would integrate license applicant's information with the information given by VLC. In the action plan developed by MPRU to implement this recommendation, MPRU indicated that it would strengthen the issuance of user permits and verification by documenting the process as well as keeping records.

Through the review of the implementation status, the audit team noted that guidelines for the issuance of permits for the use of resources within marine reserves and protected areas were updated whereby the section that provided the VLC a mandate to review the Resident's application for a resource use document including where the applicant lives has been

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inserted for making the recommendations. The recommendation was fully implemented. However, the guideline did not state for how long the resident document would be valid.

The guideline for application of license shows that the VLC have to review the applicant's documents and provide the recommendations whether the applicant can be granted the license or not. However, the verification on whether the guideline is followed in issuance of those licenses should be done. Also, the guideline presented the application forms filled by applicants, but there is nowhere or no place for the VLC to put the recommendations on the forms was seen. Therefore, the recommendation was partially implemented.

Recommendation 2: MPRU should ensure that Marine Protected Areas (MPAs) prioritize installation of instruction signs/billboards and physical boundaries to demarcate protected areas in their plans and budget

This recommendation required MPRU to ensure that MPAs prioritized the installation of instruction signs/billboards and physical boundaries to demarcate protected areas in their plans and budget. In the action plan developed to implement this recommendation, MPRU planned to allocate funds in every year budget for installation and replacement of the old signs/billboards with new ones in strategic areas/places in its MPAs. Further, MPRU indicated that the MPRU Board of Trustees in collaboration with the Management were looking for the appropriate expertise and mechanism of installing marker buoys in its MPAs boundaries and user zones as well as mooring buoys for anchoring boats.

Through reviewing the implementation status, it was noted that, MPRU had taken initiatives to implement this recommendation by installing 51 signboards and signposts to raise awareness and promotion of marine parks. For signboards and signposts installation, more evidence and physical verification were needed to assess the implementation status towards addressing this recommendation. Also, MPRU established the coordinates for demarcation in all MPAs. However, further evidence was required to show that those coordinates were established in all MPAs. The submitted evidence by MPRU to show the established coordinates after conduction survey was for Dar es Salaam Marine Reserves System (DMRS) and TACMP only.

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Furthermore, MPRU installed a total of 47 buoys in all MPAs as of June 2022. This shows that even the targets that were set at the time of the audit in 2018 were not yet achieved. More evidence should be provided to verify the set targets for the period after the audit and their implementation status so that the assessment can be done to ascertain whether MPRU initiatives were adequate or not to address this recommendation.

Moreover, the evidence of detailed information of locations and areas where the buoys were installed was not given, hence there was no specific MPA known to be installed with the buoys in accordance with the requirement and targets. Further verification was needed to assess whether MPRU met the set targets for all the elements regarding addressing and implementing this recommendation. Therefore, the recommendation was partially implemented.

Recommendation 3: MPRU should conduct needs assessment and cost estimates to establish the requirements for installation and management of mooring and demarcation buoys in Marine Parks. The analysis has to consider required number of mooring buoys in relation to size and geographical location of the park

This recommendation required MPRU to conduct needs assessment and cost estimates to establish the requirements for installation and management of mooring and demarcation buoys in Marine Parks. It further required that the analysis consider required number of mooring buoys in relation to size and geographical location of the park. In the action plan developed to implement this recommendation, MPRU planned to solicit funds and update the needs assessment and cost for installation and management of demarcation and mooring buoys within its MPAs.

Through reviewing the implementation status, it was noted that, in May, 2019, MPRU conducted a survey (*Report on Demarcation Buoys Survey in DMRS)* in order to establish the needs and requirements for installation of buoys. The objectives of the survey were mainly to:

i. Verify underwater positions in relation to geo-coordinates mapped from Google Earth software;
ii. identify type of substrate for each coordinate;

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iii. Establish geographic coordinate points and depth at which mark buoys will be anchored;

iv. Establish materials and cost estimates for installation of mark buoys; and

v. Prepare a report with maps for the installation of demarcation buoys.

The survey results showed that the required number of buoys for Mbudya, Bongoyo and Sinda Island Marine Reserves were 16, 20 and 14 buoys respectively, while their total respective chain length per island reserve was 403, 754 & 778 meters. For Funguyasin island, six coordinates were verified for demarcation buoys which demand 422 meters chain length. The report stated that the surveyed coordinates at Funguyasin were reserved for future intensive survey.

The review of the report noted that the survey did not cover other islands like Pangavini, Makatobe, and Kendwa which are also part of DMRS. The only covered areas were Funguyasin, Mbudya, Bongoyo and Sinda islands as detailed above. There was no evidence on whether other MPAs conducted the need assessment and cost estimates to implement the recommendation issued. Further, physical features such as Mooring and demarcation buoys were not yet installed in all MPAs. Therefore, this recommendation was partially implemented.

Recommendation 5: MPRU should develop Key Performance Indicators (KPIs) to enable the performance assessment of the state of marine resources

This recommendation required MPRU to develop Key Performance Indicators (KPIs) to enable the performance assessment of the state of marine resources. In the action plan developed to implement this recommendation, MPRU planned to conduct resource assessment to understand state of marine resources using harmonized methodologies and developed performance indicators.

Through reviewing the implementation status, it was noted that, MPRU stated that the KPIs were developed and included in MPRU plans and budgets. The review of budgets from FY 2019/20 to 2021/22 showed that there were inclusion of those KPIs, where there should be reports as the outputs to show the status of the state of the marine resources.

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However, there was no evidence to show that the set KPIs were met for the respective financial years so that the performance can be assessed as per the requirement of the recommendation. Further, there were no plans shared as evidence to show that the KIPs were included in those plans. With the reasons above, the recommendation was partially implemented.

Recommendation 6: MPRU should review allocation of materials and equipment, establish criteria for allocation and provide clear and detailed direction on allocation in line with operational needs

This recommendation required MPRU to review allocation of materials and equipment, establish criteria for allocation and provide clear and detailed direction on allocation in line with operational needs. In the action plan developed to implement this recommendation, MPRU planned to consider the requirements of materials and equipment based on availability of funds and donors' support. However, the recommendation required the allocation of the materials and equipment based on the set criteria and provision of detailed direction on the allocation in line with the operational needs. This means that the action plan of MPRU did not reflect addressing the implementation of the recommendation as it considered the availability of funds only instead of addressing the allocation of resources depending on criteria.

On the other hand, the review of response from MPRU indicated that the status of tools and equipment for MPA were established as per Institutional Asset Register. Further, the response showed that there were shortages of capital resources where in specific MPAs, the reallocated internal resources including tools and equipment as needs arose. MPRU did not state clearly the criteria used to reallocate those internal resources at the respective MPAs to fulfill the requirement of the recommendation.

Further review of response and the submitted evidence showed that MPRU handed over a Honda XR 125L motorcycle with registration number STL 2164 to the Mafia Island Marine Park (MIMP). Also, MPRU provided the evidence that it transferred the Oil Spill Response equipment from Mafia Island Marine Park (MIMP) in Coast Region to Tanga Coelacanth Marine Park (TACMP) in Kigombe - Muheza District, Tanga Region. The submitted evidence review showed that the equipment could be used for oil spill training and operation along the Indian Ocean coastline of Tanga to

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safeguard the Park and nearby reserves from the risks of oil spill. There was no evidence of which criteria were used in order to transfer the resources from MIMP to TACMP.

Therefore, in view of the shortcomings on the actions taken to address the implementation of this recommendation as stated above, this recommendation was partially implemented.

Recommendation 7: MPRU should develop a comprehensive and integrated information management system for storage of information for use in monitoring and evaluation of marine resources

This recommendation required MPRU to develop a comprehensive and integrated information management system for storage of information for the use in monitoring and evaluation of marine resources. In the action plan developed to implement this recommendation, MPRU indicated that it was making close follow-ups to ensure that the scheme of service and Salary approved and fill vacant positions including ICT staff.

Through reviewing the implementation status, it was noted that, MPRU showed that there was a procured a server in the process of establishing Information Management System (IMS) including database management system embedded with the marine resources management module. Further, MPRU indicated that MPAs used benthic monitoring and beach trash monitoring and fish catch database (Catch Assessment Survey) hosted at MoLF including Excel specific as a management information system for database.

On the other hand, there was no evidence availed by MPRU to auditors showing that the said system existed and functional. Furthermore, verification needs to be done in order to ascertain whether the procured system is in place and functional as per this recommendation. Therefore, this recommendation was partially implemented.

Recommendation 8: MPRU should develop practical guidance on how parks are to assess economic opportunities to determine whether they are compatible with the conservation objectives of the MPAs. A number of economic activities are taking place in marine parks and reserves including gas exploitation in MBREMP and tourism infrastructure in

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MIMP and DMRS, it is important are compatible with the conservation objectives of the MPAs

This recommendation required MPRU to develop practical guidance on how parks are to assess economic opportunities, including gas exploitation in MBREMP and tourism infrastructure in MIMP and DMRS, to determine whether they are compatible with the Conservation objectives of the MPAs. In the action plan developed to implement this recommendation, MPRU planned to monitor investment within its MPAs and communicate with NEMC for periodic monitoring. Further, MPRU planned to oversee, monitor, and document all investments in its jurisdictions.

Through reviewing the implementation status, it was noted that, MPRU indicated that it had developed an Investment Guidelines to provide guidance on specific type of economic/ investments and procedures compatible with MPRU to ensure MPA meets conservation objectives including EIA. However, there were no guidelines for the assessment of economic opportunities to determine their compatibility with the conservation objectives of the MPAs submitted for verification.

Further, it was noted that MPRU set aside TZS 5,660,000 in each financial year from 2018/19 to 2021/22 for monitoring of investments within MPAs. Therefore, subject to provision of evidence of the developed guidelines, this recommendation was partially implemented.

Recommendation 9: MPRU should ensure that each MPA conducts needs assessment to understand the status of environmental awareness among the stakeholders and implement the awareness programs

This recommendation required MPRU to ensure that each MPA conducts needs assessment to understand the status of environmental awareness among the stakeholders and implement the awareness programs. In the action plan developed to implement this recommendation, MPRU planned to conduct need assessment, formalize and implement environmental awareness programme for its stakeholders in the MPAs.

Through reviewing the implementation status, it was noted that, MPRU indicated that the Draft for Environmental Awareness Program was in place. Further, it was noted that the programme was still in the draft, yet to be approved for it to be in use.

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On the other hand, there was no evidence to ascertain whether there were training programs undertaken on the environmental aspect as required by the recommendation. Therefore, the recommendation was partially implemented.

5.7   Specific Conclusion

Based on the analysis of implementation status of the previously issued audit recommendations to MoLF and MPRU, it is concluded that both MoLF and MPRU did not make adequate efforts to ensure the implementation of the issued audit recommendations that were issued. This is due to the fact that there were a total of eleven (11) recommendations that were issued, however none of them was fully implemented. Among the eleven (11) recommendations, ten (10) of them were partially implemented while one (1) recommendation was not implemented. More efforts by the Management of both entities are required to ensure that all recommendations are fully implemented.

Based on the qualitative analysis of the discussion held with the officials from both MoLF and MPRU on submission of evidence, it is concluded that there are neither established plans and strategies, nor internal monitoring mechanism to ensure the issued performance audit recommendations are implemented at a specific timeframe or performance indicators to assess the level of their implementation.

5.8   Specific Recommendations

Recommendations to the Ministry of Livestock and Fisheries

The Ministry of Livestock and Fisheries is urged to:

i.   Ensure that all issued recommendations to the Ministry of Livestock and Fisheries are fully implemented; and

ii. Establish a mechanism for monitoring and reporting the status of implementation of issued recommendations regarding the issued Performance Audit report.

Recommendations to the Marine Park Reserve Unit (MPRU)

The Marine Park Reserve Unit (MPRU) is urged to:

i. Ensure that all issued recommendations to Marine Park Reserve Unit (MPRU) are fully implemented; and

ii. Establish a mechanism for monitoring and reporting the status of implementation of issued recommendations regarding the issued Performance Audit report.

CHAPTER SIX

FOLLOW-UP ON THE IMPLEMENTATION OF RECOMMENDATIONS ON PREPAREDNESS FOR THE IMPLEMENTATION OF SUSTAINABLE DEVELOPMENT GOALS IN TANZANIA

6.1 Background to the Audit

Performance Audit Report on Preparedness for Implementation of Sustainable Development Goals in Tanzania was tabled before the Parliament in March, 2018. The overall objective of the audit was to assess whether the Ministry of Finance and Planning (MoFP) as the leading ministry and the President's Office – Regional Administration and Local Government (PO-RALG), as the coordinator of Local Government Authorities, being regarded as the key implementers, are prepared to implement Sustainable Development Goals (SDGs).

6.2 Audit Scope

The main audited entities were the Ministry of Finance and Planning (MoFP) as the leading Ministry on implementation of the Sustainable Development Goals (SDGs) in the country and PO-RALG as the coordinator of LGAs, whereby the two ministries are the main implementers of SDGs are. All sector ministries and central ministries are responsible for the implementation of SDGs, but due to resource constraints (staff, time and finance); the audit team sampled three ministries, each ministry representing one of the sustainability pillars i.e., social, economic and environmental.

The selected ministries are the Ministry of Industry Trade and Investments (MITI), the Ministry of Education, Science and Technology (MoEST) and the Vice President's Office (VPO)-Environment, as the sector ministries responsible for coordinating the implementation of SDGs. In addition, five regions were covered and one Local Government Authority (LGA) for each region was visited. The regions covered are Dodoma, Kigoma, Singida, Simiyu, and Ruvuma. Meanwhile, LGAs covered included Dodoma MC, Singida MC, Bariadi MC, Ujiji MC, and Songea MC.

The audit assessed the actions kept in place by the government from July, 2015 to June, 2016/17 regarding the preparedness for implementation of SDGs at the national level, sub-national level and municipalities.

6.3 Main Audit Findings

(a) Inadequate Adoption of the 2030 Agenda on SDGs into the National Context

MoFP embraced nine out of 17 SDGs, 165 indicators out of 230 SDGs indicators, (equivalent to 68%) in the Second Five-Year Development Plan (FYDP-II) 2015/16 to 2020/21; it did not provide for the management of unfinished business of the embraced goals at the expiry of the plan in 2021. Further, MoFP did not provide for the management of the eight goals left out. This was because MoFP did not develop a national sustainable development implementation strategy that would guide the implementation and attainment of the set SDGs and targets.

Similarly, it was noted that, although the Guidelines for Preparation of Annual Budgets and Plans 2015/16 and 2016/17 require Ministries, Departments and Agencies (MDAs) to align their annual plans and budgets, but have not provided as to which goals had to be aligned for a particular year. This poses a risk for those LGAs to partially implement the FYDP-II and SDGs or not to implement them completely as it is not integrated into their plans.

(b) Lack of Institutional Mechanism to Integrate the 2030 Agenda into its Actions

There was an unclear institutional setup for the integration of SDGs into actions at the LGA level because the decentralization by devolution (D-by-D) that was intended to transfer implementation of local development and service delivery to the local governments has not been fully implemented. Some central Ministries still exercise significant authority and control on the implementation of local development activities and delivery of services that should have been in the mandate of LGAs.

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(c) Inadequate use of Multi-Stakeholder Approaches for SDGs Integration

During the preparation of the FYDP-II which embraced SDGs, some important stakeholders such as Non-Government Organization, Community Based Organizations, local community, and the indigenous people (as beneficiaries of the plan) who have a significant role to play in policy formulation, implementation and other key decision-making processes regarding the SDGs and FYDP-II, in particular, were not involved.

This was due to the reason that there were no clearly set mechanisms for stakeholders' engagement. Stakeholders' mapping was not conducted to identify the key stakeholders, their roles and responsibilities as well as the point of their engagement in the whole process of implementation and attainment of the set FYDP-II and SDGs goals and targets. This may affect the wider reach of the community and decrease transparency in the implementation of the plan and SDGs.

(d) Lack of Comprehensive SDGs Policy Coherence

The audit noted that there are no set mechanisms for breaking down sectoral demarcations and connecting different levels of government actions for implementation of the FYDP-II and SDGs. Similarly, there are no set mechanisms for coordination and strategic partnership between the government and other stakeholders.

Further, the audit noted a lack of set mechanisms for the responsible stakeholders' joint actions toward the implementation and achievement of the set goals and targets of the FYDP-II. This may lead institutions to strive to promote and implement plans that are in line with their mandates, without sufficient inclusion of FYDP-II and related SDGs. Also, this may lead to contradictions in the sector policies thereby delaying or hindering the realization of SDGs.

(e) Inadequate Identification and Mobilization of Resources for the Implementation of SDGs

The audit noted that MoFP did not identify the resources and capacities required for the implementation of the 2030 Agenda on SDGs. This was due to the reason that MoFP did not prepare the national SDGs implementation

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strategy outside the framework of FYDP-II, through which they could identify resources and capacities required for the implementation of SDGs. However, as 68% of SDGs were mainstreamed in the FYDP-II, adequate costing and financing of FYDP-II interventions could contribute significantly towards the achievement of SDGs.

(f) Inadequate Use of Innovative Methods to Secure Resources and Capacities

The audit noted that the identified innovative methods for securing resources and capacities for the implementation of SDGs are not exhaustive and some are not implementable. For instance, the use of Local government/Municipal bonds may not be practical due to the inexistence of appropriate legal instruments and the inadequate capacity of the LGAs to generate own-source revenue.

The use of the climate change fund has not been possible, as the MoFP did not set an integrated climate financing mechanism for strengthening the national capacity to access these funds and align climate finance spending with the national development priorities as identified in FYDP-II. This was due to the reason that MoFP did not conduct an analysis of the environment favoring the operation of the proposed innovative methods; as a result, MoFP will continue to depend on traditional methods which are not sufficient for raising resources and for enhancing the capacity of LGAs.

(g) The Ineffective Tax Collection System

The audit noted that the system for tax collection is ineffective in the sense that the tax base is still narrow, leaving out most of the informal sector operations. Similarly, the audit noted that MoFP through TRA has not established the database for all the Taxpayers especially those in the informal sector. Also, the audit noted a lack of a well-established mechanism for tracking the taxpayers especially those with no Taxpayer Identification Number (TIN). This may lead to a loss of revenues hence inadequate funding for the implementation of the FYDP-II and SDGs.

(h) Inadequate Identification and Mobilization of Capacities (Human Capital and ICT skills)

The audit noted that MoFP did not identify capacities required for the implementation of FYDP-II and SDGs. The audit further noted the uneven distribution of capacities which is contrary to the staff allocation list *(Ikama)*. This was caused by a lack of SDGs capacity needs assessment in various sectors responsible for the implementation of SDGs. Inadequate identification of capacities required for the implementation of various sectoral activities might lead to the non-achievement of the 2030 Agenda.

(i) Inadequate Identification of Risks and Mitigating Strategies in Securing Resources and Capacities

The audit noted that MoFP inadequately identified the risks and mitigating strategies in securing resources and capacities. The identified risks associated with securing financial resources while leaving out risks associated with securing and mobilization of capacities for implementation of SDGs.

This was due to the reason that MoFP did not identify the required capacities. This may lead the Ministry to be unable to establish mitigation strategies for securing capacities for implementation.

Monitoring, Review, and Reporting of the Implementation Progress

(j) Inadequate Identification of Performance Indicators and Baselines to Monitor and Report on the Implementation Progress

The audit noted that MoFP inadequately developed the performance indicators and baselines to monitor and report on the implementation progress. For instance, only 41% of all FYDP-II indicators had metadata while 59% required extra effort and resources (human and financial) for development.

(k) Inadequate Data Collection Capacity

The audit noted that the National Bureau of Statistics (NBS) as the coordinator for the production of official statistics within the National Statistical System (NSS) lacks capacity in terms of finance, human

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resources, and facilities for data collection and dissemination. For instance, for 282 indicators in the FYDP-II, NBS can produce 39% of data, and the remaining 61% are produced by MDAs and other data producers in National Statistical System (NSS). This indicated the potential data available at MDAs to monitor SDGs. However, there is no clear coordination of data produced by MDAs and those produced by NBS. Also, the available data produced by NBS does not fully respond to SDGs about timeliness, frequency, and data disaggregation.

(l)   Insufficient and Inadequate Data Quality and Availability

The audit noted that there were insufficient and inadequate data quality and availability. This was due to the reason that the detailed information on specific areas was only available to those entities such as the Statistical Working Group at PO-RALG that collect data on a specific area or subject, particularly the education sector in line with the interests of the PO-RALG and MoEST. The audit further noted that there was a lack of a harmonized data collection system to be used by the Ministries and LGAs. This affects the timely availability and quality of data and hence may impair the whole process of monitoring the progress of implementation of the FYDP-II and SDGs.

6.4   Overall Audit Conclusion

Despite the effort done by the government for the preparation and implementation of SGDs, both MoFP and PO-RALG have not adequately prepared for the implementation of SDGs. These key ministries are still facing several challenges to fully integrate the SDGs into the national content. Also, the government has not done a thorough identification of the required resources and capacities to implement SDGs. In addition, the established mechanisms for monitoring and reporting will not be effective in supporting the implementation of SDGs. These deficiencies may lead to failure to implement and attain the set SDGs and targets for growth and human development.

6.5 Results of the Follow-Up on the Implementation of Recommendations

This part presents the implementation status of issued recommendations to the Ministry of Finance and Planning and the President's Office – Regional Administration and Local Government on the performance audit on Preparedness for Implementation of Sustainable Development Goals in Tanzania. Implementation status has been grouped into three categories namely; *fully, partially or not implemented* recommendations. The details of the status of the implementation are explained in the following subsections.

6.5.1 Overall Implementation of the Issued Recommendations

A total of sixteen (16) recommendations were issued in this audit, twelve (12) recommendations were directed to the Ministry of Finance and Planning (MoFP), and four (4) recommendations were directed to the President's Office – Regional Administration and Local Government (PO-RALG).

The overall follow-up results on the implementation of the issued audit recommendations indicated that out of sixteen (16) issued recommendations, four (4) recommendations were fully implemented, three (3) recommendations were partially implemented, and nine (9) recommendations were not implemented. **Table 6.1** provides the level of implementation for all issued audit recommendations per the audited entity.

Table 6. 1: Level of Implementation per the Audited Entity

Name of the Entity	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
MoFP	12	4	2	6	0
PO-RALG	4	0	1	3	0
Total	**16**	**4**	**3**	**9**	**0**

Source: Auditors' Analysis of Responses from MoFP and PO-RALG (2022)

Furthermore, it was noted that out of the sixteen (16) recommendations, six (6) recommendations were in the planning category whereby two (2) recommendations in this category were fully implemented, while four (4)

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recommendations were not implemented. Also, out of the five (5) recommendations in the implementation category, one (1) recommendation was fully implemented, one (1) recommendation was partially implemented, and three (3) recommendations were not implemented. In addition, one (1) recommendation in the monitoring and evaluation category was not implemented, one (1) recommendation in the coordination category was partially implemented. Out of the three (3) recommendations in the development category, one (1) recommendation was fully implemented, one (1) recommendation was partially implemented, and one (1) recommendation was not implemented.

Table 6.2 provides the level of implementation for all issued audit recommendations per categories of recommendations.

Table 6.2: Level of Implementation per Category of Recommendations

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	6	2	0	4	0
Implementation/ Execution	5	1	1	3	0
Monitoring and Evaluation	1	0	0	1	0
Coordination	1	0	1	0	0
Development	3	1	1	1	0
Total	**16**	**4**	**3**	**9**	**0**

Source: Auditors' Analysis of Responses from MoFP and PO-RALG (2022)

Table 6.2 indicates that, out of the six (6) recommendations in the planning category, two (2) recommendations were fully implemented and four (4) recommendations were not implemented. Also, out of five (5) recommendations in the implementation/execution category, one (1) recommendation was fully implemented, one (1) recommendation was partially implemented, and three (3) recommendations were not implemented. On the other hand, one (1) recommendation in the monitoring and evaluation category was not implemented and one recommendation in the coordination category was partially implemented. Likewise, out of the three (3) recommendations in the development category, one (1) recommendation was fully implemented, one (1)

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recommendation was partially implemented, and one recommendation was not implemented.

6.5.2 Results of Follow-Up of Recommendations Issued to the Ministry of Finance and Planning

The results on the implementation of the issued audit recommendations to the MoFP indicated that out of twelve (12) recommendations, four (4) recommendations were fully implemented, two (2) recommendations were partially implemented, and six (6) recommendations were not implemented. **Table 6.3.** indicates the overall implementation status per category of recommendations for the recommendations issued to the MoFP.

Table 6.3: Level of Implementation per Category of Recommendations Issued to the MoFP

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	4	2	0	2	0
Implementation/Execution	4	1	1	2	0
Monitoring and Evaluation	1	0	0	1	0
Coordination	1	0	1	0	0
Development	2	1	0	1	0
Total	**12**	**4**	**2**	**6**	**0**

Source: Auditors' Analysis of Responses from MoFP (2022)

Table 6.3 shows that, of the four (4) recommendations in the planning category, two (2) recommendations were full implemented and two (2) recommendations were not implemented. Also, out of the four (4) recommendations in the implementation/execution category, one (1) recommendation was fully implemented, one (1) recommendation was partially implemented, and two (2) recommendations were not implemented. The one (1) recommendation in the monitoring and evaluation category was not implemented and one (1) recommendation in the coordination category was partially implemented. Likewise, out of the two (2) recommendations in the development category, one (1)

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recommendation was fully implemented and one (1) recommendation was not implemented.

6.5.3 Details of Recommendations that were Not Implemented

Recommendation 3: Involve multi-stakeholders including local community and citizens in awareness creation campaigns to enable the wide reach to enhance ownership of the process of implementation and tracking the progress of SDGs

This recommendation required the MoFP to involve multi-stakeholders including local community and citizens in awareness creation campaigns to enable the wide reach and enhance ownership of the process of implementation and tracking the progress of SDGs. In the action plan developed to implement this recommendation, the MoFP planned to localize by organizing Planning Officers from district councils. Where they were to be facilitated in terms of capacities and resources to raise awareness to the council leaders.

Through the review of the submitted implementation status, it was noted that, the recommendation was not implemented since there was no organized localization by Planning Officers from District Councils. Further, there was no supporting evidence for the facilitation in terms of capacities and resources to raise awareness among the council leaders.

Recommendation 5: Establish a responsive and inclusive mechanism of coordinating, monitoring, and reporting the progress of implementation of SDGs in FYDP-II at all levels of the Government

As per the submitted implementation status, the recommendation was not fully implemented since, there was no supporting evidence for sharing of PMS and SDGs Baseline Report with CSOs, Research and High Learning Institutions (researchers) to widen ownership in M&E.

Recommendation 6: Conduct stakeholders mapping to identify the potential stakeholders to be involved and their prospective roles and responsibilities for the implementation of the SDGs in FYDP-II, without losing sight of the importance of the community level

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The recommendation required conducting stakeholder mapping and thematic workshops, however there was no evidence submitted such as an attendance register or report for the conducted thematic workshops which would improve partnership and engagement in FYDP-II and SDGs.

Recommendation 7: Translate the set targets into guidelines and ensure all sector ministries and LGAs review their strategic plans to integrate SDGs targets in line with nationalpriorities and the resource envelop

The recommendation required a review of sector Ministries' and LGAs strategic plans however the recommendation was not implemented since there was no evidence on the number of LGAs and Sector Ministries that were able to review their SPs in line with national priorities and resource envelope. Further, no evidence of the given directives insisting and supporting LGAs to review their SPs.

Recommendation 8: Assess the effectiveness of resource mobilization efforts currently in place, and identify innovative methods with the view of widening the tax base for mobilizing t h e resources needed for the implementation of SDGs and other national priorities

As per the action plan, the recommendation was not implemented for the effectiveness of resource mobilization efforts currently in place, since there was no annual review of Resources

Recommendation 10: Ensure harmonization of the data collection system and tools forquality, timely, and adequately disaggregated statistical data

As per the agreed action plan, the recommendation was not implemented since it was supposed to be addressed continuously from 2018. However, NBS has started the development of the Tanzania Integrated Statistical Portal (TISP) by which the audit was availed with a concept note for the development of TISP of February, 2022 which covered only a few sector ministries.

Details of Recommendations that were Partially Implemented

Recommendation 4: Conduct an assessment of priority interventions with high impact to attain SDGs and determine the sequence of their implementation to have guidance to build the implementation capacities

As per the agreed action plan, the recommendation was partially implemented. This is due to the reason that only one (1) out of five (5) required assessments were completed through the VNR report in 2019 to examine the country's progress in implementing Agenda 2030 for SDGs.

Recommendation 12: Establish Institutional Mechanism For effective coordination, monitoring, and reporting on theprogress of the 2030 Agenda

As per the action plan, the recommendation was partially implemented since a data gap assessment was conducted but the evidence for the participation of statisticians from MDAs and LGAs is not provided

Furthermore, the implementation status did not indicate evidence such as an attendance register and report of conducting thematic workshops with key stakeholders to induce Government and Non-Government Actors to strengthen the partnership and also fasten mainstreaming of the remaining SDGs indicators in FYDP II in 2018/19.

Details of Recommendations that were Fully Implemented

Recommendation 1: Develop the national implementation strategy which will guide the implementation and achievement of the 2030 Agenda at the national level in line with FYDP II and its successor plans.

This recommendation was fully implemented since MoFP had already developed the implementation strategy through FYDP II and the National Coordination Framework for the Implementation, Monitoring, and Reporting of the Sustainable Development Goals. However, there was a delay of two years on the National Coordination Framework that was developed in 2020

Recommendation 2: Analyze the content of the agenda and integrate the SDGs with consideration of the timeframe, feasibility, and sustainability of the implementation of the integrated goals.

As per the action plan, the recommendation was fully implemented through the preparation of the FYDP III MES whereby the process involved the review of FYDP II with consideration of the timeframe, feasibility, and sustainability of the implementation of SDGs

Recommendation 9: Conduct a needs assessment for the capacity needed for the implementation of SDGs in FYDPII

As per the action plan, the recommendation was fully implemented but it was supposed to be implemented annually from 2018/19 and 2019/20 hence the implementation was delayed for three years.

Recommendation 11: Establish Institutional Mechanism For effective coordination, monitoring, and reporting on theprogress of the 2030 Agenda

As per the agreed action plan the recommendation was addressed through the establishment of the National SDGs Coordination Framework in the year 2021, which underscored the importance of a strengthened institutional framework, credibility of a coordination system, and cooperation from stakeholders as important means to support the delivery of SDGs. However, the implementation was delayed for 2022 as per the timeline required to be 2018/19.

6.5.4 Results of Follow-Up of Recommendations Issued to the President's Office – Regional Administration and Local Government Authority

The results on the implementation of the issued audit recommendations to the PO-RALG indicated that out of four (4) recommendations, one (1) recommendation was partially implemented and three (3) recommendations were not implemented. **Table 6.4** indicates the overall implementation status per category of recommendations for the recommendations issued to the PO-RALG.

Table 6.4: Level of Implementation per Category of Recommendations Issued to the PO - RALG

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	2	0	0	2	0
Implementation/Execution	1	0	0	1	0
Monitoring and Evaluation	0	0	0	0	0
Coordination	0	0	0	0	0
Development	1	0	1	0	0
Total	**4**	**0**	**1**	**3**	**0**

Source: Auditors' Analysis of Responses from PO-RALG (2022)

Table 6.4 indicates that, all two (2) recommendations in the planning category were not implemented, one (1) recommendation in the implementation/execution category was not implemented. Also, the one (1) recommendation in the development category was partially implemented.

Details of Recommendations that were Not Implemented

Recommendation 1: Conduct stakeholders mapping to identify the potential stakeholders to be involved and their prospective roles and responsibilities for the implementation of SDGs and realize the importance of community level

This recommendation required PO-RALG to conduct stakeholders mapping in order to identify stakeholders to be involved and their prospective roles and responsibilities for the implementation of SDGs and realize the importance of community level. In the action plan developed to implement this recommendation, PO-RALG planned to develop stakeholders mapping tool that would identify roles and responsibilities of the potential stakeholders.

Through reviewing the implementation status, it was noted that, no stakeholder mapping tool was developed since there was no any submitted evidence of the tool. Due to this, the recommendation was not implemented as per the action plan.

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Recommendation 2: Review the current decentralization policy to put in place an effective mechanism for devolving powers and responsibilities to LGAs for effective **implementation of development projects and service delivery**

This recommendation required PO-RALG to Review the current decentralization policy to put in place an effective mechanism for devolving powers and responsibilities to LGAs for effective implementation of development projects and service delivery. In the action plan developed to implement this recommendation, PO-RALG planned to continue the review process which was ongoing. D by D policy review was under Local Government Reform Programme III.

Through reviewing the implementation status, it was noted that, the recommendation was not implemented since the evidence of the review process of the D-by-D policy review was not availed. Therefore, this recommendation was not fully implemented because there was no evidence of the completion of the review process of D-by-D policy.

Recommendation 3: Conduct a needs assessment for the capacity needed for the implementation of FYDP-II and SDGs interventions at LGAs levels

As per the submitted implementation status, the recommendation was not implemented since there was no evidence for the consultation with responsible departments (Directorate of Education Administration, Division of Social Coordination, Regional Administration Division, and Local Government Division) to identify capacity gaps in terms of Human resources, financial resource, and equipment.

The recommendation that was partially implemented

Recommendation 4: Establish a consolidated system that will capture all sectoral data from LGAs to be used for monitoring the progress of implementation of development projects

As per the submitted implementation status, the recommendation was partially implemented as the system does not capture all needed data, and there was a delay from 2018 to 2022, when it was implemented.

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6.6   Specific Conclusion

Based on the analysis of the implementation status of the previously issued recommendations, the Audit concluded that the Ministry of Finance and Planning made some efforts, however such efforts were not adequate in the implementation of the issued recommendations. Similarly, PO-RALG did not make enough efforts to ensure that the recommendations were implemented.

The action plans which were put forward by both MoFP and PO-RALG were partially converted into actual actions for the implementation of the issued recommendations. This either resulted into the recommendations being implemented partially or not implemented at all.

Officials from the Ministries are advised to deploy more efforts to ensure that all recommendations are implemented according to the commitment that theMinistries made to CAG.

6.7   Specific Recommendations

Recommendation to the Ministry of Finance and Planning

The Ministry of Finance and Planning is urged to ensure that they devise mechanisms for the follow-up of all previously issued recommendations and ensure that all recommendations are implemented according to the planned actions.

Recommendation to the President's Office - Regional Administration and Local Government

The President's Office - Regional Administration and Local Government is urged to ensure that they devise mechanisms for the follow-up of all previously issued recommendations and ensure that all recommendations are implemented according to the planned actions.

CHAPTER SEVEN

FOLLOW-UP ON THE IMPLEMENTATION OF RECOOMENDATIONS ON THE PROVISION OF SEWAGE SERVICES IN URBAN AREAS

7.1 Background to the Audit

Performance Audit Report on the Provision of Sewage Services in Urban Areas was tabled before parliament in April, 2018 and the main audited entities were the Ministry of Water through Urban Water and Sanitation Authorities (UWSSAs) and the President's Office - Regional Administration and Local Government (PO-RALG).

The overall objective of the audit was to determine whether the provision of sewage services in urban areas by the Ministry of Water and Irrigation through Urban Water and Sanitation Authorities (UWSSAs) and PO-RALG through Local Government Authorities (LGAs) is adequately managed to prevent eruption of waterborne associated and sanitation related diseases to the community.

7.2 Audit Scope

The main audited entities were the President's Office - Regional Administration and Local Government and the Ministry of Water. The audit focused on assessing the activities undertaken by UWSSAs and LGAs on the provision of sewage services covering collection, transportation, treatment, and final disposal. It assessed the extent of access to sewerage services (level of sewerage coverage by the population), maintenance and expansion trends of the sewer networks. Also, it assessed implementation of mechanisms for providing on-site sanitation services for those not connected with sewer network. The audit covered a period of five financial years from 2012/13 up to 2016/17.

7.3 Main Audit Findings

(a) Inadequate Access to Sewerage Services in Urban Areas

The audit noted that, access to sewer network was still low and had not significantly improved over time because more than 70% of the urban dwellers lacked access to the sewer network. From the financial year

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2012/13 to 2016/17 the average access to sewer network had increased by at least 1.3% while the average population growth rate was 2.4%. UWSSAs allocated an average of 8.8% of their annual budget to support the expansion of the desired sewer infrastructures that included sewer network and fecal sludge treatment facilities. This was inadequate as it did not correspond to the increased demand caused by the increased population.

(b) Unsatisfactory Provision of On-site Sanitation Services by LGAs

The provision of onsite sanitation services by PO-RALG through Local Government Authorities was not done adequately. Analysis of auditors revealed that not all generated sewage was timely collected. This led to overflow of sewage from septic tanks in some of the streets especially from the commercial buildings and highly populated areas. It also accelerated illegal discharge of sewage to the environment especially during rainy seasons.

(c) Unsatisfactory Provision of Off-site Sanitation Services by LGAs

Inadequately functioning sewer networks indicated by the presence of sewer overflows due to increased frequency of sewer pipes blockage. Inadequate control or misuse of sewer systems and absence of coordination between LGAs and UWSSAs in controlling damage of the sewer network were the main causes of the poor functioning of the sewer network.

Most of the sewer networks were built between 1930's and 1970s, so they were old and dilapidated. Inadequate maintenance and siltation caused frequency blockage and collapse, and eventually resulted in overflows of sewage to the environment.

(d) Weak Coordination of Activities for Provision of Sewerage Services

Based on the observation on the low rate of expansion of sewage network, and the existence of the dilapidated sewer networks and Water Stabilization Ponds (WSPs), the Ministry of Water had not adequately fulfilled its responsibility in providing technical and financial support to UWSSAs. The Ministry of Water and PO-RALG did not have clear coordination and communication strategy for provision of sewage services activities. Thus, the Ministries had not established the effective coordination mechanism

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that would enable them to support UWSSAs and LGAs towards achieving their goals for the sustainable provision of sewage services in the country.

(e) Inadequate Monitoring and Evaluation of the Performance of UWSSAs and LGAs by the Ministry of Water and Irrigation and PO-RALG

The audit team noted that, PO-RALG did not have Key Performance Indicators for monitoring provision of on-site sanitation activities in its M & E plan. The audit noted further that PO-RALG key performance indicators and plans were mostly focused on water related issues and to some extent covered the issues of building onsite sanitation facilities such as toilets in the public institutions. As a result, collection, transportation and disposal activities were not adequately monitored.

7.4   Overall Audit Conclusion

The provision of sewage services in urban areas was not adequately done to prevent eruption of sanitation related diseases to the society. Over a time, the access to sewerage services had not significantly improved to match with the increased population. Sewer networks were increasing at a lower rate than that of the population growth, whereby in the four financial years 2012/13 to 2016/17 the average increase in sewer network and population growth rate stood at 1.3 and 2.5 respectively. In big cities like Dar es Salaam, the access to sewer network had decreased from 7.4 in the financial year 2012/13 to 4.2 in the financial year 2015/16. Thus, more than 70% of the population in urban areas were found to have no access to improved sewer networks.

7.5   Results of the Follow-up on the Implementation of the Recommendations

This part presents implementation status of issued recommendations to the Ministry of Water and PO-RALG on the performance audit on provision of sewage services in urban areas. Implementation status has been grouped into three categories, namely; *fully, partially or not implemented* recommendations. The details of the status of the implementation are explained in the following subsections.

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7.5.1 Overall Implementation of the Issued Recommendations

A total of nine (9) recommendations were issued in this audit and were all directed to the Ministry of Water[2]. The overall results of the follow-up of the implementation of the issued recommendations indicated that, out of nine (9) recommendations, two (2) recommendations were fully implemented, four (4) recommendations were partially implemented, and three (3) recommendations were not implemented. **Table 7.1** provides the level of implementation for all issued audit recommendations per the audited entity**.**

Table 7.1: Level of Implementation per the Audited Entity

Name of the Entity	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	**Partially Implemented**	**Not Implemented**	**Overtaken by Event**
Ministry of Water (MoW)	9	2	4	3	0
PO-RALG	-	-	-	-	-
Total	**9**	**2**	**4**	**3**	**0**

Source: Auditors' Analysis of Responses from Ministry of Water (2022)

Likewise, it was noted that out of the nine (9) recommendations, two (2) recommendations were in the planning category, three (3) recommendations were in the implementation/execution category, one (1) recommendation was in monitoring and evaluation, one (1) recommendation was in the coordination category, and two (2) recommendations were in the development category. **Table 7.2** provides the level of implementation for all issued audit recommendations per categories of recommendations.

Table 7.2: Level of Implementation per Category of Recommendations

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	**Partially Implemented**	**Not Implemented**	**Overtaken by Event**
Planning	2	1	1	0	0

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[2] The President's Office – Regional Administration and Local Government was not included as an auditee because the role of overseeing the rural and urban water projects was shifted to the newly established Rural Water Supply and Sanitation Agency (RUWASA)

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Implementation / Execution	3	0	2	1	0
Monitoring and Evaluation	1	0	1	0	0
Coordination	1	1	0	0	0
Development	2	0	0	2	0
Total	**9**	**2**	**4**	**3**	**0**

Source: Auditors' Analysis of Responses from Ministry of Water (2022)

Table 7.2 illustrates that, out of two (2) recommendations in the planning category, one (1) recommendation was fully implemented and one (1) recommendation was partially implemented. Also, out of the three (3) recommendations in the implementation/execution category, two (2) recommendations were partially implemented and one (1) recommendation was not implemented. Similarly, it is indicated that, one (1) recommendation in the monitoring and evaluation category was partially implemented, and one (1) recommendation in the coordination category was fully implemented. All two (2) recommendations in the development category were not implemented.

7.5.2. Details of Recommendations that were Fully Implemented

Recommendation 7: The Ministry of Water should ensure that Policies, Acts and Regulations related to sanitation are synchronized so as to avoid conflicts and duplications of responsibilities given to UWSSAs and LGAs as government key sanitation entities by national Policies and Acts

This recommendation required the Ministry of Water through Urban Water Supply and Sanitation Authorities to synchronize the policies, acts and regulations to avoid conflicts and duplication of efforts. In the action plan developed to implement this recommendation, the Ministry of Water planned to follow up on the implementation of GIZ findings.

Through reviewing the implementation status, it was noted that the Ministry of Water amended the National Water Policy of 2002_which was being finalized to take consideration and split the roles of sanitation service providers in rural and urban areas.

Furthermore, the establishment of the Rural Water Supply and Sanitation Authorities (RUWASSA) through Water Supply and Sanitation Act 2019 has also addressed the conflicting roles between urban and rural sanitation service providers. Through this establishment, it has been clear now that all UWSSAs will be responsible for provision of sanitation services in urban areas while RUWASSA will be responsible for provision of sanitation services in rural areas. The audit team is, therefore, satisfied by the implementation of this recommendation and concludes that the recommendation has been fully implemented by the Ministry of Water.

Recommendation 9: The Ministry of Water should develop mechanism to involve private sector in the provision of sewage services in urban areas

The recommendation required Ministry of Water to develop mechanism to involve private sector in the provision of sewerage services in urban areas. In the action plan developed to implement this recommendation, the Ministry of Water planned to work on the modality developed by the World Bank to involve private sector in the sanitation services.

Through the analysis of responses and documents submitted by the Ministry of Water, it was noted that there has been an engagement of private sector in urban areas in the provision of sanitation services. The private sector as private operators have been involved by registering sludge digester and trucks. The Ministry of Water has provided evidence showing the private sectors who have applied to operate trucks as private vehicles for sewerage services.

The Ministry of Water has also reported that Development Partners and Private sectors are expected to conduct a meeting for all stakeholders in the sanitation on how to implement the sanitation projects to meet the national goals. This is expected to increase more participation and raise awareness on the private sector's engagement in provision of sewerage services.

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The audit team is, therefore, satisfied by the implementation of this recommendation and concludes that the recommendation has been fully implemented by the Ministry of Water.

Details of Recommendations that were Partially Implemented

Recommendation 1: The Ministry of Water should ensure that UWSSAs develop comprehensive plans for the provision of sewerage services that include maintenance, rehabilitation and expansion of the sewer networks and waste water treatment infrastructure, taking into consideration the population growth in their areas of jurisdiction

The recommendation required Urban Water Supply and Sanitation Authorities through the Ministry of Water to develop comprehensive plans for provision of sewerage services by taking consideration the population growth in their areas of jurisdiction. In the action plans that was developed by the Ministry of Water to address this recommendation, the Ministry of Water planned to ensure that every planned water project includes sanitation services.

Through the analysis of responses and documents submitted by Ministry of Water, it was noted that some of the UWSSAs have projects that include activities of maintenance, rehabilitation and expansion of sewer networks. However, this has been a standalone activity and not a sustainable guidance and requirement for all of the UWSSAs. There are still no comprehensive plans at UWSSAs that include maintenance, rehabilitation and expansion of sewer networks.

The Ministry of Water has not indicated that the expansion of sewer networks is a service that needs to be included in the annual plans for the UWSSAs. Else, through discussions with officials from Ministry of Water, it was pointed out that most of the UWSSAs would rather consider expanding more network of clean water than for sewer because of the importance of the earlier.

The audit team was therefore in a conclusion that this recommendation has been partially implemented since the Ministry of Water has implemented only part of the recommendation.

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Recommendation 3: UWSSAs implement measures to enhance the operational efficiency of the waste stabilization ponds and ensure that the quality of effluent is improved as stipulated by the national standards for quality of effluent

The recommendation required Urban Water Supply and Sanitation Authorities through Ministry of Water to implement measures that will enhance the operational efficiency of the waste stabilization ponds and ensure the quality of effluent is improved as stipulated by the national standards for quality effluent. In the action plan that was developed by the Ministry of Water to address this recommendation, the Ministry of Water planned to include sanitation projects in the monitoring and evaluation parameters at the Ministry.

Analysis of responses and interviews held with officials at the Ministry of Water has indicated that the Ministry has issued a guideline to UWSSAs on the on-site and fecal sludge management guidelines that includes monitoring of the parameters on quality of effluent. This is one step towards enhancing the operational efficiency on management of quality of effluents.

However, the Ministry has not indicated how it is planning to ensure that there is compliance to the issued guidelines and other guidance with respect to the fact that there were guidelines and other guidance on the management of quality of effluents before issuing the current guideline. On the other hand, the Ministry has just reminded the auditors on the presence of checks by EWURA and UWSSAs Laboratories which were not effective based on the conditions pointed out in the main report.

The Audit Team was, therefore, in a conclusion that this recommendation has been partially implemented since the Ministry of Water has implemented only part of the recommendation.

Recommendation 4: Ministry of Water should ensure that collected funds from sewerage services are effectively utilised for improving the sewerage infrastructure including the waste stabilisation ponds

The recommendation required the Ministry of Water to ensure that collected funds from sewerage services are effectively utilized for improving the sewerage infrastructure including the waste stabilization ponds. The action plan developed by the Ministry planned to include the

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sanitation projects in the monitoring and evaluation parameters by the Ministry of Water.

Through the analysis of responses and documents submitted by the Ministry of Water, it was noted that the Ministry has not taken any new action in response to the matter, however it has recalled the practice of overall maintenance and operation of the systems which requires the collected funds to be used for maintenance and operations.

Furthermore, the Ministry also recalls that the funds from sanitation tariff do not suffice the implementation of sewer infrastructures, but the UWSSAs should effectively utilize the budget set for improving sewerage infrastructure. However, the Ministry has not indicated that it has provided any actions or instructions to UWSSAs on utilization of funds for sanitation projects in particular the funds for waste stabilization ponds.

The Audit Team was, therefore, in a conclusion that this recommendation has been partially implemented since Ministry of Water has implemented only part of the recommendation.

Recommendation 8: Ministry of Water should strengthen its mechanisms for monitoring and evaluating the performance of UWSSAs in the provision of off-site sewage services. The mechanisms should be used to conduct regular monitoring and provide timely feedback to the respective UWSSAs

The recommendation required the Ministry of Water to strengthen its mechanisms for monitoring and evaluating the performance of UWSSAs in the provision of off-site sewage services. The mechanism was expected to be used to conduct regular monitoring and provide timely feedback to the respective UWSSAs. The action plan developed by the Ministry planned to strengthen monitoring and evaluation as per the issued EWURA Guidelines for UWSSAs.

Through the analysis of responses and documents submitted by the Ministry of Water, it was noted that the Ministry is on the process of conducting data survey in the urban areas to identify the wastewater infrastructure which is available, need assessment and then will mobilize funds and arrange for regular monitoring and evaluating for wastewater performance.

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However, despite the efforts that was taken to conduct data survey in urban areas, the Ministry has not indicated if it has conducted any activity in relation to strengthening monitoring and evaluation of performance of UWSSAs, particularly, on the provision of off-site sewerage services which was the concern of the main audit.

The audit team was, therefore, in a conclusion that this recommendation has been partially implemented since the Ministry of Water has implemented only part of the recommendation.

Details of Recommendations that were Not Implemented

Recommendation 2: Ministry of Water should ensure that UWSSAs develop a well-established model for the allocation of financial resources between water supply and sanitation services in order to cater for both hardware and software capital requirements for on-site and off-site sanitation services

The recommendation required the Ministry of Water through Urban Water Supply and Sanitation Authorities to develop well-established model for allocation of financial resources between water supply and sanitation services which was expected to cater for both hardware and software capital requirements for on-site and off-site sanitation services. The action plan developed by the Ministry aimed to ensure that the Ministry and its implementing agencies in their annual budgets, they include the sanitation projects.

Through the analysis of responses and documents submitted by the Ministry of Water, it was noted that the Ministry has not implemented any action in response to the recommendation but rather it has provided notifications of several documents that contains matters relating to financial allocation model. Furthermore, the Ministry has pointed out the requirement that all UWSSAs which have sewer networks and wastewater treatment infrastructures prepare budget and plan the activities. However, these activities were existing before the audit, and therefore, the Ministry did not present any new action.

The Ministry has also pointed out the financing of construction of new sanitation projects for some UWSSAs in Nzega, Arusha and Dar es Salaam

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which is not a sustainable action which was supposed to be addressing the recommendation.

The audit team is, therefore, in conclusion that the recommendation has not been implemented by the Ministry of Water.

Recommendation 5: Ministry of Water should ensure that UWSSAs develop effective mechanisms for protecting public sewer networks including preventing disposal of solid materials into the sewer networks

This recommendation required Ministry of Water through UWSSAs to ensure that the UWASSAs develop mechanism for protecting public sewer networks including preventing disposal of solid materials into sewer networks. In the action plan developed by Ministry of Water to implement this recommendation, MoW indicated that it would issue directives to all UWSSAs to use concrete covers to public sewer networks, create awareness to the community and enhancement of existing laws.

The analysis of the responses and evidence submitted from the Ministry of Water noted that the Ministry has not issued the planned directives which were expected to be one of the effective means of addressing the recommendation. However, the Ministry has just recalled the consideration of protection during the design stage. The Ministry has also responded that most of the UWSSAs are using concrete/polymer manholes covers on sewer, however there is no evidence to show that the utilities are using such kind of materials as sewer covers.

Furthermore, the Ministry has responded that it has been creating awareness on the protection of sewer networks, however no report has been availed on the execution of such activity by the Ministry. The audit team is, therefore, in the conclusion that this recommendation has not been implemented by the Ministry of Water.

Recommendation 6: Ministry of Water should ensure that UWSSAs construct exclusive community onsite faecal sludge treatment plants that are cost-effective and efficient. These plants since they are community based will effectively reduce faecal sludge haulage costs for low-income households who are the majority in urban and peri-urban areas

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This recommendation required Ministry of Water through UWSSAs to ensure that the UWASSAs construct exclusive community onsite faecal sludge treatment plants that are cost-effective and efficient. In the action plan developed by Ministry of Water to implement this recommendation, MoW indicated that it will adopt the lesson of Mwanza to other UWSSAs in order to solve the problem of sanitation in peri-urban areas.

The analysis of the responses and evidence submitted by the Ministry of Water noted that the Ministry has not adopted this Mwanza model to other UWSSAs as indicated in its action plan. The model of Mwanza which was agreed to be the best model for both auditors and MoW has not yet been adopted by any other UWSSAs apart from Mwanza. In the update of implementation status from the Ministry, it has been indicated that the Ministry planned to instruct the LGAs to acquire more than one area for offsite grid sanitation system, however this has not been implemented as part of actions to address the recommendation and thus lowering costs of sanitation services to the community.

Furthermore, the Ministry has also started the preparation of guideline to regulate costs/fees per truck between private sector and the government. This is on progress and once it is completed it will address a part of the problem.

The audit team is, therefore, in the conclusion that this recommendation has not been implemented by the Ministry of Water.

7.6   Specific Conclusion

Based on the analysis of the implementation status of the previously issued recommendations, the audit concluded that Ministry of Water did not make adequate efforts in implementing the issued recommendations. The Ministry has implemented only part of the recommendations which were issued to them and leaving other recommendations only partially or not implemented. Despite the efforts that have been made to establish the Rural Water Supply and Sanitation Agency (RUWASA), more efforts are needed to ensure that the rural water projects are sufficiently managed because they present significant achievements on the management of water projects in rural areas. The Management of the Ministry is advised to deploy more efforts to ensure that all recommendations are fully implemented as they present valid and actionable recommendations.

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7.7   Specific Recommendations

Recommendations to the Ministry of Water

The Ministry of Water is urged to:

i. Ensure all issued recommendations are fully implemented; and

ii. Follow-up of implementation status of the remaining recommendations which were partially or not implemented at all and monitor their Implementation Status from time to time.

CHAPTER EIGHT

FOLLOW-UP ON THE IMPLEMENTATION OF RECOMMENDATIONS ON THE PROVISION OF SUPPORT SERVICES FOR SMALL AND MEDIUM ENTERPRISES

8.1 Background to the Audit

Performance Audit Report on the Provision of Support Services for Small and Medium Enterprises was tabled to the parliament of the United Republic of Tanzania in April, 2018. The overall objective of the audit was to assess whether support services for Small and Medium Enterprises (SMEs) are effectively planned, executed, and evaluated by the Ministry of Industry, Trade and Investments (MITI) and Small Industries Development Organization (SIDO) to promote the growth of SMEs in the country.

8.2 Audit Scope

The main audited entity was the Ministry of Industry, Trade and Investments (MITI) and the Small Industries Development Organization (SIDO). The audit focused on the formulation of strategies and needs identification, prioritization of SME needs, and coordination of key stakeholders at the planning level. In the implementation aspect, the audit examined the dissemination of services (rendering), coordination, supervision and mentoring of SMEs.

In the monitoring and evaluation aspect, the audit assessed the development and use of key performance indicators, performance reviews, and the extent to identify the challenges addressed and redressed by SIDO and the Ministry as well as the effective communication at the monitoring and evaluation level.

The audit covered five financial years from 2013/14 up to 2016/17 because this was the period during which the government emphasized industrialization initiatives. It also offered the perfect time to evaluate the extent to which the SMEs have evolved and changed to attain the overall government industrial development objective. Data were collected from seven Planning Authorities selected from the six geographical zones of Coastal, Lake, Eastern, Southern Highlands, Southern and Northern zones. The Planning regions selected were Arusha, Dar es Salaam, Singida, Kagera, Mbeya and Mtwara.

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8.3   Main Audit Findings

(a) Insufficient Growth of the SME Sector in Tanzania

The Audit noted that the SME sector was not growing at a satisfactory level as planned by the Ministry responsible for promoting the growth of SMEs. The sector is growing at 5.6% while the failure rate for SMEs is at eight percent, despite the increasing number of SMEs yearly. The sector contribution to employment was 40% below the target level of 60%. The overall sector contribution to GDP is estimated at 35% below the targeted level of 40%.

(b) Inadequate Strategic Planning for the Provision of Support Services to SMEs

Strategies developed by MITI did not adequately cover the goals of the SME policy which is the cornerstone for supporting the SME sector in the country. The strategic targets were skewed into two objectives only while leaving the five other objectives with a single or two set targets. The Ministry had only implemented six out of seven SME policy objectives. There still exists the risk of not reaching some objectives because the new strategic plan of the Ministry provides the strategic objectives skewed into three out of the seven SME policy objectives.

(c) Low Development Budgets for SMEs at Different Levels of Government

MITI and SIDO did not commit sufficient funds to develop SMEs. In the past four years, MITI spent only 16% of the total funds received for development spending for enhancing the development of SMEs. The funds for development have been declining year after year since the financial year 2013/14. On the other side, SIDO spends an average of TZS 14 billion per year and gives an average of 30% of its funds to developing SMEs. The five SIDO regional offices visited, which were the ultimate implementers of support services for SMEs, had received only 20% of the requested funds for development activities.

(d) Ineffective Implementation of Training Services to SMEs

The training support services expected to improve technical and business management skills are not adequate to sufficiently produce the desired output. The current performance indicates that the outreach of training services by SIDO was only seven percent for registered SMEs at SIDO. The outreach was only 0.4% considering the overall estimated number of SMEs in the country. The support services had not been effective in assisting SMEs to grow, graduate or sustain their business. Despite receiving training 24% of SMEs registered at SIDO have failed. While the average rate of collapse countrywide is eight percent the overall growth rate is 5.6%.

(e) Insufficient Development of Technologies for SMEs

The Technology Development Centers are using machines installed over 40 years ago for the production of machines demanded by SMEs in the recent market. The outdated machines cannot produce machines with competent technologies to compete with the recently imported technologies. The technology incubation centres currently being used to incubate innovative ideas in technologies and other categories of services are not sustainable.

They have indicated weak performance whereby from the financial year 2013/14 to 2016/17, the number of graduating ideas (commercialized) from incubation programs decreased from 165 to 24.

(f) Insufficient Management of Credit Facilities at SIDO

There was insufficient management of credit facilities at SIDO as it was experiencing a slow growth of its loan portfolio. In the past four years, the loan portfolio size combining both Regional Revolving Funds and National Entrepreneurship Development Funds grew by only nine percent equivalent to an average growth of two percent per annum.

There was rising demand for funding and making SIDO fail to meet the demand of SMEs in credit facilities. In the past four years, SIDO could not disburse 40% of the loans requested despite approving them due to the limited loan portfolio. The loan portfolio at SIDO is worn out by different factors including the significantly higher rate of amounts unpaid, increasing loan loss provisions, and loan write-offs. For example, in the past four years, the loan loss provisions have increased by 129% rising from TZS 860 million

in the financial year 2013/14 to TZS 1.9 billion during the financial year 2016/17.

(g) Weak system to Monitor and Evaluate the Provision of SMEs Support Services

The current system for tracking and supervising the provision of support services was not working adequately. The number of monitoring and supervision visits was not adequate with MITI conducting only 25% of the required visits and SIDO conducting only 36% of the required visits. The few visits conducted were not effectively dealing with the key matters in the visits and did not provide the corrective actions for the challenges observed.

The support services provided were not being followed up on to track SME performance. The Ministry did not conduct important surveys to determine the SMEs' profile and prepare strategies and plans consistent with the current demand of SMEs. SIDO did not conduct follow up to SMEs after the provision of support services. Current situations indicated that 67% of the SMEs were rarely visited by SIDO after receiving any of their services.

8.4   Overall Audit Conclusion

The small and Medium Enterprises sector in Tanzania is not growing satisfactorily to enable its significant contribution to the economy to the level that will enable the country to become a semi-industrialized country by 2025. The activities for the provision of support services for SMEs are not effectively planned, executed, coordinated, and evaluated by the Ministry of Industry, Trade, and Investments and SIDO to promote the growth of SMEs in the country. The SMEs sector has been experiencing higher rates of failure /collapse than the rate of growth. For the past four years, the average failure rate and growth rate stood at 8 and 5.6 per cent respectively. The sector is significantly characterized by new entrants who are highly unsustainable and dynamic.

8.5 Results of the Follow-up on the Implementation of Recommendations

This part presents the implementation status of the issued recommendations to the Ministry of Industry, Trade and Investments, and SIDO on the Performance Audit on the Provision of Support Services for Small and Medium Enterprises. Implementation status has been grouped into three

categories namely; *fully, partially or not implemented* recommendations. The details of the status of the implementation are explained in the following subsections.

8.5.1 Overall Implementation of the Issued Recommendations

A total of fourteen (14) recommendations were issued in this audit, three (3) recommendations were directed to the Ministry of Industry, Trade and Investments, and eleven (11) recommendations were directed to SIDO. The overall follow-up results on the implementation of the issued audit recommendations indicated that out of fourteen (14) recommendations, three (3) recommendations were not implemented, one (1) recommendation was fully implemented, and ten (10) recommendations were partially implemented. **Table 8.1** provides the level of implementation for all issued audit recommendations per the audited entity**.**

Table 8.1: Level of Implementation per the Audited Entity

Name of the Entity	Total Number of Issued Recommendat ions	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtak en by Event
MIIT	3	0	3	0	0
SIDO	11	1	7	3	0
Total	**14**	**1**	**10**	**3**	**0**

Source: Auditors' Analysis of Responses from MIT and SIDO (2022)

It was further noted that out of the fourteen (14) recommendations, four (4) recommendations were in the planning category, five (5) recommendations were in the monitoring and evaluation category, one (1) recommendation was in the coordination category, and four (4) recommendations were in the development category. **Table 8.2** provides the level of implementation for all issued audit recommendations per the categories of recommendations.

Table 8.2: Level of Implementation per Category of Recommendations

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	4	0	3	1	0
Implementation/ Execution	0	0	0	0	0
Monitoring and Evaluation	5	1	3	1	0
Coordination	1	0	1	0	0
Development	4	0	3	1	0
Total	**14**	**1**	**10**	**3**	**0**

Source: Auditors' Analysis of Responses from MIT and SIDO (2022)

Table 8.2 indicates that, out of the four (4) recommendations in the planning category, three (3) recommendations were partially implemented and one (1) recommendation was not implemented. Also, out of the five (5) recommendations in the monitoring and evaluation category, one (1) recommendation was fully implemented, three (3) recommendations were partially implemented, and one (1) recommendation was not implemented. One (1) recommendation in the coordination category was partially implemented. It is further shown that, out of four (4) recommendations in the development category, three (3) recommendations were partially implemented and one (1) recommendation was not implemented.

8.5.2 Results of Follow-Up of Recommendations Issued to the MITI

The results on the implementation of the issued audit recommendations to the MITI indicated that all three (3) recommendations were partially implemented. **Table 8.3.** indicates the overall implementation status per category of recommendations for recommendations issued to the MITI.

Table 8.3: Level of Implementation per Category of Recommendations Issued to the MIT

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	0	0	0	0	0
Implementation/Execution	0	0	0	0	0
Monitoring and Evaluation	1	0	1	0	0
Coordination	0	0	0	0	0
Development	2	0	2	0	0
Total	**3**	**0**	**3**	**0**	**0**

Source: Auditors' Analysis of Responses from MITI, (2022)

Table 8.3 illustrates that there was one (1) recommendation in the monitoring and evaluation category which was partially implemented. Also, all the two (2) recommendations in the development category were partially implemented. The following subsection provides details of recommendations issued to the MITI.

Details of Recommendations that were Partially Implemented

Recommendation 1: Develop a mechanism for coordinating Stakeholders dealing with SMEs during development. The Mechanism should assist in identifying SMEs' needs cutting across all sectors and be incorporated into their strategies for the provision of SMEs support services

This recommendation required MITI to develop a mechanism for coordinating Stakeholders dealing with SMEs during development. The Mechanism was aimed at helping in identifying the SMEs' needs cutting across all sectors for being incorporated into their strategies on the provision of SMEs support services.

In the action plan developed to implement this recommendation, the MITI planned to start developing the coordination; recently the Ministry conducted a study on the "Coordination Framework" in collaboration with Financial Sector Development Trust (FSDT) to develop a coordination

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mechanism with all stakeholders in the SMEs sector which was expected to be completed in 2019.

In the review of action taken for the implementation of this recommendation, it was noted that the coordination framework report had been completed and recommended the MITI to ignite establishing a mandated organ for coordinating SME activities across all sectors in the country. Further, the formation of a sole and mandated organ to coordinate SME activities across all sectors in the country is one proposal given in the reviewed SMEs. The intended organ was expected to identify and sort out SMEs' needs. Despite the efforts by MITI, the report was not distributed to all key stakeholders for implementation and there was no evidence that MITI identified its key stakeholders relating to support to SMEs.

Therefore, this recommendation was partially implemented because its implementation was at the initial stage and the output for the coordination was yet to be realized. Also, dissemination of the report to stakeholders has not been done.

Recommendation 2: Establish a sustainable model for funding the SME development activities and the mobilized funds for SME development

This recommendation required MITI to establish a sustainable model for funding SME development by ensuring there is adequate and sustainable funding, especially to the Department of SME which is the main coordinator of the SME sector. In the action plan developed to implement this recommendation, the MITI was to establish a model for financing SME activities. The MITI reported collaborating with Financial Sector Development Trust (FSDT) in the study and development of a financial framework that will be part of the efforts toward establishing a sustainable model for funding the SME sector.

Through reviewing the implementation status as of June 2022, and the submitted evidence, it was found that the Ministry was still working on several projects to increase the access of SMEs to capital, including the National Entrepreneurship Development Fund (NEDF), Credit Guarantee Scheme, Revolving Fund, and SANVN (Sida, Azania Bank, NSSF, VETA, NEMC).

The Government also periodically adds further funding to the National Entrepreneurship Development Fund (NEDF) to support its activities. It released TZS 1,597,886,000 during the fiscal year 2020/21 to increase the fund portfolio, which increased to TZS 9.8 billion in 2020. The government provided TZS 100 million to augment the fund for the fiscal year 2021/22. The efforts made to disperse cash were insufficient until an action plan, implementation, and follow-up of its actions were given. Additionally, funding was cut immediately following the initial financing attempt. Therefore, this recommendation was partially implemented because the funding model has not been included in the operation plan and strategic plan.

Recommendation 3: Strengthen its capacity to oversee the SMEs sector in the country by effectively tracking the sector growth through surveys and other means of evaluation and taking collective actions whenever the risks of not meeting policy objectives are identified

This recommendation required MIT to strengthen its capacity to oversee the SME sector by tracking sector growth by surveying and other evaluation means to meet policy objectives. In action to it, MITI was strengthening a system of Monitoring and evaluation of the SME sector. Also, stated that the Ministry requested more funds for the financial year 2018/19 to finance M&E activities for the SMEs Sector.

The MITI is improving its ability to supervise the SME sector, and the Ministry has made several measures to improve its monitoring of SIDO, according to the audit mentioned in the evaluation taken to the suggestion. For instance, the MITI frequently monitors and evaluates NEDF activities. In the regions of Shinyanga and Tabora as well as Manyara, monitoring visits for the fiscal year 2021/22 were carried out. Despite MITI having completed M&E, not all areas had this advice implemented, and the country's performance oversight implementation system has not yet been developed.

Therefore, the recommendation was partially implemented since the recommendation required MITI to strengthen the M&E for the country concerning SME support and also to conduct a survey and evaluation to identify risk-based areas for improvement. Also, MITI did not provide evidence for planned M&E in composition to timeliness and coverage.

8.5.3 Results of Follow-up of Recommendations Issued to SIDO

The results on the implementation of the issued audit recommendations to the SIDO indicated that out of eleven (11) recommendations, one (1) recommendation was fully implemented, seven (7) recommendations were partially implemented, and three (3) recommendations were not implemented. **Table 8.4.** indicates the overall implementation status per the categories of recommendations for the recommendations issued to the SIDO.

Table 8.4: Level of Implementation per Category of Recommendations Issued to the SIDO

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	4	0	3	1	0
Implementation/Execution	0	0	0	0	0
Monitoring and Evaluation	4	1	2	1	0
Coordination	1	0	1	0	0
Development	2	0	1	1	0
Total	**11**	**1**	**7**	**3**	**0**

Source: Auditors' Analysis of Responses from SIDO (2022)

Table 8.4 indicates that, out of the four (4) recommendations in the planning category, three (3) recommendations were partially implemented and one (1) recommendation was not implemented. Also, out of the four (4) recommendations in the monitoring and evaluation category, one (1) recommendation was fully implemented, two (2) recommendations were partially implemented, and one (1) recommendation was not implemented. One (1) recommendation in the coordination category was partially implemented. It is further indicated that out of the two (2) recommendations in the development category, one (1) recommendation was partially implemented and one (1) recommendation was not implemented.

Details of Recommendations that were Not Implemented

Recommendation 1: Develop a proper mechanism for collecting and analyzing SMEs' needs assessments that guarantees consideration of all needs of SMEs in different sectors, stakeholders, and from different localities

This recommendation required SIDO to develop a proper mechanism for collecting and analyzing SMEs' needs assessments that guarantees consideration of all needs of SMEs in different sectors, stakeholders, and from different localities. In the action plan developed to implement this recommendation, SIDO planned to consult the MITI on the availability of a mechanism for collecting and analyzing SMEs' needs assessments, also, to develop tools and instruments to be used in collecting and analyzing SMEs' needs.

Through reviewing the implementation status, it was noted that as of June 2022, SIDO in collaboration with the International Finance Corporation (IFC) was developing a system to be used for recording and tracking SME information. The system would allow key in the intervention provided and all information from SMEs including gaps and challenges to be used for analysis and the basis for designing an intervention.

However, through the verification at SIDO it was noted that, the developed system was not operational. Similarly, it was further noted that there was no Memorandum of Understanding, project document or contract to indicate the collaboration between IFC and SIDO in developing such a system. Therefore, this recommendation was not implemented since SIDO did not finalize to development of any mechanism for the management of the SMEs' needs to improve production.

Recommendation 5: Strengthen the incubation program in SIDO regional offices to enable them to effectively recruit competent ideas and sustainably develop them so that they can produce modern technologies or products that will add value to the SMEs

This recommendation required SIDO to strengthen the incubation program in SIDO regional offices to enable them to effectively recruit competent ideas and sustainably develop them so that they can produce modern technologies or products that would add value to the SMEs.

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In the action plan developed to implement this recommendation, SIDO planned to strengthen the incubation program, and funding for spreading the services to regions using the budget for the financial year 2018/19. However, it was noted that, as of June 2022, SIDO developed the incubation program in six regions with 29 incubates. These incubate were linked with knowledge-based institutions like Universities, Tanzania Commission for Science and Technology (COSTECH) and Tanzania Industrial Research and Development Organization (TIRDO) and 18 incubators linked with COSTECH) and managed to obtain grants. In addition, it was noted that these programs had not provided the incubates with modern and competent ideas and SIDO did not provide the names of the incubates.

Therefore, this recommendation was not implemented because SIDO did not provide evidence that the incubates were provided with modern and competent ideas.

Recommendation 8: Conduct efficient monitoring and evaluation of the activities for the providing of support services to SMEs and ensure reports are shared with all key stakeholders

This recommendation required SIDO to efficiently monitor and evaluate all activities for the provision of services to SMEs and report them to key stakeholders. In the action plan developed to implement this recommendation, SIDO planned to share the results of the monitoring and evaluation works with all key stakeholders to keep them informed starting March, 2019.

Through reviewing the implementation status, it was noted that, as June 2022, the results for the evaluations of SIDO services of Corporate Strategic Plan (CSP VI) (2018/19 to 2021/22) were shared with all key stakeholders such as the Ministry of Investment Trade and Marketing, Academic and Public institutions and Private sectors. However, there was no evidence to support that SIDO reviewed its strategic plan; also, there were no any report, letters or meeting minutes to indicate that the results were shared with all stakeholders. Therefore, this recommendation was not implemented by SIDO because no reports for monitoring and evaluation were available.

Details of Recommendations that were Partially Implemented

Recommendation 2: Ensure activities for the provision of support services to SMEs are included in their strategic and operational plans. The plans should be communicated to all regional offices and ensure that they are prioritized

This recommendation required SIDO to ensure SMEs' support services were included in their strategic and operational plans to enhance the SME's consideration for improvement. Also, SIDO was required to communicate with the regional offices to ensure that prioritization to inclusion in the plans was effectively done. In the action plan developed to implement this recommendation, SIDO planned to instruct all planning centres to revisit their plans to ensure elements of provision of support were included as of May, 2018.

Through the review of the implementation status, it was noted that, as of June, 2022, SIDO managed to develop its Corporate Strategic Plan (CSP VI) (2018/19 – 2021/22) which included the objectives such as improving basic infrastructure for Micro-Small and Medium Industries (MSMIs,) to improve technology Development for MSMIs, to improve marketing activities, to facilitate knowledge and business management skills by June, 2022 and to facilitate SMEs access of finance. Similarly, Swedish International Development Cooperation Agency (Sida) has developed operational plans that have accommodated and prioritized support services for SMEs.

Therefore, this recommendation was partially implemented, because SIDO managed to prepare a strategic plan but there was no evidence to support that it was communicated to regional offices.

Recommendation 3: Strengthen its Industrial Cluster Model by Increasing the number of key stakeholders participating in the program including Regulatory bodies and designing a sustainable funding model to support the development of clusters which will include all key services for SMEs in one locality

This recommendation required SIDO to strengthen the available industrial cluster model through the involvement of key stakeholders to participate in the program, which included regulatory bodies and was required to establish a sustainable funding model to support the development of the clusters,

which would include all key services for SMEs. In the action plan developed to implement this recommendation, SIDO planned to adopt the triple helix model and evaluate it after one year following its completion.

Through the review of the implementation status, it was noted that, as of June, 2022, SIDO only developed an industrial cluster manual to support the improved triple helix model. Furthermore, from the year 2019 following the improved triple helix model, there was no evidence to indicate that SIDO involved key stakeholders such as the Tanzania Bureau of Standards (TBS), Tanzania Food and Drugs Authority (TFDA), Tanzania Revenue Authority (TRA), TanTrade, utility agencies, Advocacy associations but only involved Regional Administrations, Ministry, Academia during the implementation of the model.

This recommendation was partially implemented because SIDO adopted a triple-helix model for industrial clusters without involving other important stakeholders like the Tanzania Bureau of Standards (TBS), Tanzania Food and Drugs Authority (TFDA), Tanzania Revenue Authority (TRA), TanTrade, utility agencies, and advocacy associations.

Recommendation 4: Strengthen the Capacity of Technology Development Centers (TDCs) by equipping them with modern machines and staffing them with diversified skills to enable staff to carry out innovative works and produce quality products to match and compete with the current demand for modern technologies

This recommendation required SIDO to strengthen the capacity of TDSs by equipping them with modern machines and staff of diversified skills to enable the innovation and quality of products based on modern technologies.

In response to this recommendation, SIDO planned to conduct a situation analysis to understand the status and need of TDCs in terms of Technology, human resources, market, and financial requirements and planned to conduct it in the financial year of 2018/19.

The audit analysis of the status of implementation of SIDO as of June 2022, revealed that the situation analysis for seven TDCs was conducted, and the gaps that were established in four TDCs—Shinyanga, Lindi, Kigoma, and Iringa—were outfitted with brand-new, cutting-edge equipment up to June

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2022. The procurement of the cutting edge for two TDCs of Kilimanjaro and Mbeya is now underway.

The audit was not provided with evidence of the procured machines to identify their capacity and also it was not provided with evidence of newly recruited engineers and their allocations to these TDCs.

Therefore, this recommendation was partially implemented because SIDO procured machines for only four TDCs out of seven TDCs, while the required machines were supposed to be in all 25 regions. Also, only two engineers have been recruited, and thus they were not sufficient to cover all 25 regions of Tanzania.

Recommendation 6: Develop and strengthen the capacity of Business Development Service (BDS) providers and Business Associations (BA) capacity to deliver support services competently and effectively to SMEs on behalf of SIDO

This recommendation required SIDO to develop BDS providers and Business Association to effectively deliver support services to SMEs on behalf of SIDO. This was under laid from the identified reason for inadequate training to SMEs which had insufficient human resources to conduct training.

In response to this recommendation, SIDO planned to conduct mapping to establish the status of Business Development Services (BDS) providers, develop capacity development models, especially curriculum and prepare proposals for funding to execute capacity development models.

The audit reviewed the action taken to the recommendation and noted that SIDO updated the database for BDS from 90 BDS to 199 BDS. But SIDO did not develop a capacity development model or curriculum to facilitate the trainers during the training. However, SIDO did not provide evidence of the prepared mechanism for funding the training or proposed curriculum.

So, this recommendation was partially implemented because SIDO only succeeded to map BDS but not Business Associations. Additionally, SIDO did not produce a training model to serve as a reference for the instructors. The audit insisted on identifying its status and noticed that no fund had been allocated for capacity development, SIDO had not created a specific

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BDS curriculum, and there was no record of a report on the BDS that had been carried out by the recognized BDS providers.

Recommendation 7: Strengthen their Monitoring Mechanism to enable Performance Measurement of their activities

This recommendation required SIDO to strengthen the monitoring mechanism to enable performance measurement of their activities.

In response to this recommendation to that SIDO planned to establish Monitoring and Evaluation systems which would be strengthened to ascertain provision of support services to SMEs is appropriately covered.

The audit team analysis of the implementation status of this recommendation as of June, 2022, noted that SIDO has developed monitoring guidelines for tracking the performance of all services provided to SMEs. However, the audit noted that SIDO was supposed to strengthen its monitoring mechanisms and not only develop the guidelines.
Therefore, this recommendation was partially implemented because SIDO simply created a monitoring guideline and there was no evidence provided that indicates that the monitoring mechanism was strengthened.

Recommendation 9: Develop more explicit monitoring and evaluation mechanisms with clearly and well-stated and non-overlapping key performance indicators linked to the growth of SMEs

This recommendation required SIDO to develop a more explicit M&E mechanism that includes clear KPIs to enhance the growth of the SMEs. In their response to the implementation of this recommendation, SIDO planned to review M&E mechanisms to reflect SMART indicators.

In the review of the action taken by SIDO as of June, 2022, the audit noted that M&E mechanisms were reviewed and were SMART as indicated to SIDO CSP VI and VII. However, the audit noted through the review of the Corporate Strategic Plan VII, that there was no evidence that SIDO developed more explicit monitoring and evaluation mechanisms with clearly and well-stated and non-overlapping key performance indicators linked to the growth of SMEs.

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Therefore, this recommendation was partially implemented because although SIDO developed KPIs no evidence that SIDO developed more explicit monitoring and evaluation mechanisms with clearly and well-stated and non-overlapping key performance indicators linked to the growth of SMEs.

Recommendation 10: Review the administration on its performance indicators by setting realistic and more Attainable indicators and strengthening its follow-ups and verification in regional offices

This recommendation required SIDO to review its Key Performance Indicators (KPIs) to improve them by making them realistic and attainable to strengthen its follow-up and verifications in regions. This would be attained by ensuring that there is a timeframe for the Implementation of Indicators and comprehensive performance measures.

In action to that SIDO planned to include plans that would have SMART[i] performance indicators, follow-ups, and verification mechanisms. The audit review of the implementation status as of June, 2022 noted that the organization had reviewed its performance indicators and improved for the effective realization of the intended outcome as shown in CSP VII.

The audit review of the SIDO Corporate Strategic Plan VII of 2022/23 – 2026/27 revealed that SIDO has developed the outcome indicators unlike in the corporate strategic plan of 2017/18-2021/22. This recommendation was partially implemented primarily because SIDO plans to start following up on the implementation of the outlined KPIs in 2022/23.

Recommendation 11: Establish a strong mechanism for making follow-ups on the achievement of performance indicators and establish whether they are meeting desired standards and overall objectives

This recommendation required SIDO to establish a mechanism for follow-up to achieve KPIs. Also, by improving the number of follow-ups annually. In the submitted response SIDO planned to review the follow-up mechanism test to establish its effectiveness and ability to track the realization of intended outcomes.

In the review of the action taken by SIDO as of June 2022, the audit noted that the organization reviewed its performance indicators and improved for

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the effective realization of the intended outcome as shown in CSP VII. However, there was no evidence submitted to establish whether they were meeting the desired standards and overall objectives.

Therefore, this recommendation was partially implemented because SIDO did not provide evidence of the number of follow-ups conducted to measure whether they are meeting the desired objectives.

8.6   Specific Conclusion

The overall conclusion of this follow-up audit is that the actions taken by Audited Entities in response to the previously issued performance audit recommendations have to some extent addressed the issues to which the recommendations were made. Generally, it is indicated by the follow-up audit results that almost 21% (more than quarter) of the issued recommendations were not implemented. The audit found out that inadequate implementation of the issued recommendations is mainly caused by various factors. Generally, these factors which were observed to contribute to the insufficient implementation of the audit recommendations included new strategic plan of the Ministry that provides the strategic objectives being partially skewed with the policy objective, SIDO regional offices were inadequately funded, support services had not been effective in assisting SMEs to grow, graduate or sustain their business and weak system to Monitor and Evaluate the Provision of SMEs Support Services.

Because the issued audit recommendations offer sound and practical answers to the numerous problems that impact their performance on the Support Services for Small and Medium Enterprises, the Management of the Ministry of Industry and Trade and that of SIDO need to exert more efforts to ensure that all recommendations are adequately implemented.

8.7   Specific Recommendations

Recommendation to the Ministry of Industry, Trade and Investments (MITI)

The Ministry of Industry, Trade and Investment is urged to ensure that they devise mechanisms for the follow-up of all previously issued recommendations and ensure that all recommendations are implemented according to the planned actions.

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Recommendation to the Small Industries Development Organization (SIDO)

The Small Industries Development Organization is urged to ensure that they devise mechanisms for the follow-up of all previously issued recommendations and ensure that all recommendations are implemented according to the planned actions.

FOLLOW-UP ON THE IMPLIMENTATION OF RECOMMENDATIONS ON THE MANAGEMENT OF CONSTRUCTION ACTIVITIES ON IRRIGATION PROJECTS

9.1 Background to the Audit

Performance Audit Report on the Management of Construction Activities on Irrigation Projects was tabled to the parliament of the United Republic of Tanzania in April, 2019. The overall objective of the audit was to assess whether the National Irrigation Commission (NIRC) effectively manages the pre-construction and construction works of irrigation projects to ensure sustainable availability of irrigation water.

Specifically, the audit aimed at assessing whether NIRC effectively planned and carried out feasibility studies and ensures its results are applied while designing irrigation projects, preparing specifications for tender documents and ensure the tendering procedure are done according to the set regulations and finally, whether construction of irrigation projects was done as per required specifications, cost and time.

9.2 Audit Scope

The main audited entities were the Ministry of Agriculture and the National Irrigation Commission. The audit considered different activities performed by the National Irrigation Commission in managing the construction activities of irrigation projects in the aspect of feasibility study, designing, tendering process and construction. The audit covered Tanzania Mainland whereby five out of eight irrigation zones, namely; Morogoro, Mbeya, Mtwara, Kilimanjaro and Mwanza, were randomly selected.

This audit focused only on the Small-Scale Irrigation Development Project (SSIDP) because during the audit period, SSIDP was the only project with sub- projects (schemes) that operated countrywide. SSIDP was divided into batches one to three to accommodate implementation of loan agreement funds that were released in batches.

The Audit covered a period of four financial years from 2014/15 to 2017/18. This four years' time-frame was selected since it is the duration within

which batch one and batch two of SSIDP sub-projects were supposed to be completed.

9.3   Main Audit Findings

(a) Inadequate Planning

Planning for feasibility studies was not sufficiently done. For the financial years of 2014/15, and 2015/16, the irrigation zones of Morogoro, Mwanza, and Mbeya did not plan for conducting feasibility studies. Meanwhile, Mtwara and Kilimanjaro irrigation zones planned to conduct 64 and 8 feasibility studies respectively but all these plans were not implemented.

(b) Inadequate Implementation of Feasibility Study Results

Similar, there was inadequate implementation and use of the feasibility study's results in designing of irrigation schemes. This audit found that about 17 out of 20 of reviewed irrigation work was done without or with partial use of feasibility study results.

(c) Weaknesses in Monitoring

There were inadequate mechanisms to monitor tender evaluation and awarding processes. This was highly attributed by inadequate coordination mechanisms between NIRC and Local Government Authorities (LGAs) when selecting contractors for constructing irrigation projects. This contributed to selection of contractors who could not implement their work accordingly.

(d) Inadequate Time and Cost Control

There were weaknesses in time and cost control in the execution of irrigation projects. During the period under review, 40% of constructed projects experienced cost overruns, while 76% experienced delays in completion.

(e) Delay in Completion of Irrigation Projects

There were delays in completion of irrigation Projects whereby completion period varied from one project to another. 76% of all the reviewed irrigation projects were completed with delays. Delays noted were caused by many

factors such as Contractor's problems; Unrealistic designs; improper construction schedule and delayed payments to contractors.

9.4   Overall Audit Conclusion

The Ministry of Agriculture through the National Irrigation Commission has not effectively managed irrigation construction works across the country. There is no harmonized monitoring mechanism between NIRC and Local Government Authorities (LGAs) when procuring contractors for irrigation. The supervision role of NIRC on the construction of irrigation projects is not adequate. Most of the constructed irrigation works are deviating from the required specification, cost and completion time.

Also, there is inadequate technical/supervisory capacity in the LGAs. For instances, some districts do not have professional irrigation or agricultural engineers to supervise the irrigation construction projects.

9.5   Results of the Follow-Up on the Implementation of Recommendations

This part presents implementation status of the issued recommendations to the Ministry of Agriculture (MoA) and the National Irrigation Commission on the performance audit on the management of construction activities on irrigation projects. Implementation status has been grouped into three categories namely; *fully, partially or not implemented* recommendations. The details of the status of the implementation are explained in the following subsections.

9.5.1 Overall Implementation of the Issued Recommendations

A total of seven (7) recommendations were issued in this audit, two (2) recommendations were directed to the Ministry of Agriculture (MoA) and five (5) recommendations were directed to the National Irrigation Commission (NIRC). The overall follow-up results on the implementation of the issued audit recommendations indicated that out of seven (7) recommendations, four (4) recommendations were partially implemented and three (3) recommendations were not implemented. **Table 9.1** provides the level of implementation for all issued audit recommendations per the audited entity**.**

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Table 9.1: Level of Implementation per the Audited Entity

Name of the Entity	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
MoA	2	0	2	0	0
NIRC	5	0	2	3	0
Total	**7**	**0**	**4**	**3**	**0**

Source: Auditors' Analysis of Responses from MoA and NIRC (2022)

On the other hand, it was noted that out of the seven (7) recommendations, two (2) recommendations were in the planning category, one (1) recommendation in the implementation category, two (2) recommendations were in monitoring and evaluation category, one (1) recommendation was in development category, and one (1) recommendation was in coordination category. **Table 9.2** provides the level of implementation for all issued audit recommendations per categories of recommendations.

Table 9.2: Level of Implementation of Issued Recommendations per Category of Recommendations

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	2	0	1	1	0
Implementation/ Execution	1	0	1	0	0
Monitoring and Evaluation	2	0	1	1	0
Coordination	1	0	1	0	0
Development	1	0	0	1	0
Total	**7**	**0**	**4**	**3**	**0**

Source: Auditors' Analysis of Responses from MoA and NIRC (2022)

Table 9.2 indicates that, out of two (2) recommendations in the planning category, one (1) recommendation was partially implemented and one (1) recommendation was not implemented. Also, one (1) recommendation in the implementation/execution category was partially implemented. Likewise, out of the two (2) recommendations in the monitoring and evaluation category, one (1) recommendation was partially implemented and one (1) recommendation was not implemented. It is further indicated that, one (1) recommendation in the coordination category was partially

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implemented and one (1) recommendation in the development category was not implemented.

9.5.2 Results of Follow-Up of Recommendations Issued to the Ministry of Agriculture

The results on the implementation of the issued audit recommendations to the Ministry of Agriculture indicated that, all the two (2) recommendations were partially implemented. **Table 9.3.** indicates the overall implementation status per category of recommendations for recommendations issued to the Ministry of Agriculture.

Table 9.3: Level of Implementation per Category of Recommendations Issued to the Ministry of Agriculture

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	1	0	1	0	0
Implementation/Execution	0	0	0	0	0
Monitoring and Evaluation	0	0	0	0	0
Coordination	1	0	1		0
Development	0	0	0	0	0
Total	**2**	**0**	**2**	**0**	**0**

Source: Auditors' Analysis of Responses from the Ministry of Agriculture (2022)

Table 9.3 indicates that, one (1) recommendation in the planning category was partially implemented and one (1) recommendation in the coordination category was also partially implemented. The following subsection provides details of recommendations issued to the Ministry of Agriculture.

Details of Recommendations that were Partially Implemented

Recommendation 1: The Ministry of Agriculture through NIRC should develop a plan and liaise with the Ministry of Finance and Planning as well as donor partners so as to ensure sustainable funds are available for the approved projects in order for the projects to be implemented to their completion

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This recommendation required the Ministry of Agriculture to develop plan and liaise with the Ministry of Finance and Planning (MoFP) to ensure sustainable funding by the MoFP and the National Irrigation Commission for the irrigation projects which are being implemented by the Ministry of Agriculture and the National Irrigation Commission. In the action plan developed to implement this recommendation, the Ministry of Agriculture planned to hold meetings and discussions with MoFP and development partners.

During the review of the implementation status, it was noted that the Ministry of Agriculture through the National Irrigation Commission developed a National Irrigation Master Plan whereby 560,230 hectares of irrigation land has been planned to be developed. To cater for the irrigation projects' budget gap, the Ministry of Agriculture developed a proposal and submitted to MoFP for financing, and thereafter submitted the proposal to the development partners.

Interviews held with the officials from the Ministry of Agriculture indicated that the Ministry of Agriculture and National Irrigation Commission developed a write up and proposals for requesting funds and MoA had submitted them to the Ministry of Finance and Planning for approval. Furthermore, the Ministry of Agriculture has committed funds for implementing 73 irrigation projects for the next 10 years.

The Ministry further responded that NIRC has prepared feasibility studies for projects to be implemented and submitted them to the Ministry of Finance and Planning and the development partners. Further to that, the Commission had a meeting with Development Partner (BADEA) on irrigation projects that would be implemented.

Furthermore, MoA responded that in order to bridge this budget gap, MoA through the NIRC always develop project proposals and submit them to MoFP and Donors. For the financial year 2020/21, 16 Irrigation Project Proposals were developed and submitted to MoFP and Development Partners for financing the identified irrigation projects.

However, despite developments made by the Ministry of Agriculture through NIRC, MoA did not provide copies of the irrigation projects' write-ups or proposals that were prepared and submitted to MoFP to support their

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position. Also, MoA did not provide evidence of the meetings held with Development Partners as detailed in their responses. Hence, this recommendation was considered as unsatisfactorily partially implemented.

Recommendation 2: The Ministry of Agriculture should establish a coordination mechanism that will enhance NIRC and LGAs to cooperate in all stages when implementing Irrigation Projects

The recommendation required the Ministry of Agriculture to establish a coordination mechanism that would enhance NIRC and LGAs to cooperate when implementing the irrigation projects. In the action plan developed to implement this recommendation, the Ministry of Agriculture planned to hold meetings with NIRC and LGAs.

The Ministry responded that LGAs were involved in the implemented projects from initial feasibility studies to the implementation stage. However, the review of responses submitted by the Ministry of Agriculture through NIRC showed that NIRC has formed a task force to coordinate with LGAs when implementing the irrigation projects.

Despite the provision of the response that NIRC had held meetings with LGAs when implementing the irrigation projects including forming the task force to solicit NIRC's challenges, no any documentation was provided to show the composition, roles and responsibilities of the task force in coordinating the implementation of the construction of irrigation projects to support the given response. Therefore, based on the above explanation, this recommendation was regarded as partially implemented.

9.5.3 Results of Follow-Up of Recommendations Issued to the National Irrigation Commission

The results on the implementation of the issued audit recommendations to the National Irrigation Commission indicated that out of five (5) recommendations, two (2) recommendations were partially implemented and three (3) recommendations were not implemented. **Table 9.4** indicates the overall implementation status per category of recommendations for recommendations issued to the National Irrigation Commission.

Table 9.4: Level of Implementation per Category of Recommendations Issued to the National Irrigation Commission

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	1	0	0	1	0
Implementation/Execution	1	0	1	0	0
Monitoring and Evaluation	2	0	1	1	0
Coordination	0	0	0	0	0
Development	1	0	0	1	0
Total	**5**	**0**	**2**	**3**	**0**

Source: Auditors' Analysis of Responses from National Irrigation Commission (2022)

Table 9.4 indicates that one (1) recommendation in the planning category was not implemented and one (1) recommendation in the implementation/execution category was partially implemented. Also, out of the two (2) recommendations in the monitoring and evaluation, one (1) recommendation was partially implemented and one (1) recommendation was not implemented. It is further illustrated that, one (1) recommendation in the development category was not implemented. The following subsection provides details of recommendations issued to the National Irrigation Commission.

Details of Recommendations that were Partially Implemented

For NIRC, two (2) recommendations that were partially implemented are provided below as follows: -

Recommendation 1: NIRC should develop a database for recording irrigation schemes present, their physical and financial progress and the project status that will help in projects supervision activities such as planning, monitoring and follow-up

The recommendation required NIRC to develop a database for irrigation schemes present so as to monitor financial progress and status in order to help during planning, monitoring and follow-up of the irrigation activities. In the action plan developed to implement this recommendation, the

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National Irrigation Commission planned to update information of all the schemes and other important information. NIRC also set aside TZS 80,000,000 in 2019/2020 budget for update of irrigation database.

Responses from NIRC showed that NIRC has been updating the database with information of all the schemes and other important project information such as feasibility reports, costs of the schemes, status of implementation, monitoring parameters (KPIs) and supervision schedules is ongoing. Also, the submitted responses showed that, NIRC set aside TZS 80 million in the budget of the financial year 2019/20 for updating the irrigation database.

Interviews held with Officials from NIRC indicated that NIRC developed the National Irrigation Master Plan of 2018 (NIMP, 2018) whereby it has planned to increase hectares of irrigation land to 560,230 hectares by the year 2035. Moreover, the National Irrigation Commission (NIRC) has, through its Strategic Plan for 2018/19 to 2022/23 and Annual and Midterm Plans, which are implemented through Medium Term Expenditure Framework (MTEF). The framework provides for a funding arrangement for the ongoing and upcoming irrigation projects based on the projections made in the Annual Plans and budgets.

Furthermore, NIRC's responses indicated that, the budget was set aside for the verification and updating of irrigation database in the financial year 2019/20.

However, the response did not clearly show whether NIRC has developed a database for irrigation projects and whether NIRC has included the activity in its annual budget to ensure that, the database is developed and regularly updated as required by the recommendation. However, there was no evidence detailed in NIRC's MTEF and Annual Plans that showed that the irrigation projects database was in place and was to be updated regularly.

Accordingly, the recommendation is considered as partially implemented but not satisfactorily due to lack of supporting evidence and for reasons provided above.

Recommendation 4: NIRC should update its operational guideline (Comprehensive Guideline 2010) so as it aligns with its mandate and with the National Irrigation Act of 2013

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This recommendation required NIRC to update its operational guideline to align it with NIRC's mandate and with National Irrigation Act, 2013. In the action plan developed to implement this recommendation, NIRC planned to timely update the guideline and this would be carried out as the need arises.

Through reviewing the implementation status, it was noted that NIRC updating of the operational guideline was carried as the needs arise. Furthermore, the responses from interviews held with NIRC's official indicated that, the operation which aligned with National Irrigation Act of 2013 and Guideline (Comprehensive Guideline 2010) was already revised and updated, and final revision was approved in 2019 and disseminated in all LGAs under TANCAID II project.

However, the revised guideline has been not provided for verification. Therefore, this recommendation was considered as partially implemented but not satisfactorily.

Details of the Recommendations that were Not Implemented

Recommendation 2: NIRC should strengthen supervision of the selection process to ensure that works are awarded to contractors with adequate human resources, working equipment and financial resources to implement the works. These should also be confirmed when the contractor is at site

This recommendation required NIRC to strengthen supervision of the selection process to ensure that irrigation works are awarded to the competent contractors. In the action plan developed to implement this recommendation, NIRC planned to work in collaboration with PO-RALG through its LGAs on the implementation of irrigation schemes.

In response to this recommendation, NIRC indicated that, in collaboration with PO-RALG, it has entered into MoU with LGAs on the implementation of irrigation schemes. Furthermore, during the evaluation of tenders for irrigation projects, NIRC formulates evaluation committee that comprises members from NIRC and LGAs. Furthermore, NIRC indicated that it is committed to terminating contracts and blacklisting contractors who breach contracts by reporting them to the professional bodies such as PPRA, CRB or ERB.

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In addition, NIRC submitted the award letter to M/s Fally Enterprises Ltd of Sumbawanga for the construction of Mbaka Irrigation Scheme under Tender No.PA/137/HQ/2017- 18/W/05, lot 7 was cancelled for failure to submit performance security in time.

The response given by NIRC indicated that there were actions that are being undertaken to strengthen supervision of the selection process. However, the response did not provide the details of the Contractor's performance and did not provide physical evidence for verification. Furthermore, the requirement for confirmation to be done at the project site as required by the issued recommendation was not addressed in the response.

Based on the above explanation, this recommendation is considered as not implemented due to lack of supporting evidence and documents to substantiate the submitted responses.

Recommendation 3: NIRC should ensure the procurement activities are planned to be carried out during favourable season in order to allow the construction activities to be carried out in the dry season to reduce the weather and seasonal related delaying factors such as rainfall and interference with cropping season

This recommendation required NIRC to ensure that planning for the procurement activities is undertaken in favourable seasons to allow construction activities to be carried out during dry season to minimize delays of projects. In the action plan developed to implement this recommendation, NIRC planned to set a discussion with the Planning Department of the Ministry of Finance and Planning on how to ensure timely release of funds.

In its implementation status of this particular recommendation, NIRC indicated that discussion with the Planning Department of the Ministry of Finance and Planning on how to ensure timely release of funds would be set so as to initiate the procurement process of contractors.

NIRC further responded that Management would direct the procurement unit to advise user departments to submit procurement requests on time in order to plan procurement activities.

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Analysis of the submitted responses showed that the response did not demonstrate what has been done as of 30ᵗʰ August, 2022 his response. No records were provided such as projects which were timely implemented and completed, or procurement plans showing timing of procuring contractors or schedules of works awarded to contractors.

Therefore, this recommendation is regarded as not implemented since no supporting evidence was submitted and the responses did not address key issues of the recommendation.

Recommendation 5: NIRC being the overall supervisor of all irrigation activities, it is responsible for establishing a mechanism that would make it to take part in irrigation contracts execution so as to be able to monitor construction progress and take appropriate action in case there is a contract breach

This recommendation required NIRC to devise a mechanism that will enable them to take part in the contract execution in order to be able to monitor the progress of the construction work and take appropriate actions. In the action plan developed to implement this recommendation, NIRC planned to hold discussion/meetings with all stakeholders in the irrigation sector to create awareness on the National Irrigation Act, 2013 and its Regulations.

NIRC responded that it is participating in contract execution by appointing project manager for day-to-day supervision of works site in collaboration with Engineers at LGAs. NIRC has plants and machinery (heavy equipment) which is a way of establishing machine hiring center and thus in case of contract breach, NIRC implements these construction works through force account method by using its own irrigation expertise and machinery/equipment necessary for such activities.

On the other hand, NIRC continues to meet with private sector and irrigation stakeholders to harmonize mechanism on NIRC intervention on supervision of irrigation construction works which are implemented by private sectors. Project managers and technicians from NIRC form part of team that monitors construction progress. NIRC indicates in the response that it is participating in day-to-day supervision. However, there was no supporting documents to support the response. NIRC also did not provide evidence of ongoing projects to enable the Audit Team to verify the engagement of NIRC's project managers and technicians.

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Furthermore, NIRC did not demonstrate how the projects were implemented through force account for ensuring the engagement of NIRC in contract execution was notable. Also, NIRC did not provide assurance on how it was engaging LGAs' engineers during the implementation of the irrigation projects and thus the roles of the project managers were not apparent during the implementation of the irrigation projects.

Accordingly, based on the above fact, there was no supporting documentation that provided comfort whether NIRC was directly involved in irrigation contracts. Due to that, this recommendation was considered as not implemented.

9.6 Specific Conclusion

Based on the analysis of the implementation status of the previously issued recommendations, the audit concludes that despite the efforts demonstrated by both MoA and NIRC in ensuring that the issued performance audit recommendations are fully implemented, much is required to ensure that all issued recommendations are fully implemented.

Based on the analysis of the received responses, MoA and NIRC do not have a mechanism to ensure that the issued recommendations are fully implemented. The testimony on this is that out of all seven issued recommendations only five recommendations were partially implemented and two were not implemented.

Rigorous efforts are needed to ensure the issued recommendations are fully implemented since in doing so will actually improve and enhance quality, quantity and security of agricultural produces in the country. NAOT will continue making follow-ups in all recommendations to ensure their implementation is effective.

9.7 Specific Recommendations

Both the Ministry of Agriculture and the National Irrigation Commission are urged to:

i. Establish a follow-up mechanism of the implementation status of the recommendations issued in the performance audit reports;

ii. Prepare an action plan for tracking the implementation of the issued recommendations so as to ensure issued recommendations are addressed on a timely manner; and

iii. establish a governance mechanism that will ensure the issued recommendations are fully implemented as per action plan.

CHAPTER TEN

FOLLOW-UP ON THE IMPLEMENTATION OF RECOMMENDATIONS ON MANAGEMENT OF WATER SUPPLY PROJECTS FROM BOREHOLE SOURCES

10.1 Background of the Audit

Performance Audit Report on the Management of Water Projects from Borehole Sources in Tanzania was tabled before parliament in April, 2019 and the main audit entity was the Ministry of Water.

The overall objective of the audit was to examine whether the Ministry of Water effectively managed the implementation of water supply projects from borehole sources to ensure the communities have sustainable access to clean, safe and adequate water

10.2 Audit Scope

The audit focused on assessing effectiveness of the existing water supply projects from borehole sources in terms of planning and implementation of the boreholes water supply projects as well as the effectiveness of the monitoring and evaluation mechanisms used for tracking the progress and performance of boreholes water supply projects.

The audit covered a period of six financial years from 2012/2013 up to 2017/2018. This period was relevant as it was the timeframe for the implementation of the Water Sector Development Program (WSDP) phase I & II). For WSDP, the implementation of the boreholes water supply projects was among its targets.

10.3 Main Audit Findings

(a) The Completed Water Supply Projects from Boreholes Sources Did Not Yield the Intended Results

The audit revealed that 490 out of 1,485 boreholes which were drilled during the period of implementing WSDP I and WSDP II were found to be dry and unproductive. This is a clear indication that, despite the investments which were made to the projects, sustainable supply of water to the communities, being the intended result of these projects, was not realized.

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On top of that, the audit noted that a total of TZS 764 million was spent for drilling the boreholes which were later found to be dry. Actually, this sum of funds was just wasted as it was used to execute the boreholes water supply projects which did not yield the intended results.

(b) Implementation of Borehole Water Supply Projects was not done in a Cost-effective Manner

The audit found out that the boreholes water supply projects were not implemented in a cost-effective manner. This was indicated by the clear fact that these projects were implemented beyond the set budget, where the percentage excess costs range from 12% to 52% above the set budget. Furthermore, the drilling cost was above the average drilling cost per depth in all 14 visited LGAs. The highest percent of the boreholes water supply projects that were above LGAs average costs were noted in Kinondoni and Dodoma MCs where the values were 67% and 80% of the total drilled boreholes respectively.

(c) Delays in Completion of the Boreholes Water Supply Projects

All contracts for the boreholes water supply projects in the 14 visited LGAs were delayed. The main contributing factors for the delay in project completion were inadequate capacity of contractors, delay in disbursement of funds and delay in payment of the interim payment certificates. Delay in completion of the boreholes water supply projects in the visited LGAs ranged between 50% and 100%. For instance, the Audit Team found out that in eight LGAs the delay in completion was 100 percent, one LGA delayed completion for about 50% while the other LGAs delayed completion for about 78%.

(d) Ineffective Monitoring and Evaluation Mechanisms for Boreholes Water Supply Projects

The audit found out that M&E for the boreholes water supply projects were inadequately conducted due to the weak established monitoring and evaluation mechanisms. The Ministry of Water lacked performance indicators to monitor the progress and performance of boreholes water supply projects. The review of monitoring and evaluation plan of the Ministry of Water revealed that, there were no specific indicators set for monitoring the progress of implementation and performance of the

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boreholes water supply projects in the country. There were only generally set indicators for monitoring the progress and performance of all water projects regardless of their sources.

10.4   Overall Audit Conclusion

The Ministry of Water, through LGAs and UWSSAs, did not effectively manage the implementation of boreholes water supply projects to ensure the communities had access to adequate supply of clean and safe water. This was due to the reason that a significant number of completed boreholes water supply projects were not effective as it was evidenced by the presence of unproductive and non-functioning completed boreholes. However, even those boreholes which were claimed to be productive, most of them did not produce sufficient and quality water.

10.5   Results of the Follow-up on the Implementation of the Recommendations Issued to the Ministry of Water

This part presents implementation status of issued recommendations to the Ministry of Water. The analysis of the implementation status has been made based on the four levels of implementation, namely; fully implemented recommendations; partially implemented recommendations; not implemented recommendations; and recommendations that were overtaken by events.

10.5.1 Overall Implementation of Issued Recommendations

A total of seven (7) recommendations were issued in this particular audit and all of them were directed to the Ministry of Water. The overall follow-up results on the implementation of issued audit recommendations indicated that out of seven (7) issued recommendations, two (2) recommendations were fully implemented, three (3) recommendations were partially implemented, and two (2) recommendations were not implemented, as presented in **Table 10.1.**

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Table 10.1: Overall Status of Implementation of Issued Recommendations by Ministry of Water

Audited Entity	Total Number of Issued Recommendations	Level of Implementation of Recommendations		
		Fully Implemented	Partially Implemented	Not Implemented
Ministry of Water	7	2	3	2

Source: Auditors' Analysis of Responses Received from MoW (2022)

Further analysis of the issued recommendations for each recommendation category was made based on the four levels of implementation namely; fully, partially, not implemented, and overtaken by event. **Table 10.2** provides the level of implementation for all issued recommendations based on the recommendation category.

Table 10.2: Category of Recommendations issued to the Ministry of Water and their Implementation Status

Category of Recommendations	Total Number of Issued Recommendations per category	Level of implementation of Recommendations		
		Fully Implemented	Partially Implemented	Not Implemented
Planning	1	1	0	0
Implementation /Execution	4	1	2	1
Monitoring and Evaluation	2	0	1	1
Total	**7**	**2**	**3**	**2**

Source: Analysis of the Implementation Status (2022)

The **Table 10.1** shows that seven (7) recommendations were issued whereas two (2) recommendations were under the Monitoring and Evaluation category and one (1) recommendation was partially implemented and one (1) was not implemented. Also, four (4) recommendations were under the Implementation/Execution category whereby one (1) was fully implemented, two (2) were partially implemented and one (1) was not implemented. Furthermore, one (1) recommendation was under planning, and was fully implemented. The analysis of evidence and information submitted by the Ministry of Water showed that out of seven (7)

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recommendations, two (2) recommendations were fully implemented. These recommendations and their status of implementation are as explained below:

Recommendations that were Fully Implemented by the Ministry of Water

Recommendation 2: The Ministry of Water should ensure that hydrogeological surveys are conducted by competent consultant using appropriate technology, and the results are disseminated and used by all key implementers during the design and implementation of boreholes water projects

The recommendation required the Ministry of Water to ensure that the hydrogeological surveys are conducted by competent consultant using appropriate technologies and ensure that the results are communicated to all key implementers.

During the review of responses and evidences submitted by the Ministry of Water, it was noted that the Ministry of Water has prepared the guidelines that will be adhered to during the groundwater explorations. This was an initial stage towards the measures that will enhance the compliance on groundwater resources explorations. On the other hand, the establishment of RUWASA has also enhanced the implementation of the recommendation because all drilling works will now be done by RUWASA using competent staff.

Additionally, the Ministry of Water is now issuing the drilling licenses and one of the requirements on issuance of drilling licenses is the attachment of experience on groundwater resources explorations where the experience and competency of the respective consultants applying for licenses will be assessed.

The Audit Team was, therefore, in the conclusion that this recommendation has been fully implemented

Recommendation 3: The Ministry of Water in collaboration with PO-RALG should establish sustainable funding mechanism for water projects implemented in the country

The recommendation required the Ministry of Water in collaboration with PO-RALG to establish a sustainable funding mechanism for water projects implemented in the country.

The discussions between officials from the Ministry of Water and NAOT were in agreement that the establishment of Water Fund and RUWASA which was a joint effort between the Ministry of Water and PO-RALG has significantly addressed the issue of sustainable financing for water projects. As an evidence of sustainable funding mechanism, the Ministry of Water pointed out section 4(4) of the National Water Fund Regulations of 2019 which demands 40% of the monies which are deposited into the account of National Water Fund for operational costs and administration to be remitted into the account of RUWASSA for every disbursement.

The Water Fund has been playing the key role on mobilizing funds from different sources while RUWASA has been the center-point on ensuring that the funds are channeled to proper water supply projects in urban and rural areas.

Regulation 9 of the National Water Fund Regulations of 2019 provides for duties of the Board which are solely the mobilization of funds from different sources. Also, Regulation 5(c) provides for projects which shall be financed by the Fund including water supply projects which are managed by RUWASSA. The combination of the two institutions is therefore an assurance of sustainable financing mechanisms for water projects implemented in the country.

The Audit Team was, therefore, satisfied that this recommendation has been fully implemented.

Recommendations that were Partially Implemented by the Ministry of Water

The analysis of the responses and evidence submitted by MoW showed that three (3) out of seven (7) issued recommendations were partially implemented. The recommendations are as detailed below:

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Recommendation 1: Ministry of Water should conduct and properly document the groundwater mapping in the entire country. The results should be effectively disseminated to all key implementers for the implementation in their respective areas

The recommendation required the Ministry of Water to conduct and document groundwater mapping in the entire country and disseminate the results to all key implementers for the implementation.

During the review of responses and evidence presented by PO-RALG to the Audit Team, it was noted that the Ministry of Water has just started the groundwater mapping exercise in four out of nine water basins in the country through a consultancy service on National Hydrogeological Mapping. However, the exercise is at initial stages and there are no immediate results that have been produced. Furthermore, the Ministry of Water has just started the tendering process for procuring a contractor for drilling exploratory tests or boreholes in those areas but not yet the full-scale mapping of the water basins.

The steps were taken by the government towards groundwater mapping, however they could not be able to address the recommendation. It could be noted that this was the initiative that had just started to implement some measures that would ultimately lead to implementation of the recommendation, but it did not succeed to achieve the key milestones on the matter. Additionally, the Ministry could not be able to address the second component of the recommendation with regard to dissemination of the results to all key implementers.

The Audit Team was therefore satisfied that this recommendation has been partially implemented and that more interventions were needed to ensure that it is fully implemented.

Recommendation 4: The Ministry of Water should establish effective supervision mechanisms for boreholes water projects from the exploration stage to operation of the project

The recommendation required the Ministry of Water to establish effective supervision mechanisms for boreholes water projects from the exploration stage to operation of the project.

The analysis of the responses and discussions with the officials from the Ministry of Water indicated that the supervision roles for water projects have been partially addressed by the introduction of RUWASA which has hydro-geologists responsible for supervising water projects. However, the Ministry has not indicated how the supervision from RUWASA is being conducted and what tools are being used. Furthermore, the supervision by RUWASA is mainly focused on public projects and not extensively covering private projects. Private projects therefore continue to remain ineffectively supervised.

Regarding the existence of Water Resources Management Act, 2009, it was noted that the Act has been present before and after this audit and has proved to be not effective on instilling the compliance to the set criteria as a supervisory function. The responses and discussions with the officials were centred round the existing conditions before the report and did not address the aspect of weak supervision on the laid down procedures and execution of the water projects.

The audit Team was therefore in conclusion that the recommendation has been partially implemented and that more interventions are needed to ensure that it is fully implemented.

Recommendation 6: The Ministry of Water should develop and implement an effective groundwater monitoring network on risk basis

The recommendation required the Ministry of Water to develop and implement groundwater monitoring network which shall be on risk basis.

The analysis of responses from the Ministry of Water indicated that the Ministry is planning to expand the groundwater monitoring network through drilling of 100 boreholes in all of the four water basins. This work has just started and it has addressed part of the recommendation that requires development of groundwater monitoring network; however, the expansion is not addressing the other part of recommendation which requires an assurance if there will be a risk-based monitoring network on the drilled boreholes.

Furthermore, the fact that there are 82 existing groundwater monitoring boreholes in the four water basins is not sufficient to guarantee risk-based groundwater monitoring and that data are effectively collected. The report

has pointed out that there is no groundwater monitoring despite the boreholes having been drilled in the four water basins.

The Audit Team, therefore, concludes that the recommendation has been partially implemented and that more efforts need to be done to ensure that the recommendation is fully implemented.

Recommendations that were not Implemented by Ministry of Water

The analysis of evidence and information submitted by Ministry of Water showed that two (2) out of seven (7) issued recommendations to the Ministry of Water were not implemented. The details of the recommendations are as detailed below:

Recommendation 5: The Ministry of Water should ensure that assessment of the capacity to perform drilling work of the contractors is conducted before issuance and renewal of the drilling permit and license

The recommendation required the Ministry of Water to ensure that assessment of the capacity to perform drilling work of the contractors is conducted before issuance and renewal of the drilling permit. The action plan by the Ministry intended to conduct inspections of the drilling companies to ensure that they are performing their duties.

The analysis of responses has indicated that the Ministry has not taken new measures to address the recommendation. The Ministry has continued to insist the compliance on Water Resources Management Act, 2009 which was not effectively complied to by contractors and supervised by the Ministry.

The annual renew of licenses is a requirement of the law, however, the concern of the follow-up was the assessment of the license applications which was not being effectively conducted. The review of the submitted responses pointed out that, the analysis of renewals was done based on the submitted information only and there was no physical assessment or due diligence of the capacity of contractors. This was a major challenge for most of the contractors who submitted documents that indicated superior qualifications while in fact their capacity was low.

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The Audit Team was, therefore, in the conclusion that the recommendation has not been implemented and the Ministry needed to take measures that will ensure that the recommendation is implemented.

Recommendation 7: The Ministry of Water should develop performance indicators specifically for monitoring the progress and performance of the borehole water projects

The recommendation required the Ministry of Water to develop performance indicators for monitoring the progress and performance of the borehole water projects.

The analysis of responses from the Ministry of Water has indicated that the Ministry has already developed the performance indicators. However, the analysis of the received evidence and information submitted by the Ministry revealed that the performance indicators which are currently reported do not monitor the performance of boreholes water projects but rather the number of boreholes. This does not address the performance of the boreholes including its capability to provide water throughout the design life of the boreholes.

The Audit Team was, therefore, in the conclusion that the recommendation has not been implemented and the Ministry needed to take measures that will ensure that the recommendation is implemented.

10.6   Specific Audit Conclusion

Based on the analysis of the implementation status of the previously issued recommendations, the audit concluded that Ministry of Water did not make adequate efforts in implementing the issued recommendations. This was because out of seven issued recommendations, the Ministry of Water was able to fully implement two recommendations. This is also due to lack of evidence and supporting documents to substantiate submitted responses for verifications.

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10.7   Specific Audit Recommendations

Recommendations to Ministry of Water

The Ministry of Water is urged to:

i.   ensure all previously issued recommendations are fully implemented; and

ii.   follow-up the implementation of recommendations issued to MoW and regularly monitor their implementation status from time to time.

FOLLOW-UP ON THE IMPLEMENTATION OF RECOMMENDATIONS ON THE AVAILABILITY AND ACCESSIBILITY OF GOOD QUALITY AGRICULTURAL INPUTS (SEEDS AND FERTILIZERS) TO FARMERS

11.1 Background to the audit

The Performance Audit Report on the Availability and Accessibility of Good Quality Agricultural Inputs (Seeds and Fertilizers) to Farmers was tabled to the Parliament of the United Republic of Tanzania in March, 2019.

The main objective of the audit was to assess whether the Ministry of Agriculture, through Tanzania Fertilizers Regulatory Authority (TFRA) and Tanzania Official Seed Certification Institute (TOSCI) ensure accessibility and availability of quality agricultural inputs to farmers in order to increase agricultural productivity in the country.

11.2 Audit Scope

The main audited entity was the Ministry of Agriculture through Tanzania Official Seed Certification Institute (TOSCI and Tanzania Fertilizers Authority (TFRA). The audit focused on examining measures put in place by Ministry of Agriculture, through TFRA and TOSCI to ensure accessibility and availability of quality agricultural inputs to farmers in order to increase agricultural productivity in the country. Also, issues of mechanisms for demand forecasting and supply and distribution of agricultural inputs have been addressed. The verification data were collected from the regions of Dodoma, Dar es Salaam and Morogoro.

The audit covered a period of five financial years from 2013/14 to 2017/18 so as to allow the auditors to have a clear picture of the problem and establish a trend of performance for the Ministry of Agriculture through TOSCI and TFRA regarding availability of good quality agricultural inputs to farmers. The focus was to consider the agricultural input supply systems such as Agricultural Inputs Voucher System used from 2013/14 and 2015/16, Credit Systems used from 2014/15, Agriculture Input subsidies system through Tanzania Fertilizer Company used from 2016/17, and Bulk Procurement system adopted from 2017 onwards mainly to fertilizers.

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11.3 Main Audit Findings

(a) Inadequate Mechanism to Ensure Quality Agricultural Inputs is Supplied to Farmers

The audit revealed the presence of low-quality supply of agricultural inputs in the market. There were supplied seeds which failed to germinate and seeds that grow but do not yield the expected produce. It was also noted that, there was limited conduct of the soils test in the country in order to know the type of fertilizer to be applied. In this case fertilizers were distributed to farmers without knowing the requirement of the soil.

The audit noted that, there was inadequate conduct of inspections at entry points, agro-dealer shops and seed farms. TOSCI was not operational in all entry points in the country while TFRA operates in only one entry point. There are 52 entry points in the country. It was also noted that there was inadequate planning for conducting inspections to covers all agro-dealers in the country. TOSCI also did not conduct farms inspection activities based on the requirements of producing agricultural seeds.

(b) Demand Forecasting was not Conducted Efficiently in the Country

There were no methodologies used by the Ministry of Agriculture to establish the actual demand of inputs in the country. There have been clear shortages of seeds and fertilizers for the market as the fertilizers available in the market was not enough compared to actual demand. Up to the year 2018, the audit noted that the Ministry did not conduct baseline survey to understand the total demand of inputs by farmers. The Ministry has only established hypothetical demand, which was not accurate to fulfill farmers' demand on inputs. Reason observed in the inadequate demand established was that some LGAs delayed in reporting their demands therefore the inputs are procured without incorporating their requirements. This led to insufficient distribution and supply of inputs to some of the areas. It was also observed that there is inadequate coordination between LGAs and farmers during the demand establishment.

(c) Inadequate Mechanism to ensure accessibility of good quality agricultural inputs Untimely supply of Agricultural Inputs

The voucher system used in 2014/15 showed that there was delay in delivering of agricultural inputs to farmers in some areas. There was an average of 3 to 5 months delay noted in the distribution of the inputs in the voucher system. Reason for delay included, infrastructure problems in rural areas that hinder timely supply of the demanded inputs. Consequently, agro-dealers failed to supply fertilizers and seeds in villages because most of the roads in the country at village level are seasonal roads. Another reason noted for this challenge was low number of agro-dealers' operating in the regions.

For example, Mtwara region had the largest ratio whereby one agro-dealer serves about 42,000 farmers and one distributor serves about 800 villages. In Mbeya region, there was the lowest ratio whereby one agro-dealer serves about 3,600 and distributor serves about 44 villages. This factor also contributed to delay in supply and distribution of inputs to farmers. Inadequate mechanism of regulating price of inputs.

Moreover, there was inadequate mechanism to ensure information about indicative prices reaches all intended users in time. This was due to the fact that indicative prices did not reach all intended users. The information ends at Regional and LGAs levels without flowing down to the village level. It was also noted that, some of the agro-dealers did not display the agricultural input prices as per the requirements. Therefore, some farmers were unaware of the indicative prices established. The reason for inaccessibility to indicative price observed include inadequate conduct of inspections to assess compliance of Indicative Prices. Therefore, some agro-dealers tend to overstate fertilizer's prices as evidenced through inspection reports of the financial year 2017/18 from TFRA.

(d) Inadequate Monitoring and Evaluation by the Ministry of Agriculture

It was also noted that there was inadequate Monitoring and Evaluation activities conducted at all levels. The audit found no Monitoring and Evaluation conducted by the Ministry to TOSCI and TFRA. The same was observed by TFRA and TOSCI who did not conduct M&E to its zonal offices and inspectors located at Local Government Authorities. Consequently, this shortcoming led to inability to monitor and measure progress of the implementation of set goals and obligations.

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11.4 Overall Conclusion

The audit concluded that there were inadequate mechanisms to ensure good quality agricultural inputs were available to farmers. This was caused by inadequate control mechanism to ensure quality inputs were supplied to meet the actual demand, and inadequate distribution system that were executed under the Ministry of Agriculture, TFRA and TOSCI. This impacted the productivity of agricultural crops in the country, a situation which led to food insecurity as well as fall of income to individual farmers and the country at large.

11.5 Results of the Follow-up on the Implementation of the Issued Audit Recommendations

This part presents the implementation status of the issued recommendations to the Ministry of Agriculture through TOSCI and TFRA. Implementation of the issued recommendations was measured using four levels of implementation namely; fully implemented, partially implemented, not implemented and overtaken by event recommendations. The details of the status of the implementation are explained in the following sub-sections.

11.5.1 Overall Implementation of Recommendations

A total of nineteen (19) recommendations were issued in this audit. Six (6) recommendations were directed to the Ministry of Agriculture while five (5) recommendations were issued to TOSCI and eight (8) recommendations were issued to TFRA.

The overall follow-up results indicated that two (2) out of nineteen (19) recommendations were fully implemented while sixteen (16) out of nineteen (19) issued recommendations were partially implemented; and two (2) out of nineteen (19) recommendations were not implemented and there were no any recommendations that were overtaken by event. **Table 11.1** provides the level of implementation for all issued recommendations per the audited entities.

Table 11.1: Level of Implementation per the Audited Entities

Entity Name	Total Number of Issued Recommendations	Level of Implementation of Recommendations		
		Fully Implemented	Partially Implemented	Not Implemented
MoA	6	0	3	3
TOSCI	5	1	3	1
TFRA	8	1	7	0
Total	**19**	**2**	**13**	**4**

Source: Auditors' Analysis of Responses from Audited Entities (2022)

Table 11.1 shows that out of six (6) recommendations issued to MoA, none was implemented, three (3) were partially implemented while the remaining three (3) were not implemented. TOSCI was issued with five (5) recommendations, whereas one (1) recommendation was fully implemented, three (3) were partially implemented and one (1) was not implemented. On the other hand, TFRA was issued with eight (8) recommendations whereby one (1) was fully implemented, seven (7) were partially implemented and none was not implemented.

Further analysis of the issued recommendations was made as per categories in Planning, Implementation/Execution, Monitoring and Evaluation, Coordination, and Development based on the level of implementation. **Table 11.2** summarises overall status for each category.

Table 11.2: Level of Implementation per Category of Recommendations Issued to MoA, TFRA and TOSCI

Category	Total Number of Issued Recommendations	Level of Implementation of Recommendations		
		Fully Implemented	Partially Implemented	Not Implemented
Planning	2	1	1	0
Implementation /Execution	11	0	8	3
Monitoring and Evaluation	4	1	2	1
Coordination	1	0	1	0
Development	1	0	1	0
Total	**19**	**2**	**13**	**4**

Source: Auditors' Analysis of Responses from Audited Entities (2022)

Table 11.2 shows that eleven (11) out of nineteen (19) of the issued recommendations were under the implementation category whereas eight (8) were partially implemented and three (3) were not implemented. One (1) recommendation was the under planning whereas, one (1) was fully implemented and the remaining one (1) was partially implemented. Four (4) out of nineteen (19) issued recommendations were under the monitoring and evaluation whereby one (1) recommendation was fully implemented, two (2) recommendations were partially implemented and one (1) was not implemented. The categories of coordination and development had one (1) recommendation each whereby all two (2) recommendations, within these categories, were partially implemented.

11.5.2 Results of follow up on the Implementation of the Issued Recommendations to the Ministry of Agriculture

Six (6) recommendations were issued to the Ministry of Agriculture. The follow-up results show that the Ministry of Agriculture partially implemented five (5) out of six (6) recommendations while one (1) recommendation was not implemented. **Table 11.3** shows the implementation status by the Ministry of Agriculture based on the implementation category.

Table 11.3: Level of Implementation of Issued Recommendations to the Ministry of Agriculture by Category

Category of Recommendation	Total Number of Issued Recommendations Per Category	Level of Implementation of Recommendations	
		Partially Implemented	Not Implemented
Implementation/Execution	2	1	1
Monitoring and Evaluation	1	-	1
Coordination	2	1	1
Development	1	1	0
Total	**6**	**3**	**3**

Source: Auditors' Analysis of Status of Implementation (2022)

Table 11.3 shows that two (2) out of six (6) issued recommendations were under the implementation/execution category whereby one (1) recommendation was partially implemented and the remaining one (1) was not implemented. It also shows that, one (1) recommendation was under the Monitoring and Evaluation category and was partially implemented. Two (2) recommendations were under the Coordination category whereby one (1) recommendation was partially implemented and one (1) was not

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implemented. The development category had one (1) recommendation and was partially implemented. The detailed analyses of recommendations provided to the Ministry of Agriculture is as detailed below:

Details of Recommendations that were Partially Implemented

The audit team noted that five (5) recommendations were partially implemented. The partially implemented recommendations and their corresponding implementation status are presented below: -

Recommendation 1: Strengthening mechanism that will ensure quality agricultural inputs are supplied in the country, by having well equipped Performance Evaluation Tool that will help in monitoring the extent of implementation of the policy specifically on issues of quality agricultural inputs to farmers

The recommendation called for the Ministry to strengthening mechanism that will ensure quality agricultural inputs are supplied in the country, by having well equipped Performance Evaluation tools that will help in monitoring the extent of implementation of the policy specifically on issues of quality agricultural inputs to farmers.
In the action plan submitted by the Ministry of Agriculture, the Ministry intended to undertake registration of all Agro-dealers, conduct spot check and regular inspection to Agro-dealers by TOSCI and TFRA, and train more seed and fertilizer inspectors.

As an implementation of this recommendation, the Ministry of Agriculture has indicated to have been involved in the preparation of fertilizer and fertilizer dealer's platform (Fertilizer Information System-FIS), where the designed platform is accessible at the TFRA's website and has been used as Performance Evaluation Tool. Reviewed Agri-input Platform link provided by the Ministry indicated that the Ministry managed to introduce Tanzania Seed Sector Platform where there is a Seed Coordinating Unit (SCU).

The Seed Coordination Unit under the Ministry of Agriculture is collaborating with agricultural stakeholders across Tanzania to support the growth, innovation and performance of the sector. The goal is to help Tanzania's farmers have a choice of high-quality inputs (seed, fertilizers, and crop protection products) available every season, reliably and on time. The

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platform is an active collaboration involving many sector players, both public and private.

Moreover, through TOSCI, the Ministry has developed an online registration system for seed dealer's registration. Features of the online registration system is available on section of Application Forms at TOSCI website (www.tosci.go.tz) and the information being monitored by TOSCI are available at publications section of TOSC's website.

However, through the reviewed fertilizer information system, it was noted that there is no any involvement of the Ministry of Agriculture. Also, the Ministry through TFRA and TOSCI has not conducted spot check, regular inspections and training of inspectors as per its earlier action plan, in that regard, this recommendation is considered as partially implemented.

Recommendation 2: Conduct baseline survey so as to establish effective demand of needed agricultural inputs

The recommendation requires the Ministry to conduct baseline survey so as to establish effective demand of needed agricultural inputs. In the response made in its action plan, the Ministry committed to undertake training to different Agricultural Officers (enumerators in 185 LGAs) and develop seed database.

As an implementation status of this recommendation, the Ministry of Agriculture indicated that it has managed to prepare the preliminary baseline survey for establishing effective seed demand for maize, sorghum, beans, soya beans, cotton, sesame, rice and sunflower crops that were conducted by Economic and Social Research Foundation (ESRF). Through the Review of the submitted ESRF's Study Report, it was indicated that the analysis was mainly on seed demands in terms of prices, local supply, import and demand in the country. In this study, the objective was operationalized through the five specific objectives which were:

- To identify types and amount of seeds produced locally;
- To identify types and number of seeds imported and or exported and their value by Crop;
- To estimate the total seed demand and supply in Tanzania;
- To establish factors influencing seed price in Tanzania; and

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- To forecast the quantity of local seed production, imports and its economic implications for the future five years (2020 to 2025).

However, despite that progress, the consultancy service entered with ESRF could not be completed. Interviewed MoA's Officials pointed that the consultant withdrew himself to proceed with that work.

In addition to that, the Ministry also has developed seed data base which is accessible through http://tanzaniaagri-inputsplatform.co.tz/. The Follow-up Team managed to access and assess the website and found it contains different data for agro-dealers, chemi-centres, and other relevant directories. However, it was noted that the information captured in the http://tanzaniaagri-inputsplatform.co.tz/ does not well correlate the relevancy to act as a seed database. This is because the indicated link is a database that shows the all registered agro-dealers and their location and it has nothing to do with the amount of seeds in the country.

Also, the Ministry did not submit training report to justify whether it undertook different trainings to Agricultural Officers (enumerators in 185 LGAs), as an implementation of its earlier action plan. Therefore, this recommendation is considered as partly implemented since, the training has not been done, the consultancy work has not been completed and the database lacked information of the quantity of demand of agricultural inputs in the country.

Recommendation 3: Improve available reporting mechanism so as to ensure timely and proper analysis of agricultural inputs demanded in the country

This recommendation calls for the Ministry of Agriculture to make sure the reporting system is improved so as to ensure timely and proper analysis of agricultural inputs demanded in the country. Responding to this recommendation, the Ministry of Agriculture intended to improve sharing of information by using an Agricultural Research Development System (ARDS) tool to capture all information pertained to agricultural inputs demand, availability, supply and use, develop and align the Key Performance Indicators (KPI) for improving reporting.

Upon the response from MoA, it was noted that, currently ARDS tool (which is coordinated by Directorate Policy and Planning) was not broad enough to

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capture all data related to agricultural inputs e.g., other data such as data for irrigation and mechanization were not captured. To foster this, the Ministry indicated that it has strengthened her systems (including M-Kilimo) to ensure that all frequent asked data and information are reviewed and are available to the public.

The review of an extract for M-Kilimo submitted by the Ministry as evidence, it was noted that the most asked questions were captured in the systems. However, the information was mainly based on the fertilizers leaving other inputs such as seeds. Further, despite having M-Kilimo, the Ministry has not shown to auditors on how the reported incidences are being timely acted upon.

Furthermore, the Ministry has not provided evidence to indicate how it has incorporated issues of agricultural inputs to its Key Performance Indicators (KPIs) so as to improve its performance reporting.

Therefore, this recommendation is considered as p*artially implemented* because the action taken are at the initial stages. Key issue related to timely and proper analysis of agricultural inputs demanded in the country has not been addressed.

Details of Recommendations that were Not Implemented by the Ministry of Agriculture

The analysis of evidence and information submitted by the Ministry of Agriculture showed that three (3) out of six (6) recommendations issued to the Ministry were not implemented. The detailed analysis of recommendations that were not implemented is as explained below: -

Recommendation 4: The Ministry to ensure that seed demand is effectively established so as to ensure that seeds at adequate quantity and quality are timely supplied to farmers

This recommendation called for the Ministry of Agriculture to ensure seed demand is effectively established so as to ensure that seeds at adequate quantity and quality are timely supplied to farmers. In this regard, the Ministry of Agriculture planned to involve LGAs and Regional secretariats, and establish data base for seed demand.

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In its implementation status, the Ministry indicated that the Division of Crop Development hired a consultant to conduct a baseline survey that will enable the establishment of the effective seed demand of various crops grown in the country. The Ministry also indicated that the engaged consultant for conducting a baseline survey withdrew this assignment due to reasons that were beyond the control of the Ministry. It also indicated that it is in the process of looking for another consultant who will carry out the baseline survey to establish the effective seed demand of various crops and capacity building to the Officials dealing with seed coordination within the Ministry as well as the District Councils.

In addition, the Ministry has indicated that currently there is no proper mechanism established for seed demand forecast by LGAs and RS. Thus, due to the importance of this activity, in collaboration with Alliance for a Green Revolution (AGRA) it is in the process of sourcing another consultant to conduct a baseline survey for establishing a seed demand for the crops grown in Tanzania. However, the Ministry did not submit any evidence such as communication and plan and budget that are ongoing for procurement of a consultant and evidence showing that LGAs and RS have submitted their requirements for the Ministry to work on them accordingly.

The team acknowledged the ongoing initiative that has been put forth on ensuring the seed demand is effectively established by engaging consultant as an indication of recognizing the importance of having a database of seed, however the consultant engaged could not proceed. This recommendation is considered as not implemented.

Recommendation 5: In consultation with PO-RALG make sure that they locate specific areas in selected LGAs for production of quality seeds

The recommendation required the Ministry of Agriculture to consult PO-RALG and make sure that they locate specific areas in selected LGAs for production of quality seeds. In the action plan submitted, the Ministry committed to communicate with LGAs to select areas for production of quality seed based on regulations, train seed producers for both certified and Quality Declared Seeds (QDS).

As an implementation status of this recommendation and review of submitted evidence, the Ministry of Agriculture indicated that through Agricultural Seed Agency (ASA), it has successfully acquired two farms for

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seed production at Chato District Councils (400 Ha) in the Geita Region and Mpwimbwe (3,500 Ha) in the Katavi Region. However, through the review of the evidence submitted to Auditors, it was noted that the mentioned farms had never been handed over to ASA for production of seeds.

With regards to training, the Ministry has submitted an extract of training on seed monitoring that was done to 1501 participants. However, the Ministry did not submit training reports and attendance register to enable auditors to assess the coverage of trainings.

In view of the above, this recommendation is considered as not implemented because the secured seed farms are not yet handled to ASA to start the production. Also, the Ministry of Agriculture has not done analysis showing the number of LGAs that are potential and worthy to have seed production activities. This would allow the Audit Teams to assess the performance/achievements made.

Recommendation 6: Strengthen mechanisms to ensure farmers' access to credit facilities

This recommendation calls for the Ministry of Agriculture to strengthen mechanisms to ensure farmers' access have to credit facilities. In its action plan submitted, the Ministry planned to strengthening producers SACCOS, AMCOS, COPERATIVES SOCIETIES, advice farmers to contact Tanzania Agricultural Development Bank (TADB) for soft loans.

Despite of this commitment made by the time of issuance of this report in 2019, the Ministry of Agriculture has not indicated any progress made in assisting farmers to get the access to credit facilities. Because of that, this recommendation is ranked as *not implemented*.

11.5.3 Results of follow up on the implementation of the Issued Recommendations to the Tanzania Official Seed Certification Institute (TOSCI)

Five (5) recommendations were issued to TOSCI, whereby one (1) recommendation was fully implemented, three (3) recommendations were partially implemented while one (1) out five (5) issued recommendations was not implemented at all. **Table 11.4** shows the implementation status of recommendations issued to TOSCI.

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Table 11.4: Level of Implementation of Issued Recommendations to TOSCI by Category

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation		
		Fully Implemented	Partially Implemented	Not Implemented
Planning	1	1	0	0
Implementation/Execution	3	0	3	0
Monitoring and Evaluation	1	0	0	1
Total	**5**	**1**	**3**	**1**

Source: Auditors' Analysis of Implementation Status (2022)

Table 11.4 shows that three (3) recommendations were on the implementation category, and were all partially implemented. Planning had one (1) recommendation, and was fully implemented. Implementation/Execution category had three (3) recommendations whereby all were partially implemented. On the other hand, Monitoring and Evaluation Category had one (1) recommendation which was not implemented.

Details of the implementation of recommendations are provided in four levels, namely; fully implemented, partially implemented, not implemented and overtaken by event as explained hereunder-

Recommendations that were Fully Implemented

Recommendation 1: TOSCI was supposed to strengthen quality control mechanism at Entry Points and Agro-Dealers to ensure control of supply of standards agricultural inputs to farmers

The recommendation required TOSCI to strengthen quality control mechanism at entry points and agro-dealers to ensure control of supply.

In the action plan submitted by TOSCI to implement this recommendation, it indicated that it would ensure that Seed Import Permits (SIPs) are timely issued and the seed lots are tested for germination test.

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In addition to that, the planned action plan requires TOSCI to ensure that by the Financial Year 2020/2021, all Districts in entry points have authorized Inspectors that could help to regular inspect seed stockiest in the respective Districts so as to reduce the tendency of unlawful seed stockiest to sell seed that may enter illegally in the country.

Furthermore, according to the same action plan, TOSCI was supposed to increase post-harvest seed inspections in the districts bordering with other countries on annually. This included to continue advising the Government to put at one roof seed import (SIP) services offered by TOSCI and issued by Plant Health Service of the Ministry of Agriculture.

Review of the responses from TOSCI on the implementation status, it indicated that TOSCI has adopted Agricultural Trade Management Information System (ATMIS) that enables the import permits to be issued within three days after receipt of the application. The audit team has confirmed this by review of the submitted sample of the Seed Import Permit issued extracted from the ATMIS system, and noted to have taken a day to be issued. Also, TOSCI has submitted sample seed germination test report indicating the germination test score for tested seed batches.

Moreover, through the review of submitted stockiest Inspection Report from different zones, and others from headquarters, the audit team also confirmed that TOSCI undertakes seed germination test so as to assess the germination percentage which is an element of seed quality.

In addition to that, TOSCI has also managed to submit different Warehouse Inspection Reports covering different zones, and which were also reviewed by the Audit Team. The review indicated that the reports were from the inspection done in September 2021. The Audit Team has no clue on whether the same was being done in previous years i.e., 2019/20 and 2020/21.

However, the evidence submitted to the Auditors and interviews held with TOSCI's Officials indicated that still there was no evidence to show that all Districts at entry points have authorized inspectors that can help to regular inspect seed stockiest in the districts to reduce the tendency of unlawful seed stockiest to sell seed that may enter illegally in the country. Therefore, this recommendation is ranked as partially implemented because of the pending actions taken to ensure all Districts have inspectors to regularly inspect seed stockiest in the districts.

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Recommendations that were Partially Implemented

The audit team noted that three out of five recommendations issued to the TOSCI were partially implemented as detailed below:

Recommendation 2: TOSCI was supposed to ensure availability of tools, human and financial resources needed in ascertaining availability of quality agricultural inputs to farmers in the country
The recommendation called for TOSCI to ensure availability of tools, human and financial resources so as to ascertain availability of agricultural inputs to famers in the country.

The action plan submitted by TOSCI for implementing this recommendation, required TOSCI to allocate enough funds in its annual financial budget to purchase tools and equipment to ascertain availability of agricultural inputs to farmers.

Review of implementation status from TOSCI indicated that currently, TOSCI is participating in AGRA Project aiming to increase farmers' access to improved seed in Tanzania by modernizing and improving the performance of three key Government institutions responsible for enabling a healthy seed sector namely the Ministry of Agriculture, TOSCI, and Agricultural Seed Agency (ASA).

Review of submitted evidence from TOSCI which included ownership document of purchased two new Vehicles obtained as the mark of cooperation with AGRA, and the List of Purchase Order (LPOs) for computer gadgets, the audit confirmed these initiatives taken by TOSCI towards improving the availability of working tools at TOSCI.

Despite of the response, TOSCI has not indicated the available tools versus number of working tools required for optimal function of an institution. Also, TOSCI has not proved to the audit team that it has included these aspects in its annual financial budget, to ensure sustainability of availability of funds for tools. Also, in its responses, TOSCI has not indicated actions taken to ensure availability of human resources as required by the recommendation. Therefore, this recommendation is ranked partially implemented.

Recommendation 3: TOSCI was supposed to ensure that all actors such as producers of agricultural inputs, Agro-Dealers, importers, and authorized seed inspectors are registered and trained so as to increase knowledge and awareness on issues related to agricultural inputs

The recommendation required TOSCI to ensure all actors in agricultural inputs, agro-dealers, importers and the like to be registered and trained to increase skills and knowledge and awareness on issues related to agricultural inputs.

According to the submitted action plans, in each financial year TOSCI planned fund for training new –seed dealers (seed producers, importers) and Authorized Seed Inspectors and register all trained seed dealers on annually basis. Also, in the 2020/21 Financial Year, TOSCI committed to establish a system that will be providing refreshers courses to the existing seed dealers and authorized seed inspectors.

Furthermore, the plan needed TOSCI to organize regular mass media (TV, radio programmes and newspapers) briefing and features on issues related to seed quality control on annually basis.

Review of responses on the implementation status submitted by TOSCI indicated that in the financial years between 2019 and 2022 TOSCI budget for seed dealers had been increasing compared to the previous years. Due to increased budget the number of trained seed dealers also increased. TOSCI trained 1,246; 590 and 454 seed dealers in 2019, 2020, and 2021 compared to 448 and 635 seed dealers trained in the 2017 and 2018 respectively. The trained seed dealers were also registered in the TOSCI database.

 Similarly, the budget for training Extension Workers that are finally registered as Authorized Seed Inspectors was noted to increase between 2019/20 and 2021/22. Due to the increased budget, 80 Extension Workers were trained and upgraded as Authorized Seed Inspectors in 2020 compared to 32 and 37 Extension Workers trained and upgraded as Authorized Seed Inspectors in the 2017 and 2018 respectively.

Apart from the information on seed dealers and extension Officers, TOSCI have not provided explanation and evidence on the number of trained and registered agricultural inputs producers and importers. More actions taken

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by TOSCI were focused on the Seed Dealers. Therefore, this recommendation is considered as partially implemented.

Recommendation 5: TOSCI was supposed to formulate awareness creation mechanism on importance of quality seeds and fertilizers to key actors such as farmers, Agro-Dealers, and Agricultural Extension Officers

The recommendation called for TOSCI to formulate awareness creation mechanism on importance of quality seeds and fertilizers to key actors including agricultural extension officers.

In implementing this recommendation, TOSCI could not indicate in the action on how would this recommendation be implemented and what the timelines would be. Despite this fact, the response submitted during follow up had indicated that TOCI plays a role of awareness creation on the importance of quality seeds through various methods of communication such as training participation in agricultural shows (Nanenane, Saba-Saba, Ushirika Day, World Food Day) and also through electronic and print media and use of leaflets.

However, the Audit team reviewed the submitted evidence and noted that no more evidence except newspaper which was availed to justify the given response such as awareness creation evidence which was done in 2019 only to date. In addition, TOSCI did not indicate to have developed a communication strategy that could have provided assurance that awareness will be done regularly to all key actors as required by the recommendation. Therefore, due to the above observations, the auditors regarded this recommendation as partially implemented.

Details of the Recommendations that were Not Implemented by TOSCI

The follow-up audit noted that, one (1) out of five (5) recommendations issued to the Tanzania Official Seeds Certification Institute, was not implemented. Below is the detailed analysis of responses and evidence from TOSCI.

Recommendation 4: TOSCI to improve the system and mechanism that will ensure timely reporting and proper analysis of needed fertilizers and seeds according to demand

This recommendation required TOSCI to improve the system and mechanism that will ensure timely reporting and proper analysis of needed fertilizers and seeds according to demand. TOSCI could not manage to come up with an action plan that would have shown how the recommendation would be implemented and what would the timelines be. Furthermore, there were no any responses given upon the requested implementation status. Moreover, TOSCI could not attach any evidence as a response to this recommendation.

In this regard, the audit team ranked this recommendation as not implemented until when the discussion will be made with TOSCI management regarding this matter.

11.5.3 Results of Follow-up on the implementation of the Issued Recommendations to the Tanzania Fertilizer Regulatory Authority (TFRA)

Eight (8) recommendations were issued to Tanzania Fertilizer Regulatory Authority (TFRA). The follow-up results have indicated that one (1) recommendation was fully implemented and seven (7) recommendations were partially implemented. **Table 11.5** below shows the implementation status of recommendations issued to TFRA.

Table 11.5: Level of Implementation of Issued Recommendations to TFRA by Category

Category	Total Number of Issued Recommendations	Level of Implementation of Recommendations	
		Fully Implemented	Partially Implemented
Planning	1	0	1
Implementation/Execution	4	0	4
Monitoring and Evaluation	2	1	1
Coordination	1	0	1
Total	**8**	**1**	**7**

Source: Auditors' Analysis of the Implementation Status (2022)

Table 11.5 above shows that four (4) of the issued recommendations were on the implementation category and were partially implemented, whereas monitoring and evaluation had two (2) recommendations whereas one (1) was fully implemented and one (1) was not implemented. Planning and coordination categories had one (1) recommendation each and all were partially implemented.

Details the implementation of recommendations based on the four levels of implementation, namely; fully implemented, partially implemented, not implemented and overtaken by event and are explained hereunder:

Recommendation that was Fully Implemented by TFRA

The follow-up results revealed that one (1) out of eight (8) recommendations issued to the TFRA was fully implemented as detailed below:

Recommendation 3: Ensure that all actors such as producers of agricultural inputs, agro-dealers, importers and authorized inspectors are registered and trained so as to increase knowledge and awareness on issues related to agricultural inputs

This recommendation wanted TFRA to ensure that all actors like producers of agricultural inputs, agro-dealers, importers and authorized inspectors are registered and trained so as to increase knowledge and awareness on issues related to agricultural inputs.

In its action plan issued in financial year 2019/20, TFRA indicated that it would conduct training to agro dealers in the regions of the Southern Highlands (Iringa, Njombe, Songwe, Mbeya, Ruvuma, Rukwa, Katavi) which have high fertilizer utilization. TFRA also planned to register 600 new fertilizer dealers in the financial year 2019/20.

Review of the submitted printout document on Online Fertilizer Dealers and Training Reports on Fertilizers and Fertilizer Supplement (FFS) conducted in different regions, it was noted that, in the Financial Year 2021/22 a total of 3223 FFS dealers were registered by TFRA through online (fertilizer information system 'FIS'. Furthermore, up to December 30th, 2020, a total of 4,138 FFS dealers were registered and trained to operate manufacturing and FFS business. These include domestic manufactures, importers, distributors and retailers.

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Moreover, a total of 150 fertilizers inspectors were trained and registered for carrying- out routine inspections in all FFS dealers are registered and comply with the fertilizer legal framework. In addition to that, the submitted evidence showed that up to December, 2020 and for the financial year ending June, 2022, a total of 3,222 Fertilize Dealers were registered online through the Fertilizer Information System.

Furthermore, the TFRA management has managed to submit a printout database of the fertilizer dealers. The submitted evidence indicates the business name, dealer type (retail/wholesale), LGA, License date and issued date. Moreover, TFRA has presented different training reports of different training activities executed. Audit Team has found the submitted evidence to be relevant in this recommendation.

Based on the above assessment the Audit Team has ranked this recommendation as fully implemented because TFRA provided sufficient evidence to support the requirement for addressing this specific recommendation.

Recommendations that were Partially Implemented

The audit team noted that one (1) out of eight (8) recommendations issued to the TFRA were partially implemented as detailed below:

Recommendation 1: Strengthen quality control mechanisms at entry points and to agro-dealers to ensure control of supply of standard agricultural inputs to farmers

This recommendation wanted TFRA to strengthen the quality control mechanisms at entry points and to agro-dealers to ensure control of supply of standard agricultural inputs to farmers. To implement this recommendation, TFRA in its action plan indicated that it would increase the number of Inspectors in the country by 50, train 10 fertilizer dealers association and farmers on good practice in handling fertilizer and every year will continue to carry-out inspection all over the country.

Through the review of the implementation status and their supporting evidence such as inspection Reports from zones, the audit team noted that TFRA carried out quality assurance in the border posts of Namanga,

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Mutukula, Horiri, and Tunduma. It was also noted that TFRA deployed inspectors who were allocated in all entry points.

Moreover, Fertilizers and Fertilizer Supplement (FFS) quality assurance process commences with issuance of an import permit to a fertilizer dealer where the dealer is required to submit quality analysis certificate during import permit application. Upon arrival of the fertilizer at the entry point, TFRA takes sample for carrying out the laboratory analysis and issues a conditional and final release before and after the certificate of laboratory analysis respectively. In almost every Local Government Authority, there is one registered and gazzetted fertilizers inspector who works under TFRA Zonal Managers to assure all fertilizers sold to farmers comply with quality standards.

In additional to that, regular inspections to agro dealers using standard operating procedures in all Regions are conducted by Staff allocated in the Zonal Offices and staff from TFRA's Head Office.

On top of the Prior importation of the consignment, the agro dealers are required to apply for the permission for importing fertilizers etc. Also imported goods are inspected and inspection reports are prepared. Also 50 inspectors have been appointed by the Ministry of Agriculture on 27th August, 2019 to check the quality of imported agricultural inputs.

However, the submitted evidence justified that there is control of imported agricultural inputs whereby a consignment once imported is supposed to be tested by TBS to check its conformity with standards. This means that TFRA has put mechanism for safeguarding quality of agricultural inputs at entry points. Also, despite the progress made, the audit also noted that there are still challenges like shortage of staff for inspections, also the laboratory test is done to a small quantity of consignment which after passing the laboratory test the rest do not undergo computerized verification which pose a risk of importing substandard inputs.

Furthermore, TFRA has not yet established control for Agro Dealers as required by this recommendation. Therefore, based on the above assessment, the Audit Team has ranked this recommendation as partially implemented.

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Recommendation 2: Ensure availability of tools, human and financial resources needed in ascertaining availability of quality agricultural inputs to farmers in the country

The recommendation wanted the TFRA to ensure the availability of tools, human and financial resources needed in ascertaining availability of quality agricultural inputs to farmers in the Country.

In its earlier response, as an action plan for implementing this recommendation, TFRA committed that it would recruit 35 new staff in the financial year 2019/2020 who would enhance implementation of TFRA core activities in assuring availability of quality fertilizer, upon approval of organization structure and scheme of service the Authority.

In the review of the submitted Training Reports, it was revealed that TFRA has trained, registered and gazzetted 150 fertilizer inspectors located in 150 out of 186 Local Government Authorities (LGAs) in the country.

Further, the Authority has established Zonal Offices to facilitate close quality assurance services and the total number of quality assurance staff has increased from 8 in 2017/2018 to 25 staff in December 2020.The inspectors are equipped with working tools that include vehicle, motorbikes, sampling tools and protective gears. In terms of financial resources, the Authority has increased the budget for quality assurance from 148.7m/=in 2017/18 to 1.2b/=in 2019/20.

Based on the above assessment the Audit Team has ranked this recommendation as *partially implemented* due the fact that the fertilizers' inspectors have been registered, but there is no records to justify if number of registered inspectors is in line with the demand. Also records on budgetary increase was not availed for verification.

Recommendation 4: Improve the system and mechanism that will ensure timely reporting and proper analysis of needed fertilizers and seeds according to demand

This recommendation requires TFRA to improve its system and mechanism to ensure it facilitates timely reporting and proper analysis of needed fertilizers and seeds according to demand.

In its action plan, the TFRA planned to collaborate with Tanzania Agricultural Research Institution (TARI) and other partners in order to have continuous process for having current/updated soil mapping. During the follow-up, TFRA submitted supporting documents that shows that the implementation status such FFS demand and supply forecast documents that were prepared on annual basis and availed to stakeholders. It also indicated that its mechanism used to collect farmers demand forecast is through the Regional Secretariats.

Furthermore, the TFRA also collects supply forecast (cropping season opening stocks, domestic manufacturing and imports) from FSS dealers, which is then collaborated with FFS stakeholders to ensure that the FFS are availed timely as per the forecast. Further, TFRA indicated that the fertilizer availability is monitored and evaluated on monthly basis using the FFS balance sheet.

Despite the effort done by the TFRA, the Auditors are ranking it as *partially implemented* because the responses and evidence submitted of December, 2020 indicated that, TFRA prepared demand and supply forecast of fertilizers supplements for the 2020/21 cropping season. The document indicated demand forecast of fertilizers was based on the Regions and quantity (tons) needed.

Also, review of submitted evidence indicated that fertilizer manufacturers, importers and distributors were required to submit fertilizers importation projections per cropping season. Meanwhile, at the responses submitted on the financial year ending June, 2022 indicated that, TFRA continues to use the demand and supply forecast for fertilizer as the means that ensure timely reporting and proper analysis of fertilizer demands.

Further, the submitted evidences for the responses of the year ending June, 2022 is irrelevant as they indicate different training activities done by TFRA at different stakeholders and not the demand and supply forecasts of the fertilizer information. Moreover, there is no any evidence of soil mapping that shows status of soil fertility in the area to be supplied with fertilizers.

Recommendation 5: Formulate awareness creation mechanism on importance of quality seeds and fertilizers to key actors such as farmers, agro-dealers and agricultural extension officers

This recommendation wanted the TFRA to create awareness on the importance of quality seeds and fertilizers to key actors such as farmers, agro-dealers and agricultural extension officers.

In the action plan developed by TFRA, the Authority planned to conduct training to agro dealers in 10 Regions (Lindi, Mtwara, Iringa, Tabora, Shinyanga, Mwanza, Mara, Geita, Simiyu, Kagera) on the legal framework, fertilizers, handling and its judicial use. Also, TFRA, in every year, has planned to participate in Nane-Nane Agriculture exhibitions and also to ensure its staffs conduct different TV programs to create awareness on the use of quality fertilizer as a continuous process.

Through the Review of the responses submitted by TFRA, it was revealed that, TFRA in collaborate with its stakeholders conducted public educational campaigns on the sound application and management of fertilizers and fertilizer supplements. It also showed that TFRA conducted training sessions to FFS dealers, Agricultural Extension Officers and farmers. It also published information through social media, radio stations and newspapers, and participated in public events like farmers day (Nanenane) exhibition, world fertilizers day and various symposia that it organizes or gets invited.

This recommendation is ranked as it is partially implemented because TFRA has submitted evidence indicating different awareness campaign in various Nane-nane exhibition, world fertilizer exhibition day conducted in 13th October in every year. TFRA pointed to be using various newspapers such as Mtanzania, Habari Leo to publicize information on importance of quality seeds and fertilizers.

Despite the responses made, TFRA has submitted evidence for Nane-nane exhibition only, and no any evidence showing the continuation of the strategy or established mechanism so as to ensure sustainability in conducting the awareness programs.

Recommendation 6: Improve mechanisms for ensuring timely distribution of quality fertilizers to farmers

The recommendation wanted the TFRA to improve mechanisms for ensuring timely distribution of quality fertilizers to farmers.

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In the action plan, TFRA agreed that in early August fertilizer imported under Bulky Procurement and Supply (BPS) would be available before the start of cropping season, and that TFRA would ensure all other fertilizers are available before the cropping season. This would start by requesting the importers to submit their procurement plans in September, 2019 and 2019/2020.

According to evidence submitted, TFRA indicated that timely distribution is a function of timely importation, price, warehousing and a network of retail outlets (agro-dealers), simplified FSS import processes, increased FFS dealers and favorable indicative pricing has resulted in the timely availability of FFS in all geographical locations in the country. It indicated that Warehouse owned by FFS dealers have been spread all over the country which supply FFS up to village level.

Furthermore, TFRA also indicated that to ensure that the main fertilizers utilized in Tanzania are imported on time, it aggregates importation requirements, advertises tenders to pre-qualified suppliers, evaluates bids and awards the successful bidders before the commencements of the fertilizer utilization season.

Indicative fertilizer pricing is a participatory mechanism whereby TFRA involves importers in determining indicatives prices that enable to distribute the fertilizer to all geographical locations where fertilizer is utilized by farmers. TFRA has simplified registration and licensing agro dealers by introducing the online services. By simplifying the registration and licensing TFRA has facilitated increased agro dealers in the villages who enables distribution of fertilizers in the country.

Additionally, TFRA has indicated that it has sensitized cooperatives to participate in importation of approved fertilizer through BPS tenders. The cooperatives that imported through BPS tenders distribute fertilizer directly to the village level.

Based on the implementation status and the submitted evidence, the Audit Team regard this recommendation as partially implemented because the evidence submitted does not elaborate how the TFRA will ensure timely distribution to dealers and finally to farmers. The submitted evidence indicates that the fertilizer balance sheet, which in actual sense it has nothing to do with timely distribution. The sheet answers the component of

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availability while skipping the component of accessibility. The TFRA has not yet submitted evidence that narrates strategies on timely distribution of fertilizers to dealers and finally to farmers.

Recommendation 7: Improve mechanism for ensuring that indicative prices for all types of fertilizers are timely developed, communicated to the intended users and are complied with

The recommendation requires TFRA to ensure that there are indicative prices for all types of fertilizers and such prices are timely developed, communicated to the intended users and are complied with.

In responding to this recommendation, in the action plan developed by TFRA to implement this recommendation, TFRA indicated that it would keep on developing and issuing indicative prices for fertilizer under Bulk Procurement and Supply (BPS). Further, it committed itself to develop and communicate the indicative prices before the start of a season in 2019/2020. Thus, TFRA was required to improve mechanism for ensuring the indicative prices are developed by November, 2020 and published in TFRA website, newspapers, radio and TV stations.

As an implementation status of this recommendation, TFRA indicated that the current indicative prices were developed in November, 2020 and published in TFRA website, newspapers, radio and TV stations as per its initial action plan. Apart from that, TFRA indicated that the Permanent Secretary, Ministry of Agriculture always sends letters to RAS informing them on the new prices and issues directive to RSs to supervise and ensure compliance.

The auditors have managed to review the submitted report from TFRA and noted the issued indicative price in all regions. Despite having indicative prices in place, the TFRA has done less follow-up so as to ensure the compliance of the indicative prices to distributors. Therefore, this recommendation is ranked as partially implemented, no follow-up has been done to enforce compliance on the indicative prices.

Recommendation 8: Ensure proper coordination between importers, distributors, fertilizer sellers and farmers within the distribution chain so as to control quality of the fertilizers distributed to farmers

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This recommendation wanted the TFRA to ensure proper coordination between importers, distributors, fertilizer sellers and farmers within the distribution chain so as to control quality of the fertilizers distributed to farmers.

As an action plan to implement this recommendation, TFRA indicated that, it would initiate the Fertilizer Stakeholders platform in order to discuss with key stakeholders on the value chain, fertilizer legal framework, fertilizers, handling and its judicial use. Also, TFRA indicated that it would keep on conducting inspection throughout the value chain.

Reviewed responses submitted by TFRA revealed that TRA maintains register of FFS dealers (manufactures, importers, exporters, wholesalers, retailers, packagers, warehouse operators etc.) after ensuring that they comply with quality standards specified in the TFRA standard operating procedures. In order to ensure proper coordination, TFRA also conducts stakeholders' meetings to discuss and deliberate on different matters regarding fertilizer along the distribution chain.

Further, the responses indicated that, TFRA coordinate all stakeholders in the distribution chain through submission of information /data which will assist the authority to trace fertilizers from importation to retail level. It also regulates packaging along the distribution in order to maintain its quality as a means of ensuring proper quality assurance.

Furthermore, to ensure that the FFS quality administration is handled professionally, TFRA has managed to train registered and gazzetted fertilizers inspectors. In addition to the basic training, TFRA conducted refreshers training session to update their knowledge.

However, TFRA has not submitted any evidence to justify the developed and maintained register of FFS Dealers, minutes for the conducted stakeholders' meetings and reports submitted to TFRA from various stakeholders showing the compliance. Also, the Audit Team reviewed the submitted training reports and noted that training to stakeholders has been conducted in Dar es Salaam and coastal regions. Similarly, the stakeholders' meetings have not been conducted across the country. The TFRA management has not indicated whether it managed to establish the fertilizer platform for discussion with key stakeholders in the value chain on the fertilizer legal

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framework, fertilizers, handling and its judicial use. In view of these explanations, this recommendation is considered as partially implemented.

11.6   Specific Conclusion

Based on the analysis of the implementation status of the previously issued recommendations, it is concluded that the Ministry of Agriculture, TOSCI and TFRA have not made satisfactory progress towards implementing the given recommendations because only two (2) recommendations out nineteen (19) have been implemented to the fullest, while four (4) recommendations were not attended at all. More efforts are needed to ensure the given recommendations are fully implemented because it will reduce the supply of poor-quality agricultural inputs (seeds and fertilizers) to farmer which finally reduce the production capacity intended. NAOT will continue making follow-up in all recommendations to ensure that they are fully implemented.

11.7   Specific Recommendations

Recommendations to the Ministry of Agriculture

The Ministry of Agriculture is urged to:

i.   device a mechanism to ensure all recommendations supposed to be implemented by the Ministry are fully implemented; and

ii. give the proper support to the TOSCI and TFRA and should also supervise them to ensure they implements all recommendations to the fullest.

Recommendations to the TOSCI and TFRA

TOSCI and TFRA are urged to:

i.   ensure all initiatives done toward implementation of the issued recommendations are escalated to all zones and regions so as to make uniformity of understanding and continuous improvement; and

ii. device the mechanism of ensuring the recommendations which were found to be partially implemented are fully implemented.

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CHAPTER TWELVE

FOLLOW UP ON THE IMPLEMENTATION OF RECOMMENDATIONS ON MAINTENANCE OF POWER GENERATION PLANTS

12.1 Background to the Audit

Performance Audit Report on Maintenance of Power Generation Plants was tabled before the Parliament of the United Republic of Tanzania in April 2019. The overall objective of the audit was to determine whether TANESCO conducted risk-based maintenance of its power generation plants to ensure undisruptive power generation and increase the availability of plants.

12.2 Scope of the Audit

The audited entity was the Tanzania Electric Supply Company Limited (TANESCO), which has the role of implementing the underlying policy and regulations regarding the maintenance of power generation plants.

The audit focused on the planning, execution, monitoring and evaluation of the activities related to preventive maintenance of power generation plants. The audit examined the extent to which TANESCO conducts risk-based maintenance of power plants to ensure sustainable power generation in the country.

The audit covered three years period starting from 2015/2016 to 2017/2018, this was to allow auditors to conduct an in-depth review and analysis to establish the trend in the maintenance of Power Plants in the Country.

The summary of findings and conclusions from the audit are provided below.

12.3 Main Audit Findings

(a) Inadequate Management of Procurement of Spare Parts and Vendors for the Maintenance of Power Plants

The audit noted that TANESCO inadequately implemented annual procurement plans resulting from delays in the procurement of required spare parts as well as not implementing the existing TANESCO Procurement

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system (TAPROS) at the plant level. Also, TANESCO did not carry out adequate market price research for the procurement of spare parts.

(b) Annual Procurement Plans was not Implemented as Expected

This was contributed by the cost of items to be procured exceeding the given budget ceiling, lack of prioritization, denial of permission for outage time, late submission of specifications by the user department to the Procurement Management Unit (PMU), and long procurement process at PMU HQ.

In the financial year 2017/18, twenty-seven (27) tenders out of 59 from the generation department business unit equivalent to 46% of all tenders were not initiated one of the reasons being a lack of specifications from users.

(c) TANESCO's Procurement system (TAPROS) was not Implemented at some Plants

TANESCO does not apply TAPROS at the power plant level. The system is only applied at Headquarters, Zonal Offices as well as regional offices. This reduced real-time visibility of procurement activities in the maintenance of power generation plants due to the usage of manual systems. This resulted in poor monitoring and tedious tracing of stages at which initiated procurement process has reached. Consequently, risks and mitigation measures on the procurement of works, spares, working tools, and vendors cannot be visible from Headquarters and Zonal offices.

(d) Inadequate Market Price Research for the Procurement of Spare Parts

TANESCO did not conduct market research as there were over-budgeted items by over 99% and under-budgeting by up to 116%.

(e) TANESCO Lacks Specialized Skills in Thermal Plants

TANESCO did not adequately execute training plans for specialized skills in the maintenance of thermal power generation plants; partially conducted Training Needs Assessment (TNA), and lacks preparedness to cope with changes in technology.

(f) Inadequate Training in Specialized Skills in the Maintenance of Power Generation Plants

The audit noted that technical staff were rarely trained based on their gaps and needs even though, technology is changing and there is a need to be up to date with the change of technology. TANESCO did not attach its staff to manufacturers to acquire specialized skills. For the last three years, 15 (fifteen) staff from Kinyerezi I have trained abroad on issues of package familiarization, control, and maintenance, however such issues were not based on the Training Needs Assessment.

(g) Training Needs Assessment was Partially Conducted

The audit noted that the Training Needs Assessment was conducted by distributing 2,358 questionnaires to Power Plants, Regions, and Head Office Departments. The distributed questionnaires were only 36% of the Company's workforce. The audit noted that the questionnaires didn not reflect the training requirements of the Strategic Plan and how they were analyzed.

(h) Lack of Preparedness to Cope with Changes in Technology

The audit noted that TANESCO lacked proactive plans for the preparation of its staff in keeping pace with the power generation technologies. The practice requires TANESCO to put a clause that ensures each contractor has an item of technology transfer and capacity building.

(i) TANESCO Inadequately Conducted Risk-based Maintenance of Power Generation Plants

Although TANESCO has been conducting preventive maintenance, breakdowns have been occurring resulting in power disruption, and other associated risks. This was a result of inadequate identification of maintenance risk and non-prioritization of identified risk.

(j) Inadequate Identification of Maintenance Risk

TANESCO lacks a maintenance risk framework. All visited TANESCO power plants were lacking performance trends and failure analysis and history for power generation machines and spare parts. Also, TANESCO only keeps

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records of preventive maintenance activities but does not keep failure analysis, failure frequency, and impacts.

(k) Non-prioritization of Risks for Conducting Maintenance of Power Generation Plants

TANESCO conducted limited scheduled maintenance activities. Some worn out parts were neither repaired nor replaced when there was scheduled preventive maintenance.

(l) Inadequate Execution of Risk-based Maintenance

TANESCO did not conduct Risk-based Maintenance but rather conducted Preventive maintenance. Optimal asset management of power system components based on the analysis of the technical condition, residual life, risk, profitability and optimal timing of maintenance and reinvestments was not done.

(m) Ineffective Prioritization of the Budgeted Fund to the Plants with Critical Conditions

There were inconsistencies in the use of funds allocated for maintenance activities. The inconsistencies were in spending more than the amount budgeted and in one financial year only twenty per cent of the budgeted amount was utilized. While utilizing only 21% (2016/17) and 48% (2017/18) of the budgeted amount for maintenance, there were plants such as Pangani, Nyakato, and Sumbawanga which needed a major overhaul but they were not maintained due to lack of funds.

(n) Inadequate Maintenance Reporting Mechanism for Power Generation Plants by TANESCO and the Ministry of Energy

TANESCO and the Ministry of Energy have an inadequate reporting mechanism for the maintenance activities of power generation activities enabling management to make informed decisions regarding the maintenance of power generation plants. Not all reports submitted to the Ministry of Energy have information on the maintenance of power generation.

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Consequently, TANESCO and the Ministry of Energy lack substantial information on the maintenance of power generation plants. The non-existence of reporting structure resulted in a lack of emphasis on the effective maintenance of plants.

(o) Insufficient Monitoring of Power Generation Plant Maintenance by TANESCO

TANESCO insufficiently monitors power generation activities. TANESCO could not meaningfully turn its Corporate Business Plan into actionable plans. The Internal Audit Department of TANESCO conducted technical audits. Although the audit was substantial for technically monitoring maintenance activities, coverage and frequency of the exercise did not give assurance of performance improvement.

(p) Inadequate Monitoring Tool for Maintenance of Power Plants Activities

There is inadequate monitoring of maintenance activities by TANESCO and the Ministry of Energy. This tool could have helped power generation plants easily execute maintenance activities. Ultimately the system could have helped the power plants to minimize unnecessary breakdowns, downtime, and running costs. This inhibited TANESCO to have maintenance information to enable prompt reporting and responding to maintenance issues.

(q) Inadequate monitoring of power generation plants by the Ministry of Energy

The Ministry of Energy did not adequately monitor power generation plants. The role of the Ministry was to ensure the availability of adequate power at a relatively reduced cost. The Ministry did not analyze submitted reports to establish a trend in information regarding the maintenance of power generation plants. Consequently, the Ministry could not adequately monitor the effect of maintenance on ensuring the availability of power generation at a relatively reduced cost.

12.4   Overall Audit Conclusion

TANESCO inadequately conducted risk-based maintenance of its power generation plants to ensure quality electricity supply and generation capacity was enough to meet peak demands throughout the year and in all regions of the country. TANESCO did not adequately manage the procurement of spare parts and vendors for the maintenance of power generation plants with due regard to timelines, cost-effectiveness, and quality.

Also, TANESCO did not set and disburse adequate funds for the maintenance of the plants and did not have adequate plans to have the in-house specialized skills needed to conduct the maintenance of power generation plants. Neither TANESCO nor the Ministry of Energy adequately monitor activities for the maintenance of power generation plants.

12.5   Results of Follow-up on the Implementation of the Issued Recommendations

This part presents the implementation status of recommendations to the Ministry of Energy and Tanzania Electric Supply Company (TANESCO). Implementation status has been categorized into three, namely; recommendations that were fully implemented, recommendations that were partially implemented, and recommendations that were not implemented.

There were fourteen (14) recommendations issued in the audit, three (3) recommendations were directed to the Ministry of Energy and the other eleven (11) recommendations were directed to the Tanzania Electric Supply Company (TANESCO).

12.5.1 Overall Implementation of Issued Recommendations

A total of fourteen (14) recommendations were issued in this audit. Three (3) recommendations were directed to the Ministry of Energy, whereas eleven (11) recommendations were directed to Tanzania Electric Supply Company Limited (TANESCO) as presented in **Table 12.1.**

Table 12.1: Implementation status of Audit Recommendations for

Audited entity	Total number of issued recommendations Number	Level of implementation of Recommendations		
		Fully Implemented Number	Partially Implemented Number	Not Implemented Number
Ministry of Energy	3	0	2	1
TANESCO	11	1	4	6
Total	**14**	**1**	**6**	**7**

Source: Auditors' Analysis of MoE & TANESO responses (2022)

As seen in **Table 12.1**, a total of fourteen (14) recommendations were issued to both MoE and TANESCO. MoE was issued with three (3) recommendations while TANESCO was issued with eleven (11) recommendations. Out of the fourteen (14) issued recommendations, six (6) recommendations were partially implemented, seven (7) recommendations were not implemented, one (1) recommendation was overtaken by event and one (1) recommendation was fully implemented.

Furthermore, the Ministry of Energy partially implemented one (1) recommendation, one (1) recommendation was not implemented, one (1) recommendation was overtaken by an event and no recommendation that was fully implemented. TANESCO partially implemented six (6) recommendations, three (3) recommendations were not implemented and none was fully implemented.

Further analysis of the issued recommendations per each category was made based on the above follow-up results and analysis. The analysis made was based on the status of the level of implementation of the audit recommendations as presented in **Table 12.2**.

Table 12.2: Category of Recommendations issued to the Ministry of Energy and TANESCO and their Level of Implementation

Category of Recommendation	Total number of issued recommendations	Level of Implementation of Recommendations per Category		
		Fully Implemented	Partially Implemented	Not Implemented
Execution	5	1	2	2
Monitoring and Evaluation	4	0	3	1
Development	5	0	1	4
Total	**14**	**1**	**4**	**6**

Source: Auditors analysis of MoE & TANESO responses (2022)

Table 12.2 shows that Execution category had five issued recommendations whereas one (1) recommendation was partially implemented, two (2) recommendations were partially implemented and two (2) recommendations were not implemented. Development category had also five (5) recommendations whereby one (1) recommendation was partially implemented and four (4) were not implemented. On the other hand, Monitoring and evaluation category had a total of four (4) recommendations whereas three (3) were partially implemented and one (1) was not implemented.

12.5.2 Results of Follow-up on the Implementation of Issued Recommendations to the Ministry of Energy (MoE)

The Ministry of Energy was issued with three recommendations, and it was noted that out of them, the Ministry partially implemented two recommendations and did not implement one recommendation as shown in **Table 12.3.**

Table 12.3: Category of Recommendations issued to the Ministry of Energy and their Level of Implementation

Category	Total Number of Issued Recommendation	Level of Implementation of Recommendations per Category			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Monitoring and Evaluation		0	2	1	0
Total		**0**	**2**	**1**	**0**

Source: Auditors' Analysis (2022)

Table 12.3 shows that all three recommendations issued to the Ministry of Energy (MoE) were related to Monitoring and Evaluation category. Furthermore, it can be noted that two recommendations were partially implemented and one was not implemented.

Details of status of recommendations based on the four levels of implementation namely, fully implemented, partially implemented, not implemented and overtaken by even are provided hereunder:

The Recommendations that were Partially implemented by the Ministry of Energy

Recommendation 1: Ensure that MoE is regularly informed by TANESCO on the maintenance and condition of plants and document action to be taken

The responses submitted to CAG in 2019 indicated that the Ministry of Energy (MoE) through its letter dated 20th March, 2019 directed TANESCO to prepare and submit a report on the performance and maintenance of Power Generating Plants. TANESCO started to submit the same every quarter.

The review of responses and submitted evidence indicated that the Ministry of Energy took initiative to remind TANESCO to submit reports which will help to inform the Ministry on the maintenance and condition of plants. A review of submitted reports indicated that TANESCO was reporting to the Ministry on the conducted maintenance and condition of the plants.

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However, the submitted reports were brief and did not incorporate a way forward or plans for the identified challenges. Hence, it is concluded that this recommendation was partially implemented because the report does not indicate the way forward, analysis of the reported matters by MoE, and feedback provided.

Recommendation 2: Put in place guidelines with measurable deliverables to ensure maintenance of power generation plants, including Risk Based Maintenance is adequately conducted to ensure available electricity in the country is generated at a lower cost

The implementation plan submitted to CAG in 2019, highlighted that the Ministry directed TANESCO to effectively apply Risk Based Maintenance (RBM) in the Maintenance of Power Generating Plants and thus the RBM framework will be incorporated in TANESCO's Maintenance Policy on Power Generating Plants, the same is under review before approval by TANESCO management.

The review of the implementation status and submitted responses revealed that the MoE Risk Based Maintenance plan is incorporated in the Power Plants Operations and Maintenance Policy, the same has been recommended by TANESCO Board Committee to the Board of Directors for approval.

Similarly, it was noted through the submitted responses that the policy has introduced a Risk Based Maintenance (RBM) to be carried out by integrating analysis, measurements, and periodical test activities in the context of the environmental, operation, and process condition of the equipment in the Power Plants Operation and Maintenance Policy 16 system.

Therefore, this recommendation is partially implemented because the Ministry did not submit the draft of the power plants operation and maintenance policy for verification, however and also, it is not certain when the policy will be finalized.

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Recommendations that were Not Implemented by the Ministry of Energy

The audit team noted that out of three issued recommendations to MoE, one recommendation was not implemented. This recommendation was:

Recommendation 1: Form a team of long-experienced experts to periodically do advisory services to MoE Management on TANESCO's key and critical issues.

The responses submitted to CAG in 2019 indicated that the Ministry of Energy (MoE) has formulated a team of long-experienced experts for advisory services on the key and critical issues towards the development of energy projects. Also, there have been regular visits to the Power Generating Plants by the experts from the Ministry to assess their performance and advise accordingly.

The audit noted during the follow-up that the MoE has not formed a team to advise the MoE Management regarding critical issues towards the development of energy projects. The audit concluded that this recommendation was not implemented because Evidence of the existence of the formed team of experts was not submitted as well as a report produced by the said team.

12.5.3 Results of Follow-up on the Implementation of Issued Recommendations to TANESCO

The analysis of evidence and information submitted by TANESCO indicated that out of the eleven (11) issued recommendations, TANESCO fully implemented one (1) recommendation, partially implemented four (4) recommendations, and seven (7) recommendations were not implemented. The details of implementation status based on the category of recommendations is as shown in **Table 12.4.**

Controller and Auditor General

Table 12.4: Category of Recommendations issued to the TANESCO and their status of implementation

Category	Total Number of Issued Recommendations	Level of Implementation of Recommendations per Category		
		Fully Implemented	Partially Implemented	Not Implemented
Execution	5	1	2	2
Monitoring and Evaluation	1	0	1	0
Development	5	0	1	4
Total	11	1	4	6

Source: Auditors' Analysis of Evidence and Information from TANESCO (2022)

Table 12.4 shows that ten (10) issued recommendations were related to the Development and Execution category. Under the Execution category, five (5) recommendations were issued whereby one (1) was fully implemented, two (2) were partially implemented and two (2) recommendations were not implemented. Under development category, five (5) recommendations were issued whereby one (1) was partially implemented and four (4) recommendations were not implemented.

Details of status of recommendations based on the four levels of implementation, namely; fully implemented, partially implemented, not implemented and overtaken by even are provided hereunder:

The Recommendations that were Not Implemented by TANESCO

The audit team noted that out of eleven (11) issued recommendations to TANESCO, seven (7) recommendations were not implemented. These recommendations are as follows:

Recommendation 1: Ensure EPC contracts are exhaustive and include specialized skills and certified training of critical systems. Also, training courses need to be closely supervised evaluated, and monitored

In 2019, the submitted action plan by TANESCO indicated that the management would ensure that all upcoming EPC contracts exhaustively cover the element of specialized training.

The audit noted through implementation status and submitted evidence that on the issued recommendations that all EPC contracts cover the element of specialized training. However, there was no evidence indicating an EPC contract with a training clause on specialized skills and there were no training reports on certified personnel on critical systems submitted. Hence, the audit concluded that this recommendation was not implemented.

Recommendation 2: Capacitate the maintenance staff in all plants with required working tools and equip workshops to enable in-house repairs and modifications

In response to this recommendation in 2019, TANESCO indicated that Most of the plants were already equipped with sufficient working tools to enable in-house repairs. On the other hand, contract No. PA/001/2019-20/HQ/G/10 for the Supply of various tools and measuring equipment under the framework at Kinyerezi I and Ubungo Gas Plant I has been signed and its implementation is in progress.

The reviews of the implementation status submitted by TANESCO for these recommendations indicated that the working tools have been delivered at Kinyerezi I, Ubungo Gas Plant I, Ubungo Gas Plant II, and Tegeta Gas Plant through contract No. PA/001/2019-20/HQ/G/10.

However, the audit noted through contract information No. PA/001/2019-20/HQ/G/10 for the Supply of various tools and measuring equipment were not attached as evidence for the existence of the working tools. The delivery status for the Kinyerezi I, Ubungo Gas Plant I, Ubungo Gas Plant II, and Tegeta Gas Plant was not attached as proof for delivery of the said working tools; Framework contracts and delivery status for other power plants; and the Status of working tools for periodic maintenance were not submitted.

Hence, it was concluded that this recommendation was not implemented as there was no evidence to support TANESCOs assertion.

Recommendation 3: Put in place a mechanism that will allow innovations and creativity for maintenance activities especially those requiring specialized skills (rewards should be provided for creativity and innovations)

In the implementation plans submitted for this recommendation in 2019, TANESCO indicates that it rewards creativity in some selected projects, however, the formal reward scheme has been prepared and was in the final stages of approval.

The audit noted through the review of the implementation status and submitted evidence that the Talent Management and Performance Management Policies have been approved by the Board of Directors in May 2022 and their implementation will start in Financial Year 2022/2023. However, no evidence was submitted to support board approval on Talent Management. Hence, the audit concluded that this recommendation was not implemented.

Recommendation 4: Conduct adequate market research for all procurements and high-risk machine parts should be prioritized and establish a supplier and vendor database as well as the price database for each plant

In the implementation plans submitted for this recommendation in 2019, TANESCO indicated that the Management had considered procurements of services and high-risk machine parts from the Original manufacturers/official authorized dealers through a Long Term Service Contracts (PA/001/2016-17/HQ/N/02–Kinyerezi I, PA/001/2018-19/HQ/N/01-Kinyerezi II, PA/001/2016-17/HQ/N/16-Mtwara, PA/001/2016/HQ/N/18–Tegeta, PA/001/2016-17/HQ/N/13-Ubungo I, PA/001/2016-17/HQ/N/11–Ubungo II) for Supply and Services for each Plant. In these regards Suppliers and vendor are well known and their prices are speculative.

The audit noted through the reviews of the implementation status that the procurement of high-risk machine parts was done through the stated Long-Term Service Contracts henceforth the prices have been established. However, none of the market research reports and the established vendor database was availed to the audit team. Hence, the audit concluded that this recommendation was not implemented.

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Recommendation 5: Ensure sustainable and regular maintenance audits covering all power generation plants

The implementation plan submitted for this recommendation in 2019, indicated that TANESCO Management formulated a team of experts to conduct regular maintenance audits covering all power generation plants and thus ensure sustainable and regular maintenance.

The audit noted through the review of the implementation status and submitted evidence that the Operation and Maintenance Audit had not been incorporated in the Power Plants Operation and Maintenance Policy is under review and Approval by the Board of Directors.

Hence it is concluded that this recommendation was not implemented because of the due to the absence of plans and reports on regular maintenance audits.

Recommendation 6: Standardize the format of reporting from power plants to the Ministry such that all issues that need to be monitored by the Ministry are covered and presented in the same manner in all plants

TANESCO responded that the reporting format from power plants has been standardized and the standard format as shown in the attachment was already in use by all power-generating plants. The audit noted that TANESCO responded that the reporting format from power plants has been standardized and is in use by all power-generating plants. However, the said reporting format was not submitted to the audit team for verification.

Recommendation 7: Create a power generation forum whereby all generation plants (including privately owned plants) will participate and share experiences, challenges, and successes

The audit noted through the review of the implementation status that the Power Generation forum was conducted in August 2020 without accommodating privately owned plants. However, the report on the previous power forum was not submitted to the audit team for verification and resolution made. Hence, this recommendation was not implemented.

The recommendations that were Partially Implemented by TANESCO

The audit team noted that out of eleven (11) issued recommendations to TANESCO, three (3) recommendations were partially implemented. These recommendations are as follows:

Recommendation 1: Ensure procurement processes are conducted under strict adherence to existing laws and regulations and on time and APPs are initiated immediately after budgets are approved

In the implementation plan submitted for this recommendation in 2019, TANESCO indicated that it has ensured all procurements are conducted under strict adherence to existing laws and regulations and on time through progressive capacity building on the procurement act and contract management. APPs are initiated immediately after Budget approval and emphasis has been put to ensure all procurement is completed within a planned year.

The audit noted through the implementation status that TANESCO ensures that procurement activities are conducted timely under strict adherence to existing laws and regulations.
However, no evidence about capacity building on the procurement act and contract management was provided as a measure to pre-determine and improve procurement practices. Hence, this recommendation was partially implemented.

Recommendation 2: Formulate a risk maintenance framework that shows performance trends, failure analysis, and history and analyse failure duration and impact

In the implementation plan submitted for this recommendation in 2019, TANESCO indicated that the Risk-Based Maintenance framework which analyzes performance trends, failures, and their impact have been incorporated in TANESCO's Operations and Maintenance Policy on Power Generating Plants, the draft of the same was under final review before approval by TANESCO management.

The audit noted through the implementation status and submitted evidence that TANESCO prepared the Power Plants Operations and Maintenance Policy which had incorporated the Risk Based Maintenance. The Policy has

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been recommended by Board Committee to the Board of Directors for approval but was yet to be approved. Hence, the recommendation is partially implemented.

Recommendation 3: Procure major equipment from original manufacturers and not supplying companies. This shall commit the manufacturers to provide proper specialized training and enhance the traceability of spare parts in the future

In the implementation plan submitted for this recommendation in 2019, TANESCO indicated that most of the spare parts and services for power generating plants were procured directly from Original Equipment Manufacturers through Long Term Service Contracts (LTSC) mentioned under Item No. 6. The procurement of LTSC for the rest of the power generating plants is on progress.

The audit noted through the reviews of the submitted implementation status of the recommendations that the mentioned contract was still valid and hence major spare parts and services were procured directly from the Original Equipment Manufacturer. However, no evidence was submitted by TANESCO for spare parts procured directly from the Manufacturer. Hence, the recommendation was partially implemented.

The recommendations that were Fully Implemented by TANESCO

Out of eleven (11) issued recommendations, one (1) recommendation was not implemented. This is detailed below:

Recommendation 1: Implement a computerized procurement system for all plants whereby procurements status can be monitored and accessed at all levels

In the implementation plan submitted for this recommendation in 2019, TANESCO indicated that all procurement staff and other staff in all power plants were trained on the usage of the Tanzania National electronic Procurement System (TANePS), which enables monitoring of the procurement process in each stage.

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The audit noted through the reviews of TANePS that TANESCO HQ and all of its zone uses TANePS during the implementation of the procurement activities. Hence, this recommendation is implemented.

12.5 Specific Audit Conclusion

The Ministry of Energy and TANESCO did not make sufficient efforts to implement the recommendations of the CAG Performance Audit on Maintenance of Power Plants. This conclusion is based on the follow-up results as discussed in the earlier sections, which show that of the fourteen (14) issued recommendations, six (6) were partially implemented, seven (7) recommendations were not implemented, one (1) was overtaken by an event, and one (1) recommendation was fully implemented. Because these recommendations offer sound and practical answers to the numerous problems that impact their performance on Maintenance of power plants, the Management of the Ministry of Energy and TANESCO need to exert more efforts to ensure that all recommendations are adequately implemented.

12.6 Specific Audit Recommendations

Recommendations to TANESCO

The Tanzania Electricity Supply Company (TANESCO) is urged to:

  i. Device a mechanism for follow-up of all previously issued recommendations, and

  ii. Ensure that all previously issued recommendations are fully implemented.

Recommendation to Ministry of Energy

The Ministry of Energy should ensure all issued recommendations which have been partially or not implemented are fully implemented.

CHAPTER THIRTEEN

FOLLOW-UP ON THE IMPLEMENTATION OF RECOMMENDATIONS ON THE MANAGEMENT OF EDUCATION FOR PUPILS WITH SPECIAL NEEDS

13.1   Background of the Audit

Performance Audit Report on the Management of Education for Pupils with Special Needs was tabled to the parliament of the United Republic of Tanzania in March, 2019. The overall objective of the audit was to assess the extent to which the President's Office – Regional Administration and Local Government (PO-RALG) and the Ministry of Education, Science and Technology (MoEST) had ensured conducive teaching and learning environment for pupils with special needs.

13.2   Audit Scope

The main audited entities were the President's Office - Regional Administration and Local Government (PO-RALG) and the Ministry of Education, Science and Technology (MoEST). The audit focused on the education to pupils in pre-primary and primary schools. More specifically, the audit focused on three categories of impairment, namely Hearing Impairment (HI), Visual Impairment (VI), and Intellectual Impairment (II).

As part of verification of the collected information from the PO-RALG and MoEST, data was collected from the six geographical zones of Coastal, Lake, Eastern, Southern Highlands, Southern and Northern Zones. The visited schools were selected based on the categories of disabilities in the regions from each zone; the selected regions were Dar es Salaam, Dodoma, Lindi, Arusha, Njombe, and Kagera.

The audit covered a period of four financial years from 2014/15 to 2017/18 because during this period the National Strategy for Inclusive Education of 2013 was implemented.

13.3   Main Audit Findings

(a) Inadequate Provision of SNE Teaching and Learning Requirements

The audit noted that primary schools had insufficient teaching and learning equipment. It was observed that almost 68% of the required teaching and learning equipment such as thermoform, braille embosser, braille machine, otoscope, receiver, rattle, and puzzles were not available in the visited schools. In addition, it was noted that PO-RALG did not include Special Needs Education (SNE) activities in their annual budgets for the last four financial years. Released funds of about TZS 272 million at MoEST for acquisition of SNE facilities were reallocated to facilitate other activities.

(b) Inadequate Rooms for Storage and Use of Supplied Learning Equipment and Assistive Devices

The audit noted that 75% of the visited primary schools for pupils with Hearing Impairment (HI), lacked audiology test rooms for testing the level of the pupils' hearing problems. It was further noted that only Kigwe Viziwi at Bahi District Council had the required audiology test room.

(c) Inadequate Mechanisms for Maintenance of Teaching and Learning Equipment for SNE

It was discovered that the two ministries did not set budgets for maintenance and repair of teaching and learning equipment for SNE because they do not have records of malfunctioning equipment and assistive devices that needed repair. There was no assessment conducted at national level to establish the status of the supplied SNE facilities.

(d) Inadequate Training and Allocation of Special Needs Teachers to the SNE Primary Schools

The database review of SNE teachers from MoEST indicated that, while the country requires 4,428 primary school teachers in special needs education, currently there are 2,460 primary school SNE teachers in the country. Based on the auditors' projection, shortage of SNE primary school teachers is 1968 or 44%. The gap results from the recent low rate of training special needs teachers. The data indicate that MoEST has produced only 654 SNE teachers from the year 2014 to 2018 in the country.

(e) Shortage of SNE Skilled School Quality Assurers

Review of School Quality Assurer staffing level documents indicated that only 98 out of 1,306, which is equivalent to 8%, of school quality assurers had knowledge of Special Needs Education. As a result, most of the school quality assurers, who inspect Special Needs Education primary schools, do not have the required knowledge and skills to understand and assess both teaching and learning conducted in sign language or teaching and learning material prepared in braille.

13.4 Overall Audit Conclusion

Both the MoEST and PO-RALG had not sufficiently invested in special needs education activities in their operations/plans. This situation has affected the learning and teaching process of pupils with special needs. At national level, there was insufficient information on the number of special needs pupils and teachers.

Regardless of the requirement for conducive environment for inclusive education, both MoEST and PO-RALG failed to manage the provision of such education to pupils with special needs adequately. Furthermore, MoEST's quality assurance activities did not adequately contribute towards improving special needs education as well as the delivery and monitoring of examination standards. Furthermore, the procedures of teaching and examining pupils with special needs did not adequately accommodate their needs.

13.5 Results of the Follow-up Audit on the Implementation of the Recommendations

This part presents status of the implementation of the issued recommendations to the President's Office - Regional Administration and Local Government (PO-RALG) and the Ministry of Education, Science, and Technology (MoEST). Implementation status was categorized into four categories namely *fully implemented, partially implemented, not implemented and overtaken by event recommendations.*

13.5.1 Overall Implementation of the Issued Recommendations

A total of eleven (11) recommendations were issued in this performance audit, six (6) recommendations were directed to MoEST and five (5) recommendations were directed to PO-RALG. The overall follow-up audit results on the implementation of the issued audit recommendations indicated that out of eleven (11) issued recommendations, six (6) recommendations were fully implemented, two (2) recommendations were partially implemented, and three (3) recommendations were not implemented. **Table 13.1** shows details of the level of implementation for the two audited entities.

Table 13.1: Level of Implementation of Recommendations by Audited Entities

Audited Entity	Total Number of Issued Recommendations	Level of implementation of Recommendations		
		Fully implemented	Partially Implemented	Not implemented
PO-RALG	5	2	0	3
MoEST	6	4	2	0
Total	11	6	2	3

Source: Auditors' Analysis of Implementation Status (2022)

Table 13.1 shows that, out of five (5) issued recommendations, PO-RALG was able to fully implement two (2) recommendations and did not implement three (3) recommendations. On the other hand, MoEST was issued with six (6) recommendations whereby four (4) recommendations were fully implemented, two (2) recommendations were partially implemented whereas three recommendations were not implemented.

Further analysis of the issued recommendations for each recommendation category was made based on the four levels of implementation namely; fully, partially, not implemented, and overtaken by event. **Table 13.2** provides the level of implementation for all issued recommendations based on these categories.

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Table 13.2: Level of Implementation of Recommendation by Category

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	1	1	0	0	0
Implementation	1	1	0	0	0
Coordination	8	4	1	3	0
Total	11	6	2	3	0

Source: Auditors' Analysis of Implementation Status (2022)

Table 13.2 illustrates that out of the eleven (11) recommendations issued in this audit, six (6) recommendations were fully implemented whereas four (4) recommendations were under Coordination category, and one (1) under Implementation and Planning categories respectively. Two (2) recommendations were partially implemented and were under Coordination category. Moreover, three (3) recommendations were not implemented and were also under coordination categories.

13.5.2 Results of Follow-up of Implementation of Issued Recommendations to PO-RALG

This section provides details on the status of implementation of the recommendations issued to the President's Office – Regional Administration and Local Government (PO-RALG).

A total of five recommendations issued to PO-RALG. Two recommendations were fully implemented whereas three recommendations were not implemented. **Table 13.3** provides summary of the status of implementation of the recommendations issued to PO-RALG by category of recommendation.

Table 13.3: Level of Implementation of Recommendations per Category

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	0	0	0	0	0
Implementation	0	0	0	0	0
Monitoring and Evaluation	0	0	0	0	0
Coordination	5	2	0	3	0
Development	0	-	0	0	0
Total	**5**	**2**	**0**	**3**	**0**

Source: Auditors' Analysis of Implementation Status (2022)

Table 13.3 shows that two out five recommendations issued to PO-RALG were fully implemented and were under the category of Coordination. Likewise, three out of five issued recommendations were not implemented and were also in the Category of coordination.

Below are the details of the status of implementation of the issued recommendations based on the four levels of implementation namely, fully implemented, partially implemented, not implemented and overtaken by event.

Details of the Recommendations that were Fully Implemented

The audit team noted that there was a total of two recommendations that were fully implemented by the PO-RALG. The details are explained as follows:

Recommendation 1: Conduct a thorough needs assessments prior to procurement and supply of teaching and learning materials for SNE

This recommendation required PO-RALG to conduct thorough needs assessments before procurement and supply of teaching and learning materials. In the action plan developed by PO-RALG to implement this recommendation, PO-RALG indicated that it would instruct each council to conduct a needs assessment and submit it to the National level for analysis, procurement, and distribution.

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Through reviewing the implementation status submitted by PO-RALG, it was noted that PO-RALG had received and compiled needs assessments of teaching and learning materials for pupils with special needs that were done in the respective councils. Therefore, this recommendation was fully implemented since the provided evidence satisfied the conditions needed to assure its implementation.

Recommendation 2: Develop mechanism for proper documentation and sharing of SNE information at different levels

This recommendation required PO-RALG to develop a mechanism for proper documentation and sharing of SNE information at different levels. In the action plan developed by PO-RALG to implement this recommendation and submitted to the Follow up Team for verification, it was indicated that PO-RALG would review tools used for collecting information from schools (*Takwimu za Shule/Madarasa ya Awali (TSA), Takwimu za Shule za Msingi (TSM), Takwimu za Shule za Sekondari (TSS),* and *Takwimu za Elimu ya Watu Wazima na Elimu Nje ya Mfumo Rasmi (TMW))* to enable capture of all necessary Special Needs Education (SNE) information.

During the review of the implementation status, it was noted that PO-RALG had reviewed tools used to capture school information and those of SNE and that these reviews were also made in the Basic Education Management Information System (BEMIS). Therefore, this recommendation was fully implemented since the provided evidence satisfied the conditions needed to assure its implementation.

Details of the Recommendations that were Not Implemented

The analysis of submitted evidence and information from PORALG showed that four recommendations were not implemented by PO-RALG. These recommendations and their status of implementation are as explained below:

Recommendation 3: Develop mechanism for identifying malfunctioning and maintenance of learning/teaching materials for pupils with disabilities

This recommendation required PO-RALG to develop a mechanism that would help identify malfunctioning and maintenance of learning/teaching materials for pupils with disabilities. In the action plan, PO-RALG indicated that councils would be required to set the budget for conducting assessment and maintenance of malfunctioning equipment for children with special needs through the issuance of letters providing instructions.

During reviewing the implementation status, it was noted that PO-RALG had only issued instruction to LGAs' Directors through letter with reference number *Na.DA.29/297/04/65* of 14th April, 2021 requiring them to allocate funds for assessment and maintenance of the malfunctioning equipment though there was no supporting evidence. A review of this letter indicated that PO-RALG only required Directors at LGAs to allocate an annual budget that would cater for exercises for identification of pupils with special needs before their registration and enrolment in schools. Therefore, this recommendation was not implemented since the provided evidence does not address the requirement as stipulated in the issued recommendation.

Recommendation 4: Develop mechanism for coordinating the provision of SNE teaching and learning requirement at different levels

This recommendation required PO-RALG to develop a mechanism that would ensure coordination in the provision of teaching and learning requirements for SNE at different levels. In the action plan developed by PO-RALG, it was indicated that PO-RALG would strengthen the existing mechanism to ensure all councils provided the teaching and learning requirements for pupils with special needs.

A review of the responses on the implementation status indicated that PO-RALG ensured the implementation of the coordinating mechanism through public leaders' speeches, meetings, and workshops as platforms for reminding that responsible and creating awareness of supporting pupils with special needs.

Furthermore, through review of the submitted evidence, it was noted that PO-RALG issued a letter providing approval and required Directors at LGAs to facilitate and support Special Education Officers to attend the planned meeting *"Mkutano Mkuu wa umoja wa Maafisa Elimu Maalum Tanzania Bara".* The audit team is of the view that the provided evidence aligns with neither the planned action nor the provided status of implementation. Therefore, this recommendation was not implemented.

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Recommendation 5: Ensure that all issues concerning SNE, including conducting capacity building to SNE teachers are prioritized and budgeted for

This recommendation required PO-RALG to ensure that all issues concerning SNE including the conduct of capacity building for SNE teachers are prioritized and budgeted. In the action plan prepared by PO-RALG, it was indicated that PO-RALG would set budget and ensure that stakeholders would be involved in the conduct of capacity building and procurement of materials.

A review of the status of implementation indicated that PO-RALG, Ministry of Education, Science and Technology (MoEST), and Non-Government Organizations (NGOs) signed a contract that includes items for capacity building of teachers and procurement of assistive devices, learning, and teaching materials.

However, through review of the submitted evidence, it was shown that PO-RALG issued instructions that among others required LGAs to allocate funds that would cater to the implementation of SNE activities (Letter with Ref. No. DB.291/297/04/190 dated 15th July, 2022). In addition, it was further noted that there was no evidence to support that PO-RALG efforts to ensure capacity building of SNE teachers is enhanced.

Despite the issuance of directives to ensure the allocation of funds for SNE activities, it was noted that as of 30th June, 2022 PO-RALG had not managed to ensure implementation of this recommendation; therefore, this recommendation was not implemented.

13.5.3 Results of Follow-up of Implementation of Issued Recommendations to the Ministry of Education, Science and Technology

This section provides details on the status of implementation of the recommendations issued to the Ministry of Education, Science and Technology (MoEST).

A total of six recommendations were issued to MoEST. Four (4) recommendations were fully implemented while two (2) recommendations

were partially implemented. **Table 13.4** indicates summary status in the level of implementation of the issued recommendations.

Table 13.4: Level of Implementation of Recommendations by Category by MoEST

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations			
		Fully Implemented	Partially Implemented	Not Implemented	Overtaken by Event
Planning	1	1	0	0	0
Implementation	1	1	0	0	0
Monitoring and Evaluation	1	0	1	0	0
Coordination	3	2	1	0	0
Total	**6**	**4**	**2**	**0**	**0**

Source: Auditors' Analysis of Implementation Status (2022)

Table 13.4 shows that three (3) recommendations out of six (6) were fully implemented whereas, two (2) were under Coordination category and one (1) was under Planning and Implementation/Execution category respectively. On the other hand, one (1) recommendation which were partially implemented was under the category of Monitoring and Evaluation while the remaining one (1) was under the category of Coordination.

Details of the Recommendations that were Fully Implemented

The analysis of evidence and information submitted by MoEST showed that four (4) recommendations were fully implemented. These recommendations and their status of implementation are as explained below:

Recommendation 1: Prioritize and establish a stainable model for funding SNE activities and mobilizing funds for SNE

This recommendation required MoEST to prioritize and establish a stainable model for funding SNE activities and mobilizing funds for SNE. In the action plan developed by MoEST to implement this recommendation, MoEST indicated that it would allocate more funds annually to cater to SNE activities, develop specific projects to address challenges facing the provision of education for learners with special needs, and in collaboration

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with PO-RALG to coordinate efforts/projects developed and implemented by NGOs, INGOs, CSOs, CBOs, and private sectors to avoid duplication of efforts and maximize support aimed at enhancing SNE services.

In the MTEF developed by MoEST, it was indicated that MoEST has been allocating funds to implement SNE activities through MTEF ranking from TZS 400 million. Through reviewing the implementation status, it was noted that MoEST had been allocating the required funds. Likewise, a review of the submitted *Randama* indicated that MoEST developed specific projects to address challenges facing the provision of education for learners with special needs.

On the other hand, review of the Report of the Meeting between MoEST in collaboration with PO-LARG coordinated projects implemented by NGOs, INGOs, SCOs, CBOs and private sectors in order to avoid duplication of efforts and maximize support aimed at enhancing SNE service as shown in the report for the meeting. Therefore, this recommendation was fully implemented.

Recommendation 3: Develop programs that will facilitate the increase in number and utilization of SNE teachers in the country

This recommendation required MoEST to develop programs that would facilitate the increase in the number and utilization of SNE teachers in the country. In the action plan developed by MoEST to implement this recommendation, MoEST planned to introduce pre-service certificates in special education programs at Mpwapwa and Mtwara to increase the number of SNE teachers. Similarly, it was indicated that MoEST in collaboration with PO-RALG would make sure that special education teachers are allocated to schools enrolling children with special needs.

Through reviewing the implementation status, it was noted that MoEST introduced pre-service certificates in special education programs at Patandi, Mpwapwa, and Kabanga Teachers College in the academic year 2022/23 and thus making a total of three teachers' colleges offering programs. A review of the submitted evidence indicated that Mpwapwa and Kabanga Teachers' Colleges already enrolled teachers who opted certificate of special education in hearing impairment and deaf-blind.

On the other hand, it was shown that in the financial year 2021/22, MoEST in collaboration with PO-RALG has been allocating special education teachers direct to schools enrolling students with special needs in their first appointment by considering teachers of Special Education in Employment and located to schools enrolling students with special needs Teachers Employed by PO-RALG in the year 2021 and 2022. Therefore, this recommendation was fully implemented.

Recommendation 4: Strengthen the mechanism in place to ensure that schools with SNE pupils are inspected regularly

This recommendation required MoEST to strengthen the mechanism in place to ensure that schools with SNE pupils are inspected regularly. In the action plan developed by MoEST to implement this recommendation, MoEST indicated that it would strengthen its schools' quality assurance procedures by considering SNE schools as one of the selection criteria for inspection.

Through reviewing the Training Report, it was indicated that in the financial year 2021/22 MoEST conducted in-service training to a total of 206 School Quality Assurers (SQAs) about the best way of inspecting schools enrolling students with special needs. Therefore, this recommendation was fully implemented.

Recommendation 5: Ensure availability and proper allocation of qualified and motivated Quality Assurers

This recommendation required MoEST to ensure the availability and proper allocation of qualified and motivated Quality Assurers. In the action plan developed by MoEST, MoEST indicated that it would deploy SNE teachers as a strategy to overcome a shortage of skilled school quality assurers.

Through reviewing the implementation status of this recommendation, it was noted that from the financial year 2019/20 to 2021/22 the Government recruited a total of 102 Special Education Teachers as School Quality Assurers. Therefore, this recommendation was fully implemented.

Details of the Recommendations that were Partially Implemented

The analysis of evidence and information submitted by MoEST showed that two (2) recommendations were partially implemented by MoEST. These

recommendations and their status of implementation are as explained below:

Recommendation 2: Ensure that issues concerning SNE including review of curriculum and training of SNE teachers are prioritized and budgeted for

This recommendation required MoEST to ensure that issues concerning SNE including the review of curriculum and training of SNE teachers are prioritized by MoEST. This is to ensure that issues concerning SNE including review of curriculum and training of SNE teachers are prioritized and budgeted for.

In the action plan developed by MoEST to implement this recommendation, MoEST indicated that through TIE it would improve curriculum materials to suit learners with special needs by developing appropriate guidelines and conducting research to establish existing gaps and appropriate solutions. Also, the action plan indicated that MoEST would provide more in-service teachers' trainings to build capacity for effective teaching and learning of pupils with special needs.

Through the review of the implementation status, it was shown that MoEST through TIE is in the process of reviewing the Pre-primary, Primary, Secondary, and Teacher Education Curricular, the process has accommodated the needs of learners with special needs. However, a review of the Training Report indicated that MoEST conducted in-service teachers' training for a total of 1,339 Pre-primary, Primary, and Special Needs teachers in secondary schools. Therefore, this recommendation was partially implemented.

Recommendation 6: Improve setting and monitoring examination standards and procedures in order to ensure that examination invigilation and marking consider the needs of special needs pupils

This recommendation required MoEST to improve setting and monitoring examination standards and procedures to ensure that examination invigilation and marking consider the needs of special needs pupils. In the action plan developed by MoEST to implement this recommendation, MoEST indicated that NECTA would continue to set, invigilate and mark adopted

examinations per the existing curriculum standards, circulars, and guidelines to suit the diverse educational needs of all learners.

Likewise, the developed action plan indicated that MoEST through NECTA would strengthen its examination system by capacitating authorities responsible for examination matters to suit the educational needs of learners with disabilities. Furthermore, MoEST indicated that it would develop and issue guidelines to facilitate candidates with special needs to sit for mathematics and science subjects as appropriate as required.

Through reviewing the implementation status, it was indicated that MoEST through NECTA continues to set, invigilate and mark adopted examinations per existing curriculum standards, circulars, and guidelines to suit the diverse education needs of all learners.

Similarly, it was indicated that MoEST through NECTA has been conducting workshops to authorities responsible for examination matters to strengthen examination system to suit educational needs of leaners with disabilities. In addition, as regard to guidelines to facilitate candidates with special needs to sit for mathematics and science subjects, it was noted that MoEST is still in the process of developing and issuing guidelines to facilitate these candidates as appropriate as required. Therefore, this recommendation was partially implemented.

13.6   Specific Audit Conclusion

Based on the analysis of the implementation status of the previous issued recommendations to MoEST and PO-RALG, it is concluded that both PO-RALG and MoEST showed efforts to ensure implementation of the issued audit recommendations since out of eleven (11) issued recommendations, eight (8) recommendations were either fully or partially implemented with the exception three (3) recommendations that were not implemented.

13.7 Specific Audit Recommendations

Recommendations to the President's Office - Regional Administration and Local Government

The President's Office – Regional Administration and Local Government is urged to:

i. strategize to ensure that the issued recommendations that were not implemented are fully implemented; and

ii. ensure a strengthened coordination among other levels of the government operations on the implementation of issued recommendations is in place.

Recommendations to the Ministry of Education, Science, and Technology

The Ministry of Education, Science and Technology is urged to:

i. strategize to ensure that the issued recommendations that were partially implemented are fully implemented; and

ii. liaise with other stakeholders in dealing with SNE matters to ensure fully implementation of the issued audit recommendations.

CHAPTER FOURTEEN

FOLLOW-UP OF THE IMPLEMENTATION OF RECOMMENDATIONS ON THE MANAGEMENT OF THE PROVISION OF REFERRAL AND EMERGENCY HEALTH CARE SERVICES IN HIGHER-LEVEL REFERRAL HOSPITALS

14.1 Background to the Audit

Performance Audit Report on the on Management of the Provision of Referral and Emergency Health Care Services in Higher level Referral Hospital tabled to the parliament of the United Republic of Tanzania in March, 2018.

The overall objective of the audit was to assess the performance of the Ministry of Health in managing the provision of referral and emergency healthcare services in higher health facility level.

14.2 Scope of the Audit

The main audited entity was the Ministry of Health, as it is responsible for administering the delivery of healthcare services in regional, zonal and national referral hospitals.

The audit focused mainly on evaluating the efforts made by the Ministry of Health to ensure that the mechanisms used in administering the provision of referral and emergency services are effective. This was done by assessing the extent and capacity of the Referral Hospitals in the provision of the required level of health care services. The audit also assessed the adequacy of managing received health emergencies and monitoring activities in the provision of referral healthcare services.

The audit covered the entire country and data were collected from selected Regional Referral Hospitals, Zonal Referral Hospitals and National hospitals. From those regions, the national status on the provision of referral and emergency healthcare services was drawn. This was done to understand the practices used to ensure effectiveness in the delivery of referral and emergency healthcare services cutting across all categories of higher-level referral hospitals.

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The selected regions were Dar es Salaam, Tabora, Mtwara, Katavi, Mwanza, Tanga, and Mbeya, whereby the regional hospitals selected were Mwananyamala, Kitete, Ligula, Mpanda, Sekou-Toure, Tanga and Mbeya Regional Hospitals (see Appendix 5) for further details.

In addition, Zonal and National referral hospitals in respective zones were also selected to assess their capacity to deliver referral and emergency healthcare services at those levels. The selected Zonal referral hospitals are Bugando Medical Centre (BMC), Kilimanjaro Christian Medical Centre (KCMC), Mbeya Zonal Referral Hospital (MZRH) and Muhimbili National Referral Hospital.

The audit covered a period of five financial years from July, 2013/14 to June, 2017/18.

14.3 Main Audit Findings

(a) Inadequate Provision of Healthcare Services for Referrals

The audit team found that referral healthcare services provided at referral hospitals were not adequate. Although the Ministry of Health has not established a standard waiting time, the audit noted that in the visited regional and zonal hospitals patients normally waited for 3 to 4 hours before meeting medical professionals.

It was further noted that 6 out of 7 visited regional referral hospitals could not provide all required core referral healthcare services. Among these 7, four of them were not providing internal medicine and general surgical services. The worst-case scenario was in Ligula Regional Hospital in Mtwara which was noted to provide only obstetrics and gynecology and the remaining 4 out of 5 required core referral services were not provided.

(b) Inadequate Provision of Emergency Medical Care Services

The audit found that there was the insufficient provision of emergency medical healthcare as evidenced by the absence of sections or units with triage, resuscitation and treatments in the regional referral hospitals for the provision of such services, shortage of basic facilities and medical personnel to provide for emergency healthcare services.

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All 7 visited regional referral hospitals did not have a specific department or unit for handling emergency healthcare services. Instead, all patients including those in need of emergency care were attended at OPD consultation rooms without carrying out appropriate triaging procedures.

(c) Lack of monitoring and evaluation of the performance of referral hospitals in the provision of referral and emergency healthcare services

The audit team found that the Ministry of Health has not monitored the performance of referral hospitals in the provision of referral and emergency healthcare services. This is because the Ministry of Health lacks monitoring plans and budgets as well as key performance indicators for tracking the performance of the referral hospitals in this key healthcare service area. As a result, the Ministry did not have much detail on the performance of the zonal and regional referral hospitals for proper decision-making and corrective actions.

14.4   Overall Audit Conclusion

The Ministry has not managed to control the congestion of patients in referral hospitals. The current population of patients attending the referral hospitals exceeded the designed capacity for all of the 11 referral hospitals sampled, to the extent that there are some incidences where two patients were sharing one bed at the same time.

 Further, the current referral system is not effective in controlling the flow of patients to higher referral hospitals, a situation that makes the referral hospitals provide more or less the same primary healthcare services instead of requiring specialized care.

14.5   Results of the Follow-up on the Implementation of Recommendations

This part presents implementation status of issued recommendations to the Ministry of Health (MoH) and National Health Insurance Fund (NHIF) on the Performance Audit on the Provision of Referral and Emergency Health Care Services in Higher-level Referral Hospitals.

The implementation status of the issued recommendations was classified into four levels, namely, fully implemented recommendations, partially implemented recommendations, not implemented recommendations and recommendations that are overtaken by event.

14.5.1 Overall Implementation of Recommendations

A total of ten (10) recommendations were issued in this performance audit and all were directed to the Ministry of Health. Whereby the overall follow-results showed that nine (9) recommendations were partially implemented, one (1) was not implemented and none was fully implemented. **Table 14.1** shows the overall implementation of the recommendations.

Table 14.1: Overall Status of the Implementation of Issued Recommendations

Audited Entity	Total Number of Issued Recommendations	Level of Implementation of Recommendations		
		Fully Implemented	Partially Implemented	Not Implemented
Ministry of Health	10	0	9	1

Source: Auditors' Analysis of Responses Received from MoH (2022)

Further analysis of the issued recommendations for each recommendation category was made based on the four levels of implementation namely; fully, partially, not implemented, and overtaken by event. **Table 14.2** provides the level of implementation for all issued recommendations based on these categories.

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Table 14:2 Level of Implementation of Recommendations per Categories of Recommendations

Category of Recommendation	Total Number of Issued Recommendations	Level of Implementation of Recommendations		
		Fully Implemented	Partially Implemented	Not Implemented
Planning	2	0	2	
Monitoring and Evaluation	4	0	4	0
Development	4	0	3	1
Total	**10**	**0**	**9**	**1**

Source: Auditors' Analysis of Responses Received from MoH (2022)

Table 14.2 shows that ten (10) recommendations were issued whereas four (4) recommendations were partially implemented and were under Monitoring and Evaluation category. Also, four (4) recommendations were under Development category whereas three (3) was partially implemented and one (1) was not implemented. Moreover, two (2) recommendations were under Planning category and were all partially implemented.

Recommendations that were Partially Implemented

The analysis of evidence and information submitted by Ministry of Health showed that nine (9) recommendations were partially implemented. These recommendations and their status of implementation are as explained below:

Recommendation 1: MoH was required to Develop and disseminate the referral guidelines to all referral hospitals and ensure that it is effectively used.

This recommendation required MoH to develop and disseminate referral guidelines to hospitals and ensure that they are effectively used and enforced.

The implementation plan submitted for this recommendation in appended indicated that MoH plans to finalize referral guideline dissemination of the referral guideline

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A review and analysis of the submitted response issued by the MoH stated the referral guideline has been developed and disseminated to all levels of facilities in the country. National Guidelines for Patients/Clients Referral at All Health facility Levels May 2020.

Also, an interview conducted with officials from the Directorate of Treatment Services stated that the National Guidelines for Patients/Clients Referral has established and disseminated to all health facility levels by May 2020, but no evidence was availed to auditors. Hence the status of implementation will change subject to the evidence submitted.

The Ministry of Health did not avail of developed referral guidelines and disseminated them at all Health facility Levels including its effectiveness to all levels of facilities in the country as per the last submitted response as of 31st December 2020. Therefore, the audit team found that the audit recommendation was partially implemented.

Recommendation 2: Establishment of mechanisms to control the flow of patients at the high-level hospital

The recommendation called for MoH to establish a mechanism that will control the flow of patients to referral healthcare services provided at higher-level referral hospitals, particularly those who are doing self-referrals and the construction

The review of the implementation status and submitted responses revealed that up to 31st December, 2020, 1198 Dispensaries, 487 Health centers 339 HCs are conducting comprehensive Emergency Obstetric and Neonatal Care and 102 District Hospitals have been established from 2015 to 2020. 1000 Doctors were employed in 2020, and the majority were allocated to primary healthcare facilities.

Moreover, five new regional referral Hospitals have been constructed and have been equipped to provide services to five new regions (Njombe, Katavi, Simiyu, Songwe and Geita).

Apart from that MoH did not provide evidence to show 1000 Doctors were employed in 2020 and were allocated to primary health care facilities. Moreover, five new regional referral Hospitals have been constructed and have been equipped to provide services to five new regions (Njombe,

Katavi, Simiyu, Songwe and Geita) and increase adequacy serves after all these initiatives mentioned.

Recommendation 4: MoH was required to develop a mechanism to ensure that referral hospitals can provide all basic core referral healthcare services

The recommendation envisaged MoH to develop a mechanism to ensure that referral hospitals can provide all basic core referral healthcare services.

Did not provide any plan indicating that MoH has plans within a certain period to implement that activity. The review of the implementation status and submitted responses revealed that the mechanisms are in place to ensure receiving facilities have the capacity for the management of patients referred.

This has been elaborated in the National guideline for patients/clients at all facility levels that all initiating facilities have the capacity to manage the referral cases. Also currently, Regional Referral Hospitals have a total of 274 Specialists of different specialties and others are upgrading

The management response through the interview showed that the mechanisms are in place and have been elaborated in the National guideline for patients/clients at all facilities for management for patients referred but the enforcement of those mechanisms depends on the management of the specific hospital. The review of submitted responses in December 2020, showed current Regional Referral Hospitals have a total of 274 Specialists of different specialties and others are upgrading.

Developed a mechanism to ensure that referral hospitals can provide all basic core referral healthcare services, either by increasing the numbers of medical personnel such as medical doctors and laboratory technicians who were found to be few during the audit in most referral hospitals, the leading mismatch between the service provider and patient.

Apart from that mentioned National guidelines for patients/clients at all facilities for management for patients referred did not avail to the auditor.

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Recommendation 5: Develop hospital plans that take into account the capacity of healthcare workers directly involved in the provision of referral healthcare services.

The recommendation called for MoH to ensure that all higher-level referral hospitals develop hospital plans that take into account the capacity of healthcare workers directly involved in the provision of referral healthcare services

The review of the implementation status and submitted responses revealed that on-the-job training is being conducted involving well-experienced emergency physicians from national and Zonal Hospitals who technically support the training. Each Regional Referral hospital has started financing the training of emergency physicians to increase human resources in this cadre for service delivery.   No evidence showed the hospital has developed plans that consider the increased capacity of healthcare workers directly involved in the provision of referral healthcare service and job training is being conducted involving well-experienced emergency physicians from national and Zonal Hospitals who technically support the training.

Regional Referral hospitals have started financing the training of emergency physicians to increase human resources in this cadre for service delivery.

Recommendation 6: Carry out the allocation of staff according to the workload and needed specialties at the concerned referral hospitals

According to the requirement, MoH was required to the carry-out allocation of staff according to the workload and needed specialties at the concerned referral hospitals.
 The implementation plan submitted for this recommendation in the report indicated that the workload needs analysis was conducted in National, Zonal and Specialized Hospitals, and the results of the findings were used in establishing the staffing level at these hospitals

Moreover, the Ministry of Health with PO-RALG is developing an electronic system called WSN+POA (Prioritizing, Optimization Allocation) which will robust the calculation of workload at each health facility at the end of the year. Nevertheless, no evidence showing analysis has already been conducted in National, Zonal and Specialized Hospitals, and where their

results of the findings were used in establishing the staffing level at these hospitals

Recommendation 7: Develop a mechanism to ensure that referral hospitals have the required capacity to provide emergency healthcare services

The recommendation required the MoH to develop a mechanism to ensure that referral hospitals have the required capacity to provide emergency healthcare services.

The response submitted states the ministry has to establish 10 emergency Medical Departments in selected Regional Referral hospitals in place providing health care services as per standard while the other 18 EMDs are under expected construction expected to be finished by end of December 2022.

No evidence was submitted to show 10 regional referral Hospitals including (Kitete RRH, Mawenzi RRH, Songea RRH, Iringa RRH and Rukwa RRH) were constructed with the Emergency Medical Department (EMD). Therefore, it is concluded that the recommendation was partially implemented

Recommendation 8: Ensure that all higher referral hospitals develop plans that consider the need to build the capacity of healthcare workers to provide referral and emergency healthcare services

The review of the implementation status and submitted responses as of June, 2022 revealed that National, Specialized and Zonal Hospitals have an emergency unit with basic equipment and that the Ministry of Health continues to strengthen the unit at these levels.

Further, all 28 Regional Referral Hospitals provide emergency services. According to the MoH by the end of December 2022, all 28RRH will have well-equipped and functional EMDs. (10 EMDs functional, and 18 EMDs under construction)

No evidence submitted showed higher referral hospitals develop has developed plans that take into account the need to build the capacity of healthcare workers to provide referral and emergency healthcare services.

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The absence of submitting developed plans by the Ministry of Health concluded recommendation is partially implemented

Recommendation 9: Enhance the existing monitoring and evaluation system that will assist in ensuring the availability of all key referral data for informed decision making

The recommendation required the Ministry of Health to enhance the existing monitoring and evaluation system that will assist in ensuring referral data was harmonized and available to all key referral data for informed decision-making.

The review of the implementation status and submitted responses revealed that the Ministry has digitalized supportive supervision tool that intends to harmonize referral data collecting mechanisms which provides evidence for planning and decision making. Apart from that, no evidence was provided to auditors showing that response.

Interviewed officials from the Directorate of Treatment services stated that the ministry has digitalized supportive supervision tool that intends to harmonize referral data collecting mechanisms which provide evidence for planning and decision-making. Apart from that, no evidence was provided to auditors showing that response. Responses without submission of the supporting evidence were made to conclude that the recommendation is partially implemented.

Recommendation 10: Develop Key Performance Indicators (KPIs) and ensure that they are used for measuring the performance of referral hospitals in the provision of referral and emergency healthcare services

The recommendation required the Ministry of Health to develop Key Performance Indicators (KPIs) and ensure that they are used for measuring the performance of referral hospitals in the provision of referral and emergency healthcare services.

The review of the implementation status and submitted responses revealed that the indicators have been developed and are tracked every quarter for implementation, included in the Annual Implementation contract, being updated annually. This is for both Referrals and Emergency Healthcare Departments establishment.

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Further, no proof submitted showed key Performance Indicators (KPIs) have been developed and are tracked every quarter for implementation, included in the Annual Implementation contracts that are being updated annually in both Referrals Hospitals.

Details of recommendations that were not implemented at all
The analysis of evidence and information submitted by MoH showed that one recommendation was not implemented. This recommendation and its status of implementation are as detailed below: -

Recommendation 3: Ministry of Health to review the current layout and standard bed capacity of the higher-level referral hospitals and prepare standards drawings and layout

This recommendation required the Ministry of Health to review the current layout and standard bed capacity of the higher-level referral hospitals and prepare standards drawings and layout to ease the provided referral and emergency health care services and flow of patients. The standard bed capacity should take into consideration the actual catchment population of the respective areas.

The review of the Implementation status and Submitted Responses revealed that the facility standard guidelines are under review and are expected to be finalized by December 2022.

An interview conducted with officials from the Directorate of Treatment Services revealed that review of the layout and standard bed capacity of the higher-level referral hospitals started but no one had information on the status of the draft.

No evidence availed to auditors showing final reviewed facility standard guideline indicating prepared standards drawings and layout, facilitate the provided referral and emergency health care services with its effect on control of the flow of patient's population as per designed population, bed capacity and crowding of patients both at inpatient and outpatient have taken into account.

14.6   Specific Conclusion

The MoH did not make adequate effort to ensure all issued recommendations were implemented. This is because in a total of ten (10) issued recommendations, it is only one (1) recommendation that has been implemented and eight (8) were partially implemented.

Based on the analysis of the discussion held with MoH officials on the submission of evidence, there is no neither plan, strategies, or internal monitoring mechanism to ensure issued performance audit recommendations are implemented at a specific time frame or established performance indicators to assess the level of their implementation.

14.7   Specific Recommendations

The Ministry of Health is urged to:

(i)   Ensure that all previously issued recommendations are implemented to the fullest.

(ii)   Strengthen the mechanism for monitoring and reporting the status of implementation of issued recommendations regarding the issued Performance Audit report.

CHAPTER FIFTEEN

FOLLOW-UP ON THE IMPLEMENTATION OF RECOMMENDATIONS ON THE MONITORING OF BUILDING WORKS IN URBAN AREAS

15.1   Background to the Audit

Performance Audit Report on Monitoring of Building Works in Urban Areas was tabled before the Parliament in March, 2019. The overall objective of the audit was to assess whether the President's Office – Regional Administration and Local Government (PO-RALG) through Local Government Authorities (LGAs) effectively monitor building works in urban areas in order to ensure the constructed buildings are of the required standards and they are safe for public use.

15.2   Audit Scope

The main audited entity was the PO-RALG. This was because it is the parent Ministry responsible for overseeing the functions of LGAs which are directly involved in monitoring of building works carried-out within their areas of jurisdiction.

Data were collected from PO-RALG as the main audited entity. Similarly, data were collected at selected LGAs of the Kinondoni Municipal Council, Arusha City Council, Kasulu Town Council, Dodoma City Council, Mbeya District Council, Misungwi District council and Tandahimba Town Council. This was because they are among LGAs with high population and rapid growth of building infrastructure.

The audit focused on the activities undertaken by LGAs with regards to monitoring of building works covering the issuance of building permits as applied by developers; planning and budgeting for monitoring of building works as well as the implementation of monitoring plans for building works. Regarding issuance of building permits, the audit looked at the functioning of registration systems, mechanisms for issuance of building permits, time taken as well as the adequacy of inspection activities done prior to issuance of permits.

The audit covered a period of five financial years from 2013/14 to 2017/18. This period provided an extensive duration which depicted the extent of the

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problem and the time was enough for tracking the improvements made as a result of corrective actions taken during the inspections and monitoring of building works.

15.3   Main Audit Findings

(a) Existence of Significant Number of Unmonitored Buildings Works

The PO-RALG did not conduct adequate monitoring of building works in relation to the rapid expansion of human settlements. The PO-RALG did not conduct regular monitoring of ongoing new construction works and lacked information on the monitoring activities for construction works that were carried out in the country.

(b) Inefficiency in Issuance of Building Permits to Developers

The LGAs did not have effective mechanism to facilitate the issuance of building permits for new constructions. This was accompanied by lack of system for the applications for building permits and shortage of technical staff responsible for processing applications for the building permits.

(c) Inadequate Planning for Monitoring of Building Works by LGAs

The seven visited LGAs had no strategies, plans and budgets for monitoring building works in their areas of jurisdiction. There was no database for both Ministries and LGAs regarding the on-going and completed buildings. As a result, monitoring activities were not implemented effectively due to lack of funds. Further, PO-RALG treated building works as part of land development activities thereby giving it low priority when it comes to allocation of resources.

(d) Inadequate Monitoring and Evaluation of Performance of RSs and LGAs by PO-RALG

The PO-RALG neither monitored nor evaluated effectively the performance of LGAs in monitoring building works. For the whole period which was targeted by this audit, PO-RALG did not have any monitoring and evaluation plans. It was also found that monitoring which was carried out by PO-RALG did not address the existing challenges of building works.

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15.4 General Conclusion

Based on the findings and objective of the study, the audit concluded that, PO-RALG through LGAs has not effectively monitored building works in urban areas in order to ensure that the constructed buildings are of the required standards and they are safe for public use. Likewise, PO-RALG lacks effective mechanism to ensure that LGAs monitor the building works in their areas. As the result, no proper actions were taken on control and monitor building works to provided smooth process for people to continue applying for the building permits.

15.5 Results of the Follow-up on the Implementation of the Issued Audit Recommendations

This part presents implementation status of recommendations by the President's Office – Regional Administration and Local Government (PO-RALG) through Local Government Authorities (LGAs) as issued by the performance audit on the Monitoring of Building Works in Urban Area.

The implementation of issued recommendations were classified into four levels of implementation namely, fully implemented recommendations; partially implemented recommendations; not implemented recommendations; and recommendations that are overtaken by event.

15.5.1 Overall Implementation of Issued Recommendations

A total of eleven (11) recommendations were issued in this performance audit and all recommendations were directed to the President's Office – Regional Administration and Local Government (PO-RALG).

The overall follow-up results indicated that out of eleven (11) issued recommendations four (4) recommendations were fully implemented, four (4) recommendations were partially implemented, and three (3) recommendations were not implemented as indicated in **Table 16.1.**

Table 16.1: Overall Status for the Implementation of Issued Recommendations by PO-RALG

Entity	Number of Issued Recommendations	Fully implemented	Partially Implemented	Not Implemented	Overtaken by Event
PO-RALG	11	4	4	3	0

Source: Auditors Analysis and Implementation Status (2022)

Further analysis of the issued recommendations for each recommendation category was made based on the four levels of implementation namely; fully, partially, not implemented, and overtaken by event. **Table 16.2** provides the level of implementation for all issued recommendations based on these categories.

Table 16.2: Level of Implementation of Recommendations per Categories of recommendations issued to PO-RALG

Categories of issued Recommendations	Total Number of Recommendation	Level of Implementation per Category		
		Fully Implemented	Partially Implemented	Not Implemented
Planning	7	4	1	2
Implementation/Execution	1	0	1	0
Monitoring and Evaluation	1		1	0
Development	1	0	1	0
Coordination	1		0	1
Total	**11**	**4**	**4**	**3**

Source: Auditors' Analysis on Implementation status (2022)

Table 16.2 shows that seven recommendations were under planning whereas four recommendations were fully implemented, one recommendation was partially implemented and two were not implemented. One recommendation was issued to Implementation/Execution and Monitoring and Evaluation categories whereby all two recommendations were partially implemented. Furthermore, one recommendation was under Coordination and was not implemented.

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16.5.2 Results of Follow-up of Implementation of Recommendations by PO-RALG

This section provides details on the status of implementation of the recommendations issued to the President's Office – Regional Administration and Local Government (PO-RALG). Below are the details of the status of implementation of the issued recommendations based on the four levels of implementation namely, fully implemented, partially implemented, not implemented and overtaken by event.

Recommendations that were Fully Implemented

The four fully implemented recommendations are presented below.

Recommendation 1: PO-RALG should establish strategies and mechanisms that will ensure LGAs effectively manage the issuance of building permits as per the established standard processing time

This recommendation required the PO-RALG to develop strategies and mechanisms and ensure its implementation in the process of issuance of building permits. In the action plan developed by PO-RALG to implement this recommendation it was indicated that, PO-RALG planned to formulate the main strategy to ensure the dissemination and implementation of guideline for issuance of building permits in all LGAs by year June, 2022.

Through the review of the implementation status and discussions held with Officials from PO-RALG, the audit noted that, PO-RALG issued the guideline for effective issuance of building permits to all LGAs in the month of March, 2018 and demanded all LGAs to submit the building permit issuance reports through the letter with ref No.GB.39/203.01 of 3rd March, 2021.

It was noted that, LGAs have been sending quarterly reports to PO-RALG reporting on the status for issuance of the building permits. Reviewed Building Permits Processing Reports from the LGAs located in the Morogoro and Dar es salaam Regions for financial year 2020/2021 noted that, they were reporting activities on the issuance of the building permits as directed by PO-RALG. The reviewed reports were from the Morogoro region from Ulanga DC, Ifakara DC, Morogoro MC, Gairo DC, Mlimba DC and Mvomero DC; while the Dar es Salaam region reviewed reports were from Ilala MC, Kinondoni MC, Temeke MC, Kigamboni MC and Ubungo MC.

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Specifically, the reports covered number of issued building permits from each LGA, reasons for not issuing permits for some proposed buildings and advise from LGAs for further improvement. Therefore, this recommendation is considered as fully implemented since PO-RALG has managed to issue guideline and monitor its implementation through submission of quarterly reports from all LGAs.

Recommendation 2: PO-RALG should institute controls such as establishing a dedicated section or unit for building works

This recommendation required PO-RALG to establish a section or unit in the LGA's organization structure to accommodate all activities regarding the issuing of building permit. In the action plan developed by PO-RALG to implement this recommendation, PO-RALG planned to establish or strengthen the available section or unit within PO-RALG, RS and LGA for supervision of building works by June, 2022.

Through the review of the implementation status and discussions held with Officials from PO-RALG, the Audit noted that, the revised organization structure of local government authorities was approved by the President on 29th January, 202. It was noted that, Chart No. II of the revised Organization Structure showed that, this Section is located under LGAs' Municipal/District Directors.

The visit to few sampled LGAs in the Dodoma region indicated, this Section is in place and it is responsible for all building works, which include issuance of building permits in particular LGA.

Therefore, this recommendation is fully implemented since PO-RALG has managed to establish the section in LGAs, which is responsible for building works which include issuance of building permits. Presence of this Section will improve controls and provide assurance of close monitoring of building works in their areas of jurisdictions.

Recommendation 3: PO-RALG should set-up information systems for issuing building permits which link all key-players involved in monitoring building works to revoke or sanction applications and applicants who do not comply with standards

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This recommendation required PO-RALG to create information systems that will be used to issue building permits and monitor building works. In the action plan developed by PO-RALG to implement this recommendation, PO-RALG planned to conduct stakeholders' consultation and develop an electronic system; and testing and launching the system by June, 2022.

Through the review of the implementation status and discussions held with Officials from PO-RALG, the Audit noted that, PO-RALG developed an information system called TAUSI MIS which was launched in March, 2021. The system has the interface for issuance of building permits, with detail system requirement specifications in section 15.0 of TAUSI MIS "System Requirements Specifications" of March, 2021.

It was noted that, the System was meant to be used for management of building permits which also include collection of revenues from issuance of building permits. However, it was noted that, the system does not link all stakeholders in monitoring of buildings, the stakeholders not linked to system include; Fire and Rescue, Engineers Registration Board, Architects and Quantity Surveyors' Board (AQRB) and Contractors Registration Board (CRB). But it was noted that in approval process of the building permits the system include all stakeholders to review the drawings.

Therefore, this recommendation is fully implemented because PO-RALG has managed to develop the information system, TAUSI MIS, which include all key stakeholders in the approval process for building permit which gives assurance for effective management of issuance and monitoring of building permits.

Recommendation 4: PO-RALG should ensure that the guideline for monitoring of building works and issuance of building permits of 2018 is effectively disseminated to all LGAs and that all LGAs effectively utilize the guideline

The recommendation required PO-RALG to effectively disseminate the Guideline for issuance of building permits of 2018 to all LGAs and ensure they effectively utilize the disseminated Guideline by June 2019/2020. PO-RALG also responded that, the Guideline has been disseminated through PO-RALG Website (www.tamisemi.go.tz) at the subtitle of Miongozo for use by LGAs.

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It was further noted that, the PO-RALG issued directives to LGAs and conducted monitoring of given directives. The given directives were for LGAs to report on the issuance of building permit on quarterly basis. As explained in the recommendation No. 1 of this section it was noted that LGAs were reporting activities on the issuance of the building permits as directed by PO-RALG.

It was further noted that, PO-RALG issued directives to LGAs through letter with reference No.GB/203/01 dated 19th August 2020 regarding employment of experts for supervision and monitoring of building works to ensure effective reviews of drawings prior to issuance of building permits. This directive also has been implemented by LGAs because the personnel for monitoring and supervision of building works are currently available in LGAs.

Therefore, this recommendation is fully implemented because the guideline was submitted and it is implemented by LGAs.

Recommendations that were Partially Implemented

The four recommendations which were partially implemented are presented below:

Recommendation 8: PO-RALG should in collaboration with Ministry of Lands, Housing and Human Settlements Development and Ministry of Works, Transport and Communications, develop the National Building Policy and fast-track the establishment of the Building Standard Codes for different types of buildings and building materials

The recommendation requires PO-RALG in collaboration with the Ministry of Lands, Housing and Human Settlements Development and the Ministry of Works and Transport to develop National Building Policy and fast-track the establishment of Building Codes of different types of buildings and building materials.

The action plan prepared by PO-RALG as a response to implement this recommendation was to hold a stakeholders meeting; policy review; coding, finalization and launching of Policy, Building codes and Standards. The interview held with PO-RALG Officials revealed that, the activities related to Policy review and finalization and launching of policy was not

implemented. However, the activity related to establishment of the Building Standards Codes is on progress.

Further the progress made so far in developing the building Standards Codes is not known by PO-RALG. Through the review of the letter with reference number AD.29/34/01/02 dated 3rd September 2020 from PO-RALG to National construction Committee (NCC) it was noted that, PO-RALG wrote to NCC to get inquire on the progress made but there was no response from NCC and there were no further follow up by PO-RALG.

According to PO-RALG officials the development of Building Standard Codes will be finalized, done by the Prime Minister's Office in collaboration with other stakeholders such as; Ministry of Lands, Housing and Human Settlement Development and Ministry of Works and Transport.

Therefore, PO-RALG could not state when the work will be finalized. This implies that, PO-RALG did not make effort to ensure effective coordination with other entities to ensure the given recommendation is fully implemented as per their action given of 2019/2020.

Recommendation 9: PO-RALG should ensure that monitoring and evaluation plans which capture performance of Regional Secretariats and LGAs regarding monitoring of building works are developed and used in their routine monitoring activities

The recommendation calls for PO-RALG to develop the Monitoring and evaluation plan which captures performance of Regional Secretariats and LGAs regarding monitoring of building works by June 2019/20. The action plan prepared by PO-RALG was to ensure the monitoring and evaluation plans capture the performance of RS and LGAs.

The interview held with PO-RALG Officials pointed out that, through the Policy and planning Division at PO-RALG, the budget for Monitoring and Evaluation activities was allocated. However, the review of the PO-RALG' Budget (Objective E, Activity code E01C01) regarding Monitoring and Evaluation to PO-RALG Programmed and Projects at LGAs, it was noted that, PO-RALG focused on the monitoring of Public Buildings and not all buildings in respective RSs and LGAs as recommended.

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Therefore, this recommendation is considered as partially implemented because monitoring and evaluation of buildings issued with building permits could not be implemented by PO-RALG.

Recommendation 10: PO-RALG should ensure that reporting mechanism from LGAs to PO-RALG is developed and building works being monitored by LGAs are effectively reported and there is proper follow-up on the implementation of issued recommendations to LGAs

The recommendation requires PO-RALG to develop reporting mechanism from LGAs to PO-RALG that would facilitate reporting on monitoring of building works and ensure that there is proper follow up on the implementation of issued recommendations to LGAs by June 2019/20. The action plan prepared by PO-RALG was to strengthen the reporting mechanism and ensure that quarterly reports on both issued building permits and monitoring of building works from LGAs are submitted to PO-RALG.

Review of availed reports, noted that LGAs submitted Quarterly Reports to PO-RALG which included information on monitoring of building and issued building permits. It was noted that, the submission of report from LGAs was regularly done because for LGAs to submit reports to PO-RALG, PO-RALG has to write letter to them. As a result, PO-RALG was not adequately informed on the implementation of building works activities which include issuance of building permits.

It was further noted that, PO-RALG did not issue any feedback to LGAs which could include recommendations for further improvement on reported issues. Also, there was no follow up conducted on noted gaps regarding Building Works.

Recommendation 11: PO-RALG should ensure database for building works is established and effectively used by LGAs for managing building works. The database should be updated regularly

The recommendation calls PO-RALG to establish and have a database of building works and ensure that it is effectively used by LGAs for monitoring of building works and being updated regularly. It was noted that, PO-RALG prepared action plan to consult with Stakeholders in developing, testing and

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launching of electronic database and permit system. This was not done in accordance to expectation.

Despite that, PO-RALG said they have commenced in developing system that would capture all buildings information as part of data base. Interview with officials from PO-RALG said that, the development of system not yet commenced. This reason provided was due to lack of funds. However, we are in a view that, PO-RALG did not budget for development of the system. This was evidenced through review of PO-RALG's budgets of fiscal year 2020/21-2021/22 which did not include funds for development of system for Buildings database. It was also noted that, PO-RALG Officials said they used TAUSI System for mobilization of buildings information. However, review of TAUSI system indicated that, the system was meant for revenue collection for plot sales, land sales and issuance of Building Permits payment **(see an excerpt of TAUSI System)** below.
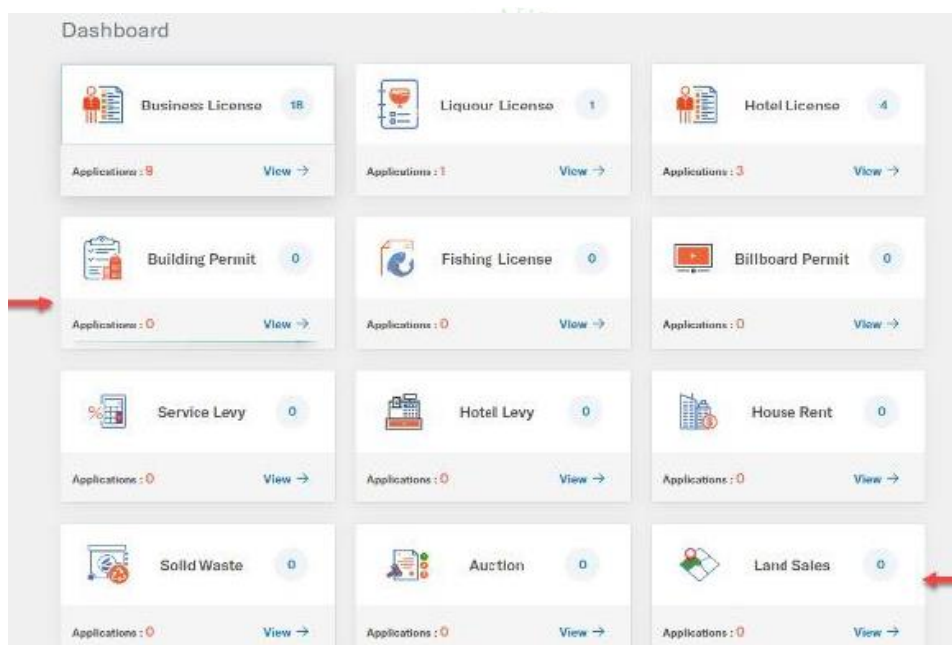
An excerpt 01: TAUSI MIS Dash Board (meant for revenue collections)

It can be seen that, the TAUSI's Dash board did not indicate data base. However, have interface for issuance of Building permits as part of revenue collection for the permit and not for Buildings database.

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Recommendations that were Not Implemented

The three recommendations which were not implemented are presented below:

Recommendation 5: PO-RALG should ensure that LGAs develop effective mechanism for community sensitization on the processes for acquiring building permits. The mechanism should enable LGAs to cover a large number of communities in their areas of jurisdiction

This recommendation requires PO-RALG to develop mechanism to enhance community sensitization for acquiring building permits. In the action plan developed by PO-RALG to implement this recommendation, PO-RALG planned to Issue directive to LGAs which required LGAs to ensure the community sensitization activities are reflected in LGAs Budget; and M&E of given directives is done by June, 2019/20.

However, through the review of the implementation status and discussions held with Officials from PO-RALG, the audit noted that, PO-RALG did not issue any directive to encourage the LGAs to set budget for community sensitization on the processes for acquiring building permit.

According to interviewed officials this was caused by deficit of funds for conducting awareness. We are in a view that, PO-RALG did not plan and budget for community sensitization. This was evidenced through review of the budget from LGAs also indicated that, there was no budget set aside for sensitization of communities regarding processes for acquiring building permit.

Hence, this recommendation was not implemented because PO-RALG did not compel to allocate budget for sensitization the community on issues of acquiring building permits which resulted to failure for LGAs to budget for the same.

Recommendation 6: PO-RALG should prepare and integrate its strategies, plans and budgets for monitoring of building works and those plans should allow considerations of all types of building works to be monitored

This recommendation required PO-RALG to set strategies and activities for monitoring the building works. PO-RALG planned to prepare and implement plans and set budgets for monitoring of building activities by June, 2019/2020. However, the review of the implementation status and discussions held with Officials from PO-RALG, noted that, PO-RALG failed to prepare any plan and budget for monitoring building works Activities from fiscal year 2018/19 to 2021/22.

Interviewed officials from PO-RALG indicated that, this was caused by the transfer of staff responsible for monitoring of Buildings to TARURA and MLHHS whereby PO-RALG was required to establish new department for monitoring of building which is also responsible preparation of plans and Budget for monitoring of Building works. As a result, there were no plan and Budgets for monitoring of Building works for past fiscal years

Recommendation 7: PO-RALG should ensure there is proper coordination and collaboration with other stakeholders such as Ministry of Health, Community Development, Gender, Elderly and Children; Ministry of Lands, Housing and Human Settlements Development; NEMC; ERB; AQRB and Fire and Rescue in monitoring building works

The recommendation calls for PO-RLAG to ensure there is proper coordination and collaboration with other stakeholders charged with the monitoring of building works. PO-RALG planned to ensure that LGAs Committees on issuance of building permit are coordinated by involving such stakeholders in decision making process under one roof.

However, it was noted that, there is no proper coordination and collaboration because not all stakeholders are involved during the approval of the building as it was intended.

Further review of the committee responsible for approval of building permit indicated that, the team comprised of the members within LGAs' with multi-disciplinary such as; Health and Environment, Civil/Structural Engineer and Quantity Surveyors. In spite the major and complex projects the approved one has to be done by the individual developer whereby is required to avail design, drawings and reports to respective stakeholders such as NEMC, ERB, AQRB and fire and rescue. In that context, PO-RALG did not ensure that, there is coordination mechanism (system) that could have involved all stakeholders during approval process of Building Permit.

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15.6   Specific Conclusion

Based on the analysis of the implementation status of the previously issued recommendations, the Audit concluded that, despite its effort on the implementation of the issued recommendations, PORALG did not ensure that the issued recommendations are adequately implemented. This is because only four (4) out of eleven (11) issued recommendations equivalent to 36% were fully implemented, while 74% were either partially implemented or not implemented at all.

15.7   Specific Recommendations to the President's Office – Regional Administration and Local Government (PO-RALG)

President's Office – Regional Administration and Local Government is urged to:

i.   strategize to ensure that the issued recommendations that were not implemented are fully implemented; and

ii. ensure a strengthened coordination among other levels of the government operations on the implementation of issued recommendations is in place.

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CHAPTER SIXTEEN

FOLLOW-UP ON THE IMPLEMENTATION OF THE RECOMMENDATIONS ON THE MANAGEMENT OF PROVISION OF NATIONAL HEALTH INSURANCE SERVICES

16.1 Background to the Audit

Performance Audit Report on the Management of Provision of National Health Insurance Services was tabled to the parliament of the United Republic of Tanzania in March, 2019. The overall objective of the audit was to determine whether the Ministry of Health and National Health Insurance Fund efficiently manage the provision of Health Insurance Services to ensure accessibility of quality health services in the country.

16.2 Audit Scope

Main audited entities were the Ministry of Health, Community Development, Gender, Elderly and Children and the National Health Insurance Fund (NHIF). NHIF was audited because of its main responsibilities in provision of health insurance services that facilitate accessibility of quality health services to its beneficiaries. The Ministry of Health through Policy and Planning Division is responsible for monitoring the implementation of health policies, legislations and guidelines of which includes health insurance.

The audit focused on examining strategies developed by NHIF for ensuring all Tanzanians are covered with health insurance services and whether NHIF beneficiaries can access quality health services through health insurance services provided by the Fund. In addition, the audit focused on determining whether the Fund allocated required resources to facilitate provision of health insurance services and if there was proper monitoring of the Fund to ensure adequate provision of health insurance services in the country.

The audit team visited four Regions and four District Councils. For the purpose of obtaining strong evidence other key players were: included President's Office - Regional Administration and Local Government (PO – RALG); selected Regional Secretariats and Local Government Authorities, selected accredited health facilities as well as NHIF beneficiaries in the visited regions and districts. PO-RALG was included because of its responsibilities for coordinating and implementing health programs, which

include health insurance services in local authorities. Regional Secretariat and Local government authorities are responsible for the provision of health services to NHIF beneficiaries through accredited health facilities.

The audit covered a period from July 2015 to February, 2019. The selected period enabled auditors to establish trends required by certain audit findings, and be able to develop reliable conclusions relating to the findings.

16.3 Main Audit Findings

(a) Inadequate number of Tanzanians were Covered with National Health Insurance Services

The audit noted that there was low coverage in terms of population covered by NHIF, which stood at 7% and the enrolment of new principal members was not satisfactory. Up to June, 2018, 32 percent of Tanzanians were covered by Health Insurance, where by 25% were CHF members and only 7% were NHIF members. It was indicated that the enrolment trend for principal members has remained constantly low at 7 percent of the total Tanzania Population for three financial years consecutively

Audit noted that, up to June, 2018, the Fund enrolled 858,446 contributing members and 3,918,999 beneficiaries in total, out of whom, public sector members were 68.79%, while for Non-public sector members were 31.2 % which included 5.65% of private employees and 25.55%, for other categories[3].

(b) Insufficient Assessment Conducted on Sustainability of Established Health Insurance Categories

Audit noted that, out of the public, private employees', Members of Parliament and Ward Councilors categories, there were other seven categories established by the Fund up to December, 2018. It was reported that, assessment to study the sustainability of these categories prior to their establishment was conducted to two categories namely Total Afya Kadi and Student group out of 5 categories.

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[3]Other categories include Clerics, Councilors, Members of Parliament, Mutual (KIKOA), Private Individuals, Students and Toto Afya Kadi.

The assessment detailed the rationale for establishing the category which included willingness and need from the community and the extension of recruitment coverage. The report further analyzed the trend of beneficiaries from age 5 to 18, their utilization trend and costs. This is indicated by the NHIF database for the same group for the purpose of projecting their utilization extent.

However, it was revealed that the actual implementation of Toto Afya Kadi included the recruitment of children below 4 years contrary to the targeted age group of 5 to 18 years. On the other hand, the assessment conducted for students exclude the age group above 18 years who are the potential members mainly found in the colleges and universities.

(c) Accessibility to Quality Health Care Services through Health Insurance Services Provided by NHIF

The Audit Team noted that the quality of health care services was quite low. This situation was reported to be common among Government health centres and dispensaries. This was verified through the review of Customer Satisfactory Reports for the period under review, which showed there were complaints regarding quality of services rendered by government dispensaries and health centres. NHIF beneficiaries were complaining about spending much time to receive the required services, failure to get all required diagnostic test based on the level of health facilities and in sufficient capacity of available buildings.

(d) Inspection conducted to Services Providers Recommended Weak Action

Based on the reviewed 36 sampled inspection reports conducted to service providers, the audit revealed that various anomalies were reported in all sampled inspection reports. However, in most cases, the only actions that were taken to defaulters were to recommend for further improvement, deduction on the submitted claims and, in a few instances, warning letters and blacklisting the service provider.

This was regardless of the magnitude and the nature of anomalies observed during inspections. The audit expected strong actions to be taken to defaulters especially those that were associated with fraud or cheating on

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the submitted claims to avoid repetition of similar observed anomalies as it was in all 36 inspection reviewed inspection reports.

(e) Shortage of Human Resources to Facilitate Provision of Quality Health Services

Staff establishment report dated January, 2019 indicated the Fund has insufficient human resources at both the Headquarters and the Regional Offices. The shortage was also noted to accredited services providers. It was noted that, the Fund experienced a staff shortage of 27.5% National wide.

Based on the analysis conducted, it showed that at Head Office the Fund experienced an overall staff shortage of 19 percent as of December 2018. The most affected Department was the Directorate of Information and Communication Technology and Planning and Investments having a shortage 33% and 31% respectively. The shortage also affected the Directorate of Membership Services despite being the key Department in the service delivery to beneficiaries.

(f) Unsustainability of NHIF Major Sources of Income

Reviews of NHIF Performance Reports, Budget and Solvency and Sustainability Report as of June, 2018 revealed that the Fund's major sources of income which include members' contribution and Investments were facing a challenge of being un sustainable.

NHIF expected that reimbursement of expenses for each membership category would be less than or equal to total contributions per each category. However, it was noted that, there was overutilization by various members' categories. That means total amount utilized by some members' category as treatment costs was much higher than the total contributed amount by the respective category. Reviews of NHIF Solvency and Sustainability Report as of December, 2018 indicated overutilization (by percentage) was on Mutual members (KIKOA) 710, Clerics 401, Toto Afya kadi 298, Intern Doctors 174, Student 171 and Private Individual 160 percent.

Overutilization was mainly caused by insufficient assessment made prior to establishment of these categories. Other reasons for overutilization showed that, some medical treatment costs were higher; these included treatment

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of such as Hemodialysis, hospitalized and Caesarean section. Also, it was further noted that, adverse selection was another factor because principal members for some categories such as Mutual Groups (KIKOA) and Individuals joined the Fund when they were serious sick.

Furthermore, the audit noted unsustainability of Investment Income. According to NHIF Investment Policy 2017, the Fund is required to ensure any investment made is for the purpose of meeting the obligations for benefit payments and lot of resources were held in short-term investments; that are easily convertible into cash. Furthermore, it was noted that, the Fund had invested in treasury bills, treasury bonds and corporate bonds, fixed and call deposits, shares, loans and projects.

Review of various investment status revealed some investment made were unsustainable. For instance, the Fund provided eight (8) years loan amounting TZS 24.6 billion from 1st August, 2010 to the Ministry of Home Affairs for purchase of 230 Toyota Pickups and 30 Toyota Station Wagon for use by Police Force. It was further noted that, investment loans and projects to support Government Health Building was on long- term basis ranging from 5 to 8 years with no Government guarantee/collateral. As a result, no return on investment earned by the Fund up to the time of this audit.

(g) Inadequate Monitoring of National Health Insurance Services

The audit noted absence of functioning monitoring framework for monitoring health Insurance services. This was due to the fact that Ministry of Health has no functioning framework for monitoring and evaluation of its activities including those related to management of NHIF. Further inquiries revealed that, the Ministry of Health used the Health Sector Strategic Plan IV (HSSPIV) for monitoring implementation of NHIF activities, although the same had no detailed description of required M&E activities.

16.4   Overall Audit Conclusion

Based on the facts presented in the findings chapter, the audit concluded that the Ministry of Health and the National health insurance Fund have inefficiently ensured adequate provision of National Health Insurance services in the country. This is because proportion of population covered with National Health Insurance stood at 7 percent only out of 32 percent of population covered with health insurance services in the country.

This is partly because, NHIF has insufficiently established strategies that would enhance increase of coverage and accessibility of health insurance services to many Tanzanians. The enrolment of informal sector that include private individuals, mutual group and Toto Afya Kadi is still low at 0.3, 4 and 7 percent out of total enrolled NHIF contributing members. As a result, enrolment targets were not reached ending up wasting the Fund financial resources and time.

16.5 Results of the Follow-up on the Implementation of Recommendations

This part presents implementation status of recommendations by the Ministry of Health (MoH) and National Health Insurance Fund (NHIF) as issued by the performance audit on the Management of Health Insurance Services.

The implementation of issued recommendations were classified into four levels of implementation namely, fully implemented recommendations; partially implemented recommendations; not implemented recommendations; and recommendations that are overtaken by event.

16.5.1 Overall Implementation of Recommendations

A total of twelve 12 recommendations were issued in this particular audit. Five (5) recommendations were issued to the Ministry of Health; and seven (7) were issued to the National Health Insurance Fund. **Table 16.1** shows overall implementation status of the issued recommendations by entities.

Table 16.1: Overall Implementation Status of Performance Audit Recommendations by Entity

Audited Entity	Total Number of Issued Recommendations	Level of Implementation of the Recommendations		
		Fully Implemented	Partially Implemented	Not implemented
Ministry of Health	5	4	1	0
National Health Insurance Fund	7	2	5	0
Total	**12**	**6**	**6**	**0**

Source: Responses from Ministry the Ministry of Health; National Health Insurance Fund and Auditors' analysis (2022)

Table 16.2 shows that six (6) out of twelve (12) recommendations were fully implemented while six (6) recommendations were partially implemented and there was no recommendation that was implemented.

Further analysis of the issued recommendations for each recommendation category was made based on the four levels of implementation namely; fully, partially, not implemented, and overtaken by event. **Table 16.2** provides the level of implementation for all issued recommendations based on recommendation categories for the two entities.

Table 16.2: Status of Implementation of the Recommendations by Category for MoH and NHIF

Category of Recommendations	Total Number of Issued Recommendations per category	Level of implementation of Recommendations by category		
		Fully implemented	Partially Implemented	Not implemented
Monitoring and evaluation	3	1	2	0
Planning	4	3	1	0
Development	3	2	1	0
Community Involvement	2	0	2	0
Total	**12**	**6**	**6**	**0**

Source: Auditors' analysis (2022)

Table 16.2 shows that three recommendations were under Monitoring and Evaluation category where one recommendation was fully implemented and two recommendations were partially implemented. Two recommendations were under planning category where three recommendations were fully implemented and one was partially implemented. Also, three recommendations were under Development category whereby two recommendations were fully implemented and one was partially implemented. Furthermore, two recommendations were partially implemented and were under the Community involvement category.

16.5.2 Results of Follow-up of Implementation of Issued Recommendations to the Ministry of Health

The Ministry of Health was issued with 5 recommendations, whereby, four recommendations were fully implemented and one recommendation was partially implemented as shown in **Table 16.3**.

Table 16.3: Implementation Status of Performance Audit Recommendations by the Ministry of Health

Category of Recommendation	Total number of issued recommendations	Level of implementation		
		Fully Implemented	Partially Implemented	Not implemented
Planning	2	2	0	0
Implementation /Execution	0	0	0	0
Monitoring and Evaluation	2	1	1	0
Development	1	1		
Total	**5**	**4**	**1**	**0**

Source: Responses from Ministry the Ministry of Health and Auditors' analysis (2021)

Below are the details of the status of implementation of the issued recommendations based on the four levels of implementation namely, fully implemented, partially implemented, not implemented and overtaken by event:

Recommendations that were Fully Implemented

There were four recommendations which were fully implemented by the Ministry of Health. These as detailed below:

Recommendation 1: Strengthen availability of medical equipment to all level of health facilities to facilitate provision of quality health care services

To facilitate provision of quality healthcare services, the Ministry of Health was required to ensure medical equipment are available to all level of healthcare facilities.

Review of the submitted responses and its supporting documents indicated that, the Ministry of Health has fully implemented this audit recommendation. This is because, up to June, 2022, the Ministry allocated the budget to procure medical equipment to hospitals administered by the Ministry of Health.

This recommendation was considered to be fully implemented because Ministry of Health managed to procure and distribute the equipment such as MRI, Echocardiography, Digital X-ray and ICU equipment to hospitals that it administered.

Recommendation 2: Facilitate availability of human resource to health facilities to improve availability of quality health care services

Ministry of health was required to ensure human resources are available to healthcare facilities to deliver quality healthcare services.

Review of the submitted responses and its supporting documents noted that for the period from 2019/20 to 2021/22 the Ministry of Health was granted a permit to recruit 1,650. These staff were employed and allocated to hospitals and health centers in the country so as to suffice the available shortage. The number of employed staff for each post category is as shown in **Table 16.4**.

Table 16.4: Status of the Employed Staff from Financial Year 2019/20 to 2021/22

S/N	Post	Number
1	Medical specialist II	25
2	Medical officer II	215
3	Pharmacist II	15
4	Biomedical engineer II	17
5	Biomedical engineer technician II	40
6	Assistant nursing officer II	467
7	Chemist II	2
8	Dental Surgeon II	15
9	Health laboratory scientist II	62
10	Technology II (laboratory, optometrist, pharmacy, dental and radiology)	155
11	Health assistant	134
12	Nursing officer II	140
13	Occupational therapist II	15
14	Physiotherapist II	31
15	Social wealfare II	15
16	Nurse II	140
17	Enviromental health officer II	40
18	Assistant Enviromental health officer II	56
19	Physiotherapist officer II	33
20	Dental therapist II	19
21	Record management assistant II	10
22	Driver II	4
Total		1650

Source: Letter ref, FA.97/128/01/B/40 (01 April, 2022)

The recommendation was considered as fully implemented because, the Ministry has facilitated the recruitment and allocation of recruited staff to the hospital and health centers in the country. However, this is the ongoing process therefore, the Ministry of Health should continue to strengthen the availability of staff to improve availability of quality health care services.

Recommendation 3: Establish standards of operation of ICT system to health facilities to enhance information harmonization and facilitate integration of data between different users

Ministry of Health was required to develop operation standards for ICT systems used by healthcare facilities in order to harmonize information and enhance integration of data to various stakeholders.

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Review of submitted responses and its supporting documents indicated that the Ministry of Health has developed Guidelines and Standards for Integrated Health Facility Electronic Management Systems (2016). This document provides requirements, standards and guidelines for effective implementation of Integrated Health Facility Electronic Management Systems (iHFeMS). The requirements, standards and guidelines have been drawn from both the stakeholders and references to local and international documents.

The recommendation was considered fully implemented by the Ministry because the guideline was already developed and operationalize.

Recommendation 4: Ensure monitoring and evaluation frameworks and plans are established and include setting of key performance indicators for measuring the performance of NHIF in the provision of health insurance services

Ministry of Health was required to establish monitoring and evaluation frameworks to facilitate performance measurement of NHIF in provision of health insurance services.

Review of the submitted responses indicated that the Ministry of Health through Department of Policy and Planning has always monitored and evaluated NHIF performance through set of indicators that were identified. Also, in the Annual Health Sector Performance Profile Report, NHIF performance indicators are reported.

This recommendation is considered to be fully implemented because, the performance indicators were set through Annual Health Sector Performance Profile Report through which NHIF performance was assessed.

Recommendations that were Partially Implemented

There was one recommendation which was partially implemented by the Ministry of Health. This recommendation is as detailed below:

Recommendation 5: Conduct monitoring and evaluation to NHIF and ensure timely submission of reports for the purpose of establishing performance measurement on health insurance activities executed by the Fund

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Ministry of Health was supposed to conduct monitoring and evaluation of NHIF performance and ensure timely reporting.

Review of the submitted responses showed that the Ministry of Health continued conducting monitoring and evaluation to NHIF. Also, the Ministry ensured timely submission of reports for the purpose of establishing performance measurement on health insurance activities executed by the Fund.

This recommendation is considered as partially implemented because there were no monitoring reports that were availed to auditors that show progress or action taken to observe issues during monitoring.

16.5.3 Results of Follow-up of Issued Recommendations to the National Health Insurance Fund

The National Health Insurance Fund was issued with seven recommendations, whereby, two recommendations were fully implemented while five recommendations were partially implemented as shown in **Table 16.5**.

Table 16.5: Implementation Status of Recommendations by Category of the NHIF

Category of Recommendation	Total number of issued recommendations	Level of implementation		
		Fully Implemented	Partially Implemented	Not implemented
Planning	2	1	1	0
Implementation /Execution	0	0	0	0
Monitoring and Evaluation	1	0	1	0
Development	2	1	1	0
Community Involvement	2	0	2	0
Total	**7**	**2**	**5**	**0**

Source: Responses from Ministry the Ministry of Health; National Health Insurance Fund and Auditors' analysis (2021)

Below are the details of the status of implementation of the issued recommendations based on the four levels of implementation namely, fully

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implemented, partially implemented, not implemented and overtaken by event.

Recommendations that were Fully Implemented

There were two recommendations which were fully implemented by the National Health Insurance Fund. These are as detailed below:

Recommendation 2: Conduct thorough study prior to establishment of new members' categories to reduce risks of non-performance

NHIF was required to conduct thorough study prior establishment of new member' categories.

Review of the submitted responses and its supporting documents showed that new products such as TIMIZA, WEKEZA and NAJALI AFYA were subjected to actuarial assessment prior to their introduction in order to ensure sustainability.

The recommendation was considered as fully implemented by NHIF because actuarial assessment was done before instruction of the above mentioned packages.

Recommendation 5: Establish web-based ICT system with service providers that would enable instant sharing of information in order to increase data accuracy, reduce work load and rooms for data manipulation

NHIF was required to develop web-based ICT system which would ensure instant sharing of information with healthcare facilities.

Review of the submitted responses and its supporting documents noted that the Fund is implementing Online Claims Submission solution for healthcare facilities with Hospital Management Information Systems (HMIS). It was noted that, 123 healthcare facilities (equivalent to 1%) out of contracted 9,556 healthcare facilities were submitting claims online. On the other hand, for facilities without HMIS, the Fund has implemented a web-based e claim solution, through its Service Portal whereby facilities can submit claims.

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It was further noted that, to ensure the established ICT systems are used by all healthcare facilities, NHIF circulated a memo with reference number EB.57/219/01A/55 dated 31st August 2021 instructing Regional Managers to ensure that all facilities from District Level and above start using the available solutions to submit claims.

This recommendation is considered as full implemented because NHIF use Online Claims Submission System, and web-based e claim solution that enable instant sharing of information.

Recommendations that were Partially Implemented

There were five recommendations which were partially implemented by the National Health Insurance Fund. These recommendations, and their level of implementation, are as detailed below:

Recommendation 1: Strengthen mechanism that would facilitate increase of members' coverage of national health insurance to voluntary/informal members

NHIF was required to strengthen mechanism which would increase member's coverage to voluntary/informal members.

Review of the submitted responses and its supporting documents noted that, by November, 2019 the Fund obtained approval from the Government to start implementing new health insurance bundles (Najali Afya, Wekeza Afya and Timiza Afya) as strategic move to widen its membership coverage.

In addition, the Fund collaborated with other stakeholders including Private Investors and Owners of Secondary schools, Tanzania Commission for Development of Cooperatives (TCDC), Commercial Banks, Christian Social Services Commission (CSSC) and High Learning Institutions to enroll various groups of members in the health insurance scheme.

Further, the Government has approved the Bill for establishment of Universal Health Insurance (UHI) Act and the first reading for the same was tabled to the Parliament on September, 2022 before final enactment. Approval of the UHI Act, is expected to increase membership coverage to the health insurance system by covering different groups of members from all sectors of the economy.

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This recommendation was considered partially implemented because at the national level the coverage in year 2022 is still low as it stood at 8% of the whole population 61,741,120. On the hand, the approved Bill for establishment of Universal Health Insurance (UHI) Act which may increase membership coverage to the health insurance system is yet to be implemented.

Recommendation 3: Establish mechanisms that would facilitate enforcement of issued recommendation and taking corrective measures on observed anomalies following inspection of service providers

NHIF was required to establish mechanisms which would ensure enforcement of recommendations following inspection of healthcare facilities.

Review of the submitted responses and its supporting documents noted that the Fund was jointly undertaking collaboration with other Government organs such as Medical Council of Tanzania-MCT, Private Health Advisory Board-PHAB to strengthen its quality assurance functions.

It was also reported that the Fund jointly undertaking fraud investigations in collaboration with other Government organs such as Police and PCCB when deemed necessary.

To address recommendations issued through fraud investigations, the fund asked professional Boards through letters with Ref No. CAG.143/191/01/259-02 and CAG.143/191/01A/49 to take disciplinary actions to staff who committed malpractices when providing health services to NHIF beneficiaries.

Despite of the noted efforts[4] on enforcing the implementation of the issued recommendations during inspection done by NHIF, this recommendation was considered as partially implemented because it was noted that, follow ups on implementation of the issued recommendations was not adequately done.

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[4]De-certify, issue warnings to HCF and collaboration with other Government Organs for further improvement

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This is because, recurring of malpractices by healthcare facilities have been noted which include overutilization of investigation test, non-adherence to NHIF pricing, double claiming, improper dosage and quantities, Missing details of services and non-adherence to STG.

Recommendation 4: Strengthen advocacy activities to service providers to improve compliance with NHIF requirements and Standard Treatment Guidelines

NHIF was required to strengthen advocacy activities to healthcare facilities to ensure compliance with STG and NHIF requirements.

Review of the submitted responses and its supporting documents noted that, the Fund conducted stakeholders' advocacies to services providers. These advocacies were conducted on 10th September, 2021; 8th July, 2022; and 26th August, to 3rd September, 2022. The meeting was conducted at Singida, Geita and Mwanza.

It was also noted that, apart from stakeholder meeting the Fund conducted supportive supervision with aim to provide awareness regarding compliance with STG. However, this recommendation is considered as partially implemented because the conducted stakeholder meetings and supportive supervision were not effective as there was existence of noncompliance with STG and NHIF requirements among healthcare facilities.

Recommendation 6: Make investment and issue loans that would ensure liquidity and sustainability of the Fund income is maintained over time

NHIF was required to ensure liquidity and sustainability of the Fund is maintained over time through various strategies including making profitable investment.

Review of its submitted responses and its supporting documents noted that, the Fund is abiding with regulatory framework on investments as provided by BOT's Social Security Funds Investments Guideline, 2021 and Fund's Investments Management Policy. Both guiding documents aim at ensuring liquidity of the Fund.

Also, the Fund strengthened its investment strategy and processes through review of its Investment Management Policy on june 2022 and

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align/concentrate its investments portfolio into short term avenues to ensure liquidity and sustainability of the Fund.

The recommendation was considered as partially implemented since, despite the available guidelines, still the Fund net income was noted to decrease. Reviewed Actuarial Report of June, 2021 showed that the net return on investments decreased from TZS 84.77 billion in June, 2019 to TZS 75 billion in June 2021.

Recommendation 7: Establish strategies that would ensure effective recovery of already issued loans

NHIF was required to establish strategies which would ensure effective recovery of loans.

Review of the submitted responses and supported documents noted that, the Fund is following up to recover the issued loans to the Government. Various strategies are deployed including involving the mother Ministry (Ministry of Health) on following up and regular follow ups with both respective Ministries and Ministry of Finance and Planning.

16.6   Specific Conclusion

Based on the analysis of the implementation status of the previously issued recommendations, it is concluded that, the implementation of the issued recommendations is not satisfactory since only six (6) out twelve (12) given recommendations have been fully implemented and six (6) were partially implemented. The Ministry of Health and the National Health Insurance Fund have not made satisfactory progress towards the implementation of the given recommendations. NAO will continue making follow-up of the recommendations which were partially implemented to see the progress that will be made.

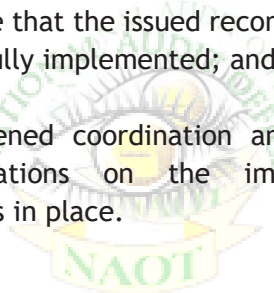### 16.7 Specific Recommendations

Recommendations to the Ministry of Health

The Ministry of Health is urged to:
  i.   strategize to ensure that the issued recommendations that were not implemented are fully implemented; and

  ii. ensure a strengthened coordination among other levels of the government operations on the implementation of issued recommendations is in place.

Recommendations to the National Health Insurance Fund

The National Health Insurance Fund is urged to:

  i.   strategize to ensure that the issued recommendations that were not implemented are fully implemented; and

  ii. ensure a strengthened coordination among other levels of the government operations on the implementation of issued recommendations is in place.

CHAPTER SEVENTEEN

FOLLOW-UP ON THE IMPLEMENTATION OF RECOMMENDATIONS ON THE MANAGEMENT OF WATER PROJECTS IN RURAL AREAS

17.1 Background to the Audit

Performance Audit Report on the Management of Water Projects in Rural Areas was tabled to the Parliament of the United Republic of Tanzania in March, 2019. The overall objective of the audit was to assess whether the Ministry of Water (MoW) ensures availability of safe and clean water in rural areas through effective management of water projects in order to reduce the occurrence of waterborne diseases, walking distance, and time required to get water.

17.2 Audit Scope

The main audited entity was the Ministry of Water (MoW). The activities covered includes: implementation of water projects with regards to time, cost and quality; funding of the water projects in rural areas; and performance monitoring of executed water projects in rural areas.

Data were collected from the Ministry of Water as the main audited entity. Similarly, data were collected from President's Office – Regional Administration and Local Government, six Regional Secretariats, namely; Singida, Shinyanga, Manyara, Morogoro, Lindi, and Rukwa and 12 Local Government Authorities namely: Singida DC, Manyoni DC, Mbulu DC, Kiteto DC, Shinyanga DC, Kishapu DC, Morogoro DC, Mvomero DC, Lindi DC, Nachingwea DC, Sumbawanga DC, and Nkasi DC.

The audit covered five financial years from 2013/14 to 2017/18 which aimed to establish the trend of performance and were in the position to come-up with reasonable analysis and provided conclusions based on the trend.

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17.3   Main Audit Findings

(a) Low proportion of Population with Access to Clean Water in Rural Areas

The percentage of population with access to clean and safe water in rural areas by 2017/18 was 58.7% only, while according to National Rural Water Sustainability Strategy, 2015-2020 the target was to attain 74% by 2015. Among the key causes for the failure to meet the target was inadequate geological and hydrogeological surveys prior to drilling of boreholes in areas without enough groundwater which led to having dry boreholes

(b) Inadequate Implementation of Water Projects with Regard to Time, Cost and Quality

There were delays in the completion of implemented water projects in rural areas throughout the country whereby 79% of reviewed 58 water projects were not completed on time, with average delay of 480 days. Moreover, one third of the implemented water projects had cost overrun. Further, the implemented water projects lacked quality, there were noted weaknesses like leakage of water from pipes and water tanks and non-inspection of supplied construction materials.

(c) Lack of Water Test Reports and Failure to Take Actions on Recommendations Given to Tested Water

For the 58 sampled water projects, 22% lacked water tests reports. Also, the Ministry could not meet her target of ensuring that the community is supplied with clean water. This exposes the community to the potential risk of using unsafe water hence endangering their health.

(d) Delays in Paying Contractors by the Ministry of Water

There were delays in paying contractors who were implementing water projects in rural areas ranging from 4 to 627 days. The main reasons include: inefficiencies of the Ministry of Water in handling payment certificates approved by LGAs, misallocation of funds budgeted and given by Development Partners to implement water projects in rural areas and shifting of some key Development Partners on type of financing of water projects in rural areas.

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(e) Inadequate Monitoring of water projects by the Ministry of Water

There was inadequate monitoring of water projects in the country by the Ministry of Water. For the five financial years under the scope of the audit, the Ministry only provided five monitoring reports while per annum four monitoring reports were supposed to be prepared and issued. This indicates that on average every year only one monitoring report was prepared. Lack of close monitoring resulted in poor quality, cost overruns and delays in completion of water projects in rural areas.

(f) Monitoring of Water Projects by the Regional Secretariats was not Adequate

The monitoring activities to all six visited regions were not done adequately by Regional Secretariats. Monitoring was not done on quarterly basis as required, instead was done based on request from LGAs when a certain stage of water project needed approval. There were no clear monitoring plans, no use of performance indicators during monitoring, and the RSs were not adequately conducting follow-ups on the issued recommendations.

(g) Monitoring of Water Projects by LGAs was not Adequate

LGAs were not conducting monitoring adequately. There were no fulltime personnel to supervise the activities performed by contractor instead the monitoring was done upon request from contractors when they reach a certain stage of water projects. This resulted in approval of raised certificates contrary to actual work done, delay in completion of 79% of water projects in rural areas and cost overruns.

17.4   Overall Audit Conclusion

Based on the findings, the audit concluded that, the Ministry of Water had not effectively ensured availability of clean water in rural areas through effective management of water projects in rural areas.
The conclusion was based on the fact that the percentage of the community with access to clean water in rural areas was still 58.7% only by 2017/18. The Ministry did not meet the target of 74 and 76.5% by 2015 as stated in National Rural Water Sustainability Strategy, 2015-2020 and National Rural Water Supply and Sanitation Programme (NWRSSP) respectively. There was

inadequate implementation of water projects with regards to time, cost and quality.

17.5 Results of the Follow-up on the Implementation of Recommendations

This part presents implementation status of issued recommendations to Ministry of Water. The analysis of the implementation status has been made based on the four levels of implementation namely, fully implemented recommendations; partially implemented recommendations; not implemented recommendations; and recommendations that were overtaken by events.

17.5.1 Overall Implementation of Recommendations

A total of twelve (12) recommendations were issued in this particular audit. All recommendations were directed to the Ministry of Water which implemented them through her agency, namely; Rural Water Supply and Sanitation Agency (RUWASA).

The overall follow-up results on the implementation of the issued audit recommendations indicated that out of twelve (12) issued recommendations, six (6) recommendations were fully implemented, seven (7) recommendations were partially implemented, and three (3) recommendations were not implemented. **Table 17.1** below provides for the overall level of implementation of the issued recommendations.

Table 17.1: Implementation Status of Audit Recommendations Issued to the Ministry of Water

Entity	Total Number of Recommendations Issued	Level of Implementation of the Recommendations		
		Fully implemented	Partially implemented	Not implemented
Ministry of Water	12	1	7	4

Source: Auditors Analysis of Responses from RUWASA (2022)

Table 17.1 shows that, out of twelve (12) recommendations, one (1) recommendation was fully implemented, eight (8) recommendations were partially implemented, and three (3) recommendations were not implemented.

Further analysis of the issued recommendations per each cluster or category was made; the analysis made was based on the recommendations which were fully, partially or not implemented. **Table 17.2** below provides clusters of all issued recommendations

Further analysis of the issued recommendations for each recommendation category was made based on the four levels of implementation namely; fully, partially, not implemented, and overtaken by event. **Table 17.2** provides the level of implementation for all issued recommendations based on the recommendation category.

Table 17.2: Implementation Status of Audit Recommendations Issued to the Ministry of Water

Category	Total Number of Issued Recommendations	Level of Implementation of Recommendations		
		Fully implemented	Partially Implemented	Not implemented
Planning	2	0	2	0
Implementation	5	1	3	1
Coordination	1	0	0	1
Monitoring & Evaluation	4	0	2	2
Total	**12**	**1**	**7**	**4**

Source: Auditors Analysis of Responses from MoW and RUWASA (2022)

The **Table 17.1** shows that twelve (12) recommendations were issued whereas two (2) recommendations were under Planning category and were all partially implemented. Five (5) recommendations were under Implementation/Execution category whereas, one (1) recommendation was fully implemented, three (3) recommendations were partially implemented and one (1) recommendation was not implemented. In addition, one (1) recommendation was under Coordination category and was partially implemented. Furthermore, four (4) recommendations were under Monitoring and Evaluation, whereby two (2) were partially implemented and two (2) were not implemented.

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17.5.2 Results of Follow- up of Issued Recommendations to the Ministry of Water

The analysis of evidence and information submitted by Ministry of Water showed that out of twelve (12) recommendations, one (1) recommendation was fully implemented. This recommendation and its status of implementation is explained below:

Details of Recommendations that was Fully Implemented by MoW

Recommendation 2: There are mechanisms in place to ensure that feasibility studies for intended water projects are adequately conducted in order to minimize variations of works

The recommendation required MoW to establish mechanism to ensure that feasibility studies for water projects are adequately conducted. In the action plan developed by MoW to implement this recommendation, the MoW indicated that it would strengthen contract management for Implementing Agencies.
During the review of the implementation status, it was noted that RUWASA conducted Project Designs and Tender Document preparation as well as Contract Management to all 25 Regions with the aim of building capacity on Project preparation and contract management.

Therefore, this recommendation was fully implemented since RUWASA provided evidence on conducted training on contract management. In addition, RUWASA prepared Construction Supervision & Inspection Quality Assurance/ Control Manual although it is still a draft. All these will improve execution of water projects through received and guidance elaborated in the Manual when approved and disseminated.

Details of Recommendations that were partially implemented

The analysis of evidence and information submitted by Ministry of Water showed that seven (7) out of twelve (12) recommendations issued to MoW were partially implemented. These recommendations and their implementation status are presented below.

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Recommendation 3: Groundwater investigations are conducted by experienced agencies to minimize drilling of dry or low yield water boreholes

The recommendation required MoW to thoroughly conduct groundwater investigation by experienced agencies to minimize drilling of dry or low yield water boreholes. In the action plan developed by MoW to implement this recommendation, the MoW indicated that the minimum yield in deep borehole is at least 3.5 cubic meter per hour.

Through reviewing the implementation status, it was noted that RUWASA entered memorandum of understanding with Department of Water resources (Through basin Offices) to conduct ground water investigation to all sites.

Therefore, this recommendation was partially implemented since it is true that, Department of Water resources (Through basin Offices) is experienced in drilling boreholes but only MoU between Ministry of Water and Department of Water resources was provided to auditors as the evidence, there was no evidence on the conducted ground water investigation by department of water resources for various sites was provided.

Recommendation 4: Hydrological assessment of surface water sources is conducted in great detail to establish the firm yield of water that will be available for 112 extractions to meet the design water demand for the whole period of the year

The recommendation required MoW to conduct hydrological assessment of surface water sources in great detail to establish the firm yield of water that will be available for 112 extractions to meet design water demand for the whole period of the year. In the action plan developed by MoW to implement this recommendation, the MoW indicated that they will have more hydrological studies.

Through reviewing the implementation status and discussion with officials from RUWASA, it was noted that RUWASA requested hydrological data from Water Basin Offices who are mandated to conduct hydrological studies. Therefore, this recommendation was partially implemented since there is no evidence on conducted hydrological studies by water basin offices apart from entering MoU between Department of Water resources and Ministry of

Water. The Audit Team expected several hydrological studies conducted by Water Basin Offices, but there was no evidence provided regarding conduct of hydrological studies.

Recommendation 5: The design and contract documents of water projects are reviewed, and technical advice is given accordingly to all LGAs

The recommendation required MoW to review design and contracts documents and provide technical advice to all LGAs accordingly. In the action plan developed by MoW to implement this recommendation, the MoW planned to strengthen capacity of staff in reviewing design and contract management.

Through reviewing the implementation status, it was noted that, on July, 2022 and February, 2022 RUWASA conducted training on designing and contract Management to technical staffs in order to improve the capacity of reviewing design and managing the contract.

Therefore, this recommendation was partially implemented since the training was not regularly. It also happened that only one report was provided as supporting evidence, although in their response RUWASA indicated two training. The Audit Team noted that, the training was not adequate, more trainings were needed for fully implementation of this recommendation.

Recommendation 6: There are reliable and committed source of funds prior to signing of contracts for water projects in rural areas

The recommendation required MoW to ensure reliable and committed source of fund prior to signing of contracts of water projects in rural areas. In the action plan developed by MoW to implement this recommendation, MoW instructed procuring entities to sign contracts basing on the allocated funds.

Through reviewing the implementation status and discussion with officials from RUWASA, the Audit Team noted a list of entered contracts with their contractual amounts. The list comprises of extension of available water schemes and construction of new water projects.

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Despite having plan for extension of existing water schemes, there was no evidence for allocated budget for uncompleted water projects. The Audit Team noted that priority was given to new water projects. Therefore, this recommendation was partially implemented since the provided signed contracted was not supported with accompanied budget/committed fund prior to signing.

Recommendation 8: There are mechanisms in place that ensure that LGAs effectively supervise the activities performed by contractors and consultants and ensuring the project materials used are from approved suppliers, inspected and verified prior to use

The recommendation required MoW to develop a mechanism to ensure that there is effective supervision of the activities performed by contractors and consultants and ensuring the project materials used are from approved suppliers, inspected and verified prior to use. In the action plan, MoW indicated that it would implement M&E framework.

Through reviewing the implementation status and discussion with officials from RUWASA, it was indicated that, RUWASA is at final stages in preparation of Quality Assurance/Control Guideline for guiding project inspection and verifying/testing of materials used in construction of water projects prior to use.

Since the initiative noted is only to finalize preparation of quality assurance/control guideline, therefore, this recommendation is partially implemented. For full implementation, RUWASA need to approve, disseminate, and operationalize quality assurance/control guideline including enforcement mechanism to ensure supervision to consultant and contractors is improved.

Recommendation 10: There are agreed common key performance indicators that are used by LGAs during monitoring of water projects

The recommendation required MoW to have agreed key performance indicators that are used by LGAs during monitoring of water projects. In the action plan, RUWASA indicated that it will conduct close follow up on performance of KPIs.

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Through reviewing the implementation status and discussion with officials at RUWASA, it was indicated that, RUWASA came up with the agreed common KPIs that will be used to gauge performance of the activities conducted. The Audit Team noted that the recommendation was partially implemented since the developed M&E framework and respective KPIs are yet to be finalized, moreover there was no report on monitoring performance of developed KPIs.

Recommendation 7: The resources for on-going water projects are given first priority before shifting focus on the new water projects in the respective financial year and utilized for the intended purposes

The recommendation required MoW to ensure that, there are fund set aside to finalize ongoing water projects. In the action plan developed by MoW to implement this recommendation, MoW promised to complete ongoing water projects through allocating budget. Through reviewing the implementation status, it was noted that, RUWASA allocated budget for uncompleted water projects in rural areas. The given list of water projects comprised list of new water projects and water projects which need extension.

Despite having list of both new water projects and water projects to be extended, there was no evidence on the specific budget for uncompleted water projects submitted to the Audit Team. Therefore, this recommendation was not implemented since there is no evidence on the allocated budget specific for uncompleted water projects in the 2022/23 budget.

Details of Recommendations that were Not Implemented

The analysis of evidence and information submitted by Ministry of Water showed that four (4) out of twelve (12) recommendations issued to MoW were not implemented. These recommendations and their implementation status are presented below.

Recommendation 1: There are mechanism in place for testing water quality to all implemented water projects in rural areas by the government and development partners and the noted anomalies are communicated to the Ministry and solved in collaborations with respective LGAs using affordable means

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The recommendation required MoW to establish mechanism for testing water quality to all established water schemes in rural areas. In the action plan developed by MoW to implement this recommendation, the MoW indicated that it would strengthen water quality monitoring and establish mobile water quality laboratory services.

Through reviewing the implementation status and discussion with officials from RUWASA, it was noted that RUWASA is currently in the process to procure 25 mobile water quality monitoring kits in order to strengthen mechanism for testing water quality in rural areas.

RUWASA's status indicated that it is in the process to procure 25 mobile water quality monitoring kits; however, the mobile water quality monitoring kits are yet to be procured. There was no evidence of process for procurement. Therefore, this recommendation was not implemented at all since there were no evidence indicating that the process for procurement was underway.

Recommendation 9: Mechanisms in place for monitoring and evaluation of water projects in rural areas are strengthened from LGAs to the Ministry levels in order to achieve effective implementation with regards to time, cost and quality

This recommendation required MoW to strengthen mechanism for monitoring and evaluation of water projects in rural areas from the LGAs to Ministry levels. In the action plan, MoW indicated that it would implement M&E framework.

During the review of implementation status and discussions held with officials at RUWASA, it was noted that, RUWASA is at the final stages in preparation of comprehensive M&E framework which will guide the M&E activities.

Therefore, this recommendation was not implemented since the Monitoring and Evaluation Framework was still not finalized. In addition, there were no mechanisms in place to ensure monitoring and evaluation activities were conducted as well as monitoring and evaluation reports.

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Recommendation 11: There are adequate follow-ups regarding the recommendations given during monitoring

This recommendation required MoW to conduct adequate follow-ups regarding the recommendations given during monitoring. In the action plan, MOW indicated that they would conduct close follow up.

Through reviewing the implementation status, RUWASA planned that all observations and issues raised from the Monitoring and Evaluation activities are presented to the Management for decision making process and actions for close following up.

Since there were neither monitoring reports nor follow-ups reports evidenced, the recommendation was considered as not implemented. RUWASA should have in place monitoring reports and follow-ups report of the same to justify implementation of this activity.

Recommendation 12: Documentation of the actions taken to address the noted anomalies during the Monitoring and Evaluation of water projects should be strengthened from LGAs, RSs to Ministry levels

The recommendation required MoW to strengthen documentation of the actions taken to address the noted anomalies during the Monitoring and Evaluation of water projects from LGAs, RSs to Ministry levels. In the action plan, MoW indicated that they would strengthen documentations through Management Information System (MIS) Folders.

Through reviewing the implementation status, it was noted that RUWASA has developed an internal MIS system (RUWASA Service Delivery System - RSDMS) to strengthen monitoring, tracking, providing feedback on implementation of activities from district to national level. However, there were no evidenced extract of action taken from MIS folders. Therefore, this recommendation was not implemented. RUWASA need to support status presented with evidence for justifications.

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17.6 Specific Conclusion

Based on the analysis of the implementation of the recommendations, it is concluded that MoW did not adequately implement the issued recommendations. For the efficient and effective operations, the Ministry needs to ensure that all recommendations are fully implemented.

17.7 Specific Recommendations

Rural Water Supply and Sanitation Authority should ensure that all issued recommendation are fully implemented

CHAPTER EIGHTEEN

GOVERNANCE ARRANGEMENTS FOR THE IMPLEMENTATION OF PERFORMANCE AUDIT RECOMMENDATIONS

18.1   Introduction

This chapter analyses the governance arrangements within the audited entities for the implementation of the performance audit recommendations. It provides details on how the existing governance arrangement has contributed to the inadequate implementation of the issued audit recommendations.

18.2   Status in the Implementation of Previous Issued Performance Audit Recommendations

For the past four years, starting from 2018 to 2022, NAOT conducted follow-ups on the implementation of performance audit recommendations for a total of 16 Performance Audit Reports tabled before the parliament in the year 2018 and 2019; i.e., 7 reports were tabled before the parliament in the year 2018 and 9 reports in the year 2019. 197 recommendations were assessed to determine the extent to which the respective Audited Entities implemented them. **Figure 18.1** provides a trend on the previously issued audit recommendations and the number of total recommendations that follow-up audits were made in the respective years.
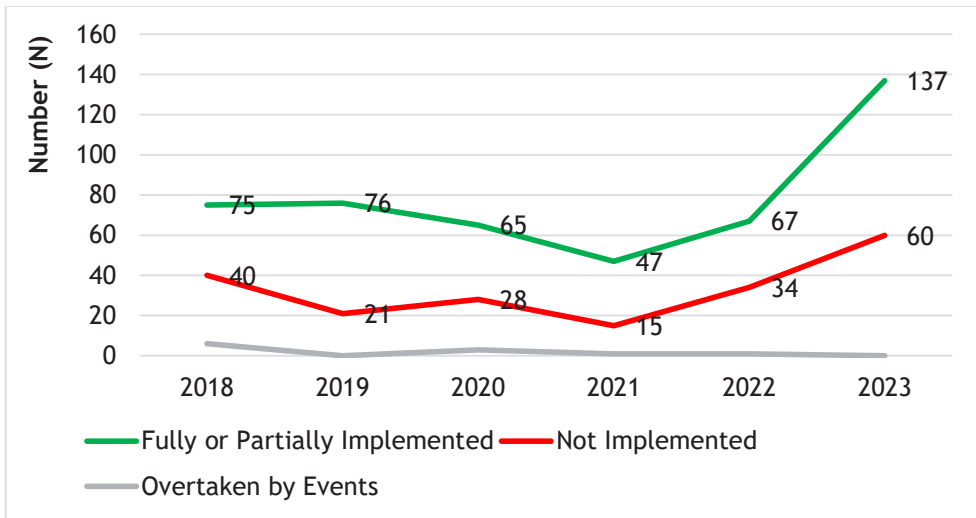
Figure 18.1: Trend in the Issuance of Audit Recommendations
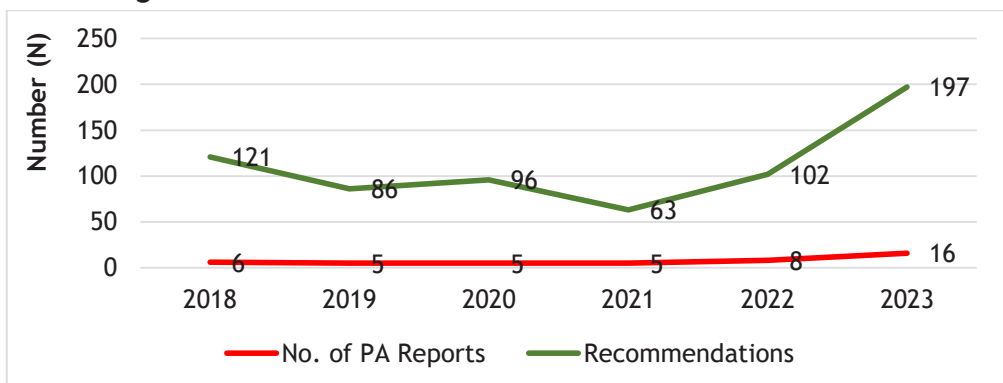
Source: *Auditors' Analysis from the previous issued Audit Recommendations (2022)*

Figure 18.1 demonstrates that the total number of the previous issued recommendations varied between 63 and 102. The total number of recommendations for which follow-up was made increases from 63 recommendations in the year 2021 to 197 recommendations in the year 2023[5]. In addition, the Audit assessed the trend in the overall implementation status of the issued recommendations as shown in **Figure 18.2**.

Figure 18.2: Implementation Trends of the Previously Issued Recommendations

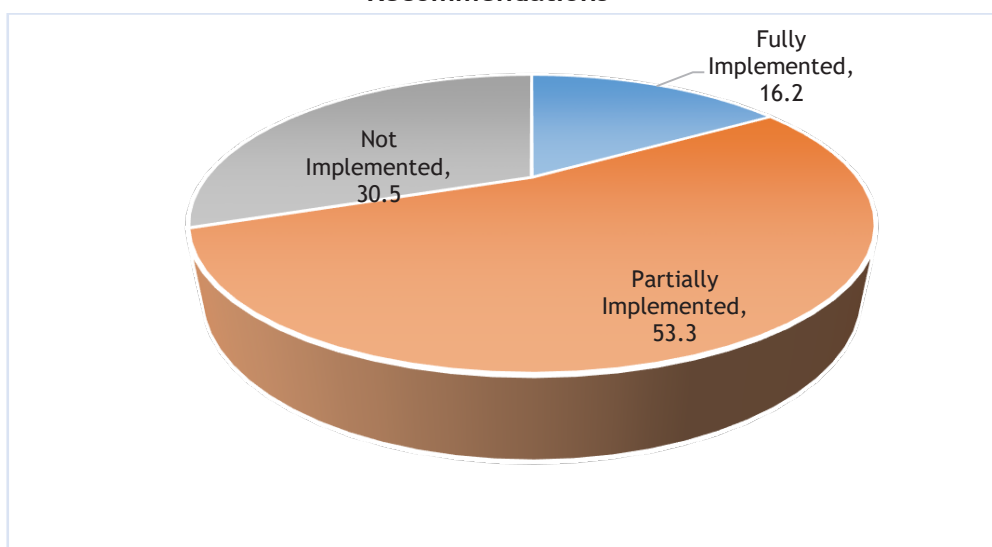*Source: Auditors' Analysis from the previous issued Audit Recommendations (2022)*

Figure 18.2 indicates that the number of recommendations that were either fully or partially implemented declined from 76 recommendations in the year 2019 to 47 recommendations in the year 2021, however, the number of recommendations that were either fully or partially implemented increases from 67 recommendations in the year 2022 to 137 recommendations in the year 2023 (equivalent to 104.5% increase). The figure describes further that the number of recommendations that were not implemented varied between 34 and 40 recommendations between the years 2018 and 2022; but, the number increases from 34 recommendations in the year 2022 to 60 recommendations in the year 2023 (equivalent to 76.5% increase). None of the recommendations reported to be overtaken by events for all reports tabled in the years 2018 and 2019.

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[5]The number of PA Reports in the follow-up audits in the year 2023 includes reports tabled before the parliament in the years 2018 and 2019

18.3 Level of Implementation of the Audit Recommendations in Audited Entities

Based on the follow-up conducted, a total of 197 recommendations were given for all 16 audit reports. Out of the 197 issued recommendations, 32 recommendations (equivalent to 16.2%) were fully implemented, 105 recommendations (equivalent to 53.3%) were partially implemented, 60 recommendations (equivalent to 30.5%) were not implemented. In addition, further analysis indicated that 137 out of 197 recommendations (equivalent to 69.5%) were either fully or partially implemented. **Figure 18.3** shows the overall status in the implementation of the issued audit recommendations.

Figure 18.3: Overall Implementation Status for the Issued Recommendations

Source: Auditors' Analysis from Responses received in respective Audited Entities (2022)

Generally, the recommendations issued to the Audited Entities were grouped into 5 main sub-categories: Planning, Implementation/Execution, Monitoring and Evaluation, Coordination, and Development. Overall, out of 197 recommendations, 41 recommendations (equivalent to 20.8%) were in planning category, 57 recommendations (equivalent to 28.9%) were in implementation/execution category, 42 recommendations (equivalent to 21.3%) were in monitoring and evaluation category, 24 recommendations (equivalent to 12.2%) were in coordination category, and 33 recommendations (equivalent to 16.8%) were in development category.

Table 18.1 provides details on the status of the number of issued recommendations based on the identified sub-categories.

Table 18.1: Status of Implementation by Categories of Recommendations Issued to Audited Entities

Sub-Category of Recommendation	Implementation Status		
	Fully Implemented	Partially Implemented	Not Implemented
Planning	12	16	13
Implementation/Execution	8	36	15
Monitoring and Evaluation	2	27	13
Coordination	5	12	5
Development	5	14	14
Total	**32**	**104**	**61**

Source: Auditors' Analysis of the Responses from the Audited Entities (2022)

Further analysis indicates that, out of 137 recommendations that were either fully or partially implemented, 28 recommendations (equivalent to 20.4%) were in planning category, 44 recommendations (equivalent to 32.1%) were in implementation/execution category, 29 recommendations (equivalent to 21.2%) were in monitoring and evaluation category, 17 recommendations (equivalent to 12.4%) were in coordination category, and 19 recommendations (equivalent to 13.9%) were in development category.

18.4 Reasons for Inadequate Implementation of the Issued Recommendations for the Audited Entities

Below Section provides reasons why the Audited Entities could not fully implement all the issued performance audit recommendations.

18.3.2 Governance Arrangement for Implementation of Performance Audit Recommendations at the Audited Entities Covered by this Follow-up

The Audit also noted weaknesses for the governance arrangement at the entities visited. The audit evaluated the cause for failure to fully implement the issued audit recommendations and below are the details:

(a) Inadequate System for Monitoring the Implementation of Issued Recommendations

Absence of Unit or Section Responsible for Overseeing the Implementation of Recommendations

The audit team observed that, in all 19 entities that were covered by this follow-up did not have a Section or Department, which had a role of tracking and overseeing the implementation of the issued recommendations. During the interviews held between the follow-up teams and the audited entities, it was revealed that, once the follow-up teams made inquiries on the status of implementation of issued recommendations, much time was spent in identifying individual sections and personnel who was assigned to provide for the status of the implementation of the recommendations.

This was also noted by long duration that MoA and NIRC took to provide evidences showing the status of implementation of the recommendations. Same situation applied to Ministry of Energy, MoEST and VPO. Furthermore, same situation was noted at MoW, MoH and MoFP. This implies that, even though the top management of the audited entities received recommendations, management did not assign anyone or any Sections the task of ensuring that the recommendations were adequately implemented.

During the verification process it was noted that, individual Sections or Departments (depending on the focus of the audit) within the audited entities worked on those recommendations and consolidated their implementation status.

Generally, of all 19 audited entities of which follow-up was conducted, at least PO-RALG had initiated a Directorate that dealt with making follow-up of the issued recommendations.

The Officials have been dealing with Financial Audit report only and added that for Performance Audit Report. This was due to lack of clear and defined reporting mechanism as compared to financial reports.

Inadequate Involvement of Top Management and Audit Committees in the Monitoring of Implementation of Audit Recommendations

Furthermore, during the interview meetings with the officials from MoA, VPO, MLHHSD, MITI, MoEST, and MoE it was noted that that at the internal auditors were assigned to make follow-up on the implementation status but the processes were not documented for ease of tracking the whole process since the submission of the final performance audit report. All the Audited Ministries where follow-up was conducted did not involve the Top Management and Audit Committees in deliberating on the responses that were required by the follow-up teams. Also, there were no records or minutes indicating whether the status of implementation of the recommendations was issued and discussed by the top management of the Audit Committees.

As a result, it took quite some time for the entities to provide responses regarding the implementation status of the recommendations because the contact persons took time to identify Sections, Departments or responsible staff with the responsibility for consolidating the overall responses from various Sections within the Ministries. This was also the case in the Departments and Agencies which were covered during the follow-up. The likes of Tanzania Plant Health and Pesticides Authority (formerly TPRI) NIRC, SIDO, TFRA, TOSCI, and TANESCO, did not have any mechanism of ensuring that the issued recommendations are shared with the management and deliberated so as to ensure that they are managed and implemented in a timely manner.

Absence of Reporting Mechanism for the Performance Audit Recommendations

The reporting Mechanisms were weak on the Implementation Status of Recommendations. It was noted that the audited entities lacked good reporting mechanisms for reporting the implementation status of the given recommendations. All 19 audited entities that were covered in follow-up, had no specific report that was produced showing the implementation status of the issued recommendations. Ministries and Agencies mentioned above did not produce any report showing the implementation status of the issued recommendations.

It was further noted that when these entities covered during the follow-up were requested to provide status of implementation based on the issued recommendations, they used the implementation matrix prepared by NAOT

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requesting feedback for their level of implementation of the issued recommendations.

This implies that little efforts were put by audited entities to further report on the implementation within their organizations and thus less priority was given by audited entities. It was noted for instance at MoA, NIRC, MoEST and MoE, the issued recommendations at some point could not be traced as they are not accounted for in their daily official activities.

(b) Absence of Defined Processes for Managing Implementation of Implementation of Issued Recommendations

The Audit noted that Ministries and Agencies did not have defined processes for managing the implementation of performance audit recommendations. This was because there were no any defined procedures for handling the issued recommendations.

Lack of Detailed Plan for Implementation of Audit Recommendations

Interviews between the follow-up teams and Officials from the Ministries and Agencies covered in the follow-up showed that Ministries and Agencies did not have a detailed plan showing how the issued recommendations were going to be implemented. Review of the submitted annual plans and Strategic plans revealed that there were no action plans and timelines that specifically detail the activities that are going to be implemented and the budget for such activities.

During the exit meetings between the NAOT and the Management of the audited entities, the audited entities received the audit recommendations and came up with preliminary implementation plans. In those preliminary plans, the audited entities came up with broad activities and timelines from which the recommendations were to be implemented.

However, it was noted that, apart from the preliminary plans that were prepared during the exit meetings, there were no other plans prepared by the audited entities to further guide them and allocate responsibilities to specific units that would track the progress. In the 19 entities covered in this follow-up, no one was clearly accountable for this matter. For example, at MoA and NIRC, the Audit Committee was not informed of Performance

Audit Reports issued to the audited entities. This hindered follow-up within the audited entities.

Furthermore, it was also noted Tanzania Plant Health and Pesticides Authority (TPHPA) was undergoing institutional change as once it was TPRI and therefore, the interviews held with Officials indicated that there could be no much to be done as TPRI, the then audited entity was no longer in existence and hence TPHPA is yet to strengthen it administrative and monitoring structures.

Inadequate Coordination and Communication on the Implementation of Issued Recommendations

The follow up team observed that the Internal Audit function within the Ministries and Agencies covered by this follow-up was equally not aware of issues regarding the implementation of performance audit recommendations, but this came into knowledge during the entry meeting when the Management of NAOT introduced the follow-up assignment.

Interviews held by Officials at the Ministries and Agencies covered by this follow-up revealed that most of staff were not aware of follow-up and for that case, even the assigned staff in a respective Ministry or Agency could not promptly respond to matters raised in the shared recommendation matrix. The Matrix was sent to Ministries and Agencies, during the beginning of the follow-up assignment, requesting for status of implementation of the performance audit recommendations. It was also observed that there was no coordination between Ministries and Agencies under their administration. For the case of MoA and NIRC, it was noted that despite the fact that some recommendations required inputs from the Ministry, yet during provision of responses, the same was referred to the Ministry instead of pulling the information from the Ministry or vice versa to fast track the responses and rate of implementation of the recommendations.

The same situation was noted at MoE and MoEST whereas, there were no plans for implementation of the issued recommendations and there was no accountable unit or personnel that could be responsible where there was a need to respond to the follow-up queries. The similar situation was also noted at MLHHSD. The Ministry has commissioned all audit queries to the Internal Audit Unit, but it was not that most of the queries and

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recommendations that were given attention were financial or special audits.

Absence of Recommendation Registry

Furthermore, the Audit noted that the reason for not preparing implementations status report was the lack of the recommendation registers to capture all performance audit recommendations which are issued to respective MDAs.

Lack of the recommendation registers within the Ministries and Agencies largely made it difficult for them to respond and provide answers on time on the status of implementation of the audit recommendations. This was evidenced by the fact that even when they were issued with the letters requesting for the status of implementation of the audit recommendations, they had no records in their offices and they had to request the Performance Audit Reports and they had to request them from NAOT.

It was further noted that sharing of information regarding the implementation status prepared was not successfully carried out across Sections or Departments within the Ministries and Agencies covered in this follow-up.

(c) Inadequate System for Monitoring the Implementation of Issued Recommendations

The audit team evaluated the adequacy of the systems for monitoring the implementation of the given recommendations. Through the said evaluation, the audit team noted that the systems for monitoring the implementation of issued recommendations within the Ministries and Agencies covered in this follow-up was not functioning and contributed to a large extent to unsatisfactory implementation of the issued recommendations. This was noted due to the following:

Lack of Monitoring Plans and Key Performance Indicators

It was noted that, the system for monitoring was lacking monitoring plans and performance indicators that could be used to assess the level of implementation of the given recommendations. Entities lacked focal

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persons or section that would lead and track the implementation status. Due to insufficient monitoring, the following weaknesses were noted:

(i) failure to capture all issued recommendations in the recommendations register hence audited entities lacked good knowledge of the recommendations to be addressed;

(ii) failure to include the issued recommendations in the audited entities' plans and budget as well as activities;

(iii) failure to regularly establish implementation status of the recommendation;

(iv) insufficient reporting and sharing of implementation status; and

(v) unsatisfactory implementation of the audit recommendations although three years has elapsed since the recommendations were issued.

However, the audit team noted that it was not obvious how the internal audit function within the Ministries and Agencies covered in this follow-up ensures effectiveness in the implementation of the issued recommendations in the departments responsible for the implementation. Therefore, it was revealed that insufficient monitoring of the implementation of the issued audit recommendations was partly due to the following:

Lack of the Mechanism to Track the Implementation Status of Issued Recommendations

Despite consideration in the follow-up that ought to be made during the implementation of the internal audit plan, it was noted that there were no established procedures to help track the implementation of the issued recommendations by CAG. Also, given the follow-up plan, it was noted that there was no report provided to indicate how the previously issued audit recommendations were considered during the implementation of the respective departments for which the recommendations were issued.

Absence of Defined Reporting Mechanisms on the Status of the Implementation Issued PA Recommendations

Although the issued audit recommendations were assigned to the responsible department for the implementation, the follow-up audit team noted that there was no reporting mechanism in place to help inform the status of implementation of the issued audit recommendations in respective

departments. However, it was further revealed that the reason for this was due to the lack of appointed personnel who would exclusively ensure step-by-step status on the implementation of the recommendations and thereby report the same to the internal audit section.

Lack of Awareness to Ensure the Implementation of Performance Audit Recommendations

The follow-up audit team noted that inadequate follow-up made to ensure the implementation of the issued audit recommendations was contributed to by a lack of awareness to understand that even the issued performance audit recommendations were supposed to be implemented and status documented. This was evidenced by the fact that priority is given to recommendations issued from the conducted financial audit reports.

CHAPTER NINETEEN

CONCLUSION AND RECOMMENDATIONS

19.1   Introduction

This chapter concludes on the implementation status of the previously issued recommendations as presented in Chapters Two to Seventeen of this report. The conclusion is based on the overall objectives of the follow-up audits on the implementation of recommendations as presented in Chapter One of this report.

Similarly, this Chapter contains overall recommendations to the Government Ministries, Independent Departments, Agencies and Local Government Authorities on what should be done to improve the current situation regarding the implementation of CAG's recommendations.

19.2   General Conclusion

The overall conclusion of this follow-up audit is that the actions taken by Audited Entities in response to the previously issued performance audit recommendations have to some extent addressed the issues to which the recommendations were made. What is generally indicated by the follow-up audit results is that almost a quarter of the issued recommendations were not implemented.

The audit found out that inadequate implementation of the issued recommendations is mainly caused by various factors such as: insufficient governance structures within the Audited Entities, lack of clearly established responsibilities and reporting arrangements in these entities, and the inappropriateness of the processes and systems for monitoring implementation of the issued recommendations within the audited entities.

Not only that but also, the Audited Entities are still operating without having specific sections or individuals to coordinate the implementation of the issued recommendations. In addition, such entities lack updated recommendation registry, and detailed plans for implementation of the issued recommendations. Generally, these factors were observed to contribute to the insufficient implementation of the audit recommendations.

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19.3   Specific Conclusions

(i) The Audited Entities have satisfactorily implemented a large number of the audit recommendations issued by the CAG

The overall implementation status of all the issued recommendations was satisfactory. The findings from the follow-up audits indicated that 66% of the issued recommendations were either fully or partially implemented while 23.6% were not implemented. The inadequate implementation of the issued recommendations was to a large extent contributed by the absence of an established system to monitor the status of implementation of these recommendations.

In addition, various actions have been taken by the audited entities concerning those recommendations directed towards planning, implementation, and monitoring. However, those recommendations related to coordination, implementation (execution), supervision, monitoring, and evaluation have been partially implemented.

This is despite the fact that those areas are critical for enhancing the performance of the audited entities in various areas of their jurisdictions. This means that there are no corrective measures taken to address issues in those areas.

Inadequate efforts in taking corrective measures for improving those areas have largely denied those audited entities a room to enhance the quality of the services they are providing and ultimately denied the public the opportunity to receive high quality services from these entities.

(ii) The Audited Entities are lacking a Working Governance System for monitoring the Implementation of NAOT's Performance Audit Recommendations

The audited entities lack well-functioning working governance systems for monitoring NAOT's performance audit recommendations. This challenge exists despite the fact that all audited entities have internal audit function, audit committees, and conduct periodic management meetings.
Moreover, the implementation and reporting structures were not extensively used to address performance audit recommendations. For

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instance, the Audit Committees of all nine Audited Entities have neither received nor conducted follow-ups on the issued performance audit recommendations.

Another example is that of the Internal Audit Function of the audited entities. The function does not demonstrate to involve themselves in making any follow-ups on issues raised in the performance audit reports. The same was also observed during the Management Committees' meetings of the Audited Entities, whereas they never discussed and deliberated on the implementation status of the issued performance audit recommendations.

Furthermore, reporting the level of implementation of the issued audit recommendations was found to be a challenge since there was no documented information or reports that tracked and documented the level of implementation of the issued recommendations and ensure that the implementation status is periodically updated.

19.4 Overall Recommendations

The Prime Minister's Office is advised to ensure that all Ministries, Independent Departments, Agencies and Local Government Authorities:

i. Establish sound governance structures and mechanisms for tracking and monitoring the implementation of Audit recommendations;

ii. Prepare action plans stating how the Audited Entity will ensure that the partially and not implemented recommendations are addressed on a timely basis;

iii. Ensure that the submitted Performance Audit Reports are effectively disseminated to the responsible Divisions or Departments within the Audited Entities and explain what they are out to do. Where possible, the Reports should also be disseminated to existing governance systems such as Internal Audit, Audit Committee for proper follow-up and actions; and

iv. Establish monitoring mechanisms or tracking systems that will ensure the status of implementation of all issued audit recommendations is regularly checked and timely reported to the management of the audited entities for necessary actions.

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