Can CBMS be improved?
Whave Solutions, 16 April 2019
Uganda Rural WASH O&M Forum
What do people think about when they talk of Community Based Maintenance System?

• Communities are responsible for maintenance, because government and NGOs “hand over” ownership
• Communities attend to welfare, make sure everyone has access to water
• Communities set their own prices, so each community can have a different tariff amount
• Communities collect money in advance so they are ready to pay for repairs quickly
• HPMs work quality is controlled by training from government and NGOs, so communities do not have to fear poor quality work or poor quality materials
• Please add your thoughts here.....
• Communities are responsible for maintenance, because government and NGOs “hand over” ownership

>>> OK….let this be identified as the part of CBMS that is the “baby” we don’t want to lose

• Communities attend to welfare, make sure everyone has access to water

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• Communities set their own prices, so each community can have a different tariff amount

>>The price is set by the HPM, and by the quality of the hand-pumps, how much replacement it needs over time….how far it is to travel to, how heavily it is used or abused. Community can refuse to pay, and look for a better price. But how much choice if the sub-county has only one or two HPMs? Also, HPMs cannot get hold of quality parts, so DWOs need to buy and stock quality for HPMs. Then the communities see the different mark-ups by HPMs, so DWO is obliged to publish correct prices for labor and parts

>>So really gov is setting price.

• Communities collect money in advance so they are ready to pay for repairs quickly

>>> this requires a trusted entity, clear evidence it is not working without one

• HPMs work quality is controlled by training from government and NGOs, so communities do not have to fear poor quality work or poor quality materials

>> clear evidence this is not working…pumps are failing prematurely, quality is poor. The reason is that the rehab entity/constructor is not held responsible for maintenance costs
So, is this the solution:
>
>> Gov bodies like sub-counties, become the trusted entities that collect tariffs, buy and stock quality materials, train and manage technicians (CBMS+?)

>> we train HPMAs to become trusted entities or “Service Area Providers” (SAPs) that people want to pay? Can their accounts be transparent?

>> Could they be responsible for both construction/rehab and long-term servicing?

>> Could this be “Build-Operate-Transfer”?

>>> Do we need example SAP entities that the HPMAs can learn “on the job” from? – learn about government utility performance contracts, performance standards, monitoring, management, accounting etc;

>>> could the “transfer” in Build-Operate-Transfer be transfer to HPMA by a raining entity like Whave?

>> but would they be big enough to be economically viable? A Service Area Provider (SAP) needs to cover 3 or 4 districts to be viable
Conventional CBMS
Non-functional rural sources

Improved CBMS  Public Utility model
Full functionality

Baby: Communities attend to welfare, make sure everyone has access to water >> Same

Bath-water: Unclear what is responsibility because minor becomes major

Baby: Clear definitions: major and minor parts replacement together paid for by O&M Tariffs

Baby: Tariffs normalized by government...............Same

Bath water: Local technicians not incentivized for Preventive Maintenance

Baby: Incentive for Preventive Maintenance (as demonstrated by Whave, which services hundreds of communities at >98% functionality, through performance-payment (PM) contracts with local HPMA members training in PM

Baby: Community leaders assure universal access.......Same, with accountability

Bath water: Tariffs not regulated, 200-1000k/jerrycan is common......Baby: Tariffs are regulated

Bath water: Hardware/installation quality is not regulated, causing early disfunction...Baby: Quality regulated by same build-and-operate contracts (BOT)

Bath-water: Urban/rural demarcation unclear so not possible for Full Functionality Service Area Providers to be economically viable...Baby: gazetting Rural Service areas for communities <5000 people (even 3000 possible for viable full functionality )

Bath-water: No co-ordination of Donors/NGOs Baby: Co-ordination, clear framework
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adam.harvey@whave.org