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Data	

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LIST OF ACRONYMS

AfDB African Development Bank

BIs Benefiting Institutions

BSc. Bachelor of ScienceBU Busitema University

GU Gulu University

HEST Higher Education Science and Technology Project

ICT Information and Communications Technology

KYU Kyambogo University

LU Lira University

MAK Makerere University Kampala

MUST Mbarara University of Science and Technology

S&T Science and Technology

S/A Science/ Arts

MoESTS Ministry of Education Science, Technology and Sports

UMA Uganda Manufacturers Association

ART Anti-Retroviral Therapy

RRH Regional Referral Hospital

HC Health Centre

UMI Uganda Management Institute

DHO District Head Office

OPD Out Patient Department

ITO Internship Training Officer

IPO Internship Placement Officer

SNO Senior Nursing Officer

EXECUTIVE SUMMARY

Since 2015, Uganda Manufacturers Association (UMA) was entrusted with the mandate to run an internship program under Higher Education, Science and Technology project. The Project is funded by African Development Bank (AfDB) in partnership with Government of Uganda (GoU), Ministry of Education, Science, Technology and Sports (MoESTS) and the nine Benefiting Institutions (BIs).

The main goal of the project is to improve the skills of 2000 interns from nine Benefiting Institutions (BIs) namely; Kyambogo University (KYU), Busitema University (BU), Makerere University (MAK), Gulu University (GU), Lira University(LU), Mbarara University of Science and Technology (MUST), Muni University (MU), Uganda Management Institute (UMI) and Makerere University Business School (MUBS). Initially, LU was a constituent college of GU but was made an independent University in 2016. Ninety percent (90%) of the students to be placed in the respective companies should be offering Science and Technology Courses while ten percent (10%) should be offering Arts courses. The project helps interns to acquire skills required by employers in to enhance their opportunities of employment in the future.

In 2016, Lira University recommended 163 students to participate in the UMA-HEST Internship project, these comprised 69 males (42.33%) and 94 females (57. 67%). There was a percentage increase of 226% as compared to the 50 students recommended in 2015. The HEST target for 2016 was to place 10 interns which was surpassed by 1530%.

All the students were placed at once (in July during 2015 and June during 2016) and completed their 6-week long training at once. The interns are placed by the University in different health centres and other organizations across the country. In both 2015 and 2016, over 20 health centres have taken on and trained interns in different hands on skills. Interns acquired various skills such as interpersonal, communication and management skills among others in addition to their course required hard skills.

Lira University is among the BIs that has also surpassed the threshold for the Female involvement into the project. 54.0% and 57.6% of the total interns recommended and placed were female in 2015 and 2016 respectively.

Failure to provide the correct bank details and change of telephone contacts without updating the UMA HEST team have been some of the major challenges faced by the UMA-HEST project Team. During the induction training, the UMA HEST team is planning to emphasize and advise interns to register information details that are up to date.

The placement target for 2017 will largely depend on the total number of students available for placement. This is attributed to the fact that the interns train for half the period in comparison to other BIs since they are still continuing students.

1 Introduction

In 2016, LU recommended One hundred sixty-three (163) students from two course; Bachelor of science in Midwifery and Bachelor of science in Public Health.

Unlike in 2015 were students were required to travel to UMA (Kampala) for the induction seminar, they were inducted at LU main campus mainly to capture more students and to eliminate the transportation and lodging costs incurred by upcountry students in Kampala. They had a two-day training in life and work place based skills in May, 2016. The interns were thereafter allocated to various Health Centres around the Northern and other Regions across the country. As at 31st December 2016, all the recommended students had been placed.

This report will continue with the general information and proceed with placements of interns, interns' status after 3 months training, skills attained by interns, challenges and mitigations, and finally conclusion.

2. GENERAL INFORMATION

1.1 INTERNS RECOMMENDED

One hundred sixty-three (163) students were recommended and allotted to various Health centers, Local governments and NGOs by the University mainly around Northern region and different other parts of the country. In relation to the previous year (2015), more female (94) than male (69) students recommended. This is attributed to the dominance of female students in the courses recommended i.e. Midwifery. Suffice to note, the University is commended for the increasing number of female interns into the project from 23 to 94 in 2015 and 2016 respectively. In addition, from a total of 213 interns recommended and placed so far, 54.92% (117) are female interns.

1.1.1 On Departmental Basis

The University recommends students from only two departments; Department of Public Health and Department of Midwifery.

Table 1: Students recommended on Department basis.

			Placem	ent - 2015			Placement - 2016						
S/N Department	Total	%	Male	%	Female	%	Total	%	Male	%	Female	%	
1 Department of Public Health	10	20.00%	10	20.00%	0	0.00%	33	20.25%	26	15.95%	7	4.29%	
2 Department of Midwifery	40	80.00%	13	26.00%	27	54.00%	130	79.75%	43	26.38%	87	53.37%	
Total	50	100.00%	23	46.00%	27	54.00%	163	100.00%	69	42.33%	94	57.67%	

All the two departments recommended more students in 2016 as compared to 2015. The department of Midwifery recommended majority of students in both years i.e. 40 in 2015 and 130 in 2016. With the increase in numbers also increased the female participation percentage in the project. In both years the female targeted percentage threshold of 40% was surpassed.

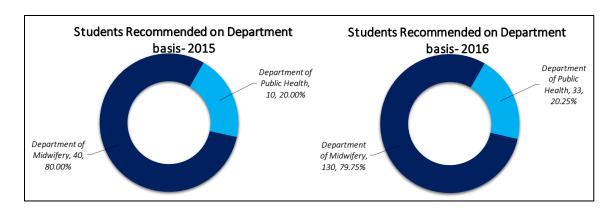


Figure 1: Students recommended on Department basis.

2.2. Course Basis

The same courses were recommended in both 2015 and 2016.

	2015									2016						
S/N Courses	Total	%	Male	%	Female	%	Total	%	Male	%	Female	%				
1 BSc. Public Health	10	20.00%	10	20.00%	0	0.00%	33	20.25%	26	15.95%	7	4.29%				
2 BSc. Midwifery	40	80.00%	13	26.00%	27	54.00%	130	79.75%	43	26.38%	87	53.37%				
Total	50	100.00%	23	46.00%	27	54.00%	163	100.00%	69	42.33%	94	57.67%				

Table 2:Students recommended per course.

In both 2015 and 2016, BSc. Midwifery recommended majority of the interns. in addition, it recommended more females (87, 53.37%) than males (43, 26.38%) in 2016 well as Bachelor of Public Health recommended more males (26, 15.95%) than females (7, 4.29%) students. In 2015, BSc. Public Health recommended only male interns while BSc. Midwifery recommended more females than males.

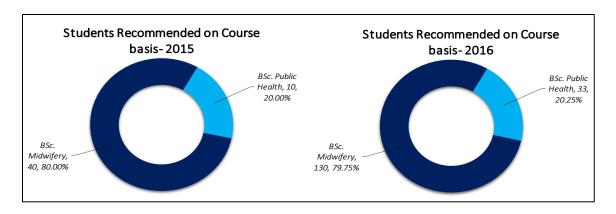


Figure 2: Students recommended on Course basis.

2. PLACEMENT OF INTERNS

Unlike interns from other Universities who are placed and monitored by UMA, Placement of interns from Lira University is conducted by university officials. The interns are guided by the university officer regarding the areas of placement and the skills required. They are placed in Health centres and Hospitals across the northern region for a period of 6 weeks. They are supervised by both the University responsible officers and the UMA-HEST Team. Usually, the interns are still studying at the university; these are placed for their industrial training. suffice to note, the interns are all placed at once (in June for 2015 and July for 2016 cohorts). None the less, these interns are also placed in their relevant fields of study as identified by the university officials.

Support supervision by the UMA-HEST Team in conjunction with LU Health officers was conducted after their training period. This was directed towards finding out whether the interns obtained the relevant skills in addition to obtaining feedback on the performance of the interns and areas that require improvement. **This feedback is presented in the general report.**

In 2015, a total of Fifty (50) interns were placed. These comprised of 23 (46%) male and 27 (54%) female interns. Lira university was one of those that highly emphasize gender equality. Usually more females are placed than their male counterpart in the different fields. All the interns placed are able to complete their internship for the stipulated period.

1.2 MONTHLY BASIS

1.2.1 Total Vs Actual

Table 3: Interns placed per month and per gender:

				2015	i							20	16			
		тот	AL			ACT	JAL			TO	TAL			ACT	UAL	
Months	Total	%	Male	Female												
January	0	0%			0	0%			0	0%			0	0%		
February	0	0%			0	0%			0	0%			0	0%		
March	0	0%			0	0%			0	0%			0	0%		
April	0	0%			0	0%			0	0%			0	0%		
May	0	0%			0	0%			0	0%			0	0%		
June	0	0%			0	0%			163	100%	69	94	163	100%	69	94
July	50	100%	23	27	50	100%	23	27	0	0%			0	0%		
August	0	0%			0	0%			0	0%			0	0%		
Septembe	0	0%			0	0%			0	0%			0	0%		
October	0	0%			0	0%			0	0%			0	0%		
Novembe	0	0%			0	0%			0	0%			0	0%		
Decembe	0	0%			0	0%			0	0%			0	0%		
Total	50	100%	23	27	50	100%	23	27	163	100%	69	94	163	100%	69	94

As observed, all the interns are placed at once. The placement is attribute to the university curricular. These interns ae required to report back to the university after their internship for other activities. UMA has not interfered in the placement procedures of the university as the Health sector is best known to them.

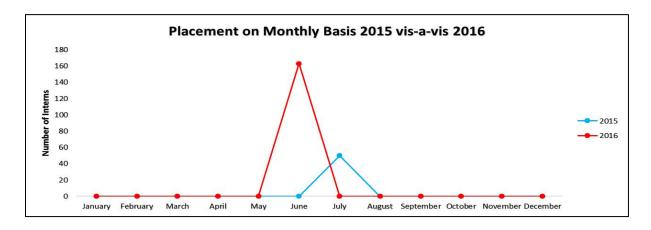


Figure 3: Trend of interns placed per month

1.3 DEPARTMENT BASIS

Lira University was established to train human resources in Health Sciences and Technology. The college developed Bachelor of Science in Public Health and Bachelor of Science in Midwifery programmes under the faculty of Health Sciences. These are pragmatic set of programmes to train Public Health and Reproductive Health Practitioners at degree level. Public Health and Midwifery programmes are based in the Faculty of Health Sciences. The two courses formulate the core departments of the University.

1.3.1 Total Vs Actual

Table 4: interns placed per Department

Placement - 2015								Placement - 2016						
S/N Department	Total	%	Male	%	Female	%	Total	%	Male	%	Female	%		
1 Department of Public Health	10	20.00%	10	43.48%	0	0.00%	33	20.25%	26	15.95%	7	4.29%		
2 Department of Midwifery	40	80.00%	13	56.52%	27	100.00%	130	79.75%	43	26.38%	87	53.37%		
Total	50	100.00%	23	100.00%	27	100.00%	163	100.00%	69	42.33%	94	57.67%		

Students recommended by the university in both 2016 and 2016 are all from two departments; Department of Public Health and Department of Midwifery.

In 2015, Department of Midwifery recommended the highest number of interns (40, 80%). This included 23 male and 27 female interns. The department of public health recommended 10 (20%) male interns.

In 2016, a total of 163 interns were recommended. Of these, the department of midwifery recommended the highest number; 130 (79.75%) comprising of 43 male and 87 female interns. 33 (20.25%) were recommended by the department of Public health comprising of 26 males and 7 female interns.

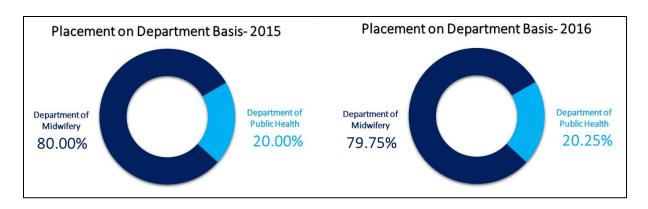


Figure 4: Proportion of interns placed per department per year

1.4 COURSE BASIS

1.4.1 Total Vs Actual

Table 5; Interns placed per course and gender

	Placement - 2016											
S/N Courses	Total	%	Male	%	Female	%	Total	%	Male	%	Female	%
1 BSc. Public Health	10	20.00%	10	20.00%	0	0.00%	33	20.25%	26	15.95%	7	4.29%
2 BSc. Midwifery	40	80.00%	13	26.00%	27	54.00%	130	79.75%	43	26.38%	87	53.37%
Total	50	100.00%	23	46.00%	27	54.00%	163	100.00%	69	42.33%	94	57.67%

Students recommend by the university in both 2016 and 2016 are all from two courses; Bachelor of science in Public Health and Bachelor of Science in Midwifery. These courses were selected mainly because of the S&T slots allocated to the University.

In 2015, the highest number of interns (40, 80%) recommended were from Bachelor of science in Midwifery; These included 23 male and 27 female interns. In the same year, the department of public health recommended only 10 (20%) male interns.

In 2016, a total of 163 interns were recommended. Of these, Bachelor of science in midwifery recommended the highest number; 130 (79.75%) comprising of 43 male and 87 female interns. 33 (20.25%) were recommended by the Bachelor of science in Public health comprising of 26 males and 7 female interns.

In both 2015 and 2016, a total of 213 interns have so far been recommended and placed for internship. Of these, 121(57.8%) interns are female and 92 (43.2%) interns are male.

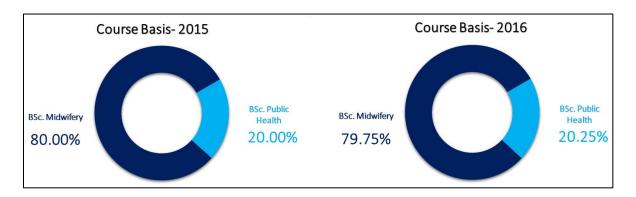


Figure 5; Proportion of intern placed per course and year

1.5 COMPANY INFORMATION

1.5.1 Sectors and Size

A total of 45 health centres under the health sector took on interns from Lira University. Lira Regional Referral hospital took on the highest number of interns (40) followed by Dokolo health centre IV (7) and Dokolo health centre IV (7).

1.5.1 Sectors and Size

The table below depicts the sector under which the interns were categorized. The health sector has taken on many interns. This indicates its growth & a big support of the sector in skilling the Science & Technology students. Out of the 163interns placed, 69 were male and 94 female interns in the year 2016.

Table 6: Health centres with the total interns taken

No.	Health Centres	Sectors	Total	Male	Female
1	Jerusalem School Of Nursing And Midwifery	Health Sector	7	2	5
2	Good Samaritan Nursing And Midwifery School	Health Sector	5	2	3
3	Soroti School Of Nursing	Health Sector	2	0	2
4	Soroti School Of Comprehensive Nursing	Health Sector	6	3	3
5	Lira Regional Referral Hospital	Health Sector	40	12	28
6	Aledtong District Local Gov't	Health Sector	5	2	3
7	Amurata Health Centre 4	Health Sector	5	2	3
8	Moyo District Health Office	Health Sector	3	2	1
9	Apelo Hospital	Health Sector	1	0	1
10	Lira Hospital	Health Sector	3	3	0
11	Aduku Health Centre 4	Health Sector	4	1	3
12	King James Nursing And Midwifery School	Health Sector	5	2	3
13	Aboke Health Centre 4	Health Sector	5	3	2
14	Lira Municipal Council	Health Sector	3	2	1
15	Lira School Of Comprehensive Nursing	Health Sector	3	0	3
16	Lira Nursing School	Health Sector	1	0	1
17	Dokolo Health Centre 4	Health Sector	7	3	4
18	Lira District Healthy Office	Health Sector	2	1	1
19	Anyeke Health Centre 4	Health Sector	6	3	3
20	Uganda Christian Institute School Of Nursing And Midwifery	Health Sector	3	2	1
21	Florence School Of Nursing And Midwifery	Health Sector	2	1	1
22	Lira University	Health Sector	3	1	2
23	Ogur Health Centre 4	Health Sector	2	1	1
24	Aber Hospital	Health Sector	5	2	3
25	Gulu Health Centre 4	Health Sector	1	0	1
26	Kalongo School Of Nursing And Midwifery, Agago	Health Sector	3	1	2
27	St Mary's Midwifery School	Health Sector	2	0	2
28	Apach General Hospital	Health Sector	3	0	3
29	Oyam District Health Office	Health Sector	1	1	0
30	District Health Office Kitgum	Health Sector	3	1	2
31	Soroti District Local Government	Health Sector	2	0	2
32	District Health Office Gulu	Health Sector	1	1	0
33	Amach Health Center 4	Health Sector	3	2	1
34	Apach Health District Office	Health Sector	1	1	0
35	Gulu University	Health Sector	2	2	0
36	Lira Comprehensive Nursing School	Health Sector	3	2	1

37	Uganda Christian Institute Of Comprehensive Nursing And Midwifery Lira	Health Sector	1	1	0
38	Lira School Of Nursing And Midwifery	Health Sector	2	2	0
39	Apac District Health Centre 4	Health Sector	1	1	0
40	Bududa Hospital	Health Sector	1	1	0
41	Lira Main Hospital	Health Sector	1	0	1
42	Amolatar Health Centre 4	Health Sector	1	1	0
43	Apac General Hospital	Health Sector	1	1	0
44	Nightingale School Of Nursing And Midwifery , Apac	Health Sector	1	0	1
45	Good Samaritan School Of Nursing And Midwifery, Lira	Health Sector	1	1	0
	Total		163	69	94

1.1 TARGET ACHIEVEMENT

1.1.1 Total Vs Actual

Table 7: Placement target per year

		2015				2016	
			% of HEST			HEST	% of HEST
Total	Actual	HEST Target	Target	Total	Actual	Target	Target
50	50	10	500%	163	163	10	1630%

The placement target for LU is 10 interns. however, since these interns stay for half the period more students are placed. This explains the 50 interns placed in 2015 given the target of 10 target. In 2015, the target therefore was surpassed by over 300%.

With the same target for 2016, more students were placed hence surpassing the target by over 1500%.

1.2 S&T AND ARTS

Table 8: Percentage of Science Visa-Vis Arts interns placed

2015				2016					
Total	S&T	%	ARTS	%	Total	S&T	%	ARTS	%
50	50	100.00%	0	0.00%	163	163	100.00%	0	0.00%

All interns from LU are from a science background. The project does not accept and or place Arts students from the University.

2 SKILLS ATTAINED

The education system in the country is considered to be more theoretical than practical which is not readily applicable current competitive world of work. Therefore, the project seeks to bridge that gap by offering interns/graduates with an opportunity to obtain these skills. In doing so the project has a target of skilling over 2000 graduates from various BIs Interns by placing them in companies for a 3-Month internship with respect to their fields of study. The major aim of this is to help them acquire hands on practical skills, knowledge and experience in line with what they studied when at University.

With emphasis on the project objective of skilling over 2000 graduates, a tracer survey was conducted in December 2016 to collect data on the different variables for each intern i.e. Skills acquired during internship, Department/Section of work, Current status, overall rating of the UMA-HEST Internship among others. This would help us identify the nature of skills acquired, the nature of work the interns were engaged in during their internship among others. According to the tracer survey, interns were required to highlight at least three (3) skills either hard or soft that they were able to acquired.

LU has recommended a total 213 students since 2015 i.e. 50 in 2015 and 163 students in 2016 from both BSc. Public Health and Midwifery. The majority has been BSc. Midwifery students from the Department of Midwifery. With respect to the nature of these courses, internship is very fundamental as it builds and enhances their practical knowledge and hands on skills from the direct contact with their patients as opposed to only studying the theory in the classroom. With the support of the UMA - HEST project, these students have gotten an opportunity to train at different health centers, district local governments among others hence uplifting the practical skills in their medical field.

After their internship, a tracer survey was conducted to find out the specific skills (both soft and hard) that the interns acquired during their internship. This tracer survey was carried out on the student population of 163 that was recommended in 2016, which resulted in a 100% response rate, hence having a full representation from the two courses.

In this particular chapter, the emphasis has been put on the different skills the interns acquired. The different range of skill sets the interns acquired were classified into two major categories i.e. soft and hard (functional) skills. Below is a brief description of the various subcategories of skills under major categories.

MAJOR CATEGORY	DESCRIPTION
SOFT SKILLS	Are personality traits, attitudes, habits and behaviours you display when working with others.
SUB CATEGORIES	DESCRIPTION
Report Writing	Drafting documents containing information organized in narrative, graphic or tabular forms prepared on ad hoc, periodic or regular basis as required
Communication	Effectively conveying messages at a workplace using both verbal speech and other methods so that it is clearly and successfully delivered.
Team Work	Cooperation at a work place using their individual skills and providing constructive feedback despite any personal conflict between individuals
Interpersonal	Skills used by a person to interact with others properly i.e. the ability of an intern to get along with others while getting the job done
Leadership	The ability of the interns to set direction, build an inspiring vision, create something new among others
Management	Ability of the intern to improve performance, delegation of tasks, and managing other people, training others/ developing their skills and knowledge.
Confidence	The ability of the intern to surely feel that he/she is equal to the task at hand.

MAJOR CATEGORY	DESCRIPTION		
HARD SKILLS	Are specific, teachable abilities that can be defined and		
	measured, such math, use of software among others.		
SUB CATEGORIES	DESCRIPTION		
Maternal and Child Health	Maternal and child health care services are a whole broad		
Care	category on services rendered to mother and the child before and		
	after her delivery of her new born child. The maternal health care		
	services consists of post-natal health care services which entail		
	everything done to a mother after her time of delivery ,		
	immunization services and days which are scheduled for the new		
	born child after which an immunization calendar is given to the		
	mother.		
Antenatal Care	These services are basically for pregnant mothers who go to		
	health centers to receive a whole package on antenatal such as		
	health education on what type of family planning services they		
	can opt for in order to guide them as they plan for their families		
	and the number of children they can manage exclusively.		
Health Administration	Health administration or healthcare administration is the field		
	relating to leadership, management, and administration of		
	hospitals, hospital networks, health care systems, and public		
	health systems.		
Water and Sanitation	This is the process of cleaning and purifying water so it is safe		
	for use.		
Environmental Health	Environmental health consists of preventing or controlling		
	disease, injury, and disability related to the interactions between		
	people and their environment.		

2.1 NATURE OF SKILLS

2.1.1 Soft Skills

Under the soft skills category, Problem solving, Adaptability and Critical thinking skills were all expressed during internship, as interns had to solve problems on a daily basis from their patients, environmental problems caused by waste among others.

Soft skills are very critical skills that all health workers need to have. This is mainly attributed to their type of work that involves effectively listening and communicating to patients, relating with your patients on a personal level, and excellent leadership skills among others are sort to be very important for any health worker.

12.46 % of the total responses by the interns were recorded in the category of soft skills. As presented in table 9 below, most of the respondents (45.71% of the total respondents under this category) were able to improve on their communication skills at the work place as they effective interacted with their patients or workmates during their internship. This was followed by interpersonal skills (37.14%) as the interns emphasized that solutions are easily identified through interactions with workmates. Leadership skills were also ranked third as the interns were always engaged in regular diagnosis of different cases and also had to give good and proper advice to their patients among others.

Majority of the female interns (51.43%) acquired and also ranked soft skills as being important as compared to the males at the work place.

Table 9: proportion of respondents per skill attained

NATURE OF SKILLS ACQUIRED - SOFT SKILLS				
Nature of Skills	% Of Total Respondents	% Of Male Respondents	% Of Female Respondents	
Communication	45.71%	20.00%	25.71%	
Interpersonal	37.14%	20.00%	17.14%	
Leadership	17.14%	8.57%	8.57%	
Report Writing	0.00%	0.00%	0.00%	
Team Work	0.00%	0.00%	0.00%	
Management	0.00%	0.00%	0.00%	
Confidence	0.00%	0.00%	0.00%	
Total	100.00%	48.57%	51.43%	

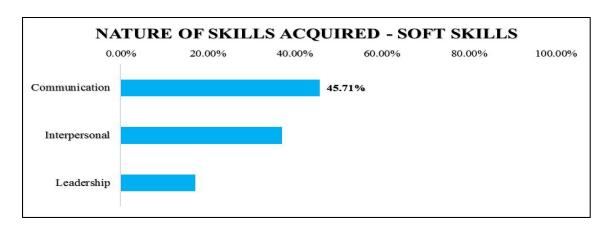


Figure 6: Nature of skills attached

In summary, communication and interpersonal skills were ranked most important in the category by the interns during the UMA-HEST internship. Report writing, Team work, confidence and management were not emphasized to have been acquired.

2.1.2 Hard Skills

The 163 interns who were placed in over 40 health centers or district local governments were able to translate the theory taught into practical hence enabling them improve and also acquire different skills during their internship. As for any health worker, diagnosis should be dependent on excellent hard/functional skills and practical knowledge of the health worker.

According to the tracer survey done, 87.54% of the total responses by the interns were recorded for this particular category. As tabulated below, majority of the respondents (69.92% of the total respondents under this category) emphasized that they either acquired or improve on their practical knowledge and skills in Maternal and Antenatal care at the health centers were they had their internship. Here the interns at the health centers also informed mothers about nutrition and feeding during this crucial time of pregnancy and other related factors such as personal hygiene in order to reduce the risk of acquiring infections such as candidiasis for the case of Antenatal care. For Maternal care on the other hand, interns also conducted taking of blood samples from the mothers to ascertain the zero-status of the mothers as to whether she is HIV positive or negative, appropriate diagnosis is made followed by initiation or drug prescription on ART (anti-retroviral therapy) for

positive mothers. Sometimes screening for cancers such as cervical cancers is done for women of reproductive ages and diagnosis is made and health education is given to avoid transmission of the virus to their partners conclusively.

The interns also highlighted that they acquired knowledge on how Health Administration (17.07%) at the district level is done as interns were operated in the environmental health section, biostatistics section, disease surveillance section any others parts of the office. Water and Sanitation and Environmental Health skills and knowledge were also acquired by the interns during as shown in the table below i.e. 7.32% and 5.69% of the total respondents acquired these skills as this was done by health inspectors accompanied by interns to monitor waste management, landfill inspection, collecting water samples from water sources for tests at the district labs among others.

Majority of the interns who acquired these skills were female (56.5%) as compared to the males during internship, which was mainly attributed to the higher percentage of female interns placed.

Table 10: Nature of Hard skills acquired

NATURE OF SKILLS ACQUIRED - HARD SKILLS				
Nature of Skills	% Of Total Respondents	% Of Male Respondents	% Of Female Respondents	
Maternal And Child Health Care	34.96%	13.41%	21.54%	
Antenatal Care	34.96%	12.20%	22.76%	
Health Administration	17.07%	6.10%	1.22%	
Water And Sanitation	7.32%	4.07%	1.63%	
Environmental Health	5.69%	7.72%	9.35%	
Total	100.00%	43.50%	56.50%	

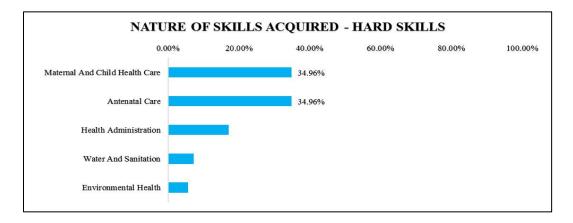


Figure 7: Nature of Hard skills acquired

In summary, Maternal and Antenatal care knowledge and practical skills were being acquired by majority of the interns which was mainly attributed to majority of interns placed to have been BSc. Midwifery students.

2.1.2.1 On Course Basis

As tabulated below, majority of the interns who acquired Maternal and Antenatal care were BSc in Midwifery interns which is mainly attributed to the fact that these are their core areas of study in their discipline. On the other hand, majority of the interns who acquired Water and Sanitation, Environmental Health and Health Administration knowledge and skills were BSc in Public Health as these make part of their core areas of study.

Table 11: Nature of skills acquired on course basis

NATURE OF SKILLS ACQUIRED - HARD SKILLS				
Nature of Skills	% of Total Respondents	% of BSc. Public Health Respondents	% of BSc. Midwifery Respondents	
Maternal And Child Health Care	34.96%	1.22%	33.74%	
Antenatal Care	34.96%	0.41%	34.55%	
Health Administration	17.07%	7.72%	9.35%	
Water And Sanitation	7.32%	6.91%	0.41%	
Environmental Health	5.69%	4.88%	0.81%	
Total	100.00%	21.14%	78.86%	

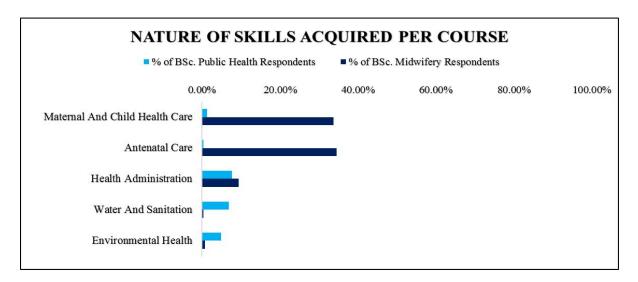


Figure 8: Nature of skills acquired on course basis

In summary, majority of responses on the skills acquired were from BSc in Midwifery interns which was attributed to having placed majority from this discipline.

3 STATUS OF INTERNS AFTER COMPLETION OF THEIR 3 MONTHS INTERNSHIP

Lira university recommended 50 and 163 Health science interns in both 2015 and 2016 respectively. Interns were recommended from two courses namely BSc. Public health and BSc. Midwifery from the department of public health and department of midwifery respectively. They trained for a period of 6 weeks at the different health centers in the month of June. A tracer Survey conducted on all the interns placed for 2015 and 2016 found out that all the interns are still at the university.

Therefore, there are no cases of retained, employed or interns who started up their own businesses.

4 CHALLENGES AND MITIGATIONS

Challenge	Mitigation	
Wrong bank details:	Students are encouraged to register more than	
students still provided wrong accounts	once to ensure the correct details plus a brief	
details. This has led to delays in the	talk through the financial steps on how they	
disbursement of their stipends	receive their money so as they ca take it on	
	seriously	
Delay in submission of reports:	Daily calls and reminders:	
Some students take long to submit their	The HEST Team starts reminding the students	
reports. this makes the whole financial	immediately after they have started their	
process.	internship to send their reports and monthly	
	targets.	
Still continuing students:	The University should also start capturing and	
Students were still continuing with their	involving those who have completed their	
university requisites which made it had for	degrees.	
health centers and hospitals that wanted to		
retain them as workers.		
Wrong contact details;	Through the training, the Team will emphasize	
	the use of correct contact information.	

some interns provided information that was	
later proven to be wrong. These could not	
easily be contacted. This limited both the	
tracer survey and other activities	
concerning payments, etc.	
Short Training Period:	The University should increase the training
Interns training for only 6 weeks as	period if they are to gain maximum impact
compared to the 3 months by other BIs.	from the internship.
This period is considered to be short for	
interns to learn more.	

5 CONCLUSION

One hundred and sixty-three (163) students where trained in 2016 (69 males and 94 females) a number higher than the previous year which was at 50. All the 163 students recommended by the university where placed in different health centers and hospitals across the northern region by the university responsible officers.

A tracer survey was conducted for all interns (69 males and 94 females) placed in 2016. No intern was retained or given extension since they are still continuing students which is not the case of with other universities like Kyambogo and Makerere University. Students have acquired different skills ranging from soft skills like communication, interpersonal relations and many others to hands on and practical skills in addition to other medical skills.

The project has not experienced any disturbing challenges that it cannot solve except those tables above. We therefore hope that the project is progressing positively and we are to work harder in 2017 in ensuring that interns get skilled.

The placement target for 2017 will largely depend on the total number of students available for placement. This is attributed to the fact that the interns train for half the period as compared to other BI in addition to the fact that they are still continuing students.

Higher Education being the heart of Education as well as the core of National and Development Systems, the UMA-HEST Project team would like to thank the Government of Uganda (GOU), Funders (AfDB), University Coordinators, Employers, Interns and other stakeholders at large who have played a tremendous role in the implementation of the HEST Project.

6. ANNEX

Annex 1: HCs Support SUPERVISION MINUTES

Minutes for the meetings with Health centres in the Northern Region



UGANDA MANUFACTURESRS ASSOCIATION – HEIGHER EDUCATION SCIENCE AND TECHNOLOGY (UMA-HEST) PROJECT

SUPPORT SUPERVISION IN THE NORTHERN REGION

Theme: "Skilling Uganda through Internship and skills Development"

7TH to 10th December, 2016

Schedule for the supervision						
Date	Time	Organization	ganization Time			
		Day 1				
7th-12-2016			3:00 PM	Lira University		
		Day 2				
8th-12-2016	08:00-10:00am	Amolata Health Centre IV	2:30-3:30 pm	Amach Health Centre IV		
	12:00 -02:00pm	Dokolo Health Centre IV	3:00-4:00 pm	Lira Regional Hospital		
		Day 3				
9th-12-2016	08:00-10:00am	Aduku Health Centre IV	2:30-3:30 pm	Aboke Health Centre IV		
	12:00 -02:00pm	Apac Health Centre IV	3:00-4:00 pm	Ogur Health Centre IV		
	Day 4					
10th-12-2016	08:00-10:00am	Anyeke Health Centre IV	2:30-3:30 pm	Gulu University		
	12:00 -02:00pm	Aber Health Centre IV	3:00-4:00 pm			

Members Present					
No.	Name	Organization	Position	Contact	Email Address
1	Dr. Otim Tom Charles	Lira University	Faculty Dean	0772-439057	otimtomc@gmail.com
2	Arach Anna Agnes	Lira University	Lecturer/HOD	0772-064111	arachaa2000@yahoo.com
3	Sula K. Nkuutu	UMA-HEST	ITO	0782-302591	kiyuba2001@yahoo.com
4	Ssenyondwa Allan	UMA-HEST	IPO	0784-358054	allansse@yahoo.com
5	Kibekityo Gilbert	UMA-HEST	LU UMA	0703-842870	kibekityogilbert@gmail.com
			Coordinator		



Figure 9: The UMA-HEST Team at Lira University.

From Right; Dr. Otim Tom Charles, Arach Anna Agnes, Sula K. Nkuutu and Ssenyondwa Allan

Agenda for the meeting Prayer Welcoming Remarks from Chairman Discussions and Reactions Conclusion and Supervision Map



Figure 10: UMA-HEST Team at LU



No.	Issue	Concerns	Reaction
1	Prayer		
2	Communication from Chairman	The Chairman (Dr. Otim Tom Charles) welcomed the UMA-HEST Team to the University. Thanked the team for the work that is being done to improve the skills of the future employees of the nation. Thanked the Project for the opportunity given to Lira University (LU) to still be part of the project given the fact that it is no longer part of Gulu University as a constituent college. Getting feedback from the employers through the support supervision is one of the key aspects and reason why interns are taken to these companies. Universities can therefore improve on their program, Curriculum and other different activities where possible. LU is in support of this activity and grateful to UMA for being part of the movement.	
		Unlike the First supervision that was conducted last year, more Health centre like Amulata took on interns and supervision will highly be appreciated. A total of 163 interns were placed in 10 Health centers around the region with each taking on an average of 5-10 interns	

		The interns trained for a period of 5 weeks as per University schedule. This is to be adjusted with time such that these interns are able to train up to 10 weeks	
3	Discussion	ITO: thanked the Chairman for the introduction and the welcome. The	
		UMA-HEST Team will spend 4 days for supervision in all the Health Centres as per the communication with the University coordinator.	
		During the previous supervision, there were some pertinent questions that the team did not ask supervisors at the different Health centers that where of great importance in assessing the impact of the project; how the project has help in the daily activities at the HC; the difference with and without the project. These issues need to be addressed this time during the supervision hence calling for a longer supervision duration as compared to the first one.	
		The forth coming supervision (2017) will also be conducted when the interns are still in the field so as to critically assess the importance and impact that the project has created from both the supervisors and intern's point of view	
		ITO; Why is it there a difference in the internship period for medical interns say MUST (11 weeks) and LU (5-6 weeks)	HOD; this is because interns form Lira University still have some activities at the University therefore the training is carried out during the recess semester. However, this is to be revised in such a way that all activities will be undertaken during the semester giving the students more time to undertake their training

The total number of interns from Lira University has been increasing over the last period; from 50 in 2015 to 163 in 2016; this calls for curiosity on the number of interns that the University will recommend in 2017

The total number of interns to be recommended from LU will be communicated on time to ensure proper planning and accountability.

Schedule for the supervision					
Date	Time	Organization	Break	Time	Organization
		Day 1			
7th-12-2016				3:00 pm	Lira University
		Day 2			
8th-12-2016	08:00-10:00am	Amolatar Health Centre IV		2:30-3:30 pm	Amach Health Centre IV
	12:00 -02:00pm	Dokolo Health Centre IV		3:00-4:00 pm	Lira Regional Hospital
		Day 3			
9th-12-2016	08:00-10:00am	Aduku Health Centre IV		2:30-3:30 pm	Aboke Health Centre IV
	12:00 -02:00pm	Apac Health Centre IV		3:00-4:00 pm	Ogur Health Centre IV
Day 4					
10th-12-2016	08:00-10:00am	Anyeke Health Centre IV		2:30-3:30 pm	
	12:00 -02:00pm	Aber Health Centre IV		3:00-4:00 pm	

Day Two

		Day 2		
8th-12-2016	08:00-10:00am	Amolatar Health Centre IV	2:30-3:30 pm	Amach Health Centre IV
	12:00 -02:00pm	Dokolo Health Centre IV	3:00-4:00 pm	Lira Regional Hospital

Amolatar Health Centre IV

1						
M:	No.	Name	Organization	Position	Contact	Email Address
	1	Okao Alfred	Amolatar HC IV	DTLS	0774-877542	-
	2	Dr. Odong Jimmy	Amolatar HC IV	Medical Officer	0782-799110	jimodongo.jimmy08@gmail.com
	3	Akello Jackline	Lira University	Tech. Midwifery	0777-213236	ajackie209@gmail.com
	4	Sula K. Nkuutu	UMA-HEST	ITO	0782-302591	kiyuba2001@yahoo.com
	5	Ssenyondwa Allan	UMA-HEST	IPO	0784-358054	allansse@yahoo.com
	6	Kibekityo Gilbert	UMA-HEST	LU UMA Coordinator	0703-842870	kibekityogilbert@gmail.com
		District Head Office				
	7	Atim Harriet Miriam	DHO's Office	Senior Nursing Officer	0783-193222	atimmiriam@gmail.com



This is one of the health centres within which interns from Lira University (LU) were taken for the training. The health centre is located in Amolatar District.





Figure 11: UMA-HEST Team at Amolatar HC IV

Left Figure (From Right): Ssenyondwa Allan, Dr. Odong Jimmy, Okao Alfred, Sula K. Nkuutu and Akello Jackline; form Right (Right Figure); Kibekityo Gilbert and Atim Harriet Miriam at the District Head Office.

No.	Issue Concerns		Reaction
1	Remarks	Akello Jackline introduced the group to the hospital and stated the reason as "support supervision for the interns that were placed the hospital for their field training."	
2	<u> </u>	IPO; What is the impact of placement of the interns in the hospital. Do they impact/influence the operations in both the hospital and the society? Or is it an added cost to the hospital!	When interns are at the facility, Very many patients "FLOOD" the hospital from the different parts of the district. Many patients are referred to the health centre for treatment since the community deliberates that the number of doctors in the hospital has increased. These interns increase the labour force hence making the work at the hospital smoother and more efficient. Some patients stay at home yet they are actually sick. This is mainly because of their perception that they will not find doctors at the hospital and
			even when they think of coming, the number of patients are very many. These end up not attended to. When interns are available however, this is different as patients keep on coming and get attended to.
			Internship duration; the interns spend too little time at
			the hospital (5 Weeks) yet the hospital still need the labour.
			If the University could adjust
			its curricular and send these interns for three months a year on a quarterly basis, it would be appreciated more by both the
			community and the hospital.

3	Age strata	Which particular age group usually comes to the hospital during the period when interns are training at the HC?	Youths are the most handled since most of the pregnant mothers fall within the category.
4	Time Efficiency	Is there a difference in waiting time for the patients whenever the interns are around and when they are not?	Whenever the interns are not at the facility, the total time taken by an individual to be attended to is on average 3 hours. However, during the time when the interns are at the facility, an average of 2 hours or less are taken to work upon every single patient. This is attributed to the specialization where one individual handles a particular section and not all the sections.
			Also to note, whenever interns are at the HC, work is done faster and doctors get enough time to rest since by 5:00 PM all work is accomplished.
5	Challenges faced	Are there any challenges faced in general; either with the interns or any other aspect?	Whenever the interns are at the HC, there are many patients at the facility; this makes the space limited to handle all the numbers. The drugs get used up before the anticipated period of time. This needs to be worked upon either by increasing the supply of drugs or reducing the period which drugs are supplied to the HC
	G 111		DIIO ORR TI
6	Social impact of the project	What has been the impact of the project to the community and HC at large	where oriented and placed in different departments of the HC under the different supervisors. One of the greatest impacts is that the waiting time by the patients was lessened. This is due to the increase in the labour force and efficiency of the interns, Doctors tend to leave the facility earlier than usual.

Dokolo Heath Centre IV



No.	Name	Organization	Position	Contact	Email Address
1	Kadito Esther Loi	Dokolo HC IV	M. O	0772-663313	-
2	Omara Tonny	Dokolo HC IV	AIMO	0772-361718	omaratonny123@gmail.com
3	Akello Jackline	Lira University	Tech. Midwifery	0777-213236	ajackie209@gmail.com
4	Sula K. Nkuutu	UMA-HEST	ITO	0782-302591	kiyuba2001@yahoo.com
5	Ssenyondwa Allan	UMA-HEST	IPO	0784-358054	allansse@yahoo.com
6	Kibekityo Gilbert	UMA-HEST	LU UMA Coordinator	0703-842870	kibekityogilbert@gmail.com



Figure 12: UMA-HEST Team at Dokolo HC IV

From right; Akello Jackline, Kadito Esther Loi, Omara Tonny, Ssenyondwa Allan and Nkuutu Sula.

No.	Issue	Concerns	Reaction
1	Remarks	Akello Jackline introduced the group to the hospital and stated the reason as "support supervision for the interns that were placed the hospital for their field training."	
2	Impact of the interns on the community	IPO; What is the social impact of placement of the interns in the hospital. Do they change the operations in both the hospital and the society, or is it an added cost to the hospital?	The placement is very important and helpful to the hospital. This is because they help in the daily activities as the HC does not have enough staff to carry on all the required and necessary activities. The interns know exactly what to do and therefore they do not require close monitoring and supervision. The interns were also very hard working and seemed to like what they were doing at the Health Centre The Medical staff are not enough at the facility but there is usually one or two interns placed in the different departments during the time when they are at the facility,.
3	With and Without interns	What are the facts to show that there is a difference in activities at the HC when interns are around and when they are not?	Whenever the interns are at the facility, the patients are served faster and better. Usually when interns are not at the HC, the time taken by the staff to serve the patients is longer and doctors are usually in a hurry to serve the next patient. The number of patients suffering from diseases like Malaria, ordinary cough, flu and Pneumonia (in children as a result of not covering the children) increases during the period when interns are training. This is attributed to the community awareness of the presence of interns and their increased care and services rendered. This is not the case when the interns are not available.

4	Equipment	Does the HC have enough equipment that is used by the interns during the training at the facility?	The equipment is available, clear instructions and procedures are always available for the interns. Each intern is accountable for the proper use of these equipment.
5	Challenges faced	Are there any challenges faced in general? Either with the interns or any other aspect	Human Resources at the Hospital are not enough (Only one Pharmacist is available yet more are required). The medical supplies are not enough for the stipulated period. There is shortage of administrators at the HC Intermittent electricity labor and refrigerators for sensitive medical stock are lacking
			More Midwives should be trained and recruited into the HC

Amach Health Centre IV



No.	Name	Organization	Position	Contact	Email Address
1	Ojobi Grace	Amach HC IV	EMW	0772-099977	ojobigrace@gmail.com
2	Akello Jackline	Lira University	Tech. Midwifery	0777-213236	ajackie209@gmail.com
3	Sula K. Nkuutu	UMA-HEST	ITO	0782-302591	kiyuba2001@yahoo.com
4	Ssenyondwa Allan	UMA-HEST	IPO	0784-358054	allansse@yahoo.com
5	Kibekityo Gilbert	UMA-HEST	LU UMA Coordinator	0703-842870	kibekityogilbert@gmail.com



Figure 13: UMA- HEST Team at Amach Health Centre IV
From left; Ojobi Grace, Ssenyondwa Allan, Nkuutu Sula and Akello Jackline

Issue	Concerns	Reaction
Remarks	Akello Jackline introduced the group to the hospital and stated the reason as "support supervision for the interns that were placed the hospital for their field training."	
Impact of the interns on the community	IPO; What is the impact of placement of the interns in the hospital. Do they change the operations in both the hospital and the society? Or is it an added cost to the hospital!	The interns were specific on the skills required as compared to the first cohort placed at the facility. This was of great help since all of them were placed in different departments of the hospital. Amach is one of the HCs with many patients in all sections. With interns around, handling these patients became much more easy. Now that the interns are not around, the facility is faced with human resource problems.
Challenges faced		The Biggest challenge that the HC has is the labour force and energy (Electricity). The interns should also come with their own equipment such as gloves. This is because the funds at the HC are not enough to cater for all the requirements of the increased labour force.
		Universities should teach local languages to the health workers from other regions to reduce the problem of language barriers between the interns and the patients who cannot understand English.

Lira Regional Referral Hospital



	Members Present					
No.	Name	Organization	Position	Contact	Email Address	
1	Odongmei Margaret	Lira RRH	PNO	0772-664716	odmargret@gmail.com	
2	Acan Ruth Lucy	Lira RRH	SNO	0782-928729	ruthcan16@yahoo.com	
3	Akello Jackline	Lira University	Tech. Midwifery	0777-213236	ajackie209@gmail.com	
4	Sula K. Nkuutu	UMA-HEST	ITO	0782-302591	kiyuba2001@yahoo.com	
5	Ssenyondwa Allan	UMA-HEST	IPO	0784-358054	allansse@yahoo.com	
6	Kibekityo Gilbert	UMA-HEST	LU UMA Coordinator	0703-842870	kibekityogilbert@gmail.com	



Figure 14: UMA-HEST Team at Lira RRH

from Left; Acan Ruth Lucy, Odongmei Margaret, Ssenyondwa Allan, Akello Jackline and Nkuutu Sula

No.	Issue	Concerns	Reaction
1	Remarks	Akello Jackline introduced the group to the hospital and stated the reason as "support supervision for the interns that were placed the hospital for their field training."	
2	Importance of interns and internship	Has the whole process of placing interns at the facility been helpful to the facility and the community or it was a waste of funds?	Dr. Odongmei Thanked the team for the overall process especially the placement and payment of interns with some stipend at the end of each month. The stipend helped the interns in the daily activities for example movements and lunch. Internship is a critical part of the curricular since it provides the students with hands-on experience in addition to what they have learnt from the University. In the field, the interns are introduced to new equipment which the university may not possess. The students have been part and well integrated with the staff at the hospital and these were deployed just like any other staff. They helped in the daily activities
			at the facility hence increasing the efficiency in service delivery.
3	Addition to internship	What should be added to the current internship program in order to make it better?	Some people join University after they have enough experience in the field already but are still treated like others. For example; if someone has a diploma in Midwifery and experience of over 20 years, this individual does not require the same internship since he/she already has knowledge of whatever is practiced. The program should be arranged in such a way that all those who already have the required experience in that particular field are not considered for the one-year internship. This is currently not in place

4	Specific training	According to the requirements of the Hospital, in which field should the Universities focus on more than the others?	The Universities are training more than enough doctors in all fields. The problem is with funding. The government should increase funds such that the Health centres are able to recruit more people.
5	Challenges	Are there any challenges faced in general, either with the interns or any other aspect?	The Medical and Health programs should not be part of the Ministry of Education but rather under the Ministry of Health. This is intended towards maximum service, understanding the programs and learning.

		Day 3		
9th-12-2016	08:00-10:00am	Aduku Health Centre IV	2:30-3:30 pm	Aboke Health Centre IV
	12:00 -02:00pm	Apac Health Centre IV	3:00-4:00 pm	Ogur Health Centre IV

Aduku Health Centre IV



No.	Name	Organization	Position	Contact	Email Address
1	Dr. Ssemugenyi Augustine	Aduku HC IV	SMO I/C	0756-525017	augusse@gmail.com
2	Akello Jackline	Lira University	Tech. Midwifery	0777-213236	ajackie209@gmail.com
3	Sula K. Nkuutu	UMA-HEST	ITO	0782-302591	kiyuba2001@yahoo.com
4	Ssenyondwa Allan	UMA-HEST	IPO	0784-358054	allansse@yahoo.com
5	Kibekityo Gilbert	UMA-HEST	LU UMA	0703-842870	kibekityogilbert@gmail.com
			Coordinator		



Figure 15: UMA HEST Team at Aduku HC IV.
From Right, Dr. Ssemugenyi Augustine, Ssenyondwa Allan, Sula Nkuutu and Akello Jackline

No.	Issue	Concerns	Reaction
1	Remarks	Akello Jackline introduced the group to the hospital and stated the reason as "support supervision for the interns that were placed the hospital for their field training."	
2	Importance of internship	What is the major importance of interns and the whole internship program to both the people of Aduku and Aduku Health Centre IV	The interns and the whole internship program is so beneficial to the community and the hospital, however, these interns do not stay long enough to learn and also cause a greater impact. The interns only train for 6 weeks of which they have 2 weeks for induction and settling in. The Interns from Lira University were well coordinated and they carried out all the required activities on time.

			The interns followed the guidelines as indicated by the different supervisors and medical officers. The HC has a problem of staffing which calls for night shifts due to the work load; this is eliminated whenever the interns are at the facility. The work load is divided between the interns and these are only supervised to ensure that the guidelines are followed. Case management is also made faster
			at the Health Centre The pressure on the few staff at the Health centre is reduced
3	Challenges	Are there any challenges faced in general, either with the interns or any other aspect?	The interns report to work late and this is attributed to lack of accommodation in and around the facility. These have to travel from wherever they rent to the facility which is quite a distance The HC lacks enough staff especially when these interns are not at the facility There is also shortage in the
			accommodations for the doctors and other staff. Due to long distances from their places of residence. The accommodation facilities available where planed in 2002 when the turnover was very low. Out of the 48 staff, only 10 are accommodated at the facility Low funds to the HC
			The Health Centre also lacks some personnel like Monitoring and Evaluation among others The facility also lacks proper records management.

Apac Hospital



Members Present

No.	Name	Organization	Position	Contact	Email Address
1	Loote Prassede	Apac Hospital	SNO/Ag. NO	0781-813839	looteprossede@gmail.com
2	Onuku Joseph	Apac Hospital	SHO	0772-908872	onukjoseph@gmail.com
3	Akello Jackline	Lira University	Tech. Midwifery	0777-213236	ajackie209@gmail.com
4	Sula K. Nkuutu	UMA-HEST	ITO	0782-302591	kiyuba2001@yahoo.com
5	Ssenyondwa Allan	UMA-HEST	IPO	0784-358054	allansse@yahoo.com
6	Kibekityo Gilbert	UMA-HEST	LU UMA Coordinator	0703-842870	kibekityogilbert@gmail.com





Figure 16: UMA HEST Team at Apac Hospital

From Left, Akello Jackline, Loote Prassede, Ssenyondwa Allan and Nkuutu Sula; Second Figure; Onuku Joseph (Seated)

No.	Issue	Concerns	Reaction
1	Remarks	Akello Jackline introduced the group to the hospital and stated the reason as "support supervision for the interns that were placed at the hospital for their field training."	
2	Importance of internship	What is the major importance of interns and the whole internship program to both the people of Apac and Apac Hospital	Two groups of interns have been placed at the Hospital so-far from Lira University. These consist of at least 5 interns. These interns are committed and show willingness to work. They were exceptional students. The students were placed in different departments some of which include Female Wards, Out Patient Department (OPD) and Antenatal With the enthusiasm to learn, the interns have helped in the different departments which lack man power.
3	Challenges	Are there any challenges faced in general? Either with the interns or any other aspect	The Man power at the hospital is not enough in all the departments. More is needed than what is available.
			Equipment and Medical supplies are not enough as compared to the demand at the hospital
			The drugs supplied are also not enough to cater for the population and diseases in the region. According to the observations of patients, the most reported cases include; Malaria, Pneumonia and Diarrhea The students of Lira University stay shorter for internship as compared to those from other institutions. These should stay for at least 12 weeks.
			Electricity is yet another challenge. The Bill has been accumulating over time and currently at 219 Million, UMEME cut the connection.
			The funds provided to the hospital by the government are still too small as compared to the activities that need to be undertaken.

Aboke Health Centre IV



Members Present

No.	Name	Organization	Position	Contact	Email Address
1	Acen Anna Beatrice	Aboke HC IV	N/O MW	0772-582367	acenannabeatrice72@gmail.com
2	Akello Jackline	Lira University	Tech. Midwifery	0777-213236	ajackie209@gmail.com
3	Sula K. Nkuutu	UMA-HEST	ITO	0782-302591	kiyuba2001@yahoo.com
4	Ssenyondwa Allan	UMA-HEST	IPO	0784-358054	allansse@yahoo.com
5	Kibekityo Gilbert	UMA-HEST	LU UMA Coordinator	0703-842870	kibekityogilbert@gmail.com





Figure 17: UMA HEST Team at Aboke HC IV

From left; Ssenyondwa Allan, Acen Anna Beatrice, Akello Jackline and Nkuutu Sula

No.	Issue	Concerns	Reaction
1	Remarks	Akello Jackline introduced the group to the hospital and stated the reason as "support supervision for the interns that were placed at the hospital for their field training."	
2	Importance of internship	What is the major importance of interns and the whole internship program to both the people of Aboke and Aboke HC IV	The interns where categorized according to the different objectives of their field work/ internship. These were deployed in different departments accordingly. The interns handled all cases accordingly and were only supervised in some areas were cases were very risky.
3	Challenges	Are there any challenges faced in general? either with the interns or any other aspect?	Students should rent near the facility in order to reach the facility in time. Some of the cases are handled at night in the Theatre during which the interns are not at the facility hence missing out on some aspects of the training.
			Short time of training; these interns stay at the facility for a very short period of time. These interns should at least stay for 12 weeks for maximum training in all aspect. These interns can then be rotated in all the different departments of the hospital Some equipment like disposable gloves
			run out earlier than expected. This makes practical and other activities difficult.
			the Health centre is also faced with the problem of manpower. One person handling more than two departments. This limits the process of learning since the supervisors are always busy.

Ogur Health Centre IV



No.	Name	Organization	Position	Contact	Email Address
1	Ayo Tonny	Ogur HC IV	Stores Assistant	0775-172772	tonnyayo82@gmail.com
2	Akello Jackline	Lira University	Tech. Midwifery	0777-213236	ajackie209@gmail.com
3	Sula K. Nkuutu	UMA-HEST	ITO	0782-302591	kiyuba2001@yahoo.com
4	Ssenyondwa Allan	UMA-HEST	IPO	0784-358054	allansse@yahoo.com
5	Kibekityo Gilbert	UMA-HEST	LU UMA Coordinator	0703-842870	kibekityogilbert@gmail.com



Figure 18: UMA HEST Team at Ogur Health Centre IV

No.	Issue	Concerns	Reaction
1	Remarks	Akello Jackline introduced the group to the hospital and stated the reason as "support supervision for the interns that were placed at the hospital for their field training."	
2	Importance of internship	What is the major importance of interns and the whole internship program to both the people of Ogur and Ogur HC IV?	The interns were placed under supervision of different Doctors and other Staff. There was an improvement in the efficiency of serving the patients at the hospital. The time taken by the patients at the facility greatly reduced. This is attributed to the increase in man power. The interns were allocated different cases which were handled and completed
3	Challenges	Are there any challenges faced in general? Either with the interns or any other aspect	responsibly. the bill for Utilities like electricity increases whenever the interns are at the facility. Whenever the interns' training period is over, the HC is faced with the problem of man power. The interns stay for a short period. During this time, what is learnt is limited.

Anyeke Health Centre IV



N	0.	Name	Organization	Position	Contact	Email Address
	1	Owani Joseph	Anyeke HC IV	PHDO	0782-464982	owanij@gmail.com
	2	Akello Jackline	Lira University	Tech. Midwifery	0777-213236	ajackie209@gmail.com
	3	Sula K. Nkuutu	UMA-HEST	ITO	0782-302591	kiyuba2001@yahoo.com
	4	Ssenyondwa Allan	UMA-HEST	IPO	0784-358054	allansse@yahoo.com
	5	Kibekityo Gilbert	UMA-HEST	LU UMA	0703-842870	kibekityogilbert@gmail.com
				Coordinator		



Figure 19: UMA HEST Team a Anyeke HC IV

No.	Issue	Concerns	Reaction
1	Remarks	Akello Jackline introduced the group to the hospital and stated the reason as "support supervision for the interns that were placed at the hospital for their field training."	

2	Importance of internship	What is the major importance of interns and the whole internship program to both the people of Anyeke and Anyeke HC IV	The interns from Lira University have been placed at the facility in different groups for 3 years now. These interns have been very helpful in the daily operations at the facility. these include; ANC, YCC Maternity Wards among others. The interns are deployed in all section of the facility. These were educated and tested beyond their usual objectives and this was so helpful to these interns. Handling of particular cases became easier at the facility; especially the malaria cases The interns also helped in the sensitization activities in the different parts of the district. These activities covered knowledge on how to avoid particular diseases Interns are so motivated to do most of the work. This in turn results fast handling of patients and cases at the HC As a result, these help in the accomplishment of different activities
3	Challenges	Are there any challenges faced in general? Either with the interns or any other aspect	Low staffing levels at the facility Drugs are not enough in relation to the population and patients handled and period Electricity is also another problem at the facility

Other Companies Visited include

Aber Hospital



Table 12: List of HCs and interns Supervised

S/N	Name	Sex	Contact	Health Centre And Location
1.	Mutesi Angella	F	0750-828820	
	Daphine		angelladaaphinemutesi@gma	Group I: Dokolo HC IV Dokolo District
			<u>il.com</u>	
			(Chairperson)	Group I: Dokolo HC IV Dokolo District
2.	Opio Jorem	M	0774-194292	Group I: Dokolo HC IV Dokolo District
			joseopio37@gmail.com	Group I: Dokolo HC IV Dokolo District
			(Vice Chairperson)	Group I: Dokolo HC IV Dokolo District
3.	Kwikiriza Rogers	M	0772-068182	Group I: Dokolo HC IV Dokolo District
4.	Lotimong Esther	F	0777-299130	Group I: Dokolo HC IV Dokolo District
5.	Adong Susan Sharon	F	0777-192464	Group I: Dokolo HC IV Dokolo District
6.	Driciru Irene	F	0783-381382	Group I: Dokolo HC IV Dokolo District
7.	Aciro Ketty	F	0782-834666	Group II: Aboke HC IV Kole District
	Okello		(Chairperson)	Group II: Aboke HC IV Kole District
8.	Atuhairwe	M	0772-009425	Group II: Aboke HC IV Kole District
	Michael		Atu2mic@gmail.com	Group II: Aboke HC IV Kole District
			(Vice Chairperson)	Group II: Aboke HC IV Kole District
9.	Okori Felex	M		Group II: Aboke HC IV Kole District
10.	Amanya Daphine	F		Group II: Aboke HC IV Kole District
11.	Ondoa Francisca Drasi	F		Group II: Aboke HC IV Kole District



12.	Okot Joel	M	0777-203139	Group III: Aduku HC IV Apac District
	OROC BOO!	1,1	(Chairperson)	Group III: Aduku HC IV Apac District
13.	Angom Doreen	F	0783-700364	Group III: Aduku HC IV Apac District
13.	7 mgom Borcen	1	(Vice Chairperson)	Group III: Aduku HC IV Apac District
14.	Nambozo Brenda	F	0785-068404, 0751-147176	Group III: Aduku HC IV Apac District
1-7-	1 amoozo Brenda	1	0703 000404, 0731 147170	Group III. Addiku II.e IV Apac District
15.	Chelogoi Martin	M	0775-032844, 0785-026926	Group III: Aduku HC IV Apac District
16.	Kansiime	F	0772-072743, 0750-650133	Group III: Aduku HC IV Apac District
17	Evelyne	N	0792 421070	Corres W. Aussales H/C W Ossess District
17.	Kafuta Eric	M	0782-431079	Group IV: Anyeke H/C IV Oyam District
10	A ' C 1	Г	(Chairperson)	Group IV: Anyeke H/C IV Oyam District
18.	Acio Carolyn	F	0774-726212	Group IV: Anyeke H/C IV Oyam District
			(Vice Chairperson)	Group IV: Anyeke H/C IV Oyam District
19.	Omong Morish	M	0775-659634, 0706-049062	Group IV: Anyeke H/C IV Oyam District
20.	Alubi Susan	F	0751-737482	Group IV: Anyeke H/C IV Oyam District
20.	Aluoi Susaii	1.	0731-737402	Gloup IV. Anyeke II/C IV Gyani District
21.	Nabbale Florence	F	0772-617397	Group IV: Anyeke H/C IV Oyam District
22.	Ogo Bruce	M	0772-617397	Group IV: Anyeke H/C IV Oyam District
22	TZ: . I	Г	0702 2005 (7/0754 419 (0)	C WALLE VIO D'A'A
23.	Kingoina Jacinta Mwango (Sr.)	F	0782-209567/0754-418606	Group V: Aber Hospital- Oyam District
24	_	3.4	(Chairperson)	Group V: Aber Hospital- Oyam District
24.	Oduti Moses	M	0392-619769	Group V: Aber Hospital- Oyam District
		3.5	(Vice Chairperson)	Group V: Aber Hospital- Oyam District
25.	Ochaya Alex	M	0781-453362	Group V: Aber Hospital- Oyam District
26.	Acham Martha	F	-	Group V: Aber Hospital- Oyam District
				5555p - 155555 5555p - 5 y 1115 - 5 1115 - 5
27.	Amadria Alice	F	0789-481092	Group V: Aber Hospital- Oyam District
28.	Akumu Agnes	F	0772-960881	Group V: Aber Hospital- Oyam District
29.	Nafula Patience	F	0775-936001, 0706-522468	Group VI: Amach H/C IV –Lira District
47.	Ann Maria	1	octaviusrosselin@gmail.com	Group VI: Amach H/C IV –Lira District
	7 IIII IVIUIIU		(Chairperson)	Group VI: Amach H/C IV –Lira District
30.	Obeny Jacki	F	0774-325132	Group VI: Amach H/C IV –Lira District
30.	Patience	1,		
	1 attened		jackieobeny@gmail.com	Group VI: Amach H/C IV – Lira District
21	Ailei Com-1-	D	(Vice Chairperson)	Group VI: Amach H/C IV – Lira District
31.	Aiki Sarah	F	0777-189450	Group VI: Amach H/C IV –Lira District
32.	Ogang Andrew		0782-394945	Group VI: Amach H/C IV –Lira District
	Sang Inition		0,02 3,1,13	Croup vi. rimach iz C i v Elia Bistict



33.	Ababiku Wilma	M	0772-279519	Group VI: Amach H/C IV –Lira District
34.	Owiny Michael	M	0782-673022	Group VII: Ogur H/C IV Lira District
	•		(Chairperson)	Group VII: Ogur H/C IV Lira District
35.	Akello Harriet	F	0778-602023	Group VII: Ogur H/C IV Lira District
			(Vice Chairperson)	Group VII: Ogur H/C IV Lira District
36.	Apio Jennifer	F	0774-560275	Group VII: Ogur H/C IV Lira District
37.	Damba Ivan	M	0781-967235	Group VII: Ogur H/C IV Lira District
38.	Ayikoru Jackline	F	0776-921784	Group VII: Ogur H/C IV Lira District
39.	Wani Solomon	M	0784-229511, 0700-322868	Group VIII: Apac Hospital Apac District
			solomon.wani2015@gmail.c om	Group VIII: Apac Hospital Apac District
			(Chairperson)	Group VIII: Apac Hospital Apac District
40.	Akurut Hellen	F	0776-945239, 0752-945237	Group VIII: Apac Hospital Apac District
			hellenakurut7@gmail.com	Group VIII: Apac Hospital Apac District
			(Vice Chairperson)	Group VIII: Apac Hospital Apac District
41.	Ekung Emmanuel	M	0787-583629	Group VIII: Apac Hospital Apac District
42.	Akello Patricia	F	0777-301184	Group VIII: Apac Hospital Apac District
43.	Kebirungi Violet	F	0752-748678	Group VIII: Apac Hospital Apac District
44.	Akuku James	M	0773-232903	Group IX: Amaloatar HC IV Amolatar District
			(Chairperson)	Group IX: Amaloatar HC IV Amolatar District
45.	Acio Susan	F	0788-839295	Group IX: Amaloatar HC IV Amolatar District
			(Vice Chairperson)	Group IX: Amaloatar HC IV Amolatar District
46.	Omara Julius Daniel	M	0777-111118	Group IX: Amaloatar HC IV Amolatar District
47.	Aluka Mary	F	0778-962460	Group IX: Amaloatar HC IV Amolatar District
48.	Namususwa Sarah	F	0775-529002	Group IX: Amaloatar HC IV Amolatar District
49.	Akite Sandra Sindrella	F	0783-775787	Group IX: Amaloatar HC IV Amolatar District
				Group IX: Amaloatar HC IV Amolatar District
50.	Obua Francis	M	0782-876819	Group X: Lira Regional Referral Hospital Lira District

			(Chairperson)	Group X: Lira Regional Referral Hospital Lira District
51.	Namakula Joweria	F	0774-945671, 0701-945671	Group X: Lira Regional Referral Hospital Lira District
			(Vice Chairperson)	Group X: Lira Regional Referral Hospital Lira District
52.	Achan Hellen	F	0752-482078	Group X: Lira Regional Referral Hospital Lira District
53.	Napeyok Rosemary	F	0782-764793	Group X: Lira Regional Referral Hospital Lira District
54.	Adania Jesca	F	-	Group X: Lira Regional Referral Hospital Lira District
55.	Okumu Josephine	F	0788-401815	Group X: Lira Regional Referral Hospital Lira District
56.	Akello Susan	F		Group X: Lira Regional Referral Hospital Lira District
57.	Akello Stella	F	0785-644026	Group X: Lira Regional Referral Hospital Lira District

List of interns recommended in 2016

No	SURNAME	FIRST NAME	SEX	COURSE (BSC.)	COMPANY	DEPARTMENT OF WORK	SKILLS ACQUIRED DURING HEST INTERNSHIP
1	Nakyazze	Monicah	F	Midwifery	Jerusalem School Of Nursing And Midwifery	Pharmacology	Training Skills
2	Balibali	Lydia	F	Midwifery	Good Samaritan Nursing And Midwifery School	Micro-Biology	Service Delivery, Training Skill, Management
3	Atim	Miria	F	Midwifery	Soroti School Of Nursing	Midwifery	Teaching, Administration, Interpersonal Skills
4	Babirye	Agnes	F	Midwifery	Soroti School Of Comprehensive Nursing	Nursing And Midwifery.	Teaching Skills, Communication, Management Skills
5	Okumu	Josephine	F	Midwifery	Lira Regional Referral Hospital	Midwifery	Antenatal Care, Administration, Treating Children, Administering Drugs
6	Nakiria	Getrude Heddy	F	Midwifery	Lira Regional Referral Hospital	Healthy	Family Planning, Antenatal Care, To Perform Child Delivery
7	Nafula	Patience Ann Maria	F	Midwifery	Aledtong District Local Gov't	Outpatient, Inpatient, Maternity, Antenatal	Immunization, Counselling Pregnant Mothers, Record Keeping
8	Namususwa	Sarah	F	Midwifery	Amurata Health Centre 4	Antenatal	Treating Pregnancy Mothers, To Perform Child Delivery
9	Obeny	Jackie Patience	F	Midwifery	Aledtong District Local Gov'T	Midwifery, Nursing, Antenatal	Prescribing Drugs, Educating Mothers, Antenatal
10	Akello	Harriet	F	Midwifery	Moyo District Health Office	Midwifery	Antenatal Care Basically
11	Kingoina	Jacinta	F	Midwifery	Apelo Hospital	Antenatal	How To Treat Patients, Antenatal Care, Administration Of Drugs
12	Nawil	Mary Elizabeth	F	Midwifery	Lira Regional Referral Hospital	Maternity	Diagnosing Critical Emergency, Management, Treating Of Complicated And Uncomplicated
13	Okwir	Denis	M	Public Health	Lira Hospital	Healthy	Sanitation, Healthy Monitoring, Maternal Care
14	Awor	Betty Agnes	F	Midwifery	Jerusalem School Of Nursing And Midwifery	Medical	Administration Of Drugs, Antenatal Care



15	Aciro	Semmy	F	Midwifery	Lira Regional Referral Hospital	Antenatal, Intensive	Management, Dealing With Emergencies,
13	Aciro	Margret	'	whaviiciy	Lifa Negional Neterral Hospital	Care Unit	ivianagement, Dealing with Emergencies,
16	Enyang	Jolly Joe	M	Midwifery	Lira Regional Referral Hospital	Maternity	Child Delivery, Care Of Pregnant Mothers, Antenatal
17	Nambozo	Brendah	F	Midwifery	Aduku Health Centre 4	Antenatal	Child Delivery, Immunization Of The Babies, Administering Drugs
18	Norene	Lameck Gard	М	Midwifery	King James Nursing And Midwifery School	Medical	Teaching Skills, Planning, Communication Skills
19	Nambozo	Rose Mary	F	Midwifery	Lira Regional Referral Hospital	Antenatal And Maternity	Treating Pregnancy Mothers, Counselling And Guidance Of Aids Patience
20	Aciro Okello	Ketty	F	Midwifery	Aboke Health Centre 4	Outpatient Dep't	Assessing Pregnant Mothers, Examination Of Patients
21	Napeyok	Rose Mary	F	Midwifery	Lira Regional Referral Hospital	Antenatal And Maternity	Antenatal Care
22	Amongi	Christine	F	Midwifery	Lira Regional Referral Hospital	Midwifery	Antenatal Care, Family Planning, Treating Children
23	Lakot	Irene	F	Public Health	Lira Municipal Council	Healthy	Healthy Inspection, Management, Sanitation
24	Chelogoi	Martin	М	Midwifery	Aduku Health Centre 4	Outpatient Dep't	Immunization, Counselling Pregnant Mothers, Record Keeping
25	Ogang	Andrew	M	Midwifery	Aledtong District Local Gov't	Maternity	Making Records, Health Education Talk, Taking Blood Samples
26	Oming	Joseph	F	Midwifery	Lira School Of Comprehensive Nursing	Midwifery	Antenatal, Clinical Instruction, Child Delivery
27	Ouni	Moses	M	Midwifery	Lira Regional Referral Hospital	Midwifery	Delivering Mothers, Keeping Hospital Records, Family Planning And Cancer Screening Skills
28	Omara	Godfrey	М	Public Health	Good Samaritan Nursing And Midwifery School	Medical	Interpersonal Skills, Teaching Skills, Report Writing
29	Madira	Emanuel	М	Midwifery	Lira Regional Referral Hospital	Nursing	Examining A New Born Baby, Conducting Child Delivery,
30	Acirucan	Polline	F	Midwifery	Lira School Of Comprehensive Nursing	Midwifery	Management, Training Skills, Leadership Skills, Publication



31	Akello	Molly	F	Midwifery	Lira Regional Referral Hospital	Midwifery	Post Abortion Care, Treatment Pregnancy Mother
32	Oriokot	David	M	Public Health	Lira Hospital	Healthy	Monitoring And Evaluation, Inspection, Sanitation
33	Oyugi	Joel	М	Public Health	Lira Hospital	Healthy	Administrative, Inspection, Waste Disposal Management
34	Koli	Francisca	F	Public Health	Lira Nursing School	Public Healthy	Teaching, Administration, Interpersonal Skills
35	Ayo	Hellen Grace	F	Midwifery	Lira Regional Referral Hospital	Obestritic / Maternity	Communication, Time Management, Antenatal
36	Mutesi	Angella Daphine	F	Midwifery	Dokolo Health Centre 4	Nursing	Cannulating, Identifying Pregnancy Risks, Running Lab Tests
37	Otongo	Tonny	M	BSc. Public Health	Lira District Healthy Office	Healthy	Management, Training Skills
38	Owiny	Micheal	M	Midwifery	Moyo District Health Office	Midwifery	Communication, Time Management, Patient Interaction, Dispensing
39	Omong	Morish	М	Midwifery	Anyeke Health Centre 4		
40	Olwit	Tonny	M	Public Health	Lira Regional Referral Hospital		
41	Okumu	Allan Isaac	M	Midwifery	Uganda Christian Institute School Of Nursing& Midwifery	Health Science	Planning Skills, Management Skills
42	Otai	James	М	Public Health	Good Samaritan Nursing And Midwifery School	Teaching	Planning Skills, Communication Skills, Interpersonal Skills
43	Awati	Jillian	F	Midwifery	Florence School Of Nursing And Midwifery	Teaching	How To Make A Lesson Plan, How Handle Difficult Students, Scheme Of Work
44	Acio	Susan	F	Midwifery	Amurata Health Centre 4	Inpatient Antenatal, Out Patient	Diagnosing Skills, Records & Assessment Skills
45	Kafuta	Eric	М	Midwifery	Anyeke Health Centre 4	Antenatal, Inpatient, Outpatient	Assessment Skills
46	Oyaro	Godfrey	М	Midwifery	Aboke Health Centre 4	Children's Ward	Diagnosing Skills, Family Planning Skills, Counselling
47	Awino Anyese	Margret	F	Midwifery	Lira University	Midwifery	



48	Apio	Jenifer	F	Midwifery	Ogur Health Centre 4	Antenatal, Inpatient, Outpatient	Health Assessment Skills, Risks Associated With Pregnancy, How To Put On A Cannula
49	Angwec	Rachel Rufina	F	Midwifery	Lira University	Antenatal, Inpatient, Outpatient	Health Assessment Skills
50	Aluka	Mary	F	Midwifery	Amurata Health Centre 4	Antenatal, Inpatient, Outpatient	Examination Of Mothers, Mixing Drugs, Health Education
51	Kansiime	Evelyn	F	Midwifery	Aduku Health Centre 4	Antenatal, Inpatient, Outpatient	Cannulating, Physical General Examination Skills
52	Namutebi	Deborah Andrinar	F	Midwifery	Soroti School Of Nursing	Medical & Surgical Nursing	Counselling, Communication, Teaching, Nursing Skills
53	Akello	Stella	F	Midwifery	Lira Regional Referral Hospital	Midwifery, Medical	Administering Drugs, Dressing Wounds, Health Education Skills
54	Namakula	Joweria	F	Midwifery	Lira Regional Referral Hospital	Health	Examination Of Mothers For Antenatal
55	Amadrio	Alice	F	Midwifery	Aber Hospital	Antenatal, Inpatient, Outpatient	General Nursing Skills
56	Ayikoru	Jackline	F	Midwifery	Gulu Health Centre 4	Inpatient Antenatal, Out Patient	General Nursing Skills
57	lga	Moses	М	Public Health	Kalongo School Of Nursing And Midwifery, Agago		
58	Alum	Sheila Marion	F	Midwifery	St Mary's Midwifery School	Teaching	Lesson Planning Skills, Management Of Class Skills
59	Obua	Francis	M	Midwifery	Lira Regional Referral Hospital	Antenatal	Assessment Of Pregnant Mothers , Examining, Screening
60	Kebirungi	Violet	F	Midwifery	Apach General Hospital	Antenatal, Inpatient, Outpatient	Cannulating, Physical General Assessment, Communication Skills
61	Mutaawe	Jonathan	M	Public Health	Lira Municipal Council	Public Health	Inspection, Vector Control, Hotel Inspection Skills
62	Atuhairwe	Micheal	М	Midwifery	Aboke Health Centre 4	Antenatal, Inpatient, Outpatient	Assessing Patients
63	Ogwal	Solomon	M	Public Health	King James Nursing And Midwifery School	Office Of The DHO	Community Sanitation Skills, Water And Sanitation Skills
64	Lama	Felix	М	Public Health	Oyam District Health Office	Health Department	Community Mobilisation, Health Education



65	Amony	Lydia	F	Public Health	District Health Office Kitgum	Health Department	Health Education, Communication Skills, Office Work Skills
66	Edolu	Daniel	M	Public Health	District Health Office Kitgum	Health Department	Management, Communication, Health Education Skills
67	Nasike	Patricia	F	Public Health	Soroti District Local Government	Health Department	Public Speaking, Report Writing, Presentation Skills
68	Nakato Sessimba	Rehema	F	Public Health	Soroti District Local Government	Public Health Department	Communication, Observation, Data Analysis, Health Education Skills
69	Nansubuga	Rahma	F	Public Health	District Health Office Kitgum		
70	Acaye	Emmanuel	M	Public Health	District Health Office Gulu	Public Health	Office Work Skills, Health Education Skills, Waste Management Skills
71	Okeny	Louis	M	Public Health	Amach Health Center 4		
72	Bill	Francis	M	Public Health	Moyo District Health Office	Environmental Health & Sanitation	Community Sanitation Skills
73	Aceng	Dilish Linda	F	Public Health	King James Nursing And Midwifery School	Health Department	General Nursing Skills
74	Ogosso	Eric	М	Public Health	Apach Health District Office	DHO's Office	Health Education, Health Systems Management
75	Acili	Ambrose	M	Public Health	Gulu University	Public Health	Heart Break Investigation, Analysing And Interpreting Data
76	Aporo	Solomon	M	Public Health	Amach Health Center 4		
77	Omara	Paul	M	Public Health	Aledtong District Local Gov'T	Health Department	Sanitation, Disease Surveillance, Prevention Of Diseases
78	Ojok	Eger Philemon	M	Public Health	Lira Comprehensive Nursing School	Health Department	Public Speaking, Health Education
79	Okello	Tonny	М	Public Health	Lira Municipal Council	Health Department	Management And Administration, School Health Education, Inspection
80	Moro	Vincent	М	Public Health	Uganda Christian Institute Of Comprehesive Nursing And Midwifery Lira	Public Health	Teaching Skills, Scheme Of Work Development,



81	Ogang	Brian Hivan	М	Public Health	Lira School Of Nursing And	Teaching	Teaching Skills, Interpersonal, Scheme Of
82	Omara	Moses	M	Public Health	Midwifery Lira Comprehensive Nursing School	Teaching	Work Development, Interact With Students, Conducting As Class, Training Skills
83	Omara	Samfan Thomas	М	Public Health	Apac District Health Centre 4	Medical	Managing Health Disabilities, Immunisation, Administrative And Computer Skills
84	Wabomba	James	М	BSc. Public Health	Bududa Hospital	DHO Office	Health Education, Data Collection, Water Sanitation, Health Inspection
85	Achan	Hellen	F	Midwifery	Lira District Healthy Office	Medical	Calculating The Expected Date Of Delivery For An Expectant Mother, Delivering A Woman, Theatre Skills
86	Opio	Jorem	M	Midwifery	Dokolo Health Centre 4	Antenatal	Checking The Fatal Heart, Health Education, Injection, Immunisation, Wound Dressing, Identifying Expectant Mothers At Risk.
87	Akuku	James	M	Midwifery	Amurata Health Centre 4	Inpatient	Physical Examination, Putting Cannulas, Diagnosing, Recording In Registers, Dispensing Skills
88	Ondoa	Franciska Drasi	M	Midwifery	Aboke Health Centre 4	Antenatal, OPD, Inpatient	General Nursing Procedures, Cannulation, Injecting
89	Damba	Ivan	М	Midwifery	Ogur Health Centre 4	Midwifery	Antenatal Skills, Surgical Skills
90	Okori	Felex	M	Midwifery	Amurata Health Centre 4	Maternity	Deliver A Woman, Recording Information For The Patient, Dispensing
91	Okot	Joel	M	Midwifery	Gulu University	Nursing And Midwifery.	Nursing Skills, Cannulation, Drug Administration, Taking Of Patient History
92	Adania	Jesca	F	Midwifery	Lira Regional Referral Hospital	Surgical Male Ward	Dispensing, Dressing Wounds, Drug Administration
93	Akurut	Hellen	F	Midwifery	Apach General Hospital	Antenatal	Examining A Mother, Injecting, Cannulation,
94	Akello	Patricia	F	Midwifery	Apach General Hospital	Midwifery	Nursing Procedures, Managing Patients,
95	Nabbaale	Florence	F	Midwifery	Anyeke Health Centre 4	OPD	Diagnosis, Examining A Patient, Family Planning, Cannulation
96	Alubi	Susan	F	Midwifery	Anyeke Health Centre 4	Antenatal, OPD	General Drug Administration, Examining A Pregnant A Mother, Assessing Patient
97	Ababiku	Wilma	F	Midwifery	Amach Health Center 4		



98	Acham	Martha	F	Midwifery	Aber Hospital	Antenatal, OPD	Antenatal Skills, Get Patient History, Computer Skills
99	Amanya	Daphine	F	Midwifery	Aboke Health Centre 4	Midwifery	Observation Skills, Counselling Pregnant Mothers, Assessing Patients
10 0	Aiki	Sarah	F	Midwifery	Aledtong District Local Gov't	Inpatient, OPD And Antenatal	Health Talk To Pregnant Mothers And Identify Those At Risk, Deliver A Woman, Family Planning Methods, Diagnosis, Dispensing
10 1	Akello	Susan	F	Midwifery	Lira Main Hospital	OPD, Surgical, Medicine	Cannulation, Wound Dressing, Dispensing, Diagnosing, Antenatal Skills
10 2	Kwikiriza	Rogers	М	Midwifery	Dokolo Health Centre 4	Maternity	Managing Medical Data, Immunisation, Assisting Pregnant Mothers, Antenatal Skills
10 3	Ekung	Emmanuel	M	Midwifery	Soroti School Of Comprehensive Nursing	Antenatal, OPD	Medical Prescription, Health Education, Determining The Gestation Period, Expected Date Of Delivery, Entering Data.
10 4	Angom	Doreen	F	Midwifery	Aduku Health Centre 4		
10 5	Acio	Carolyn	F	Midwifery	Anyeke Health Centre 4	OPD, General Medical Ward, Antenatal	General Check-Up Of Pregnant T Mother, Delivering A Mother, General Nursing Skills, Dispensing
10 6	Ochaya	Alex	М	Midwifery	Aber Hospital	OPD, Inpatient	Classifying Patients, Cannulation, Administering Drugs And Other Nursing Procedures
10 7	Adong	Susan Sharon	F	Midwifery	Dokolo Health Centre 4	OPD And Inpatient	Diagnosis, Drug Administration, Admitting And Referring Patients
10 8	Ogo	Bruce	M	Midwifery	Anyeke Health Centre 4	OPD, Inpatient, Antenatal	Using A Casetal, Recording Medical Information, Classifying Patients, Deliver A Woman
10 9	Omara	Julius Daniel	M	Midwifery	Amolatar Health Centre 4	OPD, Inpatient	Cannulation, Wound Dressing, Dispensing
11 0	Lotimong	Esther	F	Midwifery	Dokolo Health Centre 4		



11	Driciru	Irene	F	Midwifery	Dokolo Health Centre 4	OPD, General Ward	Receiving Patient, Discharging, General
1						And Children's Ward.	Nursing Skills, Antenatal Care
11 2	Oduti	Moses	M	Midwifery	Aber Hospital		
11 3	Akite	Sandra Sindrella	F	Midwifery	Soroti School Of Comprehesive Nursing		Class Conduct, Developing Lesson Plan, Training Skills
11 4	Akumu	Agness	F	Midwifery	Aber Hospital		
11 5	Wani	Solomon	М	Midwifery	Apac General Hospital	OPD, antenatal and female ward.	assessing pregnant women and other patients, cannulation, physical examination of patients, laboratory skills and injecting
11 6	Acio	Grace	F	Midwifery	Lira Comprehensive Nursing School	Training	Preparing a scheme Of Work, Lesson Plan, Training Skills And Controlling A Class
11 7	Adiyo	Filder Loyce	F	Midwifery	Jerusalem School Of Nursing And Midwifery	Midwife	Teaching Practice
11 8	Ahuura	John	M	Midwifery	Jerusalem School Of Nursing And Midwifery	Teaching	Making A Scheme Of Work, Lesson Plan, Conducting Lessons
11 9	Akello	Florence Jessie	F	Midwifery	Lira School Of Comprehensive Nursing		
12 0	Amumpaire	Peterson	M	Midwifery	Dokolo Health Centre 4	Antenatal	Assessing A Pregnant Woman, Checking For Fatal Growth, Delivering A Woman.
12 1	Asonyu	Charles	М	Midwifery	Soroti School Of Comprehensive Nursing	Teaching	Making A Scheme Of Work, Lesson Plan, Conducting Lessons, Class Control
12 2	Ategeka	Emmanuel	M	Midwifery	Lira University	Nursing And Midwifery.	Communication Skills, Interpersonal, Problem Solving Skills
12 3	Wakello	Dorcus	F	Midwifery	King James Nursing And Midwifery School	Teaching	Team Work, Teaching Methods, Planning
12 4	Berochan	Harriet	F	Midwifery	Jerusalem School Of Nursing And Midwifery	Teaching	Lesson Planning Skills, Management Of Class Skills,
12 5	Beyunga	Louis	М	Midwifery	Florence School Of Nursing And Midwifery	Teaching, Midwifery	Teaching Skills, Communication, Management Skills



12 6	ljorea	Fiona Andira	F	Midwifery	St Mary's Midwifery School	Teaching	Competence, Confidence, Knowledge In Areas Of Plan Of Work
12 7	Kamoga	Bashiir	M	Midwifery	Jerusalem School Of Nursing And Midwifery		7 Head St. Hall St. Well.
12 8	Manari	Harriet	F	Midwifery	Good Samaritan Nursing And Midwifery School	Teaching	Teaching Skills, Communication, Interpersonal Skills
12 9	Muhindo	Miriam	F	Midwifery	Kalongo School Of Nursing And Midwifery, Agago		
13 0	Murungi	Monica	F	Midwifery	King James Nursing And Midwifery School	Midwifery	Delivering Pregnant Mothers, Caring For New Born, Counselling
13 1	Nakate	Alice	F	Midwifery	Good Samaritan Nursing And Midwifery School	Midwifery And Nursing	Teaching, Management, Interpersonal Skills
13 2	Namonywe	Annah	F	Midwifery	Nightingale School Of Nursing And Midwifery , Apac		
13 3	Ocen Misaki	Wesley	М	Midwifery	Good Samaritan School Of Nursing And Midwifery, Lira		
13 4	Odimim	Joseph	M	Midwifery	Soroti School Of Comprehesive Nursing	Teaching	Time Management, Interpersonal, Confidence
13 5	Ogwang Oyom	George	M	Midwifery	Uganda Christian Insititute School Of Nursing And Midwifery	Teaching	Competence, Team Work, Problem Solving
13 6	Okaba	Alice	F	Midwifery	Kalongo School Of Nursing And Midwifery, Agago		
13 7	Okiror Okello	Emmanuel	М	Midwifery	Lira School Of Nursing And Midwifery	Teaching	Lesson Planning, Teaching, Report Writing
13 8	Kia	Nancy	F	Midwifery	Uganda Christian Insititute School Of Nursing And Midwifery		
13 9	Tino	Jane Frances	F	Midwifery	Soroti School Of Comprehesive Nursing		
14 0	Achayo	Vicky Caroline	F	Midwifery	Lira Regional Referral Hospital	Antenatal, Family Planning, Maternity	Delivering Mothers, Examining New Born Babies, Diagnosing, Counselling Mothers

14 1	Odong	Geoffrey	М	Midwifery	Lira Regional Referral Hospital		
14 2	Obok	Patrick	М	Midwifery	Lira Regional Referral Hospital	Maternity	Delivering Mothers, Caring For Pregnant Mothers, Reporting
14 3	lgipu	Janet Christine	F	Midwifery	Lira Regional Referral Hospital	Antenatal, Family Planning, Maternity	Delivering Mothers, Examining Babies, Counselling Mothers
14 4	Amaro	Eunice	F	Midwifery	Lira Regional Referral Hospital		
14 5	Odyek S.	Jane	F	Midwifery	Lira Regional Referral Hospital	Antenatal, Family Planning, Maternity	Treating Patients, Delivering Pregnant Mothers, Cancer Screening, Family Planning Counselling
14 6	Auma	Pamela Shilla	F	Midwifery	Lira Regional Referral Hospital	Antenatal, Family Planning, Maternity	Delivering Mothers, Caring For New Born, Family Planning Skills
14 7	Akongo	Sarah	F	Midwifery	Jerusalem School Of Nursing And Midwifery	Teaching	Teaching, Communication Skills
14 8	Achen	Barbara Kelly	F	Midwifery	Lira Regional Referral Hospital		
14 9	Zalwango	Shadiah Madinah	F	Midwifery	Lira Regional Referral Hospital		
15 0	Okello	Samuel	М	Midwifery	Lira Regional Referral Hospital	Midwifery	Delivering Pregnant Mothers, Caring For New Born Premature
15 1	Apio	Eunice	F	Midwifery	Lira Regional Referral Hospital	Midwifery And Nursing	Staff Management, Handling Patients, Nursing Process
15 2	Ebong	Doryn	F	Midwifery	Lira Regional Referral Hospital		
15 3	Asemo	Jane	F	Midwifery	Lira Regional Referral Hospital		
15 4	Awili	Rebecca	F	Midwifery	Lira Regional Referral Hospital	Antenatal, Family Planning, Maternity	Monitoring Mothers In Labour, Delivering Them, Educating Mothers
15 5	Namukwana	Beth	F	Midwifery	Lira Regional Referral Hospital	Obstetrics And Gynaecology	Monitoring Mothers In Labour, Delivering Them, Health Education
15 6	Aarakit	Veronica	F	Midwifery	Lira Regional Referral Hospital		

15 7	Odongo	Moses	M	Midwifery	Lira Regional Referral Hospital		
15 8	Masette Were	Luke Robert	М	Midwifery	Lira Regional Referral Hospital	Obstetrics And Gynaecology	Delivering Mothers, Utilisation Of Materials, Communication
15 9	Acen	Kellis Prisca	F	Midwifery	Lira Regional Referral Hospital	Midwifery	Conducting Child Delivery, Waste Disposal In Hospital, Interpersonal Skills
16 0	Atalyeba Tuhaise	Gladys	F	Midwifery	Lira Regional Referral Hospital	Maternity	Treating Pregnant Mothers, Family Planning, Antenatal Care
16 1	Otee	Isaac	M	Midwifery	Lira Regional Referral Hospital	Maternity	Family Planning, Antenatal Care, To Perform Child Delivery
16 2	Okaka Aremo	Isaac	М	Midwifery	Lira Regional Referral Hospital		
16 3	Akello	Caroline Engur Doris	F	Midwifery	Lira Regional Referral Hospital	Antenatal, Maternity	Comprehensive Care On Child And Maternal

Annex 3: Copy of the Intern Offer Letter



UGANDA MANUFACTURERS ASSOCIATION

Lugogo Show Grounds, P. O. Box 6966 Kampala, Tel : +256 414 221 034, +256 414 287 615, +256 312 278 823 Fax: +256 414 220 285 E-mail administration@uma.or.ug Website: www.uma.or.ug

Our Ref:

You

r Ref:	
Dear	
RE: OFFER TO PARTICIPATE IN UMA - HEST INTERNSHI	IP PROJECT
We are delighted to inform you in writing that you h participate in the UMA-HEST Internship Project. Havi institution to benefit from the Project and having attended you shall be posted to	ing been selected by your l a two days training at UMA as your hosunti
fulfilled as follows:	itions for your placement are

Your Obligations:

- 1. You will uphold the Intern Code of Conduct, out-lined herein.
 - a) Adhere to the rules and regulations of the company where you are placed. This includes all health and safety regulations.
 - b) Undertake and complete three months internship placement with the company.
 - c) Act professionally at all times, upholding the good name and integrity of the UMA - HEST Internship Project and the company where you are placed.
 - d) Maintain in confidence any information learnt about the activities and/or operations of the company and UMA -HEST Project during your placement.
 - e) Not, except as permitted by your Workplace Supervisor, carry out or be engaged in private business or practice that negatively affects your internship duties.

2. Hours of Work:

You will conform to the hours of work as stipulated by the company where you are placed i.e. 8:00am - 4:30pm with one hour for lunch. You may, from time to time, be required to work reasonable additional hours for which time off in lieu can be taken if approved by your Workplace Supervisor. You will be required to always sign the daily attendance register i.e. time of arrival and time of departure.

UMA - HEST Project will pay you a total stipend amounting to UGX 700,000/= net (seven hundred thousand shillings only). The Project will only deposit stipends to your Bank Account upon receiving at least 4 (four) weekly, quality, timely targets per month. Reports should be approved and signed by your Work Place Based Supervisor.

UMA Regional Office: JINJA: 47/49 Main Street, Jinja. E-mail: umaregionaloffice@gmail.com



Continuation

The installments shall be as follows:

Date	Item	Amount
30th Month 1	Insurance premium to be deducted	36,000/=
30 th Month 1	1 st Financial Disbursement	180,000/=
30th Month 2	2 nd Financial Disbursement	170,000/=
30th Month 3	3rd Financial Disbursement	160,000/=
30th Month 4	4th Financial Disbursement	154,000/=
	Total	700,000/=

Payment of any installment of the stipend will depend on the recommendation of your Workplace Supervisor, OR any other officer assigned that duty by the Host Company and approval by the UMA Internship Placement Officer or any other accredited official.

4. Reporting:

You will be reporting to the Workplace Supervisor who will be identified by the company. You will be required to provide quality and timely reports as per instructions of the reporting template found on the UMA Portal *hest.uma.or.ug*

5. Supervision:

The role of the Workplace Supervisor will be to provide ongoing feedback and leading performance reviews. He /she will work in the same department/section with you or be otherwise closely connected to your activities, as well as overseeing your day-to-day tasks. The feedback will be shared with all the stake holders of the UMA – HEST project.

6. Insurance:

Since Insurance was not catered for in the approved budget UMA-HEST project has identified an insurance service provider after consulting the funders. Signing this offer letter will give UMA-HEST Project lieu way to incorporate you in the insurance policy which will be provided to you outlining your coverage.

Please note that this offer does not constitute a contract of employment with UMA –HEST Project but is an offer to participate in our Internship Project. UMA - HEST Project will not provide any benefits or entitlements other than those outlined in this offer.

If you accept the above terms, sign the copy of this letter and return it to the undersigned before2017.

Yours sincerely

Uganda Manufacturers Association

Sebaggala M. Kigozi Executive Director

I	accept	the	appointment	under	the	giver
terms and conditions of service.			• •			U
Signed Date:			4			
Cc: Employer (Host Company)			3			



Annex 4: copy of the Introductory Letter

UGANDA MANUFACTURERS ASSOCIATION

Lugogo Show Grounds, P. O. Box 6966 Kampala, Tel: +256 414 221 034, +256 414 287 615, +256 312 278 823 Fax: +256 414 220 285 E-mail administration@uma.or.ug Website: www.uma.or.ug

Our Ref:	
Your Ref:	
Dear,	
RE: INTRODUCTION OF THIS INTERN TO YOUR COMPANY	
We thank you for accepting us to work with you in the UMA-HEST Internshi is to introduce to you a student of Internship Registration number	p Project. This of UMA HEST
UMA –HEST Project will support the intern with an amount of 700,000/= (sthousand shillings only) as stipend for three months in your organization. The payable in installments upon your signature of work done at your institution.	e stipends will
The intern will be attached to a Workplace Supervisor who will be identificated institution. The Workplace Supervisor will monitor the learning process and to UMA-HEST Project through an approved report template on the (hest.uma.or.ug)	l give feedback
Attached herewith are copies of a signed commitment letter for the stude. Plan indicating the schedule for disbursement of stipends. At least 4 weekly first month should be sent to the UMA-HEST web portal by the 15th Januthereafter monthly reports sent to same by the 30th date of the respectinternship.	targets for the uary 2016 and
Yours Sincerely, Uganda Manufacturers Association	
Sebaggala M. Kigozi Executive Director	
Cc: Student	

UMA Regional Office: JINJA: 47/49 Main Street, Jinja. E-mail: umaregionaloffice@gmail.com



Annex 5: Copy of the Final Monthly Report by the Intern.



Continuation

	onth Report		http://www.hest.uma.or.ug/print-reports/print-1st-month-report			
	Week	Target	Achievements	Challenges	Lessons Learnt	
	Week1	By the end of the week, I expect to cover the following as per the set timetable: 1. Introduction to community health. 2. Explain important concepts as used in community health. 3. Describing the history and theories of community health. 4. Explaining the natural history of a disease.	1. I introduced learners to community health and gave them the expectations of the course. 2. I explained important concepts used in community health and their relevance. 3. we discussed the natural history of a disease giving the relevant examples about a natural history of a disease. 4. I explained to the learners how communities evolved giving theories for the development of communities such as Gras' theory of economic change.	1. There were few students in class as it was the reporting week of students from holidays. 2the time allocated for the course unit was so little and more so in theaafternoon when learners are drowsy and tired. 3. There was a high rate of absenteeism from class especially by the boys.	1. How to manage inappropriate behavior in class. 2. How to give advice to students especially one concerning academics. 3. How to manage anxiety especially when addressing a large crowd of people.	
	Week2	As per the set timetable, by the end tof this week, I expect: 1. To introduce a new topic; introduction to nutrition and health. 2. To explain the sources and functions of proteins and carbohydrates both to individuals and to the community. 3. To classify the foodstuff and the nutrients. 4. To explain what a balanced diet is and its components.	1. A 30 minute evaluation test was given and i marked it. Results of the test were also given by Saturday. 2. I managed to introduce a new topic; nutriotion and health. 3. I explained to the learners the rationale of nutrition and good health both individually and communally. 4. I explained what a balanced diet is and gave the classification of nutrients and foodstuffs. 5. Absenteeism from class was handeled and curbed.	1. Supervisors from the university interrupted my lessons infringing on the time. 2. Some Classes were interrupted by hepatitis B vaccination activities. 3. School program such as reproductive team supposes to give a health talk also consumed some time for the lessons.	1. How to deal with misconduct of students while teaching. 2. How to evaluate and assess learners understanding of a given topic. 3. How to enforce displine in a student while maintaining a good relationship with the learner.	
2 of 3			Marie Control Sty		8/5/2016 4:44 PM	

Annex 6: UMA-HEST Internship Reporting Template



HIGHER EDUCATION SCIENCE AND TECHNOLOGY Internship Logbook

Month:



Lessons Learnt			
Lesson			
			•
Challenges			
Achievements			
		-	
arget	Y		

Supervisors Comment:Supervisors	Signature: