



**SCHOOL MEDICAL ASSESSMENT CAMP 1**  
**HELD AT PEACE MODERN PRIMARY SCHOOL,**  
**KAYABWE MPIGI DISTRICT**  
**12th to 13th August 2025**

**Uhai-SHIMS Project**  
**Activity Report**

**Prepared by:**  
**ILERAI Initiative**  
**September 2025**

## Table of Contents

<b>Acknowledgement</b> .....	3
<b>Executive summary</b> .....	4
<b>1. Background</b> .....	5
<b>2. Funding</b> .....	5
<b>3. Methodology/ Approach</b> .....	6
<b>4. Partnerships and mobilization.</b> .....	6
<b>5. Achievements and outputs</b> .....	7
<b>6. Lessons learnt</b> .....	11
<b>7. Challenges</b> .....	11
<b>8. Conclusion</b> .....	12
<b>9. Recommendations and Way forward</b> .....	12
<b>10. Annexes</b> .....	13

### CHARTS

<b>Chart 1:</b> Source: Uhai-SHIMS Medical Camp 1, Total Assessments.....	7
<b>Chart 2:</b> Source: Uhai-SHIMS Medical Camp 1, Vision Assessments .....	8
<b>Chart 3:</b> Source: Medical Camp 1, Laboratory Analysis .....	9
<b>Chart 4:</b> Source: Medical Camp 1, Department performance statistics .....	10

## **Acknowledgement**

ILERA-I extends its sincere appreciation to:

The administration, parents, and medical team of Peace Modern Primary School for their unwavering cooperation, mobilization efforts, and steadfast commitment throughout the planning and execution of the medical camp. We are deeply grateful to the medical professionals and service providers who generously contributed their time, skills, and expertise to ensure the camp's success. Special thanks go to the ILERA-I Directorate for their financial support, and to the project team for their exemplary coordination, dedication, and technical contributions during both the preparatory and implementation phases.

## **Executive summary**

From 12th to 13th August 2025, ILERAI Initiative successfully organized its first medical camp at Peace Modern Primary School in Kayabwe, Mpigi District. The camp was conducted under the ongoing Uhai-SHIMS pilot project, with the goal of collecting authentic and comprehensive health data for pupils to build reliable health profiles within the system.

The camp brought together a multidisciplinary medical team comprising clinicians, dentists, ophthalmologists, nurses, and laboratory technicians. These professionals worked in close collaboration with school staff, parents, and ILERAI's technical team. Although the camp targeted over 450 pupils, 238 pupils were fully assessed, along with 8 teachers and 10 parents. Despite not reaching the initial target due to scheduling constraints, the camp successfully generated accurate health records, identified health conditions requiring urgent intervention, and fostered collaboration among stakeholders. The exercise also strengthened linkages between the school, families, District Health Officers (DHO), and healthcare providers while raising awareness about preventive health practices.

This report presents the background, objectives, methodologies, outputs, lessons, challenges, and recommendations for future interventions.

## 1. Background

ILERA-I is implementing the Student Health Information Management System (SHIMS), branded as Uhai-SHIMS, across five schools in Mpigi and Wakiso Districts. The system is designed to strengthen health data collection, analysis, and use for evidence-based planning and interventions. However, one of the main challenges encountered during the piloting phase was the authenticity of student medical data provided by parents and schools. Much of this data was incomplete or not verified by medical professionals. To address this gap, ILERA-I found it necessary to conduct multidisciplinary medical camps in the piloting schools. The initial camp was held at Peace Modern Primary School to verify, update, and collect new student medical records. This exercise ensured accurate, data was integrated on the students profiles for better system functionality and service delivery.

The camp also aligned with ILERA-I's broader vision of improving healthcare service delivery in school environments, supporting learning outcomes, reliable data for policy makers, and promoting preventive healthcare interventions through technology-enabled solutions.

Overall objective was to collect authentic, comprehensive medical data for pupils of Peace Modern Primary School under the Uhai-SHIMS Project.

### **Specific Objectives:**

1. Collect medical data from over 450 pupils.
2. Collaborate with parents to provide consent and authentic health information for their children.
3. To build partnerships between ILERA-I, schools, parents, policy makers and healthcare service providers-for sustainable healthcare monitoring.

## 2. Funding

The medical assessment camp was totally internally financed, ILERA-I covered the core and professional fees, and operational costs including logistics, medical equipment, stationary, food and beverages. Professional services were solicited from Health facilities such as Basoga Medical Center Kayabwe, Nnindye Health Center III, and Kores Eye Care & Optics at an affordable cost as part of their corporate social responsibility. The school administration supported mobilization and provided facilitation such as venue preparation, utilities, and meals for all service providers.

This blended funding model demonstrated strong community ownership and partnership, ensuring that the camp was successfully executed despite resource limitations.

### 3. Methodology/ Approach

The primary target was to assess 450 pupils enrolled at Peace Modern Primary School. Additional assessments were extended to teachers and parents marking a total estimated target of 500. In terms of processes, mobilization was carried out by school staff and ILERA-I teams, registration desks captured pupil and parent's biodata before medical assessment, Pupils underwent a multi-stage assessment including vital measurements, general clinical review, dental, ophthalmology, and laboratory tests. Health education sessions were integrated to promote preventive care and awareness.

To align with Ugandan laws and regulating that guide medical camps conducted in school environments, parents and guardians and required to provide informed consent, in line with Uganda's Children's Act (Cap 59), and the UN Convention on the Rights of the Child (UNCRC). and guardians were engaged through meetings and written consent forms to ensure voluntary, informed, and documented participation. Confidentiality and respect for child dignity were upheld throughout the process.

### 4. Partnerships and mobilization.

The success of our first medical camp was made possible through the dedicated collaboration of healthcare professionals, school administrators, volunteers, and supporting organizations. As seen on the table below;

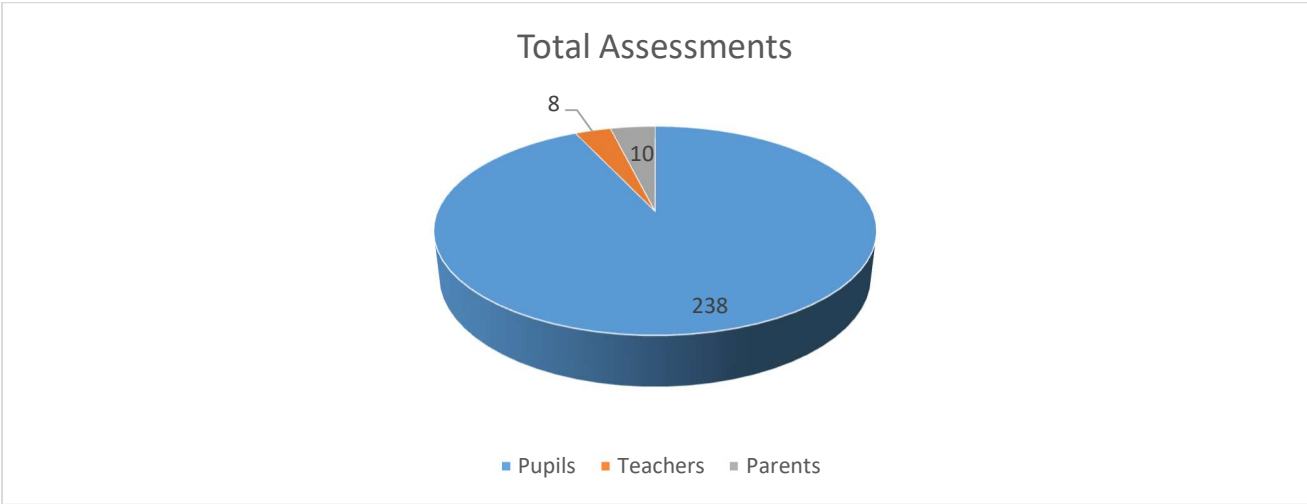
#### Health Workers & Service Providers Involved

Department	Personnel	Organization
Nurses	Mr. Begumisa Enock Ms. Nabatta Aminah Ms. Namajja Mercy	Peace Modern Primary School Nnindye health center III, Mpigi Lumuza High school, Mpigi
Dental	Dr. Lubwama Tonny	Basoga Medical Center, Kayabwe
Ophthalmology	Ms. Kiconco Evelyn, Mr. Damulira Peter (OCO)	Kores Eye Care & Optics, Kampala
Laboratory	Mr. Sseguya Ibrahim, Ms. Kyobutungi Scovia,	Basoga Medical Center Nnindye Health center III

Clinical Officers	Mr. Kusasira David, Mr. Matovu Julius	
School Staff	Ms. Batenga Faridah (Director) Mr. Ssentumbwe Harunah (Headteacher) Mr. Twesigye Winington Mr. Ofwono Walter Mr. Ochola Martin Mr Taremwa Naboth	Peace Modern Primary School, Kayabwe
ILERA-I	Mr. Ntege Simon Peter Mr. Tumuranye Nicholas Ms. Eva Nabbajja Mr. Patrick Umungeli Baryazahe	ILERA Initiative

## 5. Achievements and outputs

### I. General Medical & Clinical Department Statistics



*Chart 1: Source: Uhai-SHIMS Medical Camp 1, Total Assessments*

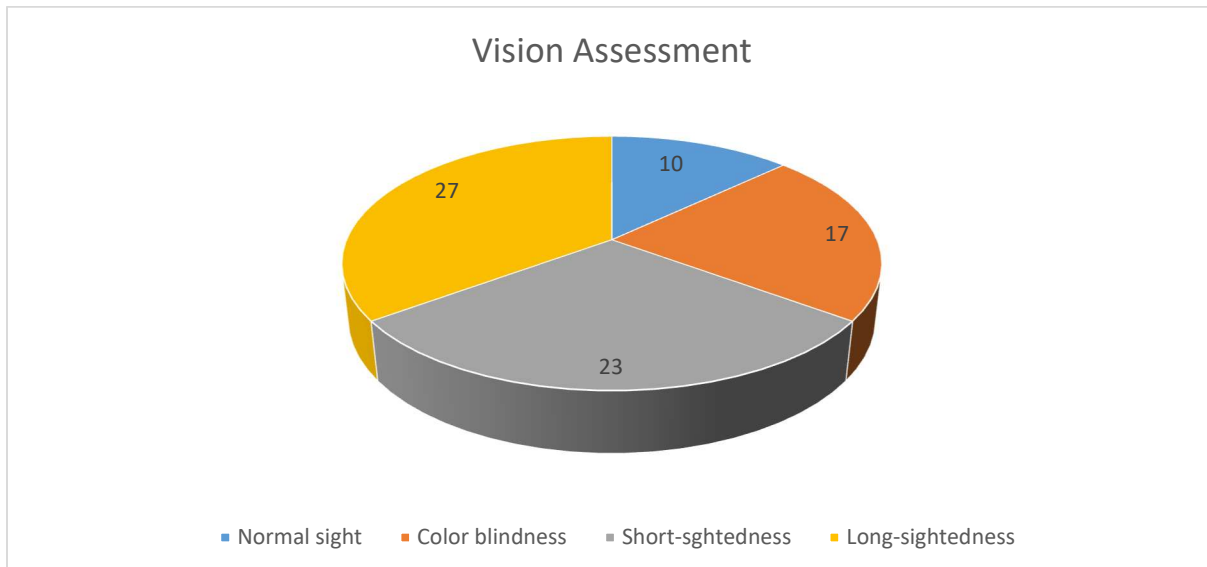
A total of 238 pupils, 8 teachers, and 10 parents were assessed. Common cases included respiratory infections, skin conditions, and minor injuries. Severe cases requiring referral were documented for follow-up.

## II. Dental Department Statistics

Condition / Service	Recommendation	Total
Malposed teeth (braces)	Requires Braces	2
Bleeding gums	Practice proper brushing technics	1
Sensitive teeth	Practice proper brushing technics	1
Calculus (scaling & polishing)	For Scaling and polishing	1
Painful jaws while eating	Muscle relaxant medications prescribed	1
Cavities (extraction)	For extraction	25
Shedding teeth (extraction)	For extraction	35
Healthy teeth (education given)	Maintain good dental and oral hygiene	7
<b>Total Pupils Worked On</b>		<b>73</b>

Out of 73 pupils examined by the dental team, the most common cases included cavities (25 cases) and shedding teeth requiring extraction (35 cases). A smaller number presented with malposed teeth requiring orthodontic follow-up (2 cases). These findings highlight the urgent need for school-based oral health education and preventive care.

## III. Ophthalmology Department Statistics



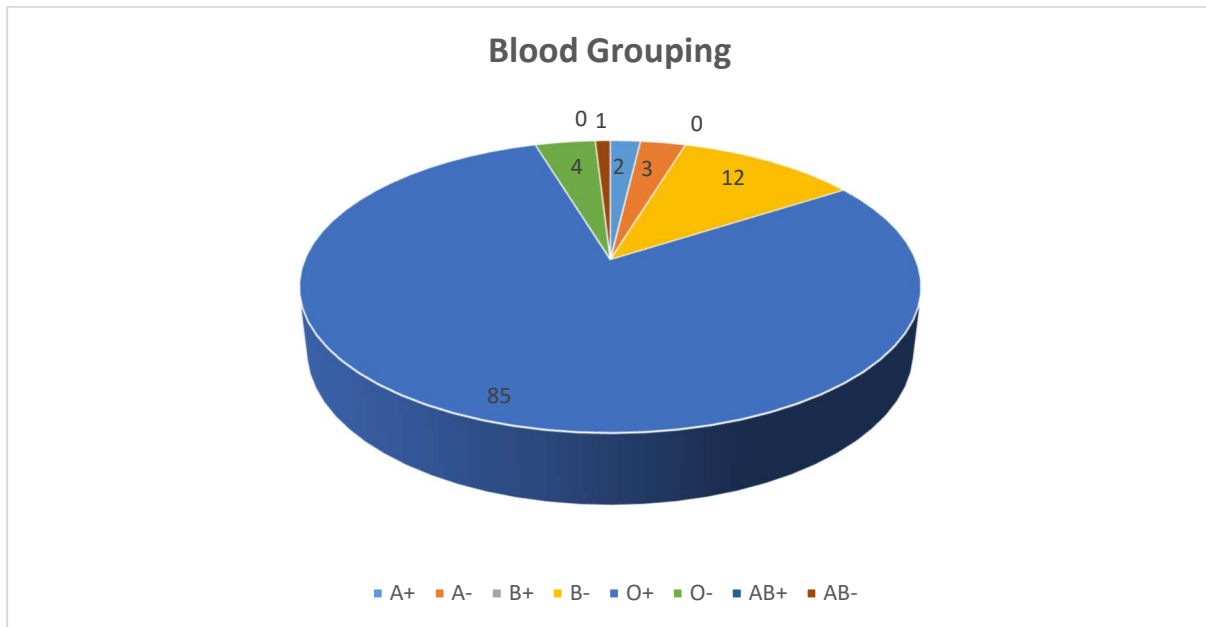
*Chart 2: Source: Uhai-SHIMS Medical Camp 1, Vision Assessments*

Due to the limited availability of the ophthalmology team restricted to a single day Snellen vision chart was employed during triage to efficiently identify and prioritize urgent cases. A total of 77 pupils were screened. Among them, 52% (40 pupils) were diagnosed with refractive errors such as myopia or hyperopia, necessitating corrective eyewear. Additionally, 22% (17 pupils) were found to have color vision deficiencies. These findings highlight the critical need for regular eye screenings, as undetected visual impairments can significantly hinder academic performance and learning potential.

#### IV. Laboratory Department Statistics

Blood grouping, H-pylori, and urinalysis assessments were conducted on 234 pupils, 8 teachers, and 10 parents. The results provided baseline data for inclusion in the Uhai-SHIMS system for better service delivery and provision of necessary support.

##### a. Blood Grouping



*Chart 3: Source: Medical Camp 1, Laboratory Analysis*

Out of 180 pupils screened for blood grouping, 120 (68%) were identified as O+, 15 (8%) as AB+, 5 (2%) as A+, and 26 (20%) as O. Understanding one's blood group is vital, as it can be lifesaving in emergencies where rapid blood transfusion is required. This knowledge not only facilitates timely medical intervention but also supports safer and more efficient healthcare delivery.

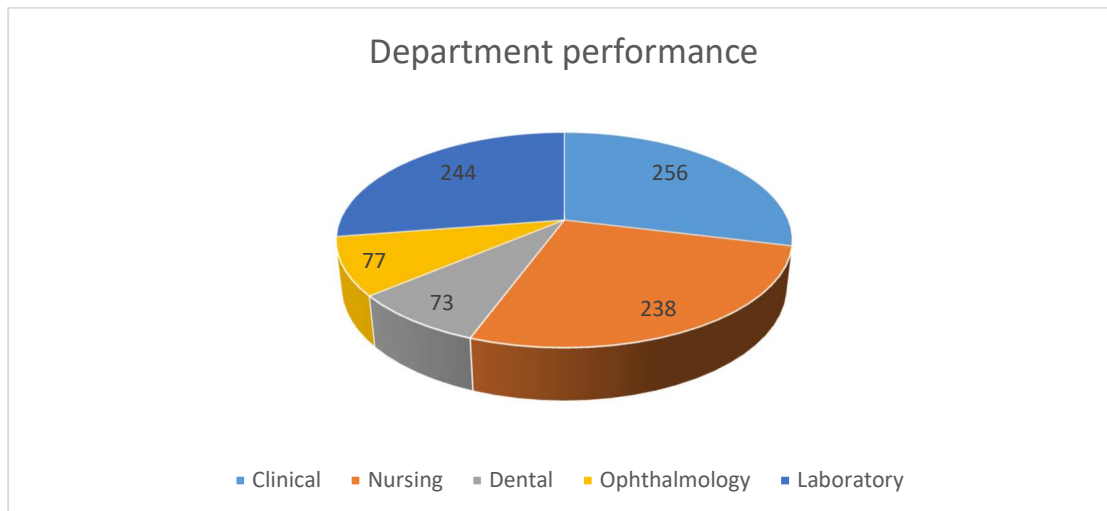
**b. Urinalysis**

Condition	Girls	Boys	Total
<b>TOTAL</b>			

**c. H-pylori**

Condition	Positive	Negative	Total
Pupils			
Parents			
Staff members			
<b>TOTAL</b>			

**V. Department performance statistics**



*Chart 4: Source: Medical Camp 1, Department performance statistics*

The department's performance statistics demonstrate a clear ability to assess outcomes relative to the resources allocated. These insights will inform future planning, particularly in optimizing resource distribution and refining triage protocols.

## 6. Lessons learnt

- i. **Collaboration is Key:** The strong partnership between ILERA-I, medical teams, school staff, and parents was instrumental in ensuring the smooth coordination and overall success of the medical camp. This collaborative effort fostered clear communication, efficient logistics, and a supportive environment that benefited every pupil involved
- ii. **Preventive Health Matters:** Health education on oral hygiene, nutrition, and personal hygiene was well-received, showing the importance of integrating preventive health into future camps.
- iii. **Parental Involvement:** Parents' presence enhanced, necessary consent, provision of authentic medical data and reinforced awareness about hereditary conditions, child health, promoting regular medical check-ups and open dialog between parents and children.
- iv. **Need for a trained counsellor:** We observed that several pupils exhibited signs of worry, anxiety, and emotional distress. These reactions highlighted a critical gap in the support system available during such interventions. While the medical team effectively addressed physical health concerns, it became evident that some students required psychological guidance and emotional reassurance.

## 7. Challenges

- i. **Expanded Target Group :** Inclusion of teachers and parents, while beneficial, stretched medical resources and reduced attention on the intended pupil target.
- ii. **Low Pupil Turnout :** Scheduling the medical camp during the last week of academic term affected attendance of day scholars, hence reducing the total number of pupils assessed.
- iii. **Logistical Delays :** Transport challenges led to delayed arrival of some medical staff, affecting the flow of activities especially on the first day.
- iv. **Resource Shortages :** Limited medical supplies, human resources and equipment affected the scope of services delivery due to delayed assessment capacity. The ophthalmology services were limited to a single day due to limited financial resources.

## 8. Conclusion

The medical camp at Peace Modern Primary School demonstrated the critical role of accurate student medical data in strengthening school healthcare service delivery and support systems. By verifying pupil health information, identifying urgent medical needs, and promoting preventive health practices, the camp laid a strong foundation for the success of the Uhai-SHIMS system. ILERA-I appreciate the contributions of all stakeholders particularly the medical teams, school administration, and parents for their tireless efforts and support. The lessons drawn will inform future camps and ensure more comprehensive coverage.

## 9. Recommendations and Way forward

Based on the observations and challenges encountered, the following recommendations are proposed to enhance the effectiveness of future medical camps:

- i. **Align Scheduling with Academic Calendars:** Plan camps well in advance in full collaboration with the school administration avoiding examination periods, and other school extracurricular events to maximize pupil attendance.
- ii. **Advance Resource Mobilization:** Secure external finance support, human resources, medical supplies and equipment well in advance to avoid service delays.
- iii. **Strengthen Sensitization:** Conduct robust pre-camp awareness campaigns to boost participation and parental engagement.
- iv. **Establish Referral Mechanisms:** Formalize partnerships with local hospitals and clinics to handle severe cases identified.
- v. **Counselling services:** The presence of trained counselors during school medical camps is essential to address the emotional, psychological, and social dimensions of student health. Counselors will provide critical support in helping pupils process diagnoses, manage anxiety, and navigate sensitive issues such as trauma, stigma, or behavioral challenges.

## 10. Annexes

### i. Medical camp in photos



#### **ILERA INITIATIVE TEAM**

- Ntege Simon: Lead Software Developer
- Nabanja Eva: Company Secretary
- Tumuramye Nicholas: Financial Advisor



#### **PEACE MODERN PRIMARY SCHOOL TEAM**

- Ms. Batenga Faridah: Director
- Mr. Ssentumbwe Harunah: Headteacher
- Mr. Begumisa Enock: School nurse



#### **MEDICAL TEAM**

A multidisciplinary team providing professional services including; Dental, Vision, Lab analysis, nursing, and clinical assessments.



## SERVICE PROVIDERS

- Peace Modern P/S Team
- ILERA-I Team
- Medical Team



## PUPILS OF PEACE MODERN P/S

Together with Service Providers, mostly pupils from the Boarding section were able to attend the medical camp.



## PARENTS OF PEACE MODERN P/S

Parents present for consent provision and authentic student bio and medical data.



## DENTAL SERVICES

The dentist was able to assess pupils, parents and staff members. Students and parents were sensitized to improve mouth hygiene through regular brushing using better technics, reducing sugary snacks and periodic check-ups.



## **CLINICAL ASSESSMENTS**

For efficient clinical services, present parents were required to guide their pupils. Vital measurements were taken, and medical data like allergies, chronic illnesses, disabilities etc.



## **OPHTHALMOLOGY ASSESSMENTS**

Visual ability is vital for students and all citizens at large, it was important to assess pupils on color blindness, long and short sightedness.



## **LABORATORY ASSESSMENTS**

From blood grouping to urinalysis, the lab technicians provided professional services to pupils, parents and staff members.



## **TOKEN OF APPRECIATION**

To thank the pupils for their discipline, a snack and drink was provided to all pupils present. All service providers were provided with breakfast and lunch.

ii. Service provider attendance list

**ilerai**

**ATTENDANCE FORM**

Date .....

REASON.....

NO.	NAMES	ORGANISATION / POSITION	PHONE CONTACT	EMAIL	SIGNATURE
	Nlege Simon Peter	ILERAI	077456347	nplegimse@gmail.com	
	NABANJA EVA	ILERAI	0757438000	nabnajaeva1@gmail.com	
	OCHOLA MARTIN	TEACHER	0756544061	ochola.martin@gmail.com	
	KUSASIRA DAVID	ENROLLMENT (EM)	075148953	busukusanenrolment@gmail.com	

**ilerai**

**ATTENDANCE FORM**

Date .....

REASON.....

NO.	NAMES	ORGANISATION / POSITION	PHONE CONTACT	EMAIL	SIGNATURE
	TAREMWA NABOTH	LAB TECHNICIAN	0775317560 0707506860		
	BEGUMISA ENOCH	NURSE	0779987927	enochbegumisa@gmail.com	
	MATOW JULIUS	Clinical Officer	0701838818 975	matow627@gmail.com	

**ilerai**

**ATTENDANCE FORM**

Date .....

REASON.....

NO.	NAMES	ORGANISATION / POSITION	PHONE CONTACT	EMAIL	SIGNATURE
1	Kyobutungi Scario	MUT	0781563124		
2	CASEMWA TERATIUM	LAB TECHNICIAN	0994555642	casemwa16@gmail.com	
2	Lubwama Tonny	Dentist	0700985167	lubwama_tonny_kyabwama@gmail.com	
3	SENTUMBWE HALUNAH	HEADTEACHER	0786718175	sentumbwehalunah7@gmail.com	
4	BAJENGA PARIDAH	DIRECTOR Peace Mission	0702208808 0783714735	bajengap@peace.com	

ilerai DAY 2

ATTENDANCE FORM

Date 16th Oct 2025

REASON .....

NO.	NAMES	ORGANISATION / POSITION	PHONE CONTACT	EMAIL	SIGNATURE
	BEGUMISA ENOCH	NURSE	0777789927	enochbegumisa@gmail.com	
✓	Lubwama Tony	Dentist	0700983167	lubwamatonny.kusamba@gmail.com	
✓	Matevu Julius	Clinical officer	0701833278	matiax027@gmail.com	

ilerai

ATTENDANCE FORM

Date .....

REASON .....

NO.	NAMES	ORGANISATION / POSITION	PHONE CONTACT	EMAIL	SIGNATURE
	SSENTUMBWE HALUNAH	HEAD TEACHER	07534651 / 0786718175	ssentimbwehalunah7@gmail.com	
	BATENGA FARUOH	DIRECTOR	0702203508 / 0783114735	baterngafaruoh@gmail.com	
	Ntege Simon Refor	ILERAI Programs Coordinator	0777456367	nsplwntev@gmail.com	
	NABANWA EVA	ILERAI Secretary	0757438000	nabawanwaeva77@gmail.com	
	Nicholas Tumurungu	(ILERAI)	0779208988	tumurungunicholas@gmail.com	

ilerai

DAY 2

ATTENDANCE FORM

Date 13/Aug/2025

REASON .....

NO.	NAMES	ORGANISATION / POSITION	PHONE CONTACT	EMAIL	SIGNATURE
01	NAMASSA MERCY	KUMUSA HIGH SCHOOL Nurse	078423322 / 0705199715	mercynamassa192@gmail.com	
02	NIMATI AMINAH	Ministry Health Nurse	070289382 / 0782221010	nabatamusa169@gmail.com	
03	TWESIGYE WININGTON	PEACE MODERN HS TEACHER	0705981543	winington12@gmail.com	
04	OPHONO WALTER	PEACE Modern Sch	0701757128 / 0764127800	walterophono39@gmail.com	
05	TAREMWA NABOTH	Peace modern sch Lab off.	0778617560 / 0707506360		

ilerai SAT 2

ATTENDANCE FORM

Date .....

REASON .....

NO.	NAMES	ORGANISATION / POSITION	PHONE CONTACT	EMAIL	SIGNATURE
	OCHOLA MARTIN	TEACHER	0752344021	ocholamartin63@gmail.com	
<del>2</del>	<del>FARFAWA NABESH</del>	<del>Lab attendant</del>	<del>0773817560 0707506860</del>		<del></del>
✓	KUSRASIA DAVID	EN MANAGER	0751486053	baudlemartin41@gmail.com	
✓	SBERMA IERANIM	LAB TECH	0747555642	ieranip16@gmail.com	
✓	Agobumangi Steven	MLT	0181565124		