

ETAT +

UON Postgraduate ETAT+ Training

25th – 29th October 2010

Training Report

Contents List:

1. Introduction
2. Objectives
3. Activities
 - a. Pre-Course Preparations
 - b. Day to Day Summary
4. Recommendations
5. Summary and Conclusions
6. Appendix

Introduction:

ETAT+ training of newly enrolled postgraduate students pursuing M.Med in Paediatrics and Child Health has been carried out over the last 5 years in the University of Nairobi (UON). This serves as an introductory emergency care course prior to the commencement of the student's clinical rotations. This year's UON Postgraduate ETAT was held between the 25th and the 29th of October 2010. The training was conducted by faculty drawn from senior residents also undergoing M.Med training as well as instructors from Kenyatta National Hospital and Gertrude's Children's Hospital. The venue of the training was the UON - KNH Medical School Campus with the sessions being coordinated between Lecture Theatre 1 (LT 1) and the Department of Paediatrics. Most plenary sessions were held in LT 1 while the breakout sessions (Skills and Scenario Stations) were carried out on the upper and lower landings of LT 1 as well as in the Paediatric Department Library and the Paediatric Department Classroom.

The course participants consisted of 2 main groups:

- Newly enrolled postgraduate resident students undertaking training in M.Med in Paediatrics and Child Health (20 Participants)
- Newly enrolled Registered Clinical Officer Students seeking Higher Diploma Training in Paediatrics at KMTC – Nairobi Campus (10 participants).

Three students who had previously undergone ETAT+ training at their previous workstations also requested to sit in as observers for some of the sessions with recently updated guidelines. These students were all newly enrolled Residents undertaking M.Med Training at the UON.

The course generally proceeded well over the course of the five days with no major problems being encountered in the organization of the course or during the 5 day period of teaching and assessment. The course concluded on

a high note on Friday 29th October 2010 by 3.00, with all students satisfying the qualifications of certified ETAT+ providers.

Objectives:

The training aimed at providing the previously qualified health workers on the skills to handle:

- Rapid and effective triage of children presenting to a busy health facility
- Resuscitation of the collapsed child
- Resuscitation of the newborn at birth.
- Emergency assessment and provision of urgently required treatment to the child presenting to hospitals with commonly encountered acute illnesses.

In addition, the training provided the newly enrolled postgraduate students with an integrated evidence based approach to identifying and treating children presenting to low resource settings with the following common presentations:

- Respiratory Distress
- Altered Levels of Consciousness
- Circulatory Compromise
- Severe Neonatal Illness
- Severe Malnutrition.

The training would therefore help to standardize the practice of the students to providing emergency care in their respective hospitals as well as expose them to the latest evidence based ministry approved guidelines used in the assessment and treatment of sick children.

Activities:

Precourse Preparation:

Venue:

The booking of the main plenary venue, Lecture Theatre 1 (LT 1) was done by official communication between the ETAT Course Coordinator, Dr Nyambura Kariuki and the office of the Registrar of the UON- KNH Campus. This was carried out during the second week of November. Confirmation of the booking was carried out by the course director on the 21st October 2010, to ensure early opening and uninterrupted access to the site throughout the week.

Attempts to secure the New KNH Training Center atop the New KNH Casualty during the second week of the month (October 2010) were unsuccessful as the venue had been pre-booked for a one day training scheduled to occur on 27th October 2010. The site however remains an ideal center for carrying out full length ETAT training courses for groups below 35 participants. This is because it reduces time lost between sessions as students move between plenary and break out sessions as well as during breaks. The venue also allows for storage of the training materials close to the teaching venues making the daily transport of these materials to and from storage much easier.

Participant Registration

Most participants taking part in the course registered over the course of the week preceding the training; delaying both their payments as well as the collection of their materials. Their late registration was occasioned by uncertainties regarding their overall sponsorship for many of the postgraduate students as well as indirect communication between the course director and the coordinator of the KMTC students. As such, most students registered for the course over the week preceding the course. This significantly affected the student's pre-course review of the materials and created much uncertainty for the directors of the course in the planning of various logistics that required knowledge of the specific number of students to attend the course.

Budget & Meals:

Catering was provided by the Students Welfare Association, through Com-care Restaurant. Negotiations regarding the process and timeliness of meals were carried out on the 15th October 2010 by John Wachira and Bill Kigathi and Com-care staff. It was agreed that meals inclusive of morning tea and snacks as well as lunch would be provided at a price ranging between 400 and 440/= per student per day. Afternoon tea was excluded from the timetable owing to cost implications. With the above rates, it was worked out that by each student paying 3000/=, the total amount collected could cover student meals, instructor meals as well as other running costs of the training i.e. consumable materials e.g. copying paper, chicken legs etc. The catering staff were also provided with a timetable of the training to emphasize the importance of strict adherence to timeliness throughout the week.

Though the agreed date for payment of the deposit for the meals was 18th October 2010, the actual deposit payment consisting of 50% of the total cost was made on 20th October 2010. This was because the payment was hinged on receiving the student's funds on registration for the course and most students made this payments on the 19th and 20th October 2010. Considerations should be made to contacting the newly enrolled students earlier to ensure such delays do not occur in future courses.

Nonetheless, the meals were provided as scheduled on time throughout the week without any major delays.

Student Materials:

The students materials consisting of envelopes with Instructions for participants, the Pre-course MCQ's, the Course Timetable, Outline of the differences between the WHO and the Ministry Guidelines as well as both guidelines (i.e. the Ministry of Medical Services – Basic Paediatric Protocols and the WHO Pocketbook of Hospital Care for Children) were made available for students to pick from the Department's Secretary's office on 13th October 2010. The Basic Paediatric Protocols and WHO Hospital Care for Children pocketbooks were readily accessible from the KEMRI and KPA offices respectively and had been collected by the 12th of October.

Making the rest of the materials requiring photocopying available presented some challenges owing to the widespread lack of printing paper in the Department of Paediatrics as well as in many other departments. This was however, overcome by photocopying the materials in small batches with papers from different sources and eventually purchasing printing paper using the collected student funds; which presented an additional problem owing to the late collection of these funds. It was also noted that many of the photocopied documents had significant errors perhaps owing to the urgency with which the documents were copied.

These challenges can be anticipated and overcome by having a pre-constituted folder containing the ETAT preparatory materials available in the department with which copying can be started at a much earlier time to ensure both the availability of paper as well as reductions in the errors of copied training materials.

Equipment:

The Laptop and LCD projector were readily available from the Department of Paediatrics. Speakers for the Tuesday morning Oxygen Video session were provided by the Course Director. The rest of the materials were collected from the KPA office including the white boards for breakout sessions, the child manikins and 4 adult size ambu-bags. The rest of the materials were brought by Jason Kiruja and John Wachira on return from Uganda on 23rd October 2010. The collection and pre-course checking of this equipment proceeded well.

Faculty:

The following individuals constituted the faculty for the course:

- John Wachira – Instructor
- Jason Kiruja – Instructor
- Dan Alaro – Instructor
- Judy Amollo – Instructor Candidate
- Lena Kombo - Instructor Candidate
- Dorothy Mbugua – Instructor Candidate
- Steve Mwinga – Instructor Candidate
- Dr Nyambura Kariuki – Course Coordinator
- Bill Kigathi - Course Director

As earlier outlined, most of the faculty was drawn from the UON Postgraduate Students with the exception of Jason Kiruja (KNH), Steve Mwinga (KEMRI-Wellcome Trust) and John Wachira (Gertrude's Children's Hospital). Significant challenges were faced in finding enough trainers to be available for the full course of the 5 days due to:

- The concurrently scheduled HIV course for the post-part one students, which committed all the Post-part One Instructor-Candidates.
- Significant shortage of Resident Doctors in the KNH Wards owing to extraction of all Post-Part One Students for the HIV ART Course as well as many of the senior residents to external rotations.

Faculty meetings were held on 8th and 22nd October 2010 to distribute the instructor's course materials and to highlight the changes in the course timetable, lectures and the instructor's manual. The purpose of having mentor mentee groups was also covered in the meetings.

Activities:

Day 1:

- The first days activities were started on schedule with most students having reported by 8.15 am.
- The pre-course MCQ's were all submitted on time and course registration completed by 8.30 am for the students who arrived late.
- The course introduction lecture was delivered by Mike English followed by the clinical signs lecture delivered by John Wachira. This set the pace for the rest of the day's sessions including lecture and practical sessions on resuscitation of the collapsed child as well as the newborn.
- During the practical sessions most students were identified as having the necessary resuscitation skills by use of the new skills checklist. Those who were noted to be requiring improvement of their skills were also noted for coaching during some of the breaks.
- The day ended at 4.30 p.m. with the delivery of the lecture on assessment of the sick non collapsed child (with signs of life)
- The faculty meeting held thereafter highlighted which of the students who required help and focused the instructor candidates on the following days sessions especially the intraosseous practical which most of the IC's had not had a chance to instruct prior to this training.

Day 2 and 3:

- Day 2 started promptly with the Oxygen Videos. The day subsequently progressed well thereafter with all the lecture and practical sessions being carried out on time as scheduled by the timetable.

- The intraosseous practical also started on time at 11.30. Judy Amollo volunteered to get the chicken legs from the suppliers butchery in Adam's Arcade at 10.00 am. The other instructors on hand also helped significantly by distributing the other consumables between different bin liners and distribute these to the different groups. Thanks to these efforts the practical proceeded well and was largely uneventful. Most of the chicken legs were suitable though some were still frozen. This could probably be preempted by having the chicken legs collected earlier that morning and ensuring that they have ample time to thaw out.
- The afternoon sessions also went well with interactive lecture on Prematurity / Low Birth Weight Feeding being handled by Professor Musoke, who also assisted with the subsequent session on Neonatal Drills.
- The admission records practical (NAR & PAR) session followed thereafter in the different groups. Following the use of the newly availed NAR and PAR forms from the Ministry of Medical Services in the different groups, it was noted that while the new neonatal admission records were more comprehensive on maternal background; they were found to be lacking the column enquiring on the neonate's most critical symptoms including episodes of apnea, convulsions, inability to breastfeed, fever, difficult breathing etc. This was felt to detract from the effectiveness of the practical, prompting many amongst the faculty to request that the practical be either carried out with the old NAR or have the first page of the filled scenario booklet replaced with a newly filled NAR form. Doing this would enable the participants to quickly determine the value of quickly using the prepared admission record forms in preference to the old system of clerking.
- The practical sessions was then followed by a brief mentor mentee meeting in which the different groups were reminded of the importance of the different sequences in assessment of the collapsed child, non collapsed child and in newborn resuscitation. Students were also prepared on what to review overnight for the subsequent days to enhance their learning over the remaining part of the course..
- The faculty then met briefly thereafter to go over the next day's timetable and discuss the findings from the mentor mentee meetings. In most groups, it was brought forward that some participants felt that they had not had ample opportunities to practice while others reported that the pace of some sessions had been too fast for them to catch-up. When this was shared amongst the faculty, faculty members all committed themselves to continue helping the more quiet members of each group as well as to direct sessions at a pace that ensured that all in attendance left the sessions with adequate understanding of the key concepts.
- The sessions on Day 3 progressed well with both the practical and lecture sessions being carried out skillfully and on time. After having completed the day's activities, it was noted that having the mentor mentee meeting on the previous day had helped to draw out the more reserved participants to engage more actively in learning and had therefore helped them to demonstrate their level of knowledge in the different stations.

Day 4:

- Dr Njai delivered the day's first lecture, introducing the topic of severe malnutrition. The lecture started at 8.00 and promptly ended at 8.30 after which Dan Alaro delivered the lecture on the nutritional management of severe malnutrition. The HIV PITC Lecture and the subsequent PITC Practical session also took place according to schedule and were both complete by 12.15 pm.
- Due to logistical considerations in getting the files for the mortality audit, the hospital survey was then tackled next, with 6 different groups visiting the Paediatric Wards, the Paediatric Filter Clinic as well as the Newborn Unit. Most groups were hosted well in the wards with the exception of one of the wards on third floor where the nursing staff claimed not to have received official communication regarding the survey exercise. Official communication letters had however been taken to each of the visited wards on Tuesday 26th October 2010. Nonetheless, the students were all able to carry out the survey exercise and reported that the main issues in the wards at the time were the lack of first line antibiotics at the time as well as lack of oxygen ports in many of the third floor ward acute rooms.
- The mortality audit was carried out between 2.00 and 3.00 pm with a combined feedback session for both the mortality audit and the ward survey. The session was displaced to the Paediatric Department Classroom as the Department of Surgery insisted on holding their grand-round in LT 1 despite our having reserved the venue for the entire week. This could possibly be averted by locking the LT during lunch breaks or making alternative arrangements for the time duration when they are scheduled to have their grand round.
- Since none of the Ward In-Charges were on hand for the feedback session, the session was geared towards the educational aspects of carrying out both exercises i.e.
 - The need for confidentiality in the mortality audit.
 - The need to carry out an audit with a view to improving hospital practice rather than issuing blame between different health care providers
 - The objective approach to handling hospital survey findings and recommendations
 - The need for feedback from the hospital survey and frequent surveys to ensure implementation occurs as recommended.
- Following this session, the participants went back to their respective groups where they were engaged in different mixed scenarios to the end of the day.
- Following the close of the day's session, the faculty met and decided to have the mixed scenarios for two more hours on Friday morning to ensure that the few students who were still noted to be weak, have a chance to adequately practice their skills. The faculty meeting also served to have the faculty appraised on the new testing scenarios since the new updates. The system of scenario examination was also reviewed during the faculty meeting.

Day5:

- Unfortunately two instructors encountered family emergencies on the evening preceding the testing day and could not join us for the days programme.
- The mixed scenarios session continued as scheduled for two hours as discussed on the previous day after which the participants were divided into two groups; with one group undertaking the MCQ exam first and the second group starting with the testing scenarios. Due to the shortage of instructors on hand, there were only 3 testing stations one of which was manned by a single instructor. This caused a slight delay (15 minutes) in ensuring that the students who started with the testing scenarios, started the MCQ altogether on time.
- Testing was eventually over by 1.00 pm with all the MCQ's marked and Testing Scenario results summarized. The faculty then met briefly between 1.30 and 2.30 pm to determine who would be considered as IP's while Dorothy Mbugua handled the MCQ Feedback with the Participants.
- Following compilation of all these results, the course was brought to a close by the course director. Handing out of the certificates as well as the course material CD's was deferred when these would be available for distribution. These were eventually handed to the participants between 8th and 10th November 2010.

Recommendations:

<i>Challenge</i>	<i>Solution in UON Post Graduate ETAT + 2010</i>	<i>Recommendations for Future</i>
<p><i>Pre- Course Preparation</i></p> <p>1. Late Registration and Payment of Students for the ETAT Course i.e. as late as 3 days Pre Course.</p>	<ul style="list-style-type: none"> • Multiple communications with the Class Representative of the Postgraduate Class as well as the KMTC Students Coordinator regarding the numbers available for the course during the two weeks preceding the course. 	<ul style="list-style-type: none"> • Early official communication from the Course Director via the Chairperson of the Department to the Students to emphasize the need for early registration and collection of materials for the ETAT+ Course • Early involvement of Class Representatives of either group to communicate that registration for the course need not be linked to registration for other official purposes.
<p>2. Late deposit payment for Meals</p>	<ul style="list-style-type: none"> • Re-assurance of the catering team that the payment would be made by the 20th October 2010 	<ul style="list-style-type: none"> • Early Student Registration with all students registered at least a week prior to the course

<i>Challenge</i>	<i>Solution in UON Post Graduate ETAT + 2010</i>	<i>Recommendations for Future</i>
<p>3. Availability of Papers for photocopies of Course Materials</p> <p>Numerous Errors in Copied Materials</p>	<ul style="list-style-type: none"> • Copying the Materials in order of priority in small batches i.e precourse materials , materials for used during the course and then testing materials. • Purchase of Photocopy Paper to complete photocopies • Repeating copies of the incorrectly photocopied materials 	<ul style="list-style-type: none"> • Maintaining an ETAT materials folder in the department that contains all ETAT Documents that can be readily available when documents are required. • Early liason between the department and the respective course directors to begin the copying at least a month prior to the Course to reduce coping errors. • Thourough inspection of copied materials prior to the course for copying errors by the course director and faculty, perhaps in a faculty meeting.
<p><i>Challenges during the Course</i></p> <p>4. Relatively Few instructors</p>	<ul style="list-style-type: none"> • Experienced Instructor candidates occasionally handled skills and scenario stations alone as they rotated through the different groups. 	<ul style="list-style-type: none"> • Course Director to liaise early with the Coordinator of the HIV Course for Post Part One Students to avoid the two courses from overlapping.
<p>5. Errors in Course Material</p>	<ul style="list-style-type: none"> • ABC – No Signs of Life – Slide 14 – Inflation Breaths? • ABC – with Signs of Life - Slide 14 - Rate Too Slow – 80/min? • Hypoglycemia Lecture – Slides 12 and 13 – Rate of Infusion 2 -3 minutes? • Difficulty using the New NAR for the NAR/PAR Scenario Station • Severe Malnutrition Lecture - Slide 16 – Oral Rehydration is with ORS 	<ul style="list-style-type: none"> • Review of the ETAT Teaching Materials with Alerts to Various Course Directors prior to their courses
<p>6. Unscheduled occupation of the Plenary Venue (Lecture Theatre 1) by Other Departments (Orthopaedic Surgery)</p>	<ul style="list-style-type: none"> • Use of the Paediatrics Department Classroom 	<ul style="list-style-type: none"> • Use of the KNH Traning Center • Pasting a copy of the official communication letter preventing access to the lecture theatre by other groups on various entrances.

<i>Challenge</i>	<i>Solution in UON Post Graduate ETAT + 2010</i>	<i>Recommendations for Future</i>
<p>Challenges during Testing and Course Closure</p> <p>7. Relatively Few Instructors</p>	<ul style="list-style-type: none"> • Setting of 3 Scenario Testing Stations • Having one instructor testing alone 	<ul style="list-style-type: none"> • Availing more instructors by avoiding overlapping courses
<p>8. Neonatal Testing Scenario – Confusion amongst students resulting from the words – “You are alone...”</p>	<ul style="list-style-type: none"> • Skipping the statement and ‘making calling for help...’ compulsory 	<ul style="list-style-type: none"> • Review of the Testing Scenario Statement.
<p>9. Delayed handing out of Course Certificates and Course Material CD’s</p>	<ul style="list-style-type: none"> • Distribution of Course Certificates and Course Material CD’s between 8th and 10th Novemeber 2010 	<ul style="list-style-type: none"> • Early communication between the Course Director and KPA as well as KEMRI- Wellcome Trust (Before / On the day of the commencement of the course to communicate the Names and Numbers of Participants for Certification and Inclusion in the List for Course Materials.

Summary and Conclusions:

The UON Postgraduate training was successfully completed on the 29th October 2010 with all students being certified as ETAT qualified health care providers, reflecting the hard work the faculty performed in delivering skillful instruction throughout the course. Future ETAT+ courses run in the University will continue to require similar dedication and, above all, meticulous planning in advance to ensure that future students become skillful ETAT Certified Providers.

Appendix 1: Registration Details of Participant Students:

	Name	E-mail Address	Phone Number	Work Station	Designation
1	Phoebe Wamalwa	namash09@gmail.com	0721 - 268356	UON	Registrar
2	Anne Kamunya	awkamunya@yahoo.com	0722 - 562738	UON	Registrar
3	Christine Manyasi	nmanyasi@yahoo.com	0722 - 384594	UON	Registrar
4	Ong'are Joan	arwaongare@gmail.com	0722 - 237083	UON	Registrar
5	Adut Chan Malual	adut80@yahoo.com	0701 - 838155	UON	Registrar
6	Emily Wangui Kamau	simandoei@yahoo.com	0721 - 381489	UON	Registrar
7	Miriam S. N. Weru	senteruaweru@yahoo.com	0721 - 377605	UON	Registrar
8	Ithondeka Angeline	withondeka@gmail.com	0721 - 490521	UON	Registrar
9	Evelyne Ng'ang'a	eve.nganga@gmail.com	0722 - 996341	UON	Registrar
10	Jacqueline Chitte	jackychitts@yahoo.com	0722 - 971243	UON	Registrar
11	Sofia Mwinyishee	mwinyishee@gmail.com mwinyishee@yahoo.com	0726 - 082224	UON	Registrar
12	Maureen Muriithi	maureenmuriithi@yahoo.com	0721 - 783308	UON	Registrar
13	Respicius Bakalemwa	respiciusbak@yahoo.com	+255 - 682530	UON	Registrar
14	Grace Mbatia	gmbatia@gmail.com	0714 - 386383	UON	Registrar
15	John K. Fondo	jhnfondo@gmail.com	0714 - 680433	UON	Registrar
16	Jeanne Wangechi Kinyua	chvngch@gmail.com chvngch@gmail.com	0721 - 467271	UON	Registrar
17	Samuel Otido	samotido@yahoo.com	0722 - 910156	UON	Registrar
18	Catherine Mutinda	munini@hotmail.com	0723 - 822129	UON	Registrar
19	Abdinur Farah	? abdinur2002@hotmail.com	0700 - 414396	UON	Registrar
20	Osman Warfa	owarfa@yahoo.com	0725 - 846809	UON	Registrar

	Name	E-mail Address	Phone Number	Work Station	Designation
21	Anne Mukiri Mithika	annemithika@yahoo.com	0724 – 715047	KMTC – NRB	RCO. Paeds
22	Decimah Kang’ahi Mutira	decyken@yahoo.com	0721 – 488764	KMTC – NRB	RCO Paeds
23	Serah W. Mwaura	serahwanja@yahoo.com	0723 – 514745	KMTC – NRB	RCO Paeds
24	Dishon Waigwa Wambugu	dwhope@gmail.com	0720 – 747311	KMTC – NRB	RCO Paeds
25	Douglas K. Kemboi		0721 – 837301	KMTC - NRB	RCO Paeds
26	Isaac Kiptalam Chebet	isaackiptalam@yahoo.com	0723 – 355162	KMTC – NRB	RCO Paeds
27	Dickson A. Atonga	atonga3@yahoo.com	0720 – 618503	KMTC - NRB	RCO Paeds
28	John Kemoni Machuka	jomachu2006@yahoo.com	0722 – 281959	KMTC – NRB	RCO Paeds
29	Gladys Yator	gyator@yahoo.com	0721 – 469072	KMTC – NRB	RCO Paeds
30	Vennah Kebee		0721 – 538132	KMTC – NRB	RCO Paeds

Attended the Course as Observers

31	Daniel Gichogo	danchogo@yahoo.com	0722 – 939100	UON	Registrar
32	John Njogu Kamenwa	kamenwajohn@yahoo.com	0721 – 401208	UON	Registrar
33	Ngaruiya W. Kimani	w.ngaruiya@yahoo.com	0723 – 511013	UON	Registrar
34					
35					

Appendix 2: - Participant Results

	NAME	PRE COURSE MCQ	POST COURSE MCQ	SCENARIOS	INSTRUCTOR POTENTIAL
1	Phoebe Wamalwa	45%	75% (Distinction)	Good – Pass	
2	Anne Kamunya	65%	75% (Distinction)	Pass – Pass	
3	Christine Manyasi	65%	80% (Distinction)	Good – Good	Instructor Potential
4	Ong'are Joan	55%	70% (Credit)	Good – Good	Instructor Potential
5	Adut Chan Malual	40%	65% (Credit)	Good – Pass	
6	Emily Wangui Kamau	55%	85% (Distinction)	Good – Good	Instructor Potential
7	Miriam S. N. Weru	45%	65% (Credit)	Good – Good	Instructor Potential
8	Ithondeka Angeline	55%	75% (Distinction)	Pass – Good	
9	Evelyne Ng'ang'a	50%	80% (Distinction)	Good – Good	Instructor Potential
10	Jacqueline Chitte	55%	80% (Distinction)	Good – Good	Instructor Potential
11	Sofia Mwinyishee	60%	85% (Distinction)	Good – Good	Instructor Potential
12	Maureen Muriithi	55%	75% (Distinction)	Good – Good	Instructor Potential
13	Respicius Bakalemwa	25%	70% (Credit)	Pass – Good	
14	Grace Mbatia	55%	75% (Distinction)	Good – Good	Instructor Potential
15	John K. Fondo	70%	95% (Distinction)	Good – Good	Instructor Potential
16	Jeanne Wangechi Kinyua	55%	75% (Distinction)	Good – Good	Instructor Potential
17	Samuel Otido	65%	75% (Distinction)	Good – Good	Instructor Potential
18	Catherine Mutinda	55%	80% (Distinction)	Good – Good	Instructor Potential
19	Abdinur Farah	55%	55% (Pass)	Good - Pass	
20	Osman Warfa	55%	60% (Pass)	Good – Pass	

	NAME	PRE COURSE MCQ	POST COURSE MCQ	SCENARIOS	INSTRUCTOR POTENTIAL
21	Anne Mukiri Mithika	60%	60% (Pass)	Pass – Pass	
22	Decimah Kang’ahi Mutira	60%	75% (Pass)	Good - Good	Instructor Potential
23	Serah W. Mwaura	40%	55% (Pass)	Pass - Good	
24	Dishon Waigwa Wambugu	40%	60% (Pass)	Pass - Good	
25	Douglas K. Kemboi	35%	60% (Pass)	Pass – Good	
26	Isaac Kiptalam Chebet	20%	50% (Pass)	Good – Good	
27	Dickson A. Atonga	35%	75% (Distinction)	Pass – Pass	
28	John Kemoni Machuka	25%	70% (Credit)	Pass – Pass	
29	Gladys Yator	45%	60% (Pass)	Good – Good	
30	Vannah Kebee	50%	90% (Distinction)	Good – Good	Instructor Potential