# QUALIFIED FOR PRACTICE?

In this special feature on vocational training an overview is provided in terms of what is already happening nationally. Each Department of Family Medicine in South Africa and each Vocational Training Programme was approached and asked for information, in brief outline, of their courses.

HE RECENT UPROAR OVER THE INTERIM NATIONAL Medical and Dental Council's proposed twoyear vocational training plan for junior doctors came from many quarters. Accusations that the plan was simply a poorly disguised form of 'compulsory community service' flew thick and fast. The general feeling seemed to be that a convenient label had been 'found' in order to clothe an unpopular proposal with some sort of credibility.

Vocational training as an entity in itself certainly has international credibility. Many leading figures in family medicine in South Africa have been working very hard for a long time to create an awareness of the importance of vocational training. It would be a sad day indeed to see this work 'hijacked' as an expedient means towards an end, even if the 'end' is generally regarded as desirable.

When approaching medical faculties and hospitals, aspects suggested for consideration were:

- General 'philosophy' of the department/programme (do they have a 'guru'?).
- Educational approach/methodology.
- Courses offered (eg full-time/part-time; their costs and time frames).
- The qualification(s) which can be obtained.
- Closing dates and/or procedures for application.
- Training facilities available (especially for fulltime students).
- Applicable post/salary scales if registering full-
- · Required 'overtime' work if registering fulltime.
- Special projects on which the department/ programme is working.
- Support systems for students.
- Follow-up after graduation/completion including CME.
- Any other important information they would want known about their department/ programme.

### Vocational Training – Ten Years ago

T MAY SURPRISE SOME OF OUR READERS TO KNOW that the SA Academy of Family Practice/ Primary Care published a comprehensive document just over 10 years ago entitled National Vocational Training Programme for Family Practice.1

The document was published in the form of a booklet recording the proceedings of a workshop held in November 1985 in Durban. The workshop was co-ordinated by Prof Sam Fehrsen, and the chairman of the Education Committee of the Academy at that time who was one of the pioneers of family medicine in South Africa, Dr Joseph Levenstein.

Dr John A Smith (then National Co-ordinating Director for Vocational Training) made substantial contributions to the text of the booklet, which was compiled and edited by Dr Ronald Ingle.

This publication is packed full of information, including the rationale for vocational training, the desirable attributes of a generalist doctor, educational objectives, the process and recommended approaches to training, administrative aspects, selection and training of trainers, hospital post selection and finances. A useful recommended reading list is also attached as an appendix.

Although the document is in some ways outdated, it is tangible evidence of the Academy's long-standing and ongoing commitment to vocational training.

#### REFERENCE:

1. National Vocational Training Programme for Family Practice. S Afr Fam Pract (Booklet Series No. 2), July

## GUEST EDITORIAL

Since its inception in 1980 the Academy accorded a high priority to the development of vocational training programmes. In the past 16 years, programmes have been developed in KwaZulu-Natal, Eastern Cape—Ciskei and the Western Cape. The success of these projects has been the more remarkable for the fact that they have been virtually entirely run by part-time directors and tutors drawn from the ranks of the Academy's membership and outside of the medical schools.

Currently the picture has changed somewhat in that government policy has prodded the future direction of vocational training more into the hands of university departments of family medicine, with the Academy playing more of a consultative, standard-setting and possible examinations role. Fortunately these departments are staffed mainly by people active in or sympathetic to the Academy's philosophy of training.

The Academy's struggle for the implementation of nation-wide vocational training for all prospective family physicians in our country has not been an easy one and it is still far from over, in spite of the fact that vocational training has now been made mandatory for registration as a 'family physician'. In the early days the main

resistance came from medical schools which held a 'coughs and colds' attitude to family medicine, while nowadays the opposite appertains as many people describe family medicine as a 'luxury the country cannot afford'. We are left feeling like the 'sausage in the sandwich', despite our protests that we are a necessity the country cannot afford to be without!

Notwithstanding the above (mis-)perceptions we are convinced that suitably trained personal family physicians have a potentially major contribution to make to the health needs of the South African people, and that vocational training can provide not only good doctors but also redress the imbalance that still exists in health provision between the over- and under-doctored areas in our country.

Moreover, we believe that doctors who have been trained to treat *people* (and not diseases or statistical charts) should have a major say in the planning and development of these programmes. Perhaps the greatest challenge to the Academy will be to uphold its conviction that ongoing holistic patient-centred patient care is what health is all about, against the cold ideologies of medical reductionists and social engineers.

**Dr Stanley Levenstein** 

### ACADEMY VOCATIONAL TRAINING WORKSHOP

IN MARCH 1996 THE SA ACADEMY OF FAMILY Practice/Primary Care held a workshop on Vocational Training conducted by Dr Stanley Levenstein. The purpose of the workshop was to clarify and document the Academy's approach to Vocational Training.

A report of the proceedings compiled by Dr Peter Cusins has been accepted as a 'policy document' by the Academy Council. This document:

- takes into account the full context of South African health care services – past and present
- recognises the need for appropriately trained

- family physicians in the public and private sectors, and
- proposes that the Academy takes on a 'coordinating and support role for University Departments of Family Medicine, Provincial Health Authorities and other providers of Vocational Training.

The Academy is the only official South African representative of WONCA and through it has close ties with the WHO. The Academy's vocational training policy document attaches as an appendix some of the key findings and key recommendations from the 1994 WHO/WONCA conference report – *Making Medical Practice* 

and Education More Relevant to People's Needs: The Contribution of the Family Doctor.

The following statement of support is quoted in part from the final section of the Academy's policy document.

- We support the Departments of Family Medicine in the Medical Schools in their promotion of a four-year Vocational Training programme leading to certification as Family Physician. We recommend that the internship year is included in the four-year training.
- We seek to engage in negotiations with Health Authorities to create more posts in the public sector, in order to encourage a career path for Family Physicians, similar to that of the other specialist career paths.
- We seek to gain the co-operation of the Departments of Family Medicine and the College of Medicine in order to have a single summative examination for Vocational Training in Family Medicine.

The following quotes are from the WHO/WONCA 1994 conference report.

There is a growing database that demonstrates that specialists who function as generalists and attempt to provide primary care services have more costly styles of practice, with higher rates of diagnostic tests, hospitalisations, referrals and prescribing medications with no difference in health outcomes.

- Fundamentally, high quality primary health care depends on the availability of welltrained family doctors as essential members of health teams in the community. As such, governments investing in doctors' training should adopt specific policies that increase the numbers and improve the quality of family practice training.
- While medical education must lay the foundations on which relevant postgraduate training for family practice can be built, it must never be seen as sufficient of itself to equip doctors to enter family practice.
- The health care workforce must be properly. trained and geographically distributed and its structure, recruitment and training must be informed by a sensitive, flexible, and sophisticated information system. Given people's needs for quality primary care services, countries should move towards a system in which a majority of doctors are family physicians.

Any member of the Academy who would like to receive a copy of the full policy document should contact the office on (011) 807-6605.

### VOCATIONAL TRAINING PROGRAMMES

### EASTERN CAPE BORDER REGION (EAST LONDON)

ISTORICALLY THE COURSE HAS BEEN RUN IN EAST London since 1965. It is a three-year course of combined vocational training and a Masters degree in Family Medicine under the tutelage of MEDUNSA. It includes a rotation through all the relevant departments of both major hospitals in our area, ie the Frere and Cecilia Makiwane hospitals. There is a regular Wednesday night tutorial or Balint group meeting from 19h00-21h00. Successful completion entitles the candidate to a certificate and a M.Fam.Med degree. Exposure to family practice in both rural and urban areas as well as state and private

practice is arranged according to the candidates' preference.

The course from 1997 is looking at a two-year VT course combined with academic and practical guidance in association with the UNITRA Department of Family Medicine. The candidates who complete the course will sit the new national unified Academy exam.

Enquiries to Dr Hugh Brathwaite on Tel (0431) 24237 or Fax: (0431) 29196.

Dr Peter Matthews on (0431) 26764.

### KWAZULU-NATAL

THIS PROGRAMME BEGAN IN 1985 UNDER THE joint auspices of the KwaZulu Department of Health and the South African Academy of Family Practice/Primary Care. Its aim has been to provide non-university based postgraduate training opportunities in family medicine, while providing service to rural communities.

This is a three-year course, beginning in January each year. Employment is as a full-time medical officer of appropriate rank.

The programme consists of 18 months of skills training at the Pietermaritzburg complex of hospitals (Edendale, Grey's and Town Hill/Fort Napier), rotating through any departments for periods of four weeks to six months. This is followed by 18 months of consolidating generalist experience in a well-staffed rural hospital with an active continuing medical education programme (ward rounds, as well as lectures). We strive to make these experiences both supervised and practical. There is a weekly tutorial session that covers a core family medicine curriculum and other topics of interest, by means of small group sessions (with a facilitator and possibly another resource person) at which patient encounters are used as the basis of learning. This is done using

patient presentations, viewing of video recordings of consultations, reviewing of patient records, criticism of journal articles etc. Attendance at the local Academy branch CME meetings once a month is encouraged.

The course is designed to be as flexible as possible, so that we can attend to trainees' personal learning objectives. Trainees are encouraged to determine their own learning goals, to negotiate methods of achieving these goals with their supervisor/facilitator and, by means of reflection and self-assessment, to monitor their own education. This is done in an attempt to create an enthusiasm for lifelong learning.

Due completion of the course (with informal comment from the trainee's supervisor in each hospital department) confers a certificate of completion of a vocational training programme with entitlement to write the National Academy Exam as a form of summative assessment.

Please direct any enquiries or comment to: Dr Julia Blitz, 18 Mitchell Road, Wembley, Pietermaritzburg 3202. Tel: (home) (0331) 429445 (work) (0331) 941556. Fax: (work) (0331) 941693.

### McCord Hospital

CCORD HOSPITAL IS ONE OF THE FEW remaining independent mission hospitals Lin the country and maintains a Christian ethos and patient care. The VTP has been established in conjunction with the Christian Medical Fellowship with the following mission statement: 'To equip doctors to serve especially the underserved, according to the example of Jesus Christ.' The basic aim is to train competent generalists who have the necessary skills and attitude of caring and the motivation to serve where the need is greatest in this country. Applicants are not limited to Christians but to anyone who can live with the above mission statement. The trainees are employed as medical officers on provincial equivalent salary scales and six month rotations are offered through the following disciplines: internal medicine, general surgery, paediatrics (including three months' community paediatrics), anaesthetics (including the DA: obligatory) and primary care. Each of

these rotations is co-ordinated by a consultant and the training programme as a whole is coordinated by a full-time director. The programme is offered over a period of two years and places become available every six months. Training takes place at McCord Hospital, King Edward Hospital and Ngwelezane Hospital (Empangeni); there is also a month-long rotation through a rural hospital for each trainee each year. Meetings of all trainees are held weekly with the Director, when many of the non-clinical issues are discussed following patient presentations. The minimum requirement on completion of the programme is success in the MFGP. Other courses are encouraged but not obligatory. The programme has been accredited with the SA Medical and Dental Council.

Further details can be obtained from Dr S Reid or Dr H Holst at McCord Hospital, Tel (031) 207-1515 or Fax (031) 28-3853.

## VOCATIONAL TRAINING OFFERED BY DEPARTMENTS OF FAMILY MEDICINE

(ALPHABETICALLY)

### MEDUNSA

HE M.FAM.MED PROGRAMME AT MEDUNSA was initiated in 1979 to ensure that doctors are better equipped for practice, and to meet their responsibilities to patients, families and communities as well as to themselves, their own families and health care professionals.

The overall aim of the programme can be understood in terms of 11 themes:

- The foundation of family medicine
- The doctor-patient relationship
- Whole person medicine/human growth and development
- The family
- Culture and community
- **Ethics**
- Therapeutics
- Research
- Learning
- Management
- Illness, disease and common problems

Students complete the programme over a three to five year period. Seminars are held for a week in February each year. We meet in regional groups for two and a half to three full-day sessions

during the rest of the year.

We have regional groups in the Northern Province, the North-West Province, Mpumalanga, Gauteng, KwaZulu-Natal and the Eastern Cape.

Students remain in their own primary care practices which form the basis of their studies. The small group sessions held during the year include patient presentations, workshops, journal clubs, discussion on research methodology and projects. The sessions are meant to consolidate the learning that is taking place from clinical practice and require substantial preparation.

There is a Family Medicine Resource Centre at MEDUNSA to assist students in finding relevant readings for the 12 patient studies and the research project that is required. There is a single end examination in addition to the above course requirements to obtain the degree.

The course is conducted in English.

Application forms can be obtained from Prof GS Fehrsen, Head, Department of Family Medicine, PO Box 222, PO MEDUNSA 0204.

Tel: (012) 529-4314/529-4528. Fax: (012) 529-4172. e-Mail: ansie@medunsafm.gt.healthlink.org.za

### UNIVERSITY OF CAPE TOWN

T THE UNIVERSITY OF CAPE TOWN FAMILY Medicine is catered for by three staff members in the recently established Department of Primary Health Care.

A three-year, part-time M.Fam.Med course is offered on one afternoon a week and the first intake of 12 students is now half-way through the course.

The course is conducted around a patientcentred approach to family medicine with a strong emphasis on clinical medicine and has benefited greatly from its links with the Department of Family Medicine at MEDUNSA.

A second intake of 12 students will be

accepted in January 1998 and applications for the course will be considered in 1997.

The department does not yet have its own vocational trainee posts but it contributes to the training of four vocational trainees at Heideveld Community Health Centre which is conducted under the auspices of the Academy of Family Practice.

The family practice unit expects to have four hospital-based vocational trainee posts by 1997 and will be advertising these posts soon.

Contact Dr D Whittaker on Tel (021) 406-6490 or Fax (021) 448-6815.

### UNIVERSITY OF NATAL

T THE UNIVERSITY OF NATAL, THE DEPARTMENT of Family Medicine is involved in extensive Lintegrated teaching in the undergraduate curriculum in the 4th, 5th and 6th years of the Medical Curriculum. The department complements the teaching programme in Community Health, Psychiatry, Paediatrics, Pharmacology, Medicine and Surgery. The department is also responsible for the Faculty Undergraduate Rural training programme.

From 1984 to 1994 the Department of Community Health very ably accepted responsibility for a three-year part-time M.Fam.Med course. The course was run every three years. Since 1995, Family Medicine is an independent department in its own right and is accepted as a major equal partner by other clinical disciplines. The department has extensive teaching, outreach and research programmes. There are currently 24 students enrolled for Part II of the M.Fam.Med programme. It is mandatory for every

postgraduate student to serve a two-week period in a rural hospital as part of vocational training.

The department functions within the mission statement of the University of Natal and the Faculty of Medicine. Arising out of this, human rights issues and human rights activities have become important and relevant in the new dispensation we enjoy.

The department enjoys the support of a management committee, 16 honorary lecturers, as well as lecturers from every department in the faculty with respect to its teaching, research, output and service programmes.

A new intake of 24 students for the M.Fam.Med course will be accepted in 1998 and applications will be considered in 1997.

Contact: Dr MH Cassimjee, Acting Head, Department of Family of Medicine, University of Natal, Private Bag 7, Congella 4013

Tel: (031) 260-4485; Fax: (031) 260-4410.

### University of Pretoria

IE MMED (HUISARTSKUNDE) GRAADKURSUS IS 30 jaar gelede ingestel as gevolg van 'n behoefte by geneeshere in huisartspraktyk/ primêresorg aan verdere akademiese opleiding.

The aim of the course is to equip the primary care doctor with the appropriate knowledge, skills and attitudes to render a high quality medical service to his/her patients and to bear the responsibility towards himself/herself, the family and the community.

Die kursus word deeltyds oor 'n minimum studietydperk van drie jaar met omtrent 150 uur onderrig per jaar, aangebied. Die aanbieding vind op drie half-weke (Woensdagmiddag tot Saterdag) en vyf naweke (Vrydag en Saterdag) plaas en bestaan uit die volgende leergeleenthede: pasiëntsorg, pasiëntvoordragte, werksopdragte, kursusse (anatomie, fisiologie, chemiese kliniese huisartskunde patologie, praktykvoering), kliniese rekord oorsigte, joernaalbesprekings en navorsing (om 'n skripsie te voltooi).

The duration of the course is a minimum of three years part-time study during which approximately 150 hours is spent on formal tuition in the form of three half-weeks (Wednesday afternoon till Saturday) and five weekends (Friday and Saturday). The course is based on the following learning opportunities: patient care, patient presentations, patient studies and assignments, courses (anatomy, physiology, chemical pathology, clinical family medicine and practice management), clinical record review, journal article discussion and research (to complete a dissertation).

Gedurende 1997 word die kursus weer in Afrikaans in Pretoria, Witbank en moontlik Nelspruit aangebied.

From 1997 the course will also be offered in English in Pretoria and Witbank.

Vir verdere besonderhede, kontak: Die Hoof, Departement Huisartskunde, Posbus 667, Pretoria 0001. Tel: (012) 354-2141. Faks: (012) 329-6691. E-pos: kainslie@medic.up.ac.za.

For further information contact: The Head, Department of Family Medicine, PO Box 667, Pretoria 0001. Tel: (012) 354-2141. Fax: (012) 329-6691. E-mail: kainslie@medic.up.ac.za.

### University of Stellenbosch

HE UNIVERSITY OF STELLENBOSCH OFFERS A Masters degree in Family Medicine (M.Fam.Med) which enables the candidate to register as a family physician with the South African Medical and Dental Council (SAMDC). The overall aim of the course is to equip medical practitioners with the knowledge, skills and attitudes necessary for independent practice as a family physician in rural as well as urban areas.

The training extends over three years. The course is presented part-time (in modules) with four attendance modules of five days each per annum, or full-time with weekly afternoon sessions during the academic year. The training is based mainly on problem-centred teaching methods; didactic lectures are kept to a minimum. The emphasis is on disease prevention, health promotion, and early diagnosis of undifferentiated problems. For physicians practising in remote rural areas, provision is made to obtain surgical and other procedural skills during the course of their training.

The tuition will be mainly in Afrikaans or both in Afrikaans and English where possible. All examinations may be taken in either Afrikaans or English.

Full-time students will be working in training posts located in appropriate hospitals or community health centres in close proximity to the University. The University offers full academic support on various levels, including an extensive medical library and information service, as well as training in information retrieval. Also available are research guidance, technical support for academic presentations, and language courses. Although fluency in Afrikaans is not a requirement for admission, a basic understanding of Afrikaans will be of great help.

Interested persons should obtain application forms and other relevant information from:

The Course Co-ordinator, Masters in Family Medicine (M.Fam.Med), Department of Family Medicine and Primary Care, PO Box 19063, Tygerberg 7505.

### UNIVERSITY OF TRANSKEI (UNITRA)

THE DEPARTMENT OF FAMILY MEDICINE AT UNITRA offers a part-time M.Fam.Med course lasting three to five years. The course is run over weekends from 17h00 on Friday to 14h00 on Sunday one weekend a month for nine months from February to October. Students are responsible for making their own accommodation arrangements in Umtata during the course weekends. Requirements are:

- 1. Registration with the Interim South African Medical and Dental Council.
- 2. Two years of post-internship experience,

- preferably in a primary care setting in private or public service.
- 3. Students are expected to be in active practice during the course.

Applications should be forwarded to:

The Registrar, Students' Admissions Office, University of Transkei, Private Bag X1, UNITRA 5117 UMTATA

Closing date: 31 December 1996

For more information contact: Prof K Mfenyana. Cell phone 082-200-7638 Prof J Chandia. Cell phone 082-200-7637

### University of The Witwatersrand

THE WITS FAMILY MEDICINE DEPARTMENT WHICH was established in 1985 is engaged in a broad spectrum of activities in the areas of teaching and research. Apart from undergraduate teaching in 2nd, 5th and 6th year, the department

offers a three-year part-time Masters in Family Medicine degree. The trainee must be a qualified medical practitioner registered with the SAMDC and must be involved in his or her own primary care practice or primary care post. Applications

must be submitted to the faculty by mid-October; thereafter candidates are selected on the basis of a brief clinical entrance examination and an interview with members of the department. The aim of the programme is to make practitioners competent in all aspects of primary medical care through personal and professional growth. The learner orientated programme is based on course work (three weeks per year), personal study, a research project and six patient studies.

The course week is based on adult education principles and gives the trainee the opportunity to discuss and consolidate the learning that is taking place in clinical practice. The trainee's patients are often the stimulus for learning with the problems they present determining the needs for

Full name

further study. Some topics offered include: theory of Family Medicine; patient, family and community dynamics; clinical problems; the consultative process; and practice management. The research project offers trainees an invaluable opportunity to learn essential research skills through undertaking practice-based, small scale research and audit.

A challenging learning site for trainees is the recent establishment of a 20-bed Family Medicine Ward at the Johannesburg Hospital. This ward is aimed at providing cost-effective primary and secondary level in-patient care and is headed by a member of the M.Fam.Med class.

For further information contact Professor Bruce Sparks on (011) 647-2041/2095.

### APPLICATION FOR MEMBERSHIP OF THE SA ACADEMY OF FAMILY PRACTICE/PRIMARY CARE

Dental Council I support th	, hereby apply to become a member of	ner registered with the South African Medical and The SA Academy of Family Practice/Primary Care. ee to pay the subscription fees and to abide by the on is available on request).	
Postal address:		Code:	
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R248,13		Practice/Primary Care PO Box 2731 Rivonia 2128	
VAT 14%R 34,73			
Enclosed my cheque forR282,86			
Voluntary levy*	R 75,00		
R357,86		Tel: (011) 807-6605/6/7/8/9	
*Voluntary levy for community projects. For fur- ther information contact your local Academy branch		Fax: (011) 807-6611	