CIRCULATION

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JOURNAL POLICY

SA Family Practice is published monthly by the SA Academy of Family Practice/Primary Care.

It offers a voice to local family practice, placing original contributions from the research of family practitioners/primary health care workers as a priority. It aims at stimulating original research amongst family practitioners. The length of articles should preferably not exceed 2 000 words. References should be in accordance with the Vancouver system. Three copies of a contribution, typed in double spacing, should be submitted. Articles will be sent to expert referees before acceptance for publication. The journal also has an update or continuing education section, placing review articles that take cognizance of the information needs and frames of reference of primary health care clinicians. SA Family Practice further serves as the mouthpiece of the Academy. As such, meetings are reported on, along with other news.

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editorial

LEGACIES AND VISIONS

roducing this edition of SA Family Practice has been like putting another piece of a huge jigsaw puzzle into place.

Tribute must be paid to Sam for his guiding hand over the years – and, as I have come to realise in the past few weeks, tribute must equally be paid to his wife Jenneke for the major contribution she has made to ensuring that the journal has remained strong.

Some of the legacy Sam leaves is: a credibility on which to build; goodwill from our advertisers; and a high standard of original articles written by our health care colleagues.

The dynamic production team of SA Family Practice has been getting to grips with the 'transition' and their dedication, loyalty and guidance have been invaluable.

Ultimately, however, the journal is dependent on contributions from our readers. Many potential writers may hesitate to put their 'wisdom' and experience into words, but I would like to encourage them to take this step. With this in mind, several new series have been initiated in this edition - and articles or contributions following their format would be welcomed.

SA Family Practice will form a core component of Continuous Quality Improvement (CQI) – a concept which incorporates, but also goes beyond, CME. CQI addresses, in practical terms, everyday aspects of practice (whether this is 'independent', within industry or in the public sector).

I would appreciate hearing from anyone with specific ideas for our journal, so that together we can build upon our legacy, continue into the future with a vision for our discipline, and create the confidence in those who seek our help that we are truly concerned for their wellbeing.

ROY JOBSON