

Vocational Training Column

By Dr John Smith

THE SA ACADEMY OF FAMILY PRACTICE/ PRIMARY CARE'S VOCATIONAL TRAINING SCHEME

At the outset I think it should be stated, as my 'title of office' implies, that the Academy is acting as a co-ordinating body for family practice/primary care/vocational training in this country and, as many of you are aware, our first Vocational Training Scheme started at Edendale Hospital at the beginning of the year thanks to the far-sighted policy of the Kwa Zulu Health Authorities.

Health care has probably changed more in the last thirty years than in the previous three thousand and therefore I think it is important to state some principles which are universally accepted. Without principles one hardly knows whether what one is doing is honest, ethical or economically beneficial.

The first principle that requires stating is that new graduates intending to enter family practice/primary care require vocational training, for the same reasons as their specialist colleagues. It is astounding that this simple truth has been ignored in this country, consequently it is not surprising, that we have been galloping headlong towards 'Health Crisis 2000'. I wonder how many tax payers realize that virtually all medical vocational training funds are expended on training specialists, yet 90% of their health care is carried out in the family practice/primary care setting.

The second principle that requires stating, even if it has been stated many times before, is that the most economically beneficial health care system is one based on an adequate and appropriately trained family practice/primary care service. For any service to be effective it must reach a very high percentage of the population.

The third point that should be mentioned is that it is taken for granted that the principles of surgery, or for that matter of any branch of medicine, are the same in the public and

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private sectors. Therefore, it is strange that some academics are claiming that family practice is only practiced in the private sector and that a different type of medical care should be practiced in the public sector. Times change, knowledge and populations increase, therefore more emphasis has to be given to roles of activity than to staff categories. The modern family practitioner has to fill a role in which he or she must manage with the resources available to meet the needs of a large number of people by being a leader and co-ordinator of a comprehensive health care team.

The building which houses the newly established Department of Family Practice at Edendale Hospital was donated by Eli Lilly Foundation and the Academy is deeply grateful for their generous gift.

The first group of vocational trainees started their 'hospital phase' of training on 1st January in the specialities they wish to undertake to broaden their knowledge.

They will also be involved in a half-day release course when they will link up with staff at health centres, private practices and visit other community health resource facilities. In addition they will meet for group discussions on subjects which are not easily covered in the clinical setting.

In the second year, they will be involved with approved 'family practice' training units in mission hospitals and health centres.

In future issues we will go into more details of the scheme and into the life of a trainee.

The Academy is also grateful to Sterling Winthrop for donating R5 000 towards the Kwa Zulu Vocational Training Scheme to provide educational equipment, amongst other things.

If you wish to know more about the vocational training schemes or are interested in undertaking vocational training write to:

National Co-ordinating Director (VTS)
SA Academy of Family Practice/Primary Care
Medical House
Central Square
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