VOCAIfONAL TRAINING

Prospectus Ciskei Vocational Training Programme Family Medicine/Primary Care

Introduction
It is internationally recognised that Family Practice/Primary Care is a speciality in its own right. The Family Practice Vocational Training Programme was introduced specifically to facilitate the acquiring of knowledge, skills and attitudes to prepare doctors to take up the challenges of this speciality.

This 3 year programme, which was started by the Academy of Family Practice, is co-ordinated at Cecilia Makiwane Hospital in the Ciskei. This is a satellite hospital of the University of Cape Town.

Objectives
This programme, which is meant to be a broad foundation, aims to develop a Family Practitioner who is:
(a) a self motived learner
(b) patient and community centred
(c) able to practice competently in a variety of settings.

Emphasis is made to make the programme community based and orientated with the aim of developing a Community-Centred Doctor with appropriate skills and attitudes to work within a Health Team that is directed towards Community-Centred Primary Care.

Programme Structure
The structure of the programme is one of rotations through the different clinical departments and community based training centres. It is made up of 8 different components:
(a) Introductory Course
(b) Departmental rotations
(c) Programme of the Academy of Family Practice/Primary Care
(d) Community centered medicine tutorials at Cecilia Makiwane
(e) Masters degree in Family Medicine (eg M Frax Med)
(f) Xhosa lessons
(g) Research Day
(h) Peripheral hospital visits

(a) Introductory Course
This is organised in the beginning of the course and is a one week programme. It is aimed at:
* introducing the trainee to the aims and objectives of the course
* introducing the trainee to the structure of the health services in the area
* introducing the trainee to the community, its socio-economic condition and its culture
* facilitating transition from didactic teaching to self-directed learning
* getting the trainee to discuss his aims and needs from the course

THE EXTRA MARGIN...
VOCATIONAL TRAINING

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* re-affirming one's enthusiasm for the course.

(b) Departmental Rotations
All trainees have to complete a minimum of 4 months and a maximum of 6 months rotation in each of the following disciplines:
(a) Internal Medicine;
(b) General Surgery;
(c) Obstetrics and Gynaecology;
(d) Paediatrics,
(e) Anaesthesics.

A minimum of 1 month is compulsory in the following departments:
(a) ENT
(b) Ophthalmology

Sessions in Dermatology and Psychiatry are included in the discipline of Internal Medicine.

Retrospective recognition of previous experience in approved centres will be considered if the trainee was certified to be of satisfactory competence.

A minimum period of 6 months, and all short fall of the three years time after completion of the minimum requirements in rotations, has to be spent in community based primary care settings. At present the options are either the peri-urban based Mdantsane Clinics or any of the peripheral hospitals attached to Cecilia Makiwane hospital.

The course is flexible and the co-ordinator will try to accommodate the needs of the trainees. However, minimum criteria have to be fulfilled. Trainees will be allotted to posts, within the departments, where it is felt they will receive exposure to Family Practice related patients and problems. They will also be attached to consultants who are familiar with Family Practice and the aims and objectives of the course.

However, initiative and self-directed learning is one of the principles of the course and this will be encouraged throughout.

(c) Academy of Family Practice Programme
This consists of three hour weekly meetings, at present held on Wednesday evenings between 19h30 to 22h30 at Frere hospital, and facilitated by the Academy of Family Practice representatives, Drs Peter Matthews and Hugh Brathwaite. The emphasis is on group learning, rather than on didactic lectures. The 6 basic areas covered are:
(i) Balint Groups. The role of the doctor-patient relationship and the doctor as the "drug" are addressed.
(ii) Rational Therapeutics. This course attempts to make sense of the vast collection of drugs one is faced with.

Tokyo - August 1991. Carl Lewis smashed the existing world 100 metres record in an incredible time of 9.82 seconds.
month to visit the peripheral hospitals serviced by Cecilia Makiwane hospital. The purpose of these trips are to expose the trainee to the peripheral hospital and the condition there.

Principles of the Programme
(a) The programme is run as a combined course using the facilities of Ciskei Health Services and the Academy of Family Practice.
(b) Medical Officers selected for the programme will be called “Vocational Trainees” and will be part of a normal establishment of the hospital and will be expected to function according to the normal hours and duties of their departments. However, cognisance will be taken of the special requirements of the course in respect of weekly meetings and the M Prax Med academic programme. Ten posts have been set aside for the programme.
(c) All trainees must register for a recognised Masters degree related to Family Medicine.
(d) A Vocational Training Committee, which meets once a month, oversees and supervises the programme. The members of this committee are:

Dr Rex Simpson:
Senior Medical Superintendent of Cecilia Makiwane Hospital

Dr M Haresh:
Medical Superintendent of Cecilia Makiwane Hospital

Dr Simon Bax:
Superintendent of S S Gida Hospital, a peripheral hospital in Keiskammahoek

Dr H Brathwaite:
Regional representative of Academy of Family Practice/Primary Care

Dr Dave Power:
Head of Paediatrics, Cecilia Makiwane Hospital

Dr SM Pillay:
Head of Dept of Vocational Training.

Two Trainees from the programme.

Finance and Funding:
The programme is funded by the Department of Health, Ciskei and is part of the establishment of the Cecilia Makiwane hospital.

Trainees will be paid usual Ciskei salary rates for their Medical Officer duties.

Fees for the masters degree in Family Practice has to be borne by the trainees. At present this is ± R2000 pa for the first two years and ± R300 pa for subsequent years.

Sir Ranulph Fiennes is recognized as one of the world’s greatest explorers. He forged his way up untamed rivers and circumnavigated the globe.
Assessment

Assessment and evaluation is an essential part of the course. This is a two way dynamic process so as to allow both the course and the trainee to grow and develop. At present, assessment of trainees

(a) during the rotations is done on a two monthly basis, by the consultants together with the trainee and the course co-ordinator, if requested. At the end of the rotation in a department both the consultants and the Head of the Department submit a complete assessment of the trainee to the Course Co-ordinator and the Superintendent.

(b) during the Academy programme is on an informal basis. The emphasis is on the constructive facilitation and group participation learning. The facilitators of the Academy of Family Practice are responsible for assessment of both the training and the trainees. An attendance register is maintained.

Assessment and maintaining of the standard of the programme is the responsibility of Vocational Training Committee.

Academic Qualification

On completion of the course, and on satisfying the trainers that they are competent to practice Family Medicine/Primary Care, trainees will receive a “Certificate of Competence” from the Academy of Family Practice.

Trainees could also have completed both the MFGP and M Prax Med at the end of the programme.

Application

Prospective trainees should apply to:

The Medical Superintendent
Cecilia Makiware Hospital
PO Box X9062, Mdantsane, Ciskei
Telephone: (0403) 613111

Any further inquiries may be directed to:

Dr SM Pillay, Head of Dept, Vocational Training
26 Curlew Drive, Beacon Bay 5241
Telephone: (0403) 613111 (w), (0431) 471123 (h)