The Academy of Family Physicians delivered a very successful national conference in May this year at the River Club in Cape Town. Over 300 general practitioners and family physicians attended in the interests of continuing professional development, and shared research and discussion on the conference theme, Revitalising primary care.

The main plenary speaker was the National Deputy Director General, Dr Yogan Pillay, who outlined the government’s plans for National Health Insurance (NHI) and primary care. Over the next three years, the government’s 10-point plan aims to increase life expectancy, decrease child and maternal mortality, better combat human immunodeficiency virus (HIV)/acquired immune deficiency syndrome and tuberculosis, as well as enhance the health system’s effectiveness. In the longer term (over the next 14 years) NHI intends to deliver on people’s constitutional right to access health care, and is based on principles of social solidarity, equity, appropriateness, effectiveness, efficiency and affordability. In the first five years, the focus will be on strengthening the health system, improving the service delivery platform, and on policy and legislative reform. Ten pilot districts have already been identified, and work has started on employing district clinical specialist teams and establishing municipal ward-based primary healthcare outreach teams and integrated school health services. The integration of private general practitioners into the model still requires considerable thought.

The KM Seedat Memorial Lecture was delivered by a visitor from the Scottish branch of the Royal College of General Practitioners (RCGP), Dr John Gillies. Dr Gillies shared possible lessons from the RCGP experience that might assist with improving the quality of primary care in South Africa.

He conveyed a message from Dr Iona Heath, who is the head of their international division:

“At RCGP, we are delighted to make connections with the College and Academy of Family Physicians of South Africa at a time of exciting and major change in your health system. We would be happy to work together to move forward any of your initiatives on education, quality and leadership.”

His message from the RCGP experience was whenever possible, to promote generalism in the South African context as being essential for patient care and the health system, and to build professional leadership into family medicine training at local, regional and national levels. The RCGP has offered its collaboration regarding training and the evaluation and development of assessments. The Academy intends to pursue a more formal collaborative relationship with the RCGP.

In keeping with the theme of the conference, Dr Ronen Rozenblum from Harvard Medical School, spoke on the topic of Transforming health systems towards patient-centered health care and improved patient experiences. He argued that patient-centred care and the patient’s experience are fundamental aspects of quality. This is in contrast to the traditional quality improvement cycle that focuses on the technical aspects of care from the provider’s perspective.

Patient-centred care is believed to incorporate the following dimensions:

- Treating patients as individuals.
- Coordinating and integrating care.
- Effective information, communication and education.
- Physical comfort.
- Emotional support and alleviation of fear and anxiety.
- Involvement of family and friends.
- Continuity of care.

Patient-centred care has also been linked to improved health outcomes and patient well-being, improved patient safety, better adherence, more shared decision-making, enhanced provider satisfaction, reduced utilisation of care, fewer malpractice law suits and better financial outcomes. However, the most important determinant of patient-centred care is the patient-provider relationship, and the extent to which the provider acknowledges patients concerns and expectations, involves them in decision-making and addresses their emotional needs. Although 90% of doctors state that it is important to ask about patient expectations, only 16% actually do so.

The JC Coetzee Memorial Lecture was given by Prof Gerhard Theron from Stellenbosch University. He reviewed the latest statistics on pregnancy and HIV. Although the 2010
antenatal HIV prevalence rates were reported as 30.2%, the rate has reached a plateau over the last few years. Currently, 46% of maternal deaths are from pregnancy-related complications, e.g. hypertension and post-partum haemorrhage, while another 50% are from indirect causes, largely due to infections that are associated with HIV. The current goal is to more effectively implement the PMTCT programme for the benefit of both mothers and children. The good news is that the mother-to-child transmission rate has fallen to 3.5% nationally.

Over 30 original research papers were presented at the conference. The prize for the Best Research Presentation, sponsored by Van Schaik Publishers, was awarded to Dr Elma de Vries and her team of local family physicians for their study, Auditing chronic disease care: does it make a difference? Dr de Vries helped to introduce an integrated audit tool for chronic noncommunicable diseases in the Western Cape. The audit process measured the quality of care annually, and contributed to improvements in the quality of care through feedback, reflection and changes in clinical practice.

The National Council has decided to make this an annual event. I look forward to seeing you at the next National Conference in 2013.

**Bibliography**