EDITORIAL

Mastering your Fellowship

This editorial introduces a new section in the *SAFPJ* which aims to help registrars prepare for the Fellowship of the College of Family Physicians of South Africa, and to offer readers an opportunity for ongoing professional development.

Currently, there are nine training programmes for family physicians in the country, offered by the medical schools at Cape Town, Free State, KwaZulu-Natal, Limpopo, Pretoria, Sefako Makgatho, Stellenbosch, Walter Sisulu and Witwatersrand universities. These nine training programmes are co-ordinating their activities through the South African Academy of Family Physician’s Education and Training Committee.

The following principles guide the postgraduate training of family physicians in South Africa:

- The six key roles of the family physician in the health system (Figure 1).¹
- A clearly defined set of unit standards and learning outcomes.²
- A clearly defined set of clinical skills, which are about to be revised again.³
- A defined portfolio of learning in the workplace.⁴
- Textbooks such as the *Handbook of Family Medicine* and the *South African Family Practice Manual*.⁵,⁶

The training programmes are organised on the same principles as those for specialist training:

- Four years of clinical training in a registrar post with exposure to primary care, district hospital and regional hospitals. Supervision is required from a family physician or other medical specialists in the regional hospital.
- Enrolment in a Master of Medicine degree, which requires a research assignment.
- Final national exit examination by the Colleges of Medicine of South Africa (CMSA), leading to a Fellowship qualification.
- Accreditation of training programmes and complexes by the Health Professions Council of South Africa (HPCSA).

On graduation, family physicians are registered at the HPCSA in a separate register, in the same way as specialists, and are employed in posts of the same specialist rank in the public sector.

Currently, two professional bodies are involved in the discipline of Family Medicine in South Africa. The South African Academy of Family Physicians focuses on coordinating and developing education and training at national level. It also represents the discipline via the South African Medical Association, offers an annual conference and a national scientific journal, and represents the discipline globally at the World Organization of Family Doctors, as well as accrediting and offering continuing professional development. The College of Family Physicians is part of the CMSA and focuses almost entirely on the national exit examination.

The preceding section describes the processes of establishing a clear standard for the training of family physicians as expert generalists. During 2014, the South African Academy of Family Physician’s Education and Training Committee has identified the need to provide support to registrars when they prepare for the national exit examination.

The new series, “Mastering your Fellowship”, will provide examples of the question format encountered in the written examination, Part I of the FCFP(SA) examination: MCQ (multiple-choice questions), MEQ (modified essay questions) and critical reading paper (essay). Examples of these question types (according to a theme) will be given in each printed edition of the journal. Women’s health is the theme for the first article. Model answers will be available online, but not in the printed edition. The MCQs will concentrate on the 10 clinical domains of Family Medicine (Figure 2), the MEQs will focus on the six family physician roles (Figure 1), and the critical reading section on primary care research methods.

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**Role of the family physician**

- **Care provider**: Competent in being able to work clinically throughout the district.
- **Consultant**: Acts as a consultant to the primary care services.
- **Supervisor**: Provides supervision to registrars, interns and medical students.
- **Champion of community-oriented primary care**: Engages with the community served.
- **Manager**: Provides clinical governance to the team.
- **Capacity builder**: Teaches, mentors, supports and develops other practitioners.

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¹ Care provider: Competent in being able to work clinically throughout the district.
² Consultant: Acts as a consultant to the primary care services.
³ Supervisor: Provides supervision to registrars, interns and medical students.
⁴ Manager: Provides clinical governance to the team.
⁵ Capacity builder: Teaches, mentors, supports and develops other practitioners.
⁶ Champion of community-oriented primary care: Engages with the community served.
We trust that this new series will support the development of new family physicians, and also present an opportunity for reflection on prior learning to qualified family physicians and general practitioners.

Please contact Klaus von Pressentin or Bob Mash for feedback, ideas and suggestions.

Bob Mash, Klaus von Pressentin
Senior Lecturer: Division Family Medicine & Primary care, Faculty of Medicine & Health Sciences, Stellenbosch University
E-mail: rm@sun.ac.za and kvonpressentin@sun.ac.za

References