
FAMILY MEDICINE TRAINING IN AFRICA (Moi University, Kenya)

Background

- Kenyan population estimated 37/38 million
 - Majority of this population is rural
 - Total administrative units (districts) stands at 85 (mostly created for political reasons in the last 10 years)
 - Each district expected to be the administrative unit running as the devolved government.

Background

- ❑ Each district carries the devolved structures of the central government ministries
- ❑ The district hospital is the referral and administrative point for the district health services
- ❑ FM training, in Kenya, currently focused here with future plans to take it closer to the community at the health centre.

Background

- MP&DB of Kenya
 - Jan 2007, 5674 total registered medical practitioners and 741 dental practitioners
 - Majority of these practitioners are in the urban centers mainly as private practitioners or working in both private and formal employment

Webuye District Hospital

- Level 4 hospital in the MoH hierarchy
- Serves as one of the rural districts in the western province of Kenya.
- One of the four sites that started training FM registrars in 2005 (with 1+2 registrars in that years)
- Currently has 7 registrars

Training of FM registrars

- Curriculum provided and supervised by the division of FM in Moi University
 - On admission the registrars attend 3 month lectures that include introduction to medical education, ethics & physicianship, EBM, epidemiology, biostatics and introduction to research methods.

Training of FM registrars

- ❑ During the 3 months the registrar is guided towards selecting a research question on which to develop a proposal for a study
- ❑ These 3 months lectures are attended together with students from the other specialties (medicine and Paeds)

Training of FM registrars

- While the registrars from medicine and paediatrics continue with their clinical training in the MUSOM, the FM registrars move to the rural teaching hospitals to start FM clinical care and prepare their research proposal

Training of FM registrars

- the division organizes block teachings attended by all registrars as quarterlies. During this period topics taught include management, behavioural sciences, the art of family medicine (all in the curriculum)

Training of FM registrars

- ❑ The Clinical Care 1 course involves patient care (mainly inpatient care and taking calls). Emphasis on PBL and EBM with education prescriptions and case discussions with senior colleagues and among the registrars themselves. Also guide interns, medical students and the paramedical staff
- ❑ Surgical skill learning and practice is also emphasized to prepare the student to handle general surgical and obstetric emergencies in the district hospitals.

Assessment

Takes 2 forms

- i. Formative: during the period the student is involved in patient care. Accounts for 50%
- ii. Summative: for part 1 the registrars should get the thesis proposal approved by the university ethics committee before sitting for the exam:
[MCQ(3hrs), Essay(3hrs), SPOT (1.5hrs)]

Part 2

- Part 2 (year 2,3/4)
 - Those that pass part 1 exam progress to part 2 where PBL and EBM is enhanced during FM clinical care 2.
 - Other areas include allocation of time:
 - to carry out research and write thesis,

Part 2

- Community leadership (work in a community : identify issues and problems therein and initiate and carry out quality improvement projects.
- Elective period (6 wks). Student chooses an attachment programme in an institution or teaching site recognized by Moi University.

Assessment for part 2

- Formative (50% of total grade)
- Student considered ready to sit for the summative part 2 exam after successfully defending his/her thesis (marked and a score given). Has to pass both the written thesis and its defence

Assessment for part 2

- Exams include:
 - MCQ - 3 hrs
 - Essay – 3 hrs
 - SPOT
 - Clinical cases + orals

An external examiner involved in both part 1 and part 2 exams

Thank you