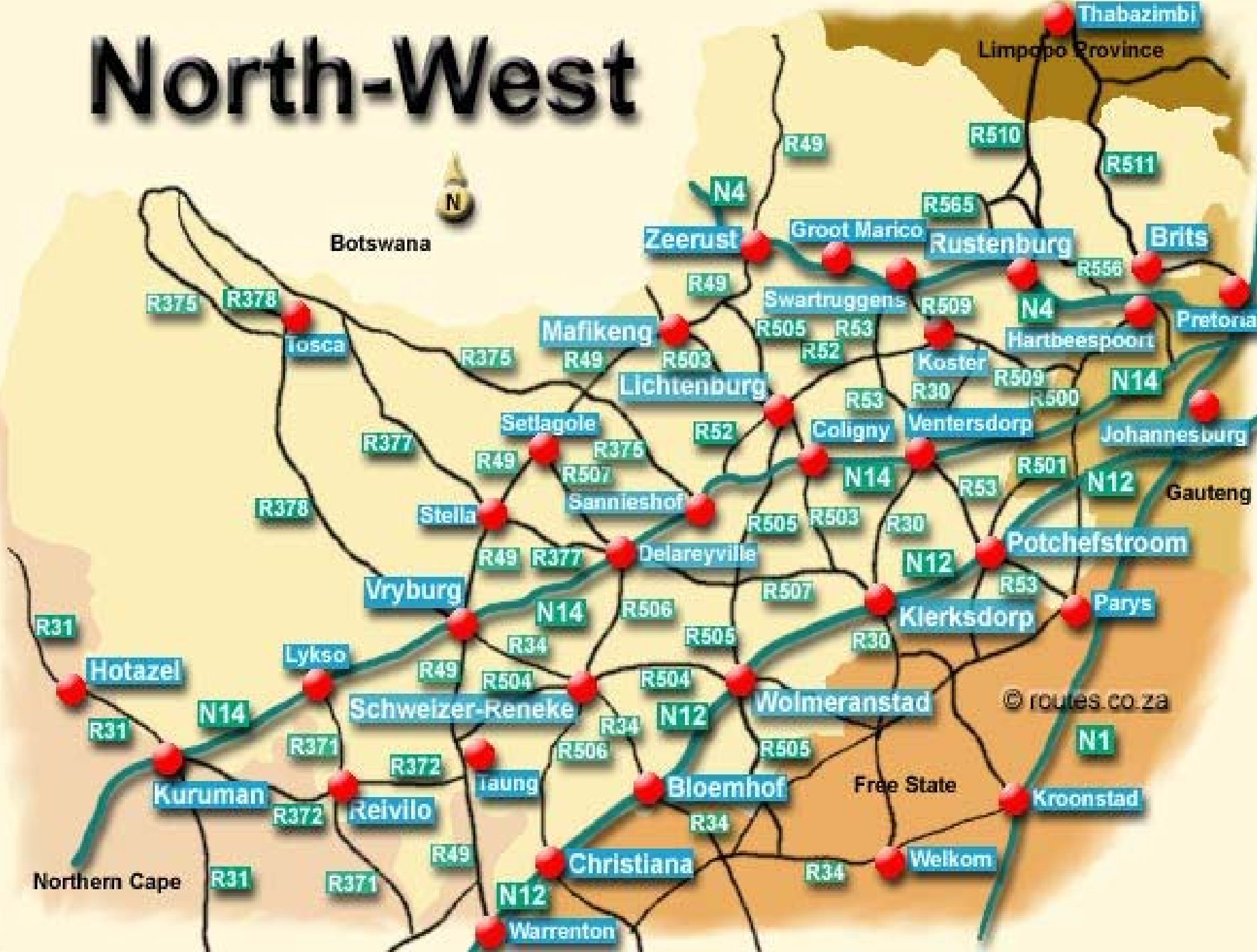


# Where to teach: The role of local training sites

**Prof Ian Couper**  
**Division of Rural Health**  
**University of the Witwatersrand**



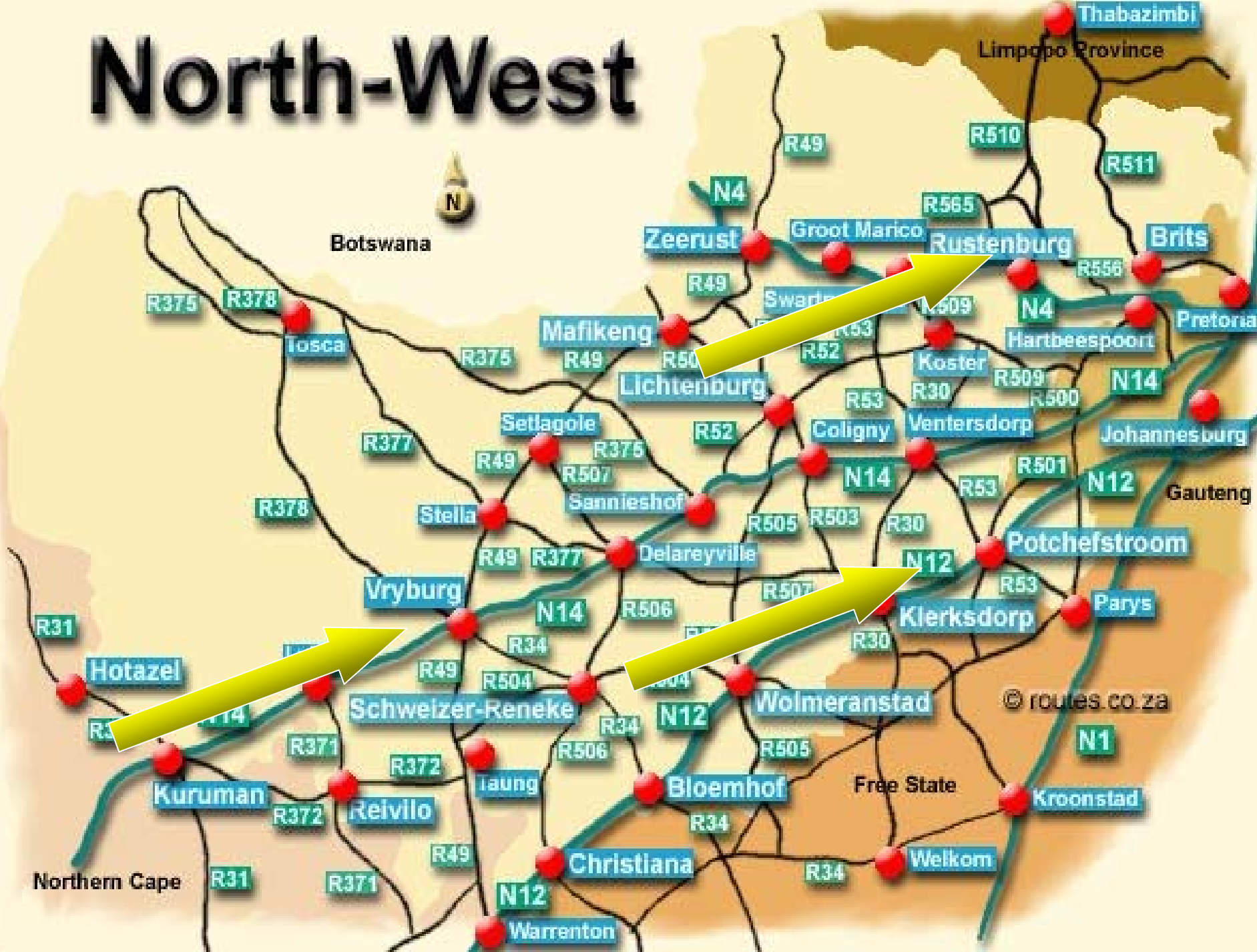
# North-West



# Chronology

- **Director of Rural Health/Principal specialist appointed July 2002 (joint appointment with Wits University)**
  - **Functioned within Chief Directorate Health Service Delivery**
  - **Approach : Do the time! – Earn credibility (Same applied to university)**
- **2004: Posts for district FP advertised for each district.**
  - **3 appointments made**

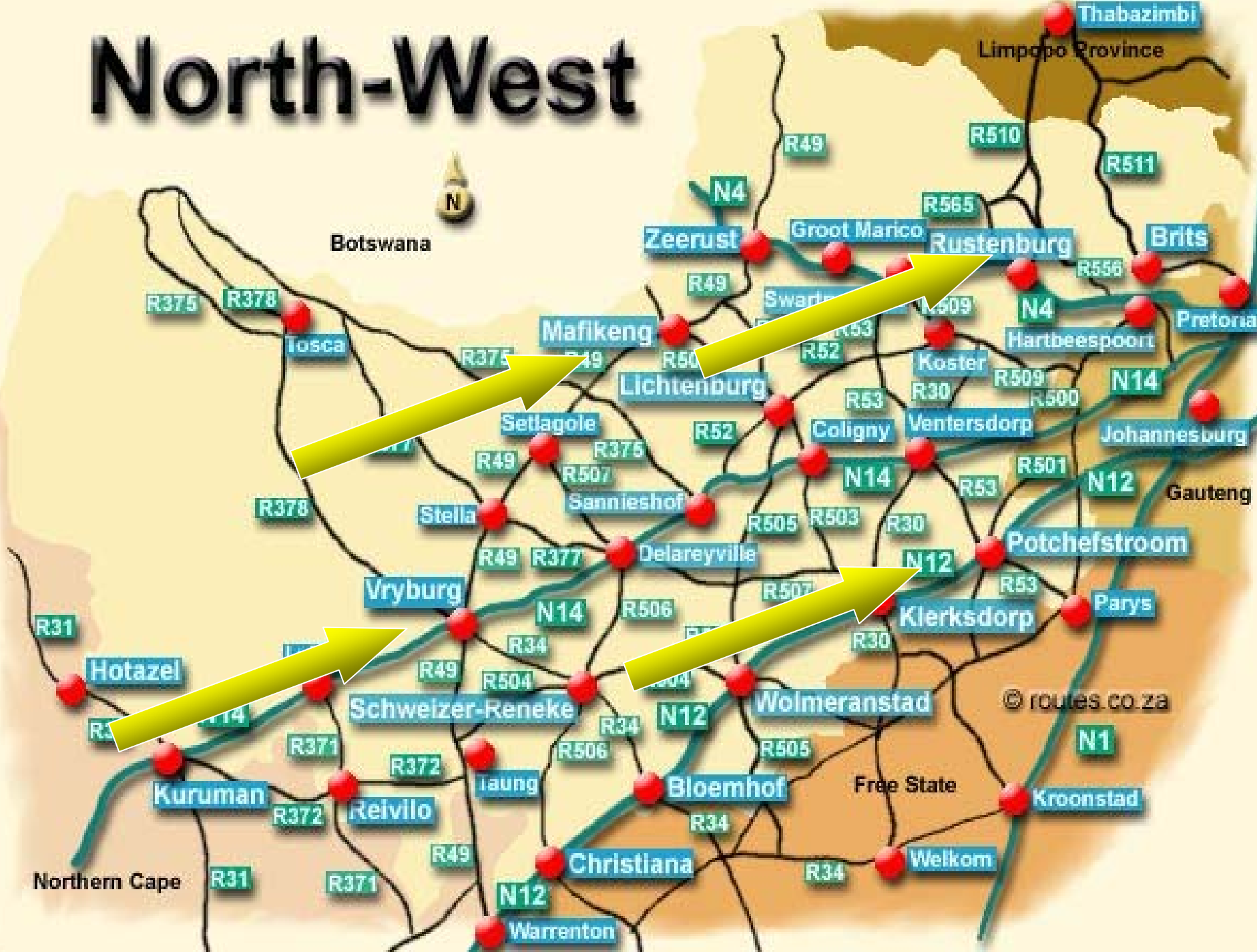
# North-West



# Chronology cont.

- **Fortunate with those chosen!**
  - Major impact: clinical and on service
  - Approach:
    - making the service work
    - Changing the system from within
    - Focus on primary care development (NOT FM or rural health)
- Provincial primary care plan presented to Department: included nurse and clinical associate training
- Remaining district clamoured for help: appointed FP in November 2005

# North-West



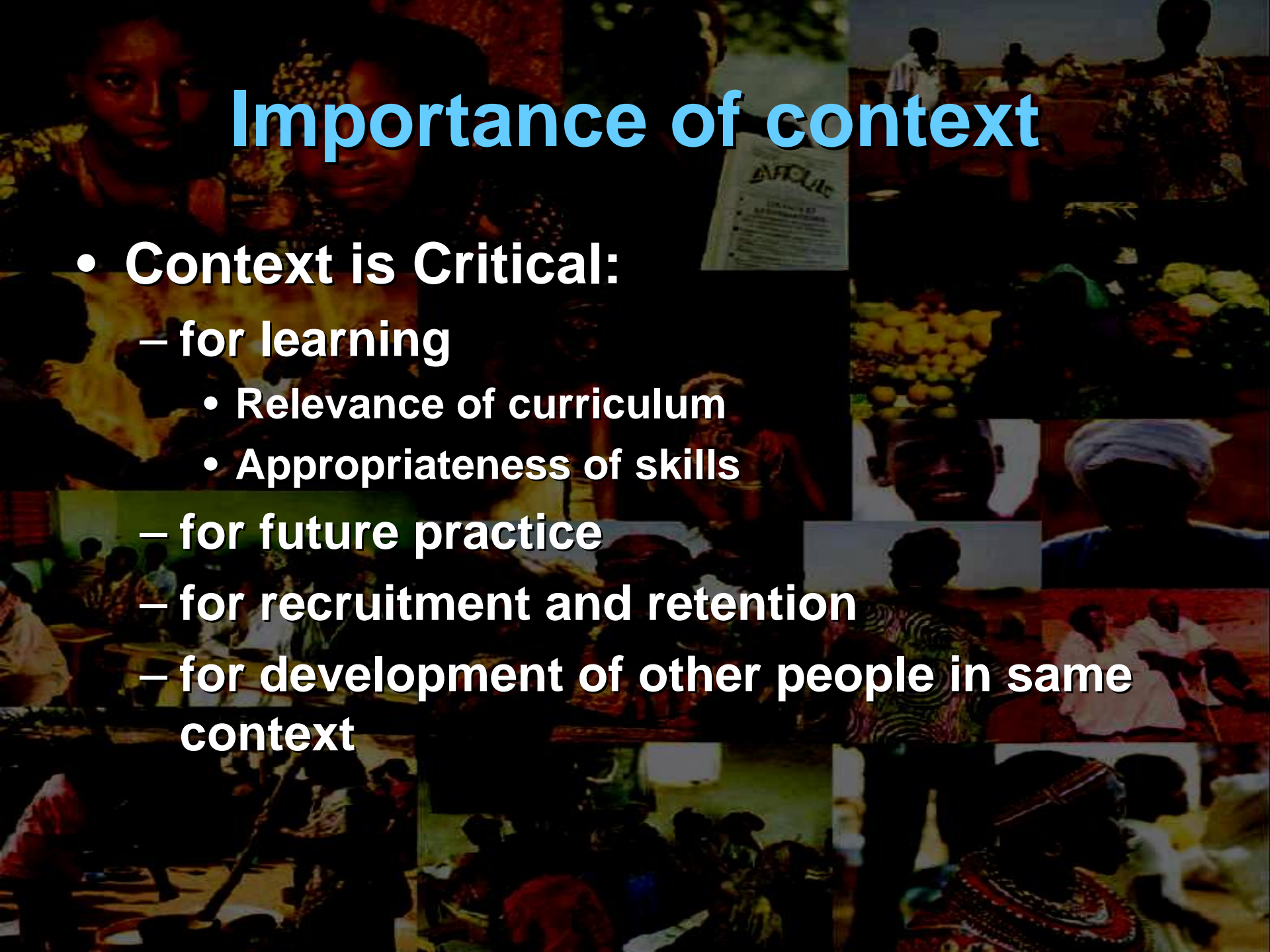
# Chronology cont.

- **Started appointing senior FPs in districts (ongoing)**
- **New primary care block for final year medical students initiated in 2006:**
  - 6 weeks in rural sites in NW throughout year
  - Province offered accommodation
  - Local staff are supervisors
- **2006: Approval for FM registrar training**
- **2007: All 4 districts accredited by HPCSA**
- **2 registrars in 2008; 13 applications for 11 posts in 2009**



# Importance of context

- **Context is Critical:**
  - for learning
    - Relevance of curriculum
    - Appropriateness of skills
  - for future practice
  - for recruitment and retention
  - for development of other people in same context



# Key issue

- **Academic education**
  - Must obtain a MMed degree
- **VS.**
- **Professional training**
  - Must have a set of skills and competencies
- **Where is it best to achieve these?**
  - Context more critical for professional training than academic education, which can be achieved almost anywhere

# Local Training sites

- Provide context
- Ensure appropriateness, relevance
- Facilitate patient-based learning:
  - Application of academic knowledge
- Change the health system:
  - Transformation through training
- Allow team-based and interprofessional learning

# Traditional medical education

- Teach students in one context
- Expect application to all contexts
- Principles should cover all gaps
- BUT students learn what they see, not what they hear:
  - Strength of the hidden curriculum

# New models of medical education

- Teach students in many contexts
- Learning by experience
- Principles developed through application
- Students learn what they see: exposure to many possibilities

# Danger for FM training



- **Following traditional models**
  - Limiting context of training
  - Seeing specialists as pre-eminent teachers
- Vs.**
- **Ensuring all the skills and competencies are developed**

# Family physicians

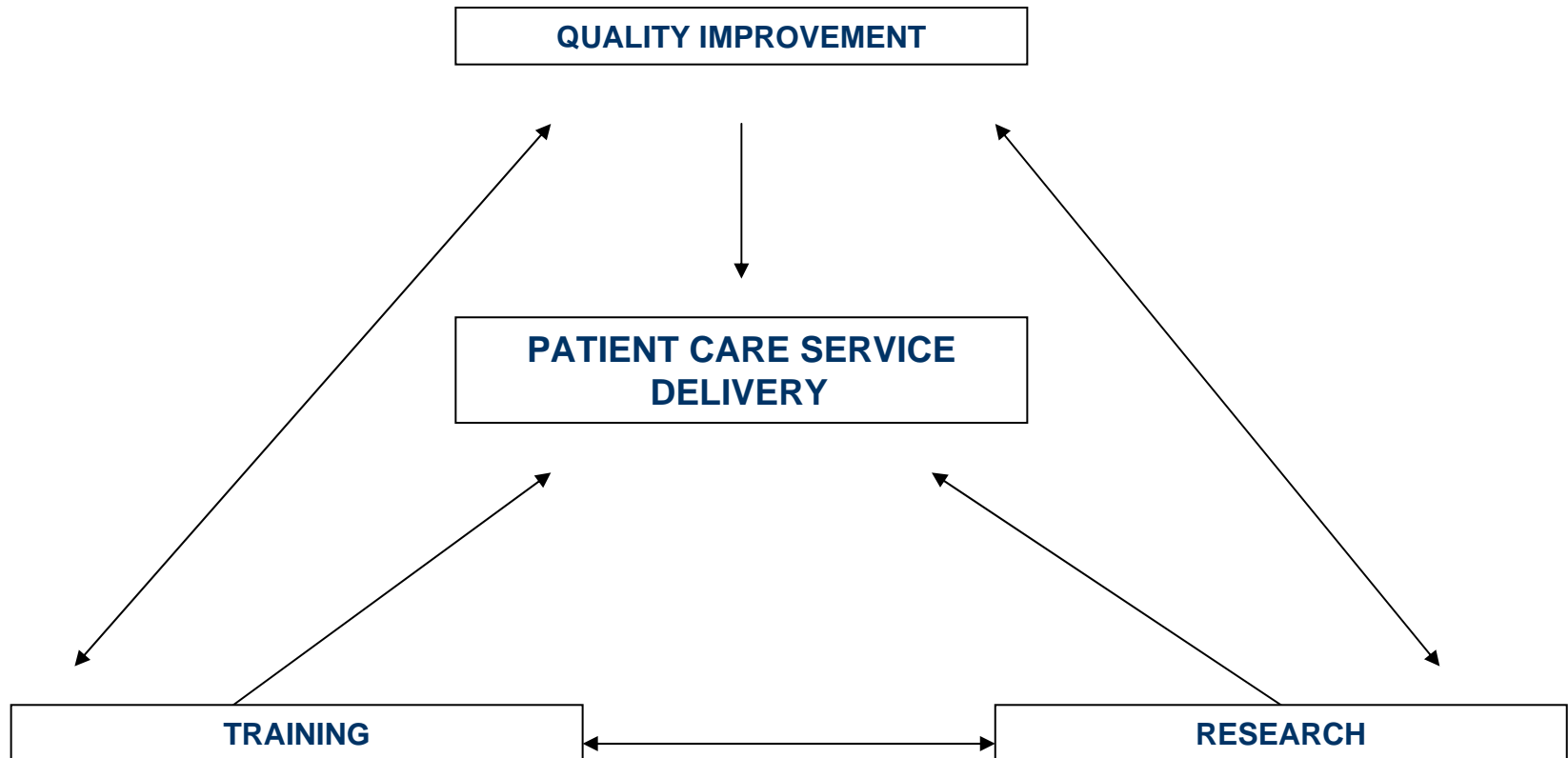
- **Specifically being trained to function in a district health system context: district hospitals, health centres, clinics, NGOs and practices**
- **Therefore, the district MUST be the most relevant training site**
- **Contextualises learning in the district health system**
- **Promotes teamwork**
- **DOES NOT MEAN NO TIME IN REGIONAL OR TERTIARY CENTRE:**
  - **Must be used for specific purposes/to address particular gaps**

# Importance of context

- Core to family medicine: understanding patients in context and addressing their needs in context (which includes addressing the context = COPC)
- Arguably we are the most context-dependent speciality!
  - Contrast to specialists in a tertiary academic centre

# Service learning model

## Basis for this approach:



# Rural District FM Training

- All facilities in health district
- FP registrar works in district facilities taking responsibility for patients
  - Rotation balanced with continuity
  - Individualised learning plans
  - Graded involvement in health system issues
  - Quality of care a major focus
  - Specialised rotations as needed

# Requirements

The background of the slide is a collage of various images. At the top left, there are close-up portraits of African women. To the right, a newspaper is visible with the word 'AFFLIÉ' printed on it. Below the newspaper, there are images of a market stall with produce, a man in a white turban, and a man in a colorful patterned shirt. At the bottom, there are images of a classroom with students and a woman in traditional beaded attire.

- Human Resources
- Infrastructure
- Teaching Aids
- Equipment
- Accreditation
- Academic status

# Importance for health service

- **Service enhancement through:**
  - Presence of trainees
  - Presence of trainers
  - Improvement in standards: vital role of academic status (“Learning culture”)
  - Motivation of other staff



# Issues

- Ensuring standards
- Flexibility within guidelines: common outcomes

