



## A two-year internship programme for South Africa

As in the case of all changes, there are those supporting and those opposing the new two-year internship programme. Critics question the reason for changing a system that has produced doctors who are in demand in South Africa and the rest of the world. That said – what type of doctor does South Africa need?

As educators and service providers, as well as being a regulatory body, we have the responsibility towards the public and young graduates to ensure a programme that offers an apprenticeship that prepares young doctors for the demands that will be placed on them after HPCSA certification. Certification is obtained after a continuum of full-time study at a tertiary institution, which may vary in duration and educational approach (with a minimum duration of five years), concluded by a two-year internship programme. The United Kingdom (UK) is also developing a two-year internship programme for UK graduates.

What was the rationale for the change and what will the programme entail? In 1990, concerns were raised about practical competencies in disciplines such as orthopaedics, anaesthetics and obstetrics and work commenced on designing a two-year internship programme. Regulations requesting comments were published in the Government Gazette in 1998. The HPCSA and a delegation from the Department of Health addressed student representatives in 2003. The programme was implemented in a phased-in approach in 2005 for graduates of the University of the Free State and UNITRA. Students from the University of KwaZulu Natal will join in 2006. All graduates from South African universities after June 2006, as well as South African Cuban graduates, will commence with the two-year internship programme in 2007.

The programme includes four months each of surgery, paediatrics, obstetrics and medicine, two months each of anaesthetics, orthopaedics and orthopaedic trauma, and a four-month rotation of family practice/primary health care (PHC) with exposure to mental health. These rotations provide interns with in-service training, preparing them for the future demands that will be placed on them in the South African health system. Although the level of competency will not be adequate for them to function completely independently, they will be prepared for the most likely scenarios.

Minimum requirements for sites to be accredited by the HPCSA include adequate patient exposure, senior personnel for supervision, human resources for support, suitable patient facilities, support services such as laboratories and X-ray facilities, and accommodation. Business plans are submitted prior to the accreditation of domains. Sites are re-evaluated every two to three years. Reported problems are investigated on site on an urgent basis. Evaluators are experienced

professionals who are committed to the programme. A senior member of staff is assigned as internship curator, is responsible for the administration and coordination of the supervision of interns, and acts as link between the interns, the institutions and the HPCSA.

Both years of internship are done at the same facility/complex and relocation is not allowed. Previously accredited facilities not offering the full 24-month internship programme should either apply to have the outstanding domains accredited or join with nearby facilities to offer all rotations. Accredited facilities include academic complexes, urban and rural hospitals and the community health centres linked to the hospitals in the referral system. The family practice/primary health care and mental health rotation aims to prepare interns to deal with the undifferentiated patient and to develop and implement patient management plans in a rational, cost-effective manner. Exposure to clinical forensic medicine is important to fill the gap in the competencies of graduates. During the family practice/PHC rotation, interns learn to function as health team members. They will work at the different levels of care and in the different domains, forming a valuable link in the referral chain.

The successful implementation of internship training is a joint responsibility. The HPCSA must ensure that the quality of training and supervision in accredited facilities is maintained, academic personnel are responsible for supervision and training, the Department of Health is responsible for employment and provision of posts and accommodation, while the interns are responsible for their own training portfolios and to utilise each opportunity as a learning experience. HPCSA logbooks and guidelines should guide the process.

The success of the programme will be measured by the competency of community service doctors entering the system from 2006. The challenges are commitment and the availability of supervisors and accommodation. Although internship is an in-service training programme, interns should not be viewed as a workforce substituting for a shortage of personnel. The main aims of the two-year programme are learning in practice and the improvement of overall competencies and skills. Let us acknowledge this fact and work towards achieving the objective of training competent doctors for South Africa – doctors who are still in demand in the rest of the world, but who will be ideally prepared for the local health care system and willing to accept the challenge to be competent doctors for the South African setting.

### **Adri Prinsloo**

Chairperson Internship Committee (MDPB), Internship Curator, Head of the Department of Family Medicine, UFS