OVERVIEW

Introduction

This first annual report from the division of Rural Health covers the 18 month period since the appointment of the Chair of Rural Health in July 2002. It is intended that there will be an annual report covering one calendar year annually hereafter.

The report is intended to inform faculty, donors, collaborators and other stakeholders about progress in terms of rural health, within the ambit of the Wits Faculty of Health Sciences, and specifically in terms of the activities of the Chair of Rural Health. As the position changes from being less of a solo act to being a fully functional division, and perhaps part of a unit or centre, it is expected that the nature of the report will change and will be less personal in nature. For the moment however it is inevitably very personal and linked to the activities of the incumbent in the Chair.

Review of the period

Much of the past 18 months has been spent establishing myself within the University and the Province. Getting to know the way the University functions, taking up my position in innumerable faculty committees, developing links with different departments, establishing lines of communication, etc., has taken up a large amount of time – more time than expected – but this has been an important process of establishing a firm foundation within the faculty. I have experienced a positive welcome and a large amount of openness to me. I particularly appreciate the support from the Department of Family Medicine and the extensive interaction with the School of Public Health.

Within North West Province it has taken time to establish my exact position, because it is a new post, and the reporting procedures. However I am now firmly part of the Chief Directorate for Health Services Delivery, which is appreciated. Being part of the new Joint Management Committee (JMC) with North West and the ongoing JMC with Limpopo has also been important.

The main developments over this period fall into six areas.
1. **Nurturing rural students**

The **Wits Initiative for Rural Health Education (WIRHE) Scholarship Scheme** was initiated and two students are presently within the faculty as part of that scheme. This has given an opportunity for a lot of learning in terms of processes of admission, support required by students, sorting out funding arrangements in collaboration with MESAB, etc. Plans are on track for a further ten students from Bophirima district in North West and from Botshabelo district in Limpopo provinces to enter health science studies in 2004 as part of this scheme. The year ended with the signing of an Agreement with the Swiss South Africa Co-operation Initiative (SSACI), which will fund 20 scholarships over 3 years. It is hoped WIRHE can play a significant role as it develops in increasing the number of rural students within the faculty and supporting them during their training.

Discussions have also been held with students regarding forming a **rural students club** at Wits and the launch meeting, organised together with the national Rural Support Network, was held in September, with a student task team being chosen to take the process forward at Wits. Four students from Wits were also able to attend the **RUDASA conference** in August in Worcester.

2. **Undergraduate Education**

Contrary to my plans much of my time and energy has been taken up in this area in view of the launch of the **GEMP (Graduate Entry Medical Programme)** at Wits. The start of a totally new curriculum has provided many opportunities and I have been fully involved at the level of the first two pre-clinical years (GEMP I and II) - with teaching, with problem based learning, with giving input to three of the themes (Community Doctor, Patient Doctor, and Personal and Professional Development themes), with setting up rural site visits for students (4 visits over 2 years), and with planning and development. I am also integrally involved in the planning for GEMP III and IV, in a variety of ways. As part of that, discussions are far advanced for a **parallel programme** for students in Northwest Province based around the Klerksdorp-Tshepong regional Hospital complex in Klerksdorp where students could spend a significant proportion of their penultimate year doing an integrated programme. Working together with the Community Orientated Education Sub-Committee of the Medical Curriculum Committee, other plans for **community based education** and specifically for rural health related education are being developed.

3. **Postgraduate Education**

Some thought has been given to possibilities related to **specific postgraduate teaching programmes** in rural health, particularly a diploma in rural medicine and a field of study within the Masters in Public Health but these still need further consideration. I have been involved with teaching on the **MFamMed programme**. As part of that, I launched a group in Botswana for doctors who are working in that country and negotiations are proceeding with their Ministry of Health with a view to working with them towards the establishment of a college of family medicine, linked to their planned medical school. I
have also been involved in postgraduate teaching in Namibia and North West province.

4. **CPD**

Apart from writing material for various journals, particularly for the South African Journal of Family Practice and for the international electronic Journal of Rural and Remote Health, I organised a **skills training workshop** here at Wits which proved to be successful and which I thus plan to organise again on a regular basis to assist doctors working in rural hospitals, especially in North West province, and private general practitioners wishing to upgrade their skills.

5. **Research**

Ongoing research has mainly been through the **Madibeng Centre for Research Studies in District Health** based in Brits, where I continue to serve on the Board as well as being a researcher. (The attached activity report includes a list of publications.) This research has included work on the role of doctors in clinics for the North West Province particularly, aspects of clinic functioning, and the proportion of rural origin students in health science faculties in the country. We have also been involved in a project, using GEMP students, to research attitudes and knowledge towards HIV/AIDS in the Sonop community near Brits, which has been a good example of a relationship between the University, a research centre and a community together with the health authorities, such that neighbouring communities are requesting us to do the same in their areas. I have been involved with some collaborative work with the **Centre for Health Policy** and have held discussions about further work together with them and with the Agincourt Centre.

An exciting new initiative that I am part of is the **Collaboration for Health Equity through Education and Research** (CHEER) which is an MRC funded project involving academics in rural health or community based education in all the faculties in South Africa. We have started, and are planning more, research around what educational interventions may have an impact on health equity in South Africa.

6. **Input into Policy**

I have been involved with a task team of the National Department of Health related to **community service doctors** and their support, as well as giving input into the **rural health strategy** being formulated by the department. Together with my colleague, Jannie Hugo from Medunsa, I completed a consultancy for the National Quality Assurance Directorate related to the implementation of **norms and standards for district hospitals**.

**Conferences**

I was fortunate to attend and give input to a number of **conferences** in this period, including two annual conferences of the Rural Doctors Association of Southern Africa (RuDASA), the Public Health Association of Southern Africa Conference in Cape Town in March (where I was awarded a prize for the best free paper in the Health Service
category), the Family Practice Congress in Stellenbosch in August 2003 (where I gave an invited plenary), the Sixth World Rural Health Conference in Santiago de Compostela in Spain (where I was a member of the International Reference Panel and delivered a number of workshops), and the Third Halifax Symposium on Health care Safety (where I gave an invited plenary address).

The way forward

There are many possibilities and opportunities that lie ahead in the next year. It is obvious, however, that I have reached the limit of my capacity as an individual in this position and need further resources and support in order to make full use of those. The opportunities for development in North West province related to quality initiatives, to postgraduate training and internship, to health science student education, etc., are all ready to move forward as well as other activities in Limpopo province and nationally. The year ahead, 2004, can be expected to be one of important growth provided the necessary support is available.

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January 2004

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CHAIR OF RURAL HEALTH
ADDENDUM TO ANNUAL REPORT 2003

CHAIR OF RURAL HEALTH: SUMMARY OF ACTIVITIES

1. Committee Work

1.1 Committees within Wits
- Faculty Board
- University Senate
- Undergraduate Committee
- Community Based Health Sciences Education Committee
- Admissions Committee
- Professional and Ethical Standards Committee
- MB Curriculum Committee (MBCC)
  Sub Committees of MBCC:
  - Community Orientated Education Sub Committee (Chair)
  - Clinical Competencies Review Group (Co-Chair)
  - Core Competencies Committee
  - GEMP Examinations Committee
  - GEMP III and IV Review Group

1.2 Committees on behalf of Faculty
- Wits Limpopo Joint Management Committee
- Wits North West Joint Management Committee

1.3 National Committees
- Member, Committee for General Practice of the Medical and Dental Professional Board.
- Member, National Department of Health Task Force on Community Service
- Member, National Department of Health Ad-Hoc Committee on Rural Health Strategy
- Member, National HIV Treatment Monitor Reference Group
- Member, Committee of the Rural Doctors Association of Southern Africa (RUDASA)
- Board Member, Rural Health Initiative
- RUDASA Representative to South African Medical Association Council, 2002
- Member, Family Medicine Educational Consortium

1.4 International
- Health for all Rural People (WHO-Wonca Consultation) Committee
- Health for all Rural People Writing Group
- Reference Group, World Rural Health Conference, Santiago de Compostela,
Spain (September 2003)

1.5. Editorial Boards and Related Functions
• Member of Editorial Board, S.A. Journal of Family Practice, and Reviewer
• Member of Editorial Board, International Journal of Rural and Remote Health, and Reviewer
• Reviewer for the Medical Education journal
• Reviewer (Sentinel reader) for McMaster Online Rating of Evidence (MORE) project
• Reviewer for eCPDSA (www.ecpdsa.co.za)

1.6 Other
• Board Member, Madibeng Centre for Research
• Chairman of Board, Bertoni Mercy Clinic

2. Research, Publications and Related

2.1. Publications

• Couper I. Reflections on the Care of the Chronically Ill. SA Fam Pract 2003;45(1):6-8
• Couper I. The rocky road to rural health. SA Fam Pract 2003;45(5):6-8
• Couper ID, Malete NH, Tumbo JM, Hugo JFM. The role of the visiting doctor in primary care clinics. SA Fam Pract 2003;45(6):11-16
• Rural health column in South African Journal of Family Practice.

2.2 Presentations:

• Public Health Association of S.A. Conference March 2003:
  o Couper I, Hugo J. Management of District Hospitals (award for best oral presentation in the health service category).
  o Couper I, Tumbo J, Harvey B, Malete N, Hugo J. Key Issues in Clinic
Functioning.

- HIV Symposium, Wits, August 2003:
  - Scaling up anti-retrovirals: The Rural Challenge.

- RuDASA congress, Sabie, August 2002
  - Workshop: “Coping with caring” (co-facilitator)

- RuDASA congress, Worcester, August 2003:
  - Workshop on the undergraduate curriculum (facilitator).
  - Workshop on mid level medical workers (facilitator).

- National Family Practice Conference, Stellenbosch, August 2003:
  - Rural practice: A model for partnership (invited plenary)
  - Workshop on public private partnerships (invited) (facilitator).

- Sixth World Rural Health Conference, Spain, September 2003:
  - Teaching rural medicine: A South African perspective (invited paper in pre-conference workshop)
  - Health for all rural people: Why is action needed? (invited paper in pre-conference workshop)
  - Workshop on HIV in developing countries (presenter and Chairperson).
  - The Pipeline to Rural Health Education in South Africa (invited input in conference workshop)
  - Workshop on the Melbourne Manifesto on Ethical Recruitment of Health Professionals (facilitator and presenter).

- National Society of Community Nurses International Sustainable Health Congress, Johannesburg, October 2003:
  - Doctors attitudes toward clinic visits (free paper)

- Third Halifax Symposium on Health Care Safety, October 2003:
  - Preaching to the converted: Teaching practicing clinicians ways of dealing with their errors (invited plenary address).
  - Facing our mistakes (invited post conference workshop presentation)

- Other:
  - Quality improvement (presentation to meeting of North West Provincial Health Promotion directorate meeting, Rustenburg, September 2002)
  - Rural Scholarship Schemes (presentation to provincial Human Resources Directors, National Department of Health, November 2002)
  - Rural Health and Civil Society (presentation to HST Civil Society meeting – February 2003)
  - Overview: Management of Chronic Illnesses (presentation to brown bag lunch, Department of Family Medicine, October 2002)
  - Seeking Quality : Some experiences from the coalface (presentation to
brown bag lunch, Department of Family Medicine, May 2003)

- (with Bruce Sparks) Too old to study, too young to be a grandfather: Family medicine training & the GP. (presentation to brown bag lunch, Department of Family Medicine, September 2003)

2.3 Other Research Activities

- Gap Analysis Project for Quality Assurance Directorate of the National Department of Health, together with Professor Janie Hugo. Development of a tool for the implementation of the Norms and Standards for District Hospitals, an implementation guide and a quality improvement guideline for the National Department of Health.
- Evaluation of primary care clinics in the Winterveld area for the European union, together with members of the research team of the Madibeng Centre for Research:
- Collaboration for Health Equity through Education and Research (CHEER), a project funded by the Medical Research Council. Participation in planning meetings, teleconferences and development of two protocols. Member of CHEER team which conducted review of Community-based education at Pretoria University, August 2003.

3 Teaching Activities

3.1 Undergraduate: GEMP

- Relief facilitation of problem based learning groups in Blocks II and IV.
- Four lectures on aspects of rural health to GEMP I
- Participation in planning and development of community doctor theme
- Participation in and planning of the delivery of personal and professional development theme. Specifically, organised the personal development sub-theme and taught three sessions in that sub-theme.
- Participation in planning patient doctor theme for 2004 onwards
- OSCE examiner (August and November 2003)

Postgraduate Teaching in the Family Medicine Department

- Participation in departmental sessions for MFamMed students.
- Development and running of programme for MFamMed in Botswana.
- Participation in examinations for MFamMed

Part-Time Teacher: Medunsa MMed (FamMed) Programme - including supervision of research and participation in training in North West province.

Ongoing Participation in and Development of Family Medicine training in Namibia.
AHA-certified BLS (CPR) Instructor: Delivered Heartsaver CPR course in Namibia and in Botswana.

4. Family Medicine Activities:

Apart from the above, other Family Medicine departmental activities included the following:
- Monthly departmental meetings
- Vocational training: Planning activities in North West Province; coordinating planning meeting with MEDUNSA and Health Department authorities in Klerksdorp; visiting Mafikeng Provincial hospital to plan VT site; visiting Edenvale and contributing to strategic plans relating to Edenvale.
- Family Medicine internship: working towards development of internship rotations in hospitals in North West province, and supporting local management.
- Teaching on patient-doctor theme as required

5. Assessment and Examinations:

5.1 Internal examiner:
- 2 dissertations for MMed (FamMed), Medunsa
- Research report for MSC (Med), Wits

5.2 External Examiner:
- MMed (FamMed) dissertation, Medunsa, February 2003
- MPhil (Palliative medicine), UCT, September 2002
- MPhil (Palliative medicine), UCT, March 2003
- Student intern (6th year) Family Medicine Exam, Pretoria, July 2003
- MMed (FamMed) dissertation, Medunsa, November 2003

5.3 External Assessor for Promotion: Dr David Cameron – Pretoria University – September 2002


5.5 Member of HPCSA team sent to Cuba in April 2003 to assess Cuban doctors.

6. North West Departmental Activities:

In addition to activities covered above, the following were also undertaken:
- Clinic protocol development
- Hospital visits to Lehurutse-Zeerust Hospital Complex, Mafikeng Complex, Klerksdorp-Tshepong Complex, Potchefstroom Complex.
- Participation in Chief Directorate meetings.
• Selection committee for WIRHE students, Bophirima District Department of Health, June 2003 and planning meetings for programme in 2004
• Clinical Skills Course, held for doctors within the Province (and open to other doctors wishing to improve their clinical skills), August 2003.
• Meetings of Chief Directorate, Health Services Delivery
• Planning meetings with Management Committee members, Klerksdorp-Tshepong Hospital, for student rotations
• Organised and attended Neonatal resuscitation course, Klerksdorp Hospital, May 2003
• Participated in National Family Medicine Training Programme workshops, Stellenbosch, August 2003 and Bronkhorstpruit, December 2003
• Facilitated provincial Family Medicine Training workshop, Tshepong, August 2003
• Meeting with Anglo Gold Health Service management, Orkney, January 2003.

7. Miscellaneous

**Scholarship Scheme:** The Wits Initiative Rural Health Education (WIRHE) Scholarship Scheme was established in collaboration with the Bophirima District Department of Health, North West province, and Friends of Tintswalo, Botshabelo district, Limpopo Province. One student from each site is currently studying health professions at Wits with the aim of five additional students from each side in 2004.

**Rural Students Club:** Participated in launch meeting for rural student club at Wits and facilitated four students at Wits to go to the RUDASA Conference in August 2003.

**Primary Health Care Education Unit:** Actively involved in the development of the concept of the Primary Health Care Education Unit at Bushbuckridge, Limpopo, and co-author of the document presented to Limpopo JMC, particularly related to health science student programme.

**E-Mentor, James Cook University, Queensland, Australia** (Honorary Assistant Professor):
Awarded the **WONCA Global Family Doctor of the Month Award** in May 2003
Completed American Heart Association **BLS Instructor’s update** and certification to present AED and FACTS courses (November 2003)

Ian Couper
December 2003