

## OCCUPATIONAL MEDICINE SPECIALIST TRAINING PROGRAMME – MMed (Occ Med) AT THE UNIVERSITY OF CAPE TOWN

CONVENOR: ASSOCIATE PROF SHAHIEDA ADAMS,

MBChB (UCT) DOH (UCT) MFamMed (US) MMed (Occ Med) PhD (UCT) PROGRAMME ADMINISTRATOR: LYNNE HARPER

> OCCUPATIONAL MEDICINE DIVISION, SCHOOL OF PUBLIC HEALTH

> > - JAN 2024 -

#### **OVERVIEW OF THE TRAINING PROGRAMME**

The **School / Department of Public Health** offers a four-year, full-time training programme leading to specialist registration with the Health Professions Council of South Africa. There are currently eight approved training posts in the School, two of which are funded by the Western Cape Government –Department of Health and Wellness i.e., Provincial posts and the remaining posts funded by other external sources (self-funded, dedicated scholarships, National Ministries of Health) as and when they are occupied i.e., Supernumerary posts. Candidates will be trained in clinical occupational medicine, occupational health risk evaluation and management, and research.

Training objectives in the School of Public Health exceed the minimum basic syllabus requirements of the College of Medicine of South Africa (Division of Occupational Medicine).

Trainees participate in modular classroom training by participating in formal postgraduate courses and completion of assessments for selected courses in the Epidemiology track of the Master of Public Health, selected courses from the Divisions of Health Policy and Systems, Health Economics and Environmental Health (offered as part of the MPH) the Postgraduate Diploma in Occupational Health (PG DOH). Additional structured teaching and seminars are provided.

Experience in clinical service as well as occupational health service management (including surveillance functions) is provided by various clinical and workplace-based attachments during the programme which aim to expose candidates to the full scope of specialist occupational medicine practice. Exposure to academic skills development in teaching, student supervision and research is included throughout the programme. By the end of the course candidates will be expected to demonstrate defined competencies in the various components of Occupational Medicine as outlined by the CMSA Regulations.

#### REQUIREMENTS FOR SPECIALIST REGISTRATION IN OCCUPATIONAL MEDICINE WITH THE HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA

Candidates must:

• Be registered with the HPCSA for the full four-year period of specialization for the MMed degree in Occupational Medicine through enrolment with the University. The following course codes are applicable:

| PPH7056W | MMed in<br>Occupational<br>Medicine Part 1   | Theory of basic public and occupational health sciences<br>including epidemiology, biostatistics, and health economics;<br>social and behavioural sciences including industrial relations<br>and psychology; occupational medicine and toxicology<br>(basic, intermediate, and advanced); occupational hygiene;<br>occupational safety; occupational health management<br>systems; environmental health.<br>See detailed curriculum in regulations of College of Public<br>Health Medicine: www.collegemedsa.ac.za |
|----------|--|--|
| PPH7057W | MMed in<br>Occupational<br>Medicine Part 2   | See detailed curriculum in regulations of College of Public Health Medicine: <u>www.collegemedsa.ac.za</u>   |
| PPH7058W | MMed in<br>Occupational<br>Medicine Part 3<br>(in the year of<br>thesis<br>submission) | All MMed students are required to produce a minor<br>dissertation under supervision (60/180 course credits at<br>HEQF level 9), examined by the University. Successful<br>completion of the dissertation is a prerequisite for writing the<br>College exam (MMed Part 2)   |
| DOM 7001 | MMed Clinical<br>Training- year 4  |  |

The most recent version of the rules of study is available on the UCT website: <a href="http://www.uct.ac.za/students/postgraduates/handbooks/">http://www.uct.ac.za/students/postgraduates/handbooks/</a>

- Have completed four years of training formally approved by the Head of the Occupational Medicine Division in a recognized (registrar's) training post in the Department. Continuous monitoring and evaluation of the quality and quantity of the work output of candidates will be performed by the Programme convenor, consultant staff in the Occupational Medicine Division and the Department of Medicine. It is incumbent upon the candidates to demonstrate adequate attendance and performance in terms of the list of expectations below.
- Successfully complete the College examinations timeously to obtain a Fellowship of the College of Public Health Medicine (Division of Occupational Medicine) of the Colleges of Medicine of South Africa
- Complete a dissertation on an aspect of their work prior to writing the College examination. Successful completion of the mini dissertation examined through the university is an entry requirement for the College examination under College rules.

This will result in an MMed degree being awarded to the candidate in addition to obtaining the College Fellowship.

## DEPARTMENTAL EXPECTATIONS OF REGISTRARS

#### 1. ACADEMIC INSTRUCTION: POSTGRADUATE DIPLOMA IN OCCUPATIONAL HEATH (DOH), MASTER OF PUBLIC HEALTH (MPH) AND SPECIFIC MASTER'S IN MEDICINE (MMED) COURSES

Registrars should attend the DOH, MPH, and participate fully. This includes lectures and other coursework, assignments, tests, and examinations. Registrars are not required to complete research projects for the MPH. They may however choose project work arising from their courses as a vehicle to complete their short report for the College examination. The College Fellowship examination includes the submission of one short research report such as a clinical case report with research commentary.

*In addition*, registrars are required to do an MMed dissertation. This will allow them to obtain the MMed degree, which is an academic qualification. The MMed dissertation thus requires the submission of a second research report, separate and independent from the College Fellowship submission (short report).

## 1.1 Coursework of the Postgraduate Diploma in Occupational Health (PG DOH)

Attendance of the Postgraduate Diploma in Occupational Health is compulsory, unless the candidate has already completed the course at UCT or any other university in South Africa, or an equivalent in another country. In the latter case the registrar will audit the course or appropriate components thereof at the discretion of the convenor.

The Postgraduate Diploma in Occupational Health at UCT is delivered over 24-months. It offers four integrally linked courses that each have a combined contact block week (in-person or online) coupled with online quizzes and assignments during the semester. On completion of the Postgraduate Diploma in Occupational Health, candidates should be competent in the four main areas of focus of this programme viz. Occupational health risk assessment and management, Occupational medicine and work ability, Occupational health services management, ethics and legislation; and practicing integrated occupational health in context. Relevant legislation, ethics and standards pertaining to these four focus areas are covered. The practical activities include work-place visits, audiometry and spirometry, ILO system for classifying chest radiographs and clinical case studies. Candidates are required to attend all contact block sessions, complete all online text quizzes and submit 4 portfolio assignments over the duration of the course.

### 1.2 Coursework of the master's in public health (MPH)

It is a requirement of the MMed programme that all registrars undertake the **Epidemiology and Biostatistics** track of the MPH. These are core competencies for occupational medicine specialists and the Department is one of the few in the country that offers formal training to advanced level in these disciplines that covers the CMSA CPHM (Occ Med) syllabus thoroughly as well as being the secret to success in the report and dissertation. Registrars thus enroll in all required modules and take additional modules in health economics, environmental health and health policy and systems (10 modules in all). Additional optional modules can be taken should they be interested in a particular subject area beyond what is required. The core modules and recommended sequencing are outlined below:

### Core modules:

- 1. Environmental Health Policy (PPH7098F)
- 2. Introduction to Epidemiology (PPH7018F)
- 3. Biostatistics I (PPH7021F)
- 4. Quantitative Research Methods (PPH7070S)

#### Epidemiology track modules:

- 1. Biostatistics II (PPH7092S/STA5055F)
- 2. Biostatistics III (STA5056F)
- 3. Advanced Epidemiology (PPH7029F)
- 4. Epidemiology of Non-Communicable Diseases (PPH7065S)
- 5. The Economics of Health Systems (PPH7077S)
- 6. Health Policy and Planning (PPH 7041S)

## Optional (for auditing by special permission)

Evidence-Based Health Care (PPH7022S)

| SEM 1 (YR1)                    | SEM 2 (YR1)                      | SEM 1 (YR2)              | SEM 2 (YR2)                    |
|--------------------------------|----------------------------------|--------------------------|--------------------------------|
| Biostats I                     | Biostats II                      | Biostats III             | Health Policy and Planning     |
| Intro to<br>Epidemiology       | Epidemiology of NCD              | Advanced<br>Epidemiology | Economics of<br>Health Systems |
| Environmental<br>Health Policy | Quantitative<br>Research Methods |                          |                                |

Proposed Sequencing of modules

### 1.3 Coursework of the Diploma in Health Management (DHM)

Attendance of the Diploma in Health Management is optional.

Registrars will not be able to obtain the diplomas (DOH, DHM) or masters (MPH) degree even though they participate fully in the coursework as university policy prohibits dual course registration and qualification. The content of these courses is however part of the MMed programme for Occupational Medicine specialization. The university requirement of successful registrar participation in these and other courses results in the MMed degree. Registrars will be provided with a certificate of attendance on request, which they may use for Curriculum Vitae purposes as evidence of having completed the coursework requirements of these courses work programmes.

## Academic teaching for the MPH programme generally takes place on Thursdays and occasionally other afternoons and week- long block teaching for DOH/MPH.

Registrars must ensure that they are released from their service attachments to attend the above courses.

#### **Recommended texts and resources for Occupational Medicine**

Aside from the prescribed textbooks recommended by the course convenors of the abovementioned academic programmes, the following texts are recommended specifically for occupational medicine registrars:

- Hobson J, Smedley J (eds). Fitness for work: The Medical Aspects. 6<sup>th</sup> edition, Oxford University Press, 2019
- LaDou J and Harrison R. Current Occupational and Environmental Medicine, 5<sup>th</sup> edition. Lange Medical Books/McGraw-Hill, 2014
- Levy, Wegman, et al. Occupational & Environmental Health. Recognising & Preventing Disease and Injury, 6th edition, Oxford University Press, 2011
- Gardiner and Harrington. Occupational Hygiene, 3<sup>rd</sup> edition, Blackwell, 2005
- American Medical Association Guides to the evaluation of Permanent Impairment 6<sup>th</sup> edition, 2022
- Kerry Gardiner, David Rees, Anil Adisesh, David Zalk, J. Malcolm Harrington. Pocket Consultant: Occupational Health, 6th Edition. ISBN: 978-1-119-71861-1
- Saxe N, Jessop S, Todd G. Handbook of Dermatology for Primary Care. A Practical Guide to Diagnosis. Oxford University Press, 2nd edition, 2008
- Joubert G, Myer L. Epidemiology: A research manual for South Africa. Fourth Edition, ISBN: 9780190758691

- OHS and Labour Law standards: Jutas, Sabinet, Acts Online (http://www.acts.co.za/)
- Electronic web resources: e.g., International Labour Organisation (ILO) Encyclopaedia of OHS, National Institute for Occupational Safety and Health (NIOSH), American Conference of Government Industrial Hygienists (ACGIH), Health and Safety Executive (HSE), Canadian Centre for Occupational Health and Safety (CCOHS), Safe Work Australia, Wireless Information System for Emergency Responders (WISER), Wikipedia and Toxipedia
- Journals: Occupational and Environmental Medicine, American Journal of Industrial Medicine, Occupational Medicine (British), Scandinavian Journal of Work, Environment and Health, International Journal of Occupational and Environmental Health, Occupational Health Southern Africa, Current Allergy and Clinical Immunology.

# 2. CLINICAL/OCCUPATIONAL HEALTH SERVICE ATTACHMENTS AND ROTATIONS

During their training registrars will be required to work in a range of clinical/health services. The Department may also enlist agreements with specific services for registrar placement under appropriate supervision. All clinical/health service attachments will be arranged by the occupational medicine programme convenor, in consultation with individual registrars. The rotation cycles are February to July and August to January.

## 2.1 Clinical attachments

All registrars will be required to do the following **clinical attachments** (6 months minimum) as will be mutually agreed upon with the supervisory consultant in each clinical programme:

- Respiratory Clinic programme in the Division of Pulmonology, Department of Medicine (Prof Richard van Zyl)
- Occupational Medicine Clinic and a dedicated monthly Occupational Dermatology Clinic in the Division of Occupational Medicine, School of Public Health/Department of Medicine (Assoc. Prof Shahieda Adams)

The training record of experience for these attachments will comprise at least one clinical case report of a patient managed per the 3 main clinical attachment subjects mentioned above. This will be attached to the Portfolio of Learning duly signed by the clinical supervisor and maintained electronically for final submission to the CMSA upon registration for the final examination.

Short attachments may also be arranged in other clinical units, such as ENT, Audiology, Hand Clinic, General Dermatology, in other parts of the provincial or local authority health service, or with insurance companies dealing with disability assessment.

### 2.2.1 Public sector occupational health services attachment for Western Cape Government (WCG) Department of Health and Wellness employed registrar at Groote Schuur Hospital

The junior WCG registrar will be attached to the Head of Quality Assurance - Quality, Safety and Risk Management (SHERQi) at Groote Schuur Hospital and work closely with the Quality Assurance Manager and the GSH Occupational Health and Safety team Thus, in addition to fulfilling all the occupational medicine clinical service requirements, the registrar will also:

- Provide technical support in relation to occupational health risk assessment and management, medical surveillance, and incapacity/disability management of staff in public sector hospitals and facilities
- Conduct applicable research and policy development in occupational health
- Identify "hot spots" through the clinical occupational health service that may require further attention

#### 2.2.2 Public sector occupational health services attachment for Western Cape Government (WCG) Department of Health employed registrar based in the Directorate: Assurance

The senior WCG registrar will be attached to the Directorate: Assurance. Thus, in addition to fulfilling all the occupational medicine clinical service requirements, the registrar will also:

- Provide technical support in relation to occupational health risk assessment and occupational health service development and support of public sector hospitals and facilities
- Conduct applicable research and policy development in occupational health

## 2.3 Specific industry attachments for registrars employed in accredited sites

For registrars not employed by the Western Cape Government Health Department, specific industry attachments will be arranged only after each training platform has been accredited by the occupational medicine programme convenor to ensure that there is adequate supervision of the registrar's activities. The requirement is that there be an on-site supervisor and a signed memorandum of understanding undertaking that the registrar be released for all academic activities and clinical attachments during the training period.

#### 2.4 Procedure governing rotations

Registrar accountability will be to the responsible consultant/specialist of the Clinical/Workplace/Health Department "service unit" and the Convenor of the Occupational Medicine Training Programme.

Each registrar will be assigned an academic mentor in the Department who will be available to the registrar and ensure that progress is being made towards qualification. The registrar will meet the mentor at regular intervals with meetings being more frequent at the beginning of the attachment to plan the details of the attachment.

The attachment will be governed by a written set of learning objectives and a personalised job description drawn up by the supervisory team. The academic mentor and clinical / health service supervisor should discuss the appropriateness of all work envisaged, particularly applied research projects, in advance to ensure that registrars use their time optimally. As part of the job description, arrangements for vacation leave should be discussed with both clinical / health service supervisor and academic mentor.

The team will also meet periodically to monitor progress against the initial plan. This process of discussion should continue during the course of the attachment and applies particularly to ad hoc work that was not envisaged when the job description was drawn up.

There should be frequent workday contact between clinical / health service supervisor and the registrar.

Clinical attachment and health service supervisors should be familiar with the MMed (Occ Med) curriculum and learning objectives and be willing to participate in the registrar training process. They should be accessible to the registrar, prepared to delegate appropriate tasks and responsibilities to the trainee while maintaining adequate supervision, provide honest feedback to the registrar, have an active commitment in occupational medicine education, and provide timely feedback to the academic mentor about the progress of the registrar.

There should be at least monthly contact with the academic mentor for monitoring purposes.

Personal appraisal will consist, as appropriate, of regular (monthly) meetings with the academic mentor, end-of-attachment reports, published and unpublished written reports on project or other work, oral presentations, reports from staff for whom the registrar is responsible, and the service supervisor.

## 2.5 Appointment of "non-provincial" registrars at Groote Schuur Hospital

Before commencing their clinical rotations, registrars not on Provincial Health Department conditions of service must apply to the Groote Schuur People Management department for a letter of appointment to the hospital as an "unpaid supernumerary registrar working under supervision of a specialist appointed as joint universityprovincial health department staff". The period of appointment must be specified and should cover the whole period of registrar training. The Provincial Department of Health will assume Medico-Legal liability in the usual way provided that the registrar is working under supervision of a joint university-provincial staff or provincial staff member. The registrar will also be entitled to a hospital ID card. However, it is recommended that registrars have their own additional liability cover for any non-provincial related clinical work.

## 2.6 Appraisal and recording of attachment experience - Formative assessment report in the Portfolio of Learning

Registrars are required to provide the occupational medicine programme convenor with copies of the written biannual portfolio report (midyear and end of year) of all their work during their service attachments. At the end of each attachment, the registrar must ensure that the clinical supervisor signs off the relevant section after it has been signed by the academic mentor and sent to the programme convenor for filing. For WCG registrars, the relevant SPMS form, together with the Formative Assessment also needs to be handed in. The Portfolio of Learning and any supporting documents must also be kept in electronic format and submitted for evaluation prior to the College examination.

## 3. DEPARTMENTAL MEETINGS

#### a) School noon meeting

Registrars must attend noon meetings (Thursdays at 12h00 - 13h00). In addition, the Division of Occupational Medicine presents at these noon meetings once or twice per year – which is used for research findings or outcomes of projects.

#### b) Occupational medicine clinical case presentation and journal club

On a monthly basis (Thursdays at 10h30 - 12h00) registrars are required to attend an occupational medicine clinical case and journal club that focuses on clinical reviews, diagnostic and management issues in occupational medicine. Registrars each get a turn to present on a topic assigned by the consultant or a clinical case. Sessions cover a wide range of topics and are aimed at preparing for the College Fellowship examinations, clinicals and oral exams.

## c) Occupational Health Seminars

Registrars must attend all ad hoc seminars organised on occupational or environmental health topics in the School of Public Health organized by the relevant teaching divisions and the Centre for Environmental and Occupational Health Research. Registrars are strongly encouraged to attend monthly evening SASOM meetings and for senior registrars to present at these meetings as part of their continuous professional development.

## d) Programme Committee for Occupational Medicine

Registrars must attend these meetings that form part of the registrars' feedback meeting, held every three months. The programme committee comprises the following members:

- Convenor, MMed (Occ Med) Programme: Associate Prof. Shahieda Adams
- Head, Division of Occupational Medicine: Prof. Mohamed Jeebhay
- Consultants for clinical attachments:
  Occupational Medicine: Assoc Prof Shahieda Adams
- Honorary consultant: Drs Itumeleng Ntatamala and Zahida Sonday
  - Respiratory Medicine: Prof Richard van Zyl-Smit
  - Dermatology: Prof Gail Todd
- Occupational medicine registrars

## e) General registrar's meeting

Registrars may also need to attend general registrar meetings in the School should such be arranged. Registrars need to know who their registrar representative is – this is important for input into meetings of the Council meetings of College of Public Health Medicine in the CMSA.

#### f) Monthly SOPHFM staff meetings and departmental tea – if attachment allows

## 4. **RESEARCH AND COMPUTER**

Registrars should participate fully in research activities of the Centre Environmental and Occupational Health Research (CEOHR). Their academic mentor will serve as research supervisor in the first instance, but their dissertation supervisor could be different. It is recommended that registrars approach their academic mentors early in the programme to find an appropriate dissertation topic, which could be based on analysis of data already collected but not previously reported.

Before embarking on the master's dissertation research, the full proposal with all appendices (data collection tools, informed consent forms etc.), the synopsis, a completed ethics form and a completed D1 form needs to be submitted to the chair of the departmental research committee for approval. Further details, including relevant forms to be completed are obtainable on the Department website. Registrars must familiarize themselves with the processes for institutional and ethics approval and for access to public sector health facilities. A memorandum of understanding and progress report are completed by the student and the supervisor once the research proposal has been approved.

## 5. PROJECTS, PUBLICATIONS AND REPORTS

The registrar should aim at completing a number of projects for their portfolio. All projects, clinical attachments, and health service- related work should result in reports that must be submitted to the occupational medicine programme convenor. Whenever possible registrars are encouraged to present their work at local conferences, which the School will subsidize and publish their research findings in academic journals. Close contact with the academic mentor or other relevant departmental staff is essential to ensure quality of output.

# 6. MEDICAL STUDENT UNDERGRADUATE PROGRAM & POSTGRADUATE DIPLOMA IN OCCUPATIONAL HEALTH (DOH)

Registrars should participate in undergraduate occupational medicine training including:

- Teaching (2<sup>nd</sup> year, 4<sup>th</sup> year, special study modules, 6<sup>th</sup> year electives)
- Supervision of research projects (4<sup>th</sup> years)
- Where assigned, taking responsibility for course coordination of occupational medicine input into these training programmes e.g., factory visits (DOH)

## 7. LEAVE

Registrars should take their leave preferably in December and January by agreement with the line manager of the employing authority / service to which they have been allocated and in consultation with the Head of Division (especially for supernumerary registrars). For WCG employed registrars, leave forms are to be submitted to the line manager for onward transmission to the People Management department at Groote Schuur Hospital. Leave must not be allowed to accumulate, as this has previously resulted in serious disruption of service delivery. Sick leave practice must conform with the rules of the employing authority. Medical certificates must be supplied if absent for three or more consecutive days (weekends and public holidays contribute to consecutive days). The service unit supervisor should be informed as early as possible on the first day of any sickness absence if the sickness absence continues for 3 or more days.

### 8. CONTACT DETAILS AND COMMUNICATION

Registrars must keep the School of Public Health informed at all times of changes in addresses, telephone numbers, cell numbers, email addresses so that they may be contacted when required. When rotating through Health Department or clinical services, registrars are to notify the MMed Programme Administrator in the Department (currently, Lynne Harper) of their telephone number and the extensions where they can be contacted. Registrars should also monitor their mailboxes and e-mail, and Departmental notice boards for messages and circulars. Registrars are expected to maintain continuous email access during working hours.

### 9. REGISTRAR REPRESENATIVE

The senior registrar, being the registrar closest to completion, will serve as registrar representative and be responsible for Occupational Medicine Clinic scheduling and other matters that may arise. Should there be more than one registrar with the same service period, one will be requested to take on this role by the MMed programme convenor.

## 10. REGISTRAR'S OFFICE (4<sup>th</sup> floor Falmouth Building), PC FACILITIES AND RESOURCES

The mentoring role of academic supervisors are always the first port of call should the registrar require any assistance. Support services for health and wellness and mental health provided by the university are also available. The registrar office and computers are for use by registrars when they are on campus. Access to storage cupboards must be obtained from the programme administrator. Registrars must have computer access either on a PC at home or in the department (Registrar room). Registrars must ensure they have computer competency in all the components of Microsoft Office, the webbased teaching platform, Statistical software as well as email and internet usage (if necessary, by attending courses at Information Technology Services, UCT). It is the responsibility of all registrars to access all programme-related information and resources on the online teaching (currently) on a regular basis.