

SAAFP 2023 CONFERENCE

- **SUBTHEME: BUILDING PROFESSIONAL CAPACITY FOR INTEGRATED CARE**
- **PRESENTATION TITLE: COMMUNITY ORIENTED PRIMARYCARE FOOT-PRINTING- THE WITS-NMFC UNDERGRADUATE PROGRAMME EXPERIENCE**



SAAFP 2023 CONFERENCE

'COMMUNITY ORIENTED PRIMARY CARE'
FOOT-PRINTING- THE WITS-NMFC
UNDERGRADUATE PROGRAMME
EXPERIENCE



Introduction



WITS. FOR GOOD.

MFC Collaboration Programme



UNIVERSITY OF THE
WITWATERSRAND,
JOHANNESBURG



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• Integrated Care

- Integrated care is about the organisation and delivery of health services to provide seamless, coordinated, efficient and effective care that responds to all a person's health needs.
- Involves collaboration and cooperation between providers and services and occurs across primary, secondary and tertiary care.

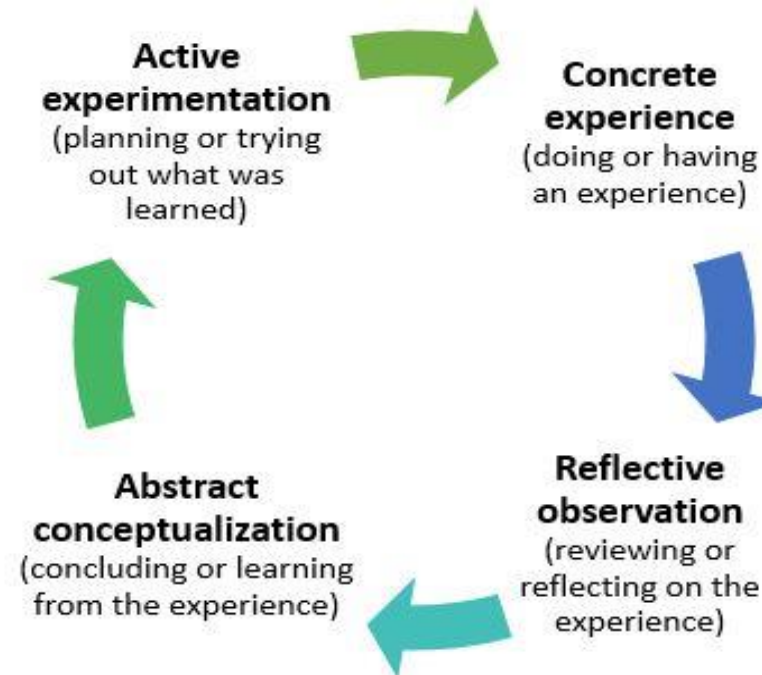
• Community Oriented Primary Care model (COPC)

- Community oriented primary care (COPC) is an approach to improving health that bridges the gap between facility-based services **and** where people's lives truly begin and end- in the family and community.



Theory underpinning COPC

- Experiential learning



WITS-NMFC COPC project Aim and Objectives

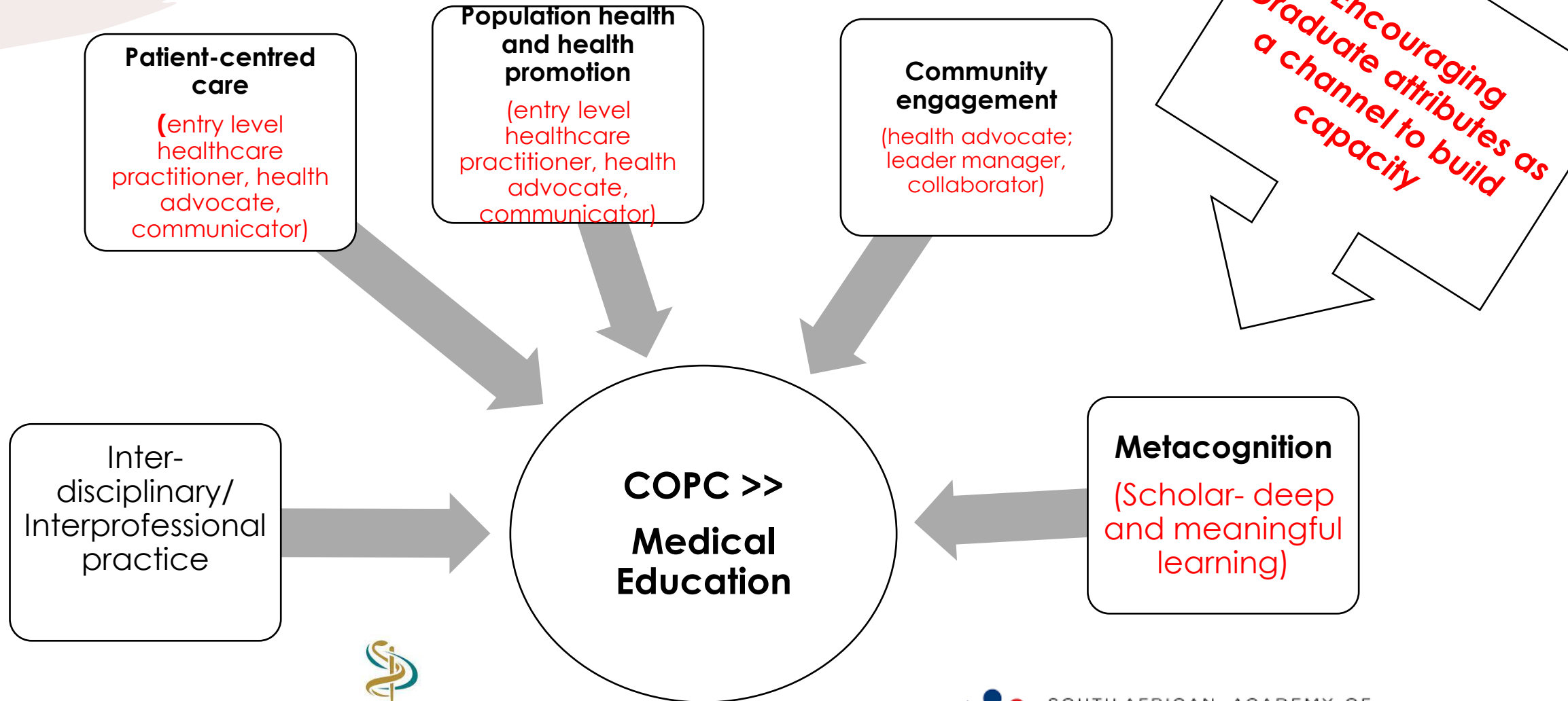


- **AIM:** To explore best-practice Community-Oriented Primary Care (COPC) in the context of Primary Health Care (PHC) Re-engineering.
- **OBJECTIVES:**
 - To profile a chosen community and develop a provisional community diagnosis with the data and experience of CHWs deployed in the community
 - To explore the challenges of intersectoral collaboration and community participation.
 - Describe a patient, based on the priority problem identified in the community diagnosis, and their management (including community-social supports available)
 - Reflect on health promotion and communication in the context of this patient's problem and related problem group/s in this community.

- The World Health Organization (WHO) promotes Community-Oriented Primary Care (COPC) as an essential strategy towards achieving Universal Health Coverage and improving population health.
- COPC is a model of healthcare that emphasizes the connection between the health of individuals and the health of populations, with an emphasis on service delivery at the community level



COPC and Medical Education



The WITS-NMFC COPC assignment



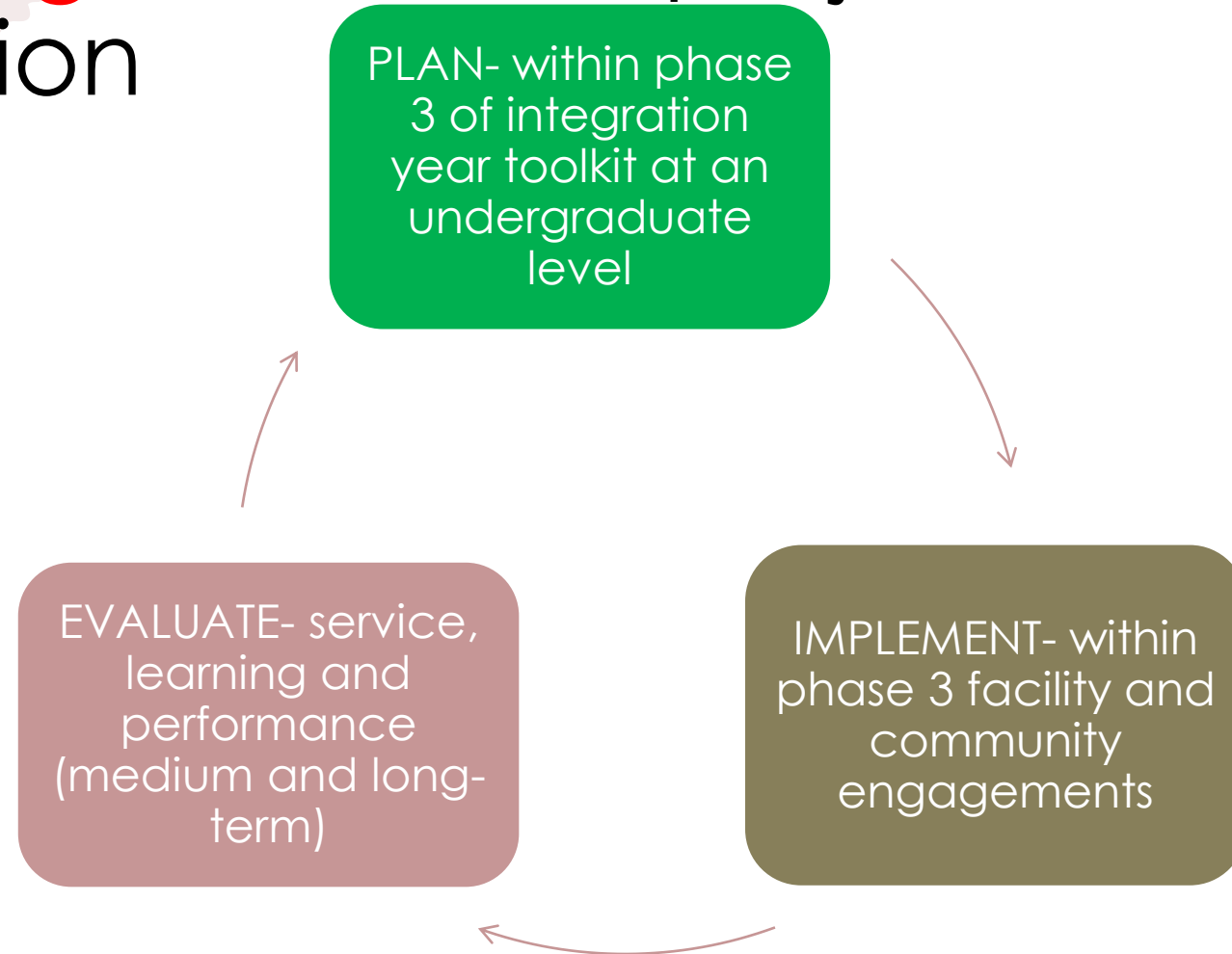
Methods

150 students; 5 AHCs; 25 communities; 500+ families ; 25 key patients; >7 CHCs/PHCS; multiple interdisciplinary engagements and collaborations

Group work project with Clinical educator and Family Physician supervision; WBOT and interprofessional linkages

Learning outcomes/ assessment of assignments and impact assessment

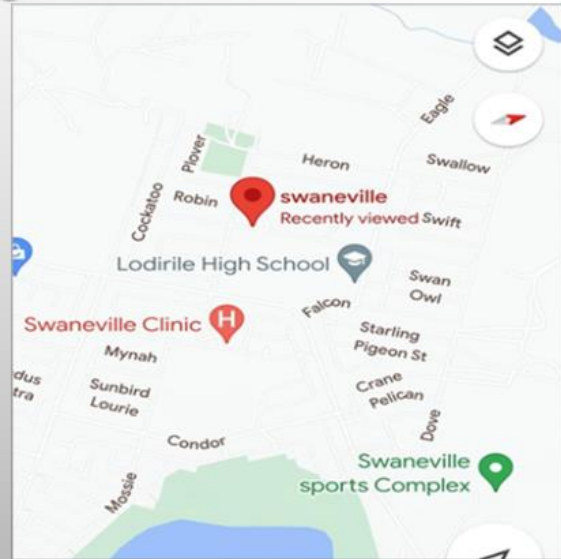
Adapting the COPC project for medical education




Results

COMMUNITY DESCRIPTION:

A COMMUNITY LOCATED IN SWANEVILLE KRUGERSDORP BLOCK 9 AT MOGALE CITY IN GAUTENG PROVINCE



COMMUNITY-ORIENTATED PRIMARY CARE PROJECT OF WARD 13 SHARPEVILLE



Group C1

Authors: Pawan Chetty 717261
Nolithe Mkhomo 138295
S... Manboth...
...gang maj...
...Beauty...
...Mabel... 248577

Tutor: ...

A presentation slide for a community-oriented primary care project. The slide features the University of the Witwatersrand Johannesburg logo on the left. The title is "COMMUNITY-ORIENTATED PRIMARY CARE PROJECT OF WARD 13 SHARPEVILLE". Below the title, it lists the authors and their IDs, and the tutor's name. The slide is set against a dark blue background with a red vertical bar on the right.

GAINS

- Patient is treated holistically through biopsychosocial approach.
- Prevention is better than cure.
- We have learnt the importance of communication between health-care system and community.
- Environment plays a huge role in patients health.
- Importance of multidisciplinary team.

TIME SPENT: 5 months

The community diagnosis

Biological:

- ✓ HIV and its opportunistic infections
- ✓ Hypertension & Diabetes Mellitus

Psychosocial:

- ✓ unemployment,
- ✓ teenage pregnancy,
- ✓ substance abuse & crime
- ✓ low pressured water
- ✓ load shedding



COPC PROJECT: THE BURDEN OF HIV ON THE PAEDIATRIC COMMUNITY OF KHUMA

DR KK: GROUP E2

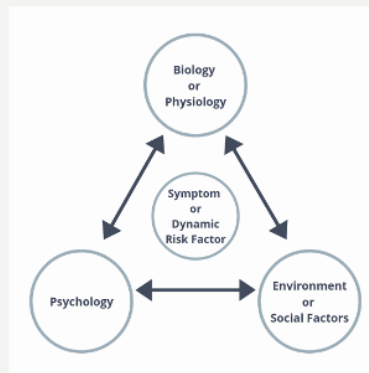
THE PATIENT BIOPSYCOSOCIAL ASSESSMENT

Biomedical assessment/Clinical assessment:

- RVD reactive WHO stage 3.
- TB Bronchiectasis.
- Underweight for his age

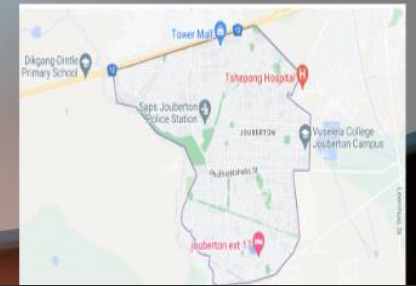
Psychosocial assessment/ Individual assessment:

- Poor socio-economic status
- Non-adherence
- Immunization not up to date
- Unstable home
- Negligence of the care giver



JOUBERTON

- It is a small township in Klerksdorp under Dr Kenneth Kaunda District municipality occupied by mainly black people.
- It is the first black settlement of Klerksdorp which was situated in the south of the town.
- Jouberton is previously known as Makweteng and it was established in 1907.
- Jouberton has a population of +104 977 people in 2021
- It has an area surface of 15.74 km²



HOME VISITS

Consent form

COPC RESEARCH CONSENT FORM

Name of Researcher(s): T. Mthabela, P. Nkomo, T. Phiso, E. Kallang, S. Mkhize and M. Ntsheng

Title of study: Community Oriented Primary Care (COPC)

Please read and complete this form carefully. If you are willing to participate in this study, ring the appropriate responses and sign and date the declaration at the end. If you do not understand anything and would like more information, please ask.

I have had the research satisfactorily explained to me in verbal and / or written form by the researcher. YES / NO

I understand that the research will involve: Interview, taking photos and videos and presenting the information at WITS university. YES / NO

I understand that I may withdraw from this study at any time without having to give an explanation. This will not affect my future care at the clinic. YES / NO

I understand that all information about me will be treated in strict confidence and that I will not be named in any written work arising from this study. YES / NO

I understand that any photos or videos material of me will be used solely for research purposes and will be destroyed on completion of your research. YES / NO

I understand that you will be discussing the progress of your research with the clinical educator at Wits University. YES / NO

I, _____, freely give my consent to participate in this research study.

Participant Signature: _____ Date: _____

Person Taking Consent: _____ Date: 13/06/2023

01 . Team & pt



02 . Pt house



03 . Pt's kids



04 . Consent





Discussions

- Opportunities and Success
- Challenges
 - Programmatic (tenure)
 - Community and stakeholder engagements and access



https://drive.google.com/file/d/1g4rc8Zw_qBzFpOTkfPDxfdoWptxxPo0i/view?usp=drivesdk

Acknowledgments

- Cohort 4 NMFC students
- WITS-NMFC Clinical Educator team
- Family Physicians in the 5 Academic Health Complexes
- The National Dept of Health
- The patients and families and communities visited

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