



# Evaluation of Medical Interns' Family Medicine Orientation Programme, Ekurhuleni Health District

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# Presentation Outline:

1. Introduction
2. Methods and analysis
3. Results
4. Evaluation of Medical interns
5. Conclusion and recommendations
6. Acknowledgements



# Study Background

## Description of problem

- To equip medical interns with exposure and training in PHC and community settings.
- To prepare Medical interns to independently perform basic life-saving procedures.
- To introduce the orientation program as a guide map.

## Purpose

- To evaluate medical interns' orientation program on the first day of the Ekurhuleni Health District Family Medicine rotation.

## Objective

- To describe the characteristics of the study participants.
- To analyse feedback on the orientation program from the participants.
- To make recommendations for improvement.

# Method



Component	Detail
Study design	Cross-sectional survey evaluating the feedback forms
Study population	All second-year medical intern doctors starting family medicine rotations.
Study site	Health facilities, hospitals, CHC and PHC in EHD
Sample size	228 (Total number of interns=311, 248 respondents)
Data collection	Google feedback questionnaire drafted in English, comprising 3 sections
Ethical approval	UP ethics committee, Approval Ref:GP_202409_066, 22 Oct 2024

# Data analysis

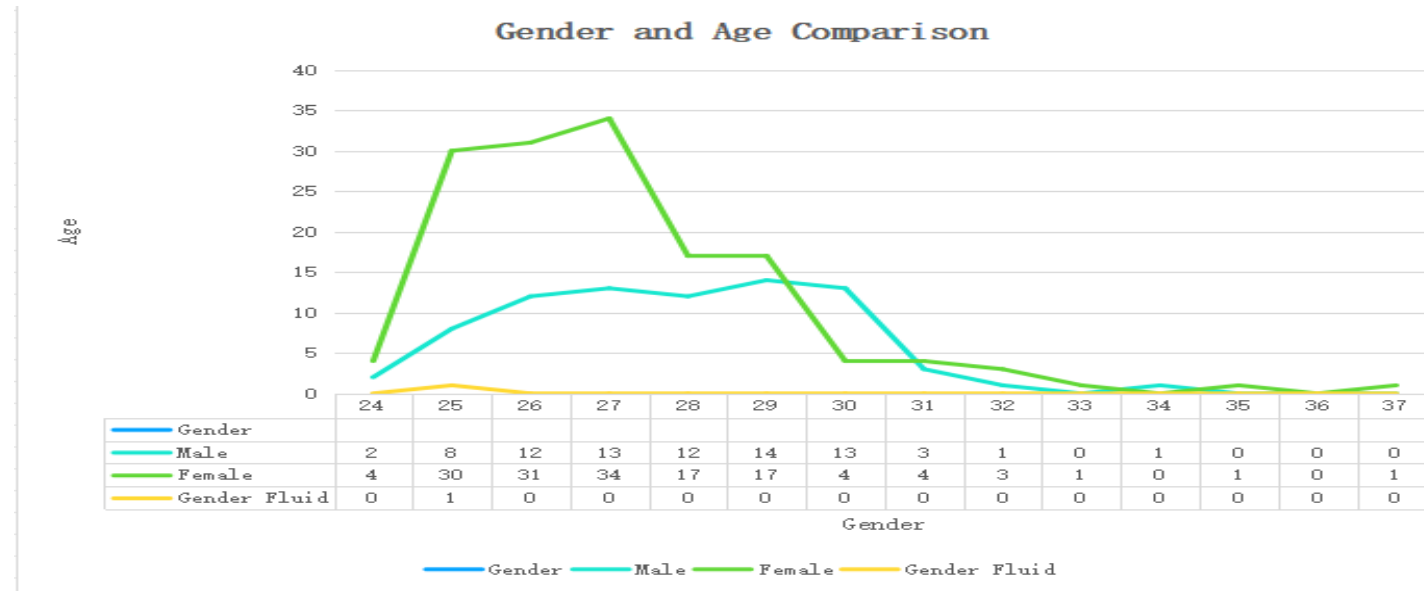
## Participant's characteristics

- ❑ Data were analyzed using Statistical Package for the Social Sciences (SPSS) software .
- ❑ Descriptive statistics: frequency distributions, measures of central tendency, and measures of dispersion.

## Thematic content analysis

- ❑ ATLAS.ti 2025 used for analysis
- ❑ Verbatim transcripts imported and open coded.
- ❑ Open coding was used to generate initial codes.
- ❑ Codes organised into categories, sub-themes, and themes.

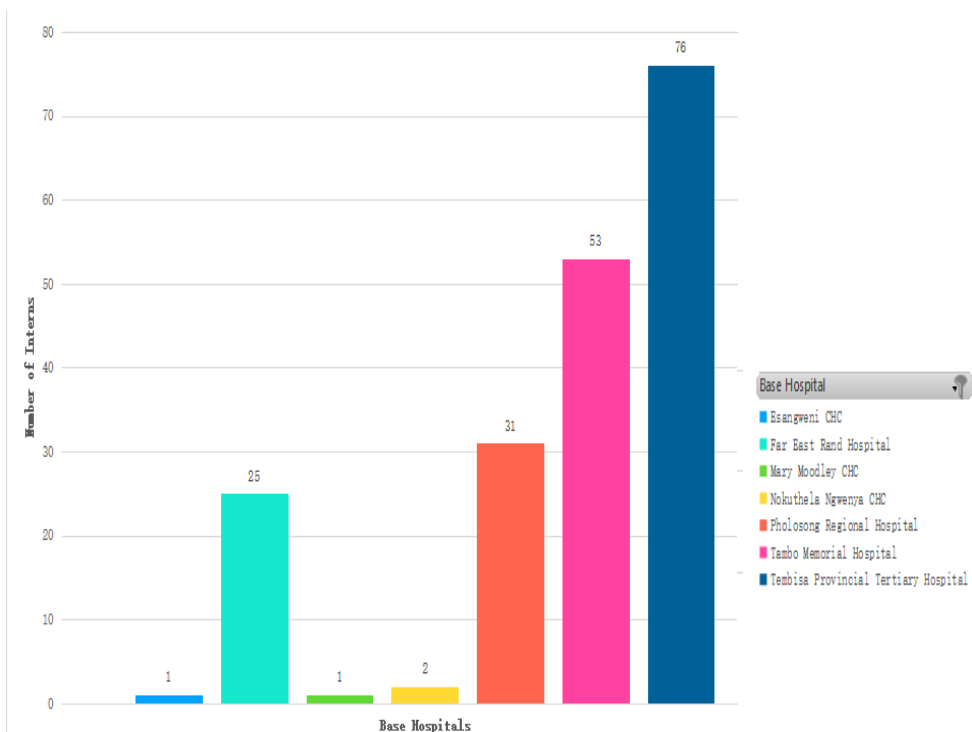
# Results(Age and gender profile)



## Distribution of age and gender

- 228 questionnaires were analysed, 147 females (64.47%), 80 males (35.09%), 1 gender fluid individual (0.43%)
- Age from 24 years to 37 yrs, mean of 27 years.

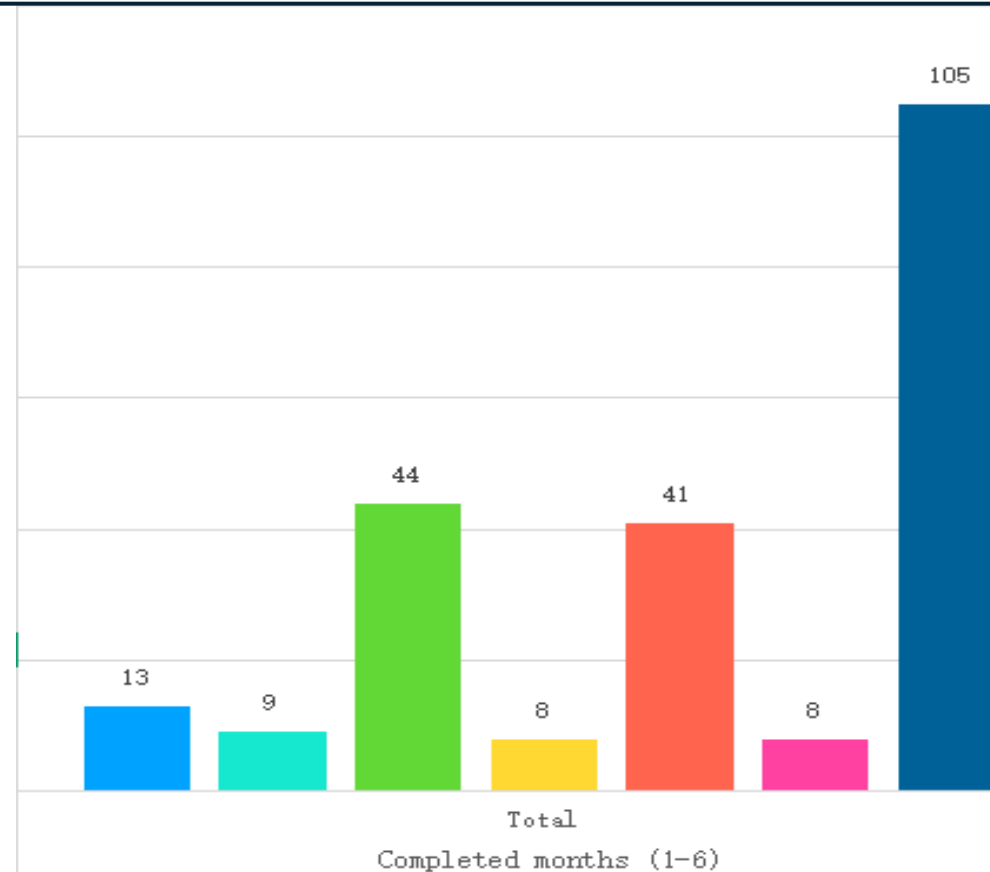
## Base facility



The distribution of the number of Interns in each base hospital/CHC

- Highest placements was TPTH 76(33.3%), TMH 53(23.2%),
- PRH 31(13,6%), FERRH 25(11%) and 4(1.8%) were shared Esangweni, Mary Moodley and Nokuthela Ngwenya CHCs

## Months in Family Medicine



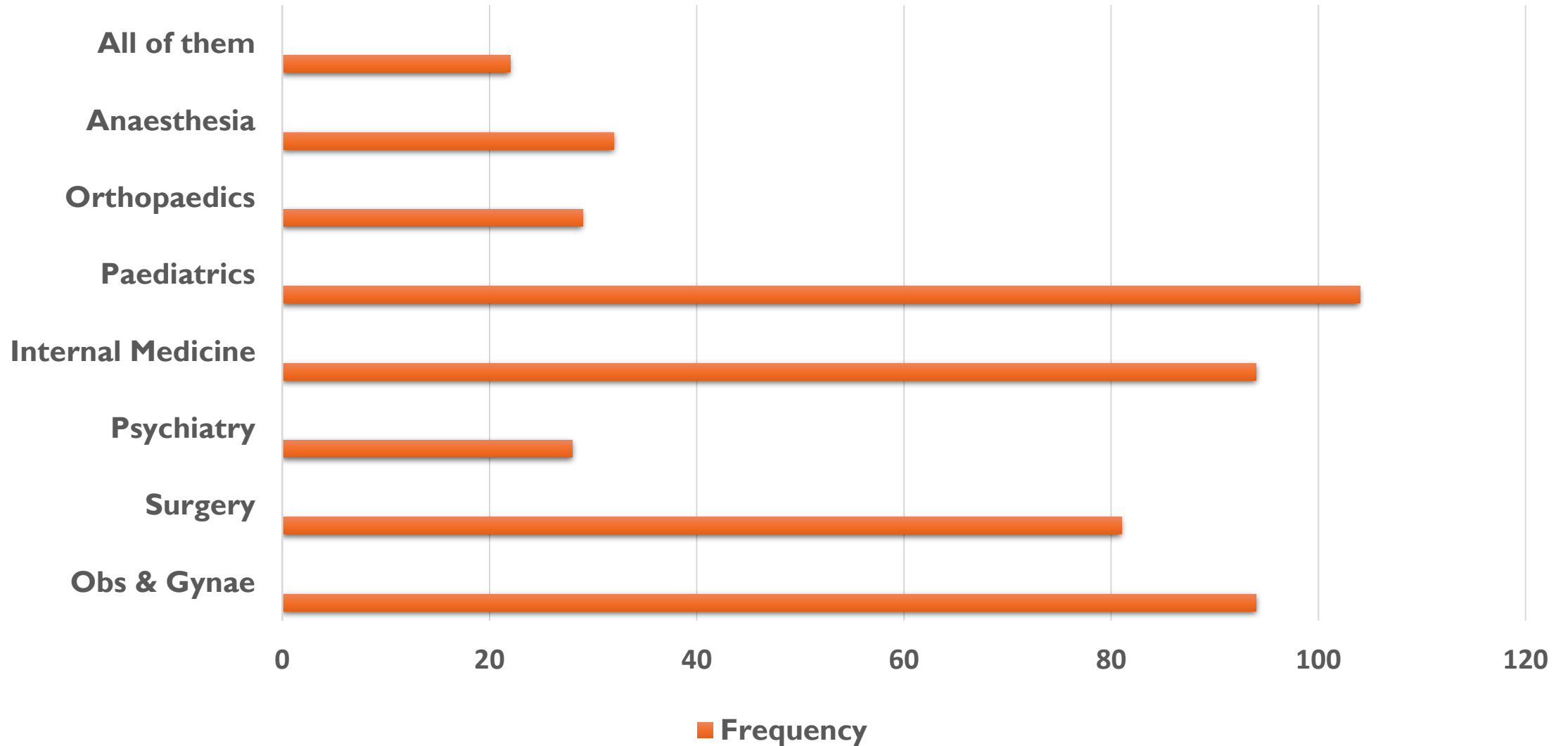
### No of Months

- 6 = 105(46.05%),
- 4 = 41 (1.98%) ,
- 2<sup>nd</sup> = 9 (19.30%)
- Initiation phase= 73(32.7%) of the total cohort.

- Almost 50% of interns were in their 6 months rotation whilst 32% were in the 1<sup>st</sup> month.



# Proportion of specialist departments with orientation



# Evaluation by medical interns

Q1: How was your orientation?

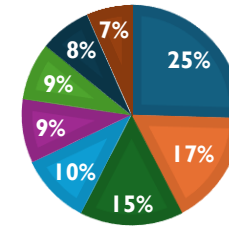
“Helped me to understand how CHC and PHC operate.”  
(Participant 47, male, 28 years)

Q2: What did you like the most?

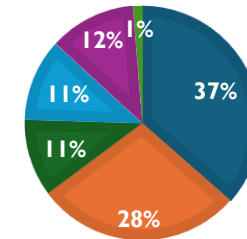
“No formal orientation was given in the first-year disciplines.”  
(Participant 33, female, 28 years)

Q3: What did you like most?

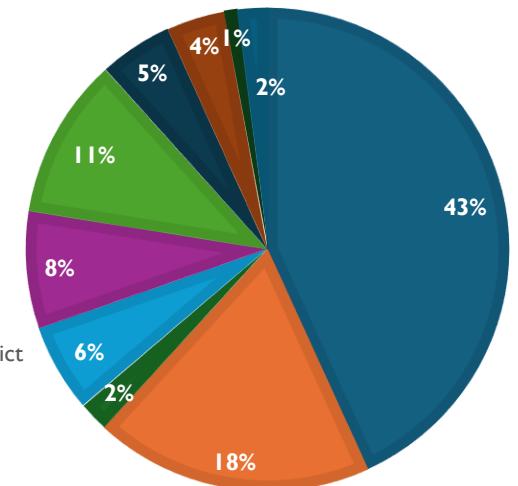
“Internal medicine- we went on a tour around the wards and specific wards where they keep medical patients.” (participant 122, male, 26 years)



- CHC and PHC expectations
- Insightful
- Patient care skills and principles
- Self-directed learning
- Family Medicine principles
- Comprehensive and educative



- Responsibilities & expected standards
- Logistics
- Overview
- Emergency/clinical knowledge
- Staff introduction
- Outcome of rotation



- Comprehensive & Informative
- The presentations
- Overview of Ekurhuleni health District
- Interns logbook
- Medical ethics
- Completing J88
- Palliative care

# Evaluation by medical interns

Q4: What was your takeaway?



*“There is always senior supervision available to me.”*  
**(Participant 102, male, 27 years)**

Q5: What can be improved?



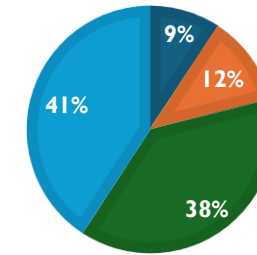
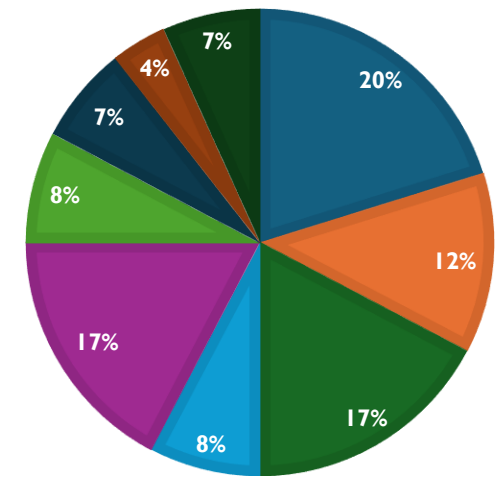
*“Appropriate stretch breaks and tea breaks in between presentations.”*  
**(Participant 69, male, 25 years)**

Q6: Any other suggestion?



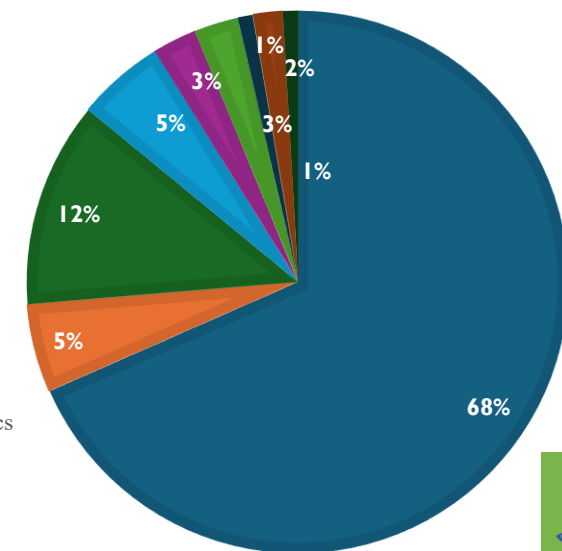
*“Going through practically the SOAP and 3-stage assessment.”*  
**(Participant 45, female, 25 years)**

- Lifelong learning and competency
- Professional ethos
- Ethics based cre/practice
- Family Medicine principles & practice
- Holistic patient care
- Importance of intern's logbook
- Family Medicine in Primary/Community care
- Guidance & support in medical practice
- J88 completion



- Breaks
- Orientation platform
- Positive reviews
- Enhance outcome

- Comprehensive
- Clinical governance
- Common PHC conditions
- Other topics
- Referral
- Three stage assessment
- Home-based visit
- Other aspects, medical ethics
- Sexual assault



## Limitations

- ❖ Intermittent electricity outages and unstable internet connectivity.
- ❖ The intern groups operated asynchronously, impacting their overall experience and learning outcomes.

## Conclusion

- ❖ High satisfaction rates and fostered self-directed learning.
- ❖ Ethics-based care, patient-centeredness, and holistic community care.
- ❖ Training and better health care delivery could be enhanced by integration with specialist rotations.

## Acknowledgements

1. The Intern doctors
2. Family physicians
3. Administration staff
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THANK YOU!

