General Programme Description

The Division of Public Health Medicine within the School of Public Health and Family Medicine offers a four year training programme leading to specialist registration with the Health Professions Council of South Africa (HPCSA). In the programme, candidates will be trained in public health leadership, management, service and research skills, involving a combination of formal coursework, attachments for experiential learning and self-directed learning.

Training objectives at UCT encompass and, in some areas, exceed the minimum basic syllabus requirements of the College of Medicine of South Africa. New regulations are now in force and these are available in SAQA format on the Registrar Vula website at UCT (to which all registrars will be subscribed once registered) and on the College Website (http://www.collegemedsa.ac.za/view_exam.aspx?examid=42).

Trainees participate in modular training as part of self-standing Postgraduate Diploma in Occupational Health, Masters Programme in Public Health (the Epidemiology and Biostatistics track) and Health Management (the Postgraduate Diploma in Health Management). Additional structured supplementary teaching and seminars to fill in any gaps or supplement formal courses are also provided.

Attachments via the Health Impact Assessment (HIA) Directorate of the Health Department of the Western Cape Government (WCG) and the UCT academic department (UCT) are aimed at exposing registrars to the full scope of public health practice. Registrars may also be placed with other components of the health department (e.g. the Chief Directorate for Health Programmes) depending on need, experience and training opportunities. Experience with service and public health surveillance functions, and management and administrative structures, is provided by the allocation of responsibilities and projects to registrars by health service managers. Public Health Medicine registrars in non-provincial posts will acquire the range of experiential learning in their organizations which will have been planned with the organization prior to starting the rotation. Where appropriate, an exchange rotation of a non-provincial and provincial registrar will be considered to ensure that a full range of experiences is available to all registrars. There will also be attachments to research, teaching and service functions carried out by Departmental staff where appropriate.

In order to allow senior registrars to pursue areas of special interest or skill, a degree of flexibility in the allocation of service attachments may be possible. Such arrangements are subject to the staffing and service demands placed on the Department by WCG or by the non-provincial employer; have to meet the training objectives of the course; and
require approval by the PHM MMed (registrar) programme convener and Head of Division.

By the end of the course candidates will be expected to demonstrate defined competencies in the various components of public health listed in the CMSA regulations. See the attached list compiled which should be used to ensure that the rotations provide the necessary experience to meet these competencies (College Requirements for Registrar Skills portfolio.doc). The College of Public Health Medicine assesses competency through one set of exams (no first, second or third parts) as well as a portfolio of learning activities submitted at the time of examination.

**Requirements for Specialist Registration in Public Health with the Health Professions Council of South Africa**

To undertake training as a registrar in Public Health Medicine, candidates must:

- Have the appropriate registration with the HPCSA which allows them to be trained as specialists. They must be registered in the category: independent practitioner (general practitioner) and **NOT** in the categories of Postgraduate Studies (supernumerary) or Public Services (general practitioner). This is very important. If you are registered in either of the latter two categories, you will neither be able to specialize nor will you be employable as a specialist by the Province after completion of the programme.
- Be registered (for the full period of specialisation) for the MMed degree in Public Health Medicine with the University.

To write one’s College exams in Public Health Medicine, candidates must:

a. Have completed three years of time in an approved training post, with appropriate exposure to public health practice, as judged from the candidate’s portfolio and confirmed by the Head of Department. All registrars will be required to develop a portfolio of work based on 6 monthly formative assessments in the course of their training. This portfolio is submitted when applying to write your College exam.
b. Have, to the satisfaction of the Head of Department mastered at least 75% of the “skills” listed in Appendix A, Section 3, of the Regulations for Admission to the Fellowship of the College of Public Health Medicine
c. Have submitted an M Med thesis to UCT, the mark for which is required in order to enter the College Fellowship Examinations.
d. Submit required documentation outlined in section 16.2 of the Regulations, including certification by the Head of Department confirming bullets (a) to (c) above, 6 copies of a short report on a public health topic, a letter from the registrar of the candidate’s University (or an academic transcript) stating the mark awarded for the MMed dissertation and a proposed field/topic for discussion during the oral discourse examination.

To be registered as a specialist in Public Health Medicine, candidates must
- Have completed at least four years of time approved as registrar training time by the Head of Department at UCT in an approved training post.
- Have successfully passed the dissertation component of the M Med degree at UCT.
- Have obtained a Fellowship in the College of Public Health Medicine by successfully completing the College examination. This examination process is described in the regulations attached. College exams should be completed within the duration of the programme but, if circumstances dictate, candidates may write their exams within one year of finishing their rotations.

Continuous monitoring and evaluation of the quality and quantity of the work output of candidates will be performed by services (WCG and non-provincial, where relevant) and UCT Departmental staff, and it is incumbent upon the candidates to demonstrate adequate attendance and performance in terms of the list of expectations that follow below.

**Academic Expectations of Registrars**

1. **Teaching in the Medical Student Undergraduate Program**

Registrars are expected to participate in undergraduate teaching including supervision of students’ research projects and teaching selected sessions in epidemiology, research methods and other aspects of public health. Registrars who enter the programme will first shadow an experience teacher / supervisor before being asked to teach or supervise on their own. The department will also organize training in teaching methods and delivery for new registrars. The quantum of teaching and supervision will usually be modest and compatible with registrars’ service commitments. A registrar allocated to supervise a student research project will need to meet with the students for 4 to 6 meetings in the course of an 8 week block to provide supervision. Meeting times can vary from 20 to 60 minutes, depending on what requires discussion. Supervisors give student formative feedback on their protocols, and are expected to be present when the students present their findings, and mark their oral presentations. The written report is marked by other staff, though registrars may be included in staff asked to mark student projects other than the one they supervised. Registrars may periodically be asked to set an exam question in a block, in which case the registrar will need to provide a model answer/marking schedule and to mark the scripts (usually about 35 to 40 students per block.) In general, we aim that registrars do not supervise more than 3 to 4 projects per year, give more than one or two lectures per block or set more than one or two exam questions per year. Dr Virginia Zweigenthal (Virginia.zweigenthal@uct.ac.za) is the convener for 4th year and will liaise with you about teaching commitments. The undergraduate administrator is Ms Abigail Parenzee (Abigail.parenzee@uct.ac.za).

Where service commitments make it unable for registrars to be present for student supervision at the scheduled time, registrar can reschedule to group meeting to suit their and the students’ availability. It is the responsibility of the registrar to make sure an alternative arrangement is made with the students if he or she cannot make the allotted appointment.
2. Taking the Postgraduate Diploma In Occupational Heath (DOH), the Masters in Public Health (MPH), and Diploma In Health Management (DHM)

Registrars are expected to participate fully in the DOH, MPH and DHM courses as the content of these courses is part and parcel of the MMed programme for Public Health Medicine specialization and provides the formal teaching to cover the bulk of the College syllabus. This includes attending all lectures and other coursework, and completing all homework, test, assignments and examinations. Additional teaching to supplement gaps may be provided as needed, or where courses are no longer available. Registrars are not, however, required to complete the research components for all three of the MPH, DOH and DHM. They may, if they wish, and administrative arrangements permit, choose courses within the MPH programme as a vehicle to complete their short report or their MMed dissertation, which are part of the College examinations. Registrars will obtain the UCT MMed degree, which is an academic qualification, as well as the College Fellowship which is a professional qualification upon successful completion of the specialist training programme, but will not be awarded any of the three degrees (MPH, DOH and DHM) from which they obtained their coursework MMed teaching, as University policy prohibits multiple course registration and qualification. Registrars can be provided with a certificate of attendance which they may use for Curriculum Vitae purposes as evidence of having completed the coursework requirements of these three courses.

Note: it is a requirement of our MMed Training programme that all registrars undertake the epidemiology and biostatistics track of the MPH. This track includes 8 mandatory modules with a limited choice for the other two modules.

Mandatory modules are:

- Introductory epidemiology
- Advanced epidemiology
- Biostats 1
- Biostats 2
- Biostats 3
- Public Health & society
- Quantitative Research Methods

Choice for the other two modules are:

- A choice of Health Policy or Planning or Introduction to Health Systems Research and Evaluation
- A choice of 2 of Infectious Diseases Epidemiology, Noncommunicable disease epidemiology or Evidence based medicine

The reason why registrars are required to enrol in the Epidemiology Specialisation Track (see the MPH booklet on the Departmental website) is because these are core competencies for public health medicine specialists. Our Department is one of the few in
the country that offers formal training to advanced level in these disciplines that covers the CMSA CPHM syllabus so thoroughly, as well as being the secret to success for the MMed Part III Dissertation which is required by the CPHM examination process. Registrars who wish to audit MPH courses that are not within the Epidemiology Specialisation Track are welcome to pursue this interest, provided this does not interfere with their service obligations and bearing in mind that registrars may not want to load themselves academically within a busy programme.

Registrars are released from their service attachments with the WCG or via a Memorandum of Understanding with their employing body if they are employed in a non-provincial context, to attend the above courses. These courses are taught during week long intensive teaching blocks (MPH, DHM & DOH), and on (Tuesday or) Thursday afternoons (the MPH course only).

Thursday, (the entire day) is regarded as Academic Departmental days for registrars, which are given over to teaching, academic meetings, self-study and research activities. Provincial and other employers will have accepted that you have academic commitments on the Thursday. Consequently, all academic meetings (e.g. M Med programme meetings) should be arranged for Thursdays, whenever possible. Importantly, service activities that impact on Thursday academic time are to be avoided as far as possible. Registrars should take responsibility for ensuring that this is the case, failing which the MMed convenor should be notified timeously of registrars’ inability to attend academic activities and the reason.

3. Attending Departmental Meetings

Registrars are expected to attend departmental activities related to teaching and seminars. These include:

- **Formal courses:**
  - **MPH** – generally on Thursday (sometimes Tuesdays or Wednesdays from 16.00) afternoons and during block teaching at the start of the semesters
  - Block teaching for **DOH** (3 blocks and 3 days of final examinations over two years)
  - Block teaching for the **DHM** (3 blocks of 1 week each over 1 year)

- **Noon meeting seminars** on alternate Thursdays at 12h00 - 13h00: Registrars are expected to present protocols, research results, and other relevant topics as well as engage with other staff or visitors’ presentations. Please remember to keep a record of your own attendance to enable you to complete your College Portfolio.

- **Journal club** on alternate Thursdays at 12h00 - 13h00: Registrars are expected to present a journal club at allocated intervals (see the separate document on what is expected of those presenting journal club) and engage with colleagues’ presentations. Please remember to keep a record of your own attendance to enable you to complete your College Portfolio.
• Meetings of the **M Med Programme Committee for Public Health Medicine** which functions as a quality control mechanism and provides for registrars’ feedback on the programme. These meetings will generally be scheduled for the second Thursday of the month in the morning from 10.30 until the noon meeting and will take place three times a year. This meeting is important because it is where registrars are given the opportunity to evaluate their programme and to contribute to adjustment and further planning and implementation of the rotations.

Participation in the Noon Meetings, Journal Clubs and M Med Programme meetings is mandatory. Apologies must be motivated and emailed to the MMed convener (leslie.london@uct.ac.za).

Registrars will also have opportunities for other learning activities, which you are strongly encouraged to make use of:

• **Supplementary tutorials in preparation for examination**

  On an ad-hoc basis (Thursday mornings or other days and times), registrars may have tutorial sessions in preparation for examination to supplement formal course learning. Each registrar will have a turn to present a seminar on a particular topic, aimed at preparing for the College Fellowship examinations and oral exams. Different consultants will support the registrars presenting, depending on the topic, and provide feedback at the seminars to help registrars prepare for their exams.

• Registrars are also encouraged to attend and participate in the Public Health Seminars and the Dissertation seminars organized for Doctoral and Masters students to present their dissertation proposals (usually on a Monday late afternoon). This will be helpful to registrars planning to develop their proposals for their M Med theses.

• From time to time, the Department will hold occasional seminars on important public health topics outside of the usual Noon meeting schedule (e.g. a visiting academic) and registrars are encouraged to attend where their service commitment permits.

• Every two to four years, a field trip is organized with registrars from the University of Stellenbosch to key public health institutions in the northern parts of the country – usually a visit to the MBOD, the NIOH, the NICD and to a mine to experience first-hand occupational health and safety processes in mining. It is anticipated that senior registrars would participate in this learning visit which usually takes about a week.

4. **Academic supervision and support**

Each registrar will be allocated an academic mentor, in most cases, for the duration of their rotation. The role of the academic mentor is to provide general academic guidance to the registrars in terms of their public health experience and learning and to ensure that the registrar has the exposure and learning opportunities to enable him or her to masters the competencies expected by the College of a public health medicine specialist. This means that the Academic Mentor will:
• Assist the registrar to draw up their learning objectives at the start of each rotation, along with the relevant service mentor;
• Provide feedback (and sign-off) to the registrar on their portfolio of learning as part of regular formative assessment
• Participate in the registrar’s provincial performance management system (known in the Provincial System as the Staff Performance Management System or SPMS) with their service supervisor (see page 9 below)
• Generally provide guidance to the registrar for any service and academic queries or identify other staff who have expertise and can be of assistance for a service task required of the registrar.

In addition to an academic mentor role, the registrar will have a supervisor for their M Med thesis. The academic mentor may also be the supervisor, but in many cases, the supervisor may be someone other than a public health specialist, or a public health specialist who is not the registrar’s mentor, if the registrar’s thesis is in a particular area where a different consultant has particular expertise.

Lastly, registrars may be asked to undertake work which leads to research activities that will not be their M Med thesis but which requires a staff member’s support other than that of their mentor. In this case, the relevant consultant or staff member will also assist the registrar where needed.

However, the primary academic relationship will be with the allocated mentor, even if a different consultant is your thesis supervisor or is giving you guidance for a particular project. This consultant will confirm your rotation’s Job Description with the service supervisor, sign off your Portfolio and participate in your performance management (SPMS for provincial registrars).

5. Participating in Departmental Research

Registrars are expected to participate fully in research activities. Depending on your research interests (for your MMed dissertation or your short paper) you may be allocated to particularly appropriate staff members who may not be the regular academic mentor. It is recommended that you aim at completing a number of substantive projects, two of which you would use towards your College research requirements, one as your MMed Dissertation and one as the Fellowship short report.

In your rotation, you will need to gain full computer competency in all the components of Microsoft Office and Stata as well as email and internet usage. This can be done by attending courses at Information and Communication Technology Services (UCT) and training in Stata is incorporated in your MPH teaching. You must have computer access on a PC at home and at WCG and there will be computer access in the department in a dedicated registrar room. The web-based learning programme at UCT (VULA) will be used as a list server for communications to all involved in the registrar programme. Emailing to phmregistrars@vula.uct.ac.za will reach all those associated with the programme. The VULA site is also used to post important information about the
programme, view learning materials, download materials for printing, participate in asynchronous bulletin board discussions, and to do exercises and tests from time to time. Additionally, although this will not be a formal part of the course, the class or groups of students may wish to use the chatroom facility for synchronous learning activities. Access to VULA is free to registered students using the computers on the UCT campus. It is also possible to use VULA from home by logging in on your UCT details but this will be an internet connection at your own expense. It is best for purposes of using VULA at home to have broadband connection of some sort - ADSL, wireless, 3G etc. You will not be reimbursed for these nor for any costs incurred in printing of materials.

It is the registrars’ responsibility to keep up to date with information about the programme that is posted on VULA. This can best be done by accessing the site frequently. If you wish to use an email address other than your student email address you must either update your own details on the Vula site or arrange to ensure that this address is included in the Vula distribution list by speaking to the course administrator Faranaaz Bennett. It is your responsibility to make sure the Vula distribution list reaches an address which you read regularly.

WCG service department’s expectations of registrars

1. Structure and location of the Health Department at WCG

The Public Health functions within the Health Department of the WCG have been located in the Health Impact Assessment (HIA) Directorate within the Chief Directorate: Strategy and Health Support (CD: SHS). Figure 1 illustrates the structure of the HIA Directorate as at July 2014 and Figure 2 shows the location of the HIA Directorate in the broader Provincial Health Department organogram.
Figure 1: Structure of the Health Impact Assessment Directorate, July 2014
Figure 2. HIA location in the Provincial Health Department
This CD is intended to provide systems support to the service divisions of the Department. The CD includes four directorates, three of which have direct relevance for public health- viz. Strategic Planning and Co-ordination (including health legislation, economic evaluation, strategic planning, compilation of the annual performance plan and interdepartmental liaison), Health Impact Assessment and Information Management (including knowledge management, ICT administration and statutory reporting). Within the HIA Directorate, there are four sub-directorates (including Epidemiology & Disease Surveillance, Programme Impact Evaluation, Quality Assurance and Health Research), involved in key Public Health functions. Registrars will be primarily located within these four sub-directorates for their registrar training.

2. Providing Service through Health Service Attachments And Rotations

Provincial registrars will be on the establishment of Directorate Health Impact Assessment within the Chief Directorate but may be placed in other components of the services. For example, registrars (particularly when acting as senior registrars in the last two years) may be placed in district management, programme or hospital management, which are located in Divisions outside of the Chief Directorate.

However, even when placed in these rotations, registrars will be managed from the provincial side by the Director for Health Impact Assessment within the Chief Directorate Strategy and Health Support. Day-to-day liaison and accountability for project and service work, however, will depend on the nature of the attachment. For example, a registrar allocated to the Maternal and Child Health programme will have his or her job description set up at the start of the rotation by the HIA Director in conjunction with the relevant service manager in the Maternal and Child Health programme and the academic mentor. The HIA Director will be responsible for ensuring the registrar’s SPMS is signed off at appropriate time intervals whilst on the rotation but may delegate this to another official if deemed appropriate. The sign-off of performance will be done with the participation of the relevant service supervisor and the academic mentor.

Provincial registrars sign 4 year contracts with the Provincial Department of Health and are joint staff of UCT and WCG under Provincial conditions of service. The provincial contribution to the overall management of the registrars will reside with the Director for Health Impact Assessment and the UCT counterpart is Professor Leslie London who is Convener of the academic MMed specialist programme in PHM.

For non-provincial registrars, similar service and performance monitoring arrangement will be developed specific to the organization involved and formalized through a Memorandum of Agreement.

3. Governance of the registrar service attachment
The registrar programme is located in the context of a set of governance arrangements between UCT and the WCG Health Department.

- There is a Memorandum of Understanding in place governing the relationships between the WCG, the UCT Department and the registrars.
- At institutional level, a Joint Management Team (UCT senior leadership in the Faculty and the HoD, and provincial managers) oversees the institutional relationships and strategic issues.
- The registrars, consultants and provincial managers all participate in monthly Public Health Unit meetings (of the HIA Directorate) which oversees operations of the directorate.
- The registrar Programme Convener and the HIA Director meet on an ad-hoc basis for any particular joint operational decision making.
- Where non-provincial registrars are in the programme, the Programme Convener will set up equivalent meetings with the employing organization using a similar MOU to regularize the governance of the registrar service attachment.

Directly relevant to the registrar programme are the following meetings:

- The registrars are part of a Public Health Unit meeting (involving all the Public Health staff, consultants and registrars with relevant WCG managers in the HIA Directorate and related Directorates) every two months to plan and review the registrar rotations and attachments. Non-provincial registrars will be expected to participate in these meetings where feasible, given that their work will need to support the Provincial Public Health strategy.
- The University (School) holds a three M Med PHM programme meetings a year.
- Additionally, the registrars have arranged educational sessions with provincial staff in the past and this has proved sufficiently useful to continue, (though logistically difficult to set up)

Registrar appraisal

Registrars are appraised in two ways.

The CMSA Portfolio is the registrar’s record of learning for purposes of College academic assessment. ALL registrars (introduced for registrars starting in 2011) must keep a CMSA PHM portfolio up to date throughout their training. This is a single document in which Section 4 needs to be added for each rotation undertaken by the registrar. Your mentor will assist you with completing it. Regular updates must be submitted electronically to Faranaaz Bennett with every performance appraisal completed. The skills list of the CPHM (see separate document) must be checked off to ensure that all of the requisite competencies are required by the end of registrar training. This is needed for College examination purposes. Whilst providing service to the health department or to their non-provincial employer, each registrar is required by the College of Public Health Medicine to keep as part of this portfolio a record of their practical work. Published and unpublished written reports on project or other work, oral presentations, reports from staff for whom the registrar is responsible will form part of this appraisal. Copies of all such reports should also be filed with the MMed Programme.
Convenor for the record and for use in formative assessments. This portfolio is required in order for the Head of the Department to certify that they are competent with respect to practical work in public health medicine before the final examination. Registrars will be required to bring their portfolios to the College examinations.

The SPMS (Staff Performance Management System) is the format for performance management of staff in the public sector. Similar to most performance management systems, it is intended to provide the employee with a clear job description (in the form of Key Performance Areas and tasks expected of a registrar. It includes a Job description, performance plan, and development plan. The SPMS plan is set up at the start of the rotation, reviewed through the rotation and used as the basis for assessing registrar performance at the end of the rotation. The 1% annual salary increment is dependent on submitting an SPMS review to the relevant provincial human resources department. In addition, a highly favourable annual review can earn a cash bonus of between 2% and 4%. The SPMS is signed off biannually by the registrar and their academic and service mentors, and by the Head of the academic department and Director Health Impact Assessment. For registrars in non-provincial posts, analogous performance management systems exist and the process of performance evaluation will be adapted to ensure consonance between the different systems.

Meetings between the registrar and his/her academic and service mentors must take place on a regular basis to ensure the integrity of the management system and to ensure registrars are able to receive appropriate rotations and support. A copy of the registrar’s SPMS documentation should be retained by the registrar and a copy (both hard copy and electronic) provided to the Head of the Academic Department.

**Learning as part of providing service**

The core of benefiting from your rotation is based upon an effective triad – with supervision of registrars taking place jointly by the service supervisor and the academic mentor. Each attachment will be governed by a written set of learning objectives and a personalised job description, which must be drawn up at the start of the rotation, jointly involving the academic mentor and the service supervisor. The Learning Objectives must be such that they match the Health Department’s Public Health Strategy (or, in the case of non-provincial registrars, the objectives of the employing agency or organisation) and that provide appropriate public health training opportunities for the registrar. These learning objectives will inform the KPAs incorporated into the registrar’s SPMS plan. They must also match the CMSA skills and competencies requirements which can be found in a separate document. The mentor and supervisor should discuss the appropriateness of all work envisaged, particularly applied research projects, in advance to ensure that registrars do not waste their and the Health Authority’s time. As part of the job description, arrangements for vacation leave and coursework attendance should be discussed with both service supervisor and academic mentor.

The academic mentor and service supervisor are expected to meet periodically to monitor progress as part of a formative assessment in terms of the initial plan. This process of
discussion should continue during the course of the attachment and applies particularly to ad hoc work that is not envisaged when the job description is initially drawn up. Regular meetings are important to provide support and feedback to registrars.

**Overtime Expectations**

Staff delivering Public Health Medicine services in the Public Sector do not participate in the system of commuted overtime. Note also, that no registrars are permitted to do any extra paid work whatsoever and they may not participate in the system Remunerated Work Outside the Public Sector (RWOPS). Registrars are eligible to claim ‘normal’ overtime, as per public sector regulation, which caps the rate at which overtime is paid to a payclass far lower than a professional rate. Nonetheless, if registrars are working overtime and wishing to claim, such overtime, they need to have careful documentation to support such claims. Further information can be obtained from the HIA Director in this regard.

Note that the PHM registrar programme discourages registrars from taking on clinical work after hours for overtime because it is not regarded as part of an appropriate training platform for Public Health Medicine.

For non-provincial registrars, overtime arrangements are dependent on the employing organization.

**Publications and Reports**

All projects and health service related work should result in departmental reports that must be submitted to the registrar programme convenor and should be archived for your portfolio. Whenever possible, registrars are encouraged to publish research findings in academic journals, both by the University and by the Health Impact Assessment Directorate of the Health Department. Where this is the case, appropriate acknowledgment of provincial and university affiliation is required. Co-authorship will be governed by standard conventions. Close contact with the academic mentor or other relevant departmental staff is essential to ensure quality outputs. The Service Supervisor will be reminded about the importance of ensuring that registrars working on reports are acknowledged and named as authors.

**Leave**

Registrars should aim to take their leave (in December and January) by agreement with the Head of the employing authority to which they have been allocated and in consultation for final approval with the Head of Department at UCT. Leave forms for provincial staff are to be submitted to the Head of Department at UCT for onward transmission to WCG Head Office. Note that within the public service, leave is not be allowed to accumulate, as this has previously resulted in serious disruption of service delivery.
For non-provincial registrars, procedures leave should be jointly confirmed between the employing authority and UCT.

Addresses and Telephone Numbers And Communication

Registrars must keep the Departmental postgraduate administrator, Ms Faranaaz Bennett Faranaaz.Bennett@uct.ac.za and Prof L London leslie.london@uct.ac.za informed at all times of changes in addresses, telephone numbers, especially cellphone numbers and their email addresses – so that they may be located when required. When rotating through Health Authorities, registrars are to notify the Department of Public Health of their telephone number, including cell phone numbers, and the extensions where they can be contacted.

It is particularly important that registrars are at all times contactable via cellphone and email. UCT provides each registrar with an email address based on the student number. The Health Department will also provide you with an email address in the form of Name@westerncape.gov.za email address. You are also most likely to have private email address. **This has the potential to cause confusion.** The onus is on all registrars to access all of their email addresses (especially their UCT email address) on a daily basis. The most convenient solution is for you to autoforward all email from your UCT email address to the email address that is your preferred address that you access regularly. For example if you have an MWEB address like jsoap@mweb.co.za, you should arrange for your email accounts at UCT and WCG to autofoward account that address. That way you will never miss any important communications from your mentor or supervisor, and these latter can be assured at all times that their message get to you. Registrars are also responsible for editing their VULA profiles or arranging for Faranaaz Bennet to do so, in order that the email address that appears there is the one at which they prefer to receive their emails. Registrars are also responsible for monitoring the VULA PHM registrars’ site on a regular basis for important communications and notices.

Logistics: Registrar Office and Computers, parking

There is a Registrars’ office in the School of Public Health and Family Medicine on level 4 with PCs, printer and telephone available for use by registrars only. The registrars should elect one representative who will take responsibility for ensuring that the office and computer equipment is kept in good order. As computer equipment has been stolen from this office it is imperative that you do not lend your private key to the office to anyone else at any time and that you lock up when you leave the empty office at all times – even to go to the tearoom or toilet. Any matters relating to maintenance or a need to upgrade the office furniture or equipment should be brought to the attention of the course administrator or convener.

The Provincial Health Department will also provide provincial registrars with access to a PC station. Any concerns about the equipment should be brought to the attention of the relevant administrative staff in the HIA directorate. Ms Rafieka Saban
(Rafieka.saban@westerncape.gov.za) is the Administrative Assistant to HIA director and is very efficient in organizing or solving logistic problems.

Parking on the UCT campus is on the basis of purchasing and displaying a relevant (yellow or red) staff parking disc. Parking at the Provincial offices will depend on the rotation. If based at Norton Rose building, arrangements can be made for parking costs to be covered by the relevant programme. However, registrars based at the Dorp St building will not have access to WCG parking. Use can be made of the parking at the Rose Court or Hiddingh Hall campus of UCT based on an existing UCT parking disc (which should be programmed for access to these parking areas). It is a short walk from these UCT sites to the Provincial offices in Dorp Street.