



**MEDICAL AND DENTAL PRACTITIONERS
COUNCIL OF ZIMBABWE**

BASIC STAFF REQUIREMENTS

FOR A

MEDICAL TRAINING INSTITUTION

Promoting the health of the population of Zimbabwe through guiding the medical and dental profession.

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1. Background

The Medical Dental Practitioners Council (MDPCZ) is empowered by an act of parliament (Health Professions Act (Chapter 27:19) to regulate and control all matters affecting medical training. Furthermore, by the same act, MDPCZ has authority as a regulatory body to register or deregister individual practitioners or institutions in accordance with set standards of practice. This is important in understanding the context of MDPCZ's role in advising both the Ministry of Higher Education and the Ministry of Health and Child Welfare, in matters of medical training.

The vision for the MOHCW is to have **adequate numbers** of **well trained** and **qualified** health workers to provide equitable, accessible, affordable and **high-quality** health service to all population groups. This vision can only be achieved if health workers have the right mix of knowledge, skills, attitude and qualifications. MDPCZ is mindful of the need to balance the pressures that arise in the current socio-economic environment and the need to set an appropriate level of quality of training.

The following guidelines define the core requirements that MDPCZ has defined for the NUST Medical School as a result of several inspections.

2. DEAN OF FACULTY OF MEDICINE

The individual should be a registered clinical practitioner with the MDPCZ, with a high academic repute and registrable post-graduate medical training. In the event that the Dean does not fulfill these criteria, the institution must appoint to the Administration office such a suitably qualified person to assist the Dean.

3. MANPOWER RESOURCES

These are determined by the different milestones in medical training.

3.1 Preclinical stage

After "A" levels an eligible medical student goes through a minimum of five-years training course, most of which is vocational training. A minimum of 2 years are spent in the preclinical stage learning basic medical science of human physiology, anatomy and biochemistry. This is the foundation to understanding normal body functions and disease processes. The preclinical stage can be taught in the old traditional didactic method. Because of the importance of laying down the correct foundation the minimal preclinical staffing requirement is shown in the table below.

Minimal Preclinical Staff Requirement for a Medical Training Institution

The full-time member in each department must hold a post graduate qualification in the area being taught.

| | Fulltime | | part time | Assistants/demonstrator |
|---------------------|----------|-----|-----------|-------------------------|
| Physiology | 1 | and | 1 | 1 |
| Anatomy | 1 | and | 1 | 1 |
| Biochemistry | 1 | and | 1 | 1 |

1 FULL TIME LECTURER AND PART TIME LECTURERS CAN TRAIN 20 STUDENTS.

CORE REQUIREMENTS

Embryology lecturer is necessary but not mandatory

Genetics lecturer necessary but not mandatory

Part time lecturers in any department must spend at least four half days of teaching each week in order to be eligible. The number of teaching assistants and demonstrators is directly proportional to the student intake.

Resources:

The training institution has to have physiology and biochemistry laboratories and anatomy dissections theatre.

3.2 Middle Stage

The full-time member in each department must hold a post graduate qualification in the area being taught.

Introduction to clinical training starts with pathology. This is the basis of understanding the consequences of disease process on the human body. No student can proceed with training unless they pass all the areas of the pathology examination.

Staffing Requirement for Pathology.

There should be 1 overall Full Time Course Coordinator (with qualifications in any of the following fields) to coordinate all the departments assisted by the part-timers.

| | Full time Equivalent | | |
|---|----------------------|----|---------------|
| 1) Pathologist | 1 | or | 2 Assistants |
| 2) Clinical Biochemist | 1 | or | 2 part time |
| 3) Microbiologist | 1 | or | 2 part time |
| 4) Haematologist | 1 | or | 2 part time |
| 5) Immunologist | 1 | or | 2 part time |
| 6) Health Social Science (Behavioural Sciences/Community Medicine) | 1 | or | 2 1 part time |

NOTE: The number of hours required for each course taught by part-timers should be pre-

defined. These hours should be covered in the course. Outside or visiting lecturers can be invited to give a concentrated course in an area e.g. Haematology over a week or so to cover the required number of hours.

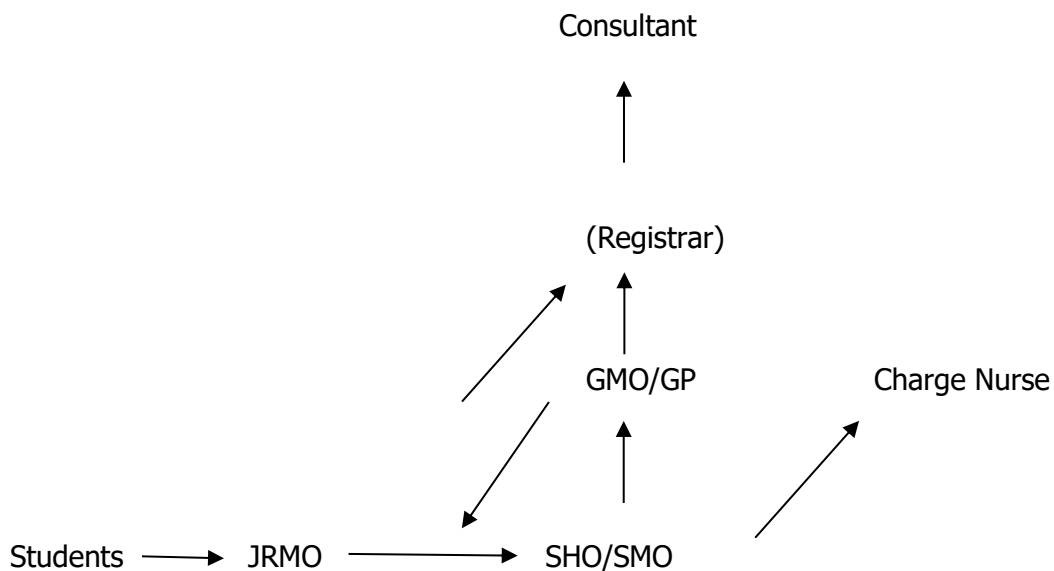
A full-time pathologist is required to double up in performing postmortem demonstrations and teach histopathology.

The departments of microbiology, clinical biochemistry, immunology and haematology are vital and essential but may be staffed by part time lecturers if supported by a team of appropriately qualified medical technologist who act as demonstrators and teaching assistants.

3.3 Clinical Training

Clinical training in medicine is a continuum starting at the end of preclinical education with barrier examination in Pathology and the final examination in the final year of training. It then continues through housemanship up to specialist level. This is a bedside teaching on both outpatients and inpatients. All the teaching is based around a **training unit** or sometimes referred to as a **"firm"**. This is led by a consultant clinician with a team of Doctors at different levels of their professional development.

Teaching Unit/firm



The teaching unit is composed of a clinical Consultant (Specialist) with a middle grade doctor (Registrar or Senior House Officer (SHO) with at least one or two Junior Resident Medical Officer (JRMO). **To this team is attached a group of 5-8 students.** The

students understudy the JRMO while the JRMO understudy the next level (SHO or Registrar). The Registrar is training to become the future Consultant. The SHO may take an exist route to become a GMO or go into general practice. The Consultant is the teacher and responsible for patient care **and training** of all levels below him. Each grade assists in teaching the level below.

Minimum Staff Requirement for the Clinical Stage

| Discipline | Consultant/Lecturer |
|--------------------------|----------------------------|
| Medicine | 1 |
| Surgery | 1 |
| Paediatrics | 1 |
| Obstetrics & Gynaecology | 1 |
| Psychiatry | 1 |
| Clinical pharmacology | 1 |
| Anaesthetics | 1 |

The number of lecturers required per discipline is determined by a need to maintain a teacher student ratio of no more than 8 students per lecturer /consultant. As the student intake increases, the number of teaching firms or units per specialty have to increase using the above ratio.

E.g. if the student intake is 40 the minimum number of teaching units/firms led by a Consultant would be five units per specialty.

The head of a firm/unit need not be a full time University employee as long as the firm has a minimum of one outpatient clinic a week, one admission day per week, an admission, a post admission and a business round per week. Co-ordination however per specialty should be headed by a full time University clinician for the specialty.

Sub-specialties

Neuro-surgery, ENT, Ophthalmology, Dermatology, Orthopaedics, Urology etc are established along the same lines and normal teaching units described above as the institution expands in its training and service activities.

3.4 Internship

The training of a junior doctor does not end with passing of the final professional examinations. The years of internship that immediately follow are considered an integral and important part of medical training the world over.

Council will facilitate deployment of JRMOs by decentralising internship in provinces.

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