

## THE SOUTH AFRICAN MEDICAL ASSOCIATION

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# **Specialist Private Practice Committee SPPC**

## TERMS OF REFERENCE

Effective Date:	2014		
Approved on:	2014		
Approval by Board	Signature:Chairperson:	Date:	

Effective Date:	2014	
Approved on:	2014	
Approval by SPPPC	Signature: Chairperson:	Date: 08:12.2014

NOTE: Notifications of any dated amendments will be communicated accordingly.

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#### 1. INTERPRETATION AND OBJECT

#### 1.1. Definitions and Abbreviations

SAMA refers to the South African Medical Association.

Specialist refers to Specialist as Registered by Medical and Dental Board of HPCSA

**SPPC** refers to the Specialist Private Practice Committee of SAMA.

PPC refers to the Private Practice Committees

**PPD** refers to the Private Practice Department of SAMA.

SAPPF refers the South African Private Practitioners' Forum

**COID** refers to the Commissioner of Injury on duty

RAF refers to the Road Accident Fund

Insurance industry refers to the Life Insurance Industry

HPCSA refers to the Health Professions Council of South Africa

cms refers to the Council of Medical Schemes

BHF refers to the Board of Health Funders

HASA refers to the Hospital Association of South Africa

**DOH** refers to the Department of Health

# 1.2. Object of the Terms of Reference and alignment of the SPPC activities with the strategic objectives of the SAMA

In executing its mandate SPPC must have regard for the strategic objectives adopted by the SAMA Board

The object of this Terms of Reference is to guide SPPC in carrying out its mandate., namely to:

- 1.2.1 Represent Specialists with authority and credibility, collectively and individually, in all matters, and to act as the principal co-ordinating and negotiating body for Specialists, with all stakeholders related to Private Specialist Practice.
- **1.2.2** Serve the needs of members of the Association in private practice to enable them to function optimally as professionals.
- 1.2.3 Promote health through the expertise and influence of the medical profession.
- **1.2.4** Deal with coding matters.
- 1.2.5 Influence and lobby SAMA policy with respect to issues pertaining to private health matters that have a bearing to private health care.
- 1.2.6 Determine and advice on the scope of practice for Specialists and also provide leadership and direction with regards to the re-skilling of Specialists; and to design and organise continuing medical education for SAMA members.
- 1.2.7 Lobby on private specialist related issues.
- **1.2.8** Assist and guide in quality assurance.
- 1.2.9 Take an active part in the promotion of healthcare programs for the benefit of the community.
- **1.2.10** Promote transformation in SAMA.
- 1.2.11 Enthuse the spirit of unity within SAMA and in particular within the whole health profession.
- **1.2.12** Protects and uphold the rights of private specialists, including in such areas as clinical independence, practice guidelines and health technology.
- 1.2.13 Protect the integrity of the profession against unethical practices, fraud and perverse practices.

#### 2. CONSTITUTION AND MEMBERSHIP

#### 2.1. Constitution

The SPPC is established in terms of the Company Rules of SAMA under the authority of the National Council and Board of Directors of SAMA. The National Council may delegate any of its powers to the Specialist PPC, provided that such delegation shall be revocable by the National Council or the Board and shall not detract from the powers of the Board to act on behalf of the National Council as expounded in the MOI and Company Rules, and also as far as the matters of such other Committees of SAMA are concerned. The SPPC is accordingly accountable to the National Council and the Board. At its annual meeting the National Council shall receive and consider reports and matters dealt with by the SPPC in the manner as determined by the Board.

#### 2.2. Membership

- 2.2.1 The Specialist Private Practice Committee of the Association shall comprise 12 (twelve) members, all of whom are nominated by the constituent specialist societies and special interest groups. A Chairperson and Vice-Chairperson shall be elected by the SPPC. All officers appointed or elected shall adhere to the equity principles of the Association and adhere to the spirit of the MOI and Company Rules of the Association with regard to the principles of the demographics of the country and gender parity. All officers shall be subjected to periodic induction to the principles of SAMA and the fiduciary duties of the Companies Act.
- 2.2.2 Such appointments shall be ratified by National Council.
- 2.2.3 In terms of the Company Rules, the Specialist Private Practice Committee shall have the authority to co-opt members to that Committee as long as the total committee number does not exceed 12 (twelve). The Co-opted members should also be members of good standing within SAMA. The Specialist Private Practice Committee may only exercise this discretion subject to the consent of the Board and, if applicable, subsequent ratification by Council. Such co-opted members shall not be eligible to become the Chair of the Committee, nor would they become National Councillors by virtue of their co-option. They will be regarded as permanent members of the Committee and shall be entitled to all benefits and responsibilities accruing to Committee Members.

#### 3. MEETINGS AND PROCEEDINGS

#### 3.1. Meetings

- 3.1.1. The SPPC shall, for the purposes of performing its functions, meet at least 3 times per annum.
- 3.1.2. The Chairperson shall, in consultation with at least the vice-chairperson or the secretary call an emergency meeting where a need arises
- 3.1.3. The Chairperson shall from time to time organize and conduct telephone-conferences, webinars, or "Skype" discussions where a need arises. Decisions taken by the Committee meetings convened in this manner shall be binding decisions provided that proper procedure, namely adequate notice to all members of the SPPC, was followed in convening them and that there was the requisite quorum
- 3.1.2. Meetings shall be chaired by the Chairperson of SPPC.
- 3.1.3. The quorum for a meeting is at least 50% of committee members.
- 3.1.4. Resolutions of SPPC shall be by majority of members who shall vote on the matter for decision in person.
- 3.1.5. Ad hoc meetings will be arranged with stakeholders as and when it is required.

#### 3.2. Proceedings

- 3.2.1 Except under exceptional circumstances, at least 6 week notice will be given of a meeting of SPPC. Such notice will, where possible, include the agenda and any supporting papers.
- 3.2.2 Minutes of the meetings shall be taken by the Private Practice Unit Secretary. Within a period of seven days after a meeting has taken place the Private Practice Unit Secretary will circulate the minutes to the Chairman of SPPC who will first approve them. The approved minutes will be circulated to the SPPC within 3 weeks after a meeting.

3.2.3 Where SPPC requires attendance of its members to attend meetings with stakeholders it is required that special care is taken to accommodate the member with regards to adequate notice and time allocation to decrease the impact on consulting time of the member at his practice.

**PART C** 

#### 4. TERMS OF REFERENCE

#### 4.1 The overall responsibilities of SPPC include:

- 4.1 The SPPC will deal with and provide leadership to the PPD via the PPD manager in all matters related to Specialist Practice such as:
  - **4.1.1** Dealing with all strategic matters affecting Specialist practice.
  - **4.1.2** Private Practitioner Advocacy promote cost-effective practice environment with deference to collegial courtesy and communication between Specialists and General Practitioners.
  - **4.1.3** Campaigning for doctors' clinical independence. Emphasizing compliance with HPCSA ethical guidelines by Specialists, challenging unethical behavioural patterns by the medical aid industry, promoting quality measures and clinical guidelines.
  - **4.1.4** Advocate continuing professional development to emphasise and promote quality of care and exemplary outcomes measures in Specialist care.
  - **4.1.5** Facilitating the earning capacity of Doctors assist in practice cost calculations, uphold MDCM as industry standard for the profession; guide in IT infrastructure and platforms so that we can measure and manage the Specialists future effectively.
  - **4.1.6** Promote correct coding initiatives (CCI) to ensure that the MDCM and other coding systems are correctly interpreted and implemented.
  - **4.1.7** Study and develop alternate reimbursement strategies based on performance and outcomes.
  - **4.1.8** Provide guidance on modern measures to realign practice priorities, viz. cost effective evidence-based medicine (EBM).
  - **4.1.9** Develop cost-sensitive, integrative, preventative and health promotion programmes as part of a multidisciplinary skilled Specialist, General Practitioner and Allied Disciplines network.
- 4.2 The PPD manager will work under the authority and guidance of the PPC as authorised by the Board on behalf of National Council and will
  - 4.2.1 Maintain an effective PPD for administering the affairs of the PPCs and for the carrying out of any activity of the PPCs and for providing strategic, administrative, operational and managerial support to the PPCs;

- 4.2.2 Direct and administer the affairs of the PPD within the framework of operating policies established by the Board, and exercise control over all matters concerning the administration and management of the PPU through delegation of authority to, and review of the performance of, the staff reporting to him;
- **4.2.3** Provide for the maximum utilization of the resources of the PPD through sound planning, programme budgeting and control, administer approved budgets, and ensure adherence to authorized expenditures;
- 4.2.4 Within the limits of authority delegated to him by the PPCs from the Board exercise the full authority necessary for the effective administration and management of the PPD be responsible to the PPCs, report regularly to the PPCs on the performance of the PPD, and suggest appropriate actions for consideration and adoption by the PPCs to strengthen the administration of the Association and its programmes;
- **4.2.5** The PPD manager will be responsible for the smooth functioning of the PPD's administration with specific reference to:
  - (a) strategic management;
  - **(b)** financial management;
  - (c) operational management
  - (d) human resource development and management;
  - (e) professional affairs development and management;
  - (f) organisational strategy and policy development and management;
  - (g) relationship development and management; and
  - (h) IT development and information management.

#### 4.3. Amendment and title

- **4.3.1** The SPPC may amend and review this **Terms of Reference** as and when it becomes necessary.
- 4.3.2 These Terms of Reference is called the Terms of Reference of the Specialist Private Practitioners Committee of the SAMA and takes effect on the date determined by SPPC by resolution and by SAMA Board by resolution.