PROF KEITH BOLTON RETIRES

Our Right to Quality Healthcare

SAMA Private Specialist Indaba Outcome
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Welcome to the spring edition of MediTalk, the SAMA Gauteng branch newsletter!

The journey through our personal, and indeed our professional lives can be a complex one. An oversimplification of this journey is to consider it as a series of maturity steps starting with dependence as medical students, to independence as medical practitioners to interdependence as specialist practitioners. This edition of MediTalk has content talking to each of these phases of maturity we go through as healthcare professionals.
The SAMA Gauteng branch welcomes the formation of SAMSA, the medical student organization. SAMSA will need a lot of guidance and nurturing from SAMA as they prepare its members to move from current dependence to the next phase of independence in their professional careers. In this edition of MediTalk we have included an important and provocative essay, by Ashleigh Taylor, a medical student. Ashleigh, talks about the importance of quality of healthcare. It is a timeous piece and an important reminder that the impact of our services and indeed our professional sustainability is entirely dependent on the quality of the healthcare services we provide.

Independent practice, although a logical growth path in our professional career development, currently faces many challenges. Many of these challenges were highlighted in the SAMA Private Specialist Indaba held early at the beginning of this year and reported in this edition of MediTalk. This was indeed a very constructive meeting as many solutions were proposed in response to identified challenges and efforts are underway to implement most of these solutions.
Included in this MediTalk are news on the recent SAMA Gauteng AGM and the constitution of the SAMA Gauteng Trade Union Executive. These two events are a reflection of our most critical phase of professional maturity which is interdependence. We need independence to go fast but interdependence will ensure that we go far in our contribution to healthcare delivery in the country.

Professor Bolton’s recent retirement reported in this MediTalk is perhaps an important example of the entire professional growth path at individual level. His journey started as a dependent medical student, progressed to independent paediatrician who touched many lives and now about to enter interdependency as a retiree. We wish him health and a well-deserved retirement.

Johnny Mahlangu
A farewell party for Professor Keith Duncan Bolton, at which the Master of Ceremonies and first speaker was Adjunct Professor Ashraf Coovadia, Head of Department: Paediatrics and Child Health, Rahima Moosa Mother and Child Hospital, was held in the Adler Museum on 22 January 2014. Several speakers spoke most highly about Professor Bolton’s contribution to Wits, the people of Soweto and his tremendous contribution to the Rahima Moosa Mother and Child Hospital over a period of some 40 years, and as Head of Department from 1998 when it was known as the Coronation Hospital.

Professor Coovadia mentioned that Professor Bolton was a great leader and excellent clinician who has made Rahima Moosa a sought after hospital for staff and students alike. Professor Mkhululi Lukhele expressed the gratitude of the School of Clinical Medicine to Professor Bolton. Professor Alan Rothberg said he was a ‘mensch’ – a noble person, a person of character known for his integrity, humanity and generosity who was a gifted and inspirational teacher, a fine role model and fearless advocate for the rights of patients.
Professor Sithembiso Velaphi and Dr Lethabo Machaba, a paediatric registrar, spoke movingly about his humanity and Professor Peter Cooper talked about him as the rock in the Department of Paediatrics and of the Faculty. As head clinician in the Nelson Mandela Children’s Hospital project, he was the one who brought the project together and he will remain involved in the project. Professor Bolton responded suitably.

Prof Bolton was the SAMA Gauteng Brach President in 2007.
Right to quality healthcare

Extract by Ashleigh Taylor
As health professionals, it is important to treat the subject of quality healthcare as one that can be applied to every encounter with a patient. It should never become ‘acceptable’ or a ‘norm’ to a South African health professional that his or her patient cannot be treated, due to a shortage or complete lack of equipment, expertise or the appropriate medicine. A remarkable level of trust is given to health professionals by a patient when he or she presents at a healthcare facility. It should stir much distress in health professionals that it is in this setting that such severe violations of basic human rights take place daily. The current state of the health system in South Africa is one of dynamic change, as it needs to be. The Apartheid Era, as a not-so-distant memory, is a reminder that discrimination must be avoided at all cost, because with it comes the intolerable and devastating violation of basic human rights. Discrimination can occur in anything, even something as simple as geographical location. Quality healthcare for all is a standard that should be fought for with vigour. What better instrument to use in this crusade than the basic human right given to each and every South African?
Healthcare, as it includes the determinants to health and the delivery of health via a health system, is a fundamental human right. Further, it impacts on quality of life for each individual as well as overall peace and economic performance in a country. All health systems should aim for continuous improvement to be able to provide health services of a good quality. Quality in a health system is achieved by setting standards that promote effectiveness, efficiency, access, equity and acceptability of health services. Strategies and plans based on these standards should be made by policy-makers and then implemented. There should be communication between providers and users of the health system; there should also be regular monitoring of the health system. Health professionals should educate patients on their rights to quality healthcare and should advocate for their patients to be allowed to receive this level of care. Where there is fault with the health system, health professionals should take measures to file these complaints through the available channels. Above all, the most important principle that has been discussed here remains: that each and every South African has, and will continue to have “enjoyment of the highest attainable standard of physical and mental health”.
This is an extract from an essay by Ashleigh Taylor. The essay won 2\textsuperscript{nd} place in The Bio Ethics essay competition.

Human Rights as a concept became entrenched in the UN’s Universal Declaration of Human Rights (UDHR) established in 1948. Our constitution and the National Health Act of 1961, as well as several other statutes protect South African’s rights to healthcare. Our Government, institutions and other healthcare organisations strive to provide quality healthcare, which is intricately entwined in the resources available: The WHO states that the organising of healthcare delivery is vitally important to attain quality healthcare.

Ashleigh’s essay discusses the quality of healthcare in terms of Maxwell’s dimensions of quality: - effectiveness, acceptability, efficiency, access and equity, measuring them against the National Department of Health’s Strategic Plan. She describes how a report by the Human Rights Commission in 2007 concluded that the human right to healthcare is being infringed upon in South Africa, squarely placing the blame at the government’s doorstep!

For the complete essay please send a request to samajhb@global.co.za

Over to you...

We want to hear your thoughts and views.

Please send your letters to the editor to samajhb@global.co.za
The best and most thought provoking letters will be published in the following edition.
The SAMA Gauteng branch held its AGM on the 7th May. The event, held at the Department of Surgery in the WITS Medical School, was well attended by branch members. The event was a great opportunity to reflect on the happenings of 2013.
Of note were; the branch’s very active role in addressing the commuted overtime crisis at CMJAH, a successful awards dinner held at Houghton Country club, a productive Private Practice Indaba and most recently, Prof Ames Dhai’s courageous involvement in the SAMA EGM. Prof Martin Veller, Branch president for 2013 welcomed Prof Johnny Mahlangu to the council as the branch president for 2014. The event was also an opportunity to honour the branch’s life members. These are members belonging to the branch for 40 years or more. The evening concluded with an enlightened address by the guest speaker, Dr Ayanda Ntsaluba, in which reflected on the Department of Health’s plan for universal health access and the NHI.

**SAMA Gauteng Life Members – 2014**

*Dr GJW Dalziel*
*Dr LM Dempster*
*Prof LM Dreosti*
*Dr PL Du Toit*
*Dr MVK Giesteira*
*Dr JC Hull*
*Dr CA Hyams*
*Prof LB Jacklin*
*Dr A Kayle*
*Dr B Krengel*
*Dr RW Mitchell*
*Dr DGC Pressbury*
*Dr E Rogaly*
*Dr G Sacks*
*Dr SM Solarsh*
*Dr L Steingo*
*Dr CJ Thatcher*
*Dr J van der Wat*
The Private Specialist Indaba was held on 15 February 2014 at the PPS Office in Parktown.

The three presentations were of excellent quality and were highly informative. The discussion after each presentation was thought provoking and the resultant debate added to the high standard of the event.

It was clear during the activity that:

• The morale of medical practitioners is at an all-time low and this needs to be addressed.
• Due to insecurity about the future of the medical profession stress amongst doctors is increasing to an unacceptable level.
• There was concern over the lack of interest and involvement in SAMA and specialist groups as this results in a lack of support and unity.
• There are serious problems in the public sector that requires to be addressed urgently.
• Medical student training is an issue including funding to Universities and this should at some stage be addressed by the Ministers of Health and Education.

• COIDA issues require urgent attentions, and the PPC of SAMA has been working on the issue for some time, including reaching out to the Public Protector and considerations towards involving the Minister of Labour.
• A new billing / coding system that is cost based should be considered.

The outcomes from the Indaba include:

1) A survey to be undertaken in collaboration with private practice and university departments to create evidence-based outcomes in private practice.
2) A survey to ascertain outstanding fees with regard to COIDA is to be undertaken.
3) The Branch works with the National Office as regards COIDA’s outstanding payments to practioners.
4) The Branch works with its doctors towards addressing the issue of low morale, insecurity and stress and plan follow up activities.

The Branch is committed towards realising there outcomes but needs the members support and commitment.
Wits Faculty of Health Sciences

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Translational research: from bench to bedside.
The Gauteng provincial structure of the SAMA Trade Union held its first Provincial Executive Committee (PEC) meeting at the SAMA Head Office in Pretoria on 10 May. The goal of the meeting was to establish common ground among members regarding the functions of the provincial structure and to adopt resolutions that the Trade Union leadership can use to engage with the provincial Department of Health.

Among the matters discussed was the commuted overtime crisis, the lack of OSD implementation, RWOPS and issues related to interns and registrars. These will be the key areas of focus that the incoming Gauteng PEC rigorously intends to work on. We wish them all the best in their 2 year term:
The newly elected structure is as follows:

**Chairperson: Dr Mpho Pooe**
Cell: 083 377 6486
Email: mphohml@yahoo.com

**Vice Chairperson: Dr A Aina**
Cell: 082 641 6949
Email: ayodele_aina@telkomsa.net

**Secretary: Dr L Majake**
Cell: 082 314 1827
Email: magsmajake@hotmail.com

**Treasurer: Dr PR Seopa**
Cell: 082 451 3216
Email: prooyen@ul.ac.za
SAMA GAUTENG SURVEY 2014
HOW ARE WE DOING
& how satisfied are our members?

SURVEY DEMOGRAPHICS
44% (25) General Practice
56% (32) Specialist Practice
39% (22) Public Sector
61% (35) Private Sector

HAPPY WITH SAMA GAUTENG SERVICES?

WELL DONE

COMMUNICATION 51% (23)
ASSISTANCE 22% (10)
MEETINGS 22% (10)
OTHER* 5% (2)

POORLY DONE

LABOUR ASSISTANCE 21% (5)
COMMUNICATION 21% (5)
MEETINGS 17% (4)
NEGLECT 8% (2)

POSSIBLE INTERVENTION

PRIVATE SECTOR

PUBLIC SECTOR

WHAT CPD ACTIVITIES WOULD YOU LIKE TO ATTEND?

ETHICS 35% (14)
OTHER* 15% (6)
MX-SKILLS 15% (6)
SPECIALIST 10% (4)
MX-GP 22% (9)
MX-PRACTICE 10% (4)