LETLAPE LASHES OUT AT GROUP SELF-INTEREST

Until its Board and Council members stop 'bashing away at SAMA in the name of their own selfish special interest groups', the medical profession would face a bleak future.

This was the 'no holds barred' message delivered by Chairperson Kgosi Letlape at the first 2003 Board meeting on 21 February in Pretoria.

Letlape warned that unity was essential to strengthen SAMA’s hand in negotiations with managed healthcare groupings and the government. ‘The profession’s future is being legislated and nobody can influence policy as splinter groups.’

‘The government will speak to and respect a united SAMA, but now they want to treat us no different to hospital porters.’ Letlape was alluding to a comment by Minister Tshabalala-Msimang ‘last year’ who allegedly told a SAMA delegation that doctors should not value themselves more highly than porters in the health system. Letlape asserted, ‘We are more important than porters. It does not mean that porters are not important, but they are not planning the country’s health care.’

‘Branches must know that we’re competing with Independent Practitioners Associations’, he said, explaining that agreements by IPAs and managed health care bodies forced doctors to perform certain functions to bring down the cost of medications. Doctors then often went unpaid when medical aids ‘bailed’.

Speaking to the SAMJ after the Board meeting, Letlape said that ‘you can’t just blame the doctors - there are systemic problems. We have to look at the design and constitution of the Association and the way we’ve managed to carve it into private practice groupings’.

Referring to ongoing disputes within the Specialist Private Practice Committee (SPPC), he said the challenge was best illustrated by in-house correspondence stating that ‘in the beginning, there were six wise men taking care of everyone, but in the end there were a thousand not-so-wise men involved in self-interest groups’.

The fight with the Board of Health Care Funders (BHF) for example, is undermined by our division, not by the issues we are fighting for,’ he stressed.

Letlape cited ‘the debacle’ of radiology planning to withdraw from the SPPC unless certain conditions were met. At present there is no censure against groups that go against SAMA.

He thought the only alternative was to revamp the SAMA constitution so that decisions came from the centre and not the sides. A current SAMA rule insisted that 85% of interest group members also be SAMA members - but this was not enforced. Some interest groups had as few as 45% of their members in SAMA.

One problem was that Board and Council members ran the interest groups. ‘Each is a boss of a virtual Pty Ltd! Their greatest ambition seems to be to downplay the Association and to throw stones at the centre.’

‘They’re all totally independent and SAMA is just an embellishment on their CVs. They come to the centre to strengthen their interest groups, not because they care about the whole profession.’ He worried that ‘doctors understandably question why they should join if Board members and branch chairs are the greatest critics.’

Letlape was speaking to the SAMJ shortly after Finance Minister Trevor Manuel’s national budget address, in which it was announced that provinces would get an extra R2.3 billion over three years to retain doctors, pharmacists and other health professionals with scarce skills. Letlape commented that he was sceptical because provinces seemed unable to spend what they already had.

‘They have to get to the root of the problem. Fix state doctors’ salaries. We need to offer them better packages, not give them rural allowances but add it into the structural design.’

He lashed out at the government’s ‘migrant labour’ policy of using foreign doctors, particularly Cubans for low pay in rural areas, while it complained loudly about other governments poaching South African health workers.

Letlape said the conditions under which foreign doctors were forced to work in South Africa, particularly Cubans who paid a large portion of their salary back to their own government, were ‘criminal and a gross violation of their human rights’.

He said it was absurd to call a fundamental violation of human rights a ‘government-to-government agreement. It’s like saying there’s no hanging in this country and then entering a government-to-government agreement in which you ship people out to be hanged elsewhere!’

The biggest hypocrisy was that the South African government was not prepared to create decent working conditions for its own doctors, so it exploited others instead.

‘We must highlight that the government is closing medical schools and shipping people from rural areas to study medicine in Cuba. The investment of many, many years is being destroyed overnight,’ he said.

‘It is our duty - the government must know that they cannot do it in our absence,’ he concluded.

Chris Bateman