

# MESSAGE FROM THE PRESIDENT

## Acceptance speech

**Key words:** access for all, training, professionalism, autonomy, engaging, accountability

Dear Colleagues

I was deeply humbled to be nominated the President of the South African Orthopaedic Association for the year 2014–2015. I take this appointment as a call to serve the SAOA, its membership and all its interests more than as a personal honour. I believe that leadership is never an avenue to be self-serving but rather a platform to render service to people. I therefore pledge to serve you and the Association to the best of my ability. I am fortunate to have worked with members of the SAOA executive in the past three years. During that period I was exposed to the diverse skills, commitment and good work that go on behind the scenes in the running of our Association. I plan to continue harnessing and maximising those skills in advancing the SAOA. I also have the past presidents and presidents of our sister international orthopaedic associations from whom to take advice. More importantly though, I am looking forward to the inputs each one of you will be making in taking the SAOA forward.

In order to be successful in what we do as an association, it is very important that we focus on the correct goals. I believe that if we focus on the patients and the community we are serving, everything else will fall into place. This will call on us among other things to embrace professionalism; practise evidence-based medicine; and execute our trade with the ultimate skill and ethics.

Access to good quality orthopaedic service for all South Africans will be one of the major drives during my term of office. Franklin Roosevelt during his presidency in the USA said, 'The test of our progress is not whether we add more to the abundance of those who have much; it is whether we provide enough for those who have little'. Dr Jan de Vos in his valedictory speech alluded to one of the challenges to access to quality health care services which was: the reserve demand and supply ratios in our two healthcare systems. It is clear that both systems need attention and it is important that we as orthopaedic surgeons participate in mapping the way forward in both these systems before somebody else does it for us. Orthopaedics is one of the few specialties where it has been demonstrated that intervention is cost effective. As the SAOA we have to demonstrate in both our public and private healthcare systems this 'value for money' to all the relevant stakeholders (policy makers, regulatory bodies and funders) to win this battle. It will have to start by addressing the quality of training at our various academic orthopaedic departments to ensure good quality and relevance to the South African population.

We have to ensure that the patients with insurance have access to surgeons of their choice and not funder-preferred services. This will require us to function as a unit while retaining our individual independence when we advocate for this group of patients. In doing so we have to listen to the warnings given to us by Prof T Briggs, Past President of the British Medical Association, and improve our arguments instead of raising our voices when engaging with them in order to avoid comebacks.

The Orthopaedic Association should continue to support those colleagues who are working in state hospitals. Recently the Association has engaged with the deans of universities and Heads of the Department of Health in provinces where there have been delays in the appointment of heads of departments of orthopaedics. Attention must also be paid to the non-academic hospitals where specialists are expected to deal with large volumes of work with very few resources. This may mean that we establish a portfolio in EXCO to deal with public sector orthopaedic issues and to engage with the Ministry of Health and the Office of Health Standard Compliance on acceptable minimum standard of orthopaedic care for patients in public hospitals. As part of improving access to orthopaedics services we should embrace and participate in outreach programmes to the needy areas in the country.

Engagement with stakeholders will be very important going forward. It is the best way to protect our autonomy together with professionalism and accountability. Participating in the newly relaunched National Joint Registry is but one low-hanging fruit which will demonstrate our accountability to all our stakeholders. Engaging in peer-review processes and practising evidence-based medicine is part of the professionalism that can only take us to greater heights.

#### References

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