

OPTIFORUMDECEMBER 2021 EDITION



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FOREWORD

It's hard to imagine any good news coming out of 2021. The COVID-19 pandemic has taken the lives of more than 4 million people globally, with the highly contagious Delta variant fuelling case counts and infection rates.

While it's true that world and South African leaders have a great deal to do before they can turn a chapter on the pandemic in 2021. A Retrospective assessment of this past year does provide a mixture of sad and encouraging news. Hopefully objectively captured in this issue of the Optiforum.

The Optiforum, published biannually, is to be regarded as an official mouthpiece of the SAOA, presented as a compendium of news, views and reviews, which are relevant to the professions of optometry and dispensing opticianry.

Importantly, the Optiforum is also made available to our partners and stakeholders with whom we regularly engage and whom we thank for their continued support.

SAOA TEAM



INTRODUCTION

PRESIDENT'S ADDRESS

Greetings Colleagues,

The year 2021, followed the globally most challenging year in the recent times of 2020, with the emergence of the global scaled and world changing Covid 19 virus. Our professions and industry also underwent tremendous amount of pressures, forced adaptive changes and our professionals faced on daily basis, real and absolute risk of contracting the virus, sadly and unfortunately, between 2020 and 2021 we have lost 10 colleagues to the virus. We extend our deepest condolences to their families and loved ones; May their souls continue to rest in peace.

As we champion forward amidst all the challenges of 2021, there are many positives that as the SAOA We are proud to announce to the industry. Of course the greater challenges continue with the realization of complete scope of practice for both Optometrists and Dispensing Opticians, Importantly the training of the cadres of our professions to be able to realise the scope practice.

On the scheme levels, interactions have continued, with the SAOA hard stance against frame mark-up determinations, unwarranted random audits and practitioner abuse by schemes amongst others. The advancement and recognition of scope has been pushed with CMS that led to release of Circular 19, and the recognition thereof by all schemes in the Republic.

The More than 11001 webinars have led a paradigm shift in practice as intended, reminded Practitioners that indeed Optometry is more than 11001, We are about Vision and eye health, in intend, purpose and practice. Let us continue to be our Professions ambassadors in our own spaces, practice our craft with the highest levels of ethical professionalism, and teach our patients, and all stakeholders, that indeed Optometry is more than 11001.

The SAOA has in the past experienced many challenges, from recognition by own members to stakeholders, in recent times, the profile of the SAOA could not be at a higher point, from leading vaccines programs for our professionals, to guiding throughout the most challenging times of our world when Covid 19 hit, to getting Optometry, Dispensing Opticians and lab technicians classified as

Essential service as we continue to advance our profession as the primary care provider for eye care. The SAOA has not only placed the agenda of eye care on the table, but lead the debates and became intricately involved in achieving all that has been achieved.

The SAOA Board is proud and honoured to present this Opti Forum to you and we hope as you read all about the achievements and the challenges, you will note and value how important your membership and support is to the SAOA, because the SAOA is indeed the voice, ears, eyes and conscience of Our Profession. As a Board, We will continue as we have been, to give the best we can humanly possibly do, to enhance and advance our professions that we live and practice freely, fairly, ethically and proudly.



DOLLARS BOLOKA
SAOA President

SAOA ACTIONS, INTERVENTIONS AND ACCOMPLISHMENTS: 2021

During the past year, the SAOA took the professions of optometry and dispensing opticianry to another level in difficult circumstances. Achievements during this period included, but were not restricted to:

- Orchestration of Covid 19 vaccination roll out for optometrists, dispensing opticians and staff.
- Guidance relating to compliance of both POPIA and PAIA within stipulated timelines.
- Drafting and introduction of revised procedural codes
- Acceptance of an expanded scope by key stakeholders, including the CMS.
- Optometry and Dispensing Opticianry recognised as essential services due to SAOA submission.
- Continued engagements with key stakeholders and regulatory authorities.
- Withdrawal of sales of contact lenses by nonregistered retail outlets such as Takealot.
- Cessation of random audits by Opticlear and GEMS.
- ' More than '11001' webinar series x 17
- BHF allocation of practice numbers to identify optometrists with therapeutic privileges.
- Engagement with Discovery regarding intended involvement with frame selection.
- Nelson Mandela Day initiative in collaboration with Russel Nugent
- Pharmacy assistance and support to accommodate scripts from optometrists with therapeutic privileges.
- Extensive marketing of eye care to the public throughout the year.
- Eye care awareness initiatives throughout the year with particular emphasis during Eye Care Awareness Month
- Focus on Gender based Violence (GBV) during National Women's Month and National Women's Day (9 August).
- Virtual warehouse for practitioners affected by vandalism and looting.
- Relief funds established in collaboration with key stakeholders to assist practitioners affected by the looting and vandalism.

- Member survey re Certificate of Need.
- Member survey re random audits by medical schemes
- Membership Hotline assistance provided regarding ethics, human resources and practice management, in general.
- Initiation of Student body under the wing of the SAOA.
- Promotion of healthy vision linked to road safety during National Transport Month.
- Partnership with PPS
- Weekly NewsFlashes.
- Financially stable.

SUBMISSIONS

- SAOA Response to draft rules pertaining to online sale of optical devices.
- SAOA Contributions to HPCSA Strategic Review.
- SAOA Submission to Dept Health in opposition to the draft regulations pertaining to the Certificate of Need.
- SAOA Submission to SAHPRA for extended list of pharmaceutical substances.
- SAOA Official complaint lodged against Opticlear for undesirable conduct.
- SAOA official complaint lodged against OSSA (President) for casting reflections/aspersions against reputation, probity and skills of profession of optometry.
- SAOA Submission to landlords in support of practitioners requesting payment latitude due to impact of Covid 19.
- SAOA media Release warning public of dangers of adjustable readers without consulting an optometrist.
- SAOA report on NGOs submitted to HPCSA/ PBODO.
- SAOA position in response to medical device regulations.

THE SAOA BOARD















EDUCATION AND CLINICAL STANDARDS

The ECSC meets weekly to address pending matters related to education and standards. Priorities during the year have included a review of Paediatric Vision & Adult Eye Examinations adopted by the SAOA from the American Optometric Association (AOA), primarily to ensure relevance from a South African perspective. Other Clinical Guidelines in the process of being considered include Driven Machinery, Aviation Optometry, the Skipper Licence, First time licence owners etc.

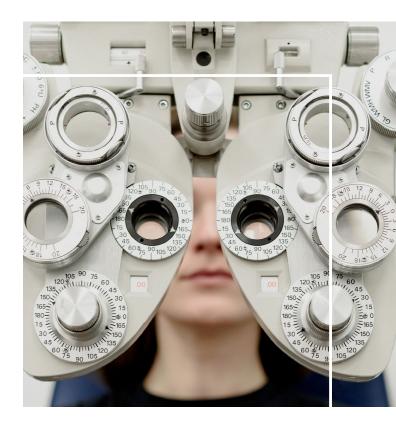
The ECSC were the architects of the 'More than 11001' webinar series. 17 webinars took place during the course of 2021 which received great reviews from SAOA members, and as a result, various role-players who also provide CPD, have contacted the SAOA seeking collaborative arrangements in 2022.

From an advocacy perspective, the ECCS are responsible for liaising with the heads of the optometry and dispensing opticianry departments at the various academic institutions around the country in addition to participating in engagements with stakeholders and other professions where standards of practice have relevance.

ETHICS AND TRANSFORMATION

A major responsibility of the Ethics and Transformation Committee is to ensure that the Governance documents of the SAOA are updated to accommodate legislative and environmental changes. To this end, the SAOA Memorandum of Incorporation (MOI) and Rules were revised by the Committee primarily to accommodate the practicalities and challenges of virtual meetings in addition to refining aspects of both documents, where deemed necessary. Such revisions were eventually adopted by SAOA members at the Annual General Meeting (AGM) held on 20 February 2021

Throughout the year, this portfolio provides advice, guidance and assistance on a daily basis, relating to ethical matters encountered in practice. Importantly, relationships are developed with important role-players such as the HPCSA Inspectorate to address unlawful rendering of professional services by non-registered parties. Entities such as 'Takealot' are to be commended for their swift reaction by withdrawing the sale of contact lenses, once advised of their wrongdoing.



EXECUTIVE COMMITTEE

The Executive Committee of the SAOA has the responsibility of keeping abreast with operational issues within the SAOA, with oversight, in collaboration with the CEO, who is a member of the Committee. The 2020/2021 financial year continued to introduce unprecedented challenges primarily as a result of the Covid 19 pandemic, giving rise to what has become referred to as 'new norms' which include staff members working from home, virtual meetings in preference to physical meetings, etc.

Throughout the past year, the Executive Committee were forced to think outside the proverbial box, with efforts dedicated to responsible budgeting and financial management, risk assessment which involved a Covid-related impact analysis and monitor, review of operational partners and contracts, deployment of resources (human time and finance) with close monitoring of overall performance in relation to objectives set. Where applicable, recommendations were presented to the Board for adoption.

FINANCE

As an Association, we have migrated through really turbulent times. We are truly grateful to our members for their continued support, loyalty and faith in the Association which has caused us to soar to new heights together. Financially, as an organisation, we have managed to operate within the confines of a carefully managed budget in the face of the difficult times. At this time, the financial status of the SAOA is healthy, owning our own, fully paid-up property in Midrand and a positive and growing cash flow. It is through hard work, dedication effort and teamwork, that we have managed to attain a stable financial position. Gratitude is extended to the CEO, staff and board of directors who have contributed to the stability of the organisation.

Despite the continued intensification of effort on behalf of, and for the benefit of our members, we are pleased to inform members that, for the eighth consecutive year, membership fees will not be increased for the 2021/2022 financial year. Please take note of our Early Bird offer. You will be entitled to a 10% discount if the full membership fee is paid by 31 January 2022. To view SAOA Membership fees for the 2021/2022 financial year as well as Membership benefits, **click here**.

MARKETING

The Marketing Committee is a goal orientated enthusiastic team which enjoys the support of a professional creative design agency to create brand awareness and communication to members and non-members on a weekly basis through newsflashes and social media postings. The aim within these postings is to keep the message clear and the brand awareness consistent. To keep up with changes in the digital age more use is being made of WhatsApp groups to share information of relevance with members.

Observances of eye care and other awareness events, including religious holidays, throughout the year are important focus areas for the marketing team, requiring effective communications and media releases. During National Women's Month (August), for example, our focus was on celebrating our She-roes. This was followed by the Eye Care Awareness Month where the SAOA embraced the internationally developed #LoveYourEyes campaign, and worked towards the aim to get 1 million people to have their eyes tested and make sure that EVERYONE COUNTS.

In general, the Marketing team has kept SAOA membership updated with news, views, and the acknowledgement of achievement on a regular basis.







PRIVATE PRACTICE

For the Private Practice Portfolio, in general, the year 2021 has been an eventful year with a full calendar of planned engagements together with many interactions resulting from spontaneous real time developments requiring quick innovative problem-solving interventions. In this regard, the portfolio engaged all key stakeholders, encompassing medical schemes, administrators, networks, regulatory authorities, other professions, and Government Departments. Emphasis was placed on the expanded scope for optometry being adopted by schemes, in the face of opposition from the Ophthalmological Society of South Africa (OSSA).

Importantly, responses to draft regulations were submitted to the relevant authorities, pertaining to (e.g.) online sale of optical devices, the Certificate of Need, Non-Government Organisations, amongst others. Of particular relevance was the official recognition of Optometrists, Dispensing Opticians and Lab technicians as Essential Services by the Department of Employment and Labour (DEL) as a result of motivation by the SAOA.

In 2021, COVID 19 continued to cause major upheaval in the world and all healthcare professions have been affected including the professions of optometry and dispensing opticianry. The SAOA provided continued guidance and assistance to members, collectively and individually .With reference to the roll out of vaccinations, the SAOA, in collaboration with V4HCW, ensured that the needs of optometrists, dispensing opticians and practice staff were accommodated.

This past year gave rise to the introduction and/or implementation of legislation, with particular reference to the Protection of Personal Information Act (POPI) and preparation for the Promotion of Access to Information Act (PAIA) where the SAOA played a significant leadership role, once again providing guidance and assistance which included the provision of a pack of practice- relevant documentation. Assistance was also provided to those practitioners who were adversely affected by the looting and vandalism that took place in July in the form of a 'virtual warehouse' and access to relief funds as a direct result of SAOA efforts.

PUBLIC HEALTH

The Public Health portfolio was the driving force of SAOA participation in the Eye Care Awareness Month programmes and projects which took place from 21 September to 18 October 2021. The theme for the month was 'Love Your Eyes'. World Sight Day (WSD) was celebrated on 14 October 2021. In support of the International Agency for the Prevention of Blindness (IAPB) and other partners, the SAOA had encouraged SAOA members to become involved in the biggest and most ambitious World Sight Day campaign yet, by encouraging everyone to take care of their own eye health. The global aim was to get 1 million people to have their eyes tested on World Sight Day.

A key component of the Public Health portfolio is engagement with all stakeholders active in the public health space. To this end, and of significance, is the formation of the Public Health Forum, which comprises many stakeholders who operate within public eye health and includes organisations such as the Department of Health, academic institution, numerous NGOs, Retina SA, OSSA, amongst others. The Public Health Forum has proven to be a very worthwhile and appreciated initiative, driven by the SAOA.

The efforts of the SAOA Eye Care Paton are also to be acknowledged. To support eye care awareness programmes in 2022, the SAOA re also to appoint 'Eye Care Ambassadors' who will be from within the ranks of respected high-profile personalities.

SPECIAL PROJECTS

Special Project activities instituted at the beginning of the 2020/2021 financial period concentrated on coding related matters and included a review of RVU's, the creation of SAOA Procedures and Coding Manual, the drafting of SAOA Procedures and Protocols Manual, and involvement with the 'More than 11001' Webinar series. As part of an extensive advocacy programme, medical schemes and other stakeholders have been lobbied in order for the codes created to accommodate the expanded scope for optometry as well as ensure that special interest fields are adopted and paid.

The SAOA has also been intimately involved in the process instituted by the Council for Medical Schemes (CMS) to review the Prescribed Minimum Benefits (PMBs) where a shift from PMB Conditions to PMB services is envisaged and where the primary care role of optometry and dispensing opticianry has been promoted.

Dispensing optician membership, an important special project, is to be considered as work in progress. In this regard, a comprehensive proposal had been presented by Dispensing Opticians, assisted by the SAOA, to the Professional Board for Optometry and Dispensing Opticians (PBODO) in early 2019 regarding the future of their profession. Whilst feedback was received stating that aspects of the submission were being addressed by the PBODO, areas such as employment was in the process of being reviewed by the HPCSA. The SAOA also joined the International Association of Dispensing Opticians (IOA) and all dispensing optician members of SAOA are now members of the IOA and have access to Dispensing Specific CPD and International news and conferences.

STRATEGY AND PROFESSIONAL DEVELOPMENT (SPD)

During the course of the 2020/2021, the SPD continued to focus on what became known as the 'T5' initiative (Together Towards Tomorrow Task Team). The intent is to establish a blueprint for the profession, to effectively negotiate anticipated challenges, factors and forces as we advance towards 2025. Issues addressed include education, the National Health Insurance, scope of profession, amongst others.

At this time, the individual contributions of the Task Team have been consolidated into a report, to be considered and adopted by the SAOA Board, and thereafter to be shared with SAOA members.



SPD TASK TEAM

Paul Ramkissoon

Preggie Naidoo

Harry Rosen

Tuwani Rasengane

Nivien Subramany

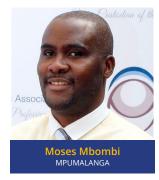
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SAOA REGIONAL REPRESENTATIVES























TEAM SAOA (THE OFFICE)













Michelle Naidoo Operations Officer



SIMARCA: FINANCE GURUS







SIMARCA Chartered Accountants was formed in 1991 and has organically grown to serve a multitude of clients in a variety of sectors, both across international borders and the South African economy. We report both locally and in cases directly to offshore holding entities both in the capacity as auditors or in cases as non-executive directors.

SIMARCA Chartered Accountants employs a team of dedicated professionals experienced in the fields of accounting, auditing, payroll, taxation and related services. It is our mission to provide businesses, entrepreneurs and individuals with the highest quality accounting, auditing, tax planning and business advisory services delivered in a timely, efficient, and innovative manner by a professional team that clearly enjoys working together to exceed their clients' needs. Whether through in-house resources or selected outsourced specialists, our mission is to ADD VALUE to our clients' business. Our business is based on the belief that every client and prospective

client is important, every employee is important, and each contact between our company and our clients is important.

The SIMARCA vision encompasses broadening their service base and ensuring continued service excellence to our clients. "We strive to understand our clients' needs in order to assist us in providing the very best services and benefits to our clients. At SIMARCA, we are continuously seeking to improve our services offered thereby ensuring lasting business relationships. Our approach is to gain a clear understanding of our clients' business in order to provide the best possible solutions, thereby ensuring that their business needs are achieved".

"We strongly believe in our core values of service excellence, client focus, efficiency, integrity and professionalism and strive through these core values to add actual value to all our clients through each of our engagements".







OUR PARTNERS













ALLIANCE OF SOUTH AFRICA INDEPENDENT PRACTITIONERS' ASSOCIATION (ASAIPA) AWARDS

ASAIPA pays tribute and acknowledges the contributions and accomplishments of individuals and entities active within the healthcare arena, as hosts of the National Medical Awards. In this regard, nominations are put forward primarily by professional associations in accordance with award categories, as defined by ASAIPA. The following are the award recipients for 2021, per category.

HCP Excellence Award: This award recognises private practice practitioners contributing significantly to improving Primary Health Care (PHC) delivery. Recipient: Paul Ramkissoon.

Community Service Award: This award is given to an organisation, group or individual dedicating their time, skill and expertise to assist community advancement by making a positive effect on the health and wellbeing of the community. Recipient: Ntombi Zitha. Health Science Student Award: This award is given to a Health Science student each year for exemplary dedication, commitment and leadership. Recipient Kayla Gerber - 4th year Optometry student at the University of the Free State.

Healthcare Leadership Award: This award recognises organisations, groups or individuals, who exemplifies the qualities of dedicated leadership, to inspire impactful solutions within South Africa's healthcare system that positively affect both patients and colleagues. Recipient: Dollars Boloka on behalf of the SAOA Board.

The award recipients, across a spectrum of health care disciplines, were invited to attend a ceremony in their respective provinces where presentation of the awards took place. Congratulations to all concerned.









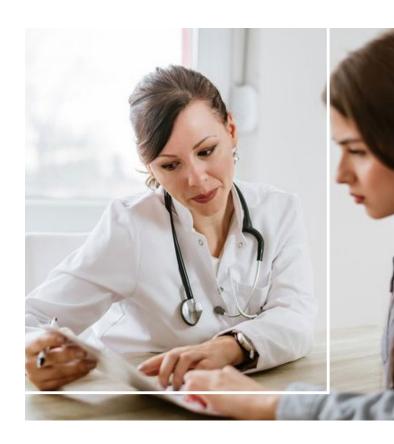


SAOA MEMBERS HAVE SPOKEN: SURVEY RESULTS

The image of the SAOA is regarded as a Key Performance Area of the SAOA Board and CEO ,and rating objectives are set at the beginning of each year, on the basis of a scale from 1 to 5 with '5' being outstanding and '1' being extremely poor (see legend below) . For 2021, the overall objective was to achieve an overall image rating of '4' (very good).

Member satisfaction surveys allows the SAOA to view unfiltered impressions, whether positive or not-so-positive, about the performance of the SAOA, based on member experience and perception. Such indepth data provides the important information that is integral to improving the delivery of value to members and efficiencies.

The SAOA conducted a survey amongst members during the latter part of 2021 to ascertain perceptions and attitude of members towards the SAOA. A total of 54 members participated in the survey; the following represent the results:



SAOA OFFICE

Telephone Etiquette :	4, 2
Ability to handle queries:	3.9

SAOA GENERAL

SAOA Value to Profession :	4.4	
SAOA Value to Practice :	4.1	

SAOA LEADERSHIP

Coherent Direction :	4,0
Awareness of Activities:	4,3

OVERALL SCORE: 4,1

Legend:

- 5 = Outstanding
- 4 = Very Good
- 3 = Adequate
- 2 = Poor
- 1 = Extremely Poor

It is encouraging to note that the overall objective has indeed been achieved, with the acknowledgement that improvement is still required in a number of areas.

"Thank you to all members who participated"

WHAT IS PRIMARY HEALTH CARE (PHC)?

The concept of PHC has been repeatedly reinterpreted and redefined in the years since 1978, leading to confusion about the term and its practice. A clear and simple definition has been developed to facilitate the coordination of future PHC efforts at the global, national, and local levels and to guide their implementation.

"PHC is a whole-of-society approach to health that aims at ensuring the highest possible level of health and well-being and their equitable distribution by focusing on people's needs and as early as possible along the continuum from health promotion and disease prevention to treatment, rehabilitation and palliative care, and as close as feasible to people's everyday environment." (WHO and UNICEF. A vision for primary health care in the 21st century: Towards UHC and the SDGs).

PHC entails three inter-related and synergistic components, including: comprehensive integrated health services that embrace primary care as well as public health goods and functions as central pieces; multi-sectoral policies and actions to address the upstream and wider determinants of health; and engaging and empowering individuals, families, and communities for increased social participation and enhanced self-care and self-reliance in health. PHC is rooted in a commitment to social justice, equity, solidarity and participation. It is based on the recognition that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction.

For universal health coverage (UHC) to be truly universal, a shift is needed from health systems designed around diseases and institutions towards health systems designed for people, with people. PHC requires governments at all levels to underscore the importance of action beyond the health sector in order to pursue a whole-of government approach to health, including health-in-all-policies, a strong focus on equity and interventions that encompass the entire life-course.

PHC addresses the broader determinants of health and focuses on the comprehensive and interrelated aspects of physical, mental and social health and wellbeing. It provides whole-person care for health needs throughout the lifespan, not just for a set of specific diseases. Primary health care ensures people receive quality comprehensive care - ranging from promotion and prevention to treatment, rehabilitation and palliative care - as close as feasible to people's everyday environment.



"It warms my heart to see a burning desire for our profession! I want to praise each member of the SAOA for the guidance, assistance and communication offered to us. If a question is asked, it is answered as quickly as possible. Thanks for all your effort!" - Juanita van Tonder

TRIBUTES TO THOSE WHO HAVE PASSED

(July to December)













"ra like to express my gratituae for your stellar service. Your swiftness in response to emails and delivery requests are also highly appreciated." - SP Majola Eye Care "I hope the optometrists in our SAOA realise how valuable you are and what this association does for us. Thank you for always having our backs." - Michelle Dateling

EYE CARE AWARENESS MONTH: LOVE YOUR EYES: 3, 400, 000 PLEDGES RECEIVED!

It is pleasing to note that that more than three million people world-wide pledged to have their eyes examined this past World Sight Day (14 October 2021)! The need for people to get their sight checked is more apparent now than ever, with the pandemic and worldwide lockdowns leading to more time spent on screens, less time spent outdoors, and missed vision and eye health examinations. On a global scale, evidence shows that half the world's population will be myopic by 2050. Up to one-fifth of those are at significant risk of blindness if current trends continue. So, to have so many individuals and organisations committing to more than three million eye exams is a shot in the arm for public health eye care around the world.

SAOA Office Bearers and Members, IAPB and others have worked hard over the preceding months to organise 'challenge' eye exams at interesting locations around the world to draw people's attention to eyes and vision. As part of the #LoveYourEyes campaign, vision and eye health screenings and examinations were carried out in South Africa as well as at some of the world's most famous sights including Mount Everest, Tower Bridge London, Bluff Point New Zealand, Brooklyn Bridge, Mount Kilimanjaro, and more.



THANK YOU TO ALL INVOLVED!

THE PUBLIC HEALTH FORUM

There are a number of stakeholders who are active in the eye care space and who have similar objectives, with particular reference to addressing the eye care needs of economically compromised communities and individuals. Such stakeholders have been operating in silos and, at times, seeking support and sponsorship from the same potential sponsors. The necessity for a common platform was realised..

The primary aim of the Forum, therefore, included the following:

- Sharing information and plans
- identifying potential collaboration and joint ventures
- pooling resources, where possible
- Establishing greater impact

Public Health Forum participants include:

- · SAOA
- University of Limpopo (Optometry)
- National Department of Health
- University of KZN (Optometry)
- University of KZN (Optometry)
- University of Johannesburg (Optometry)
- Cape Peninsula University of Technology
- Ophthalmology Society of South Africa
- · One Sight
- International Agency for the Prevention for Blindness
- · Africa Vision Institute
- Envision Sight
- Orbis
- SA National Council for the Blind
- Ster Kinekor
- Nkosinathi Foundation
- · Retina South Africa
- Right to Sight









THE MANAGED CARE ORGANISATION

Regulation 15 of the Medical Scheme Act Regulations defines the term, 'managed health care organisation' or provider, as "a person who has contracted with a medical scheme in terms of Regulation 15A to provide a managed health care service".

Taking into account the above definition, what is of relevance in understanding who qualifies as a managed health care organisation is the definition of the term "managed health care". The definition of the term "managed health care", also defined in Regulation 15, consists of three distinct elements all of which must be present in the contractual obligations imposed on the managed health care organisation, namely -

- "clinical and financial risk assessment and management of healthcare".
- "with a view to facilitating appropriateness and cost-effectiveness of relevant health services within the constraints of what is affordable [presumably to a medical scheme]"; and
- "through the use of rules-based and clinical management-based programmes".

The term "rules-based and clinical management-based programmes" is also defined in Regulation 15 as "a set of formal techniques designed to monitor the use of, and evaluate the clinical necessity, appropriateness, efficacy, and efficiency of, health care services, procedures or settings, on the basis of which appropriate managed health care interventions are made".

Thus, taking into account the above, in order for a person to provide the services of a managed health care organisation, the services offered must be intended and designed to provide clinical and financial risk assessment and management of healthcare through clinical-based programmes aimed at facilitating cost-effective health services for a medical scheme.

Accreditation of Managed Care Providers

Section 15A of the MSA states that the prerequisites for managed health care arrangements are that such arrangements must be with a person who has been granted accreditation as a managed health care organisation by the Council for Medical Schemes ("CMS"). Further, in terms of Regulation 15B (1), managed health care organisations must be accredited by the Council for Medical Schemes. Incredibly, despite contend requests for the CMS to register and accredit the Optometric Networks which render managed care services, such accreditation has not been forthcoming. To read further, **click here**.

FIRST FIRINGS AND RETRENCHMENTS OF UNVACCINATED WORKERS IN SA

While COVID-19 vaccines are not yet mandatory in South Africa, some employers have started firing or retrenching unvaccinated employees.

Commission for Conciliation, Mediation and Arbitration (CCMA) director Cameron Morajane has confirmed that so far, it had received 10 referrals, which have been "redlined".

Sunday Independent reports that last month, the Labour Department ruled that companies making COVID-19 vaccinations mandatory for staff would have to compensate their workers should they suffer side effects, illness or death from the jab. And President Cyril Ramaphosa had said the vaccines are not mandatory.

But individual companies and establishments are formulating their own policies. To read more, **click here**.

HPCSA WARNS THAT ANTI-VAX PRACTITIONERS MAY FACE MISCONDUCT INQUIRIES

The Health Professions Council of SA (HPCSA) is investigating complaints lodged by the public against registered practitioners who have adopted an antivaccination stance.

HPCSA spokesperson Christopher Tsatsawane reiterated that a medical practitioner's duty was to provide advice to any person on his or her physical

health status and administer or prescribe relevant treatment. "Such advice shall be based on information which is evidence-based and scientifically accurate." A committee of inquiry would determine if these healthcare professionals would be allowed to continue practising. To read more, **click here**.

SISONKE 2 BOOSTER STUDY: AM I ELIGIBLE TO PARTICIPATE IN SISONKE 2?

If you received a first dose of the J&J vaccine as part of Sisonke and are over the age of 18 years you will be invited to receive a booster vaccination. Health workers who are pregnant or breastfeeding can safely take part.

If you received a first dose of J&J outside the Sisonke study will not be invited. If you experienced a serious side-effect, serious allergic reaction or neurological abnormality after the first dose of the vaccine, it is requested that you please be in touch with the

designated safety team to complete a detailed evaluation and if appropriate, carefully monitored, booster vaccination.

A small number of people have a history of heparininduced or vaccine-induced thrombocytopenia (low platelets). These people cannot repeat a J&J vaccination. To view the Sisonke2 Fact Sheet, which includes contact details of relevant parties,

click here



POPI REVISITED

The Protection of Personal Information Act (POPIA) finally came into operation on 1 July 2020. It is important to note, however, that a transitional period of 12 months ended on 30 June 2021, when all organisations needed to be fully compliant.

POPIA is here to stay and like an octopus, has tentacles in every aspect of your practice operations: finance, marketing, HR, governance, IT, etc. The following represents a synoptic overview, from a practical perspective.

- You should not have, collect, handle or destroy any personal information of any person or entity, whether in physical or digital format, unless you have a legitimate purpose for doing so, and/or the necessary consent from the data subject.
- You must ensure the quality and integrity of the information you collect or process, and the data subject has the right to request access to their own personal information.
- You should also only keep and use the information for the purpose you collected it and destroy it when you no longer need it - unless a longer period is required or permitted by law, or you have specific consent. Sometimes anonymised data may however be kept, and there are a few other exceptions.
- While the information is in your possession or control, directly or held by third parties on your behalf, you are responsible to keep it safe and secure and make sure third parties do the same. This applies to physical as well as digital data.

The three primary components present in any processing of information, are:

 Technology (proper IT governance). Think cloud computing, IT systems, website cookies, mobile devices, email strings (especially using 'reply all'), social media interaction, databases, etc. Things like office equipment may even contain security risks. Digital copiers have hard drives that store an image of every document copied, emailed,

- faxed or scanned by that machine. The hard drive can be removed, and the contents processed with software available for free on the internet!
- Process Clear processes for the generation, processing, communication and retention of information are required - typically in the form of policies, procedures and standards.
- People This will include the education of staff, confidentiality agreements with operators, also getting suppliers and customers on board.
 You will have to create a culture of protecting personal information in your organisation.

To access the Do's and Don'ts relating to Covid 19 tracing by employers, **click here**.

NPCs, NPOs, NGOs AND PBOs: WHAT'S THE DIFFERENCE?

As a result of differing interpretations, there is some confusion between what constitutes a NPO and what constitutes an NGO.

It is best to start with the generic interpretation: NPO stands for Non-profit Organisation and means exactly what it says. It includes NGO's (Non-governmental organisations), CBO's (Community based organisations) and FBO's (Faith based organisations). In general, to qualify as NPO's all these organisations must exist for public benefit, and income and property may not be distributed to its members or office bearers except as reasonable compensation for services rendered.

A CHOICE OF LEGAL ENTITIES

All NPO's have a choice of legal entities. These are:

An NPC (Non-profit company): This is formed in terms of section 21 of the Companies Act and the steps that need to be followed are similar to forming a company in that it is registered with a Memorandum of Incorporation and its founding document. An NPC needs to be registered with CIPC.

A Trust (Public benefit trust): It must be registered with the Master of the Supreme Court with a trust deed as is its founding document.

A Voluntary Association: An agreement between the parties which normally takes the form of a constitution is required. A Voluntary Association is not regulated by statute. This is the most common form for smaller, regionally based NPO's.

Click here to read further.

NEW PENALTY RULE FOR NON-COMPLIANT TAXPAYERS

In line with the SARS strategic objective of making non-compliance hard and costly, it is imperative that SARS enhances its ability to impose administrative penalties in a more responsive manner.

Accordingly, legislation, which becomes operative on 1 December 2021, now allows SARS to levy penalties where one or more returns are outstanding. Before the change to the legislation, SARS could only levy a late submission of return penalty where two or more returns were outstanding. As a transitional measure for the first year, the "one tax return or more" rule will only apply to the 2021 tax return. The older rule will remain in place for one more year for 2020 and earlier returns.

For more information in this regard, **click here** (Government Notice 1461 in Government Gazette No 45396 dated 29 October 2021)

Kindly take note that due to the extension of the filing season deadline from 23 November to 2 December 2021, the date for levying of penalties on taxpayers that have not filed their return, will be extended and implemented in January 2022.

"I want to thank the SAOA team for their hard work and sacrifices, from which we all benefit - your dedication is truly admirable. Your prompt responses and urgent attention to pressing issues are also much appreciated."

- Steve Pulford

Ntombi Zitha commendation: "The SAOA is an association that has proven to be for its members, with its members. It has given all members an efficient platform that reports back on day-to-day activities. The association works hard to ensure that the scope of Optometry is kept up to date and that the standard of service is maintained."

WHY BECOME A MEMBER?

WE PROTECT YOUR RIGHTS TO PRACTICE - AS A PRIMARY CARE PRACTITIONER

On your behalf, and on a daily basis, we engage with all key stakeholders which include Government, regulatory authorities, medical schemes, administrators, other professions, the SA police, prosecutors, amongst others. The adoption of Optometry and Dispensing Opticianry as Essential Services by Government, the recognition of the expanded scope for optometry by the Council of Medical Schemes, pharmacy, medical schemes and administrators, opposition to frame mark- up controls by schemes, opposition to adjustable reader promotions and the withdrawal of the sale of contact lenses by Takealot are just a few examples of recent results of our actions. Importantly, the SAOA is the recognised custodian of the SAOA codes to facilitate reimbursement from medical schemes for professional services rendered.





i.e., to look after your professional interests and needs, collectively and personally. To accommodate this responsibility in a changing eye care environment, and within the context of what is now referred to as 'new norms', there are seven Board members, nine committees, just under 40 committee members, 10 Regional Representatives and eight full-time staff members. In addition, there is an advocacy team and a pool of experts. All deployed to dedicate time and effort to ensure that your interests are effectively and efficiently addressed

WE ONLY HAVE ONE MANDATE

WE KEEP YOU UPDATED AND PROVIDE LEADERSHIP, GUIDANCE AND ASSISTANCE

This pertains to all matters which impact or have the potential to impact on optometric practice and includes legislative change, clinical standards, developments of a commercial nature, ethicsrelated matters, etc. For example, the SAOA provided guidance and assistance throughout the various stages of Covid related lockdown, we guided and provided assistance regarding the implementation of the POPI Act to ensure practice compliance, we were in the forefront to ensure vaccination of optometrists, dispensing opticians and practice staff in the earliest phases of the vaccination roll-out, we were also in the forefront of deliberations at the highest levels to ensure relief for those optometrists who were affected by the vandalism and looting which took place earlier in the year.



MEMBER HOTLINE

Our members have access to SAOA Office
Bearers and staff 24 hours per day and
7 days per week, throughout the year.
Members receive advice and/or assistance
pertaining to practice/profession related
matters on a personalised basis which
includes labour related matters, challenges
experienced with medical schemes, ethicsbased guidance, practice management
queries, amongst others.



CONTINUING PROFESSIONAL DEVELOPMENT

We embrace the principle of CPD within the intended spirit, not only to ensure that members have access to high standard local and international CPD to accommodate HPCSA requirements but to ensure that our members are generally kept abreast of global trends and technological advances. To this end, alliances have been formed with reputable organisations such as SECO; in addition, the SAOA is an active member of the World Council of Optometry (WCO), the African Council of Optometry (AFCO) and the International Opticians Association (IOA).



The SAOA makes available a host of benefits for members based on extensive negotiations, which include comprehensive indemnity insurance, access to low-cost patient-friendly pamphlets, amongst others. In addition, SAOA members enjoy concessions which include attendance at virtual CPD events free of charge as well as access to various materials, either produced or sourced by the SAOA, at significantly reduced costs.





OUR VOICE IS PROPORTIONAL TO OUR STRENGTH IN NUMBERS

Your membership is really important to us! Not only to strengthen our voice and position in all matters that are of relevance to optometry and dispensing opticianry but, as a voting member of the SAOA, an opportunity is created for you to make a difference.

INTERNATIONAL PERSPECTIVES

International relations allow country associations to cooperate with one another, pool resources, and share information as a way to face global issues that may go beyond any particular country or region. Where applicable, the SAOA has embraced the principle of Think Global, Act Local' and is privileged to be affiliated to a number of global entities, with particular reference those listed below.

WORLD COUNCIL OF OPTOMETRY (WCO)

The World Council of Optometry (WCO) is an international membership-based non-profit organization for individual optometrists, industry professionals and optometric organizations.



The WCO vision is described as world where optometry makes high quality eye health and vision care accessible to all people.

AFRICAN COUNCIL OF OPTOMETRY (AFCO)

The African Council of Optometry is the peak representative body of the optometric organizations in Africa which facilitates the enhancement and development of eye and vision care by optometrists in the African continent.





INTERNATIONAL ASSOCIATION OF OPTICIANS (IOA)

The IOA is an association dedicated to the enhancement and development of the optical profession around the world. It acts as a forum for optician practitioners, industry partners and educators to come together and discuss topics which have an impact on the development of the profession and the delivery of world class eye care and quality vision.



SECO INTERNATIONAL AND THE SOUTHERN COUNCIL OF OPTOMETRISTS

SECO International, headquartered in Atlanta, Georgia, is a not-for-profit association founded in 1923 and is widely acknowledged as the largest optometric educational provider in the profession. SECO International provides year-round online distance learning through SECO University and 200+ hours of education and learning labs at SECO's annual meeting. SAOA members will have access to all SECO accredited CPD events during the course of 2022 at no charge; details in this regard will be made to members in due course.



THE SAOA WEBSITE



We are pleased to announce that the new SAOA website is live! This site serves as a general information platform to all things SAOA. Members can access handy information regarding their membership status, registration, resources, optometry info etc. through our membership database.

www.saoa.co.za

ETHICS CORNER: SOCIAL MEDIA VIOLATIONS

"I remember when Blackberry and Apple were just fruits"

Social media is one of the fastest growing industries in the world.

Social media are forms of electronic communication (such as websites for social networking and microblogging) through which users create online communities to share information, ideas, personal messages, and other content (such as videos). In essence, Social media describes the online tools and electronic platforms that people use to share content such as opinions, information, photos, videos and audio.

Social media includes social networks (e.g. Facebook, Twitter, WhatsApp and LinkedIn), content-sharing platforms (e.g. YouTube and Instagram), personal and professional blogs (including email, SMS, electronic journals as well as those published anonymously), internet discussion forums, and the comment sections of websites.

Businesses large and small are turning to social media as an outreach to potential customers worldwide, to advertise their products and services, and to engage with customers. In recent times we have seen how social signals are becoming an important part of search engine optimization.

There is no doubt that a well- planned social media strategy has the potential to make or take down a brand. For example, Lady Gaga (personal branding) quickly became a smash hit, and social media played a major role in her rise to stardom.

From a practitioner perspective, there are, however, legal and ethical considerations. To read the full article, **click here**.

CONCLUSIONS

The SAOA has been described as the eyes, ears, voice and conscience of the professions of optometry and dispensing opticianry. There is no doubt that the SAOA Office Bearers and staff have embraced these responsibilities with vigour and dedication during the course of 2021, with the results to show for it.

Best wishes are extended to SAOA Members, Partners and Stakeholders for a happy and prosperous $\,$ 2022.







THANKYOU

FOR YOUR CONTINUED
SUPPORT



Telephone: 011 805 4517

Fax: 011 805 3882

Email: membership@saoa.co.za

Physical Address: 561 Nupen Crescent Halfway House, Ext 12