

Changes To HPCSA Ethical Rules

MULTIDISCIPLINARY PRACTICES AND EMPLOYMENT OF PRACTITIONERS IN THE PRIVATE SECTOR

The Health Professions Council of South Africa (HPCSA) issued a [Notice](#) on 17th November 2023. Although the title contains the word 'proposed', this is a mistake; these are the final gazetted changes. The changes have been highlighted in the new [Ethical Rules](#).

This has been a long process, and the RSSA has been involved since the [initial notice](#) on 27th May 2022. The RSSA made two written comments in 2022, an [initial](#) and a [supplementary one](#). The RSSA highlighted legal concerns and the ambiguity and inconsistency of the proposed changes. We had concerns about changing the regulations on radiologists and multidisciplinary practices and the uncontrolled employment of practitioners by corporates. The changes published are still poorly drafted and, to some extent, ambiguous. We also believe that as the draft has changed significantly between the version sent out for comment and the final version, the latest version should have been sent out for comment again.

We met with the HPCSA last week to get clarity. The HPCSA indicated that the changes intended to allow practitioners to be employed by parties other than health care professionals (i.e. corporates) as long as conditions were met. The HPCSA justified this with recommendations from the Health Market Inquiry (HMI) and pressure from the Competition Commission. Further changes are expected in the next few months to Annexures 18 and 19.

We are writing to the HPCSA for final legal clarity. We are also discussing it with other professional groups, but it looks as if there are few if any, grounds for a legal challenge on the employment of doctors.

How will these changes affect Radiology?

Multidisciplinary Group Practices

Multidisciplinary group practices have been allowed for years, but HPCSA has changed its interpretation of its own Rules. When the Rules were initially changed the RSSA lobbied successfully to exclude radiologists from this dispensation. Our argument still holds that there is too much potential perversity if referrers are allowed to share in radiology revenue. The exclusion is still present in Annexure 6 of the Ethical Rules:

3.(2)(b) a medical specialist who practises in diagnostic radiology shall be excluded from the concession to form an incorporated practice in terms of section 54A, or to form a

partnership or association with a medical practitioner, medical specialist or another practitioner who does not practise in the speciality diagnostic radiology;

3.(2)(d) the only exception to the restriction pertaining to radiology referred to in paragraph (b) hereof shall be that a radiologist shall be permitted to form an incorporated practice, partnership or association with a nuclear physician or a radiographer registered in the relevant discipline, in view of the fact that the said professions are related to each other in terms of the nature of their field of professional practice.

As long as there are no further changes, this works for us.

Employment of Radiologists

The threat of corporatisation of radiology has eased due to significant pushback from the RSSA and practices. Life Healthcare has sold its teleradiology business (AMG). Life Healthcare is targeting Nuclear Medicine. We are awaiting the outcome of our appeal to the HPCSA on the Life Healthcare ruling. Mediclinic is approaching a few practices with their new model. We are awaiting feedback from Mediclinic on our concerns with this model. We will have to see whether or not the corporates intend to employ radiologists and NM Physicians, and how that affects practices which have sold out to corporates. Our trump card may be that there are just not enough radiologists!

We will let you know as things move forward. Please contact me directly if you need more information.

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