

MINUTES OF THE MEETING OF FEDERAL COUNCIL HELD AT VEREENIGING  
ON 11, 12 AND 13 APRIL 1956

Minutes of a Meeting of the Federal Council of the Medical Association of South Africa, held in the Union Steel Corporation Recreation Hall, Vereeniging, on 11, 12 and 13 April 1956.

*Present:*

*Ex Officio:* Dr. J. H. Harvey Pirie (Immediate Past Chairman), Dr. J. S. du Toit (Honorary Treasurer).

*Border Branch:* Dr. L. L. Alexander.

*Cape Eastern Branch:* Dr. E. M. Britten.

*Cape Midlands Branch:* Dr. L. M. Satchwell, Dr. M. A. Robertson.

*Cape Western Branch:* Mr. J. A. Currie, Dr. A. I. Goldberg, Dr. R. Lance Impey, Mr. J. D. Joubert, Dr. J. R. E. Lee, Mr. T. B. McMurray, Dr. H. G. Owen-Smith, Dr. F. W. F. Purcell, Dr. A. W. S. Sichel (Chairman of Council).

*East Rand Branch:* Dr. J. Q. Ochse, Dr. M. Segal, Dr. E. W. Turton.

*Natal Coastal Branch:* Dr. A. Broomberg, Dr. S. Disler, Dr. K. W. Dyer, Dr. H. Grant-Whyte, Dr. N. A. Rossiter.

*Natal Inland Branch:* Mr. B. A. Armitage, Dr. A. L. Young.

*Northern Transvaal Branch:* Mr. J. G. A. du Toit, Dr. W. H. Lawrence, Dr. J. H. Struthers (President), Dr. J. H. Sypkens, Dr. W. Waks.

*O.F.S. and Basutoland Branch:* Dr. D. Serfontein, Dr. R. Theron, Dr. G. F. C. Troskie, Dr. J. S. Visser.

*Southern Transvaal Branch:* Dr. C. Adler, Dr. A. Agranat, Dr. J. Black, Dr. W. Chapman, Mr. G. T. du Toit, Dr. J. Gluckman, Dr. S. C. Heymann, Dr. M. Peskin, Dr. T. Radloff, Dr. L. S. Robertson, Dr. T. Schneider, Dr. M. Shapiro, Dr. L. O. Vercueil, Mr. J. Wolfowitz.

*South-West Africa Branch:* Dr. H. C. Paradisgarten.

*In Attendance:* Dr. A. H. Tonkin (Secretary), Dr. L. M. Marchand (Associate Secretary).

*Observers:* Dr. T. Shadick Higgins (Editor), Mr. O. W. Johns (Public Relations Officer).

WEDNESDAY, 11 APRIL

The Chairman, Dr. A. W. S. Sichel, opened the meeting at 9.45 a.m. and welcomed members to the meeting.

*Obituary:* Before proceeding to the business of the meeting, the Chairman referred to the passing of Mr. M. Cole Rous. He spoke appreciatively of the high position both in the profession and the Association which Mr. Cole Rous had occupied, and of his heroic character in the face of illness. Members stood as a mark of respect to his memory.

1. *Notice Convening the Meeting*, published in the *Journal* of 2 March 1956, was taken as read.

2. *Proxies and Apologies:* Proxies were announced by the Secretary as follows: Mr. Currie to act for Dr. Fehrsen; Dr. Satchwell to act for Dr. Lane; Dr. Britten to act for Dr. Solomon; Dr. Dyer to act for Dr. Deale; Dr. Disler to act for Dr. Taylor; Mr. McMurray to act for Mr. Marr; Dr. Goldberg to act for Dr. Landau; Dr. W. H. Lawrence to act for Dr. Ziady; Mr. Joubert to act for Dr. J. P. de Villiers.

Apologies for absence were received from Mr. Marr, Dr. Deale, Dr. Taylor, Dr. Fehrsen, Dr. Lane, Dr. Schaffer, Dr. Solomon, Dr. Landau, Dr. Ross and Dr. Ziady.

3. *Introduction of New Members:* Mr. Currie introduced Dr. Owen-Smith; Dr. M. A. Robertson introduced Dr. Satchwell; Dr. Grant-Whyte introduced Drs. Dyer and Disler; Dr. Struthers introduced Dr. Lawrence; Dr. Purcell introduced Mr. Joubert.

4. *Minutes of the Meeting held in Pretoria on 13, 14 and 15 October 1955, were Confirmed and Signed.*  
*Matters Arising out of the Minutes:*

5. *Termination of Membership of Full-time Medical Officer:* Dr. Peskin reported that the Ethical Committee of the Southern Transvaal Branch had met but had been uncertain of the interpretation of Article 9.

After discussion it was proposed by Dr. Peskin, seconded by Mr. Wolfowitz and *Resolved Nem. Con.* that legal opinion be sought regarding the significance of paragraph 3 (j) of the Memorandum of the Association and its provisions, as well as any other relevant matters related to the imposition of discipline on members, with particular reference to expulsion.

6. *Income Tax Deductions in respect of Post-Graduate Study Expenses:* The Secretary reported that in accordance with the instructions of Council, members of the Executive Committee resident in Cape Town had been asked to approach the Minister during the Parliamentary session. A letter had been sent to the Minister, pointing out the reasons why it was felt that there should be such income tax deductions and requesting an interview. A reply had been received stating that the Minister was going into the matter and would meet the deputation in due course. Unfortunately it had not been possible for the Minister to meet the deputation before the Council meeting. *Noted.*

7. *Visit of Dr. T. C. Routley:* The Secretary reported that it had not been possible to arrange for Dr. Routley to visit the

Union during his term of office as President of the British Medical Association and the Canadian Medical Association. *Noted.*

It was proposed by Dr. Broomberg, seconded by Dr. Grant-Whyte and *Resolved* that the World Medical Association be asked to send Dr. Routley on a visit to the Union during 1957, in order that he might attend the South African Medical Congress to be held in Durban during that year and in order that he might explain the aims and objects of the World Medical Association.

8. *Approval under Section 81 of Workmen's Compensation Act:* It was proposed by Dr. Shapiro, and Council *Agreed*, that this item be discussed later when the Report regarding the Conference on the Provision of Medical and Dental Services in relation to Medical Ethics was discussed.

9. *Rule 19 (S.A.M. & D.C. Ethical Rules) and 'Medical Proceedings':* The Chairman stated that at the last meeting of Council Dr. Peskin had asked for a ruling in connection with advertisements for posts which had not been approved by the Association and which might be tendered for advertisement in 'Medical Proceedings'.

Considerable discussion followed, and it was proposed by Dr. Shapiro, seconded by Dr. Peskin, that the Parliamentary Committee be directed to ask for the abolition of Rule 19 and that a similar rule should be administered by the Association itself, by which it would be unethical for a member of the Association to accept an appointment unless it had been advertised in the *S.A. Medical Journal*.

After further discussion this resolution was withdrawn in favour of one proposed by Dr. Struthers, seconded by Dr. Adler, reading: 'That the Parliamentary Committee be requested to consider Rule 19 of the S.A. Medical and Dental Council's Ethical Rules in the light to today's discussion in Federal Council, and that they prepare a memorandum on the whole question which shall be transmitted to Branches; that the replies of the Branches be forwarded to the Parliamentary Committee and that the Committee report and recommend on this Rule at the next meeting of Council'. On being put to the vote, this resolution was *Carried Nem. Con.*

In the circumstances it was generally agreed that it would not be possible to give a ruling on this matter at this stage; but it was suggested that the editors of other journals might be asked to cooperate with the Association in not publishing advertisements for posts which were not approved by the local Branch of the Association.

10. *Chairmanship of Parliamentary Committee:* It was pointed out that Dr. Struthers was to be overseas for the next few months, and at his suggestion Council *Agreed* that Dr. Waks be appointed Acting Chairman of the Committee during Dr. Struthers's absence.

Arising out of this matter, Council further *Agreed* with the proposal of Dr. Impey that the S.A. Medical and Dental Council be requested to postpone the meeting which had been arranged with the Parliamentary Committee to take place in June.

11. *Recognition of Special Departments in Approved Hospitals—Registration of Specialists:* The Secretary stated that a memorandum, prepared by Dr. Lane, had been forwarded to the Registrar of the S.A. Medical and Dental Council who had informed him that it would be placed before the Specialists Committee for consideration. *Noted.*

12. *Ophthalmologists and Optometrists:* A Report from the Ophthalmological Society of South Africa was submitted regarding points of difference between ophthalmologists and optometrists.

After much discussion it was proposed by Dr. J. S. du Toit, seconded by Dr. Struthers; 'That the Federal Council is not prepared to accept the Report of the Ophthalmological Group as it stands, and that it be referred back to the Group for review'. On being put to the vote this was *Carried Nem. Con.*

Council also *Agreed* that applications for lectures to optometrists should be dealt with in accordance with the Medical Council's Ethical Rule 1 (7) whereby the permission of the local Branch of the Association must first be sought by a lecturer.

13. *Supplementary Health Services Bill:* During the discussion on the subject contained in the Minute above, it was mentioned that the Ophthalmological Society of South Africa had wished to give evidence before the Select Committee on the Supplementary Health Services Bill, and it was proposed by Dr. Struthers, seconded by Dr. Gluckman and *Resolved Nem. Con.* 'That no

evidence shall be given before a Select Committee except through the Federal Council or its Parliamentary Committee, so that the evidence will not conflict with the policy of the Association'.

#### REPORT OF THE EXECUTIVE COMMITTEE

14. *Vacancy on Executive Committee:* The Chairman stated that in accordance with Standing Order 30, he had appointed Dr. Landau to fill the vacancy on the Executive Committee caused by the death of the late Mr. Cole Rous, until the present meeting of Council. It was required that the Council should now fill the vacancy.

It was proposed by Dr. Shapiro, seconded by Mr. Armitage and *Resolved with Acclamation* that Dr. Landau be elected to the Executive Committee.

15. *Witwatersrand Medical Library:* It was reported that at the request of the Southern Transvaal Branch, Dr. L. I. Braun had been nominated to be the representative of the Association on the Witwatersrand Medical Library Committee.

Council *Confirmed* this action of the Executive Committee.

16. *Potentially Harmful Drugs:* It was reported that the Ethical Drug Association had drawn attention to Government Notice 1825 of 16 September 1955, in which it was laid down that all substances and preparations included in the Sixth Schedule to the Medical, Dental and Pharmacy Act must be labelled with the words 'Potentially Harmful Drug'. The Ethical Drug Association did not consider that this was in the interests of patients who might become apprehensive of the treatment they were receiving if their medicines were labelled as 'potentially harmful'. It had been requested that the Medical Association should consider this matter and might join the Ethical Drug Association in requesting the Minister of Health to alter the Government Notice so that preparations in future would be labelled 'Sixth Schedule'. The Executive Committee had agreed to this suggestion and representations had been made accordingly.

Dr. Theron asked that his vote be recorded against the action taken by the Executive Committee.

Council *Agreed to Confirm* the action of the Executive Committee. Drs. Black and Theron asked that their votes be recorded against this decision.

17. *Salary Scale of Assistant Editor:* It was reported that at the request of the Chairman of the Head Office and Journal Committee the Executive Committee had considered the scale at which the previous Assistant Editor had been appointed and had agreed that the vacancy should be advertised at the scale of £1,250 × 50—1,750 per annum (basic).

Council *Confirmed* the action taken by the Executive Committee in improving the scale.

18. *Compensation of Specialists:* It was reported that at the request of the Southern Transvaal Branch the Committee had considered the question of obtaining legal opinion on the question of compensation of specialists, should their practice be affected by the abolition of the Specialist Register and the introduction of a Consultants Register. It had been agreed that such legal opinion should not be obtained.

Council *Confirmed* the decision of the Executive Committee.

19. *British Medical Association Annual Meeting, Brighton, July 1956:* It was reported that the Committee had agreed that Dr. J. H. Struthers be the representative of the Association at the British Medical Association Annual Meeting, and that Dr. Emilia Krause be appointed as an alternate delegate. The Chairman extended the good wishes of Council to the President.

Council *Confirmed with Acclamation* the decision of the Executive Committee.

20. *Deaths under Anaesthesia and Due to Non-natural Causes:* It was reported that at the request of the Secretary for Health the Committee had considered the question of setting up panels of practitioners who could assist inquest magistrates. The Committee had agreed that this procedure would be desirable, and the Branches operating in Cape Town, Johannesburg, Pretoria, Durban and Bloemfontein had been asked to nominate such panels of practitioners.

Council *Confirmed* the action of the Committee.

21. *S.A.R. & H. Sick Fund Appointments:* It was reported that the Secretary of the Orthopaedic Surgeons' Group had asked whether an orthopaedic surgeon would be acting unethi-

cally and contrary to the rules of the Federal Council if he applied for one of these appointments. The Executive Committee had agreed to recommend to the Group that members of the Group should be allowed to apply for these appointments for a period of one year only, and that during the year the Association would make efforts to persuade the Sick Fund Board to accept the principle of dividing orthopaedic appointments into two portions, one capitation fee being for the ordinary everyday work while another capitation fee was set aside for injured-on-duty work. It was further reported that the Orthopaedic Surgeons' Group had accepted this suggestion.

After discussion regarding the procedure which had been adopted in dealing with this matter, Council *Agreed* that the report be *Noted*.

After further discussion it was proposed by Mr. G. T. du Toit, seconded by Mr. J. G. A. du Toit and *Resolved Nem. Con.*, "That Federal Council inform the S.A.R. & H. Sick Fund that the orthopaedic appointments now being made are temporary for a period of one year and that they be re-advertized after that period'.

22. *Greetings from Dr. Schaffer*: At this stage the Chairman read a cable sent by Dr. Schaffer from the United States, conveying good wishes for a successful meeting of Council. This was *Noted with Acclamation*.

23. *Urological Appointments—Mines Benefit Society*: It was reported that the Chief Medical Officer of the Mines Benefit Society had addressed a letter to the Secretary, covering copies of correspondence which had taken place between the Society and the Southern Transvaal Branch, in which it was suggested that there should be a 'moratorium of six months', during which time negotiations would take place regarding appointments to the Mines Benefit Society. The Executive Committee had first suggested that representatives of the Society should meet representatives of the Association in the form of the Augmented Executive Committee in the Transvaal, but on representations from the Southern Transvaal Branch had agreed that no further action should be taken in this matter and that any negotiations should be left to the Branch. *Noted*.

It was reported by a representative of the Branch that negotiations had taken place, with a satisfactory outcome, and that at a subsequent meeting of specialists held in Johannesburg it had been agreed that appointments in future should be on an open panel basis. *Noted*.

24. *Detached Medical Aid Societies*: It was reported that the Minister of Health had enquired into the reasons for the withdrawal of recognition from the Medical Aid Society. Information had been given to him and it had been indicated that he did not wish to pursue the matter. *Noted*.

25. *Contract Practice Policy*: It was reported that as Contract Practice affairs had become confused, the matter had been dealt with at a special meeting of the Executive Committee held in Johannesburg, to which representatives of the three Transvaal Branches had been invited. As the result of a very full discussion, the Executive Committee had met on the following day in order to formulate a policy which it now recommended to Council. The recommendations were as follows:

- (a) *Branch Contract Practice Committees*: That Branches shall manage all Contract Practice affairs in their areas, including Medical Aid Societies, Medical Benefit Societies, Railway appointments and all other affairs which may be referred to them by Federal Council as being matters of 'Contract Practice'. All members of Federal Council representing a Branch shall be *ex officio* members of the Branch Contract Practice Committee, in order that they might become fully conversant in Contract Practice affairs.
- (b) *Liaison between Branches*: That it be a council rule that where Contract Practice matters affect more than one Branch in an area, the Branch Committees shall meet together in order to discuss the matter and reach a solution. If they are unable to reach a solution they shall refer the matter to the Central Committee for Contract Practice.
- (c) *Central Committee for Contract Practice*: That the Central Committee for Contract Practice be composed of Federal Council members representing Branches on a pro rata basis, and that the Secretary submit to Council a suitable pro rata scheme.

(d) *Executive of Central Committee for Contract Practice*: The Central Committee for Contract Practice shall have an Executive Committee consisting of its members resident in the Transvaal. This Executive Committee should meet at frequent intervals and attend to the Committee's affairs in the intervals between meetings of the full Committee.

(e) *Tariff of Fees*: That the new Central Committee for Contract Practice, when appointed, shall consider the setting up of a tariff of minimum fees as a guide to the Branches and on which the Branches could base loadings for the various parts of their Branch areas.

(f) *Secretariat*: That a medical practitioner be appointed to act as the local Secretary of the Association in the Transvaal.

Considerable discussion followed, and it was eventually proposed by Dr. Broomberg, seconded by Dr. Grant-Whyte, that the recommendations of the Executive Committee be adopted. On being put to the vote, this was *Carried* by 35 votes to 4. Dr. Verucel asked that his vote be recorded against the resolution.

26. *Secretariat*: Discussion took place as to whether Dr. Marchand should be transferred to the Transvaal, or whether a new appointment should be made. Finally it was proposed by Dr. J. S. du Toit, seconded by Mr. McMurray and *Resolved* that authority be granted to the Head Office and Journal Committee to advertize for an Assistant or an Associate Secretary.

27. *Mode of Election of Central Committee for Contract Practice*: The Secretary suggested that Branches having three or four members of Council would be entitled to elect one member to the Committee. Those Branches having five, six, seven or eight members would elect two members to the Committee. Those Branches with nine, ten, eleven or twelve members of Council would elect three members to the Committee. Those Branches having thirteen or more members of Council would elect four members to the Committee. He suggested further that the Branches having only one or two members of Council should have representation on a joint basis and that the members representing those Branches should meet together and nominate members to the Committee from among their number. There were seven such Branches, having ten representatives on the Council, and as such they would be entitled to three representatives on the Committee. Such a distribution would give a total Committee of seventeen members, with an Executive Committee of seven members resident in the Transvaal.

It was proposed by Dr. Peskin, seconded by Dr. Broomberg and *Resolved* that the method of election of the Central Committee for Contract Practice be on the lines suggested by the Secretary.

28. *Supplementary Health Services Bill*: The Chairman stated that the Pathologists' Group had appointed an *ad hoc* committee to draw up a memorandum for submission to the Select Committee of Parliament. The memorandum had been submitted to the Executive Committee for consideration. Difficulties had arisen with the Group regarding the memorandum, and the matter had been referred to Federal Council.

The Secretary stated that the matter might fall away now, in that Council had passed a resolution at an earlier session ruling that no evidence could be given before a Select Committee except through the Federal Council or the Parliamentary Committee, in order that the evidence should not conflict with the policy of the Association.

After short discussion it was *Agreed* that further consideration might be given to this matter during the discussion of the Parliamentary Committee's Report.

29. *Federal Ethical Committee*: Council *Noted* that there was no Report from this Committee.

30. *Conference on Provision of Medical and Dental Services in relation to Medical Ethics*: Copies of a memorandum prepared by an *ad hoc* committee convened by Dr. Shapiro, had been distributed. Dr. Shapiro referred to the Conference which had been called by the Medical Council in Cape Town during March. He referred to a decision of the District Court of Iowa (U.S.A.), in which it had been ruled that corporate bodies could not practice medicine and that only persons who were registered medical practitioners were competent to do so. He referred to the considerable growth of Benefit Societies in the Union and maintained that they constituted a threat to private practice, in that they

were not subject to any discipline by the S.A. Medical and Dental Council. The Medical Council itself had drafted a rule whereby the chief medical officer of any corporate body would be responsible to the Council for any act done by or on behalf of the corporate body by any of its employed medical practitioners. The Minister of Health had informed the Council that this could not be implemented as it would require an amendment to the Medical, Dental and Pharmacy Act. He pointed out that pharmacists were in a different position, in that they might be operated by corporate bodies, but in such cases they had to appoint a chief pharmacist who would be responsible personally to the Pharmacy Board for anything done by or on behalf of the company. He did not feel that the Friendly Societies Bill would do anything to rectify the matter. He urged that the Association take legal opinion as to what might be done in order to bring about a satisfactory state of affairs.

The Secretary read the recommendation of the Executive Committee: 'That legal opinion be taken and that if legal advice be favourable it be left to the Executive Committee to institute legal action on the issue. That a levy be imposed on members of the Association to meet the costs of such action'. This was formally proposed by Dr. Pirie, seconded by Mr. McMurray.

In the discussion which followed, it was pointed out that if the legal opinion obtained was unfavourable, no action would be taken and there would be no levy on members.

On being put to the vote, the recommendation of the Executive Committee was *Carried Unanimously amid Acclamation*.

On the proposal of the Chairman, it was generally *Agreed* that the members of the Executive Committee resident in the Transvaal should procure the necessary legal opinion. It was further *Agreed* that members of the Association should be informed of the matter and the possible need for a levy, and the *ad hoc* committee which had been formed to prepare the memorandum for submission to the S.A. Medical and Dental Council was asked to prepare such a memorandum for submission to members.

31. *Approval under Section 81 of Workmen's Compensation Act*: It was pointed out that the Workmen's Compensation Commissioner had indicated that it was not his concern to ensure that a man knew that he had free choice of doctor, but that he had to see that the injured workmen obtained the necessary attention. The establishment of a Rehabilitation Centre in Johannesburg was mentioned, in which an assurance had been given by the Commissioner that patients would be allowed free choice of doctor.

After some discussion it was agreed that this matter be linked with the question of obtaining legal opinion referred to in the Minute above.

Council adjourned at 6 p.m.

THURSDAY, 12 APRIL

The meeting commenced at 9.15 a.m.

#### REPORT OF HEAD OFFICE AND JOURNAL COMMITTEE

This was presented by Dr. Sichel and considered seriatim as follows:

32. *Library Grants*: It was reported as follows:

'A successful meeting of representatives of University Medical Libraries was held in Cape Town on 26 January 1956, and the Committee has agreed to recommend to Council that the recommendations of the Librarians' meeting be supported. These are as follows:

- (a) That after noting the terms of the agreement reached between the Medical Association of South Africa and the Libraries of the Universities of the Witwatersrand and Cape Town on 20 April 1936, this conference recommends that the Medical Association of South Africa accept the policy of supporting Medical Libraries in the Union which will supply the needs of its members, and that if the Libraries of the Medical Schools of the Union are able to supply a service to members on the basis at present provided by the Universities of Cape Town and the Witwatersrand, they shall be given grants equal in amount to those given to the two Libraries mentioned above.

- (b) That there should be no reduction in the amounts granted to the University Libraries of Cape Town and the Witwatersrand.
- (c) That it be recommended by the Federal Council that the Branches of the Medical Association, in whose geographical area a Medical Library is situated, should be asked to support that Library financially as far as possible.

After discussion the Chairman asked whether Council would agree to adopt the principle put forward.

It was proposed by Dr. J. S. du Toit, seconded by Dr. Broomberg and *Resolved Nem. Con.* that the recommendations of the Committee be adopted.

33. *Legal Defence of Doctors*: It was reported as follows:

'This matter was referred to the Committee by Council at its last meeting, and the Committee has agreed to recommend to Council that the question of establishing a South African Medical Protection Society should be investigated and that the Medical Protection Society in London should be asked to send a representative to the Union to discuss the matter, on the understanding that if the South African Medical Protection Society was not formed, the Association would meet the expense incurred'.

After discussion it was proposed by Dr. Shapiro, seconded by Dr. Peskin and *Agreed* that the Committee's recommendation be amended by the insertion of the words 'if required' before the words 'the expense incurred'.

The recommendation as amended was then put to the meeting and *Carried Nem. Con.*

34. *Pension Scheme for Doctors*: It was reported as follows:

'Three pension schemes have been submitted by (1) The Norwich Union Life Insurance Society, (2) The South African Mutual Life Assurance Society and (3) Die Suid-Afrikaanse Nasionale Lewensassuransie Maatskappy (SANLAM).

(1) The scheme submitted by the Norwich Union is identical with the one which they submitted to and which was accepted by the Commercial Travellers' Association. Although in some ways it is a reasonable scheme, it depends on the support of the members of the Association who will pay their premiums to the Association's office with their annual subscriptions. There are distinct disadvantages, however, in that the Association will be responsible for the payment of the premiums on time, even though some members may be tardy in paying. Also, there is no compensation for the work done by means of a commission.

(2) and (3) The schemes submitted by these two *South African* companies are very similar and work on the endowment policy principle. The amount payable on due date may be invested in an annuity for the member or in a joint annuity for the member and his wife. The premiums are paid direct to the company by the insured and all assurances effected by the Association are subject to commission. This form is probably best suited to the needs of members of the Association who should be encouraged to insure themselves as early as possible. The member could choose which company he would prefer and the Association would do its best to complete the business for him. In view of the considerable amount of work entailed in collecting annual premiums, it would not be reasonable to expect the present office staff to undertake this work. The commission mentioned above would be in respect of new business only. The amount of commission payable on renewals is small and is not worth our while at present.'

It was proposed by Mr. Wolfowitz, seconded by Dr. Alexander, that Messrs. Price Forbes (Africa) Life & Pensions Ltd. be appointed as insurance brokers to the Medical Association for the purpose of investigating and preparing a pension scheme for members of the Association.

After discussion it was proposed by Dr. Sypkens, seconded by Dr. Visser and *resolved* that the question be put. Mr. Wolfowitz's proposal was put to the vote and *lost*. The Chairman indicated that no further action would be taken, and the report of the Committee was *noted*.

35. *Collection of Group Subscriptions*: It was reported as follows:

'This matter was referred to the Committee at the last meeting of Council. The Committee considered a memorandum prepared by the Business Manager, and in view of the fact that the work of the Accounts Department would be considerably increased and that the engagement of an additional clerk would be necessary, the Committee agreed to recommend to Council that the collection

of subscriptions to the Groups be not undertaken by the Head Office.

Council agreed to the recommendation of the Committee.

36. *Dr. H. A. Moffat Memorial Fund*: It was reported as follows:

"This matter was referred to the Committee for attention and action. After consultation with representatives of the Committee responsible for collecting the Fund, your Committee has agreed that the total amount collected, plus any interest which may have accrued, should be handed to the University of Cape Town in order that a certificate and book prize should be awarded to a student in the fifth year of the medical curriculum, subject to certain conditions as follows:

- (1) The award known as the Dr. H. A. Moffat Memorial Prize, founded by the Medical Association of South Africa, will be in recognition of the services rendered by the late Dr. Moffat to the profession through the Medical Association of South Africa and the South African Medical Council.
- (2) Candidates for the award will be required to enter a special competitive examination which will be conducted by the Professor of Surgery. The examination will be a written and an oral one. In deciding on the form which the examination should take, special consideration will be given to the wider cultural aspects of Medicine, e.g. the history of medicine.
- (3) The award will be open for annual competition and all students in the fifth year of the medical curriculum at the University of Cape Town will be eligible to enter. There shall be no discrimination on the grounds of race, creed, colour or sex.
- (4) The award will consist of a certificate and a book award to the value of approximately £12 10s. 0d.
- (5) The selection of books must be approved by the Professor of Surgery and will be provided with bookplates which will contain a short statement reflecting the aims and achievements of the late Dr. Moffat. They shall also incorporate the Badge of the Medical Association of South Africa.

"Mr. Lane Forsyth undertook to request Prof. Shephard, of the Faculty of Fine Arts at the University of Cape Town, to design a suitable certificate and bookplate.

"The Committee agreed that Mr. Lane Forsyth and Dr. Abelsohn, on behalf of the Dr. H. A. Moffat Memorial Fund Committee, should carry out all the necessary arrangements and that when these had been made they would call on the Association for a cheque for the total amount of the Fund to be made over to the University of Cape Town. The Committee further agreed that permission be given for the use of the Association's Badge on the certificate and bookplate to be designed by Prof. Shephard.

"The Committee recommends that its action be confirmed."

Council confirmed the action of the Committee.

37. *By-Law 58*: It was reported that the Committee had received legal advice regarding the amendment of this By-Law and it recommended that the By-Law be altered as follows:

"That the second and third paragraphs of the By-Law be deleted and that the following be substituted therefor:

"The Head Office and Journal Committee shall have power to deal with all matters affecting the administration of the Journal and Head Office, provided that without the prior consent of the Federal Council or of the Executive Committee the Head Office and Journal Committee shall not—

- (a) incur any extraordinary expenditure, or
- (b) determine or vary the salary scales, remuneration or allowances of any official whose total remuneration exclusive of allowances exceeds £1,000 per annum, or
- (c) mortgage, sell or purchase any immovable property on behalf of the Association."

Council agreed that this be put forward as a Notice of Motion over the names of Dr. M. Shapiro as proposer and Dr. M. Peskin as seconder.

38. *Mortgage Bond*: It was reported as follows:

"The Association's attorneys require the formal passing of the resolution which follows, in order that the bond of £30,000 in favour of the Association's Benevolent Fund might be passed. The change in the Association's name and the fact that the Benevolent Fund is a separate registered entity, make it advisable to pass a new bond rather than to increase the old bond.

Resolution:

"That Alan William Stuart Sichel, as Chairman, and Arnold Hugh Tonkin, as Secretary, be and they are hereby authorised to sign a Consent to the cancellation of certain Mortgage Bond No. 2109 dated 19th March 1936 for Three Thousand Five Hundred Pounds (£3,500) plus One Hundred Pounds (£100) preferent costs, passed by Medical House (Proprietary) Limited in favour of the Board of Directors for the time being of the Cape of Good Hope Savings Bank Society, and by the latter ceded to the Medical Association of South Africa (British Medical Association), now known, however, as the Medical Association of South Africa, the relevant cession being dated 21st August 1939 and having been registered at the Deeds Office, Cape Town, on 29th August 1939."

Council Resolved accordingly.

39. *Congress Articles*: It was reported as follows:

"Rule I(16) of the "Regulations Governing the Holding of a South African Medical Congress" reads as follows:

"Subject to the provisions of II(8), IV(2)(g) and V(3)(f) of these regulations, none of the papers read at any Plenary Session or Sectional or other Meeting of the Congress shall be published before they have appeared in the Association's Journal."

"As it is considered that this rule is not sufficiently explicit, and owing to the fact that a number of authors have taken it upon themselves to publish their papers elsewhere, the Committee recommends to Council that Regulation I(16) be amended to read:

"Subject to the provisions of II(8), IV(2)(g) and V(3)(f) of these regulations, authors of papers read at Congress must agree that they shall be published in the Association's official Journals at the discretion of the Editor. If an author wishes his paper to be published in an overseas specialist journal, he must obtain the consent in writing of the Association's Editor before embarking on this procedure."

"It is further recommended to Council that Organising Secretaries of Congress be directed to bring this regulation to the notice of all prospective authors."

The Editor explained that the original rule was extremely rigid and allowed for no latitude when requests were made to publish elsewhere.

An amendment was proposed by Dr. Shapiro, seconded by Dr. Peskin, as follows: "Delete all words after the word "Editor" in the fifth line and substitute: "If an author wishes his paper to be published in a journal other than the *S.A. Medical Journal*, he must obtain the prior permission of the Congress Committee."

A further amendment was proposed by Dr. Pirie, seconded by Dr. Impey, that the words "overseas specialist journal" (in the recommendation of the Committee) be changed to "any other journal".

On being put to the vote, Dr. Pirie's amendment was Carried.

The rule, as amended, was then formally Adopted.

After the tea interval, notice was given by Dr. Grant-Whyte, seconded by Dr. Broomberg, that at the next meeting of Council he would move the rescission of the resolution just taken. *Noted*.

40. *Appointment of Full-time Assistant Editor*: It was reported as follows:

"At its last meeting Council directed the Committee "to proceed with the appointment" of a suitable person to occupy this post. In considering this matter, the Committee felt that the basic salary scale of £1,250 × 50—1,500 would not be sufficient to draw applications from the right people. Arising out of this, the Committee considered the salary scales of all the employees of the Association, Recommendations arising out of this consideration will be contained in the next item of this Report.

"As a result of its deliberations, the Committee recommended to the Executive Committee of Council that the scale at which the post of Assistant Editor should be advertised should be £1,250 × 50—£1,750. Authority having been obtained, the post was advertised accordingly in the *South African Medical Journal*, the *British Medical Journal* and the official Journal of the Medical Association of the Netherlands. Applications have been received and are being considered at the time of writing this Report. A further report will be made at the meeting of Council."

It was proposed by Dr. Rossiter, seconded by Dr. Disler and Resolved that Council go into committee.

After discussion it was proposed by Mr. Wolfowitz, seconded by Mr. Armitage and Resolved that Council go out of committee.

The resolutions taken in committee were then put to the vote and *Reaffirmed Nem. Con.* These were as follows:

- (1) That the post of Assistant Editor of the South African Medical Journal be not filled at this stage.
- (2) That the post of Editor be advertised forthwith, and that the position of Dr. Shadick Higgins be referred back to the Head Office and Journal Committee for further report.

41. *Salary Scales:* It was reported as follows:

'Having considered the position of all the Association's employees and having made adjustments in the case of two of the women employees, the Committee now recommends to Council:

- (1) That as the work of the Business Manager is comparable with that of the Associate Secretary and Assistant Editor, his scale should be the same as for those posts.
- (2) That the scale of the Business Manager, Associate Secretary and Assistant Editor should be £1,250 × 50—1,750 (basic).
- (3) That the scale for the Secretary and the Editor should be £1,800 × 60—2,400 (basic), and that in view of their present positions the Editor should be placed on the £1,800 notch and the Secretary on the £2,040 notch.
- (4) That these changes should take effect as from 1st January, 1956.'

It was proposed by Dr. M. Shapiro, seconded by Dr. Peskin and *Resolved* by 29 votes to 13, 'That Recommendation (2) be confirmed except in relation to the Business Manager, and that the principle contained in Recommendation (1) be reconsidered by the Head Office and Journal Committee.'

It was proposed by Dr. Gluckman, seconded by Dr. J. S. du Toit and *Resolved* by 41 votes in favour, that Recommendations (3) and (4) be *Adopted*.

Council adjourned for lunch from 12.45 p.m. to 2.45 p.m. Members were the guests of the Mayor of Vereeniging at a Civic Luncheon held at the Riviera Hotel.

42. *Post of Public Relations Officer:* The Chairman stated that the time had come to consider whether this post should be continued. He moved that Council should go into committee. This was seconded by Dr. Broomberg and Council *Agreed*.

After considerable discussion it was proposed by Dr. Sichel, seconded by Dr. Disler and *Resolved* that Council go out of committee.

It was then proposed by Mr. Currie, seconded by Dr. Grant-Whyte, that the resolution taken in committee be confirmed. The resolution was as follows: 'That an ex gratia payment of £225 be made to the Public Relations Officer in respect of work undertaken before 31st August 1955, and that he be paid an amount of £75 per month in addition to his present remuneration of £100 per month for the months of March, April and May 1956; that he be given one month's notice as from 1st May 1956.' Council *Agreed*.

Dr. Sichel then moved the adoption of the Report of the Head Office and Journal Committee. This was *Carried*.

DEPUTATION FROM ANAESTHETISTS' GROUP

43. The Chairman welcomed a deputation from the Group, consisting of Drs. Roberts, Verster and Durham.

The Secretary stated that on two occasions the Central Committee for Contract Practice had recommended to Council that there should be a fee for intra-cardiac operations, but on both occasions Federal Council had turned down the recommendation. In the circumstances the Group had asked to be allowed to send a deputation to put the Group's point of view.

As the spokesman of the deputation, Dr. Roberts stated that the Group considered that a fee of 15 guineas was fair, considering the risks involved in giving an anaesthetic for intra-cardiac operations. He outlined the difficulties of the procedure and was supported by Dr. Verceuil as Chairman of the Central Committee for Contract Practice.

Dr. Roberts went on to state the case for the Anaesthetists' Group in asking for a new method of assessing anaesthetists' fees.

Certain questions were asked, after which the Chairman thanked the deputation for their attendance, stating that the matter would be discussed further under the Report of the Central Committee for Contract Practice. The deputation then left.

REPORT OF MANAGEMENT COMMITTEE OF BENEVOLENT FUND

Dr. Sichel reported that there had been three ordinary meetings of the Management Committee since the last meeting of Council, and that the average attendance had been eight members.

44. *Donation Tax:* It was reported that the Secretary had made application to the Commissioner for Inland Revenue in order that representations might be made by him on behalf of the Fund to the Honourable the Minister of Finance, so that exemption might be obtained from the payment of donation tax. In due course exemption had been granted by the Minister of Finance and an official announcement to this effect had appeared in the Journal. *Noted*.

45. *Grants for 1956:* It was reported as follows:

'Following the suggestion made at the last Annual General Meeting that the amounts granted to beneficiaries should be increased, the Committee considered the circumstances of the beneficiaries and as a result it recommends to Council that the following grants be confirmed for the year 1956:

Cape Eastern Branch: Mrs. L.A. £150 per annum (£120); Mrs. P.A. £240 per annum (£180).

Cape Western Branch: Mrs. O.G.F. £180 per annum (£120); Mrs. J.R.M. £150 per annum (£120).

Natal Coastal Branch: Mrs. E.M.H. £180 per annum (£120); Mrs. A.M.P. £180 per annum (£120); Mrs. K.R. £180 per annum (£120); Mrs. H.S.W.-R. £150 per annum (£120).

Northern Transvaal Branch: Mrs. G.E.K. £120 per annum (£120); Mr. P. E. W. £50 per annum (£50).

Southern Transvaal Branch: Mrs. E.C. (Non-member) £150 per annum (£120); Mrs. M.R.D. £150 per annum (£120); Mrs. M.G.M. £150 per annum (£120); Mrs. A.M. £150 per annum (£120); Mrs. M.A.P. £120 per annum (£120); Mrs. S.R. (Non-member) £120 per annum (£60); Mrs. M.F.S. £150 per annum (£120); Dr. T.H.T.B. £150 per annum (£120).

O.F.S. & Basutoland Branch: Mrs. M.A.L. £150 per annum (£120); Mrs. B.R. £150 per annum (£120).

Royal Medical Benevolent Fund: Mrs. F.W. £90 per annum (£60).

Officers Association, British Legion: Mrs. D.M.G.F. 26 gns. per annum (26 gns.).'

The recommendation of the Committee was accepted by Council, and its action was *Confirmed Nem. Con.*

46. *New Grants:* It was reported that in accordance with an application submitted by the East Rand Branch, the Committee recommended to Council that a grant of £10 per month be made to Mrs. G.E.L. as from 1st January 1956. Similarly, an application had been received from the Cape Western Branch, and the Committee recommended that Mrs. G.E. be paid an amount of £25 per annum as from 1st January, 1956.

Council *Agreed Nem. Con.* to the Committee's recommendations.

47. *Loan to Medical House (Pty.) Ltd.:* Dr. Shapiro raised the question of the interest rate on the loan which had been made to Medical House (Pty.) Ltd. by the Benevolent Fund. It had previously been agreed that the bond should be raised at 5½% interest. Since that time interest rates had increased and he proposed, seconded by Mr. Wolfowitz, that the interest rate on the loan from the Benevolent Fund to Medical House (Pty.) Ltd. be raised to 6½%.

An amendment was proposed by Dr. Peskin, seconded by Dr. Schneider, that the Chairman and Honorary Treasurer ascertain at what rate of interest such a loan could be raised, and that the same rate be then paid to the Benevolent Fund.

On being put to the vote, the amendment was *Carried* by 30 votes to 12. It was also *Carried* as the substantive motion.

48. *Exemption from Estates Duty Tax:* Dr. Schneider enquired whether the Management Committee had attempted to get exemption from Estates Duty Tax. The Secretary replied that no such application had yet been made. Dr. Schneider then proposed, seconded by Mr. Armitage, that application for such exemption be made to the Honourable the Minister of Finance. Council *Agreed*.

Dr. Sichel then moved the adoption of the Report of the Management Committee of the Benevolent Fund, which was *Carried*.

49. *Sub-Committee on Medical Fees for Private Practice:* Mr. Currie presented the Report of the Sub-Committee, in the absence of Dr. Landau. He referred also to a deputation from the

Committee which had been received by the Executive Committee of the S.A. Medical and Dental Council, when Section 80(bis) of the Medical Dental and Pharmacy Act had been discussed.

Discussion followed regarding the schedules of fees which the Committee had requested Branches to submit to it, and it was pointed out that the schedule submitted by the Association of Surgeons had been withdrawn on the advice of Mr. Radford who had apparently indicated that the S.A. Medical and Dental Council did not require to have a schedule of fees.

After further discussion it was *Agreed* that the Committee should request all Branches to furnish schedules of fees for all the Sub-Groups in their areas if they had not already done so.

Council *Noted* the Report of the Sub-Committee.

Council adjourned for dinner from 6.15 p.m. to 8.20 p.m.

On Council resuming, Dr. Struthers took the Chair.

50. *District Surgeons' Affairs:* Dr. Troskie reported on an interview which had taken place between representatives of the District Surgeons' Group, the Secretary for Health and his deputy. Assurances had been received regarding salaries, confinement fees and post-mortem fees. Repeated enquiries had resulted in no response, but a letter had been received on 7th April stating that no further concessions would be made to District Surgeons. It had also not been possible to have another meeting with representatives of the Department of Health. Dr. Troskie added that new contracts of service were being prepared by the Department of Health, and District Surgeons were unwilling to sign them.

After discussion it was proposed by Dr. Turton, seconded by Dr. Troskie and *Resolved:* „Dat die Parlementêre Komitee in samewerking met 'n afaardiging van die Distriksgeneesheersgroep, onmiddellik samesprekings met die Departement van Gesondheid reël met die oog op die opstelling van die nuwe memorandum van ooreenkoms en die punte daarin vervat.”

After further discussion it was proposed by Dr. Vercueil, seconded by Dr. Turton and *Resolved:* „Dat die Distriksgeneesheersgroep word deur die Federale Raad intussen geadviseer om nie die nuwe ooreenkoms te teken nie.”

It was further *Agreed* that the District Surgeons' Group should inform all District Surgeons that they should not sign any new contract put out by the Department of Health until the form of contract to be devised by the Group itself had been considered and agreed to by the Department.

#### FINANCIAL REPORT BY THE HONORARY TREASURER

51. Dr. J. S. du Toit presented his Report as follows:

„The audit for the year ended 31st December, 1955, has not been completed, owing to two factors. These are, firstly that the auditors have suffered difficulties in shortness of staff, and secondly the building operations in progress at Medical House, Cape Town, have made it difficult to supply the auditors with space in which to work.

The gross revenue from Advertising in the Journal amounted to £36,793 as against £35,371 in 1954. This shows an increase of £1,422. Members may recall that when I submitted my Report at the last meeting of Council I estimated that there would be a credit balance of at least £1,000 due to Advertising.

The expenditure on Printing and Blocks for the Journal amounted to £19,736, being an increase of £1,338 over the previous year. In 1955 the Journal contained 2,860 pages, whereas in 1954 it contained 2,724, being an increase of 136 pages. Formerly it was the practice to charge authors for the cost of the blocks for all amounts higher than £5, but during the last year this practice ceased and the Journal now bears the cost of all the blocks used in its pages.

Salaries and Allowances, Pension Contributions, Unemployment Benefit Fund Contributions and Pensions accounted for an increase of £2,607 over the previous year. The appointment of Mr. Johns and his typist accounted for £1,262 of this amount, while the employment of an extra woman clerk and certain temporary employees, together with normal increments, accounted for the balance of £1,345.

Postages and Telegrams cost £1,118, being an increase of £84. Delegates' Travelling Expenses amounted to £2,716, being an increase of £644.

Subscriptions from members and non-members amounted to £12,616, being an increase of £685.

The South African Journal of Laboratory and Clinical Medicine showed a loss of £282, while the loss was £279 in 1954.

The Durban Agency has not operated during the year under

review, but the Agencies in Cape Town and Johannesburg have both shown a profit, the exact amount of which is not yet known. As the loss on the Agencies in the previous year amounted to £148, it is pleasing to note that there has been a considerable increase in the work done by the Agencies in 1955 and that their efforts have been rewarded by profit.

The Medical Insurance Agency shows an income of £3,026. This shows a decrease of £475 over the previous year and is accounted for by the fact that the income during 1954 had been inflated by the payment of commissions which had been due previously.

The final account will show a surplus, but the exact amount will not be known until the audit is completed. It is likely, however, that this will amount to just over £2,000.

Financial Report of the Benevolent Fund: It is with pleasure that I can report that the income to the Fund during 1955 amounted to £3,761. Unfortunately this is a decrease of £1,237 over 1954. Of this amount £1,821 was received in interest on investments. Through the generosity of members and others, an amount of £243 was received "In Memoriam" by means of votive cards, while £573 was received for Services Rendered. Donations have decreased and amounted to £1,123, being £1,713 less than the previous year. Reference should be made with gratitude to the assistance of the Southern Transvaal Branch which contributed £692 as the result of special efforts. There were no legacies paid during 1955.

During 1955 grants totalling £2,473 were paid to beneficiaries. It is calculated that the accumulated funds will amount to approximately £41,965 as at 31st December, 1955.

On behalf of the Management Committee, I would like to express great appreciation of the support which members give to the Association's Benevolent Fund.

In dealing with the Estimates for 1956, the Honorary Treasurer pointed out that although there was to be a surplus as at the end of 1955, it had only been possible to estimate for a deficit of some £1,650 during 1956, on the figures which were available at the time that the Estimates had been drawn up. In view of the fact that the post of Public Relations Officer was to be discontinued as decided at the present meeting, it was possible that there would be no deficit. On the other hand, the appointment of a secretarial official together with staff and the opening of an office in the Transvaal would lead to increased expenditure and if the grant to the Libraries was to be increased, extra funds would have to be obtained. He pointed out that as both Library grants and secretarial assistance in the Transvaal were a form of service to members, members would have to be prepared to pay for the cost of that service by an increase in their subscriptions. It was mentioned that an amount of £2 2s. 0d. per member was received by the Head Office at present towards payment for services rendered by the Association, which included the *South African Medical Journal*, and that it might be necessary to raise the subscription payable to the Association office to £3 3s. 0d. if the services were to be increased.

After discussion Council agreed that the question of increasing the Association subscription be deferred for further discussion at the next meeting of Council.

Council also *Agreed* that the Head Office and Journal Committee investigate the question of appointing an Honorary Assistant Treasurer.

Dr. du Toit then moved the adoption of the Financial Report, which was *Carried*.

Dr. Vercueil proposed a vote of thanks to the Honorary Treasurer, which was *accorded with acclamation*.

52. *Newsletter:* Arising out of the previous item, it was proposed by Dr. Peskin, seconded by Mr. Wolfowitz and *Resolved* that at regular intervals a newsletter giving information on Association proceedings and intentions be circularised to all members of the Association.

#### REPORT OF CENTRAL COMMITTEE FOR CONTRACT PRACTICE

The Associate Secretary drew attention to the numbering of the Report which had been circulated. This was *Noted*. Dr. Vercueil presented the Report as follows:

53. *Meeting with Medical Aid Society Representatives:* Dr. Vercueil referred to the meeting with representatives of Medical Aid Societies which had taken place on 9th April, stating that he felt that cordial relations had been established with them. He added that the various matters which had been discussed would be dealt with in the numerous items of his Report. *Noted*.

54. *Medical Aid Society Fees:* It was reported that the representatives of the Medical Aid Societies had accepted the fees suggested for general practitioners, with the exception of the fee for weekends and public holidays. The Committee recommended that the Association should reiterate its demand for this increased fee, and Council *Agreed*.

It was reported further that the Societies had accepted the confinement fee for specialists, the fee for plastic surgery of the lip and palate, fees for neuro-surgery (provided that a limit of 15 guineas be placed on the fee for pre-operative investigation, should an operation follow), certain modified fees for radiology and fees for pathology. Council *Noted* that these fees would be published in the *Journal* in due course.

55. *Annual Application for Recognition:* Council was reminded that at its last meeting rules had been made by which Medical Aid Societies and Benefit Societies would be required to apply annually for recognition by the Association; that no fees should be paid to directors or members of committees governing Medical Aid or Benefit Societies, and that Branches of the Association would be entitled to seek verification of statements and audited statements when they might require them.

It was reported that the representatives of the Medical Aid Societies had stated that these rules were irksome and although they were prepared to accept that no fees should be paid to directors or members of committees, the other rules suggested an unwarranted mistrust of the Societies.

The Committee recommended that the rules regarding annual application for recognition, and that which entitled Branches to seek audited statements, be rescinded.

It was proposed by Dr. Shapiro, seconded by Dr. Peskin, 'That the resolution of Federal Council calling for annual application for recognition of Medical Aid and Benefit Societies be rescinded and that the following condition be substituted, viz., "That continuous recognition of Medical Aid and Benefit Societies be conditional upon a written undertaking by each Society that all such information relative to the Society shall be furnished to the Association on request", and that this condition be applicable to all new Societies seeking recognition.' On being put to the vote, this was *Carried*.

56. *Travelling Fees:* It was reported that an attempt had been made to persuade all Medical Aid Societies to pay travelling fees. This had not been possible as a number of Societies made no provision in their constitutions for the payment of travelling fees and could not afford to do so. There were some which had agreed to pay such fees in emergency.

Council agreed not to press Societies to pay travelling fees if no provision had been made in their constitutions to do so. It was further *Agreed* that the tariff book should indicate that mileage could be charged from the place where the call was received, if after normal working hours or during weekends. The Medical Aid Societies, it was reported, had intimated their agreement with this suggestion.

57. *Claims Forms:* It was reported that no unanimity could be reached regarding the abolition of claim forms. Council *Noted* this, but *Agreed* that the matter be kept on the agenda for future meetings with the representatives of Medical Aid Societies.

58. *Payment to Unregistered Persons:* It was reported that the Medical Aid Societies could not accept the request of the Association that unregistered persons should not be paid by Societies. They considered that they had a right to pay for such services as their members demanded, with the money provided by their members. The Committee recommended that the matter be dropped.

On being put to the vote, this was *Lost*, and Council *Agreed* that the matter be referred back to the Committee for further consideration.

It was reported that the Medical Aid Societies had stated that many of the cases dealt with by unregistered practitioners had been referred to them by registered practitioners. Council directed that a notice be placed in the *Journal* drawing the attention of members in the strongest terms to this unethical practice and directing that it be discontinued.

59. *Northern Medical Aid Society:* It was reported that whereas this Society had first incorporated the employees of three companies, it now included those of 50 companies and that new firms had to pay a considerable premium on joining. Although the original arrangement had been that the Society would inform the

Association when new firms were admitted, it was possible that this had not been done in every case. The Society had been asked to supply details regarding the income of its members, but this had not yet been received.

It was proposed by Dr. Shapiro, seconded by Dr. Gluckman and *Resolved Nem. Con.*, 'That the Central Committee for Contract Practice investigate the question as to whether the Northern Medical Aid Society has accepted as members the employees of any new company during the past 15 months without the prior consent of the Committee; that if it is found that such new companies have been incorporated by the Society without the Association's permission, six months' notice of termination of recognition be given to the Society.'

60. *Metal Box Company of S.A. Medical Aid Society:* The Society had been informed that recognition would be withdrawn unless it operated as a complete Medical Aid Society covering all its employees. The Society had replied that it was not prepared to withdraw those members who were at present covered by the Vanderbijlpark Medical Benefit Fund. The Committee recommended that approval be withdrawn if the Society continued to refuse to accept the ruling of Council. Council *Agreed*, and it was further *Agreed* that the Chairman of the Central Committee for Contract Practice should decide when the withdrawal of recognition would take effect.

It was reported that an amendment to the constitution of the Society had made membership of the Society compulsory for all new employees of the company. It had been pointed out to the Society that the income average must be maintained within the limits set by the Association, but it had been difficult to receive an assurance from the Society that this would be so in view of the fact that all the employees of the company were to be accepted by the Society. It was recommended by the Committee that unless the Society undertook to maintain its income level at that which was laid down by the Association, recognition should be withdrawn. Council *Agreed*.

61. *Age of Dependents of Members of Societies:* The Committee re-affirmed its previous recommendation that a suitable definition for a beneficiary of a member should read as follows: 'That no person over the age of 18 years be a beneficiary unless wholly dependent upon the member.' It was felt that this would cover all cases in which a dependant, either child or adult, was unable to earn or was not in receipt of any income.

On the proposal of Dr. Peskin, Council *Agreed* with this definition, with the addition of the words: 'or in receipt of an income not exceeding £150 per annum'.

62. *S.A. Breweries Medical Aid Society:* A suggested amendment to the constitution of this Society was considered in the light of the definition of a dependant.

Council *Agreed* that the amendment could not be approved as it suggested that the combined salary of member and dependant should be not more than £1,500 per annum to be acceptable.

63. *Revision of Fees for General Practitioners on a Geographical Basis:* The Committee recommended that the suggestion of the General Practitioners' Group that fees be revised on a geographical basis be not accepted.

Council *agreed* that this recommendation fell away in view of the resolution taken earlier in the meeting.

64. *Income Ceiling for Members of Medical Benefit Societies:* It was reported that this matter had been deferred at the last meeting of Council and that now the Committee recommended that the ceiling for members of Benefit Societies be raised from £600 to £750 for married members and from £300 to £400 for unmarried members.

After discussion it was proposed by Dr. Heymann, seconded by Mr. Wolfowitz and *Resolved Nem. Con.* that the matter be deferred until the next meeting.

65. *Income Average for Members of Medical Aid Societies:* The Committee recommended that the average income limit of members of Medical Aid Societies be raised to £850 (basic).

It was further reported that at a meeting with the representatives of Medical Aid Societies it had been suggested that the ceiling of £2,500 for Medical Aid Society members was difficult to control as secretaries of Societies were not able to know the individual incomes of the members of the Societies. A memorandum on this subject had been prepared by the Societies and was presented to the meeting.



It was proposed by Mr. Wolfowitz, seconded by Dr. Agranat, that the matter be deferred to the next meeting of Council, as discussion had not yet taken place regarding the Report of the Sub-Committee on the Economics of Medical Practice. On being put to the vote, this was *Carried*.

66. *Kinetic Treatment*: The Committee reported that fees for this treatment did not appear in the tariff book and enquiries had been received from time to time regarding the question of fair fees. The matter had been referred to the Ophthalmological Society which had submitted the following ruling: 'That the fee should be the ordinary Medical Aid Society consulting fee for specialists if the treatment is carried out by the ophthalmologist. Where the treatment is carried out by an orthoptist under the direction of the ophthalmologist the fee should be two-thirds of that ordinarily charged, with a maximum of 15 treatments per annum, and that further treatment should be by arrangement with the Society.' As there seemed to be some doubt as to the value of the treatment, the Committee had recommended that no fees be laid down for this process.

It was proposed by Dr. Young, seconded by Mr. Armitage, that the fees suggested by the Ophthalmological Society be adopted. Council *Agreed*.

67. *Applications for Approval by Medical Aid Societies*: The Committee recommended the approval of the following Societies:

- (a) Anglo Alpha (Dudfield) Medical Aid Society.
- (b) Federated Employers' Medical Aid Society.
- (c) Federation of Master Printers of South Africa Medical Aid Society.
- (d) General Motors Medical Aid Scheme.
- (e) Joseph Liddle (Pty.), Ltd. Medical Aid Society.
- (f) Sun Insurance Office Ltd. Staff Medical Aid Fund.

Council *Agreed* accordingly. Council further *Agreed* that recognition of these new Societies should date from 1st April 1956.

#### 68. *Amendments to Constitutions*:

(a) *Algoa Medical Aid Society*: The Committee recommended approval of certain amendments regarding the amounts of subscriptions paid by members and others regarding administrative rules. Council *Agreed*.

Council further *Agreed* to an amendment which made it possible for dependants up to the age of 21 to be included in the Society, provided they were unmarried and wholly dependent on the member.

(b) *Civil Service Medical Benefit Association*: Permission had been sought by the Society to incorporate the permanent employees of the National Botanic Gardens, assurance being given that the average income of members was not affected. The Committee recommended accordingly, and Council *Agreed*.

(c) *E. P. Newspapers Medical Aid Society*: Approval had been sought regarding amendments to the constitution of this Society which affected its internal arrangements. It was proposed that the annual maximum benefit be based on the family instead of the person in future. Approval of these amendments was recommended by the Committee, and Council *Agreed*.

Council did not agree to the amendment of Clause 17 of the Society's constitution which would exclude a member from benefits if he had drawn maximum benefits for two years in succession. Further clarification was to be sought on this clause.

(d) *Escom (N.C.U.) Medical Benefit Society*: It was stated that the Society reported improved annual amounts of maximum benefits and that optical and travelling fees were now accepted as benefits. The Committee recommended acceptance, and Council *Agreed*.

Council also *Agreed* to a further amendment by which the age limit of a child dependant should be raised from 18 to 21 years, provided that the child concerned was not earning more than £10 per month.

(e) *Natal Industries Medical Aid Society*: The Committee recommended the approval of amendments affecting the administration of the Society and the clarification given by the Society on certain existing clauses. Further, the Society's 'B' membership would now be confined to non-European employees earning a basic salary or wage of less than £20 a month. There would also be increases in the maximum benefit allowed in respect of each illness and for confinements, and the annual maximum had been converted from an individual to a family unit basis. Council *Agreed* accordingly.

(f) *N.T.E. Staff Medical Aid Fund*: The Committee recommended approval of amendments which adjusted the internal arrangements of the Society and provided for slight increases in

maternity benefits and the supply of medicines. Council *Agreed* accordingly.

(g) *S.A.A.M.E. Medical Aid Fund*: It was reported that the Society had made amendments affecting administration and adjustments to benefits. The rule requiring a second opinion before surgical service was rendered was deleted. The Committee recommended approval of these amendments. Council *Agreed*.

(h) *Safmarine Medical Aid Fund*: The Committee recommended approval of amendments increasing the subscriptions and doubling the annual maxima allowed. Council *Agreed*.

(i) *Sasol Medical Aid Society*: It was reported that the Society had found its expenditure unduly high with subscriptions well above average and the benefits granted well below average, and had applied to convert to a Benefit Fund operating on the open panel system as far as general practitioners were concerned and on part-time appointments for certain specialities. The Committee recommended that the Society be allowed to convert to a Benefit Fund on condition that it complied with the requirements of the Association as to income. It also recommended that general practitioner panels be limited to seven hundred and that the specialist services should be provided as suggested on the part-time panel system.

On the suggestion of Dr. Vercueil, Dr. Heymann moved and Dr. Grant-Whyte seconded, that Council go into committee. Council *Agreed*.

Council having come out of committee, the decisions taken in committee were *Confirmed*, namely: 'That Federal Council take active steps to discipline medical officers in giving service to Medical Aid Societies so as to prevent over-visiting and any other unethical procedures'; with the addendum: 'That all Medical Aid Societies be advised to incorporate in their rules that the benefits apply only if their members are attended by members of the Association.'

It was suggested that this was an item which could go into the proposed newsletter to members of the Association.

Council further *Agreed* that a period of six months be given in which to apply the above resolution and granting the Contract Committee the right to recognise the Society as a Benefit Society if the need was proved on the open panel system for general practitioners.

The question of specialist services was deferred until Council had discussed the whole question of open and closed panels.

(j) *Springbok Medical Aid Society*: There was a request for the incorporation of a constituent firm, Messers. Philip Hill Egan & Co. (S.A.) Ltd. This was not supported by the Southern Transvaal Branch and the Committee recommended that this incorporation be not approved. Council *Agreed* to the recommendation of the Committee.

(k) *S.A. Mutual Medical Aid Society*: The Committee reported that the Society had advised the Committee of increases in subscriptions and in the annual benefits allowed. *Noted*.

(l) *Cape Town Municipal Employees Association Medical Aid Society*: At the previous meeting of Council it has been reported that an amendment had been made to the rule excluding from benefits accounts for persons certified as mentally unsound. This was altered to read: 'Mental illness including neurasthenia, insomnia, debility or other ill-defined disease or condition of ill-health.' This was not acceptable. The Society had explained that a loan was granted to the member of £60 for a member and £30 for a beneficiary for treatment of these conditions, but that they could not be covered by the ordinary benefits of the Society because the expenditure on these conditions for a new member had been too heavy. The Committee recommended the approval of this amendment in the Society's constitution, considering that the member was covered to a certain extent. Council *Agreed*.

Council adjourned at 11.45 p.m.

#### FRIDAY 13 APRIL

Meeting commenced at 9.15 a.m.

Dr. Struther's was in the chair.

69. *Charges for Fenestration Operation*: The Committee supported a recommendation from the S.A. Otorhinolaryngological Society that the fenestration operation should not be included in the normal duties of a specialist to a Benefit Society but should be paid for separately at Medical Aid rates.

Council did not agree to the recommendation of the Committee.

70. *Northern Association of Medical Aid Societies*: Evidence was produced that the Northern Association of Medical Aid

Societies had tendered certain advice to the Architects & Quantity Surveyors Medical Aid Fund which was a Fund not recognised by the Association. This advice was to the effect that the Fund would find many doctors throughout South Africa who would gladly attend to the members of the Fund at the Medical Aid tariff, and if members of the Fund found medical practitioners who were unable to attend them in terms of the preferential tariff they were advised to go to another doctor who would so attend them. The Northern Association of Medical Aid Societies had admitted that it had given this advice. The Committee recommended that if the Northern Association of Medical Aid Societies tendered advice of this nature the Medical Association should withdraw its recognition of that body and refuse to negotiate with it on behalf of its members Societies.

After discussion of the matter, Dr. Shapiro moved, seconded by Mr. Wolfowitz, 'That, having documentary evidence of the advice tendered by the Northern Association of Medical Aid Societies, recognition of this body be withdrawn forthwith.' This resolution was put to the vote and *Carried*.

71. *Claim Forms of Unrecognised Societies:* Guidance was sought by the National General Practitioners' Group with regard to the signing of claim forms for patients belonging to unrecognised Societies. The Committee recommended that medical practitioners should only supply detailed accounts at private rates on their own account forms. *Council Agreed*.

In this connection it was recommended that after each Federal Council meeting a complete amended list of approved Societies should be published in the *Journal*. *Noted*.

72. *Dental Association of South Africa:* The Executive Committee of the Dental Association had noted with interest reports concerning the proposed Medical Aid Scheme of the Medical Association and had asked for full information and to be kept informed of progress made with the scheme. The Committee referred this matter to Council for decision.

*Council Agreed* that the Dental Association be supplied with the required information.

73. *Recognition of Medical Benefit Societies Approved by Other Branches:* Advice had been sought on the question of whether a practitioner in one Branch should recognise a Benefit Society which was approved in another Branch of the Association. The Committee had ruled that a practitioner may charge private fees to members of Societies which were not approved in his Branch although they might be approved in another Branch. *Council Agreed* accordingly.

74. *Mines Benefit Society Appointments:* The notice of the Committee had been drawn to a letter from the Vice-President of the Southern Transvaal Branch, in which he suggested that, should there be reason for communication to take place between the Federal Council and the Mines Benefit Society, such communication should in the first instance be made to the Branch before submission to the Mines Benefit Society. The Committee referred this to Federal Council for attention.

The Chairman of Council said that in view of the previous day's discussion on Contract Practice matters being the concern of Branches, this item would automatically fall away. *Council Agreed*.

75. *Anaesthetic Fee for Intra-cardiac Operations:* Council then considered the representations made by the deputation from the S.A. Society of Anaesthetists, and on the proposal of Mr. Currie, seconded by Dr. Satchwell, *Council Agreed* that the fee for intra-cardiac operations would be a minimum of 15 guineas and a further 1½ guineas per quarter-hour after the first three hours.

76. *Schedules of Fees for Approved Medical Aid Societies:* The Committee then presented schedules of fees for a revision of the Tariff of Fees for Approved Medical Aid Societies. The schedules sent in by the various Groups had been discussed with representatives of the respective Groups and certain amendments made, and the amended schedules were now presented to Federal Council for approval.

(a) *Anaesthetics:* The schedule contained a fixed fee for every operation or procedure with a minimum of 4 guineas for any anaesthetic. The fee was not based on time but on service and tended to be 20% of the surgeon's fee. The Committee recommended that the anaesthetic fee should be on the basis of a percentage of the surgeon's fee and that Council approve the suggested 20%.

Council did not agree to the Committee's recommendation and indicated that the fees should be based on time and the preoperative, operative and post-operative service supplied. Council agreed to refer the matter back to the Committee for further negotiation with the Group.

(b) *Dermatology:* The schedule submitted was not regarded by the Committee as sufficiently representative of the Group. The Committee requested power to act in the interim in order to obtain a reasonable schedule. *Council Agreed* accordingly.

(c) *Neuro-Surgery:* Council *Agreed* that the schedule accepted at its meeting held in October, 1955, should remain in force.

(d) *Orthopaedics:* The schedule, as amended, was submitted for approval. *Council Agreed* accordingly.

(e) *Ophthalmology:* The schedule, as amended, was submitted for approval. *Council Agreed* accordingly.

(f) *Otorhinolaryngology:* It was reported that the fees for only a few items were to be changed, but the Committee had not yet finalised these with the Group. It was recommended that the schedule be referred back to the Committee. *Council Agreed*.

(g) *Paediatrics:* The schedule as submitted was *Approved* by Council. It was proposed by Dr. Peskin, seconded by Dr. Heymann, that the fees for visits and consultations in the schedule should apply also to physicians, neurologists and psychiatrists. *Council Agreed*.

Dr. Shapiro proposed that the Committee be instructed to meet representatives of the various Transfusion Services, in order to arrive at an equitable fee for Exchange Transfusions. *Council Agreed*.

(h) *Radiology:* The schedule was *Approved* by Council.

(i) *Surgery:* The schedule, as amended, was *Approved* by Council, and Council further *Agreed* to the new fees laid down for the Trendelenburg Operation and the Combined Trendelenburg Operation with Multiple Stripping.

(j) *Plastic Surgery:* Council referred the schedule back to the Committee because no reply had been received from the Plastic Surgeons to certain comments by the Committee.

(k) *Thoracic Surgery:* It was reported that the schedule arranged during 1954 and in force since January, 1955, was to remain, but the Thoracic Surgeons had asked for an increase from £84 to £100 for certain operations. Council did not agree to this increase.

An additional item had been added to the schedule: Operations on Oesophago-pharyngeal Pouch, for which the fee was to be 50 guineas. This fee was recommended by the Committee, and Council *Agreed* accordingly.

(l) *Urology:* Council *Agreed* to the schedule submitted and made one or two small amendments.

(m) *General Practitioners:* The schedule, as amended by the Committee, was *Agreed* to by Council, with the following additions: That all fees for special procedures listed up to £8 8s. 0d., with the exception of visits, consultations and anaesthetics, shall be the same for general practitioners as for specialists. A limit of 10 guineas was placed on the injection treatments for varicose veins and haemorrhoids.

77. *Reciprocity with Medical Aid Societies:* A request had been put forward that the Association should consider introducing negotiations with all recognised Medical Aid Societies receiving preferentially reduced medical fees, with the object of these Societies granting reciprocal preferential reduction in their accounts to members of the Medical Association. The Committee did not support this proposal.

Council agreed that no action be taken on these lines.

78. *Responsibility of a Society for the Account of a Member:* Mr. Wolfowitz raised the matter of how far the Societies could be held responsible for the accounts of their members and whether doctors' accounts were really guaranteed. After discussion Council *Agreed* that the matter be not pursued further or discussed further.

79. *Constitution and Mode of Election of Central Committee for Contract Practice:* Notice of motion had been given at the previous meeting in this regard, and the Secretary stated that the matter had been dealt with under Minute 27 above. All that remained was for the Council to elect the Committee in accordance with its earlier decision.

Nominations were submitted and Council *Agreed nem. con.* that the following should constitute the new Central Committee for Contract Practice: Drs. J. G. A. du Toit and F. Ziady—Northern Transvaal Branch; Dr. J. Ochse—East Rand Branch; Dr. L. O. Vercueil, Dr. M. Peskin, Dr. Q. A. Agranat and Mr. G. T.

du Toit—Southern Transvaal Branch; Mr. J. A. Currie, Dr. J. R. E. Lee and Mr. T. B. McMurray—Cape Western Branch; Dr. J. S. Visser—O.F.S. & Basutoland Branch; Dr. E. W. S. Deale and Dr. A. Broomberg—Natal Coastal Branch; Dr. M. A. Robertson, Dr. L. L. Alexander and Mr. B. A. Armitage—Other Branches.

80. *Closed Panels*: The Secretary stated that at the previous meeting notice of motion had been given over the names of Mr. McMurray and Dr. Charles Shapiro, 'That Federal Council recommends the abolition of all closed panels.'

After discussion it was proposed by Dr. Shapiro, seconded by Dr. Heymann, 'That the policy of this Association shall be to ensure a free choice of doctor by the patient and of patient by the doctor. In pursuance of this policy all future appointments to Benefit Societies should be on the basis of open panels for general practitioners and specialists.'

An addendum to this amendment was proposed by Dr. Sichel, seconded by Dr. J. S. du Toit: 'Unless in exceptional circumstances and after approval by Federal Council.' Dr. Shapiro indicated that with the approval of his seconder he would accept the addendum.

A further amendment was proposed by Dr. Waks, seconded by Mr. J. G. A. du Toit, 'That in view of the important implications and far-reaching effects of the motion under discussion and the fact that time does not permit a full-dressed debate, the matter be deferred until the next meeting of Federal Council.'

On being put to the vote, Dr. Waks's amendment was *Lost*.

The amendment by Dr. Shapiro and Dr. Heymann was then put with the addendum and was *Carried Nem. Con.* It was also *Carried* as the substantive motion.

81. *Repudiation of Medical Aid Society Accounts*: The Secretary stated that notice of motion had been given at the last meeting over the names of Drs. Peskin and L. S. Robertson, 'That a Medical Aid Society shall not have the right to repudiate an account because it is more than six months old.'

There was no discussion and it was proposed by Dr. Heymann, seconded by Mr. Wolfowitz and *Resolved* accordingly.

82. *Specialist Panels for Benefit Societies*: A notice of motion had been put forward by Dr. Peskin and Dr. C. Adler: 'That if a Benefit Society has a membership greater than 15,000, then there shall be a minimum of two appointments to every specialist post.'

After discussion an amendment was proposed by Dr. Shapiro, seconded by Dr. Heymann: '(1) That the capitation rates laid down by Federal Council for specialist appointments to Benefit Societies be reaffirmed; (2) That the Branches be instructed (a) to attempt to have all future appointments filled on the basis of an open panel, (b) that if a Branch is of opinion that it is impracticable at this time, the rule of one specialist to 10,000 patients be adhered to.' On being put to the vote, this amendment was *Carried*. It was also *Carried* as the substantive motion.

An amendment was proposed by Dr. Shapiro, seconded by Dr. Heymann, 'That in view of the special circumstances attaching to the appointments of neuro-surgeon and neurologist to the Mines Benefit Society, the matter be left to the Southern Transvaal Branch for decision on any basis which they may consider proper.' On being put to the vote, this amendment was *Carried*.

83. *Contract Practice Policy*: A resolution put forward by the Northern Transvaal Branch, regarding procedure to be followed in the future, was ruled to have fallen away in view of earlier decisions taken by Council. *Noted*.

84. *Tariff of Fees for Medical Aid Societies Applicable in Pretoria*: A resolution from the Northern Transvaal Branch, requesting that the fees for Medical Aid Societies applicable in Pretoria be brought into line with those applicable in Johannesburg, was ruled to have fallen away in view of earlier decisions taken by Council. *Noted*.

85. *Advertisements in the Journal*: A letter from the Southern Transvaal Branch was submitted, in which it was suggested that the resolution taken at the last meeting of Council be rescinded and that the Association revert to the former method of inserting Warning Notices in the *Journal* in regard to posts which were not approved by the Association.

This was formally moved by Dr. Peskin, seconded by Dr. Gluckman and *Carried Nem. Con.*

86. *Limitation of Benefits Allowed by Medical Aid Societies*: A letter from the Southern Transvaal Branch was submitted, containing various proposals regarding Contract Practice policy. It was suggested by Mr. Wolfowitz that the first two proposals contained in this letter fell away as having already been dealt with by Council.

In regard to the third clause of the letter, it was proposed by Dr. Shapiro, seconded by Dr. Heymann, 'That there shall be no limit of benefits allowed by Medical Aid Societies other than those prescribed by regulation, and such regulation must have the prior approval of the Medical Association.'

An amendment was proposed by Mr. Wolfowitz, seconded by Dr. Gluckman, 'That all medical fees payable to doctors by Medical Aid Societies recognised in the future shall be guaranteed by the Medical Aid Society irrespective of any limits of benefits imposed by their constitutions.' On being put to the vote, this amendment was *Lost*.

Dr. Shapiro's proposal was then placed before the meeting and *Carried*.

87. *Specialist Services to Sasol Medical Aid Society*: Council was reminded that discussion of this subject had been deferred until the whole question regarding open and closed panels had been settled.

It was proposed by Mr. McMurray, seconded by Mr. Currie, 'That in view of the decision by Federal Council to promote the open panel system, the provision of the proposed new specialist appointments to the Sasol scheme be rejected in their present form in order that an open panel may be maintained.' This proposal was put to the vote and *Carried*, it being understood that the resolution would only apply if the Sasol scheme was converted to a Benefit Society.

88. *Adoption of Report of Central Committee for Contract Practice*: Dr. Vercueil moved the adoption of the Committee's Report. This was seconded by Dr. Alexander and *Carried*.

The Chairman of Council mentioned the considerable amount of work undertaken by the Committee and spoke appreciatively of their efforts. He proposed a vote of thanks to all concerned, which was *Carried* with acclamation.

#### REPORT OF THE PARLIAMENTARY COMMITTEE

In the absence of Dr. Struthers, the Report was presented by Dr. Shapiro. The Report indicated that a number of meetings had been held generally in either Pretoria or Johannesburg.

89. *Medical Council Ethical Rules 16, 17 and 19*: It was reported as follows:

'An opinion was asked for from the Association by the Registrar of the S.A. Medical and Dental Council on Rule 19, and this was referred to the Parliamentary Committee by the last meeting of Federal Council. Since then, the Medical Council have also raised with the Association questions concerning Rules 16 and 17. The Committee had discussions with the Registrar of the Medical Council on these Rules and it has been decided that a meeting between representatives of the Parliamentary Committee and the Executive Committee of the Medical Council shall take place on some convenient date. It is likely that this will take place in Vereeniging during the course of the Federal Council meetings. Verbal report on this matter will be made to Federal Council.'

It was further reported that the final date for the meeting had not yet been decided, but it was hoped that this would shortly be fixed.

Council *Agreed* that all the Rules mentioned above should be discussed at such a meeting.

90. *Post Office Charges*: It was reported as follows:

'Complaints were forwarded to the Parliamentary Committee from the Head Office, from the Cape Midlands Branch and Northern Transvaal Branch. Furthermore, there was a complaint in the *Journal* from Natal about the charges made by the Post Office for temporary diversions of the telephone. These were at the rate of 5s. per day or part thereof, or 10s. for three months, and members felt that a 5s. per part of a day charge was heavy and constituted a hardship when frequently used. The Under-Secretary for Telecommunications, who was interviewed, explained that the diversion of a telephone entailed a job of soldering by a mechanic at the exchange and the 5s. did not cover the cost to the Department. The cost was unaffected by the length of time the diversion operated. After discussion, he agreed to consider the matter further and our latest information is that a recommendation has gone to the Treasury, whereby the Post Office would share with the subscriber the cost of the diversion, and if this is accepted by the Treasury, we shall have won our point. No final reply is yet to hand. *Noted*.

91. *Friendly Societies Bill*: It was reported as follows:

'The views of the Parliamentary Committee were expressed in a memorandum which was placed before Federal Council at its last

meeting. We have still no official information as to whether a new investigating commission is being appointed by the Government this session or whether the Friendly Societies Bill will, in fact, be proceeded with. The Chairman of the Parliamentary Committee and the Vice-Chairman of the Medical Council constitute a liaison to see that the profession and the Medical Council are mutually informed concerning any steps that are being taken. A further report on this will be available for the meeting of Federal Council.

There was no further report. *Noted.*

92. *Facilities for Medical Practice in Native Townships:* It was reported as follows:—

'The Parliamentary Committee has had difficulty in establishing an *ad hoc* committee to deal with this matter, but a report will be made to the meeting of Federal Council'

Dr. Turton stated that Dr. Meltzer, Dr. Schneider and himself had agreed to form the *ad hoc* committee suggested. *Noted.*

93. *Salaries of Medical Officers in Mental Hospitals and Other Health Services:* It was reported that the Minister of Health had stated that the salary scales were being reviewed by the Public Service Commission and that in the circumstances it was unlikely that there would be any importation of medical personnel from overseas. The Minister had further stated that he regretted that he was not able to appoint a Commission of Enquiry as suggested in the resolution of Federal Council. *Noted.*

94. *Income Tax:* It was reported that the Committee had examined certain documents and that an approach was to be made to the Minister of Finance. *Noted.*

95. *Supplementary Health Services Bill:* Dr. Shapiro spoke of the representations which were being made by the Pathologists' Group in regard to the registration of technologists.

The Secretary mentioned the resolution which had been taken earlier in the meeting making it obligatory on all Groups to submit their evidence to the Parliamentary Committee for investigation before it could be presented to a Parliamentary Select Committee, and stated that this would be made known to the Secretaries of all Groups by means of a circular.

Council *Agreed* that it was competent for individuals to submit their own evidence as long as it was made clear that such evidence did not represent the views of the Association. *Noted.*

The adoption of the Parliamentary Committee's Report was moved by Dr. Shapiro, seconded by Dr. Heymann and *Carried.*

#### REPORTS OF SUB-COMMITTEES

96. *Workmen's Compensation Act Sub-Committee:* A Report was submitted by Dr. Vercueil regarding negotiations which had taken place with the Workmen's Compensation Commissioner for a revision of the Handbook and the Tariff of Fees. The Report included many pages of proposed revisions of the Schedule, put forward by the Commissioner. It was *Agreed* that these schedules should be sent to the Groups for comment and that further negotiations should take place.

Mr. G. T. du Toit proposed that the Sub-Committee be increased by the addition of two new members, and Council *Agreed* that Mr. Wolfowitz and Mr. J. G. A. du Toit be appointed to the Committee.

97. *Sub-Committee on Rehabilitation:* Mr. G. T. du Toit reported that the Committee had had no meetings and there was nothing to report. He felt that the Committee was serving no practical purpose at present and that there were two alternatives before Federal Council: Either the Committee could be discharged, or it could be allowed to pursue its original objects and hold an occasional meeting to interest the profession on the subject of Rehabilitation. He favoured the latter proposal.

Council *Agreed* that the Sub-Committee should continue to function on the lines proposed by Mr. du Toit.

98. *Sub-Committee for Liaison with Dental Association of South Africa:* Dr. Schneider stated that there was nothing to report. This was *Noted.*

99. *Sub-Committee for Liaison with S.A. Nursing Association:* It was *Noted* that this Sub-Committee had no report to make to Council.

100. *Sub-Committee for Liaison with Pharmaceutical Society of South Africa:* Dr. Vercueil stated that his Sub-Committee had no report to make to Council. This was *Noted.*

101. *Sub-Committee to Investigate and Report on Groups within the Association:* This Report was submitted by Mr. J. G. A. du Toit. Although it put forward a number of suggestions, the main changes suggested were:

- (1) The Groups shall function primarily in order to foster academic interests among its own members and amongst members of other Groups. It should, in fact, be a scientific discussion group.
- (2) Groups shall not be permitted to negotiate with outside bodies on matters of fees and general policy. This shall be the exclusive function of Federal Council, who, at its discretion, may be permitted to delegate certain of these functions to its various Branches.

After discussion Council *Agreed* that the Report should be sent to all Groups within the Association, and it should be pointed out to the Groups what changes might be necessary in the By-Laws to put into effect the recommendations of the Sub-Committee.

102. *Sub-Committee to Advise Controller of Imports:* The Report of this Sub-Committee was submitted. It indicated that the Sub-Committee was still being invited to advise the Controller of Imports regarding certain commodities. Reference was made to a meeting which had taken place last October with members of the Pharmaceutical Advisory Committee, at which matters of interest to both Committees had been discussed. Finally the Report stated that 22 applications had been considered from importers covering 29 products, of which six had not been granted. Six applications had been received from medical practitioners for the importation of medical supplies or equipment not obtainable through the usual trade channels. All of these had been supported.

The Report was *Noted.*

103. *Report of Sub-Committee to Enquire into Medical Education and Internships:* Mr. McMurray submitted the Report of the Sub-Committee, which dealt mainly with internships and the education of the African and Coloured students in Medicine. Mr. McMurray indicated that the Report was of an interim nature as the Committee was still considering the subject. A further report would be made at the next meeting of Council. *Noted.*

#### NOTICE OF MOTION.

104. *Amendment of By-Law 35(b):* The Secretary stated that the Notice of Motion to amend By-Law 35(b), referred to in Minute 129 of the last meeting of Council, had been referred to Branches. The opinion of the Branches had been divided.

After discussion, the proposed amendment of the By-Law was put to the vote and *Carried*, 28 votes being in favour.

#### HONOURS.

105. *Emeritus Membership—Dr. R. D. Kidd:* A recommendation had been received from the Natal Inland Branch, accompanied by a citation which was read by the Secretary. The recommendation was supported by the East Rand Branch, in whose area Dr. Kidd had practised for a number of years.

On the matter being put to the vote, it was *Unanimously Resolved* that Dr. R. D. Kidd, of Pietermaritzburg, be elected to Emeritus Membership of the Association. *Acclamation.*

106. *Emeritus Membership—Dr. A. J. Orenstein:* A recommendation from the Southern Transvaal Branch was read, together with a letter containing certain facts regarding the achievements and work of Dr. Orenstein.

Dr. Sichel stated that Dr. Orenstein's record of service, his eminence and integrity, were well known to all.

On the matter being put to the vote, it was *Unanimously Resolved* that Dr. A. J. Orenstein, of Johannesburg, be elected to Emeritus Membership of the Association. *Acclamation.*

#### ECONOMICS OF MEDICAL PRACTICE

107. *Report of Sub-Committee on Economics of Medical Practice:* Dr. M. Shapiro presented his Report dealing with the establishment of a Medical Aid Scheme for South Africa. He stated that the scheme would take in all sections of the community in groups which would pay contributions in proportion to their earning power. This would conform to the present system of private practice and could logically replace the Benefit Society system on the basis of an open panel. He went on to discuss details regarding the computation of costs of certain South African Societies as well as certain overseas plans. Dr. Shapiro stated that there had been numerous enquiries regarding the establishment of an Association scheme,

and an organisation dealing with some 30,000 employees was interested. After giving further details, he added that it would be reasonable to start the Fund as a pilot scheme in the Witwatersrand area, and he asked that the Association make money available in the form of a loan in order that the scheme might be commenced.

Dr. Shapiro's Report was received with acclamation, and a number of members spoke in support of it.

Numerous questions were asked, to which Dr. Shapiro replied. Mention was made of the amount of money which the Association had already spent in investigating the matter, and Dr. Shapiro said that he thought the Fund should repay to the Association what it had already expended in this regard. He felt that those responsible for the Fund would regard this as a moral obligation that the money should be repaid. He felt that the administrative costs would be comparatively heavy at the beginning but that they would obviously come down as the Fund grew.

Various other questions were asked, to which replies were given, and eventually the question was put as to whether the Committee should continue to act as a Committee of Federal Council or whether it should be discharged.

It was proposed by Mr. Wolfowitz, seconded by Dr. Gluckman and *Resolved*, 'That the Federal Council accepts the Report of the Convener of the Sub-Committee on the Economics of Medical Practice and empowers this Committee to take all necessary measures to formulate and implement a scheme to establish a Medical Aid Plan.'

After further discussion it was proposed by Mr. Wolfowitz, seconded by Dr. Gluckman and *Resolved Nem. Con.*, 'That the Federal Council, in empowering this Sub-Committee to inaugurate the Fund, vote a sum of not more than £1,000 which sum shall be repayable to the Medical Association of South Africa as soon as funds become available.'

Dr. Shapiro asked that before the Fund was incorporated as a company, the Head Office should give an assessment of the funds already expended, so that they could be brought into the books of the company as a debit at the time that it was launched. The Secretary stated that the Head Office could give an account of what had been spent towards the expenses of the Sub-Committee on the Economics of Medical Practice, and from this account the Committee would have to decide which expenses would be a legitimate claim against the company. Dr. Shapiro agreed that this could be done.

The Chairman stated that the Council was much indebted to Dr. Shapiro and the Committee for the work which they had done so far. *Acclamation*.

It was reported that a letter of resignation from the Committee had been received from Dr. Vercueil. Dr. Shapiro said that he wished to propose Dr. Gluckman to serve on the Committee vice Dr. Vercueil. Council *Agreed* accordingly.

#### HEALTH SERVICES.

108. *Orange Free State*: It was stated that there was no Report from the Augmented Executive Committee for the Orange Free State. *Noted*.

109. *Natal*: It was stated that there was no Report from the Augmented Executive Committee in Natal. *Noted*.

110. *Cape*: In presenting his Report, Dr. Sichel stated that there had been no meetings of the Augmented Executive Committee in the Cape and that the work formerly done by this Committee seemed to have been taken over by the Liaison Committee which had met on two occasions since the last meeting of Council. *Noted*. The Report continued as follows:

111. *Honorary System*: It was reported that the Honorary System in the Cape seemed to be breaking down, in that a large number of honoraries working in certain hospitals had decided that they could not continue to do so. It was suggested that they be replaced by the establishment of a system of part-time paid medical practitioners. It was pointed out that the Director of Hospital Services wished to support the Association's policy in regard to the maintenance of the honorary system, but that the breakdown had resulted in certain full-time appointments being made.

After short discussion it was *Agreed* that the Cape Provincial Administration be informed that if honorary medical officers would no longer undertake work in hospitals the Association would have no objection to part-time appointments being made, or even full-time appointments, should they be necessary.

112. *Re-introduction of Fees for Hospital Services*: Attention was drawn to the fact that the Administrator in the Cape had stated on some occasions that it might be necessary to introduce fees for hospital services. It was pointed out that while the Association was in favour of the principle of free hospitalization, this was a matter for the public to take up with the Administrator as it was the public who would have to pay the fees.

After short discussion Council *Agreed* that no action be taken by the Association.

113. *Nominations for Hospital Boards*: It was reported that where originally the Association had had the right to nominate a member to the Board of each hospital in the Cape, recently the Administrator had decided that at least two names should be put forward in order that he might make a choice from those nominated. As Boards were being elected at present, there was some doubt as to what the position would be in regard to the present elections. *Noted*.

114. *Medical Committees*: It was reported that representations were being made to the Cape Provincial Executive Committee in order that the regulations might be altered to provide that all registered medical practitioners concerned in the working of a hospital, both on the honorary and full-time staff, might receive voting powers in regard to the election of Medical Committees. *Noted*.

115. *Forms of Consent for Operations*: It was reported that at the request of the Cape Western Branch, the forms for consent for operation had been considered. A comparatively simple form had been drawn up, but when this had been placed before the Provincial Administration's legal advisers the matter had become complicated. *Noted*.

116. *Central Hospitals Committee*: It was reported that Dr. H. B. Mann, of George, had been nominated to represent the Platteland for the period of three years as from 1st March, 1956. *Noted*.

117. *Transvaal*: The Report of the Chairman of the Augmented Executive Committee in the Transvaal was submitted. Dr. Shapiro moved, and Council *Agreed*, that this matter be left until the next meeting of Council.

#### MATTERS REFERRED TO OR BY S.A. MEDICAL AND DENTAL COUNCIL.

118. *Ethical Rule 16—Professional Secrecy*: The Secretary stated that Dr. Struthers had suggested that this matter be referred to the Parliamentary Committee in order that it might be dealt with when the Parliamentary Committee interviewed the Executive Committee of the S.A. Medical and Dental Council. Council *Agreed* accordingly.

119. *Charges for Procedures Requiring Teamwork by Specialists*: The Secretary read a letter from the Southern Transvaal Branch, in which it was requested that a sub-committee be appointed to go into this matter.

After short discussion it was proposed by Dr. Peskin, seconded by Mr. Currie and *Resolved* that the matter be referred to the Sub-Committee on Fees for Private Practice.

120. *S.A. Medical Congress, Durban, 1957*: The Secretary reported progress, which Council *Noted*.

#### MATTERS REFERRED TO OR BY BRANCHES

121. *Scientific Exhibits at Congress*: A memorandum by Dr. H. O. Hofmeyr had been submitted through the Cape Western Branch. The Secretary stated that the Executive Committee had agreed to recommend to Council that Dr. Hofmeyr be invited to convene an *ad hoc* committee to deal with the points raised in his memorandum. Council *Agreed* accordingly.

The Secretary stated that the Executive Committee had agreed to recommend to Council that the memorandum prepared by Dr. Hofmeyr be referred to the Organising Committee of the Congress to be held in Durban in 1957. Council *Agreed*.

122. *Rule 1, General Note (ii) of Rules of S.A. Medical and Dental Council*: A resolution from the Northern Transvaal Branch was submitted, reading: 'That Federal Council be requested to make representations for the alteration of this Rule so that it would no longer be necessary for the name of the practitioner to whom the communication is addressed to appear both on the card and on the sealed envelope.'

It was pointed out that the Medical Council no longer required notices to be sent in sealed envelopes.

After short discussion it was *Agreed* to adopt the recommendation of the Executive Committee that the resolution of the Northern Transvaal Branch be supported and that the S.A. Medical and Dental Council be advised accordingly.

123. *Publication of a Supplement to the Journal*: A resolution from the Northern Transvaal Branch, requesting that a supplement be published to the *Journal*, containing items of interest only to members of the Association, was submitted. In view of an earlier resolution to publish an Association newsletter, this item fell away.

#### MATTERS REFERRED TO OR BY GROUPS

124. *Anaesthetists' Group—Change in Constitution*: A letter from the S.A. Society of Anaesthetists was read, in which it was requested that the Constitution of the Group be amended by the addition of the following two paragraphs:

- (i) Where there is a constituted branch of the South African Society of Anaesthetists, the Secretary of that branch will be ex officio the area representative on Council.
- (ii) If an area representative is not nominated by the members in that area, the incoming Council has the power to co-opt a member from that area as the area representative.

The Secretary stated that the Executive Committee had agreed to recommend to Council that the proposed amendments to the Constitution of the Anaesthetists' Group be accepted. Council *Agreed* accordingly.

125. *Thoracic Surgeons' Group—Change in Constitution*: A letter was submitted from the Society of Thoracic Surgeons of South Africa, in which it was requested that sub-paragraphs (a) and (b) of paragraph 3 of the Group's Constitution be amended by the substitution of the phrase, 'He is a registered Thoracic Surgeon', in the relevant positions.

The Secretary stated that the Executive Committee had agreed to recommend to Council that the proposed amendments to the Constitution of the Thoracic Surgeons' Group be accepted. Council *Agreed* accordingly.

#### MISCELLANEOUS

126. *Liaison between Nutrition Research Institute and S.A. Medical Congresses*: A letter was submitted, in which it was suggested that members of the staff of the Nutrition Research Institute should be allowed to attend South African Medical Congresses as members.

The Secretary stated that the Executive Committee had agreed to recommend to Council that liaison with the Nutrition Research Institute be not established but that the Institute be informed that applications may be made to Organising Committees of Congresses in order that invitations may be issued to individuals whom the Committee might desire to invite to attend. Council *Adopted* the recommendation of the Executive Committee.

127. *World-Wide Medical News Service, Inc.—Appointment of Correspondents*: A letter from this News Service was submitted. The Secretary stated that the Executive Committee had agreed to recommend to Council that the letter from the World-Wide Medical News Service Inc. be published in the *Journal* without comment.

It was proposed by Dr. Peskin, and Council *Agreed*, that the recommendation of the Executive Committee be not accepted. The Secretary was directed to inform the company that Council had noted the letter but was not prepared to act in any way.

128. *Limitation and Screening Medical Students*: A resolution from the Northern Transvaal Branch was submitted, in which it was suggested that the Association should press for the limitation and screening of medical students.

After short discussion Council *Agreed* that the resolution be not supported.

129. *Chairman's New Year Message*: Letters from the three Branches in the Transvaal were submitted.

It was proposed by Dr. Shapiro, seconded by Dr. Peskin and *Resolved* that the letters be noted without discussion.

130. *The Function of the Intern in the Hospital*: A memorandum from the General Hospital Administrators' Group was submitted, together with a resolution reading: 'The General Hospital Administrators' Group (M.A.S.A.) requests Federal Council to request the S.A. Medical and Dental Council to institute an enquiry into the facilities available for the training of interns, with a view to establishing the function of the intern in the hospital and to what

extent the intern can fit into the mechanism of providing services to hospital patients.'

After short discussion Council *Agreed* to the request of the Hospital Administrators' Group.

131. *Capitation Fees for Paediatricians—S.A.R. & H. Sick Fund*: A letter from the S.A. Paediatric Association was submitted, in which it was stated:

'That the South African Paediatric Association is of the opinion that the present capitation fee of 1/9d. for salaried Railway paediatricians is too low in view of the work entailed. As the Railways Administration has recently raised the capitation fee for most S.A.R. & H. Sick Fund specialists and declined to do so for paediatricians because Federal Council has laid down a paediatric rate of 1/9d., the S.A. Paediatric Association therefore requests Federal Council to reconsider and raise the fee to a reasonable level.'

After short discussion it was *Agreed* to refer the matter to the Railway Medical Officers' Group.

132. *British Commonwealth Medical Conference, London, 1957*: A letter from the Secretary of the British Medical Association was submitted, in which the Medical Association of South Africa was invited to be represented at the next British Commonwealth Medical Conference which was to be held in London in 1957.

Council agreed that the matter be deferred until the next meeting, and that in the meantime the British Medical Association be informed that the Association was not yet in a position to nominate a representative.

133. *World Medical Association—Tenth General Assembly, Cuba, 1956*: An invitation from the World Medical Association was submitted for the Medical Association of South Africa to be represented at the Tenth General Assembly to be held in Cuba later in the year.

Council *Agreed* that Dr. Emilia Krause, of Bloemfontein, represent the Association if it was possible for her to be there at that time.

#### OTHER BUSINESS

134. *Pretoria Congress, 1955*: The Chairman spoke appreciatively of the work done by colleagues and their wives in Pretoria who had organised the last Congress. A vote of thanks to the members of the Northern Transvaal Branch, and particularly to those who had taken an active part on the Organising Committee, was proposed by Dr. Purcell and was accorded by Council with acclamation.

135. *Motor Car Insurance for Medical Practitioners*: A letter from the Northern Transvaal Branch was submitted on this subject, but Council agreed that the matter be not discussed.

136. *Medical Council Rule—Itinerant Practice*: A letter from the Natal Inland Branch was submitted on this subject, but Council agreed that the matter be not discussed.

137. *Society of Medical Women—Rate of Pay for Part-time Medical Officers in Clinics of Local Authorities*: A letter from the Group was submitted.

It was proposed by Dr. Shapiro, and Council *Agreed*, that the matter be referred to the Executive Committee.

138. *Date and Place of Next Meeting of Council*: It was suggested by the Chairman that as Dr. J. S. du Toit was to be inducted as President at the next Annual General Meeting which would take place before the Council meeting, the next meeting of Council be held in Cape Town.

Council *Agreed* with acclamation that the next meeting of Council be held in Cape Town, and it was left to the Executive Committee to fix the date.

139. *Thanks*: Dr. Owen-Smith proposed a vote of thanks to the Head Office staff for the work done in connection with the meeting. *Noted*.

The Chairman said that Council owed a debt of gratitude to the Vereeniging Division for the excellent facilities provided for the meeting, and for their hospitality. He mentioned particularly Dr. Chapman and Dr. Smit. Council accorded a vote of thanks with acclamation.

Dr. Shapiro moved a vote of thanks to the Chairman and said that although it had been a most trying meeting he felt that the Chairman was to be congratulated on the way in which the meeting had been conducted. This vote of thanks was accorded with acclamation.

The meeting ended at 7.5 p.m.