Medical management is a recognised specialty in many developing and developed countries, including Australia, India, New Zealand, Pakistan and Sri Lanka. In South Africa it was recognised as a sub-speciality in the 1990s, but this is no longer the case. The South African Society of Medical Managers, in close collaboration with the Division of Medical Management of the College of Public Health Medicine of South Africa, has been working to re-establish the specialty of medical management in South Africa. Well-trained specialist medical managers would play a significant role in the effective and efficient implementation of National Health Insurance and primary healthcare re-engineering through the practice of evidence-based health care, clinical economics and administrative medicine.

The South African Society of Medical Managers (SASMM), previously known as the Medical Administrators Group within the South African Medical Association (SAMA), is being re-launched. Collaborating closely with the Division of Medical Management (DMM) of the College of Public Health Medicine of South Africa (CPHMSA), SASMM has been working to re-establish the specialty of medical management, which is already recognised in many countries, such as Australia, India, New Zealand, Pakistan and Sri Lanka.

The CPHMSA’s Division of Medical Management was born out of the National Department of Health’s need and commitment to strengthen health systems. Policies that will exercise the Division include the policy on management of hospitals, the occupation-specific dispensation (OSD) policy for medical managers, and the human resources for health policy, which requires managers to be trained in medical management. The Human Resources Strategy for Health also proposed the establishment of an Institute for Leadership and Management in Health Care, recently launched by the Minister of Health. However, to be recognised as a specialist by the Health Professions Council of South Africa, medical doctors would be required to undergo a 4-year registrar training and write a unit examination under the auspices of the Colleges of Medicine of South Africa. Re-establishing the specialty would address that gap.

Implementing National Health Insurance (NHI) also calls for better management of health facilities and health districts, and proposes that smaller hospitals be managed by doctors while larger ones have a clinical directorate. This would require a specialist medical manager with competence in evidence-based medicine, clinical medicine, clinical economics and administrative medicine, acquired through theoretical and experiential learning under constant supervision.

SASMM aims to represent medical managers in all healthcare sectors in matters of individual and communal interest; to enable members to function optimally as medical managers; influence development and implementation of health policy to meet the nation’s needs; through SAMA and other channels; to promote the integrity, standards and role of medical managers in a changing society; co-ordinate and promote management development programmes through continuing professional development (CPD) activities locally, nationally and regionally; and to promote co-operation between private and public health sector organisations. The SASMM has been accepted as a member of the World Federation of Medical Managers.

The DMM, on the other hand, aims to determine standards and norms for the training and development of doctors pursuing the Diploma in Medical Management and the Fellowship in Public Health Medicine (Medical Management), or any other medical management qualification; to serve as an examining and certifying body for doctors wishing to pursue a career path in medical management; and to serve as an advisory body on matters related to the medical management training and development of doctors in South Africa.

The Division has made important progress to date. The regulations for the Diploma in Medical Management and the Fellowship in Public Health Medicine (Medical Management) have been drafted and, following extensive consultation, submitted to the Council of the Colleges of Medicine of South Africa (CMSA) for approval and onward submission to the Examining and Credentials Committee of the CMSA, the Council of Higher Education, and the Minister of Health for his endorsement. We are confident that the Diploma and Fellowship will soon be registered and accredited.

The executive committee of the SASMM plans to launch its own website and newsletter, and eventually a Southern African Journal of Medical Management. The next joint meeting of the SASMM and the Division will be in Cape Town on 20 May 2013.

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