The South African Medical Technology Industry Association Strategy

SAMED
advancing patient care through MedTech

Contents

1. About SAMED

Medical technology (medtech), alongside health practitioners and pharmaceuticals, forms the basis of quality healthcare. The medical technology industry is diverse, dynamic and innovative. It employs more than 5 000 people and encompasses more than 500 000 medical technologies used in the prevention, diagnosis, treatment and amelioration of disease and disability.

The South African Medical Technology Industry Association (SAMED) was founded in 1985 and is committed to advancing patient care through medtech. SAMED is a not-for-gain voluntary industry association that acts as the voice for the South African medtech and in-vitro diagnostics industry, providing the medtech industry with a platform to engage with key stakeholders. [1]

On behalf of our members, SAMED engages with policymakers, regulators, healthcare organisations, professional societies, funders and international agencies and alliances.

SAMED is an active participant in initiatives and networks that align with its principles: patient-centricity, ethics, collaboration and a transformed, sustainable medtech industry that contributes to achieving national health and socio-economic goals.

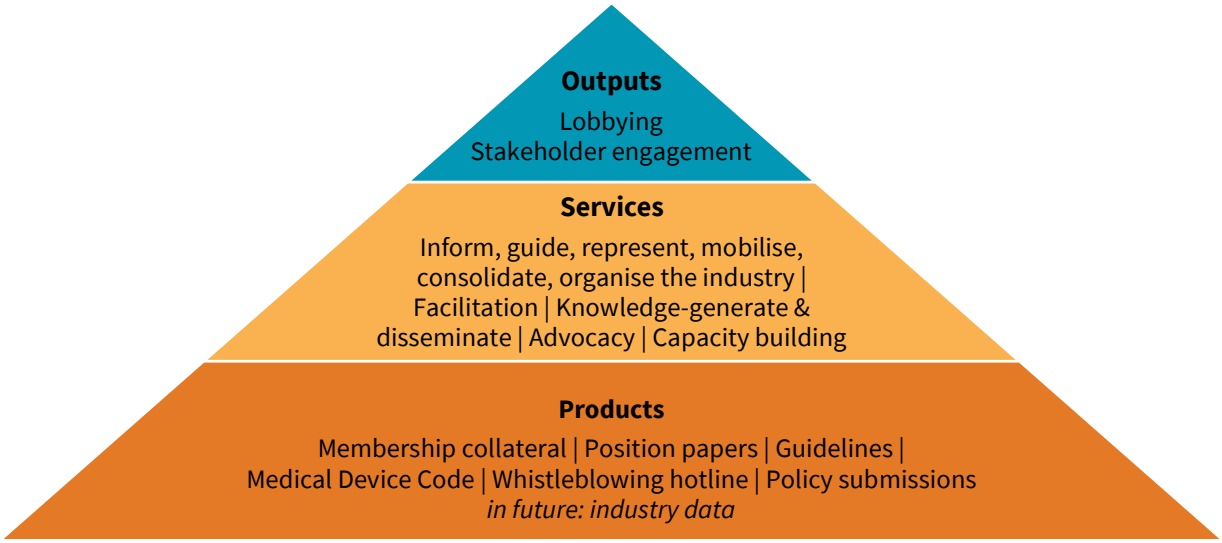


Figure 1. Summary of key Outputs, Services, and Products managed by SAMED.

[1] https://samed.org.za/wp-content/uploads/2020/12/SAMED-the-SA-medtech-industry.pdf

Membership

Our members are companies, individuals and associations – local and multinational – who are involved in the research, manufacture, distribution and wholesale of medical technologies in South Africa. Together we offer a unifying vision of patient-centric care that is supported and advanced through medtech.

We work together with our members to build collective, objective and credible platforms to share knowledge and engage with stakeholders, and we support our members in growing a sustainable and ethical medtech industry that enhances patient access to medical technology.

Through our various committees we promote the interests, knowledge and expertise of our members, increase the visibility, credibility and standing of the medtech industry, advocate to inform policy and improve market access. We hold regular events, training courses and pursue collaborations to share market trends, stimulate best practice and work towards regulatory and industry harmonisation.

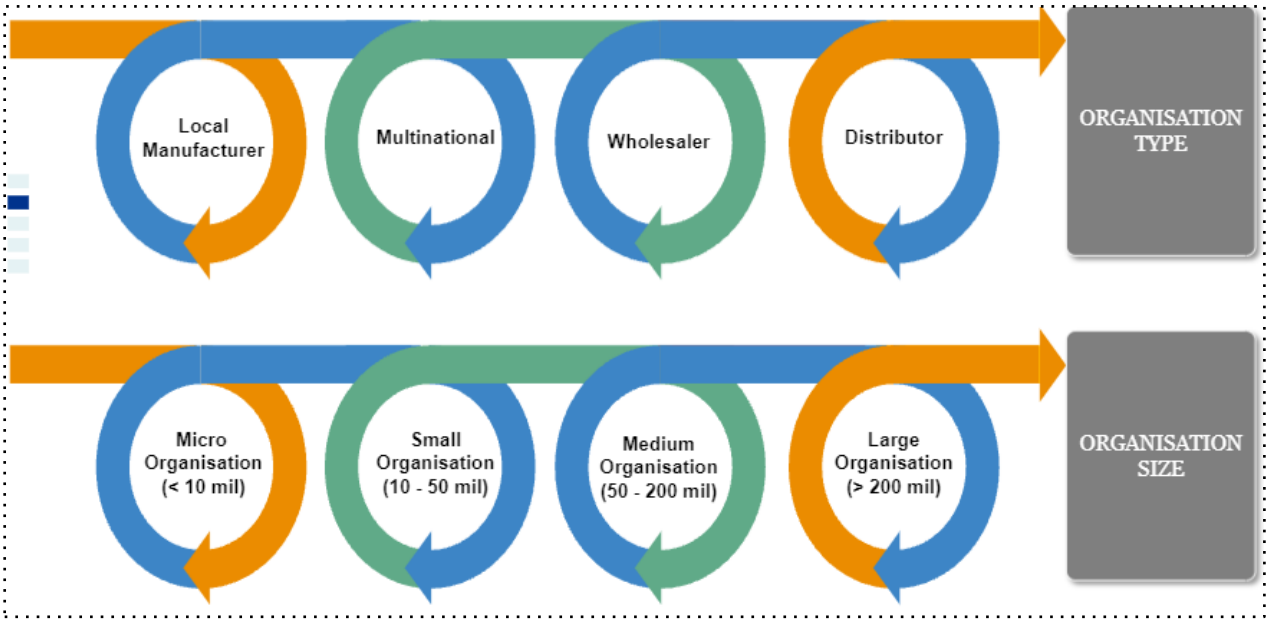
SAMED's work is in the field of stakeholder engagement and lobbying and its ability to shape policy and practice related to medtech is influenced by stakeholder perceptions and their willingness to listen to and partner with SAMED. Since the membership of SAMED is voluntary, the association needs to actively market itself within the medtech space to attract a significant number of new members.

Our members give the association a mandate, vote for the board (whose members participate in an unpaid, voluntary capacity), contribute to the agenda and strategy and provide bulk of the funding. The three membership types under SAMED includes:

- **Ordinary members** include multinationals, distributors, wholesalers and local manufacturers of medical devices, medical equipment and IVDs.
- **Association members** are the South African Laboratory and Diagnostic Association (SALDA) and the Medical Device Manufacturers of South Africa (MDMSA).
- **Associate members** include consultants, training providers and logistic companies operating in the medical technology industry[2].

[2] https://samed.org.za/wp-content/uploads/2020/12/SAMED-the-SA-medtech-industry.pdf

Illustrated below are some of the organisations types and sizes that SAMED represents. Please note that this is not an exhaustive list of all organization types that SAMED represents due to the vast heterogeneity of members.



Please note that the values indicated demonstrates the turnover amount per organisation size

Governance

- The **association** is responsive to members' shared priorities and those of the broader health sector.
- The **board** is responsible for overarching strategy and governance.
- **Committees** drive implementation of the strategy with significant support from the executive officer (EO) and the small office which is headed by the EO, and which constitutes SAMED's only full-time human resources; the office is the "engine room" that undertakes secretarial and operational duties.
- The **EO** is accountable to the board and the members and is the primary dedicated representative of SAMED.

Committees[3]

'The SAMED board establishes and guides the work of committees that enable us to implement the SAMED strategy and to listen to, represent and support our members.' To date these are the key committees within SAMED:

- Our **Code Committee** promotes the Medical Device Code and whistleblowing hotline as the cornerstones of the medtech industry's self-regulation. It assists medical technology

[3] https://samed.org.za/wp-content/uploads/2020/12/SAMED-the-SA-medtech-industry.pdf

companies and healthcare providers in ethical marketing and business practices and interacts with third-party anti-corruption initiatives, including the Health Sector Anti-Corruption Forum which SAMED joined as a signatory in November 2019.

- Our **Market Access Committee** improves collaboration with public and private healthcare facilities and funders, strengthens supply chain management and tender processes, strengthens reimbursement and HTA mechanisms in the private and public sectors and participates in Council for Medical Schemes consultations.
- Our **MISA (Medical Imaging South Africa)** Committee represents the interests of companies operating in the imaging area of the medical technology industry.
- Our **NHI Committee** reviews, supports and contributes to the shaping of policy, legislation and the practical implementation of the National Health Insurance.
- Our **Orthopaedics Committee** represents the interests of members working in elective and trauma orthopaedics and collaborates with the South African Orthopaedic Association.
- Our **SAMED / SALDA Regulatory Committee** contributes to a harmonised medical technology legislative environment, engages on policy matters with the South African Health Products Regulatory Authority (SAHPRA) and other agencies tasked with the quality, safety and effectiveness of medical technology and hosts regulatory forums to assist members with the implementation of regulations.
- Our **Transformation Committee** champions the transformation of the medical technology industry and individual companies as a socio-economic imperative and key factor of the industry's sustainability.

Commitment to Transformation

SAMED regards transformation as an economic and social imperative. We are committed to transformation and believe we can drive meaningful and sustainable change as an industry body. We strive to create an ecosystem that gives our members tools to enable them to transform their companies. We call on our members and partners to participate in our transformation journey. Our commitment to transformation is championed by the Transformation committee to drive the transformation of the medical technology industry in the individuals companies to ensure the industry's sustainability in the long run.

The SAMED transformation policy objectives are outlined below:

- **Guide** its membership in practical issues pertaining to transformation, including legal and policy frameworks, such as Employment Equity, B-BBEE, skills development, diversity and human rights;
- **Facilitate** information sharing sessions at general meetings of SAMED, in order to obtain expert input on issues of transformation;

- **Listen to feedback** from its membership as to how it can improve its transformational plan of action, and take corrective action where required;
- **Encourage its membership** to participate in public health programmes and to support causes aimed at addressing inequities in the health system[4]

2. South African Medical Technology Industry Outlook[5][6][7]

Overview of trends in healthcare

Traditionally the healthcare provider was at the centre of healthcare and healthcare practitioners have often been described as being paternalistic. This could be ascribed to the fact that patients previously were not empowered with information. The internet has brought information closer to patients albeit not always accurate information, but this has resulted in patients wanting to have a greater contribution in decisions regarding their health and wellbeing. This is often also described as consumerization of healthcare. Healthcare organizations and providers must ensure that patients have access to accurate and sufficient information to inform their healthcare decisions.

Another important change in healthcare is the evolution of reimbursement. Most countries still reimburse healthcare based on services or goods delivered irrespective of the outcomes. Due to constraints on healthcare resources and financing a greater focus will be on outcome- and value-based reimbursement. The onus will be on the provider of services or goods to demonstrate the value that their service or goods bring to the patient's health and subsequent demonstrable outcomes.

With the focus on outcomes driven healthcare delivery there will be a shift towards centres of excellence instead of the current fragmented healthcare delivery systems. This should facilitate closer collaboration and shared decision making in patient care.

The global pandemic has demonstrated the need for home-based care and monitoring. Due to potential risks associated with hospitalization as well as the fact that hospitalization is a huge cost driver in healthcare this option will be reserved for patients with no alternative option. Day hospitals and day clinics will also be a preferred way of managing hospitalizations where deemed clinically appropriate.

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[4] SAMED transformation framework and strategy 2021
[5] Fitch Solutions. 2021.South Africa Medical Devices Report Includes 5-year forecasts to 2025
[6] https://www.swiss-medtech.ch/sites/default/files/2020-09/SMTI_2020_EN_low.pdf
[7] WHO Health System Building Blocks and PwC analysis

With the move towards home-based care digital solutions and platforms are becoming increasingly important. Remote monitoring of patients through mobile devices, applications and wearables will become the norm when there is greater adoption of home-based care.

These evolutions in healthcare will require greater adoption of digital technologies as well as evidence to support the safety, efficacy and accuracy of these innovations. The adoption of these technologies should also assist with alleviating the burden on stretched healthcare resources. Automation and digitization will also accelerate in manufacturing plants.

The availability of large data sources will become an integral part of patient management where predictive modelling, biomarkers and personalized medicine will assist healthcare practitioners in making individualized evidence-based diagnoses and treatment decisions.

Structural Trends

The South African population is showing a growth of approximately 1,5% annually. The disease burden continues to show growth in the prevalence of infectious diseases largely driven by HIV and tuberculosis. As the health system matures there will be greater focus on non-communicable diseases especially lifestyle related diseases such as obesity, diabetes, hypertension, hypercholesterolemia and other cardiovascular conditions.

The country continues to experience a large discrepancy between healthcare expenditure where the per capita expenditure in the private sector far exceeds the healthcare expenditure in the public sector.

The ongoing efforts to implement a National Health Insurance scheme will fuel greater investment in healthcare as a percentage of the GDP. The National Health Insurance (NHI) scheme will rely on a strong primary healthcare system that can efficiently cater to everyone. This will prevent unnecessary health expenditure by reducing the need for oversubscribed and more expensive tertiary care.

Healthcare still relies heavily on imports and the same is experienced within the MedTech industry.

Intellectual property rights are well observed in South Africa and do not pose risk for multinational companies.

The South African economy has seen contraction due to the pandemic and that was over and above an already struggling economy. There is limited focus on driving and adopting innovation in the public sector due to a focus on essential medicine and essential services. The South African private sector is also seeing greater pricing pressures with scrutiny of adoption of innovation.

The currency volatility is impacting accuracy in business planning and forecasting especially for companies relying on imports.

Another barrier being faced by MedTech companies are long and cumbersome company licencing processes.

Vulnerabilities in supply chains have been exposed by the pandemic but affords companies and the Department of Health an opportunity to consider strategies to strengthen supply chains and healthcare systems.

The impact of Covid-19 has slowed the progress made in establishing an NHI scheme, particularly with respect to primary care. The scheme is currently in the second phase of its rollout. The first phase, which took place between 2012 and 2017, focused on piloting health system strengthening initiatives, the establishment of the NHI Fund, and the role of district, secondary and tertiary hospitals within the new NHI system.

The second phase of NHI implementation puts greater emphasis on the governance models, management structures and facility accreditation.

The last phase will focus on contracting of providers including healthcare practitioners and private healthcare facilities.

The successful implementation of NHI will see delays due to the impact of COVID19 mostly due to fiscal pressure and a struggling economy.

Medical Devices Regulatory Development

In 2018 the South Africa Health Regulatory Products Authority (SAHPRA) became operational. A major focus of the new health authority was clearing of the backlog in pharmaceutical product registrations. The responsibilities of SAHPRA will span across pharmaceuticals, complementary medicines and medical devices. The implementation of SAHPRA provides an opportunity for greater regulation and governance of the MedTech industry through a dedicated regulatory

framework. This should ultimately ensure consistent application and adherence to quality standards.

SAHPRA aims to implement a mandatory medical device registration process similar to what is currently done with pharmaceuticals. In order to avoid delays and allow for greater efficiencies this registration process will follow an alliance recognition model. Some of the reference jurisdictions include: Australia, United States, European Union, Brazil, Canada, Japan and/or pre-qualification of IVDs by the World Health Organization.

Current regulations require manufacturers, importers, distributors and wholesalers of Class B, C and D devices to be licensed with SAHPRA and a compulsory implementation of a quality management system. Low risk Class A devices are exempt from licensing guidelines.

The regulations make provision for five risk-based classifications:

- Class A - Low risk
- Class B - Low-moderate risk
- Class C - Moderate-high risk
- Class D - High risk

For moderate to high risk devices companies must submit the Global Medical Device Nomenclature codes together with Certificates of Free Sale from the country of manufacturer or final assembly. In addition, higher risk Class C and D devices require proof of pre-market approval or registration from at least one of the following internationally recognised regulatory authorities:

- Australia's Therapeutic Goods Administration (inclusion in the Australian Register of Therapeutic Goods)
- Brazil's National Health Surveillance Agency (ANVISA) approval and registration,
- Health Canada (medical device marketing licence)
- European Competent Authority (CE marking)
- Japan's Pharmaceuticals and Medical Devices Agency (marketing authorisation holder licence)
- US FDA (pre market approval or 510(k) premarket notification clearance)

Licences are valid for a period of five years, unless the guidelines are revised before that date.

- A manufacturing licence will permit manufacture, import or export.
- A distributor licence will permit import, export and distribution.
- A wholesale licence will permit wholesaling.

Revised procurement regulations

Revised procurement regulations are geared to support the government economic transformation agenda which will favour small, medium and micro-organizations (SMMEs), which should assist with job creation. Government tenders will also pay closer attention to a company's Broad Based Black Economic Empowerment (B-BBEE) status which will be regarded as an eligibility criteria for participation in tenders.

The revised preferential procurement regulations make it harder for foreign companies to win government tenders, making local companies more competitive. Tenders are now geared further to supporting the government's broader objectives, favouring small, medium and micro enterprises (SMMEs) and local manufacturers, which complement the government's aims of employment creation and income generation.

The risk of corruption remains a serious concern in South Africa which hinders transparent and effective procurement.

3. Our Vision, Mission, Strategic Pillars and Goals

In September 2021 the SAMED board together with SAMED Executive Office embarked on a journey to redefine the strategy to ensure relevance in the current healthcare climate as well as to ensure relevance and true value add to the SAMED members.

The strategy revision process was kicked-off with a member survey to ensure that the strategy is built bottoms-up and not a strategy drafted in isolation from the members.

The survey focused on key challenges that the member companies are facing at the moment as well as identification of areas where the members feel SAMED should focus their attention.

A strategy workshop was subsequently held focusing on the following elements:

- Key healthcare trends
- Optimal functioning of an independent board
- Analysis of member survey results
- Redefining the SAMED vision, mission and values
- Defining the strategic pillars and strategic goals
- Evaluation of SAMED structure and governance to support the strategic pillars
- Framework to ensure alignment of KPIs to the SAMED strategy

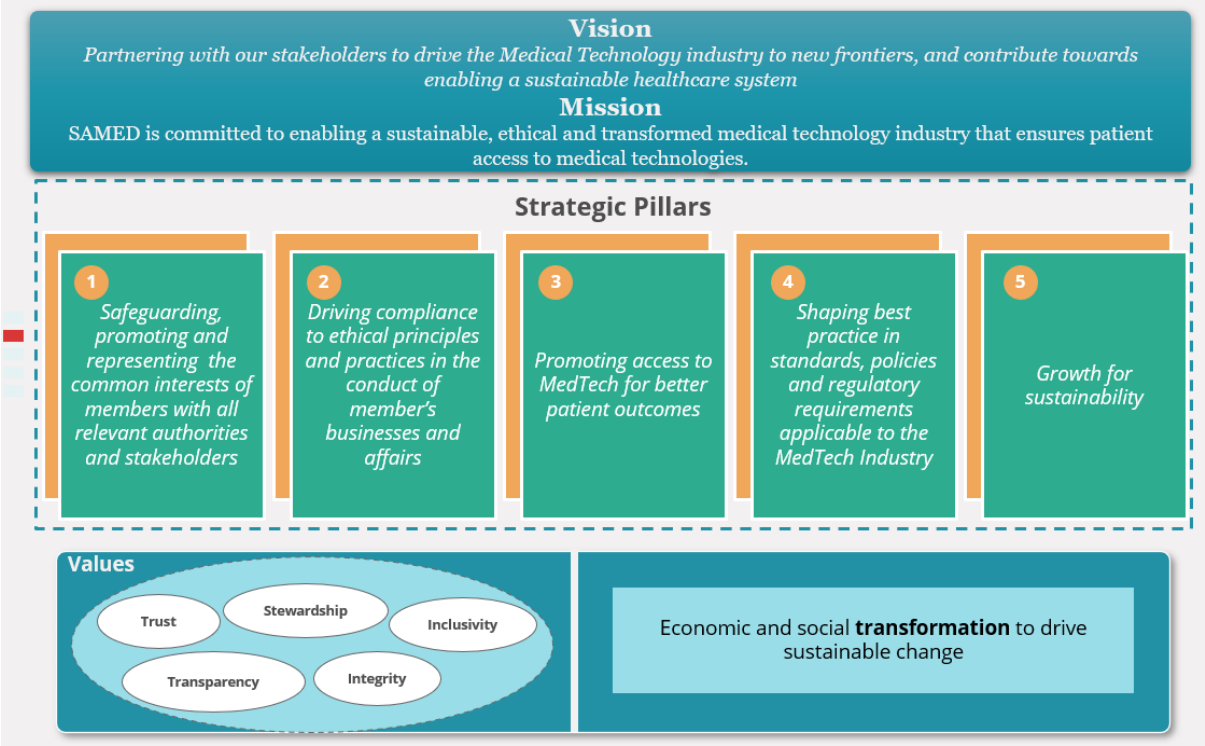
The overarching vision, mission, values, strategic pillars and strategic goals have been developed and captured in this strategy document for SAMED to finalize, adopt and implement.

It would be imperative for SAMED to work collectively with the different committees to ensure committee KPIs align with the strategic pillars and goals. KPIs should be realistic, achievable, measurable and time bound.

Due to the complexity and heterogeneity of the MedTech industry and the SAMED strategic pillars it would be advisable to adopt the strategy for a period of 2 - 3 years and adapt strategic goals when applicable. Some of the KPIs for the committees will also span across calendar years but defining milestones will be important to track progress of the achievement of the goals. A KPI template is provided for this purpose.

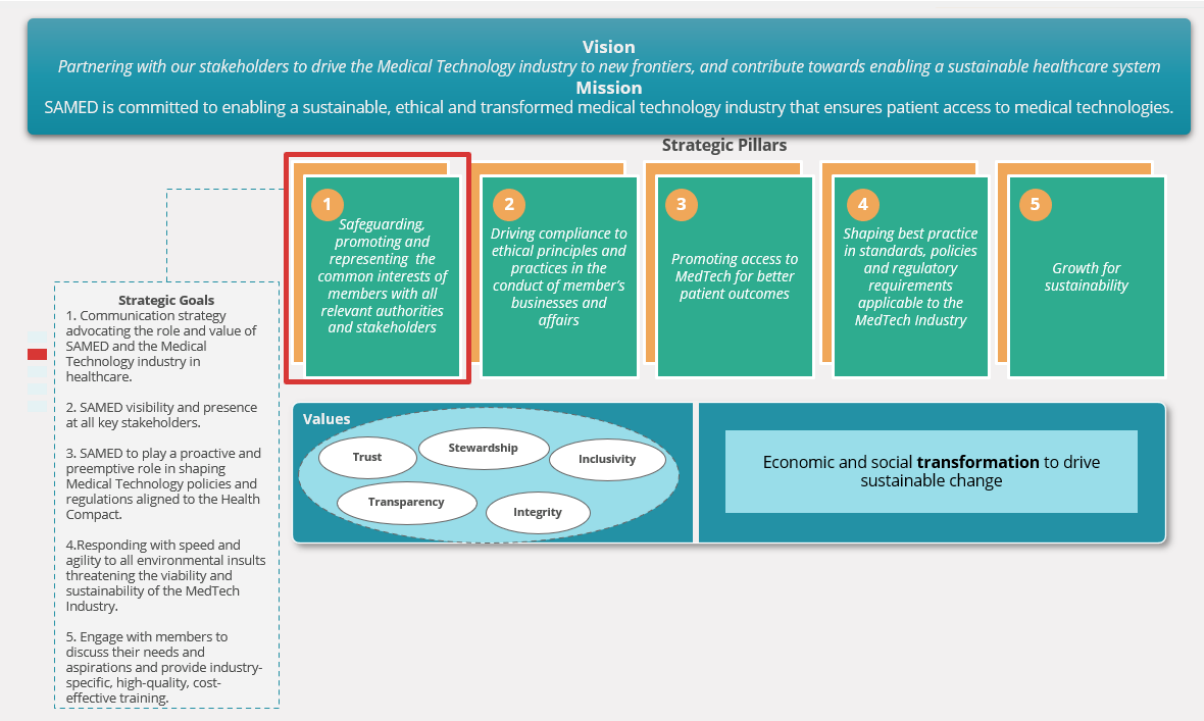
Vision

Partnering with our stakeholders to drive the Medical Technology industry to new frontiers, and contribute towards enabling a sustainable healthcare system. The image below outlines the five strategic pillars which were agreed upon in the workshop. The vision, mission and values are also depicted in this image.

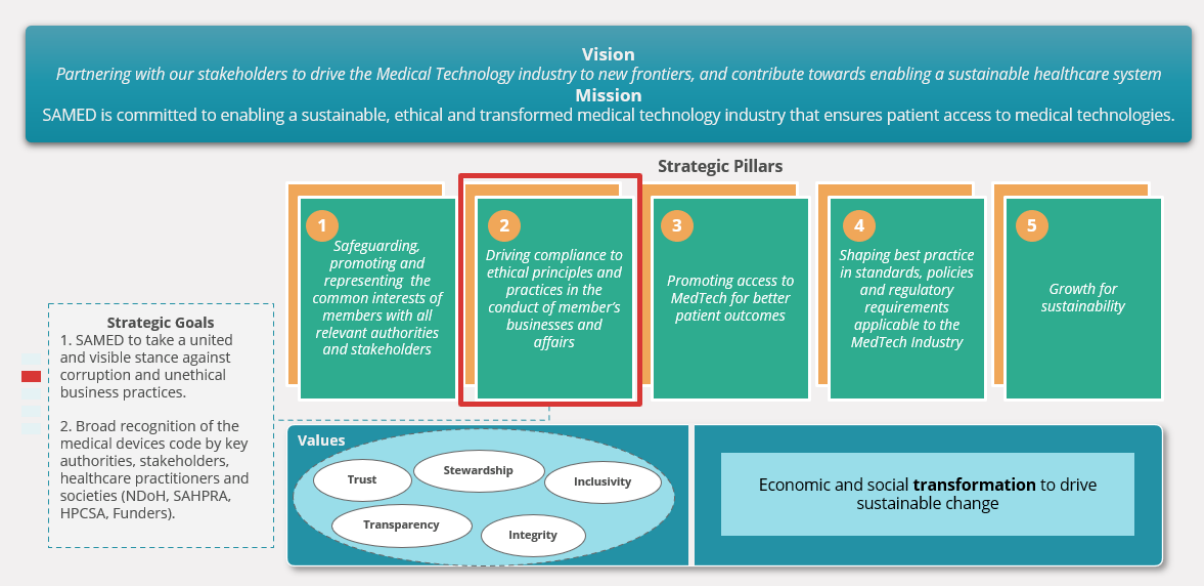


The diagrams below detail the key strategic goals identified per strategic pillar.

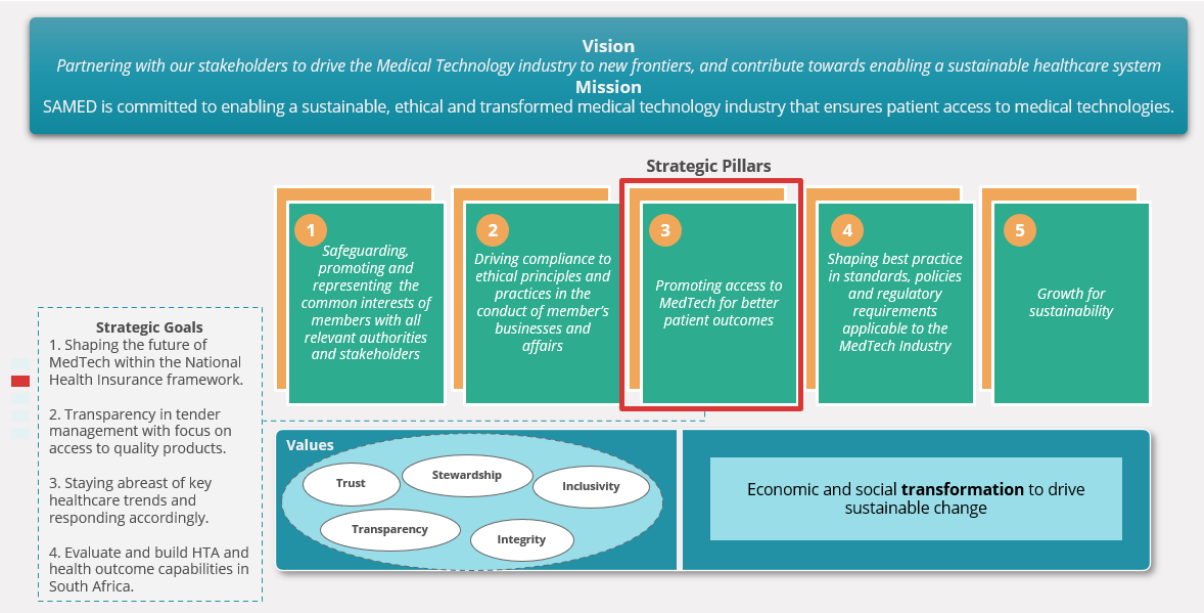
***Strategic pillar 1**: Safeguarding, promoting and representing the common interests of members with all relevant authorities and stakeholders*



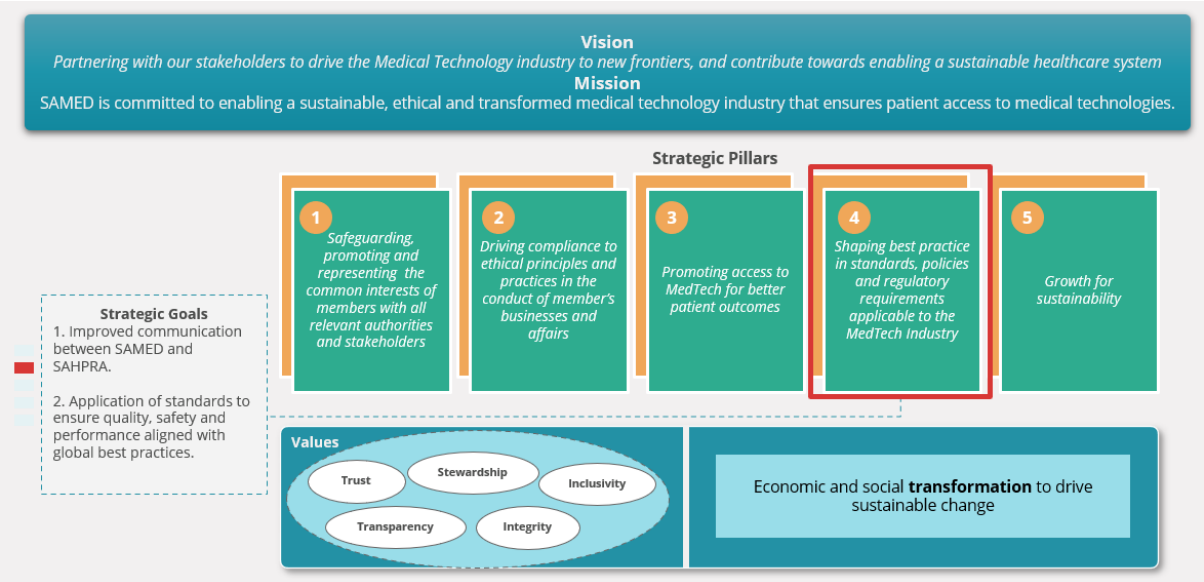
***Strategic pillar 2**: Driving compliance to ethical principles and practices in the conduct of member's businesses and affairs*



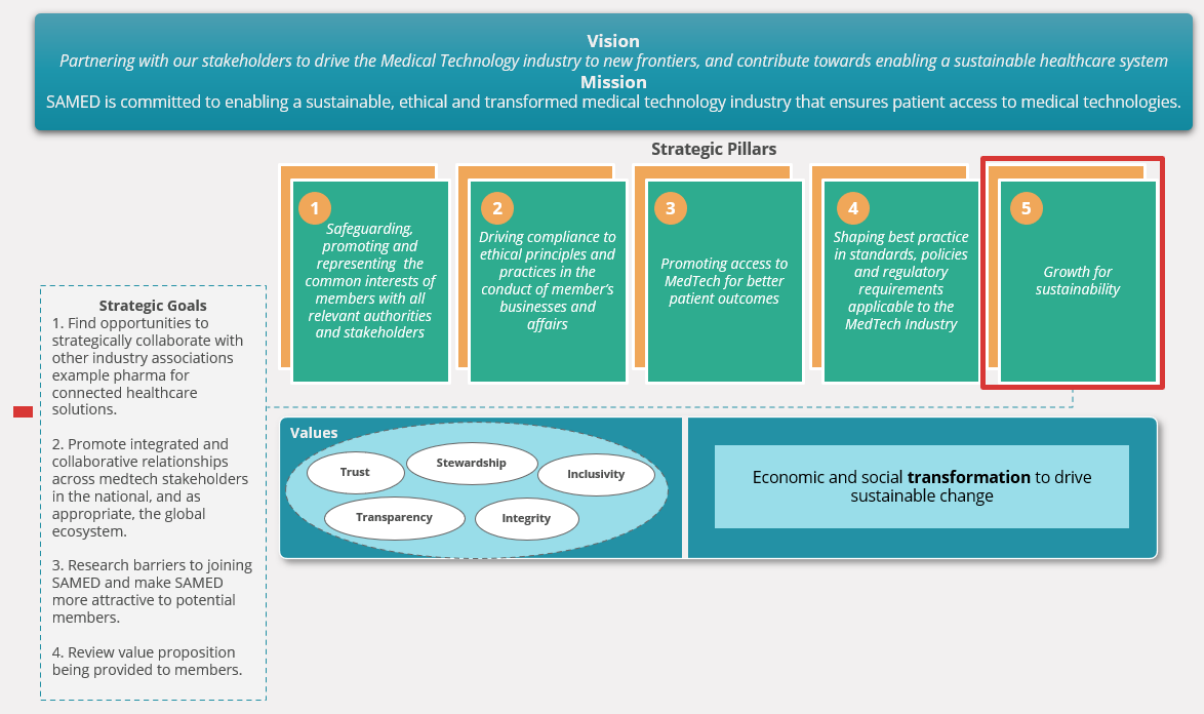
***Strategic pillar 3**: Promoting access to MedTech for better patient outcomes*



***Strategic pillar 4**: Shaping best practice in standards, policies and regulatory requirements applicable to the MedTech Industry*



***Strategic pillar 5**: Growth for sustainability*



4. Strategy Themes and Proposed Actions

No	Strategic Pillar	Strategic Goals	Actions (to be considered)
1.	**Safeguarding, promoting and representing the common interests of members with all relevant authorities and stakeholders**	1. Communication strategy advocating the role and value of SAMED and the Medical Technology industry in healthcare. 2. SAMED visibility and presence at all key stakeholders 3. SAMED to play a proactive and preemptive role in shaping Medical Technology policies and regulations aligned to the Health Compact 4.Responding with speed and agility to all environmental insults threatening the viability and sustainability of the MedTech Industry 5. Engage with members to discuss their needs and aspirations and provide industry-specific, high-quality, cost-effective training	1a. Value that SAMED brings to its members 1b. Build awareness of the value of medtech and the contribution to the economy to facilitate positive policy decisions. 2a. Mapping of stakeholders and existing networks and preparing a stakeholder engagement plan to ensure representation of SAMED with all relevant stakeholders, committees, forums and authorities. 3a. Listing all legislation and policies relevant to the MedTech Industry 3b. Identify opportunities to shape these policies or to contribute to forums where policies and regulations are discussed and shaped. 4a. Response to and mitigation of price erosion

			4b. NHI readiness and preparation plan 4c. Procurement practices conducive to sustainable growth of the medical technology industry 4d Perform Quarterly/ Annual market scan: Scan areas of the ecosystem for new developments affecting members, (e.g. Revision of the Medical Device and Diagnostics Directives, reimbursement policies, healthcare payers and providers structure, tax regime, trade barriers). 4e Identification of critical skills and capabilities needed to ensure sustainability of members into the future and potential platforms or offerings available to address skills gap 5a. Structured member engagement plan including surveys, roundtables, focus groups, AGMs and training sessions. 5b. Training curriculum relevant to the MedTech industry and SAMED members.
2.	**Driving compliance to ethical principles and practices in the conduct of member's businesses and affairs**	1. SAMED to take a united and visible stance against corruption and unethical business practices 2. Broad recognition of the medical devices code by key authorities, stakeholders, healthcare practitioners and societies (NDoH, SAHPRA, HPCSA, Funders)	1a. Encourage appropriate utilization of whistle blowing hotline 1b. MedTech compliance ambassador programme 1c. Communication strategy showcasing SAMED stance against corruption to all stakeholders 1d. SAMED audits of member companies supported and approved by regulatory bodies 2a. Engagement with SAHPRA, HPCSA and clinician societies to gain recognition of the code 2b. Investigate option to enforce code once recognized by authorities 2c. Analysis of barriers to broad adoption of medical devices code
3.	**Promoting access to MedTech for better patient outcomes**	1. Shaping the future of MedTech within the National Health Insurance framework	1a. Representation of SAMED on all relevant NHI forums and committees

		2. Transparency in tender management with focus on access to quality products 3. Staying abreast of key healthcare trends and responding accordingly 4. Evaluate and build HTA and health outcome capabilities in South Africa	1b. Providing input and comments on the NHI bill and other policies 1c. Industry preparedness task team 2a. Tender shaping to allow for evaluation of quality as an assessment criteria 3a. External affairs communications to relevant committees highlighting the impact of the macro- and micro-environment on the MedTech Industry 4a. Perform skills gap analysis 4b. Action plan to address industry skills gaps 4c. SAMED training courses
4.	**Shaping best practice in standards, policies and regulatory requirements applicable to the MedTech Industry**	1. Improved communication between SAMED and SAHPRA 2. Application of standards to ensure quality, safety and performance aligned with global best practices	1a. Gain clarity on SAHPRA licensing practices 1b. Roadmap for transitioning and implementation plan for product registration to be built in collaboration with SAHPRA 1c. Address fragmentation and duplication in policies and regulations to create congruence and cohesion for ease of implementation and adherence 2a. Benchmarking against global best practices and global policies
5.	**Growth for sustainability**	1. Find opportunities to strategically collaborate with other industry associations example pharma for connected healthcare solutions 2. Promote integrated and collaborative relationships across medtech stakeholders in the national, and as appropriate, the global ecosystem. 3. Research barriers to joining SAMED and make SAMED more attractive to potential members 4. Review value proposition being provided to members	To be decided by SAMED

5. Key Performance Indicators

Performance indicators–KPI's are a measure for project input, outputs, outcomes and impact that are defined during the project planning stage and monitored during project implementation to assess progress towards achieving project objectives.

They are used later to evaluate how efficiently the project was executed. Indicators organize information in a way that clarifies the relationship between project inputs, output, outcome, and impact and help to identify problems along the way that can impede the achievement of project objectives.

Performance indicators provide the project management team or committee a sense of direction by allowing them to focus on priorities. Key milestones should be clearly defined upfront together with timelines for completion to allow for effective tracking of progress.

SMART Key Performance Indicators

6. SAMED Governance Model Framework

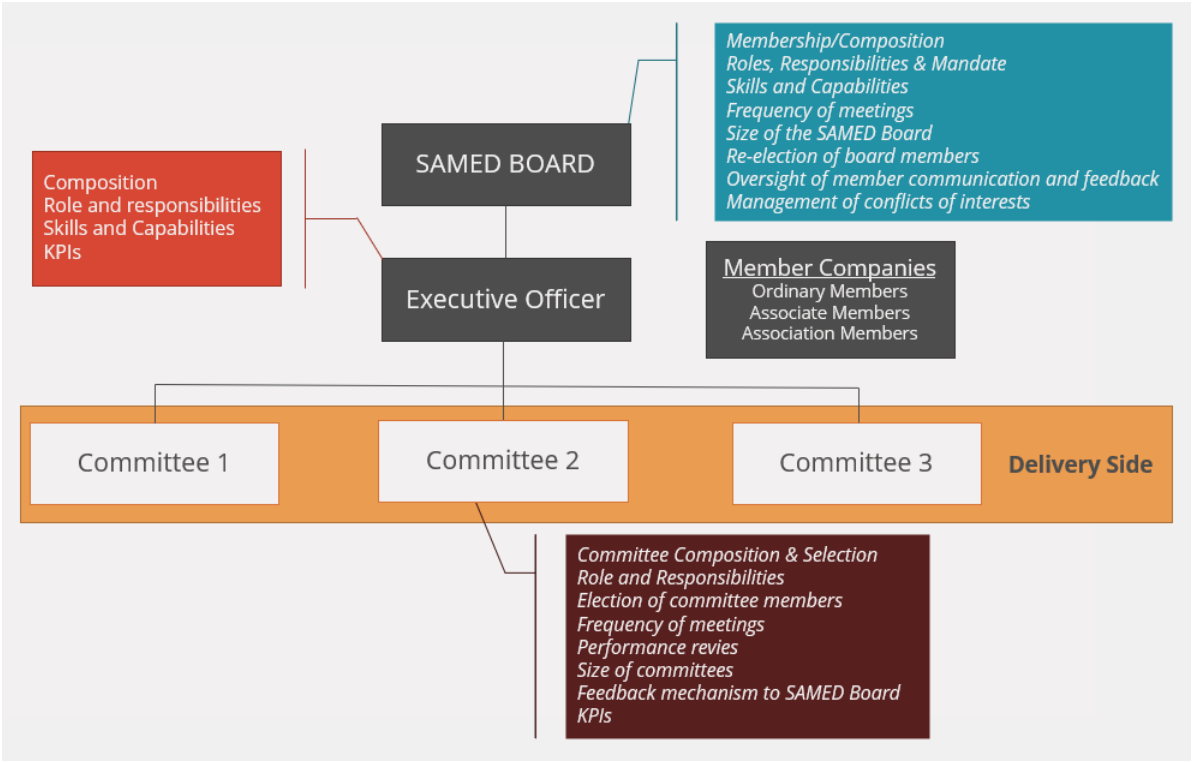
Governance frameworks are generally designed to ensure that individuals/ committees within an organisation and the organisation as a whole operates within the strategic direction set out by the Board and does so in an ethical, responsible and sustainable manner and ensure accountability for actions and decisions made by individuals/ committees.

Governance frameworks are generally designed to reduce the inefficiencies that arise from moral hazard and adverse selection – i.e. to ensure behaviours of the association as a whole and

individuals/ committees within the organisation are aligned with overarching goals and objectives and that individuals/ committees act within their mandates and delegations.

This requires a level of transparency and accountability of individual's/ committee's actions, a collective understanding of the association's goals and objectives, and an understanding of the roles of individuals and committees in achieving these goals and objectives.

The following diagram illustrates how SAMED can approach the design of a governance framework ultimately aligned to the association's goals and objectives.



7. Stakeholder Mapping

What is the importance of a stakeholder map?

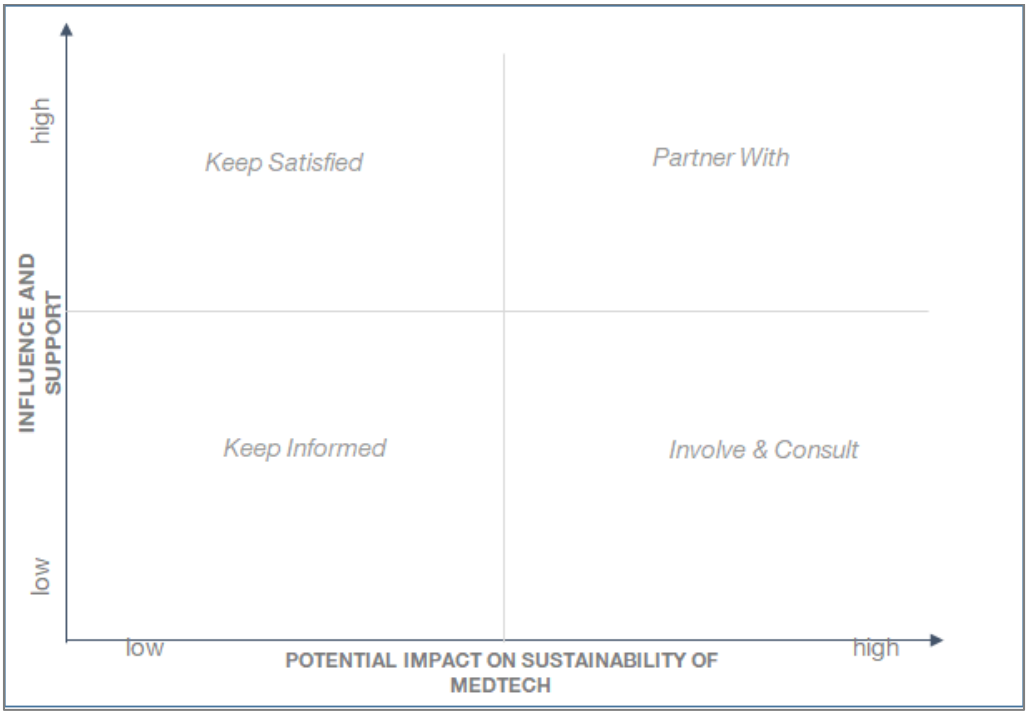
The stakeholder map is a visual representation of stakeholders or groups who either have an interest / impact in the change or the outcome of SAMED, or have a certain degree of power / influence in the overarching medical technology industry. These stakeholders have to be approached and engaged in the right way, as they either can hinder or help you to be successful in driving the ambition of SAMED and achieving your strategic goals.

Using a stakeholder group map, provides a visual representation of the engagement strategy that should be followed with each stakeholder

- **High impact, High influence/ support**

    - These are the stakeholders SAMED must fully engage and partner with. Make the greatest efforts to satisfy. Close collaboration between SAMED and these stakeholders are imperative.

- **High impact, Low influence/ support**
    - These stakeholders need to be kept informed about the activities of SAMED, but won't necessarily play a critical role in the successful execution of the strategy. SAMED must ensure that the interests of the association and the stakeholder are aligned. Involve and consult these stakeholders on a regular basis.
- **Low impact, High influence/support**
    - These stakeholders must be kept satisfied due to their level of support even though their impact may be low. Engage with them to look for alignment in priorities and opportunities to collaborate.
- **Low impact, Low influence/ support**
    - Do not actively pursue engagement but keep them informed where applicable.



	Stakeholder Level of Impact	Level of Influence and Support: *Amount of control or ability to affect strategic execution of SAMED*
High	Actions from this stakeholder will significantly impact SAMED and the medical technology industry. *(e.g. Significant change to business-as-usual; High volume of changes to daily tasks and/or role/responsibility changes; Significant change to SAMED value proposition and/or business model; Re-skilling required for most/all members of SAMED.)*	Significant, direct control over initiative and its outcome and supports the SAMED strategic imperatives (e.g., showstopper).
Medium	The initiatives from this stakeholder will have some impact on SAMED and the medical technology industry. *(e.g. Business-as-usual is noticeably altered for SAMED; Moderate to significant change to value proposition and/or business model; re-skilling required for some members of SAMED.)*	Control over some aspects and decisions associated with initiative and its outcome. Moderate support towards SAMED strategic imperatives
Low	Actions from this stakeholder will have little to no impact on SAMED and its members. *(e.g. Minimal-to-no change to business-as-usual; Minimal to moderate change to value proposition and/or business model; Little to no re-skilling required.)*	Limited to no ability to affect initiative and its outcome. Low support for SAMED strategic imperatives.

SAMED Stakeholders (non-exhaustive list)

ASAIPA: Alliance of SA Independent Practitioners Association AU: African Union BHF: Board of Healthcare Funders CANSA: Cancer Association SA CDC Africa: Centre for Disease Control Africa CHAI: Clinton Health Action Initiative CMS: Council for Medical Schemes DHET: Department of Higher Education & Training DSTI: Department of Science Technology Innovation DTIC: Department of Trade Industry Competition	FOSAS: Federation of Surgeons of SA HASA: Hospital Association of SA HFA: Health Funders Association HPCSA: Health Professions Council of SA HSACF: Health Sector Anti-Corruption Forum HSFSA: Heart Stroke Foundation SA NCD Alliance: Non-Communicable Diseases Alliance NDOH: National Department of Health NEDLAC: National Economic Development & Labour Council NHREC: National Health Research Ethics Council OSSA: Ophthalmology Society SA	PATH: formerly Program for Appropriate Technology in Health PDOH: Provincial health departments (NB: MECs, CFOs, procurement) SAHA: SA Heart Association SAHPRA: SA Health Products Regulatory Agency SAMA: SA Medical Association SAMRC: SA Medical Research Council SANC: SA Nursing Council SAOA: SA Orthopaedic Association SAPPF: SA Private Practitioners Forum SASA: South African Society of Anaesthesiologists	SASOG: SA Society of Obstetricians and Gynaecologists SPNP: Society of Private Nurse Practitioners SORSA: Society of Radiographers of SA RSSA: Radiological Society SA PSSA: Pharmaceutical Society SA TIA: Technology Innovation Agency USAID: US Agency for International Development VASSA: Vascular Society Southern Africa WHO: World Health Organization

7. Our Board Members

Top row (L-R): Clive Potter, Sabine Hellyer, Dr Vitor Ferrão, Rob Millar, Monica Lucas, Peter Mehlape, Madeleine Pearce, Sello Malete, Marlon Burgess (Chairperson), Neil Venter

Front row (L-R): William Hodson, Donata Kubheka, Avanthi Govender Bester (Vice-Chairperson), Linda Lombard, Simone Rudolph-Shortt

Not pictured: Reiner Gabler (Treasurer)