



PIETERMARITZBURG
EYE HOSPITAL

PMB I Surgeons (Pty) Ltd t/a Pietermaritzburg Eye Hospital

Registration Number

2011/000598/07

MANUAL

in terms of

Section 51 of

The Promotion of Access to Information Act

2/2000

(the "ACT")

DATE OF COMPILATION: 04/06/2021
DATE OF REVISION: 04/06/2021

033 812 2020 | admin@pmbeyehospital.co.za

5a Alan Paton Ave, Scottsville, Pietermaritzburg 3201 | P.O. Box 100101, Scottsville 3209

Directors: Dr. E N Anderson, Dr. A D H Burger, Dr. M J Harrison, Dr. S Lalloo and Dr. J E Uys

Company Practice No: 077 000 0728586 | Company Registration No: 2011/000598/07



INDEX

1. Introduction to PMB I Surgeons (Pty) Ltd t/a Pietermaritzburg Eye Hospital.
2. Contact Details (Section 51 (1) (a))
3. The ACT and Section 10 Guide (Section 51(1) (b))
4. Applicable Legislation (Section 51 (1) (c))
5. Schedule of Records (Section 51 (1) (d))
6. Form of Request (Section 51 (1) (e))
7. Prescribed Fees (Section 51 (1) (f))
8. Other Fees
9. FORM C



PIETERMARITZBURG
EYE HOSPITAL

1. INTRODUCTION

PMB I Surgeons (Pty) Ltd t/a Pietermaritzburg Eye Hospital operates as a Private Day Hospital. We are a registered and accredited healthcare provider. The registered practice number is 077 000 0728 586

2. COMPANY CONTACT DETAILS (Section 51 (1) (a))

Persons designated/duly authorised persons:

Directors: Dr Edmund Anderson
 Dr Jacobus Enslin Uys
 Dr Mark Harrison
 Dr Sanjay Laloo
 Dr Andre Burger

Hospital Manager/CEO: Mrs Allison Deysel

Postal Address: P.O. Box 100101, Scottsville, Pietermaritzburg, 3209

Street Address: 5a Alan Paton Avenue, Scottsville, Pietermaritzburg, 3201

Telephone Number: 033 812 2020

Fax Number: 086 560 2462

Email: Allison.deysel@pmbeyehospital.co.za

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3. THE PAIA ACT (Section 51(1) (b))

- 3.1** The ACT grants a requester access to records of a private body, if the record is required for the exercise or protection of any rights. If a public body lodges a request, the public body must be acting in the public interest.
- 3.2** Requests in terms of the ACT shall be made in accordance with the prescribed procedures, at the rates provided. The forms and tariff are dealt with in paragraphs 6 and 7 of the Act.
- 3.3** Requesters are referred to the Guide in terms of Section 10 which has been compiled by the South African Human Rights Commission, which will contain information for the purposes of exercising Constitutional Rights. The Guide is available from the SAHRC.

The contact details of the Commission are:

Postal Address:	Private Bag 2700, Houghton, 2041
Telephone Number:	+27-11-877 3600
Fax Number:	+27-11-403 0625
Website:	www.sahrc.org.za

4. APPLICABLE LEGISLATION (Section 51 (1) (c)).

Records available in terms of other legislation are:

- Nursing Act 33 of 2005
- National Health Act 61 of 2003
- Health Professions Act 56 of 1974
- The Pharmacy Act 53 of 1974
- Regulations and Rules under the Pharmacy Act 53 of 1974
- The Medicines and Related Substances Act 101 of 1965
- Regulations under the Medicines and Related Substances Act 101 of 1965
- Rules Relating to Good Pharmacy Practice (GPP)
- Basic Conditions of Employment Act, No 57 of 1997
- Broad Based Black Economic Empowerment Act, No 53 of 2003
- Companies Act, No 71 of 2008
- Compensation for Occupational Injuries and Diseases Act, No 130 of 1993
- Constitution of the Republic of South Africa Act, No 108 of 1996
- Consumer Protection Act, No 68 of 2008
- Copyright Act, No 98 of 1978
- Electronic Communications and Transactions Act, No 25 of 2002
- Employment Equity Act, No 55 of 1998
- Financial Intelligence Centre Act, No 38 of 2001
- Income Tax Act, No 58 of 1962
- Labour Relations Act, No 66 of 1995



- National Credit Act, No 34 of 2005
- Occupational Health and Safety Act, No 85 of 1993
- Preferential Procurement Policy Framework Act, No 5 of 2000
- Promotion of Access to Information Act, No 2 of 2000
- Protection of Personal Information Act, No 4 of 2013
- Skills Development Act, No 97 of 1998
- Skills Development Levy Act, No 9 of 1999
- Tax Administration Act, 28 of 2011
- Unemployment Insurance Act, No 30 of 1966
- Value Added Tax Act, No 89 of 1991

5. Schedule of Records (Section 51 (1) (d))

General information about PMB I Surgeons (Pty) Ltd, can be accessed via the internet on www.pmbeyehospital.co.za which is available to all persons who have access to the internet.

The subjects on which PMB I Surgeons (Pty) Ltd holds records and the categories on each subject in terms of Section 51(1)(e) are as listed below. Please note that a requester is not automatically allowed access to these records and that access requests may be declined in accordance with Sections 62 to 69 of the Act:

Compliance

- BBBEE compliance
- Internal auditing and risk
- Legislation compliance
- Regulatory reports
- Policies and procedures
- Membership with industry bodies

Corporate Governance

- Annual reports
- Board and sub-committee administration
- Company directorships
- Company registrations
- Strategic management

Finance

- Audit management
- Budgets
- Creditors control
- Debtors control
- Funders and donors
- Insurance
- Management accounts
- Salary administration
- Tax management
- Treasury management
- Utilities management



Human Resources

- Disciplinary actions
- International exchange visits/partnerships
- Job profiles
- Performance management
- Staff benefits and incentives
- Staff list
- Training and skills development
- Union or Representative Body membership

Community Development

- Community building initiatives and outreach
- Funding proposals

Information Technology

- Information systems
- Network security
- Software licences
- Technology assets

Procurement

- Agreements
- Compliance documentation of service providers
- Procurement committee administration
- Service provider records

Revenue Management

- Marketing and promotions
- Market research and surveys

6. FORM OF REQUEST (Section 51 (1) (e))

6.1 The requester must complete Form C and submit this form together with a request fee, to the person delegated to deal with requests (for “the designated head”).

The form must be submitted using any of the methods noted below:

Postal Address: PO Box 100101, Scottsville, Pietermaritzburg, 3209

Street Address: 5a Alan Paton Avenue, Scottsville, Pietermaritzburg, 3201

Tel. No: 033 812 2020

Fax. No: 086 560 2462

E-mail address of the delegated designated head: Allison.deysel@pmbeyehospital.co.za

6.2 The requester must provide sufficient detail on the request form to enable the designated head to identify the record and the requester.

6.3 The requester should indicate which form of access is required.

6.4 The requester should indicate if any other manner is to be used to inform the requester and state the necessary particulars to be so informed [s 53(2)(a) and (b) and (c)].



6.5 The requester must identify the right that is sought to be exercised or to be protected and provide an explanation of why the requested record is required for the exercise or protection of that right [s 53(2)(d)].

6.6 If a request is made on behalf of another person, the requester must then submit proof of the capacity in which the requester is making the request to the satisfaction of the designated head of the private body [s 53(2)(f)]. The request must be accompanied by suitable verifiable permission from the data subject whose information is being requested.

6.7 A requester who seeks access to a record containing personal information about that requester is not required to pay the request fee.

6.8 Every other requester, who is not a personal requester, must pay the required request fee.

7. PRESCRIBED FEES

FEES FOR RECORDS OF PRIVATE BODY

1. The “request fee” payable by a requester, other than a personal requester, referred to in section 54(1) of the Act, is R50

2. The “fees for reproduction” referred to in section 52(3) and “access fees” payable by a requester referred to in section 54(7), unless exempted under section 54(8) of the Act, are as follows:

(a) for every photocopy of an A4-size page or part thereof- R3

(b) for every printed copy of an A4-size page or part thereof held on a computer or in electronic or machine-readable form - R3

(c) for a copy in a computer-readable form on: compact disc R70. A secured disc will be provided by the company, not the requestor.

(d) (i) for a transcription of visual images, for an A4-size page or part thereof R40; (ii) for a copy of visual images R60

(e) (i) for transcription of an audio record, for an A4-size page or part thereof R20; (ii) for a copy of an audio record R30

(f) To search for the record for disclosure, R30 for each hour or part of an hour reasonably required for such search.

The actual courier transport fee is payable when a copy of a record must be delivered to a requester

Exemptions from paying “access fees”



Person or persons exempted from paying access fees:-

- (i) A single person whose annual income does not exceed R14,712.00; or
- (ii) Married persons or a person and his/her life partner whose annual income does not exceed R27,192.00

8. OTHER FEES

The company may charge additional fees that may be specific for a request from time to time, including, but not limited to:

- (a) Inspection Fee may be payable for time spent accompanying a requestor whilst inspecting the record
- (b) A Consulting Fee may be payable for time spent interpreting information in the record for the requestor.



9. Prescribed FORM C

FORM C

REQUEST FOR ACCESS TO RECORD OF PRIVATE BODY
(Section 53(1) of the Promotion of Access to Information Act, 2000
(Act No. 2 of 2000)

[Regulation 10]

A. Particulars of private body

The Head:

B. Particulars of person requesting access to the record

- | | |
|-----|---|
| (a) | The particulars of the person who requests access to the record must be given below. |
| (b) | The address and/or fax number in the Republic to which the information is to be sent must be given. |
| (c) | Proof of the capacity in which the request is made, if applicable, must be attached. |

Full names and surname:

Identity number:

Postal address:

Fax number:

Telephone number:

E-mail address:

Capacity in which request is made, when made on behalf of another person:

C. Particulars of person on whose behalf request is made

This section must be completed <i>ONLY</i> if a request <i>for information</i> is made on behalf of <i>another</i> person.
--

Full names and surname:

Identity number:

D. Particulars of record

- | | |
|-----|--|
| (a) | Provide full particulars of the record to which access is requested, including the reference number if that is known to you, to enable the record to be located. |
| (b) | If the provided space is inadequate, please continue on a separate folio and attach it to this form. The requester must sign all the additional folios. |

- 1 Description of record or relevant part of the record:
- 2 Reference number, if available:
- 3 Any further particulars of record:



E. Fees

- | |
|--|
| <p>(a) A request for access to a record, other <i>than</i> a record containing personal information about yourself, will be processed only after a request fee has been paid.</p> <p>(b) You will be <i>notified of</i> the amount required to be paid as the request fee.</p> <p>(c) The fee payable for access to a record depends <i>on</i> the form <i>in which</i> access is required and the reasonable time <i>required</i> to search for and prepare a record.</p> <p>(d) If you qualify for exemption <i>of</i> the payment <i>of</i> any fee, please state the reason for exemption.</p> |
|--|

Reason for exemption from payment of fees:

F. Form of access to record

<p>If you are prevented by a disability to read, view or listen to the record in the form of access provided for in 1 to 4 hereunder, state your disability and indicate in which form the record is required.</p>
--

Disability:	Form in which record is required
<p>Mark the appropriate box with an X.</p> <p>NOTES:</p> <p>(a) Compliance with your request in the specified form may depend on the form in which the record is available.</p> <p>(b) Access in the form requested may be refused in certain circumstances. In such a case you will be informed if access will be granted in another form.</p> <p>(c) The fee payable for access for the record, if any, will be determined partly by the form in which access is requested.</p>	

1. If the record is in written or printed form:					
<input type="checkbox"/>	copy of record*	<input type="checkbox"/>	inspection of record		
2. If record consists of visual images this includes photographs, slides, video recordings, computer-generated images, sketches, etc)					
<input type="checkbox"/>	view the images	<input type="checkbox"/>	copy of the images"		
<input type="checkbox"/>		<input type="checkbox"/>	transcription of the images*		
3. If record consists of recorded words or information which can be reproduced in sound:					
<input type="checkbox"/>	listen to the soundtrack audio cassette	<input type="checkbox"/>	transcription of soundtrack* written or printed document		
4. If record is held on computer or in an electronic or machine-readable form:					
<input type="checkbox"/>	printed copy of record*	<input type="checkbox"/>	printed copy of information derived from the record"		
<input type="checkbox"/>		<input type="checkbox"/>	copy in computer readable form* (stiffy or compact disc)		
'If you requested a copy or transcription of a record (above), do you wish the copy or transcription to be posted to you? Postage is payable.			<table border="1"> <tr> <td>YES</td> <td>NO</td> </tr> </table>	YES	NO
YES	NO				



G Particulars of right to be exercised or protected

If the provided space is inadequate, please continue on a separate folio and attach it to this form. The requester must sign all the additional folios.

1. Indicate which right is to be exercised or protected:
2. Explain why the record requested is required for the exercise or protection of the aforementioned right:

H. Notice of decision regarding request for access

You will be notified in writing whether your request has been approved/denied. If you wish to be informed in another manner, please specify the manner and provide the necessary particulars to enable compliance with your request.

How would you prefer to be informed of the decision regarding your request for access to the record?

Signed at..... This..... day of20....

SIGNATURE OF REQUESTER / PERSON ON
WHOSE BEHALF REQUEST IS MADE