

Expert Evidence in Medical Negligence Cases

“Break the ‘conspiracy of silence!’ Expert medical evidence is pivotal
in support or defence of medical negligence”

(Carstens & Pearmain (2007) 860)

*This course is registered with the Health Professions Council of South Africa
(HPCSA) and bears **12 CPD Points***

Receive a copy of van den
Heever P and Lawrenson N
“Expert Evidence in clinical
negligence” 2015 Juta



2017
Lifelong learning towards
a just society

Legal Education and Development (L.E.A.D)
Tel: +27 (0)12 441 4600 (switchboard)
Website: www.LSSALEAD.org.za
Address: PO Box 27167 Sunnyside 0132 | Docex 227 Pretoria
Old Main Building, 145 Steve Biko Street, Sunnyside, Pretoria

Benefits of attending the training

Most non-lawyers are scared of court processes.. If you attend this course you will be taught how to be an expert witness in court. Over and above that, you will also be taught how to write an expert opinion. The law requires specific detail and in this course you will be taught what the legal test for medical negligence is. By knowing this it will help you to form an opinion on the facts given to you. It will also give you confidence in being an expert witness and can enhance your current practise as a medico-legal professional.

Course content

- ✓ What is medical negligence from a legal point of view
- ✓ The test for medical negligence
- ✓ Causation (the “but for” test)
- ✓ Vicarious liability
- ✓ The role of the expert witness
- ✓ How to draft an expert witness opinion
- ✓ The legal process before trial
- ✓ The expert witness in court
- ✓ Question and answer

Who should attend

Those who will benefit from attending the course include: anyone engaged in the public and private healthcare sectors, including senior managers and administrators; doctors and specialists; nurses; attorneys and candidate attorneys; advocates; legal advisors; and members of the protection societies or insurers.

About the Law Society of South Africa (LSSA)

The LSSA is the umbrella body for the attorneys’ profession in South Africa. Its mission is to uphold and protect the values and principles of the Constitution, the rule of law and the independence and integrity of the attorneys’ profession.

Legal Education and Development (LEAD), the educational division of the LSSA is responsible for the management of the course, in order to assist in achieving the LSSA’s mission in advancing legal compliance and to protect various professionals as well as the general public.

Expert presenter

Prof Slabbert started her academic career with a BA degree. In 1985, she completed her Higher Educational Diploma. Thereafter, she attained her B Proc and LLB degrees through the University of South Africa (UNISA).

She also taught various law subjects for nearly ten years at the Tshwane University of Technology in Polokwane.

In 2003, she received her LLD degree in medical law from the University of the Free State. In 2004, she did her pupillage at the Pretoria Bar of Advocates and in 2006 she was appointed as a senior lecturer at UNISA. She was promoted to full professor in 2011.

Prof Slabbert was the chairperson of the South African Medico-Legal Society from 2011 until 2014. She is the author of numerous articles in the field of medical law in accredited journals both nationally and internationally. She is also a regular speaker at national and international conferences on topics in medical law. She is currently lecturing professional ethics and legal philosophy in the Department of Jurisprudence at the College of Law, UNISA.

Date, venue, time and fee

Date	13 May 2017
Time	08:30 – 16:00
Venue	Midrand

Fees (VAT incl.)
R1 980 per person

How to register

Complete the registration form on pages 3 and 4 and e-mail it to bettie@LSSALEAD.org.za together with a copy of your ID/passport.

If you do not receive confirmation of registration from LEAD within **five business days**, please follow-up with Bettie Lubbe on 012 441 4670.

Registration closes one week prior to commencement of the course.

Please note: LEAD reserves the right to cancel a learning activity should the number of participants not justify the costs involved. Registered participants will be given reasonable notice of cancellation.



REGISTRATION FORM

Expert Evidence



Please attach a copy of your ID with your registration form and complete in clear, block letters. Completed forms must be e-mailed to bettie@LSSALEAD.org.za

A. Applicant's details

Surname:	Preferred name:	Title:
Full names:	ID number:	Race:
Postal address		Code
Employer:	Occupation:	
Tel no (w): ()	Cell no :	
E-mail address :		
Special dietary requirements (if any):	If disabled, nature of disability:	
Where did you hear about the course? <input type="checkbox"/> SMS <input type="checkbox"/> Word of mouth <input type="checkbox"/> Newspaper <input type="checkbox"/> Employer <input type="checkbox"/> E-mail <input type="checkbox"/> Other		
If other, please specify :		

B. Employer details (NB: Complete this section only if the applicant is being sponsored by his/her employer)

Firm/company name:	
Contact person:	Contact person's e-mail :
Tel: ()	Contact person's job title:
Postal/docex address:	Code
Do you need an invoice? <input type="checkbox"/> Yes <input type="checkbox"/> No. If "yes", please provide the employer's VAT number: _____	
I, _____ (name of the employer's authorised account signatory) hereby declare the above information to be correct. I accept full responsibility for fees payable to the Law Society of South Africa for the above-mentioned applicant.	
_____ Employer signature	_____ Date
NB Company stamp	

LEAD reserves the right to cancel a learning activity should the number of students not justify the costs involved. Registered students will be given reasonable notice of cancellation

Contact Bettie Lubbe at LEAD

E-mail: bettie@LSSALEAD.org.za / Tel +27(0)12 441 4670

LEAD switchboard: Tel +27 (0)12 441 4600

REGISTRATION FORM (CONTINUED) PAYMENT DETAILS: EXPERT EVIDENCE

Name of applicant:

C. Payment details**BANK DETAILS FOR LEAD**

Bank: First National Bank (FNB) **Account Holder:** Law Society of South Africa **Branch:** Pretoria
Branch code: 251445 **Account Number:** 62009641079 **Account Ref:** (EXEV Surname, Initials)

Payment by Electronic Funds Transfer (EFT): by Employer Applicant Amount: R_____

OR

CREDIT CARD:	Name of card holder :	
Card number:		Amount : R_____
<input type="checkbox"/> Master card <input type="checkbox"/> Visa card Expiry date _____		
Budget facility: <input type="checkbox"/> No <input type="checkbox"/> Yes Number of months: _____		
<i>Credit card payments must be accompanied by photocopies of both sides of the card.</i>		

TERMS AND CONDITIONS**Cancellation**

1. A learner who wishes to cancel must do so at least 7 (seven) working days prior to commencement of the course.
2. Cancellations must be done in writing and e-mailed to bettie@LSSALEAD.org.za or faxed to 086 743 1942.
3. Confirmation of the cancellation will be confirmed via e-mail. Should a learner not receive a cancellation confirmation from LEAD, it means that the cancellation request was not received. Learners should follow up ASAP to avoid being held liable for the full course amount.
4. Learners who do not cancel and fail to attend the training will be held responsible for the full course amount. The only exceptions are if the reasons for cancellation are one of the following:
 - Death of a close family member (death certificate should be submitted).
 - Severe medical condition which results in the participant no longer being able to continue with the course (medical certificate should be submitted).
5. LSSA/LEAD has the right in its sole discretion to postpone or cancel tuition in any programme initially advertised and offered on the basis of insufficient demand. Should the LSSA/LEAD cancel the proposed training, registered learners will be given reasonable notice of the cancellation and all fees paid by the learner will be refunded.

General declaration

1. I agree that having registered for the _____ course, I am liable for the full course fee.
2. I am familiar with the outcomes of the course specified above, and fully comprehend the specifics as explained in this document.
3. I acknowledge that payment needs to be made before attendance of the course.
4. I accept that a certificate will be issued only if I comply with the attendance and payment requirements.
5. I acknowledge that I have read and understood the above, and hereby, sign as proof.

I hereby agree to abide to all the above terms and conditions.

Applicant's signature

Date