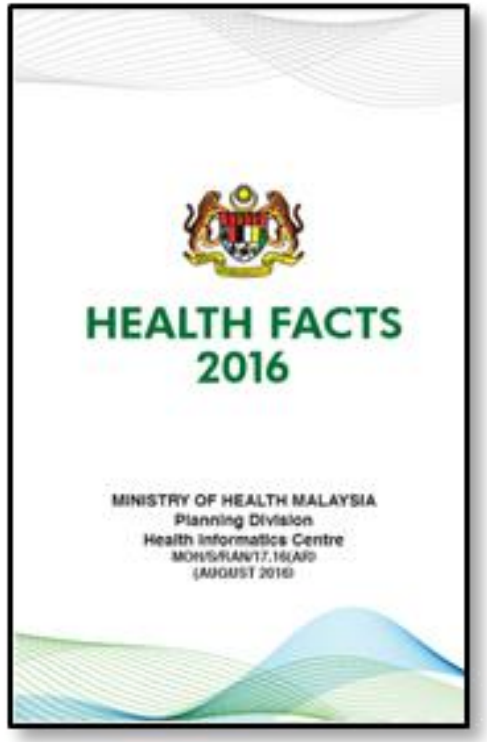
MEDICAL EDUCATION & HO GLUT

HUMAN CAPITAL FOR HEALTH IN MALAYSIA

3rd Roundtable, KL-Selangor Chinese Assembly Hall, KL, 18 Sep 2019

Dr David KL Quek
Past MMA president 2009-2011
Past elected MMC member 2004-2019

Malaysian Health Facts 2016, *Medical Practice Division, MOH*



Health Human Resources, 2015 (as of 31 December)

	MoH	Non-MoH	Private	Total	Profession: Population
		72.2%	27.8%		
Doctors[a]	33,545[1]	n.a.	12,946[2]	46,491	1:656
Dentists[3]	3,488	533	2,363	6,384	1:4,775
Pharmacists[4]	6,423	185	3,903	10,511	1:2,900
Opticians[5]	-	-	3,183	3,183	1:9,578
Optometrists[5]	282	54	1,264	1,600	1:19,053
Assistant Medical Officers	12,198[1]	896[6]	1,630[6]	14,724	1:2,070
Nurses	64,016[1]	5,574[7]	30,335[7]	99,925	1:305
Pharmacy Assistant	4,066[1]	306[4]	936[4]	5,308	-
Assistant Environmental Health Officers	4,517[1]	n.a.	n.a.	4,517	-
Medical Laboratary Technologists	6,324[1]	n.a.	n.a.	6,324	-

Health Human Resources, 2015 (as of 31 December)

	MoH	Non-MoH	Private	Total	Profession: Population
Occupational Therapists	1,054[1]	n.a.	n.a.	1,054	-
Physiotherapists	1,361[1]	n.a.	n.a.	1,361	-
Radiographers (Diagnostic & Therapist)	2,792[1]	n.a.	n.a.	2,792	-
Dental Nurses	2,733[1]	83[8]	-	2,816	-
Community Nurses	24,926[1]	54[7]	195[7]	25,175	-
Dental Technologists	946[1]	125[8]	811[8]	1,882	-
Dental Surgery Assistants	3,810[1]	361[8]	41[8]	4,212	-
Traditional & Complementary Medicine Practitioners[b]	-	-	-	13,985[9]	-

Malaysian Health Facts 2016, *Medical Practice Division, MOH*

Healthcare Facilities, 2015 (as of 31 December)

Government **76%**

- **Ministry of Health**

	NO.	OFFICIAL BEDS
Hospitals	143	41,389
- Hospitals	134	36,447
- Special Medical Institutions[1]	9	4,942

	NO.	TEAMS
Health Clinics		
- Health Clinics[2]	1,061	-
- Community Clinics (Klinik Desa)	1,808	-
- Mobile Health Clinics (Teams)	-	203
- Flying Doctor Services (Teams)	6 (Helicopters)	12

[1] *Refers to one Rehabilitation Hospital, one Women & Children Hospital, one Leprosy, one Respiratory, one Cancer and four Psychiatrics Institutions*
[2] *Health Clinics include Maternal & Child Health Clinics*

Healthcare Facilities, 2015 (as of 31 December)

Government (contd.)

- **1Malaysia Clinics**

	NO.	TEAMS
- 1Malaysia Clinics	334	-
- 1Malaysia Mobile Clinics (Bus)	5	10
- 1Malaysia Mobile Clinics (Boat)	4	8

	NO.	DENTAL CHAIRS
- 1Malaysia Dental Clinics (UTC)	9	16
- 1Malaysia Mobile Dental Clinics (Bus)	1	1
- 1Malaysia Mobile Dental Clinics (Boat)	2	2[a]

- **Non Ministry of Health**

	NO.	OFFICIAL BEDS
Hospitals	9	3,698

[a] *Refers to portable dental chairs.*

Healthcare Facilities, 2015 (as of 31 December)

Private **24%**

- **Licensed**

	NO.	OFFICIAL BEDS
Hospitals	183	12,963
Maternity Homes	14	50
Nursing Homes	16	539
Hospice	3	22
Ambulatory Care Centre	63	98
Blood Bank	3	25[1]
Haemodialysis Centre	407	4,188[2]
Community Mental Health Center	1	-
Combined Facilities[3]	2	73/29[2]

- **Registered**

Medical Clinics	7,146	-
Dental Clinics	1,867	-

[1] *Refers to Banks/Tanks*
[2] *Refers to dialysis chairs*
[3] *Ambulatory Care and Haemodialysis Centre*

Source: Medical Practice Division, MoH

Malaysian Health Facts 2016, *Medical Practice Division, MOH*

Admissions and Outpatient Attendances, 2015

Government

- **Ministry of Health**

Admissions[1]

Hospitals	2,465,727
Special Medical Institutions	60,478

Outpatient Attendances

Hospitals	20,260,479
Special Medical Institutions	311,952
Public Health Facilities[2]	38,311,223

40 million outpatient encounters

Day Care Attendances

Hospitals[3]	1,260,198

Clinical Support Service Attendances

Medical Rehabilitation (Hearing)[4]	95,564
Medical Rehabilitation (Speech)[5]	54,831
Medical Social Services[6]	89,450
Dietetic[7]	236,569
Medical Rehabilitation (Occupational Therapy)[8]	497,495
Medical Rehabilitation (Physiotherapy)[9]	1,191,422

Dental Health Attendances

Dental Clinics	11,688,700

Admissions and Outpatient Attendances, 2015

Government (contd.)

- **Ministry of Health**

Maternal & Child Health Attendances

Ante-natal Attendances	5,995,528
Post-natal Attendances	552,260
Child Attendances	8,162,977

- **Non Ministry of Health Hospitals**

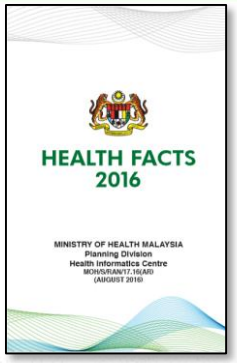
Admissions	150,832
Outpatient Attendances	2,162,307

Private Hospitals[10]

Admissions	1,064,718
Outpatient Attendances	3,932,361

4 million

[1]Based on 100% response rate.
[2]Based on 98.55% response rate.
[3]Based on 88.06% response rate.
[4]Based on 93.21% response rate.
[5]Based on 95.54% response rate.
[6]Based on 93.46% response rate.
[7]Based on 96.05% response rate.
[8]Based on 84.64% response rate.
[9]Based on 89.41% response rate.



[10]Based on 91.41% response rate. Includes Private Hospitals, Private Maternity Homes, Private Nursing Homes and Private Hospice.

Financial Allocation, 2016

Total MoH Allocation	RM23,031,066,400
- Operating	RM21,430,802,000
- Development	RM1,600,264,400
Per Capita Income[1] (current prices)	RM38,438 (forecast)
Percentage of Total MoH Allocation to National Budget	8.62% **8.6%**

Sources: Estimated Federal Budget 2016, Ministry of Finance
[1]Economic Report 2015/2016, Ministry of Finance

National Health Accounts

Indicator	2013	2014
Total Expenditure on Health (Public & Private) (in million)	RM44,976[1] (RM44,748)[2]	RM50,278 **RM 50M**
Total Expenditure on Health as a Percentage of GDP	4.41%[1] (4.53%)[2]	4.54%
Public Expenditure as a Percentage of Total Expenditure on Health	51.86%[1] (51.96%)[2]	52.43%

1 *Final Figure: The change due to review of methodology*
2 *Data published in Health Facts 2015*
Source: Database MNHA 1997 - 2014, MNHA Unit, Planning Division, MoH

Registered Medical Practitioners / Physicians in Malaysia

ANNUAL PRACTISING CERTIFICATES ISSUED 2018

	2018		2008	
Public	33551	69.6%	15096	60.1%
Private	14639	30.4%	10006	39.9%
Total	48190	2X!	25102	

In 2008, Doctor to population ratio = 1 : 1105

In 2018 Estimated Doctor to Population ratio = 1 : 664

[Goal of MOH to attain 1: 400 by 2020]

Recent Data courtesy from Dr Milton Lum, elected MMC member >20 years!

STATE OF OUR RECOGNISED MEDICAL PROGRAMMES FOR MALAYSIA (AS OF 5 SEP 2019)

- Local Medical Schools: 31
  - **Public 9, Private 22**
- Recognised Medical Programmes: 34
- Schedule 2 recognised foreign institutions: 346

  (More than 700 were previously recognised, but more than half were taken off the schedule after some reconciliation exercise as to absent feedback on student recruitment from Malaysia.)

Recent Data courtesy from Dr Milton Lum, elected MMC member >20 years!

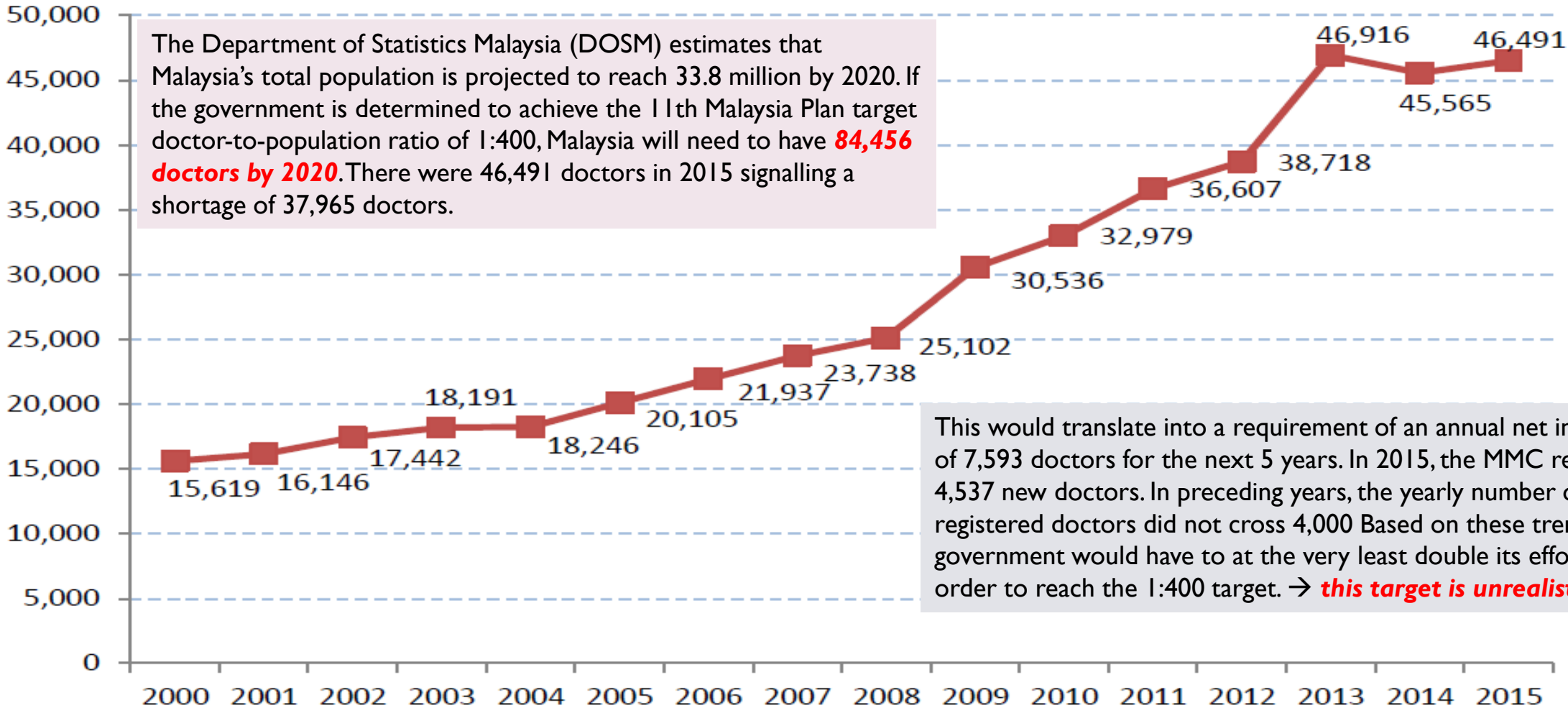
2018 PROVISIONAL REGISTRATIONS

I.E. MANDATED HOUSEMANSHIP REGISTRATION FROM MMC AS PER MEDICAL ACT

Local	Public	1482
	Private	2509
	Subtotal	3991
Foreign returning medical graduates		1876
Total		**5867**

Recent Data courtesy from Dr Milton Lum, elected MMC member >20 years!

Figure 1: Number of qualified medical doctors in Malaysia, 2000-2015



The Department of Statistics Malaysia (DOSM) estimates that Malaysia's total population is projected to reach 33.8 million by 2020. If the government is determined to achieve the 11th Malaysia Plan target doctor-to-population ratio of 1:400, Malaysia will need to have ***84,456 doctors by 2020***. There were 46,491 doctors in 2015 signalling a shortage of 37,965 doctors.

This would translate into a requirement of an annual net increase of 7,593 doctors for the next 5 years. In 2015, the MMC registered 4,537 new doctors. In preceding years, the yearly number of newly registered doctors did not cross 4,000 Based on these trends, the government would have to at the very least double its efforts in order to reach the 1:400 target. → ***this target is unrealistic.***

Source: Health Indicators, Ministry of Health

MALAYSIAN MEDICAL COUNCIL

ANNUAL REPORT 2016

2016: Facts at a Glance

Facts	No.
Provisional Registration	6238
Full Registration without Conditions (Section 14(1))	3835
Full Registration with Conditions (Section 14(3))	333
Temporary Practising Certificate	217
Annual Practising Certificate	41104
Letter of Good Standing	838
Number of Complaints Sanctioned	112

ANNUAL PRACTISING CERTIFICATES ISSUED 2018

- Public 33551
- Private 14639
- Total 48190

Table 1: Practitioners Provisionally Registered According to Training Institution

Institution	2012	2013	2014	2015	2016
Local: Public	1206	1218	1329	1485	1635
Local: Private	1069	1365	1440	1614	2127
Total: Local	**2267**	**2583**	**2769**	**3099**	**3762**
Foreign	1827	1889	1971	2047	2476
Grand Total	**4094**	**4472**	**4740**	**5146**	**6238**

Chart 1: Graphic Representation of Table 1

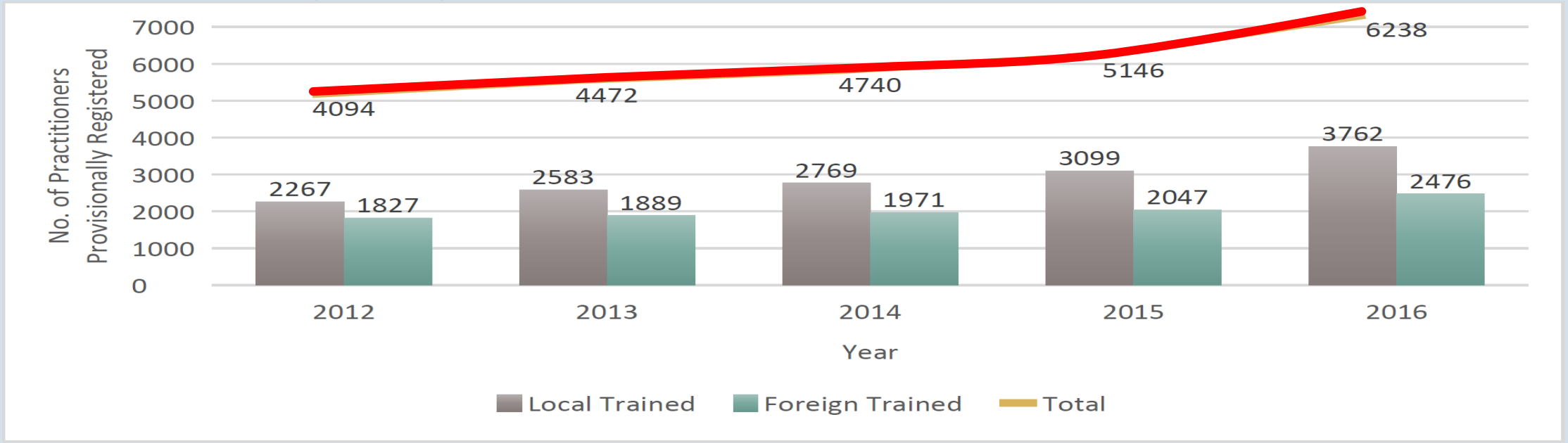
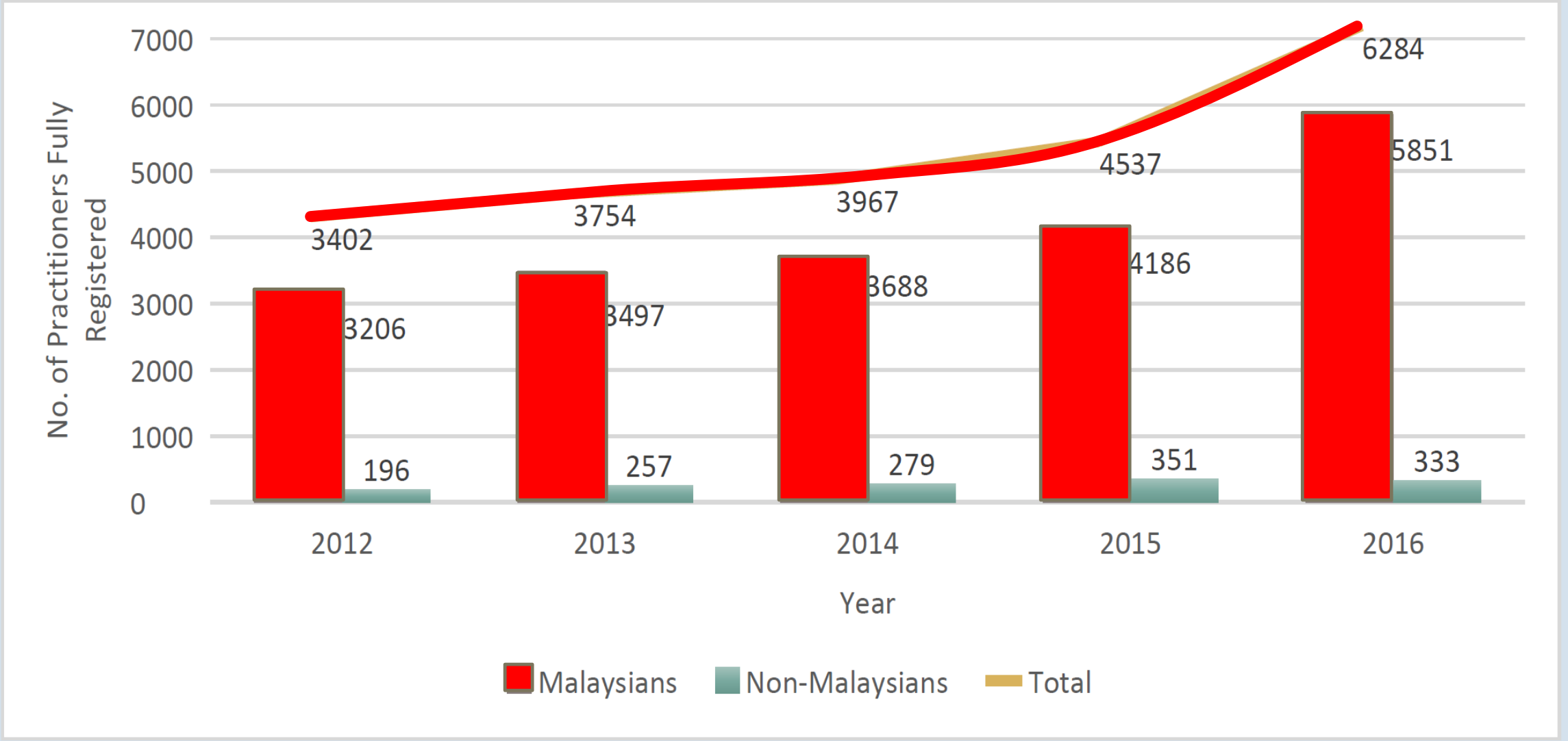


Table 2: Number of Full Registration Certificates Issued According to Citizenship and Place of Housemanship Training

Relevant Legislation	Category	2012	2013	2014	2015	2016
Registered According to Section 14(1)	Malaysians - Completing Housemanship Locally	3076	3344	3592	4098	3757
	Malaysians - Completing Housemanship Overseas	130	153	96	88	78
Total		**3206**	**3497**	**3688**	**4186**	**3835**
Registered According to Section 14(3)	Foreigners - Completing Housemanship Locally	10	30	10	23	25
	Foreigners - Completing Housemanship Overseas	186	227	269	328	308
Total		**196**	**257**	**279**	**351**	**333**
Grand Total		**3402**	**3754**	**3967**	**4537**	**4168**

Annual New Full Registration of Medical Practitioners

Chart 2: Practitioners Fully Registered According to Citizenship



Medical Review Panel

Chart 3: Cases Reviewed by the MRP

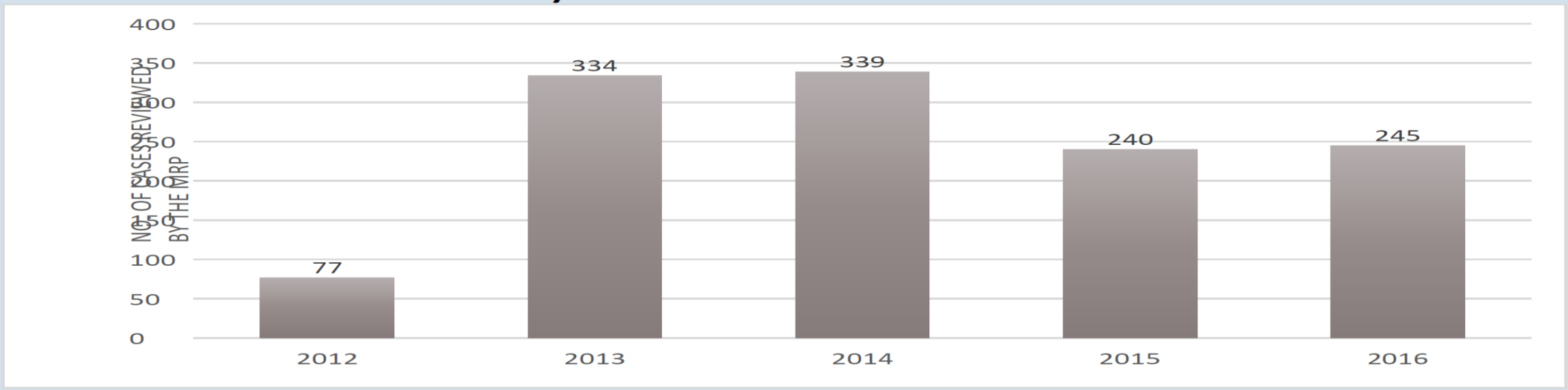


Table 6: Summary of MRP Recommendations Forwarded to the Council in 2016

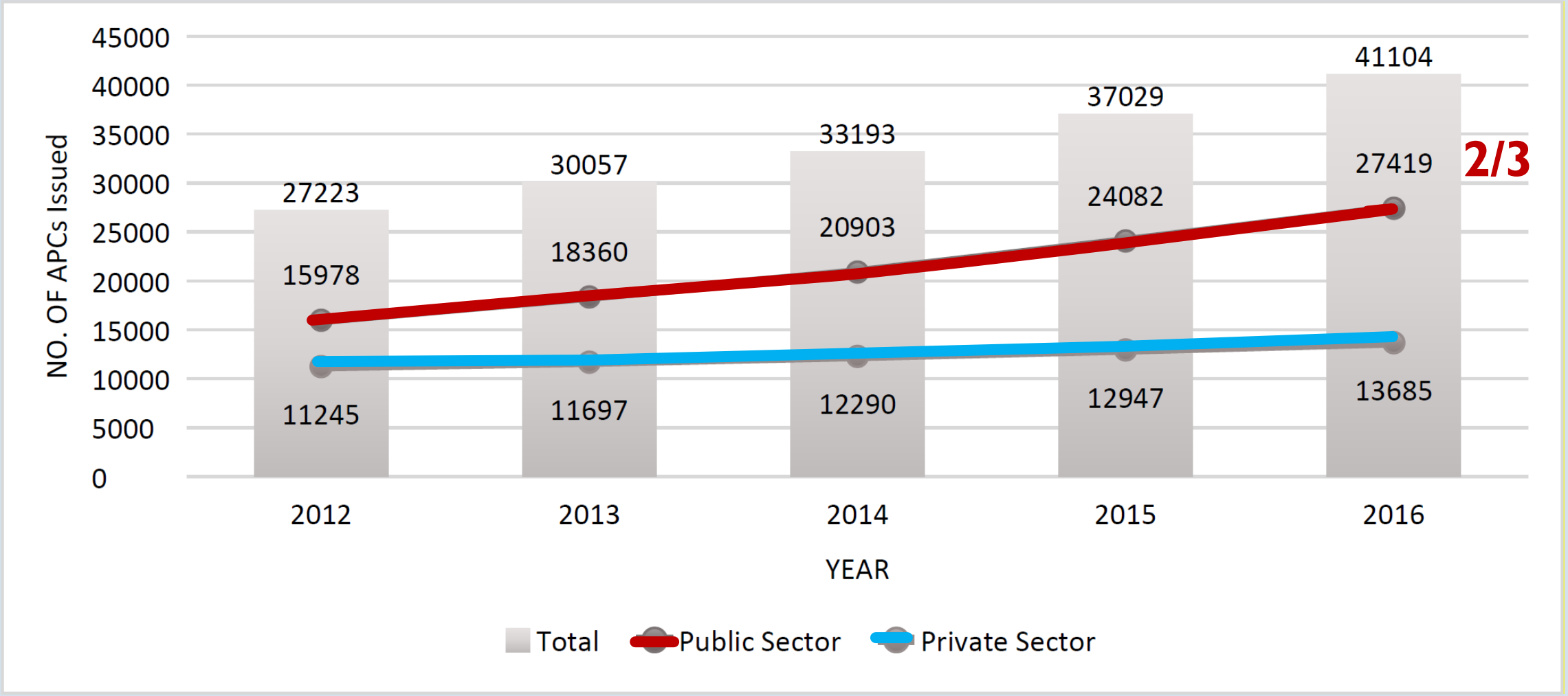
MRP Recommendation		No. of Cases
Fit to Practice	Given Full Registration	34
	Given Provisional Registration	6
	Continue Housemanship training	120
	Continue practice	21
Not Fit to Practice	Cessation of Full Registration	2
	Cessation of Provisional Registration	5
	Need further treatment	20
Deferred	*Cases deferred pending complete documentation*	37
Total		**245**

Table 7: Number of APCs Issued According to State and Sector

State	2012		2013		2014		2015		2016	
	Public	Private	Public	Private	Public	Private	Public	Private	Public	Private
K. Lumpur	3178	2064	3300	2143	3579	2221	3991	2317	4589	2461
Labuan	16	16	16	18	52	19	55	24	64	24
Putrajaya	406	14	480	13	625	20	800	22	845	29
Johor	1247	1197	1491	1243	1764	1328	1997	1399	2029	1496
Kedah	874	505	1086	524	1287	549	1317	566	1423	593
Kelantan	1199	242	1252	246	1373	266	1678	279	1979	290
Melaka	603	428	676	449	704	464	711	499	840	532
N. Sembilan	749	416	836	421	953	456	1045	475	1111	489
Pahang	819	287	933	302	1124	313	1307	333	1391	354
P. Pinang	943	1019	1183	1062	1236	1103	1254	1118	1461	1167
Perak	1228	909	1482	937	1496	966	1589	1009	1646	1060
Perlis	189	41	216	36	256	39	304	41	290	44
Selangor	2269	3057	2770	3191	3174	3387	3840	3624	4278	3837
Terengganu	512	201	605	210	785	225	1022	250	1099	258
Sabah	961	415	1127	434	1402	457	1672	496	2185	527
Sarawak	755	431	892	457	1084	473	1474	490	2186	519
Others	30	3	15	11	9	4	26	5	3	5
Total	**15978**	**11245**	**18360**	**11697**	**20903**	**12290**	**24082**	**12947**	**27419**	**13685**
Grand Total	**27223**		**30057**		**33193**		**37029**		**41104**	

Note: Figures based on practitioners' principal place of practice

The Malaysian Medical Council Annual Report 2016



Health System Manpower Failure

- *In the midst of inequity, we do have a serious glut of doctors, that the Ministry of Health and the government have no clue as to how to place these newly brewed house officers and medical officers…*
- *This was unfortunately prescribed in the 2009 to attempt to lift our health care system into the stratum of a 'modern' society i.e. having a doctor population ratio of 1 : 400!*
- *→A monumental misconceived plan without adequate thought and serious projection of logistics, manpower or amenity capacities*

HOUSE OFFICER PERFORMANCE IN MALAYSIA

MOH REPORT 2009-2011

REPORT:
House Officer Performance in Malaysia 2009-2011

By

Noorliza Mohamad Noordin
Sondi Sararaks
Anis Syakira Jailani
Fun Weng Hong
Noriah Bidin
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Report: House Officer Performance in Malaysia 2009-2011
ISBN:978-967-5398-33-9

1. House Officer Performance in Malaysia 2009-2011

1. Noorliza Mohamad Noordin, Sondi Sararaks, Anis Syakira Jailani, Fun Weng Hong, Noriah Bidin, Mohd Idris Omar, Farrah Ong Abdullah, Roslinah Ali.

Publisher

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ISBN:978-967-398-33-9

ISBN 978-967-5398-33-9
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FIGURE 1: DIAGRAM SHOWING THE VARIOUS STUDIES INVOLVED AND THE QUALIFICATION FOR HOUSE OFFICER ADMISSION TO MOH AND THE INTERNSHIP PROGRAMME

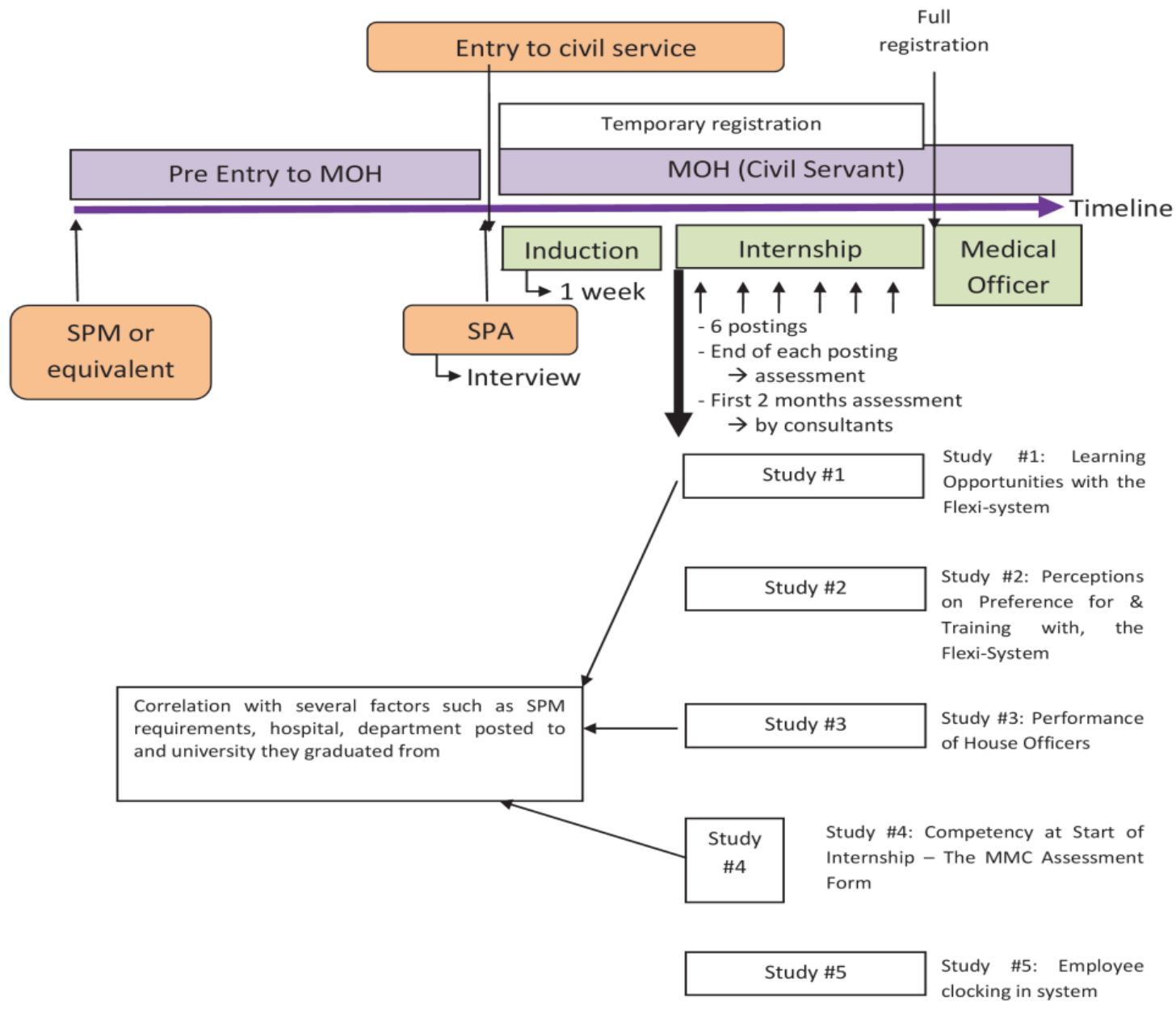
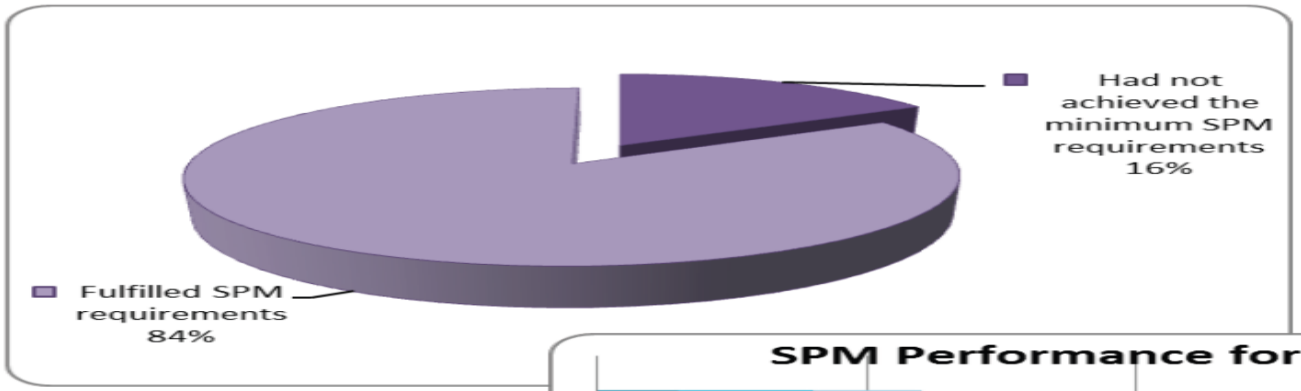
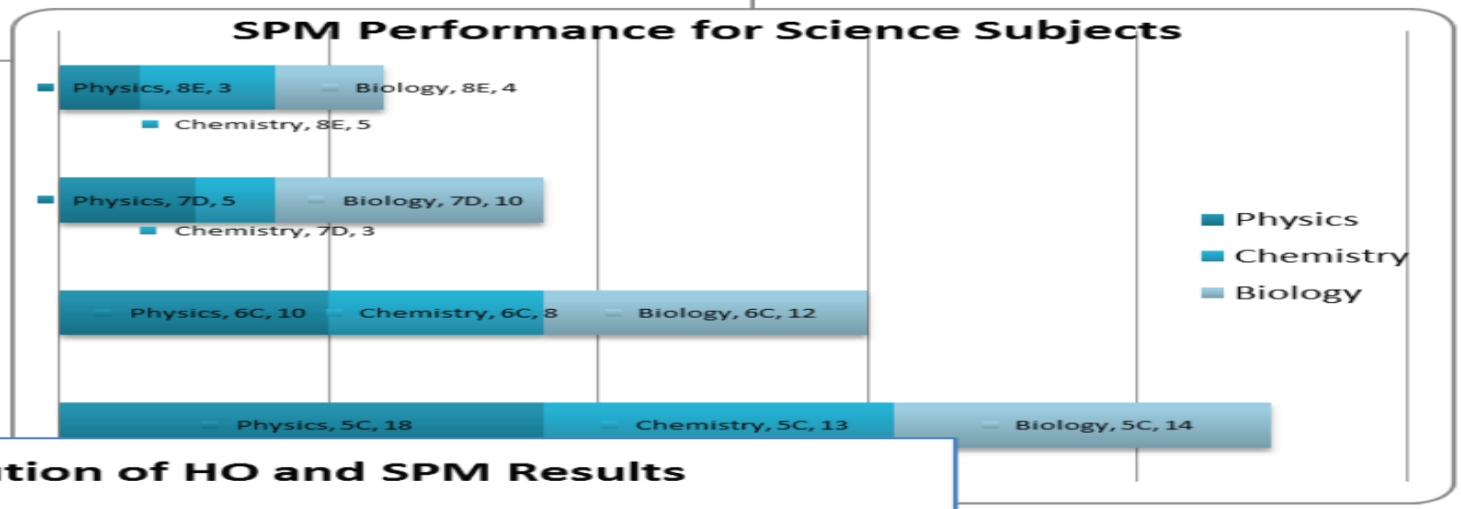


Figure 9: SPM Results of house officers based on the Minimum Requirements for Medical School Entry





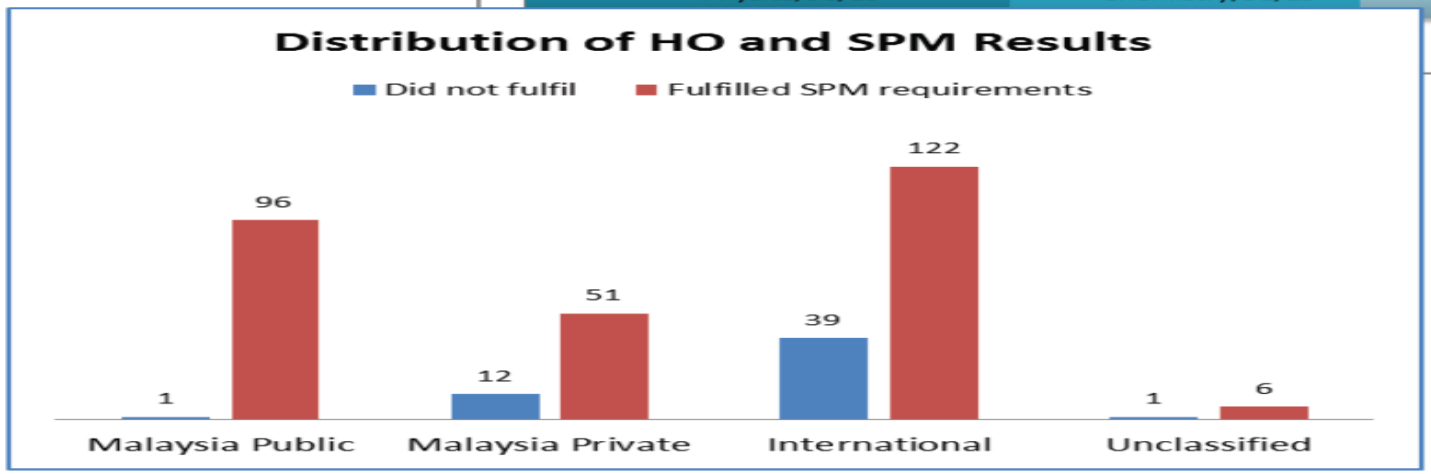


Figure 11: Demographic Profile – Distribution Of House Officers By The Medical Schools They had Graduated From*

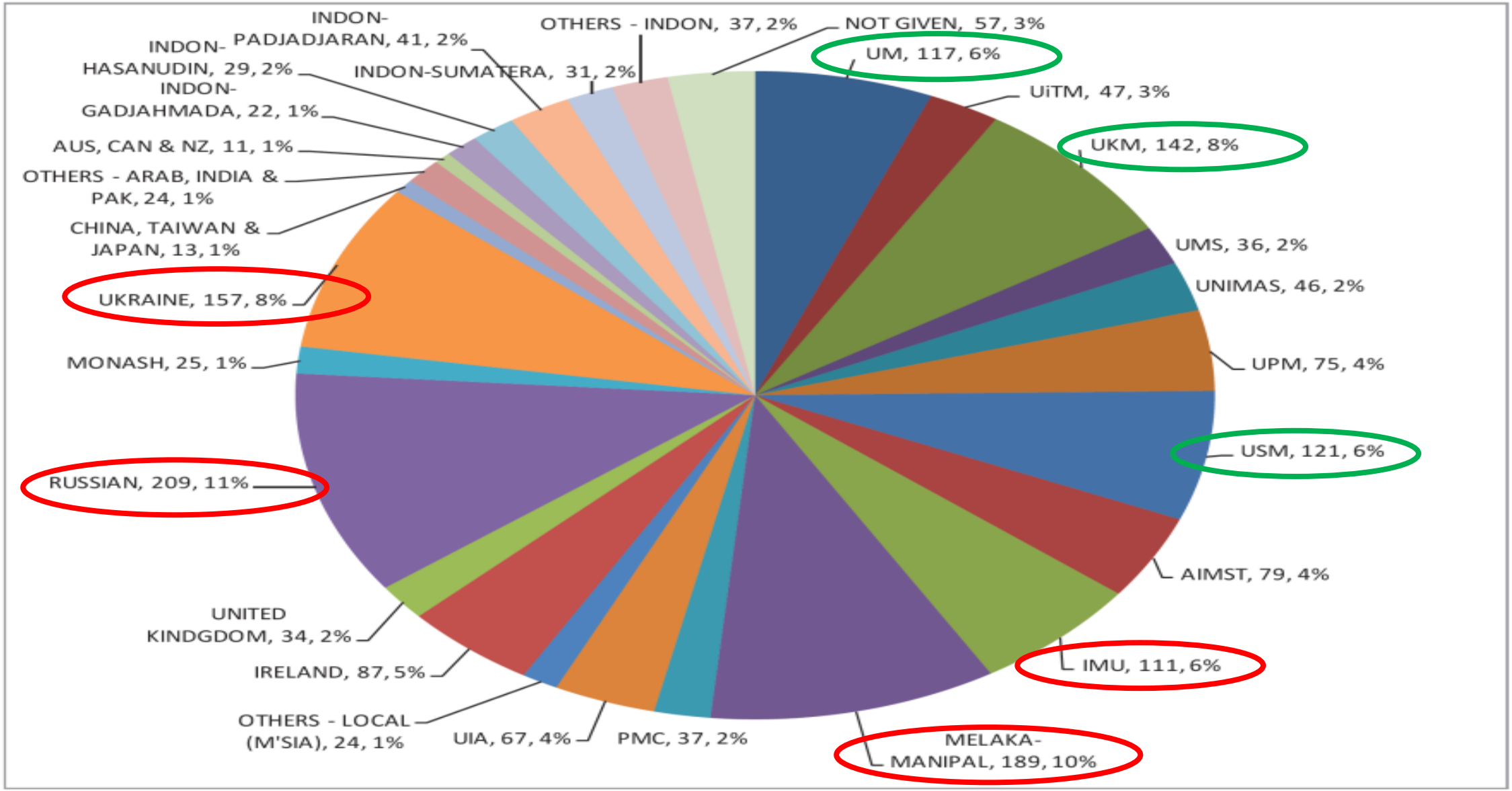


FIGURE 10: DEMOGRAPHIC PROFILE – DISTRIBUTION OF HOUSE OFFICERS BY HOSPITALS

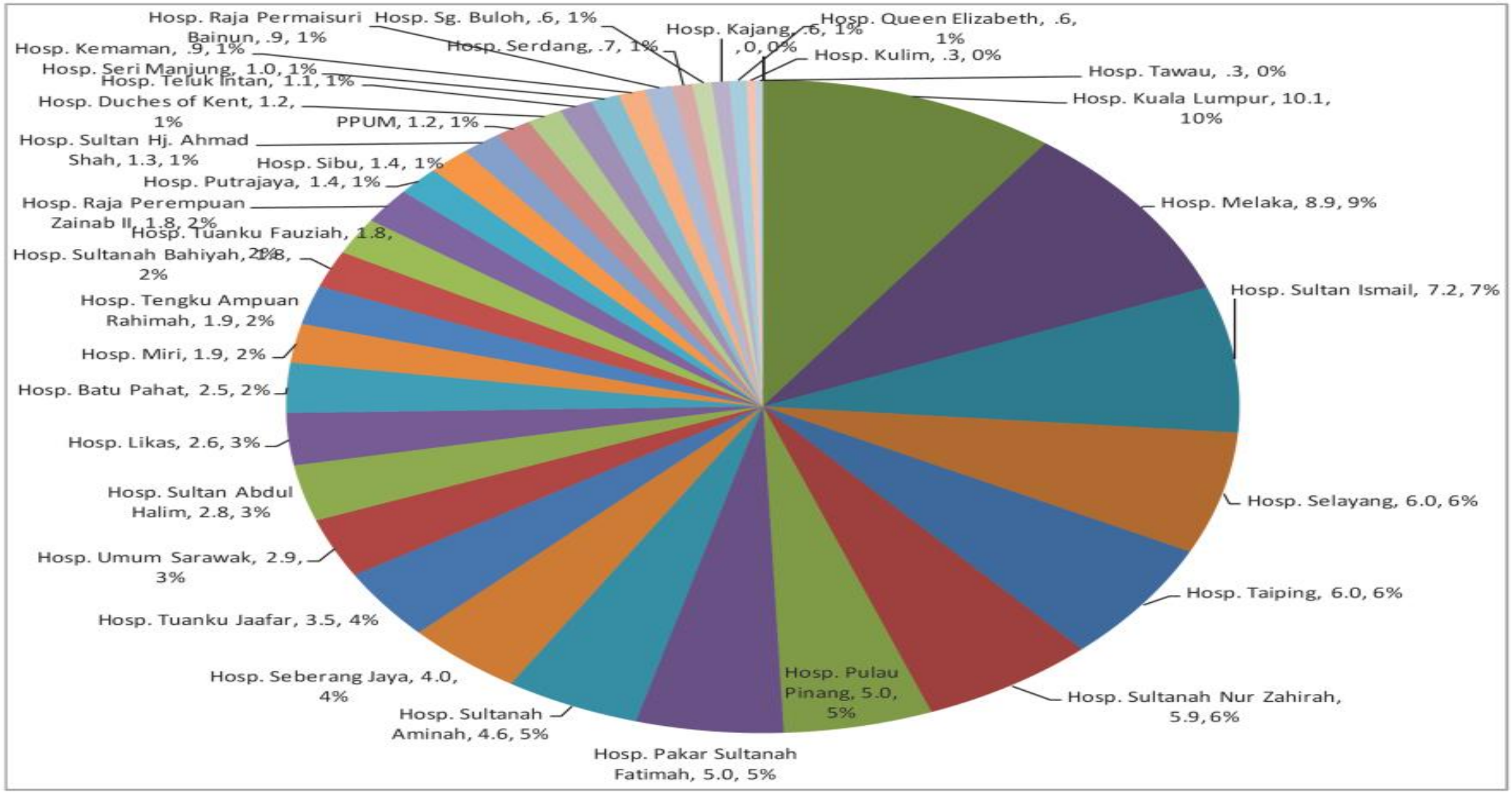


TABLE 12: ASSOCIATION BETWEEN SPM QUALIFICATIONS AND UNIVERSITIES WITH HOUSE OFFICER PROBLEMS

House Officer Problems	Extended due to performance					Discipline problem					Stress problem				
	N	Count	%	95% CI*		N	Count	%	95% CI*		N	Count	%	95% CI*	
				LL	UL				LL	UL				LL	UL
SPM QUALIFICATIONS															
Fulfilled requirements	275	41	14.9%	10.67	19.15	275	1	0.40%	0.00	1.08	275	4	1.5%	0.03	2.88
Did not fulfill requirements	76	24	31.6%	20.89	42.27	76	4	5.30%	0.13	10.4	76	1	1.3%	0.00	3.94
UNIVERSITIES															
Malaysian Public Universities	118	15	12.7%	6.61	18.81	118	0	0.0%	-	-	118	2	1.7%	0.00	4.06
Malaysian Private Universities	76	10	13.2%	5.38	20.93	76	0	0.0%	-	-	76	1	1.3%	0.00	3.94
Russian Universities	45	15	33.3%	19.01	47.66	45	1	2.2%	0.00	6.70	45	1	2.2%	0.00	6.7
Ukraine Universities	41	11	26.8%	12.67	40.99	41	4	9.8%	0.27	19.24	41	0	0.0%	-	-
Indonesian Universities	30	11	36.7%	18.37	54.97	30	0	0.0%	-	-	30	0	0.0%	-	-
Others	37	3	8.1%	0.00	17.33	37	0	0.0%	-	-	37	1	2.7%	0.00	8.18

Caution: sample size small for some subgroups.

Key: * 95% CI= 95% Confidence intervals; LL=lower limits, UL-upper limits

TABLE 14: SUMMARY OF INADEQUATE KNOWLEDGE OF HOUSE OFFICER, BY UNIVERSITY

Inadequate knowledge	n	Count	%	Confidence Interval	
				Lower Limit	Upper Limit
Overall	**1864**	**385**	**20.7**	**18.9**	**22.5**
University					
Local – In Malaysia	1088	130	11.9	10.0	13.9
International – Outside Malaysia	719	232	32.3	28.8	35.7
Not given	57	23	40.4	27.2	53.5
University					
UM	116	11	9.5	4.1	14.9
UKM	141	16	11.3	6.0	16.6
USM	121	13	10.7	5.1	16.3
UNIMAS	46	8	17.4	6.0	28.8
UMS	36	3	8.3	0.0	17.8
UPM	75	9	12.0	4.5	19.5
UITM	47	3	6.4	0.0	13.6
AIMST	78	18	23.1	13.5	32.6
IMU	111	7	6.3	1.7	10.9
MELAKA-MANIPAL	189	27	14.3	9.3	19.3
PMC	37	3	8.1	0.0	17.3
UIA	67	4	6.0	0.1	11.8
OTHERS – LOCAL (M'SIA)	24	8	33.3	13.0	53.7
IRELAND	87	11	12.6	5.5	19.8
UNITED KINDGDOM	34	5	14.7	2.2	27.2
MONASH	25	1	4.0	0.0	12.3
AUSTRALIA, CANADA & NEW ZEALAND	11	0	0.0		
RUSSIAN	209	88	42.1	35.4	48.9
UKRAINE	156	67	42.9	35.1	50.8
CHINA, TAIWAN & JAPAN	13	1	7.7	0.0	24.5
OTHERS – ARAB, INDIA & PAKISTAN	24	11	45.8	24.3	67.3
INDON-GADJAHMADA	22	6	27.3	7.1	47.5
INDON-HASANUDIN	29	7	24.1	7.6	40.7
INDON-PADJADJARAN	41	16	39.0	23.4	54.6
INDON-SUMATERA	31	10	32.3	14.8	49.7
OTHERS – INDON	37	9	24.3	9.8	38.8
NOT GIVEN	57	234	40.4	27.2	53.5

TABLE 15: SUMMARY OF INADEQUATE BASIC SKILLS OF HOUSE OFFICER, BY UNIVERSITY

Inadequate basic skills	n	Count	%	Confidence Interval	
				Lower Limit	Upper Limit
Overall	1868	337	18.0	16.3	19.8
University					
Local – In Malaysia	1091	136	12.5	10.5	14.4
International – Outside Malaysia	720	182	25.3	22.1	28.5
Not given	57	19	33.3	20.7	46.0
University					
UM	117	17	14.5	8.0	21.0
UKM	142	15	10.6	5.4	15.7
USM	121	14	11.6	5.8	17.4
UNIMAS	46	9	19.6	7.7	31.5
UMS	36	6	16.7	3.9	29.5
UPM	75	7	9.3	2.6	16.1
UITM	47	4	8.5	0.2	16.8
AIMST	79	15	19.0	10.1	27.8
IMU	111	9	8.1	3.0	13.3
MELAKA-MANIPAL	189	27	14.3	9.3	19.3
PMC	37	3	8.1	0.0	17.3
UIA	67	6	9.0	1.9	16.0
OTHERS – LOCAL (M'SIA)	24	4	16.7	0.6	32.7
IRELAND	87	11	12.6	5.5	19.8
UNITED KINDGDOM	34	7	20.6	6.3	34.9
MONASH	25	2	8.0	0.0	19.4
AUSTRALIA, CANADA & NEW ZEALAND	11	2	18.2	0.0	45.4
RUSSIAN	209	53	25.4	19.4	31.3
UKRAINE	157	53	33.8	26.3	41.2
CHINA, TAIWAN & JAPAN	13	2	15.4	0.0	38.1
OTHERS – ARAB, INDIA & PAKISTAN	24	9	37.5	16.6	58.4
INDON-GADJAHMADA	22	6	27.3	7.1	47.5
INDON-HASANUDIN	29	7	24.1	7.6	40.7
INDON-PADJADJARAN	41	13	31.7	16.8	46.6
INDON-SUMATERA	31	10	32.3	14.8	49.7
OTHERS – INDON	37	7	18.9	5.7	32.2
NOT GIVEN	57	19	33.3	20.7	46.0

FIGURE 12: ODDS RATIO FOR INADEQUATE ACADEMIC KNOWLEDGE BY UNIVERSITY

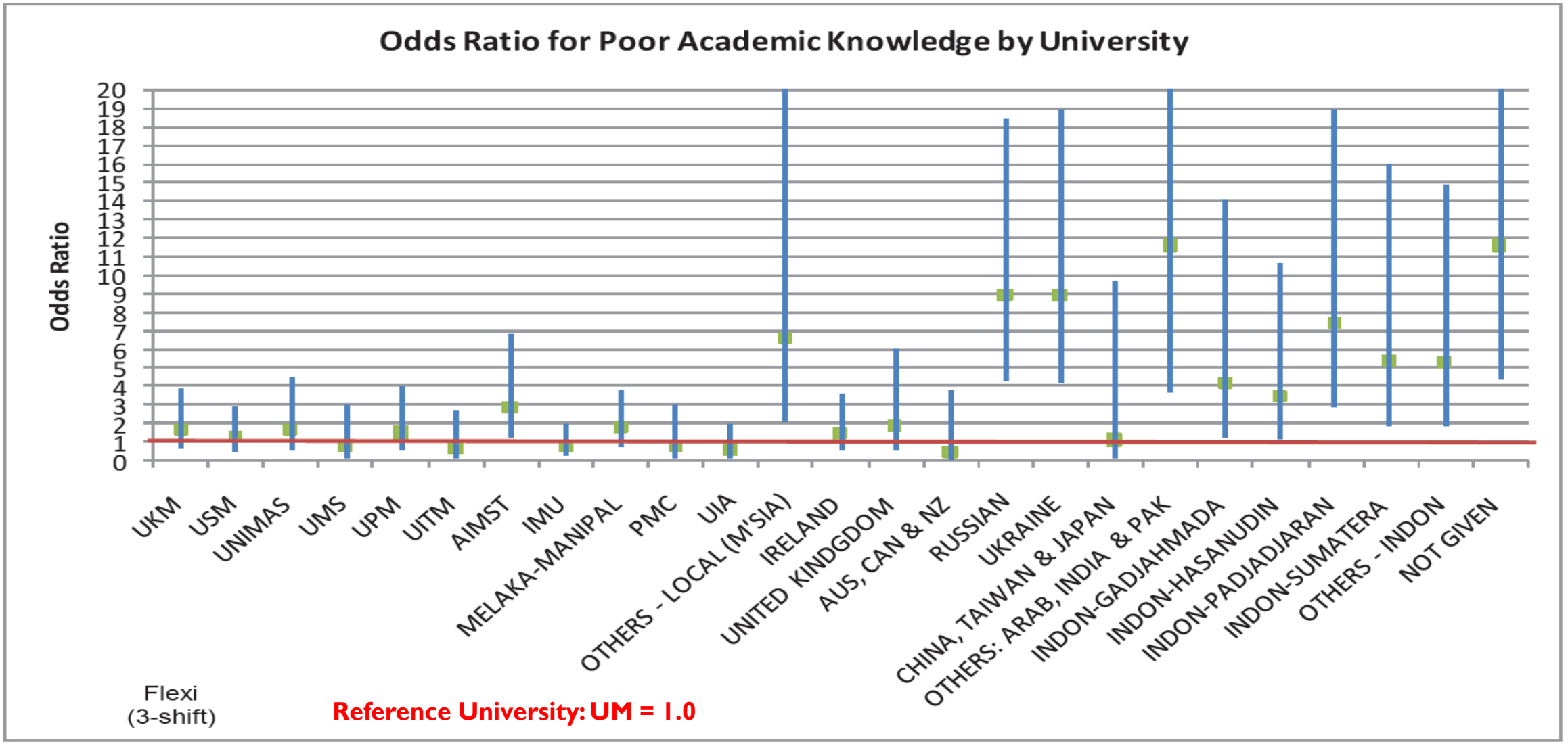


TABLE 16: ODDS RATIO* FOR INADEQUATE ACADEMIC KNOWLEDGE, BY UNIVERSITY

University	Odds Ratio	Lower Limit	Upper Limit
UKM	1.63	0.69	3.85
USM	1.20	0.50	2.91
UNIMAS	1.60	0.57	4.51
UMS	0.71	0.17	2.95
UPM	1.49	0.55	3.99
UITM	0.67	0.17	2.64
AIMST	2.87	1.21	6.83
IMU	0.69	0.25	1.93
MELAKA-MANIPAL	1.72	0.79	3.75
PMC	0.74	0.18	2.98
UIA	0.57	0.17	1.96
OTHERS - LOCAL (M'SIA)	6.55	2.11	20.35
IRELAND	1.43	0.56	3.62
UNITED KINDGDOM	1.83	0.56	6.03
AUS, CAN & NZ	0.44	0.05	3.78
RUSSIAN	8.91	4.31	18.41
UKRAINE	8.88	4.17	18.90
CHINA, TAIWAN & JAPAN	1.06	0.12	9.62
OTHERS: ARAB, INDIA & PAK	11.57	3.71	36.03
INDON-GADJAHMADA	4.17	1.23	14.07
INDON-HASANUDIN	3.44	1.11	10.67
INDON-PADJADJARAN	7.37	2.87	18.93
INDON-SUMATERA	5.39	1.82	15.95
OTHERS - INDON	5.24	1.84	14.88
NOT GIVEN	11.59	4.39	30.57

*Adjusted using logistic regression for hospital and department of posting (specialty)

Reference university: UM

FIGURE 13: ODDS RATIO FOR INADEQUATE BASIC SKILLS, BY UNIVERSITY

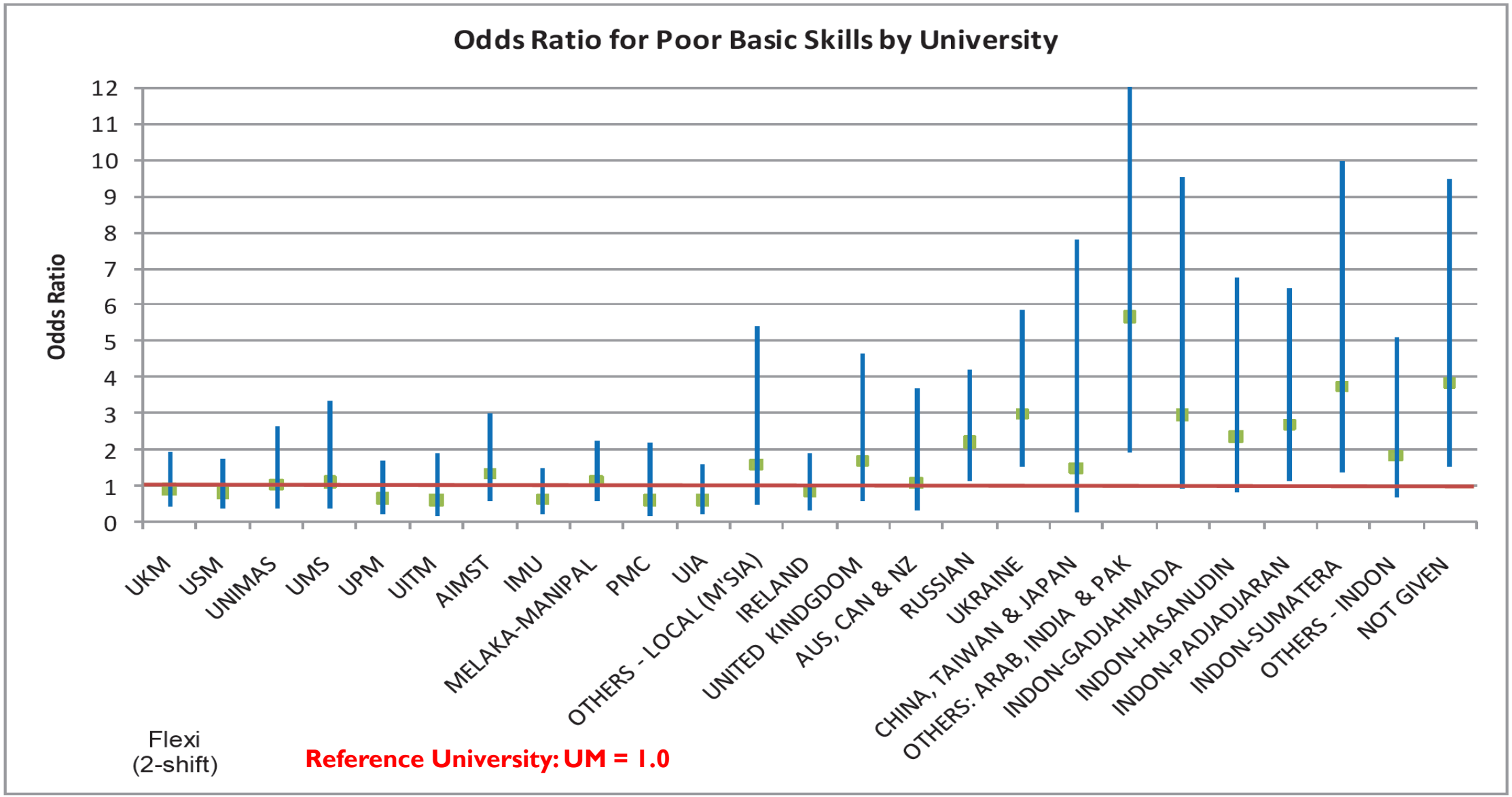


TABLE 17: ODDS RATIO* FOR INADEQUATE BASIC SKILLS, BY UNIVERSITY

University	Odds Ratio	Lower Limit	Upper Limit
UKM	0.87	0.39	1.94
USM	0.77	0.35	1.72
UNIMAS	1.00	0.38	2.61
UMS	1.08	0.35	3.33
UPM	0.63	0.23	1.68
UITM	0.57	0.17	1.88
AIMST	1.31	0.58	2.95
IMU	0.59	0.24	1.45
MELAKA-MANIPAL	1.11	0.55	2.23
PMC	0.58	0.15	2.19
UIA	0.57	0.20	1.59
OTHERS - LOCAL (M'SIA)	1.54	0.44	5.38
IRELAND	0.78	0.33	1.85
UNITED KINDGDOM	1.65	0.59	4.64
AUS, CAN & NZ	1.03	0.29	3.66
RUSSIAN	2.19	1.14	4.20
UKRAINE	2.97	1.52	5.82
CHINA, TAIWAN & JAPAN	1.44	0.26	7.78
OTHERS _ ARAB, INDIA & PAK	5.65	1.92	16.68
INDON-GADJAHMADA	2.94	0.91	9.49
INDON-HASANUDIN	2.33	0.80	6.75
INDON-PADJADJARAN	2.65	1.09	6.42
INDON-SUMATERA	3.70	1.37	9.98
OTHERS - INDON	1.80	0.64	5.07
NOT GIVEN	3.82	1.54	9.47

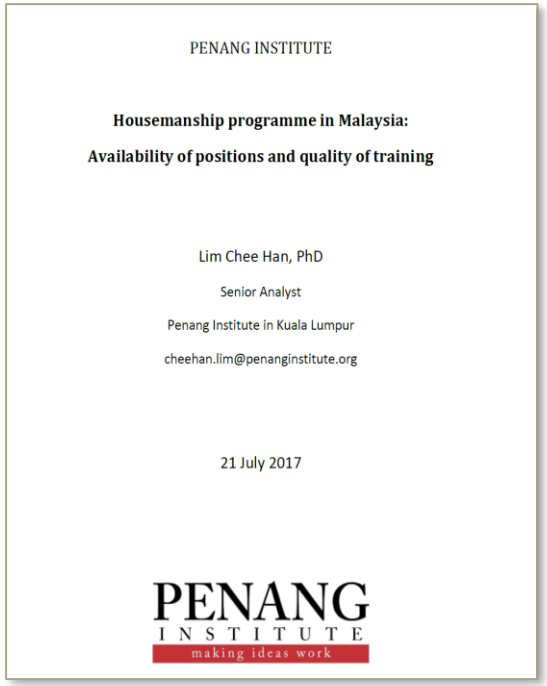
*Adjusted using logistic regression for hospital and department of posting (specialty)

Reference university: UM

Too many doctors, too soon…

ONLY 15PC OF MALAYSIA'S HOUSEMEN FINISH TRAINING WITHIN TWO YEARS

BY BOO SU-LYN IN CODEBLUE: HEALTH IS A HUMAN RIGHT, SEPTEMBER 9, 2019



PENANG INSTITUTE

Housemanship programme in Malaysia:

Availability of positions and quality of training

Lim Chee Han, PhD

Senior Analyst

Penang Institute in Kuala Lumpur

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21 July 2017

PENANG INSTITUTE

making ideas work

- Independent policy researcher Lim Chee Han (centre) speaks at the Second Federation of Private Medical Practitioners' Association, Malaysia (FPMPAM) Malaysian Health Care Conference in Kuala Lumpur on August 31, 2019. Picture by Boo Su-Lyn.

The average housemanship stay increased from 22.8 months in 2009 to 27.8 months in 2016.

RECENT CLAIMS FROM INDEPENDENT POLICY RESEARCHER MR LIM CHEE HAN

- Independent policy researcher Lim Chee Han noted a rising number of trainee doctors who took longer than 24 months, since the day they provisionally registered themselves at the Malaysian Medical Council (MMC), to finish their housemanship, from 368 in 2008 to 3,402 in 2015, before dipping to 2,872 in 2016.
- He said more housemen either waited longer for placement in government hospitals, or needed extension of training, or both.
- MMC issues medical graduates a provisional registration license after they receive a house officer post offer, with MMC saying in December 2015 that it would give medical graduates an endorsement letter first as waiting for housemanship could take as long as six to nine months.
- Lim said between about 50 and 60 per cent of housemen who dropped out from training, or still failed to obtain full registration as medical officers from 2010 to 2016 graduated *from foreign institutions*.
- *In 2014, about 83 per cent of overseas dropouts graduated from Russia, Indonesia, India, and Egypt.*

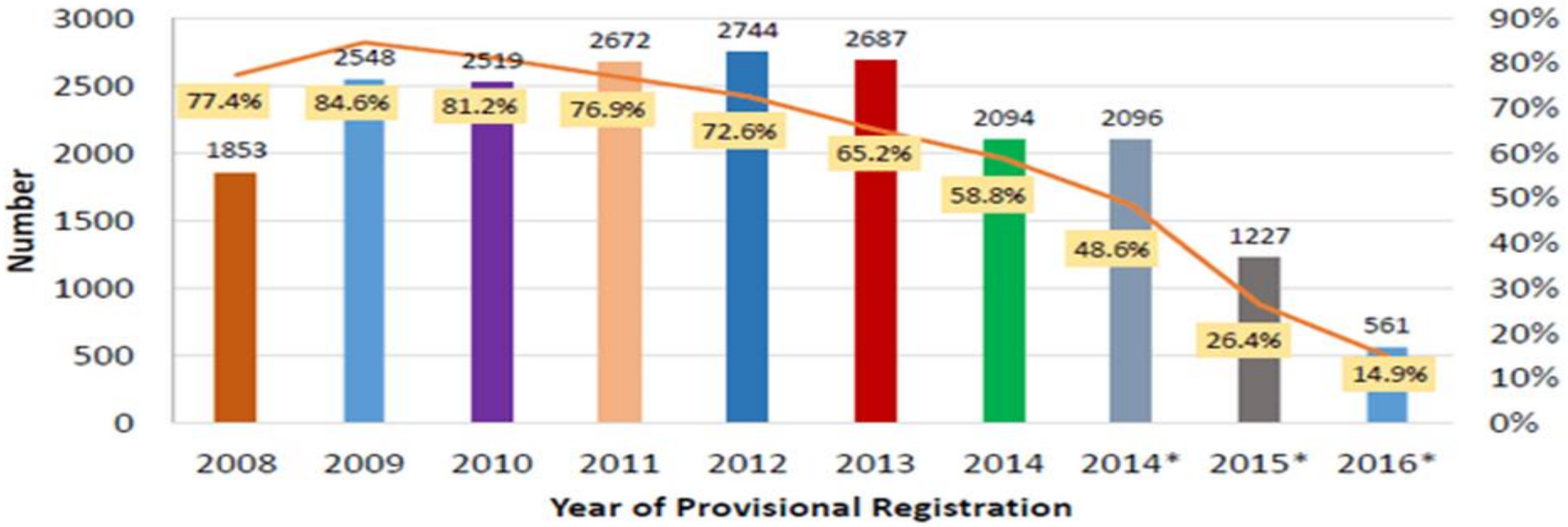
Top 10 countries with most no. of recognised medical institutions by MMC

Rank No.	Country	No. of Institutions Recognised
1	UNITED STATES OF AMERICA	89
2	INDIA	52
3	UNITED KINGDOM	33
4	MALAYSIA	29
5	CANADA	14
6	AUSTRALIA	13
7	INDONESIA	13
8	JAPAN	10
9	TAIWAN	8
10	ARAB REPUBLIC OF EGYPT	7
	PAKISTAN	7

Source: Malaysian Medical Council (Second Schedule of Medical Act, updated 2017 Jan 17)

No. of housemen obtained full registration within 24 months

Number of housemen in Malaysia who are registered as medical officers within 24 months. Graphic by Lim Chee Han.



- More housemen waited longer for the placement and/or needed extension of training (< 20% finish in time for year batch 2016)

RECENT CLAIMS FROM INDEPENDENT POLICY RESEARCHER MR LIM CHEE HAN

"According to Lim, Malaysia recognised 34 medical schools as of last March, compared to 33 in the United Kingdom, and 13 each in Australia and Indonesia."

Medical Universities of Indonesia

Aceh

1. Faculty of Medicine Syiah Kuala University, Banda Aceh
2. North Sumatra[edit]
3. Faculty of Medicine Sumatera Utara University, Medan
4. Faculty of Medicine Prima Indonesia University Medan
5. Faculty of Medicine Methodist Indonesia University, Medan
6. Faculty of Medicine Sumatera Utara Islamic University, Medan
7. faculty of medicine Sumatera Utara Muhammadiyah University, Medan
8. faculty of medicine HKBP Nommensen University, Medan

Riau

9. Faculty of Medicine Riau University, Pekanbaru

West Sumatra

10. Faculty of Medicine Andalas University, Padang
11. Faculty of Medicine Baiturrahmah University, Padang

South Sumatra

12. Faculty of Medicine Sriwijaya University, Palembang
13. Faculty of Medicine Muhammadiyah University, Palembang
14. Faculty of Medicine Lampung University, Bandar Lampung

Jakarta

15. Faculty of Medicine Atma Jaya Catholic University
16. Faculty of Medicine Tarumanagara University
17. Faculty of Medicine Trisakti University
18. Faculty of Medicine Yarsi University
19. Faculty of Medicine University of Indonesia
20. Faculty of Medicine Krida Wacana University
21. Faculty of Medicine Kristen Indonesia University
22. Faculty of Medicine Pelita Harapan University
23. Faculty of Medicine Pembangunan Nasional Veteran University
24. Faculty of Medicine Muhammadiyah University of Jakarta

West Java

25. Faculty of Medicine Padjadjaran University, Bandung
26. Faculty of Medicine Pelita Harapan University, Tangerang
27. Faculty of Medicine Maranatha Christian University, Bandung
28. Faculty of Medicine Jenderal Achmad Yani University, Bandung
29. Faculty of Medicine Bandung Islamic University, Bandung

Central Java

30. Faculty of Medicine Diponegoro University, Semarang
31. Faculty of Medicine Sebelas Maret University, Surakarta
32. Faculty of Medicine Jenderal Soedirman University, Purwokerto
33. Faculty of Medicine Sultan Agung Islamic University, Semarang
34. Faculty of Medicine Muhammadiyah University of Surakarta, Surakarta
35. Faculty of Medicine Muhammadiyah University of Semarang, Semarang

East Java

36. Faculty of Medicine Hang Tuah University, Surabaya
37. Faculty of Medicine Airlangga University, Surabaya
38. Faculty of Medicine Wijaya Kusuma University, Surabaya
39. Faculty of Medicine Brawijaya University, Malang
40. Faculty of Medicine PI-M Putra Indonesia Malang, Malang
41. Faculty of Medicine University of Muhammadiyah Malang, Malang
42. Faculty of Medicine Jember University, Jember

Yogyakarta

43. Faculty of Medicine Gadjah Mada University, Yogyakarta
44. Faculty of Medicine Muhammadiyah University, Yogyakarta
45. Faculty of Medicine Islamic University of Indonesia, Yogyakarta
46. Faculty of Medicine Duta Wacana Christian University, Yogyakarta

Bali

47. Faculty of Medicine Udayana University, Denpasar
48. Faculty of Medicine and Health Sciences Warmadewa University, Denpasar

West Kalimantan

49. Faculty of Medicine Tanjungpura University, Pontianak

South Kalimantan

50. Faculty of Medicine Lambung Mangkurat University, Banjarmasin

North Sulawesi

51. Faculty of Medicine Sam Ratulangi University, Manado

South Sulawesi

52. Faculty of Medicine Hasanuddin University, Makassar
53. Faculty of Medicine Muslim Indonesia University, Makassar

"… Malaysia recognised 34 medical schools as of last March, compared to 33 in the United Kingdom, and 13 each in Australia and Indonesia."

Medical Schools of United Kingdom

England

1. Anglia Ruskin University School of Medicine, Chelmsford
2. Aston University Medical School, Birmingham
3. Barts and The London School of Medicine and Dentistry, London
4. Brighton and Sussex Medical School, Brighton
5. Bristol Medical School, Bristol
6. Durham University School of Medicine and Health
7. Edge Hill University Medical School, Ormskirk
8. Hull York Medical School, York
9. Imperial College School of Medicine, London
10. Keele University School of Medicine
11. King's College London School of Medicine and Dentistry, London
12. Lancaster Medical School, Lancaster, Lancashire
13. Leeds School of Medicine, Leeds
14. Leicester Medical School, Leicester
15. Liverpool Medical School, Liverpool
16. Manchester Medical School, Manchester
17. Medical Sciences Division, University of Oxford, Oxford
18. Newcastle University Medical School, Newcastle upon Tyne
19. Norwich Medical School at the University of East Anglia, Norwich
20. Peninsula College of Medicine and Dentistry, Plymouth
21. St George's, University of London
22. School of Clinical Medicine, University of Cambridge, Cambridge
23. Sheffield Medical School, Sheffield
24. Southampton Medical School, Southampton
25. UCL Medical School, London
26. University of Birmingham Medical School, Birmingham
27. University of Buckingham Medical School, Buckingham
28. University of Central Lancashire School of Medicine, Preston
29. University of Exeter Medical School, Exeter
30. University of Nottingham Medical School, Derby (graduate-entry)
31. University of Nottingham Medical School, Lincoln
32. University of Nottingham Medical School, Nottingham
33. University of Sunderland School of Medicine, Sunderland
34. Warwick Medical School, Coventry

Northern Ireland

35. Queen's University Belfast Medical School, Belfast

Scotland

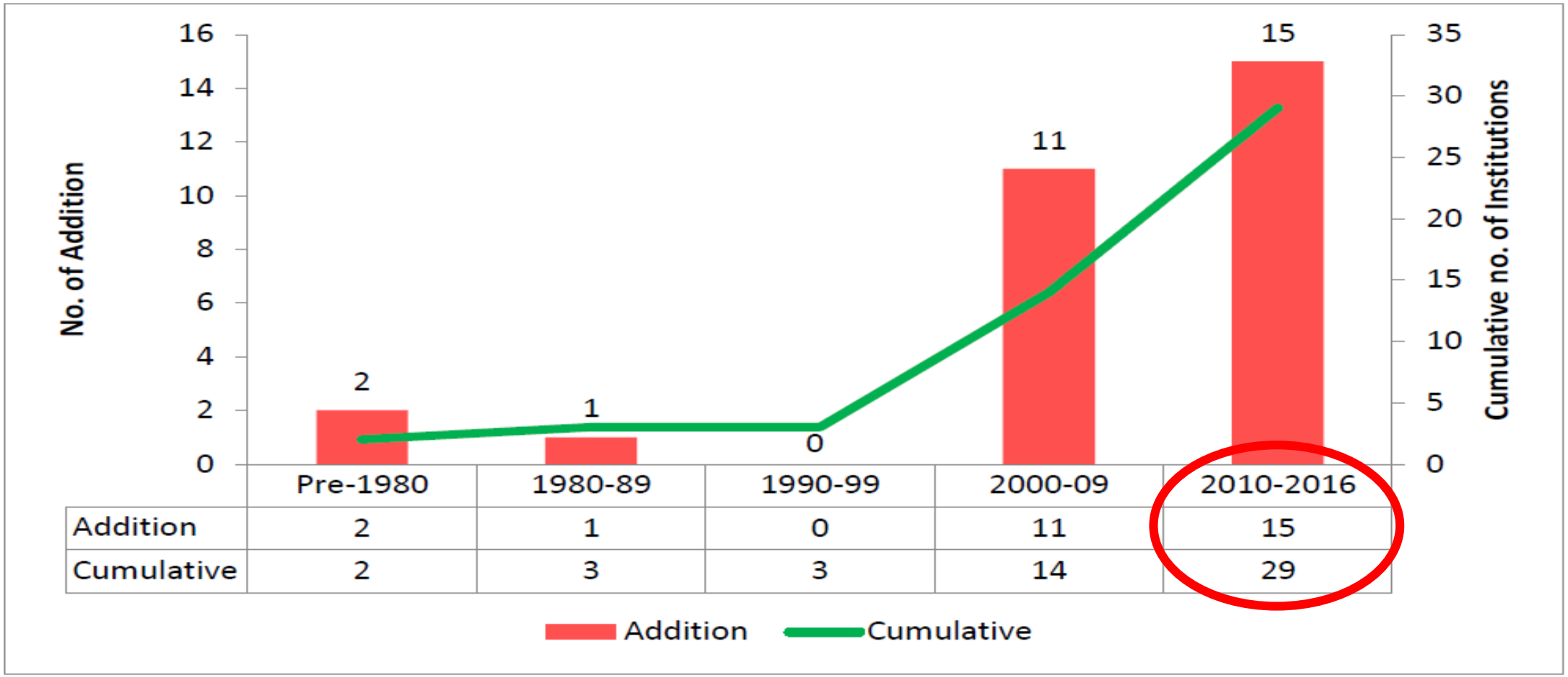
36. University of Aberdeen School of Medicine
37. University of St Andrews School of Medicine
38. Dundee Medical School
39. University of Edinburgh Medical School
40. Glasgow Medical School

Wales

41. Cardiff University School of Medicine, Cardiff
42. Swansea University Medical School

Figure 7: Additional and cumulative number of recognised medical institutions from Malaysia only by year period

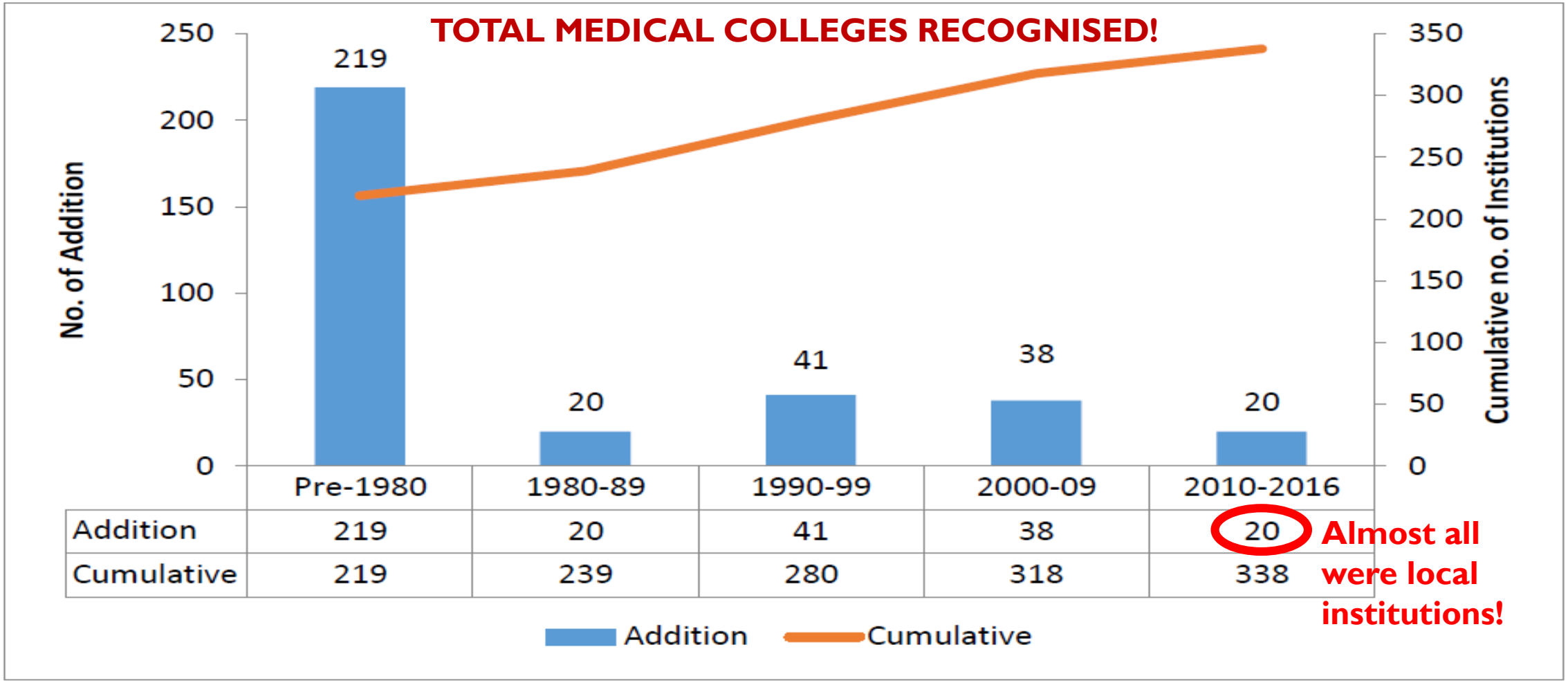
LOCAL MEDICAL COLLEGES RECOGNISED!



	Pre-1980	1980-89	1990-99	2000-09	2010-2016
Addition	2	1	0	11	15
Cumulative	2	3	3	14	29

Source: Malaysian Medical Council and own calculation

Figure 6: Additional and cumulative number of recognised medical institutions by year period[4]



	Pre-1980	1980-89	1990-99	2000-09	2010-2016
Addition	219	20	41	38	20
Cumulative	219	239	280	318	338

Source: Malaysian Medical Council and own calculation

Addressing the allegations of medical graduates from dubious foreign institutions who had enrolled with lesser than the minimal entry qualifications before returning to work in Malaysia, Dr Noor Hisham Abdullah explained:

"The minimal entry qualifications for any undergraduate course including professional courses such as the medical course are determined by the Ministry of Higher Education (MOHE). The council gives its input to MOHE and have recently suggested a more stringent entry requirement for the medical course, but the final decision rests with MOHE as provided for under the law.

"The MMC is able to monitor whether local universities have taken students without minimal qualifications through the periodic accreditation visits to all the universities which it conducts on behalf of the Malaysian Qualification Agency (MQA), a government agency tasked with ensuring quality assurance of higher education.

"The MQA will take the necessary action if the accreditation panels from MMC find any issues with minimal entry qualifications.

"MMC, however, does not have the authority to regulate entry into Medical courses in overseas universities. In the past, students who wish to pursue medical courses overseas were required to take a "No Objection Certificate" from the MOHE and the issuance of such certificates would be based on the students having the same minimal entry qualifications as stipulated for entry to local universities.

"Many of the foreign universities have ignored the NOC and taken students with lesser qualifications or they have circumvented the requirement by conducting their own foundation courses. The foundation programmes, many of dubious standards, are supposed to prepare students with lesser qualifications to undertake the medical course."

Noor Hisham Abdullah, "Recognition of Foreign Medical Schools",
Press Statement from the Director-General of Health Malaysia, 15 March 2016

SUPPLY-DEMAND GAP FOR HOUSE-OFFICER POSITIONS IN MOH APPROVED HOSPITAL FACILITIES

Figure 2: Supply and demand of housemanship positions in terms of number of medical graduates, housemanship recruitment and vacated positions in Malaysia, 2000-2015

"The rationale behind the moratorium is to manage the number of students entering medical programmes locally and to address concerns such as a surplus of houseman (waiting time)."

Director-General of MOHE Datuk Dr Asma Ismail, *The Sun Daily*, 17 March 2016 [7]

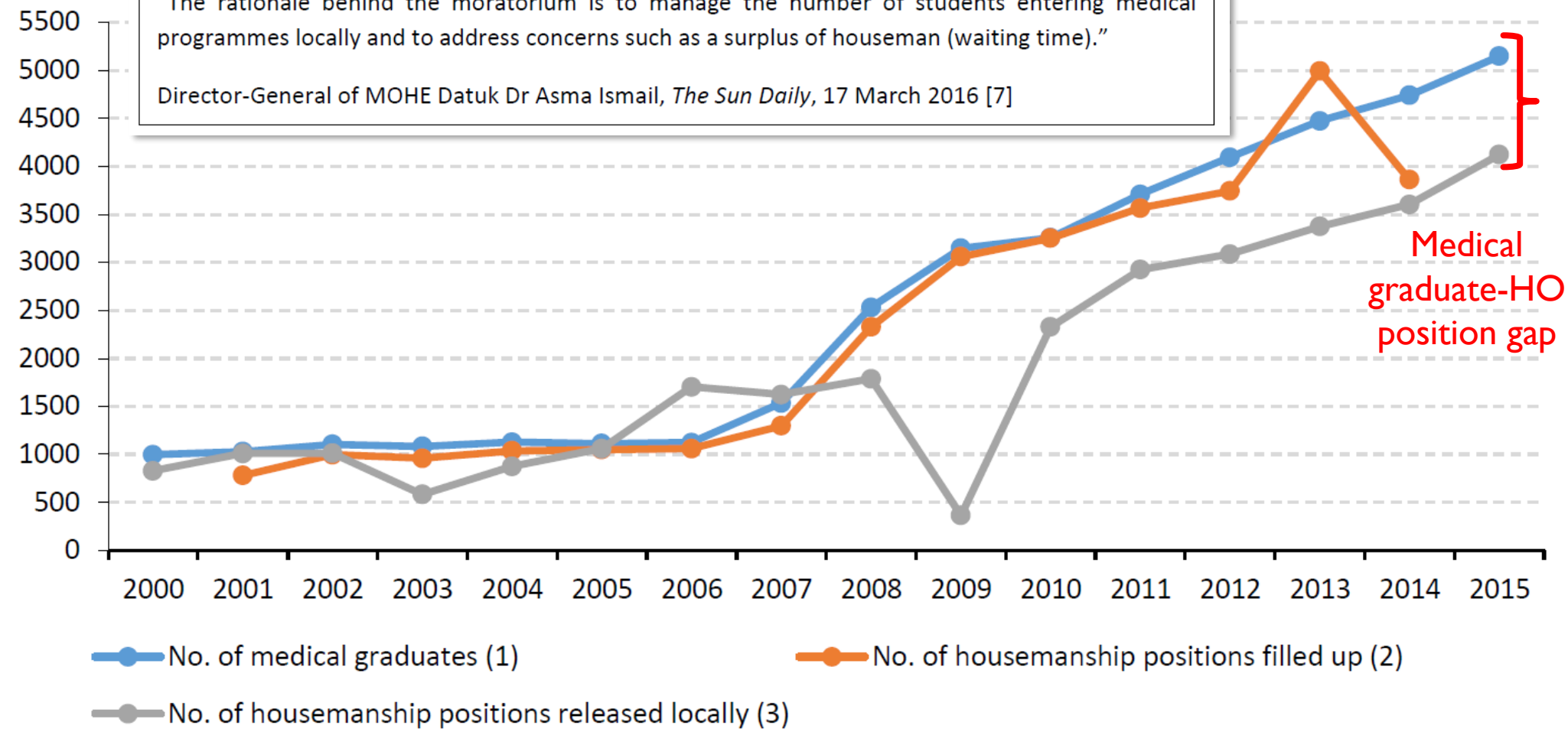
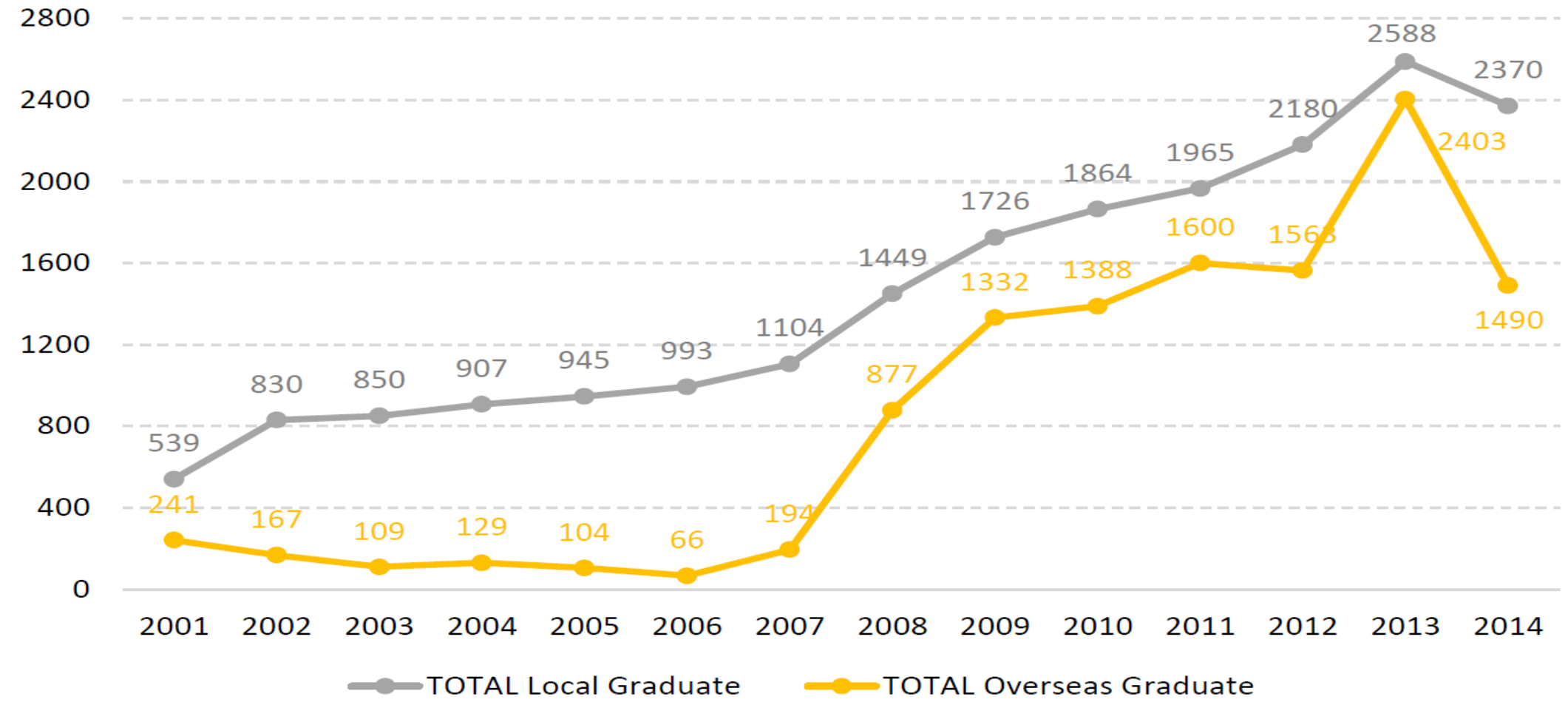
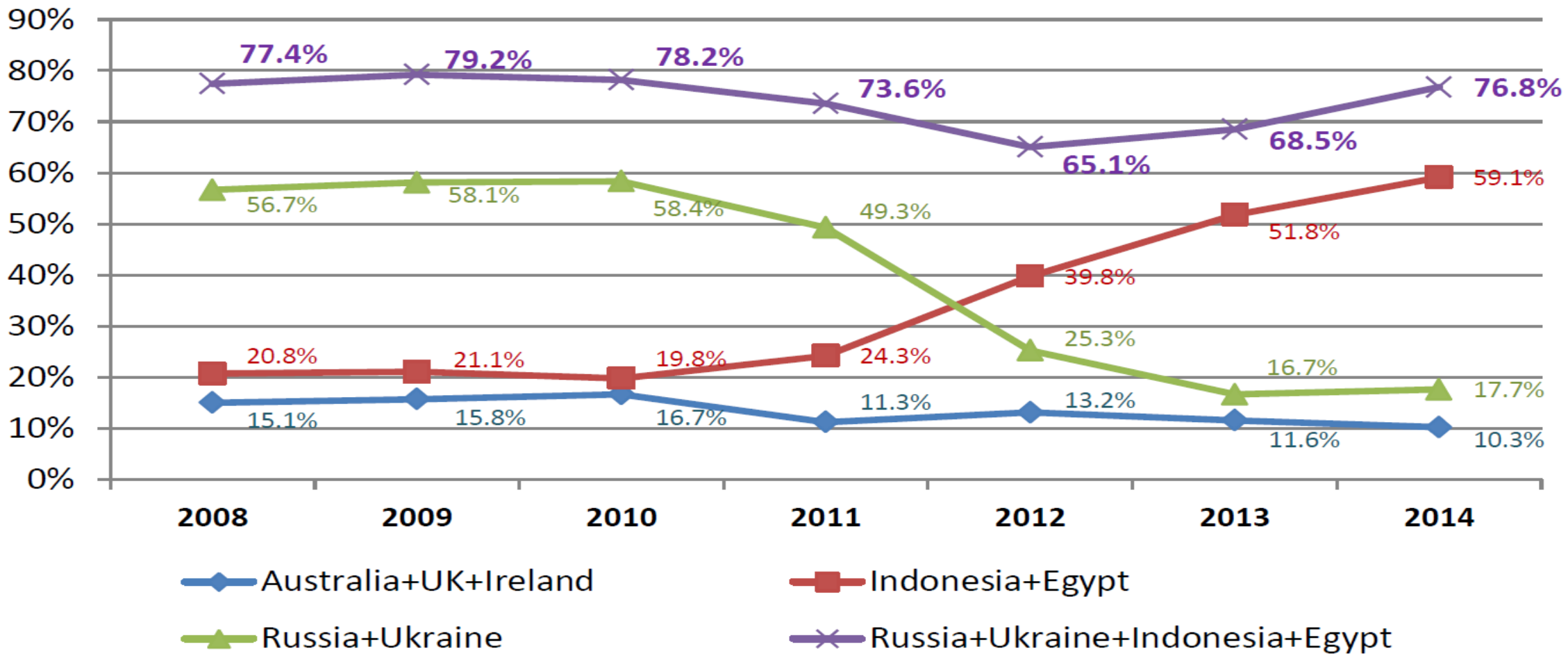


Figure 4: Number of Medical House-Officers entering the workforce by graduate institution origin, 2001-2014



Source: Human Resources Division, Ministry of Health

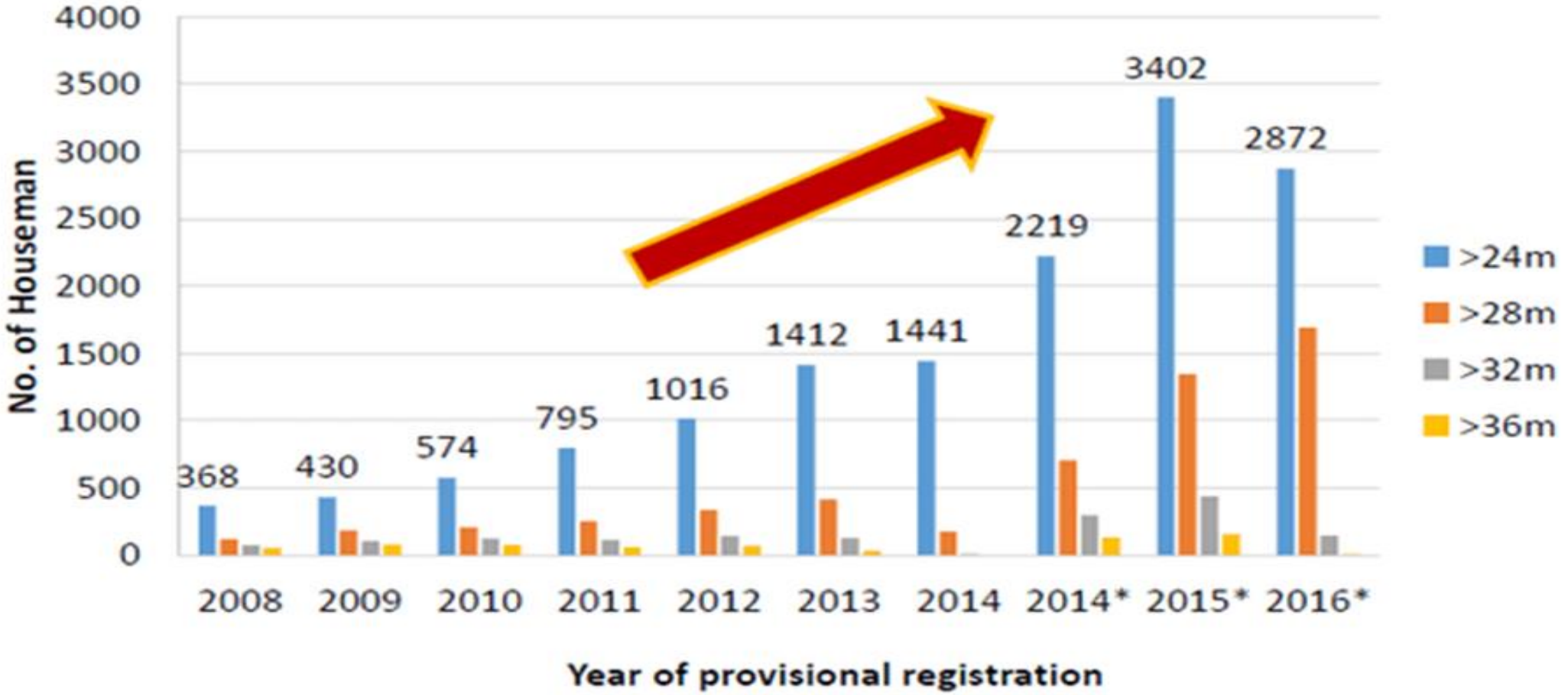
Figure 5: Percentage share of foreign trained medical graduates by country, 2008-2014



Source: Human Resources Division, Ministry of Health and own calculation

"Overdue" Housemanship

Number of housemen in Malaysia who finish their training in more than 24 months. Graphic by Lim Chee Han.



- Increasing number of housemen who could not finish within 24 months

Longer Average & Median Stay as House officer

The average and median of housemanship length in Malaysia. Graphic by Lim Chee Han.

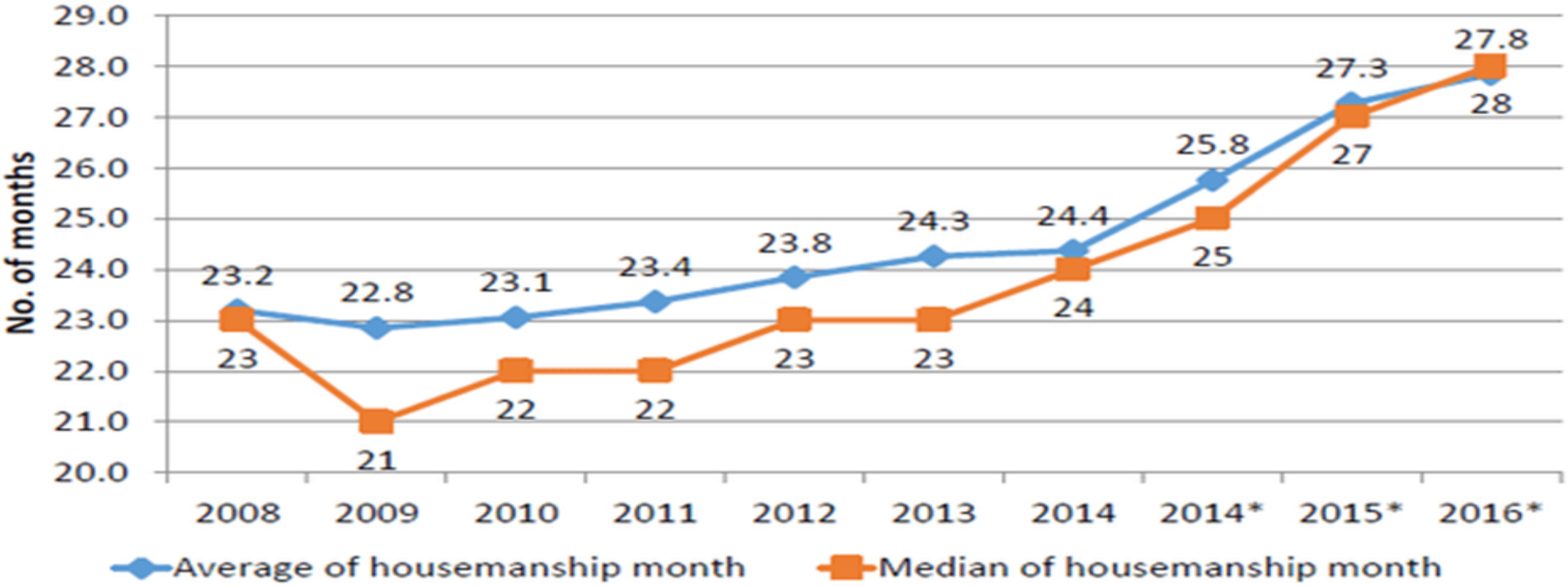


FIGURE 15: NUMBER OF MEDICAL GRADUATES ENTERING TRAINING HOSPITALS FROM 2001 – 2011

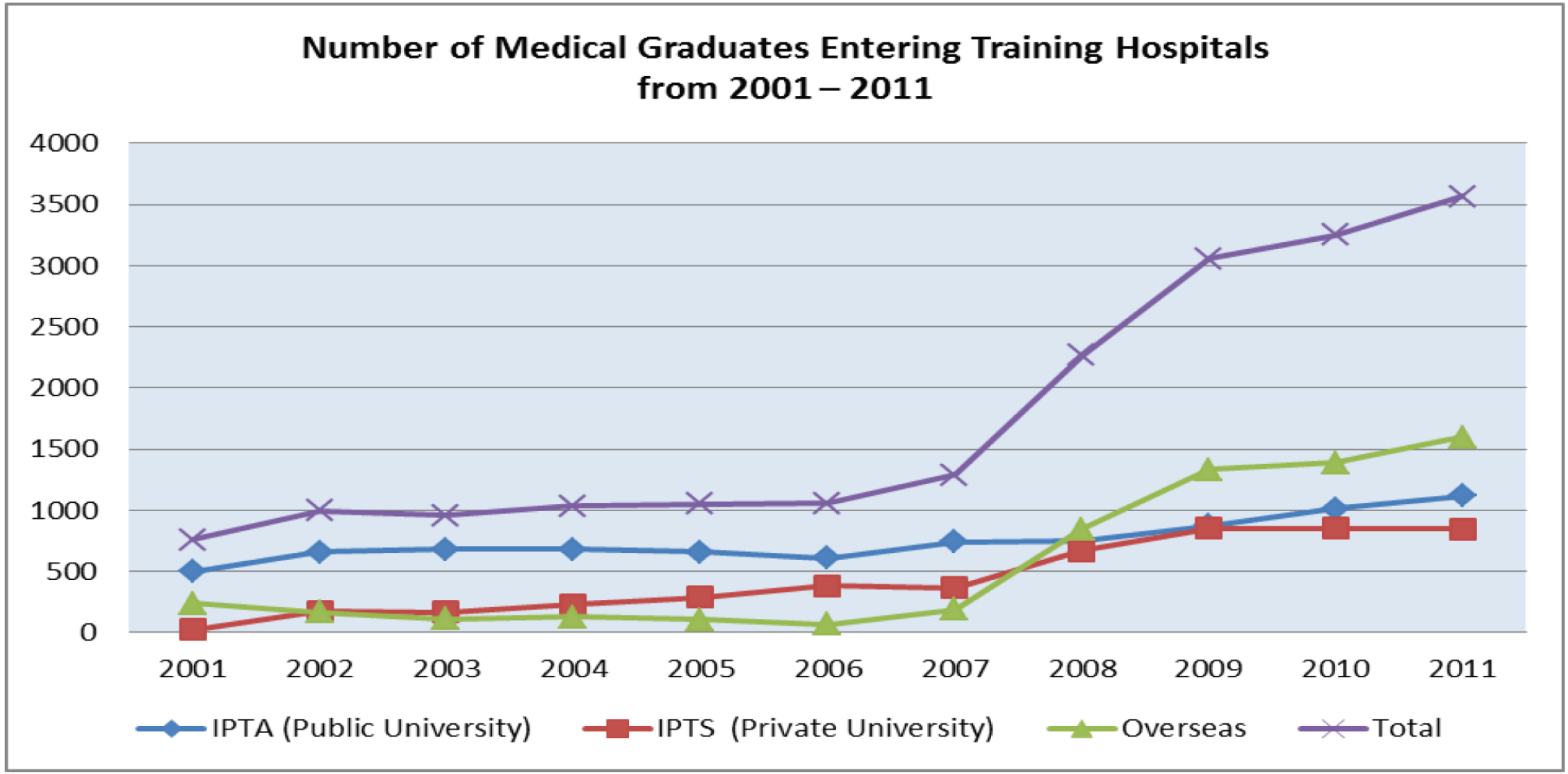


Figure 16: The Total Number of HOs, MOs & Specialists in Malaysia for year 2006 till 2011

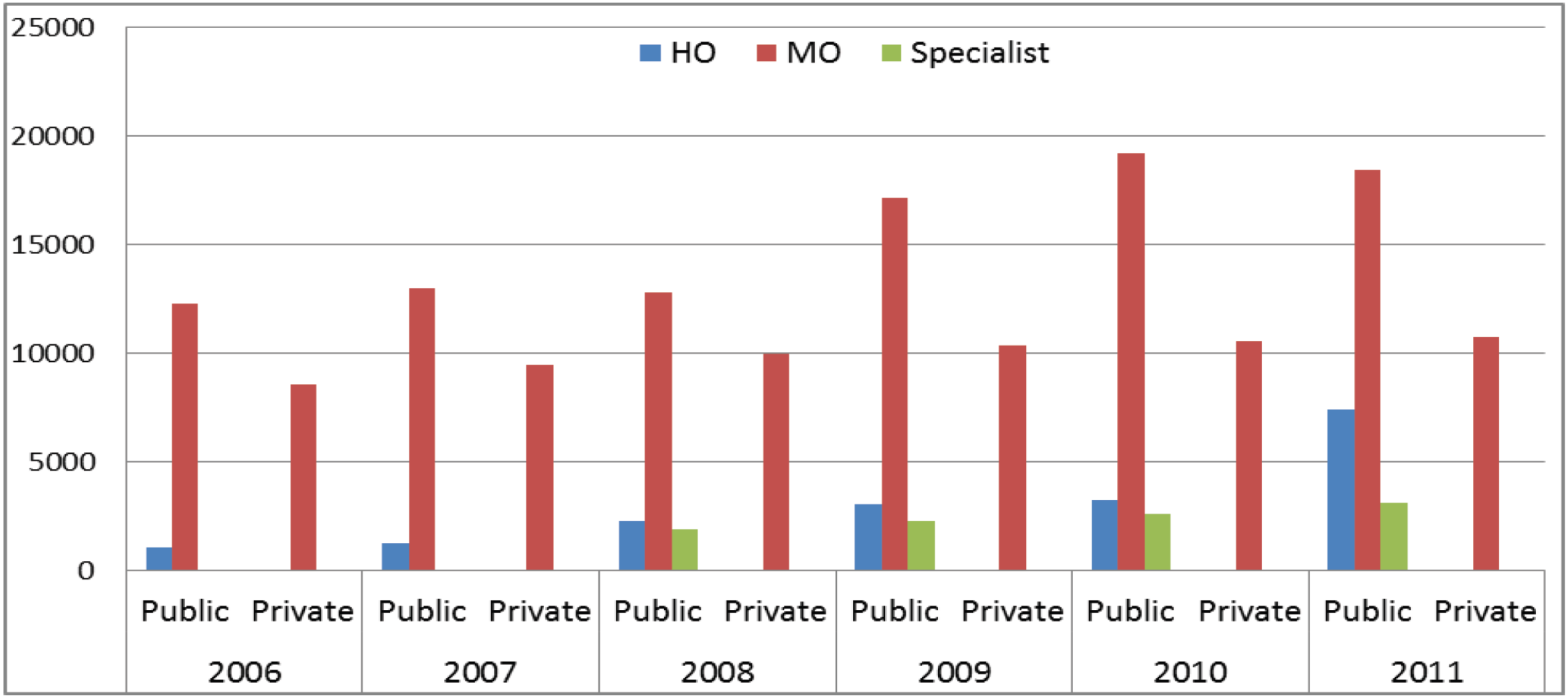


TABLE 23: THE TOTAL NUMBER OF HOS, MOS & SPECIALISTS IN MALAYSIA FOR YEAR 2006 TILL 2011

Type	Designation	2006	2007	2008	2009	2010	2011
Public	HO	1059	1290	2,326	3,058	3,252	7,414
	MO	12276	13008	12777	17134	19177	18431
	Specialist			1,900	2,281	2,608	3,128
Private	MO	8602	9440	10006	10344	10550	10762
	Specialist	no breakdown by year, not possible to plot					

IMPLICATIONS & RECOMMENDATIONS

Five recommendations were made considering the issues identified in this assessment. **Endorsed by SCHOMOS, MMA**

1. The flexi-system is able to improve the number of learning opportunities, though the impact on the quality of training is not known. Hospital managers should maximize and capitalize on the potential afforded for increase in number of learning opportunities and training exposure with the flexi-system and monitoring.

- Distribution of house officers at national level should consider patient load of hospitals as well as other parameters. In England, the Temple review of the effect of European Working Time Directive (EWTD) on medical training concluded that good training and health care could be delivered, if the consultants worked "flexible" hours too.

IMPLICATIONS & RECOMMENDATIONS

2. The challenges posed to the organization from the competency and performance of house officers at the start and during the internship programme are substantial and need to be addressed.

- There are currently an estimated 1900 house officer found to be inadequate, and this is an extra burden to MOH specialists.

3. The minimum SPM requirements for entry into medical school were not adhered to.

- Those who did not possess the minimum SPM qualifications had higher rates of extension, implying that minimum SPM requirements do seem to have an impact on their performance.
- The implementation of this check point for entry into medical school could help alleviate the problem.
- Alternative examinations for entry into medical schools exist and should be addressed in enforcing the minimum requirements for entry.

IMPLICATIONS & RECOMMENDATIONS

4. The use of clocking in cards as a tool for monitoring house officer should be maximized to assist in the monitoring of house officers administratively.

5. House officers graduating from several accredited medical schools were associated with inadequate knowledge, skills and performance.

- This could be a reflection of the school's selection of candidates, the schools' performance in preparing graduates for the Malaysian Healthcare system, the performance of the officers themselves, or a bias of the assessors.
- This mismatch between expectations of Malaysian healthcare system & preparedness of graduates need to be looked into.

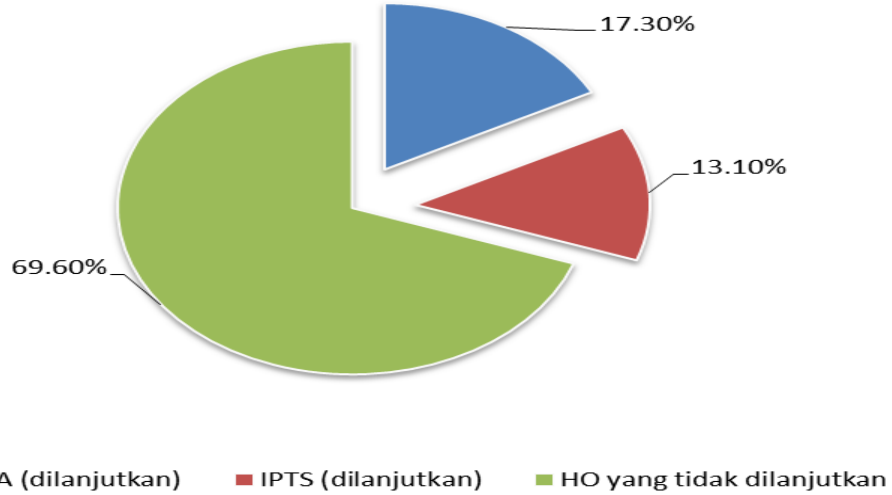
BILANGAN PENGAMAL BERDAFTAR SEMENTARA DAN HO YANG DILANJUTKAN BAGI TEMPOH 2010 - 2013

University	2010			2011			2012			2013		
	Number of HO Registered	Number of HO Extended	% HO Extended	Number of HO Registered	Number of HO Extended	% HO Extended	Number of HO Registered	Number of HO Extended	% HO Extended	Number of HO Registered	Number of HO Extended	% HO Extended
IPTA												
Universiti Malaya (UM)	177	40	22%	188	44	23%	184	43	23%	175	22	12%
Universiti Kebangsaan Malaysia (UKM)	223	54	24%	224	59	26%	250	65	26%	232	34	14%
Universiti Putra Malaysia (UPM)	107	36	33%	124	48	38%	111	34	30%	118	12	10%
Universiti Sains Malaysia (USM)	188	74	39%	178	56	31%	189	47	24%	191	24	12%
Universiti Malaysia Sabah (UMS)	69	15	21%	78	35	44%	71	16	22%	80	4	5%
Universiti Malaysia Sarawak (UNIMAS)	67	24	35%	67	13	19%	84	23	27%	80	8	10%
Universiti Sains Islam Malaysia (USIM)				29	6	20%	37	4	10%	55	3	5%
Universiti Teknologi Mara (UiTM)	90	20	22%	117	55	47%	151	53	35%	184	31	16%
Universiti Islam Antarabangsa Malaysia (UIAM)	107	44	41%	117	40	34%	106	26	24%	95	9	9%
Total	1028	307	29.80%	1122	356	31.70%	1183	311	26.30%	1210	147	12.10%
IPTS												
AIMST University	136	35	25%	112	39	34%	110	31	28%	193	7	3%
CUCMS				144	21	14%	145	23	15%	121	30	24%
International Medical University (IMU)	139	38	27%	121	26	21%	127	33	25%	170	4	2%
Melaka-Manipal Medical College (MMMC)	267	95	35%	235	83	35%	243	61	25%	257	24	9%
Monash University	14	4	28%	19	5	26%	66	4	6%	61	1	1%
Penang Medical College (PMC)	115	37	32%	95	23	24%	97	31	31%	117	17	14%
Rocal College Medicine Perak (RCMP)	43	21	48%	10	15		110	10	9%	104	14	13%
UCSI University	32	3	9%	42	10	23%	40	7	17%	50	2	4%
AUCMS							7			70		
Management Science University (MSU - Shah Alam)				60			108			38		
Total	746	233	31.20%	838	222	26.50%	1053	200	18.90%	1181	99	8.40%
Grand Total	1774	540	30%	1960	578	29%	2236	511	23%	2391	246	10%

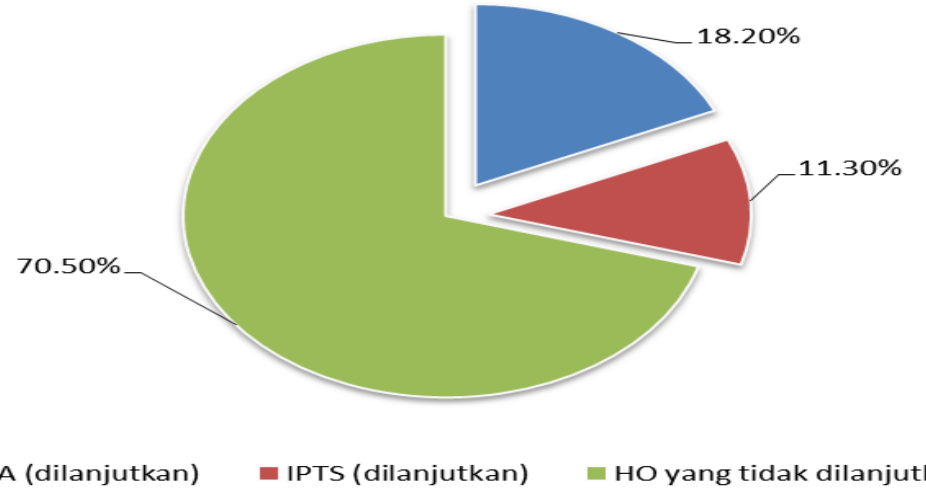
BILANGAN PENGAMAL BERDAFTAR SEMENTARA DAN HO YANG DILANJUTKAN BAGI TEMPOH 2010 - 2013

Country	2012					2013				
		Recognized		Non Recognized			Recognized		Non Recognized	
	Total HO Registered	Number of HO Registered	Number of HO Extended	Number of HO Registered	Number of HO Extended	Total HO Registered	Number of HO Registered	Number of HO Extended	Number of HO Registered	Number of HO Extended
Australia	65	65	21(32%)	0	0	60	60	7(11%)	0	0
Bangladesh	0	0	0	0	0	1	1	0	0	0
Burma	0	0	0	0	0	0	0	0	0	0
Canada	5	5	4(80%)	0	0	2	2	0	0	0
China	13	0	0	13	1(7%)	21	14	0	7	1(4%)
Czech Republic	42	42	0	0	0	49	49	2(4%)	0	0
Egypt	228	228	22(9%)	0	0	399	399	14(3%)	0	0
India	167	167	45(26%)	0	0	220	220	15(6%)	0	0
Indonesia	725	725	229(31%)	0	0	658	653	84(12%)	5	0
Japan	1	1	0	0	0	0	0	0	0	0
New Zealand	16	16	7(44%)	0	0	22	22	5(23%)	0	0
Pakistan	2	2	0	0	0	2	2	0	0	0
Philippines	0	0	0	0	0	0	0	0	0	0
Poland	4	4	3(75%)	0	0	10	10	0	0	0
Romania	0	0	0	0	0	4	0	0	4	0
Russia	413	412	123(30%)	1	1(0.2%)	368	364	41(11%)	4	0
Taiwan	8	6	2(25%)	2	1(12%)	10	7	1(10%)	3	0
Ukraine	20	13	7(9%)	7	2	23	11	13(56%)	12	1(4%)
United Kingdom & Ireland	151	151	53(35%)	0	0	137	137	21(15%)	0	0
United States of America	0	0	0	0	0	1	1	0	0	0
Total	1860	1837	588 (32%)	23	5 (0.3%)	1987	1952	203 (10%)	35	2 (0.1%)

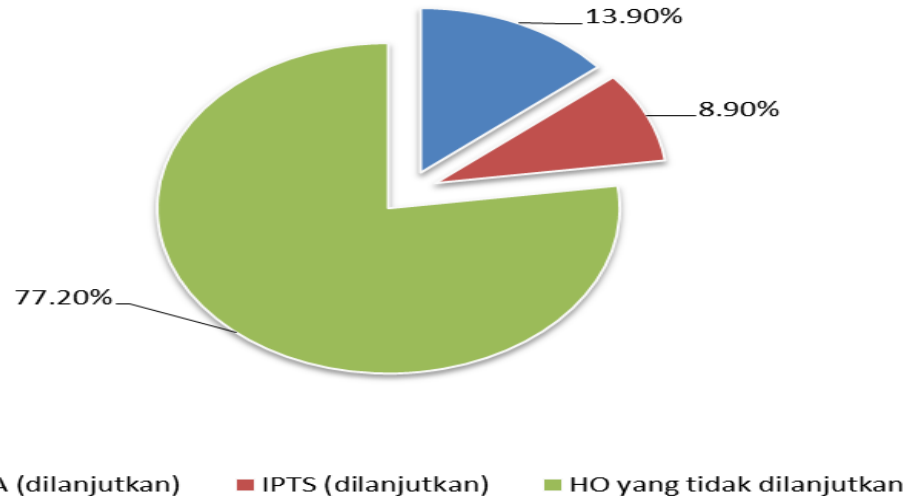
PENGAMAL BERDAFTAR SEMENTARA DAN HO YANG DILANJUTKAN PADA TAHUN 2010



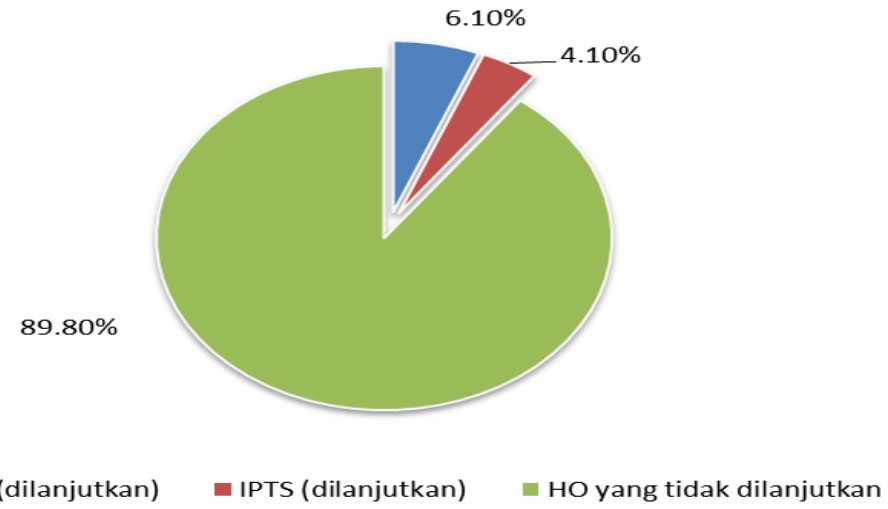
PENGAMAL BERDAFTAR SEMENTARA DAN HO YANG DILANJUTKAN PADA TAHUN 2011



PENGAMAL BERDAFTAR SEMENTARA DAN HO YANG DILANJUTKAN PADA TAHUN 2012



BILANGAN PENGAMAL BERDAFTAR SEMENTARA DAN HO YANG DILANJUTKAN PADA TAHUN 2013



RECENT CLAIMS FROM INDEPENDENT POLICY RESEARCHER MR LIM CHEE HAN

Mentor-Mentee Programmes fall short!

- Lim said the optimum ratio of trainer to mentee was one to five, which would require 423 houseman trainers across 47 housemanship training hospitals per core discipline, or nine specialists per core discipline per hospital to train medical graduates.
- But the number of Ministry of Health (MOH) specialists this year were below 423 for core disciplines like general surgery (285), obstetrics and gynaecology (329), and orthopaedic surgery (292), as well as for elective disciplines like emergency medicine (255), family medicine (318), and psychiatry (210).
- "The number of specialists just simply couldn't make it to meet 400 something specialists. That means you will only expect to see housemen in a very large group, so I think this will dilute the quality of their training," Lim said. *(This is very true!)*

No. Specialists per Discipline area in MOH hospitals
Feb 2017

	Discipline Area (Core/*Elective*)	No. of MOH Specialists
1	Internal Medicine (General)	668
2	General Paediatrics	391
3	General Surgery	248
4	Obsterics and Gynaecology (O&G)	232
5	Orthopaedic Surgery	224
6	*Emergency Medicine*	*139*
7	*Anaesthesiology and Critical Care*	*397*
8	*Family Medicine*	*146*
9	*Psychiatry*	*108*

Source: National Specialist Register

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RECENT CLAIMS FROM INDEPENDENT POLICY RESEARCHER MR LIM CHEE HAN

- He cited a study by MOH's Institute for Health Management, surveying housemen from 2009 to December 2013, that found a third of trainee doctors were extended yearly beyond their two-year training period. About 55 per cent were extended because of incompetence, while 45 per cent were extended because of disciplinary issues. Those who extended due to maternity leave were excluded from the research.
- Lim cited another research by the Institute for Health Management and Institute for Health System Research under MOH that found about 59 per cent of mentoring junior doctors in public hospitals was a spontaneous arrangement, while 67 per cent of mentoring meetings or activities were held on an ad hoc basis. Almost half, or 48 per cent, of mentors had more than five mentees each.
- "So this is also a problem and they don't have enough specialists and too many housemen on board."
- Lim urged MOH to retain more specialists to ensure quality training for medical graduates, and to establish an independent tribunal or ombudsman to address grievances by housemen who claim overwork or mistreatment.
- "Local private and overseas medical education institutions must be more tightly regulated," he added.
- He also urged private hospitals to train housemen, saying: "If our country has inferior doctors in future, this will also bite the private sector."

Figure 8: Number of housemen obtained full registration within 24 months

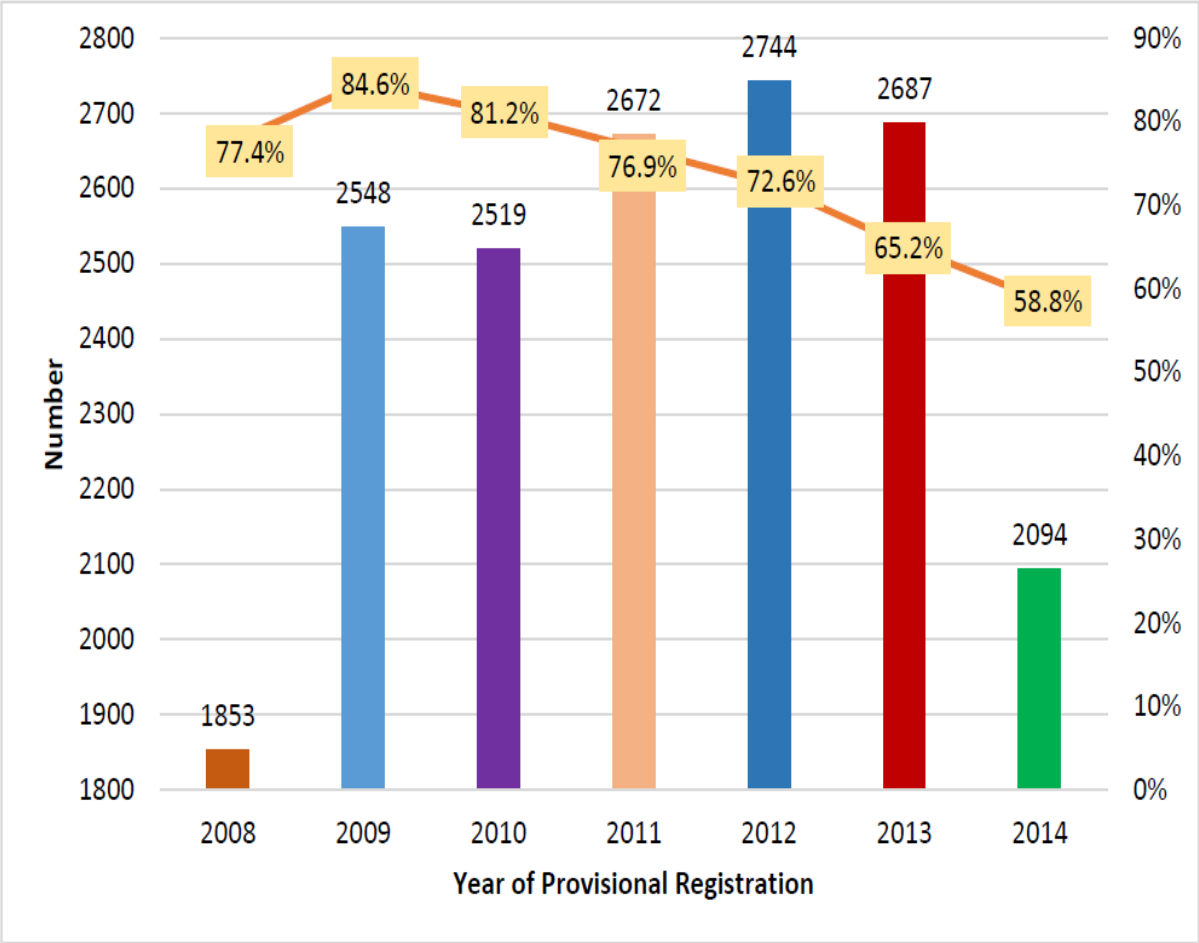


Figure 9: Number of housemen who completed their training programme later than the required 24 months

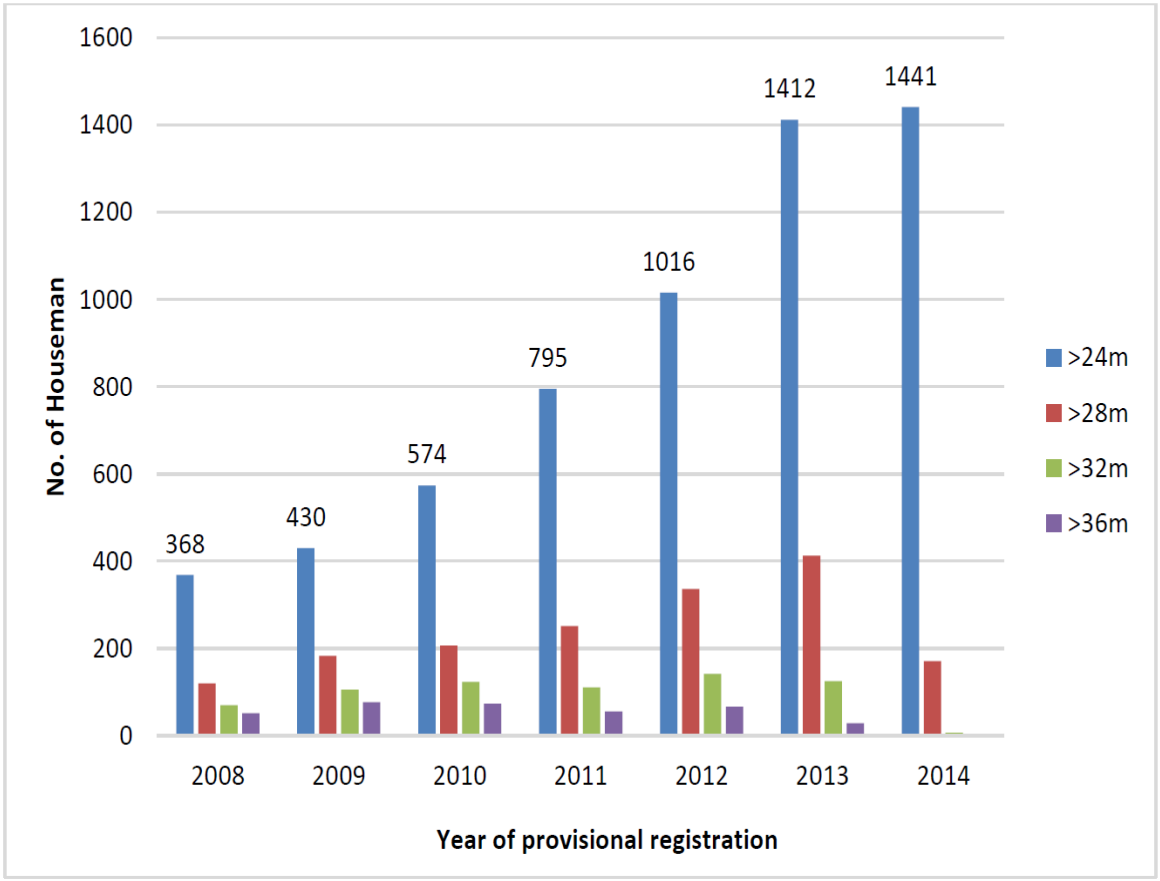


Figure 10: Number of housemen did not or had yet to obtain full registration

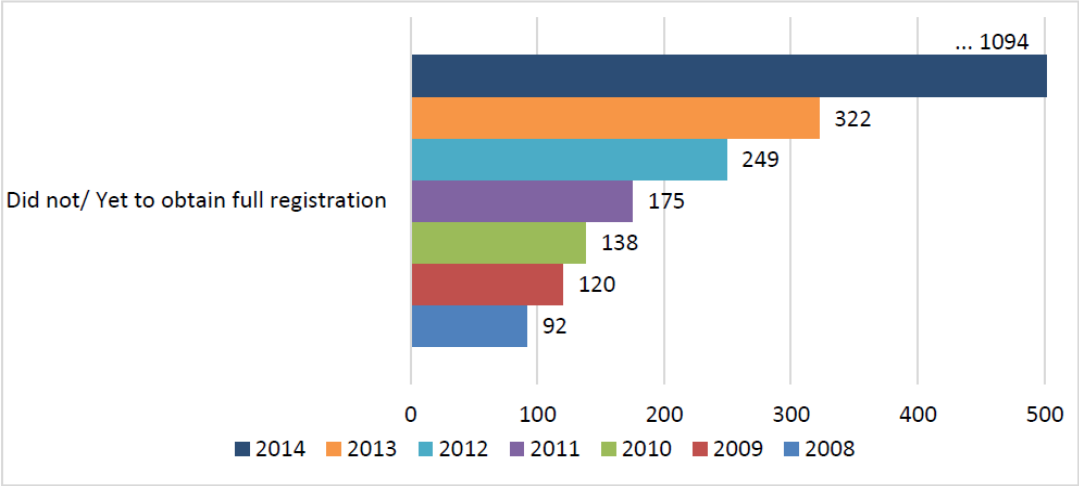
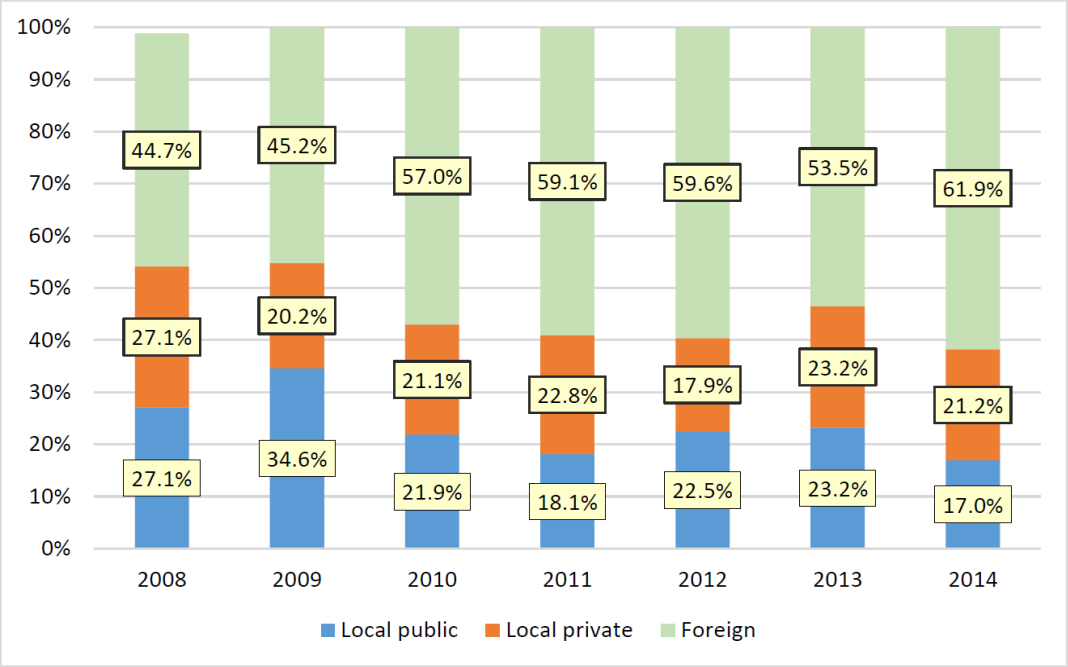


Figure 11: Medical education background of housemen who dropped out or did not obtain full registration



Source: MMC Medical Register, and own calculation

For 2012-2014 batch of housemen, some may have not completed their housemanship therefore have not obtained their full registration licence. The data unfortunately could not separate this group from the dropouts, given the maximum period of housemanship training is 5 years.

Medical Institution(s)	2008	2009	2010	2011	2012*	2013*	2014*
	RUSSIA+UKRAINE+INDONESIA						
R+U+ID	33	35	53	80	95	76	246
	86.8%	*74.5%*	*72.6%*	*79.2%*	*66.4%*	*47.8%*	*44.3%*
	RUSSIA+INDONESIA+INDIA+EGPYT						
R+ID+IN+E	21	22	30	57	109	130	463
	55.3%	*46.8%*	*41.1%*	*56.4%*	*76.2%*	*81.8%*	*83.4%*
	THE REST OF REGIONS						
The REST (non R+U+ID+IN+E)	5	10	19	21	34	28	85
	13.2%	*21.3%*	*26.0%*	*20.8%*	*23.8%*	*17.6%*	*15.3%*
	TOTAL FOREIGN INSTITUTIONS						
Total FOREIGN	38	47	73	101	143	159	555

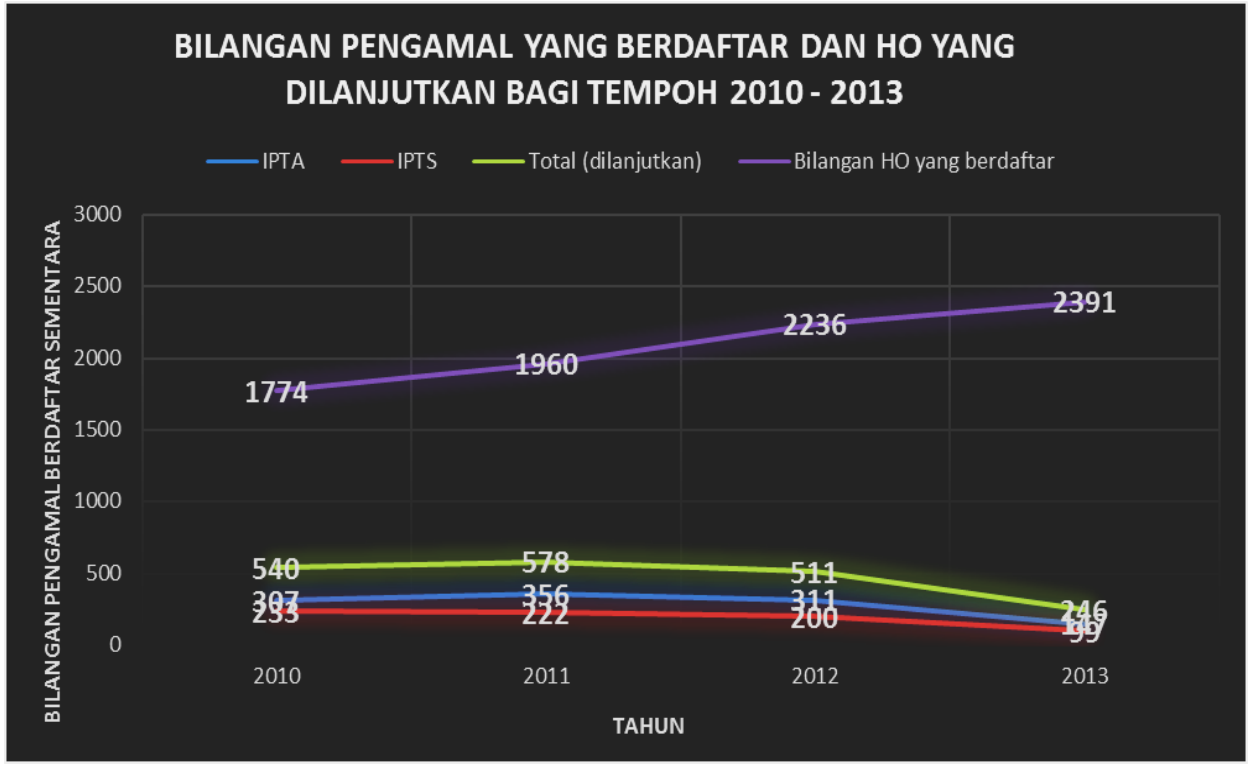
Source: MMC Medical Register, and own calculation

LOCAL MEDICAL GRADUATES: SUMMARY:

COMPARISON OF HO EXTENDED BETWEEN IPTA/IPTS

(DENOMINATOR: TOTAL HO REGISTERED IN THE PARTICULAR YEAR)

			2010	2011	2012	2013
(Total HO Registered :			1774	1960	2236	2391
IPTA	%	Public	17.30	18.20	13.90	6.10
IPTS	%	Private	13.10	11.30	8.90	4.10



- Wrong Perception that only Medical Graduates from certain overseas Medical Colleges produce substandard or poor-quality doctors…
- Even our local public medical schools produce some poor-quality Hos, vs. private medical schools!
- From the tables and charts, both local as well as foreign graduates do not seem to assimilate well in our HO programmes, with many having to be extended
- Perhaps we are just not ready to have such an onslaught of so many HOs to contend with our current infrastructure of HO-training-capable hospitals

So, What's the real problem?

- Difference in culture?
- Medical school quality of teaching?
- Poor student intake demographics?
- Or are our HO programmes too disparate with too little or poor supervision/neglect?
- Or are our consultants and HODs who sign of on these poor graduates, too stringent or possibly too biased?

SYSTEM FAILURE: HOUSEMANSHIP EXTENSION AND TRAINING QUALITY

- Failure of a houseman to meet the standards of basic competency within a specific professional discipline, → extension for the specific posting (maximum 8 months extension/posting).
- Possible reasons why housemen fail to complete their training within the set time period,
  - poor teaching environment
  - poor quality of training.
  - Lack of appropriate teaching resources – human resources and facilities plus robust programme structure
  - Poor working relationship between trainers and housemen.
  - Possible bias and prejudice based on ethnic religious considerations
- Deputy Health Minister Dr Hilmi Yahaya: 25-30% of housemen failed to finish their housemanship in time due to incompetency
- IHM study 2009-2013:
  - 32.9% housemen extended their training at least once/year
  - 54.8% of extensions from incompetence or poor work performance
  - 44.2% due to disciplinary issues
  - Majority 78.7% applied for programme extensions just once throughout 2-year duration
  - 2014 batch had 40% failure to complete 2-year programme

Training quality and mentorship

- The constrained nature of human resources (particularly specialists) as shown in Table 4, is hardly conducive to good quality houseman training.
- As stipulated in the Housemanship Programme Guidebook 2012, the ideal mentor-mentee group, in terms of the ratio of specialist to housemen, should not be more than 1:5.
- However, a survey carried out by MOH in the same year, demonstrated that in 48.4% of all cases, one mentor had to take on 6 mentees and above [1]. There were even incidents of over 20 mentees to 1 mentor [1]!
- Further communication with a number of currently practising housemen has revealed that certain hospitals have delegated supervising responsibilities to senior MOs instead of specialists.
- This practice goes against the guidelines stated in the Housemanship Programme Guidebook 2012. More worryingly, it also suggests that the significant increase in the number of housemen are overstretching human resources in these hospitals.
- The ongoing 'brain drain' of specialists to the private sector and outwards to foreign countries, are also factors that exacerbate shortages in training hospitals.
- If this trend continues, the consequence is that more mentoring duties of specialists will gradually be taken over by less experienced and skilful MOs, which would surely affect the quality of housemanship training.

1. Ang K.T., Roslinah A. and Noriah B., "Mentoring Junior Doctors in Public Sector Hospitals, Malaysia", Institute for Health Management, 2012 (Poster Presentation)

No. Specialists per Discipline area in MOH hospitals
Feb 2017

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Source: National Specialist Register

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Ratio of Specialists to Housemen, assuming increasing number of specialists per core discipline per hospital

Assumed no. of specialist(s) per core discipline per hospital	No. of housemanship training hospitals	Possible no. of housemanship trainers/mentors	No. of housemen allocated per core discipline (Assume equal distribution)	Ratio of Specialist: Housemen
1	44	44	1806	1:41
2	44	88	1806	1:21
3	44	132	1806	1:14
4	44	176	1806	1:10
5	44	220	1806	1:8.2
6	44	264	1806	1:6.8
7	44	308	1806	1:5.9
8	44	352	1806	1:5.1
9	44	396	1806	1:4.6

- **Interesting that we DO NOT have any searchable number of specialists in the country at any one point, just a registry that is searchable by individual ratification.**
- **I couldn't find any MOH document that gives us such important data**
- **Where's our projection, what are our goals, where are we heading?**

Mental health of houseman

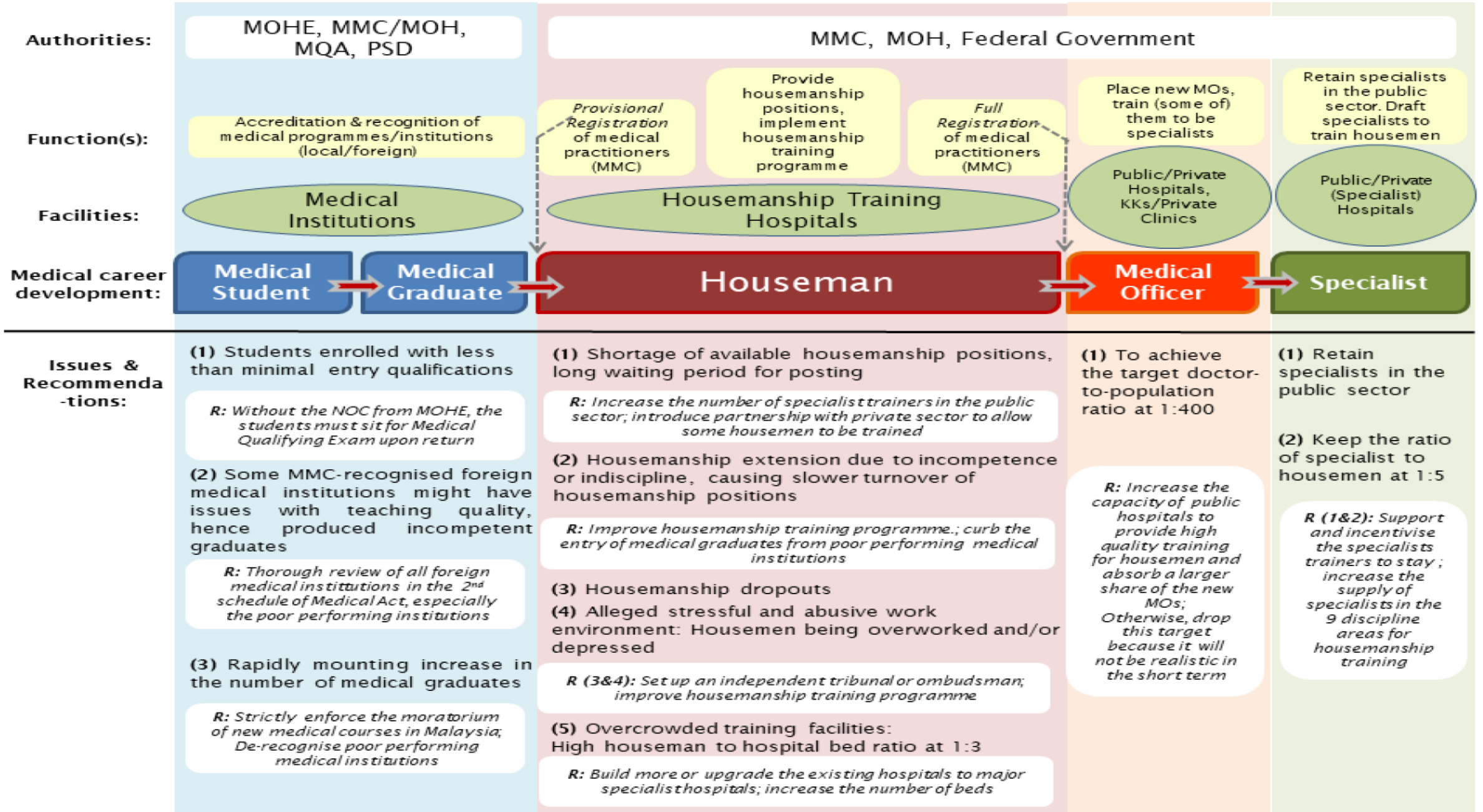
Gopalakrishnan V., et al. Stress perceived by houseman in a hospital in northern Malaysia", *Med J Malaysia*, 71(1), February 2016;
Musa Mohd Nordin, "Grappling with housemen woes", *The Star*, 21 February 2017

- Unhappiness experience or stress faced by housemen is often highlighted in the press.
- The mental health of housemen was scrutinised by a study published in Medical Journal of Malaysia, in 2016.
- Gopalakrishnan Vivekanandan and his co-workers carried out a survey in a hospital in Northern Malaysia.
- Among the top 10 factors cited:
  - 'poor work and social life balance',
  - 'high patient load',
  - 'frequent night duties' and
  - 'work overload'
- Other causes of stress included
  - 'unhealthy working environment',
  - 'lack of appreciation/support from superior',
  - 'lack of skills/knowledge',
  - 'scolded in front of patients' and
  - 'high expectations from family members'.

MOH policies dictate that a houseman shall not work continuously for more than 16 hours per session, and that their working hours should average between 65-75 hours per week.
However, this is relatively long compared to housemen working in the United Kingdom (48 hours per week) and Australia (80 hours per fortnight)
Work stress combined with sleep deprivation and exhaustion might increase the risk of physicians getting involved in motor-vehicle accidents while travelling to and fro from their on-call duties.
The tragic car accident involving a medical officer (MO) named Dr Nurul Huda Ahmad on May 9, 2017 is a sombre example

- Thus, many housemen fall into depression, anxiety or/and low esteem
- After many years of study to obtain med degree, medical graduate is subjected to agonizing wait (potentially months) before he or she is granted a housemanship position in an unfamiliar city. (Is this different elsewhere in the world?)
- Transition into a highly demanding training programme, i.e. unexpected workload and lack of work-life balance, → graduate is unable to cope with, especially if he or she face high family expectations to succeed.
- Plus, housemen often face verbal and emotional abuse coming from superiors and colleagues.
- As reported in a letter sent to a media editorial, some housemen were abusively described as 'the lowest form of life, even lower than the amoeba', harassed, intimidated and humiliated by different levels of superiors

Figure 13: Summary of the issues concerning the housemanship training in Malaysia



Too many doctors, too soon…