

President's Message



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Digital Health Malaysia steering committee

It is as if only a few weeks have passed since I took over as the President of the Malaysian Medical Association. It is now halfway through the term. Six months went by with much excitement and activity. As the President, I have already attended 100 meetings within MMA and with other governmental and non-governmental agencies. The number of speeches and presentations that I have done in the last six months would probably be more than what I have done in the last 40 years since becoming a member of MMA.

Being the President of MMA is almost a full-time job as significant time has to be spent attending to MMA affairs in order to do justice to the office that one has been elected to by the members. It has to be very hands-on, even though there are many other office bearers to attend to various functions of the Association. Having an overview of all the activities of the Association is a requisite to function effectively, for ultimately, the top office-bearer has to be accountable even though decisions are made collectively by the Executive Committee and the Council.

Perhaps now is the time to recollect all that has been done in the last six months.

The term started with great excitement and expectation, albeit with some trepidation as well, for we were entering unchartered waters with a new government in place. What was thought to be unachievable had been achieved when the new government took office under the leadership of the indefatigable nonagenarian, Tun Dr Mahathir Mohamed. There were only a couple of ministers who had the experience of having been in the ministerial posts before and the rest were all neophytes.

We have a new minister of health in Datuk Seri Dr Dzulkefly Ahmad, who is a toxicologist by training, and he had to immediately dive deeply into detoxifying some

of the toxic cultures that were deeply rooted in certain public hospitals.

Instances of bullying and sexual harassment have probably started surfacing because of the new-found freedom to express and expose what had been suppressed during the previous regime. SCHOMOS MMA ably handled many of the issues that were reported to MMA, and this culminated in the adoption of the 'Penang Declaration on Bullying and Harassment' by delegates to the Junior Doctors Network forum at the Annual Conference of the Confederation of Medical Associations of Asia and Oceania (CMAAO) in September 2018.

The CMAAO conference itself was a resounding success. The theme of the Conference, 'Universal Health Coverage' (UHC), was quite apt as the world celebrated the 40th anniversary of Declaration of Alma Ata which had called for 'Health for All' in 1978. WHO organised the Global Health Conference together with UNICEF and the government of Republic of Kazakhstan in October 2018 to commemorate the anniversary. I am proud to say that WHO recognised MMA and sent an invitation to attend the historical event in Astana.

The review of the health care development worldwide in the last 40 years indicated that the original intention of providing health for all had not been achieved and a new initiative was needed. Thus, the adoption of the new Declaration of Astana, which calls for UHC with primary care as the driving force to achieve it without leaving anyone behind. It calls for an emphasis on newer technology to be developed, and to embrace digital methods to make the delivery of health care universal, affordable and with equity and accessibility which are the cornerstone of UHC. Some of these challenges are already being piloted in Malaysia using digital health innovations.

Digital Health Malaysia

Malaysia has now embarked on using new digital technology for healthcare. The original Telemedicine Development Group has now been renamed Digital Health Malaysia (DHM), and I am once again proud to say that MMA has been included as one of the partners in developing digital health technology. Currently, we are involved with the special interest group that is looking at the policy and regulatory framework of the DHM. DHM is a triple helix model of innovation consisting of academia, industry and the government/agency. DHM is co-chaired by the Director General of Health and the Chairman of Malaysian Communications and Multimedia Commission. MMA is classified under the government/agency strand of the triple helix and there are a total of 65 partners/participants in DHM.

At the meeting held on 13 December 2018 at MCMC, all parties present agreed with regards to the way forward and the plan of action to pursue.

Among them are the following:

1. Minister of Health and the government are to spearhead digital innovation in health.
2. To re-strategise direction:
 - i) MOH to lead in inter-ministerial/inter-agency partnerships.
 - ii) Academy of Science Malaysia to lead in the alignment of Science, Technology and Innovation policy (STI Policy).
 - iii) Enhancing the existing ecosystem of triple helix model (regulator/researcher/industry).
 - iv) Collaborative Research in Engineering, Science & Technology (CREST), based at University Sains Malaysia, will act as the catalyst for research and development in digital health innovation.
 - v) DHM will be formalised as the platform for researchers and industry to advance digital health agenda.
3. Activation of Digital Health Innovation Roadmap and Digital Health Innovation Hub.
4. Strengthening of regional and global collaborations.

For those outside of the MOH, it is interesting to note that the MOH together with MCMC and MSD Digital Intelligence (*Pusat Internet* or PI operator for Telekom Malaysia) have started a pilot project in digital health services at 26 *Pusat Internet* in Selangor. PI is a government initiative to provide internet access to the local community for internet and communication technology (ICT) education services, socio-economic empowerment, and bridge the urban-rural digital gap.

KOSPEN is a national level community health programme by MOH which started in 2013, with the intent for people to adopt a healthy lifestyle. Through partnership with PI, health screening and promotional activities are being carried out. This aims to provide efficient NCD prevention and intervention strategies and ecosystem in rural areas using the ICT services available at the PI.

PI has a dedicated health corner with PI personnel who have been trained and certified by KOSPEN for health screening, awareness, and intervention in collaboration with local *Klinik Kesihatan*. There is a personal healthcare dashboard for the community and the data collected is uploaded via PI to enable analytics to be done for planning and targeted intervention initiatives. KOSPEN is envisioned to uplift the B40 group towards better health outcome. There is no reason why this cannot be applied across the whole spectrum of the population. We are indeed living in interesting times though there are many challenges before this programme could be rolled out nationwide.

This is also the time for our members to rethink about the services we are providing, and to be part of the digital revolution that is inevitably taking place. Disruption is the order of the day and we cannot be like the proverbial ostrich. Industry players are already on the march, disrupting the traditional delivery of health care. It is timely that MMA has become part of this initiative to at least give appropriate input into the policy and regulatory matters.

World Bank Report on Malaysia – Economic Monitor

World Bank published the Economic report on Malaysia (December 2018) in which there was also a section on Human Capital – the knowledge, skills and ‘health’ that people accumulate over their lives. This has been a key factor that sustains economic growth. Education, health and social protection play a complementary role in human capital development.

What is worrying in this report is that, according to the matrix used to forecast a country’s human capital, Malaysia scores only 0.62, which means that Malaysian children will only be 62% as productive in adulthood than they could be, compared to optimal outcomes. Child malnutrition and stunted growth have been identified in 20% of children, and are higher than that of other countries at a similar level of income.

Serious measures and interventions need to be taken to improve the status of these children so that they can achieve their full potential in adulthood. The report also calls for better social protection and social insurance programs while lauding the recently introduced Employment Insurance System that has created a window of opportunity to enable the Malaysian workers to mitigate the loss of jobs which can, by itself, lead to poor health. In other words, social protection is another preventive effort to maintain good health.

Long-Standing Unresolved Issues by MOH

While the MOH is taking giant strides in areas like digital health, the regulatory issues pertaining to general practitioners remain unresolved, leading to frustration and despair which have resulted in about 500 clinics closing down. The reasons are many; increasing cost of operating the clinics, shortage of adequately trained staff, strict and sometimes overzealous regulatory oversight by

enforcement officers and a 26-year-old fee schedule are some of them.

Fee Schedule of GPs

There are long-standing issues affecting the general practitioners (GPs) which have not been effectively addressed by the previous government for various reasons. With the new government taking office, there was some expectation that the officers in MOH would expedite these issues.

We had also requested for a meeting with the Minister of Health to highlight these issues and were given the opportunity to directly inform the Hon'ble Minister of these matters. His response was encouraging and he asked MMA to present the justification for the harmonisation of the 7th Fee Schedule for GPs in a town hall meeting with all the stakeholders in line with the new government policy. This was promptly done and well received by all the stakeholders with the exception of one organisation.

The fee schedule has to undergo several other processes, and according to the officers in the MOH, it is currently at the Economic Planning Unit. It is indeed mind boggling that a simple process of harmonising the GP fees according to what had already been agreed upon and approved in 2013, has to undergo such scrutiny at the highest policy-making body now.

One begins to wonder if this is the harbinger of things to come in the future with the new government. The doctors are also beginning to wonder whether it was wise to have allowed legislating professional fees as has been done. The medical profession is the only profession that has been helmed by such legislation which dictates the fees for the professional services by the private medical practitioners. It would have been acceptable if regular reviews are done but unfortunately, this is not the case, as political expediency would prevail and not allow regular reviews; the 7th Fee Schedule is a good example of this.

The last review of the specialist fees was done in 2013, and it is already five years with no indication that it will be reviewed any time soon while in these five years, the cost of practice has escalated led by the sharp increase in the medical liability insurance premiums. In fact, MMA has been told not to raise this matter any time in the near future as it would be embarrassing to the new government. The government must seriously look into this matter as quickly as possible to prevent moral hazards, especially those related to the GPs fees.

FOMEMA

The consultation fee for foreign workers examination was first set 20 years ago, and till today it has not been revised. When the concessionaire agreement was renewed end of 2017 we were told that the revision could be done after the signing of the agreement, but till today this has not happened while the agreement itself is shrouded under the Official Secrets Act (OSA). Why an agreement as this should be under the OSA is mind-boggling.

Several other matters have been addressed by the Private Practitioners Section Chairman and the SCHOMOS Chairman in their respective reports in the last six months.

A Special Night with the Two Tuns

What a night it was! 30 November 2018, will be etched in the history of MMA and in the memory of all who attended the dinner on that "Special Night with the Two Tuns" when our two distinguished members were honoured for their immense contributions to the nation. It was an unprecedented grand finale to close the year that was full of surprises and excitement and some anxiety.

Tun Dr Mahathir Mohamed, the seventh prime minister of Malaysia in his second 'Avatar' was bestowed the inaugural MMA Lifetime Achievement Award while Tun Dr Siti Hasmah, was made an Honorary Member of MMA. The ballroom of Shangri-La Hotel of Kuala Lumpur was filled to the brim and with a heavy heart, we had to turn away many who wanted to attend.

The night was electrifying with anticipation, as this was the first function organised by any medical association that the Prime Minister attended, and everyone wanted to see the famous couple and hear Tun Mahathir speak. He spoke in his usual affable manner, setting aside the draft speech that was prepared for him. As witty as ever with his one-liners, he did not disappoint the audience with his off-the-cuff speech. "I did not want to become a doctor. I wanted to become a lawyer", drew great laughter especially when he gave the reasons. Finally, he reconciled why training in medicine made him become a better politician.

Tun Siti, with her signature grace and charm wowed the crowd when she posed without flinching for the numerous selfies by the members and other guests. The rush to be photographed with the two Tuns after the dinner as they were leaving was a testimony to their immense popularity. Once again I would like to thank the two Tuns for accepting our invitation and gracing the memorable dinner and occasion.

With the closure of the most exciting and eventful year of 2018 let us hope and pray that the new year will bring even greater prosperity and happiness to the people of our beloved nation.

Happy New Year to All Members of MMA!

