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Specialist And Subspecialty Recognition: A Timely Move To Reform The Health Care Ecosystem — MMA

By CodeBlue | 4 December 2025

We do not merely need more doctors, we need better-trained leaders who understand the system, who can balance clinical realities with administrative demands, and who are empowered to deliver safe, people-centred care across every level of our health system.



Malaysian Medical Association president Dr R. Arasu speaks at a doctors' rally in Putrajaya on May 6, 2025, to protest the Domestic Trade and Cost of Living Ministry's (KPDN) jurisdiction over mandatory drug price display under the Price Control and Anti-Profiteering Act 2011 (Act 723). Photo by Sam Tham for CodeBlue.

The Malaysian Medical Association (MMA) welcomes the recent press statement by Health Minister Dzulkefly Ahmad on reforms to the specialist and subspecialty recognition framework under the Malaysian Medical Council (MMC).

This is a timely and much-needed step toward addressing several long-standing legacy issues, many of which the MMA has persistently highlighted in past years.

We acknowledge that these reforms are not simple; they require amendments to existing laws and regulations and coordination across multiple agencies. However, the health minister's strong stance signals a clear and commendable commitment to reforming our health workforce and bringing long-overdue clarity and structure to the system.

In a field as regulated and complex as health care, meaningful transformation requires courage and strategic vision. The MMA believes that the current momentum should not be limited to clinical specialities alone.

Health care today is no longer confined to the bedside
— it is a vast and interconnected ecosystem involving



policy, governance, technology, research, public health, and administration.

It is time we recognise that the effective functioning of this system depends not only on clinical expertise, but also on competent, trained leadership at all levels of administration.

One such area that urgently requires formal attention is medical administration. Malaysia is not short of qualified health care leaders. In fact, all public hospitals in Malaysia are already led by doctors — a model that reflects global best practices.

Studies worldwide have shown that physician-led institutions deliver better health outcomes, higher patient safety standards, and improved system efficiency.

However, unlike many of our peer nations, Malaysia has yet to establish a formal specialist training and recognition pathway for doctors serving in these critical administrative roles.

Globally, countries such as Australia, Hong Kong, Sri Lanka, and the United Kingdom have long recognised Medical Administration as a formal medical specialty. Through institutions like the Royal Australasian College of Medical Administrators (RACMA), the Hong Kong College of Medical Administrators (HKCMA), and the Faculty of Medical Leadership and Management (FMLM), these countries offer structured training in areas such as health system governance, finance, law, ethics, health informatics, clinical research and strategic leadership.

These frameworks ensure that doctors in leadership positions are not only experienced clinicians, but also competent, accredited administrators — fully prepared to lead large institutions, manage public health crises, and contribute to national health planning.

In Malaysia, we have close to 270 doctors who have completed a Master's in Hospital Administration. Many of them are already serving in strategic roles as State Health Directors, Hospital Directors, Deputy Directors, and senior officers at both state and national levels.

Despite the critical responsibilities they carry, their roles remain under-recognised within the current system, with no defined specialist status or career development pathway. This creates a gap — not in

capability, but in system recognition, standardisation, and long-term succession planning.

To strengthen and professionalise this segment of our health workforce, the MMA proposes the establishment of a national Task Force to develop a specialist pathway in Medical Administration. The aim is not to change who leads, but to enhance how they are trained, supported, and recognised.

This initiative should include a national needs assessment, a review of international best practices, the development of a Malaysian-specific curriculum, and the design of accreditation and governance structures.

The process must be consultative and inclusive of all relevant stakeholders — including the Ministry of Health (MOH), MMA, MMC, Ministry of Higher Education, Public Service Department, and senior administrators currently in service.

This proposal aligns strongly with the MOH's own Strategic Health Workforce Planning (SEG 2024) report, the Health White Paper 2023, and the broader goals of the Madani Health Transformation agenda.

By investing in the formal recognition of Medical Administration, Malaysia can elevate its health care governance, improve institutional accountability, and foster the next generation of health care leaders.

The MMA reaffirms our commitment to supporting the MOH in this endeavour. As we strengthen our clinical disciplines, let us also ensure that our health system leadership is equipped, competent, and formally recognised.

We do not merely need more doctors, we need bettertrained leaders. Leaders who understand the system, who can balance clinical realities with administrative demands, and who are empowered to deliver safe, people-centred care across every level of our health system.

Health care today demands not only healing hands, but visionary leadership. MMA is ready to be a partner in this next phase and timely reform on strengthening health leadership beyond clinical excellence with expanding specialist recognition to medical administrators.

• This statement was issued by MMA president Dr R. Arasu.