

# **MINUTES OF THE PRIVATE HEALTHCARE PRODUCTIVITY NEXUS (PHPN)**

## **WORKFORCE PERFORMANCE – SUPPLY AND DEMAND STUDY**

**Date** : **14 September 2020 (Thursday)**  
**Time** : **2.30 – 3.45pm**  
**Platform** : **Microsoft Teams**  
**Chairman** : **YBhg. Dato' Dr. Jacob Thomas – Champion PHPN**  
**Attendance** : **Appendix A**

### **AGENDA:**

The purpose of this meeting is for the PHPN Workforce Performance Team to understand the scope of MOH's Healthcare Supply & Demand Study and to identify areas in which the Private Healthcare Productivity Nexus (PHPN) can assist to ensure that it also serves the objectives and timelines set by PHPN.

#### **1.0 OPENING REMARKS**

- 1.1 YBhg. Dato' Dr. Jacob Thomas, Champion of PHPN, welcomed everyone present for attending this online meeting on Workforce Performance – Supply & Demand Study especially representatives from the Ministry of Health (MOH) despite the short notice.
- 1.2 The Chairman also introduced the PHPN team to MOH namely, En. Anuar Anis who is the co-leader for "Workforce and Performance" workstream, while Ms. Christy from IMU is the leader but is not present today, Dr. Kevin (MMA) who is assisting the workforce team and is the connection and working with National Post Grad Pathway with Prof. Adibah. He reiterated that this research is critical in determining the plan for the next 10 to 20 years particularly in terms of specialist training.

#### **2.0 OVERVIEW OF THE STUDY**

The meeting noted the presentation by Encik Safarwan Suhami from MPC regarding details of the study as follows:

- 2.1 The Supply and Demand Study was initiated to help PHPN in its initiative to accelerate the increase of specialist doctors and skilled nurses in high demand areas.

The paper for this study had been tabled three (3) times to the **Lembaga Perkuliahinan (Lecture Institution)** which was chaired by the Timbalan Ketua Setiausaha (TKSU) of the Ministry of International Trade and Industry (MITI).

2.2 Based on the last meeting held with the TKSU of MITI and **Mr. Surendran (from where?)** MPC was instructed to call off the study because the Ministry of Health (MOH) was in the process of embarking on a similar study. In this context, MPC had a short meeting with the PHPN committee the **previous week ?(should specify the date)** and from the outcome, it was agreed to have further discussion with MOH and EPU to understand the Terms of Reference (TOR) of the MOH study. Dr. Siti Noraida (MOH) was given a copy of the PHPN's TOR to enable her to identify similarities in the scope of both the studies.

### **3.0 PHPN'S VIEW OF THE STUDY**

Dato' Dr. Jacob Thomas gave an insight on the issues identified which had led to the study:

3.1 Among the pertinent issues was the shortage of specialists in the private sector which was mitigated by conveniently sourcing for specialists from the public sector, indicating this was not appropriate.

3.2 With the public sector seeing about 70% of the total patients, it was time the private sector trained their own specialists. Apparently, this has received support as PHPN aims to know that if there is a shortage, which speciality is needed in both the private and public sectors and for the country as a whole.

3.3 Prof. Adiba, Head of Training and Curriculum, Malaysian Qualifications Agency (MQA), was in agreement with this move.

3.4 Dato' Dr. Jacob suggested for the study to include both the public and private sector and PHPN requested to know if the scope is only for the public sector or includes both the public and private sector.

3.5 In view that the Nexus reports to the EPU (Economic Planning Unit) and the MITI minister, Dato' Seri Mohamed Azmin Ali, PHPN requested to know the process involved and will support it as long as it is within the timeline set by PHPN. Since the inputs given to PHPN was not clear, PHPN wants to understand the MOH study to ensure it has what is needed and that there are no loopholes.

3.7 En. Anuar Anis (TE Healthcare Advisory Sdn. Bhd.) had highlighted that the objective of study is to share the results with the industry within the set timeframe so that

sufficient specialists can be trained to achieve the desired ratio. In this context, timeline is critical and the target is to have the report ready in eight to nine months to ensure that appropriate action will be taken.

- 3.8 Dr. Wan Shafie (MOH) informed the meeting that when MOH embarked on the Healthcare Demand Study, they were told that the Nexus' scope of work was only on developing a software for the private sector to register hospitals being built.
- 3.9 The Chairman then explained the three (3) workstreams under PHPN namely: Workforce and Performance that will ensure availability and training of specialists and nurses of which Prof. Adiba is involved; Technology and Innovation that will work on sharing of technology between public and private sector; and Regulatory which aims to streamline the process of licensing of hospitals. He cited the four (4) books that had already been developed with CKAPS which received lot of attention as it could cut down red tape when setting up new hospitals and even planning for renovations.
- 3.10 Dato' Dr. Jacob reiterated that PHPN wants to be enlightened on the TOR of the MOH study to see if there is any relationship between both the TORs. Hence, this meeting is important as there may still be studies going on that the team needs to be aware of and if there are, he suggested to work together to make the scope of the MOH's TOR meet the scope and timeline set by PHPN.
- 3.11 He also added that PHPN is just a vehicle to push this objective and ensure that it is moving fast whether it is done by MPC or PHPN since this issue has long been overdue.
- 3.12 As an example, Dr. Noraidea explained that for MOH to come out with a masterplan for the overall supply and demand, it is looking into digitalization as a system requirement to find out ways on how the facilities can be incorporated into the system through registration.
- 3.13 In response to this, Dato' Dr. Jacob added that PHPN included Digitalization under the Technology and Innovation Workstream to cut down the turnaround time for setting up hospitals from the normal 800 days. PHPN even looked at what other countries were doing and since there was no data on the public sector, PHPN scoped it to the private hospitals only. By working with the authorities, the frequency of the license renewal had been reduced from every 2 years to 5 years.
- 3.14 In view of this, Dato' Dr. Jacob agreed to **share the Technology and Innovation study with Dr. Noraidea** where the report showed that only 18% of those going to public sector hospitals are not willing to go to private hospitals while the rest are willing as long as the service is fast and of reasonable cost. However, he noted that

it is usually not easy to get access to MOH, citing for example that data provided by private hospitals to MOH are not shared as information to the hospitals.

**Action: PHPN**

- 3.15 Dr. Wan Shafie highlighted that the scope of the MOH study has not been finalized. However, Dato' Dr. Jacob explained that the reason why PHPN wants to know and understand the scope is for PHPN not to have another study if the scope already includes the private sector. Moreover, there is a sense of urgency as the findings need to be reported to the EPU and PM. It would therefore be advantageous if the study is done together or the other option would be to have the study in phases to at least accomplish something by the set timeline.
- 3.16 En. Anuar Anis on the other hand said that the objective of the PHPN study is to see which specialty needs to be increased and also to identify where the shortage is. The MOH study he feels is appreciated for its detail and comprehensiveness but the objective may be on proposing policies and guidelines as to who should be training, how fast to register a specialist etc. Nevertheless, both studies should complement each other instead of overlapping. It was suggested that **MOH share the objectives of the study with PHPN** so that PHPN can be the precursor that MOH can use.

**Action: PHPN/MOH**

- 3.17 Dr. Noraida noted the difference in timelines and scope of the study. She also explained that human resource such as the service providers e.g. specialists, housemen, nurses, large equipment are all being considered and finalized by MOH by looking at the needs and diseases as well as how the human resources can match the projected requirements and identify the source of specialists e.g. medical officers. As for the demand study, it aims to determine how to balance the needs of the public and the private sectors.
- 3.18 In response, En. Anuar Anis agreed that the MOH study is far more detailed, whereas PHPN will make assumptions based on the current disease profiles for the ratio to be achieved. It will also understand the numbers in terms of number of those retiring or group specialists required. The study is more on the number of specialists required as compared to the expansions being planned citing for example the decreasing number of specialists doing Obstetrics and Gynaecology.

3.19 Dr. Wan Shafie informed the meeting that MOH targets to complete the TOR by October or November this year and for the study to start next year but when the study will end depends on the scope in terms of the needs of the country, and state level services among others. The TOR still needs to be refined.

3.20 Requesting further elaboration, Dr. Noraida asked if the methodology for the system digitalization included GP and specialists. Dato' Dr. Jacob affirmed this and explained that even Dubai and Abu Dhabi want to implement the same system. He shared that the Secretary General of Malaysia Medical Association had 1800 clinics involved in the platform sharing and working in parallel with CKAPS digitalization to license GPs. If implemented, private hospitals and GPs will also be included. He also mentioned that Prof. Adibah and the team also want universities to be part of it.

3.21 Cik Syafina suggested that since MPC is now working to award the project which will start this year, it is hoped that the MOH study will complement the PHPN study. She also suggested that since digitalization is not carried out by the Workforce and Performance team, it can be discussed with the Technology and Innovation team.

3.22 Pertaining to those involved in the MOH study, Dr. Kevin (SCHOMOS MMA) explained that the study was supposed to be in 2 parts: private contractor for the private sector side, the University Hospital and the Ministry of Defence; KKM is embarking on a study of the workforce required for the projection of the number of specialists and nurses under Bahagian Perancangan Planning Section. Since KKM was aware of the PHPN study it felt that the TORs should be harmonised, the aim of which is a joint study that will result in a projection for the next 10-20 years.

3.21 The chairman agreed that a representative from MOH should join the PHPN to provide a platform for more inputs. He also shared that the PHPN study has the support of APHM with En. Anuar as an active board member, Dr. T. Mahadevan, CEO of APHM office and leader of regulatory reform and Dr. Kevin from SCHOMOS.

3.22 Dr. Kevin enquired if it would be more prudent to start the PHPN study which could be considered as the baseline and be used by MOH or part of the MOH study since PHPN is about to appoint the consultant while KKM's study is still in the preliminary stage. To this Dato' Dr. Jacob shared that PHPN – Regulatory workstream is also carrying out its initiatives in stages – for example, digitalization as an example of overcoming the hurdles involving MOH that hospitals face. He also gave examples of how public and private sector work together for MyHDW where 200 private hospitals took part and its objectives explained namely, to determine the

diseases which are more prevalent so that hospitals can use the info when planning additional services. He underscored that PHPN has no other agenda but to make healthcare reachable and for private and public sectors to work closely.

3.23 **Dr. Wan Shafie indicated that MOH cannot commit on anything just yet. However, once MOH comes up with the TOR, it will share the results with PHPN.** MOH cannot commit if the study will begin this year or the next.

3.24 **Dato' Dr. Jacob asked if PHPN can request to have a look at it before it is finalized to find out if the scope includes that of PHPN's study and that if the study will take too long, consider making it in phases. He informed them to also include PHPN in all their plans and that they can contact Syafina and Safarwan if they think they need to liaise with or when arranging meetings with the PHPN -Workforce team of Ms. Christy and En. Anuar.**

3.25 Dr. Afidah (CKAPS) added that the Workforce arm is going with the study but digitalization which is under regulation is not actually a study.

#### **4.0 CLOSING REMARKS**

4.1 Dato' Dr. Jacob requested for MOH to ask questions in terms of what PHPN is doing. For clarity purposes, he also hopes that MOH can also tell PHPN what it is doing. **Dato' Jacob reiterated again that PHPN wants to see the TOR so that PHPN can still add if found lacking in scope.** He said that PHPN would gladly engage with MOH on the issue and suggested that MOH contact PHPN for any clarification.

#### **Action MOH**

4.2 As a final message, En. Anuar not wating to duplicate on both parts, wants to maximize the efforts from both sides and to complement each other's work.

4.3 In addition **Dr. Noraida said that she will discuss further with Dr Nordin and will contact Dr. Kevin for any development.**

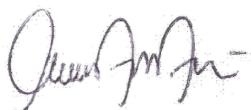
#### **For Information**

The meeting adjourned at 3.45pm.

**Attendees:**

No.	Name	Designation & Organization
1.	YBhg. Dato' Dr. Jacob Thomas	Group Medical Advisor Ramsay Sime Darby Healthcare
2.	En. Anuar Anis	Naib Pengerusi TE Healthcare Advisory Sdn. Bhd. c/o Cardiac Vascular Sentral (Kuala Lumpur) Sdn. Bhd.
3.	Dr. Kevin	Pengerusi SCHOMOS MMA
4.	Dr. Wan Shafie	Ministry of Health (MOH)
5.	Dr. Noraida	Ministry of Health (MOH)
6.	Dr. Afidah Ali	CKAPS, Ministry of Health
7.	Ms. Nur Syafina Anuar	Malaysia Productivity Corporation (MPC)
8.	En. Safarwan Mohd. Suhaimi	Malaysia Productivity Corporation (MPC)

Disahkan oleh:



Nur Syafina Anuar  
Pengurus  
Productivity Growth  
Productivity & Competitiveness Development (PCD)