

ANNUAL REPORT





ANNUAL REPORT 2024



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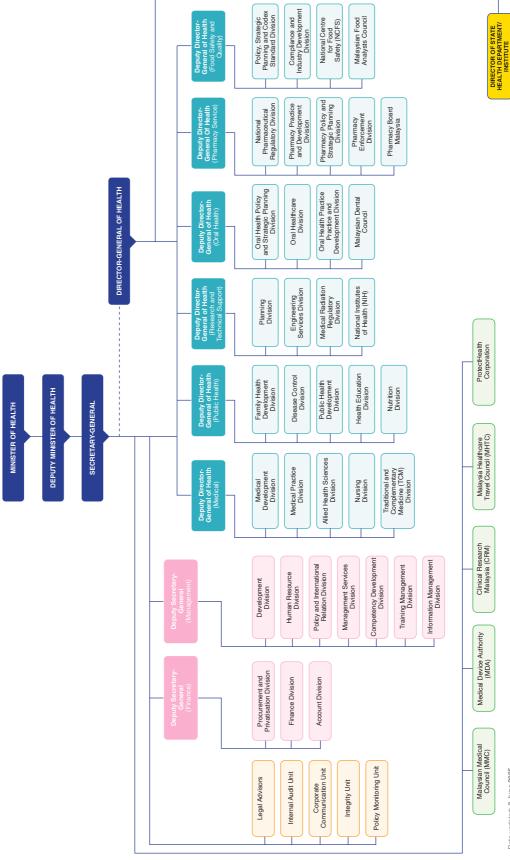
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ORGANISATION CHART MINISTRY OF HEALTH MALAYSIA



Date updated: 3 June 2025 Please refer to the official MOH website for the latest organisation chart

VISION

A nation working together for better health

MISSION

The mission of the Ministry of Health is to lead and work in partnership:

To facilitate and support the people to:

- o fully attain their potential in health.
- o appreciate health as a valuable asset.
- o take individual responsibility and positive action for their health.

To ensure a high quality health system that is:

- o customer centre
- o equitable
- o affordable
- o efficient
- o technologically appropriate
- o environmentally adaptable
- o innovative

With emphasis on:

- o professionalism, caring and teamwork value
- respect for human dignity
- o community participation

CHAPTER 1 HEALTH STATUS

INTRODUCTION

Malaysians today are generally healthier and more capable of being productive. The overall level of health achieved is one of the key indicators of a nation's success. Good health enables Malaysians to lead better and meaningful lives. In addition, a high level of health contributes to increased prosperity and overall social stability.

POPULATION STRUCTURE

The population of Malaysia in 2024 was estimated at 34.1 million with an annual population growth rate of 1.93%. The total population in 2024 showed an increase of 0.7 million as compared to 33.4 million recorded in 2023. The geographical distribution of population showed that Selangor has the highest population at 7.4 million, while Federal Territory (FT) Labuan recorded the lowest population at 0.1 million, as shown in **Table 1.1**. Sabah recorded the highest annual population growth rate of 3.96%, while Sarawak recorded the lowest annual growth rate of 0.61% as shown in **Figure 1.1**.

Table 1.1 Total Population by State in Malaysia 2023-2024

State	Population ('000)			
	2023	2024		
Johor	4,107.2	4,184.4		
Kedah	2,189.3	2,217.1		
Kelantan	1,859.8	1,887.9		
Melaka	1,028.3	1,046.7		
Negeri Sembilan	1,224.9	1,239.5		
Pahang	1,643.2	1,667.7		
Pulau Pinang	1,772.6	1,800.5		
Perak	2,541.2	2,569.4		
Perlis	293.1	296.8		
Selangor	7,209.7	7,362.7		
Terengganu	1,210.0	1,231.5		
Sabah	3,596.7	3,742.0		
Sarawak	2,502.3	2,517.5		
FT Kuala Lumpur	2,005.7	2,067.5		
FT Labuan	99.0	100.8		
FT Putrajaya	118.8	120.3		
MALAYSIA	33,401.8	34,052.1		

Notes:

Source: Current Population Estimates, Malaysia 2025, Department of Statistics Malaysia

Current mid-year population estimates 2023 and 2024 are based on Population and Housing Census Malaysia 2020 (Census 2020).

^{2.} The added total may differ due to rounding.

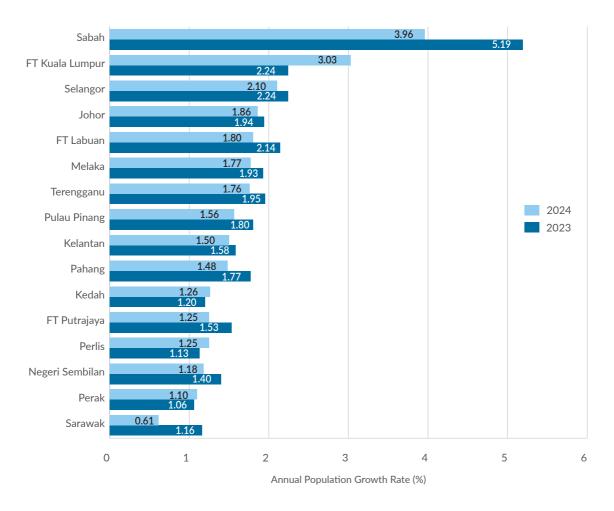


Figure 1.1 Annual Population Growth Rate by State in Malaysia 2023-2024

Notes:

- 1. Current mid-year population estimates 2023 and 2024 are based on Population and Housing Census Malaysia 2020 (Census 2020).
- 2. The added total may differ due to rounding.

Source: Current Population Estimates, Malaysia 2025, Department of Statistics Malaysia

In 2024, the male population in Malaysia outnumbered the females at 17.9 million and 16.2 million respectively, with the sex ratio of 111 males for every 100 females. The working age population, which consists of population aged 15 to 64 years was 23.9 million or 70.16% of the total population. Meanwhile, the young age and old age population were 7.6 million (22.17%) and 2.6 million (7.66%) respectively.

The dependency ratio is the number of people in the young and old age groups that need to be supported by every 100 people in the working age group. This ratio can be disaggregated into the total dependency ratio, young age dependency ratio and the old age dependency ratio. In 2024, the total dependency ratio was 42.52, with the young age dependency ratio at 31.60 and the old age dependency ratio at 10.92.



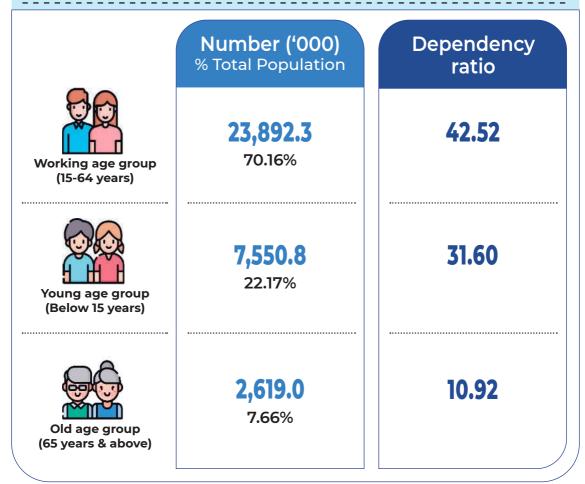


Figure 1.2 Principal Statistics of Malaysia Population 2024

Notes:

- 1. Current mid-year population estimates are based on Population and Housing Census 2020, Malaysia (Census 2020).
- 2. The added total may differ due to rounding.

Source: Current Population Estimates, Malaysia 2025, Department of Statistics Malaysia

HEALTH STATUS

Health status is measured by the health condition of the individual and the population as a whole. It can be measured through some health status indicators such as life expectancy at birth, mortality and morbidity.

LIFE EXPECTANCY AT BIRTH

Life expectancy is the average remaining age (years) for a person who is expected to live at the beginning of the certain age. Life expectancy at birth indicates the number of years a newborn infant would live, if prevailing patterns of mortality at the time of its birth are to stay the same throughout its life.

In 2024, the life expectancy at birth was 75.2 years, an increase from 74.0 years compared to the previous year. The same situation is observed for male and female life expectancies at birth, which are 73.0 years and 77.8 years respectively. This increase in life expectancy is attributed to the lower number of deaths in 2023 and 2024 as compared to 2021 and 2022, during the COVID-19 pandemic as shown in **Figure 1.3**.

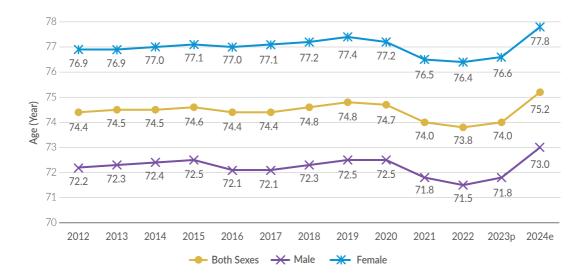


Figure 1.3 Life Expectancy at Birth Malaysia 2012-2024

Notes:

- 1. P Preliminary figure
- 2. e Estimate figure

Source: Abridged Life Tables 2022-2024, Department of Statistics Malaysia

MORTALITY

Mortality data provide a useful resource for measuring health. These data offer a comprehensive view of the health in community as it involves each individual.

The trends for crude death rate (CDR), neonatal mortality rate (NMR), infant mortality rate (IMR) and maternal mortality ratio (MMR) in Malaysia for the period of 1990 to 2023 are shown in **Figure 1.4**. The CDR recorded a decrease from 6.3 in 2022 to 5.9 per 1,000 population in 2023. A similar trend was observed for IMR and MMR where IMR showed a decline from 6.8 to 6.7 per 1,000 live births while MMR dropped from 26.2 to 25.7 per 100,000 live birth compared to the previous year.

However, the NMR showed a contrasting trend with increases in 2023, rising to 4.3 from 4.2 per 1,000 live births in 2022. The trends for other mortality rates are shown in **Table 1.2**.

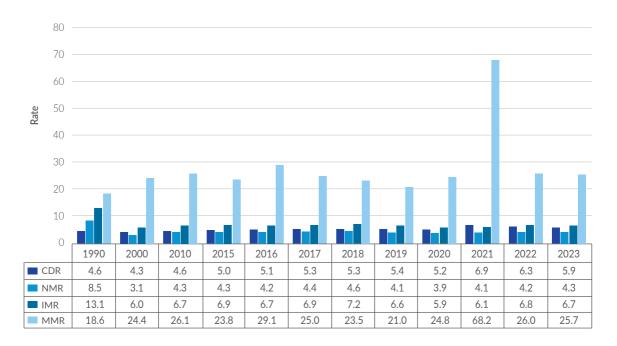


Figure 1.4 Mortality Rates in Malaysia 1990-2023

Source: Vital Statistics Malaysia 2024, Department of Statistics Malaysia

Table 1.2 Mortality Rates in Malaysia 2015-2023

Indicators	2015	2016	2017	2018	2019	2020	2021	2022	2023
Crude death rate (per 1,000 population)	5.0	5.1	5.3	5.3	5.4	5.2	6.9	6.3	5.9
Stillbirth rate (per 1,000 births)	4.4	5.2	5.4	5.5	5.3	5.1	5.0	5.0	4.8
Perinatal mortality rate (per 1,000 births)	7.7	8.3	8.7	8.9	8.4	8.0	8.2	8.2	7.9
Neonatal mortality rate (per 1,000 live births)	4.3	4.2	4.4	4.6	4.1	3.9	4.1	4.2	4.3
Infant mortality rate (per 1,000 live births)	6.9	6.7	6.9	7.2	6.6	5.9	6.1	6.8	6.7
Toddler mortality rate (per 1,000 population aged 1-4 years)	0.4	0.4	0.4	0.4	0.4	0.3	0.3	0.4	0.4
Under-5 mortality rate (per 1,000 live births)	8.4	8.1	8.4	8.8	8.1	7.3	7.4	8.6	8.3
Maternal mortality ratio (per 100,000 live births)	23.8	29.1	25.0	23.5	21.1	24.8	68.2	26.0	25.7

Source: Vital Statistics, Malaysia, 2024, Department of Statistics Malaysia

MORBIDITY

The health status of a community is usually measured in terms of morbidity, which focuses on the incidence or prevalence of disease.

Hospitalisation indicates the severity of diseases requiring further treatment, patient stabilization, or patient isolation to prevent disease transmission. The total admissions to the Ministry of Health Malaysia (MOH) hospitals in 2024 were 2,712,957. Out of this total, the category pregnancy, childbirth, and the puerperium were the leading cause of hospitalisation in MOH hospitals which accounted for 17.22%, followed by diseases of the respiratory system (14.18%) and certain infectious or parasitic diseases (9.80%) as shown in **Figure 1.5**.

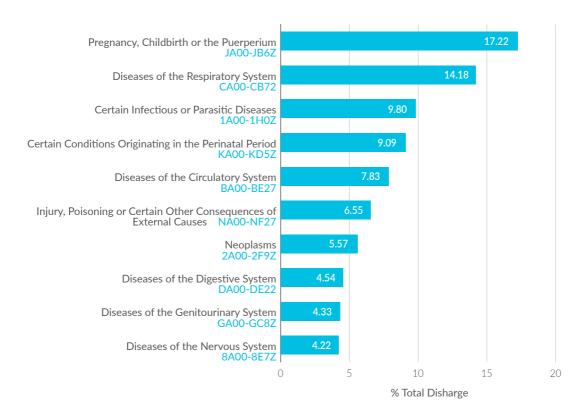


Figure 1.5 10 Principal Causes of Hospitalisation in MOH Hospitals 2024

Note:

Based on chapter grouping, International Statistical Classification of Disease 11th Revision (ICD-11), Version 2022.

The total number of deaths recorded in MOH hospitals was 72,365 deaths in 2024 where diseases of the respiratory system was the leading cause of death, accounting for 20.08%. This was followed by diseases of the circulatory system (16.99%) and certain infectious and parasitic diseases (12.81%) as shown in **Figure 1.6**.

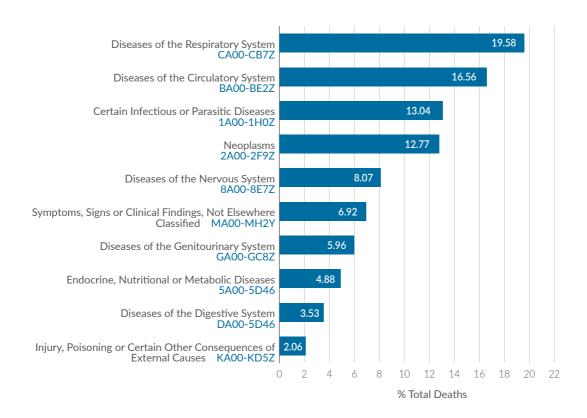


Figure 1.6 10 Principal Causes of Death* in MOH Hospitals 2024

Notes:

- 1. Based on chapter grouping, International Classification of Diseases 11th Revision (ICD-11), Version 2022.
- 2. *Starting in 2014, tabulations for causes of death in MOH hospitals are based on the underlying cause of death as recommended by the World Health Organization (WHO).

HEALTH FACILITIES AND FACILITY UTILISATION

The total number of MOH hospitals providing inpatient services in 2024 was 150, with a total of 46,855 beds. This total consisted of 139 hospitals of various types and 11 special medical institutions with total beds of 41,209 and 5,646 beds respectively. The Bed Occupancy Rate (BOR) for both MOH hospitals and special medical institutions in 2024 was 72.61% as shown in **Table 1.3**.

As of 31 December 2024, there were 1,131 health clinics (KK), 1,656 rural clinics (KD), 77 maternal and child health clinics (KKIA) and 205 community clinics (KKom) nationwide which provided basic medical services for illnesses and mild injuries to the community.

Table 1.3 Health Facilities by Type, Number of Bed Complement and Bed Occupancy Rate (BOR) in MOH 2019-2024

Indicator	2019	2020	2021	2022	2023	2024
Number of Hospitals	144	146	146	148	149	150
i. Hospital	135	135	135	137	138	139
ii. Special Medical Institution	9	11	11	11	11	11
Number of Bed Complement ¹	42,936	44,117	44,849	45,167	45,964	46,885
i. Hospital	38,131	38,543	39,263	39,581	40,348	41,209
ii. Special Medical Institution	4,805	5,574	5,586	5,586	5,616	5,646
BOR (%) ¹	70.01	64.72	77.52	69.01	73.25	72.61
Number of KK	1,027	1,051	1,057	1,077	1,095	1,131
Number of KD	1,771	1,752	1,749	1,722	1,716	1,656
Number of KKIA	87	87	86	83	80	77
Number of KKom	286	257	255	239	228	205

Note:

¹ Refers to number of bed complement and BOR in MOH Hospitals and Special Medical Institutions.

CHAPTER 2

MANAGEMENT

MANAGEMENT PROGRAMME

The management sector under the Ministry of Health (MOH) is responsible in planning and developing competent human resources to ensure efficiency, organise and effective organisational governance. This sector consists of five main divisions under the supervision of the Deputy Secretary General (Management) as follows:

- i. Human Resource Division (BSM)
- ii. Training Management Division (BPL)
- iii. Competency Development Division (BPK)
- iv. Management Service Division (BKP)
- v. Information Management Division (BPM)

HUMAN RESOURCE DIVISION (BSM)

BSM implements the scope of appointments, service management, organisational development, staffing matters, allowances and facilities at MOH. These roles are carried out by the BSM through the following three (3) branches as shown in **Figure 2.1**.

Policy, Remuneration and Staffing Branch

- i. Organisational and human resource policies of the MOH
- ii. Organisational and program structuring under the MOH
- iii. Staffing matters at the headquarters, existing, new and upgraded facilities
- iv. Rationalisation of allowances, incentives and facilities for the MOH staff
- v. Management of associations/unions and employer-employee relations
- vi. Governance of databases and systems related to the MOH human resources

Service and Support Management

- Recruitment of permanent and interim contract staff through the collaboration of the Public Service Commission (SPA)
- Recruitment of contract staff (Contract of Service and Contract for Service) through the collaboration of the Public Service Department (JPA)
- iii. MOH Headquarters (IPKKM), institutions and interstate transfers and placement of staff
- iv. MOH staff service matters covering emoluments, facilities, leave management and staff retirement

Promotion, Evaluation and Performance Branch

- Promotion policy and performance of MOH staff
- ii. Management of job assignments, acting and promotion of MOH staff
- iii. Management of MOH staff career paths
- iv. Secretariat of the Promotion Board Meeting for MOH staff in the supporting group
- v. Monitoring the key performance of top management in MOH strategic positions

Figure 2.1 Scope of Function and Role of BSM

HUMAN RESOURCES CAPACITY

MOH is the ministry with the second-highest human resources after the Ministry of Education (MOE). As of 31 December 2024, the total number of human resources serving at the MOH is 301,289 officers. This number consists of 270,356 (89.73%) permanent appointed officers and 30,933 (10.27%) contract appointed officers. **Figure 2.2** indicates details of the overall human resource capacity at MOH according to the service group.



Figure 2.2 MOH Human Resources Capacity by Service Group 2024

Notes:

- i. Management and Professional Group are officers in grade 9 and above, including officers in the Top Management Group and officers in the integrated service scheme
- ii. Paramedic and Auxiliary Group are officers in grades 1 to 8 covering schemes of service in the semi-medical field
- iii. Supporting Group are officers in other schemes of service in grades 1 to 8

FILLING OF PERMANENT POST

In 2024, the MOH has a total of 308,472 permanent posts, with 270,356 officers being filled. The recruitment of staff involving vacancies in the appointment grade continues through collaboration with the SPA. Meanwhile, for positions in the promotion grade, filling of posts for acting on promotion grade and promotion to a higher grade is done based on the approval by the Promotion Board. **Table 2.1** indicates detailed filling of the permanent post in the MOH in 2024.

Table 2.1 Filling of MOH Permanent Posts 2024

Scheme of Service	Filling of Post
Medical Specialist	8,341
Dental Specialist	512
Medical Officer	30,190
Dental Officer	4,429
Pharmacist	9,743
Nurses	70,234
Medical Assistant	16,664
Scheme of Service under the Allied Health Profession	26,304
Other Scheme of Service	103,939
Total	270,356

APPOINTMENT OF CONTRACT STAFF FOR SERVICE CONTINUITY

In 2024, a total of 30,933 officers from various schemes of service were appointed on a contract basis. These contractual appointments were made due to the MOH's obligations under the profession act for the housemanship training or the medical officer compulsory service, for the needs of specialists and continuity of services at MOH facilities. **Table 2.2** indicates details of contract appointments according to the scheme of service at MOH in 2024.

Table 2.2 MOH Contract Appointments 2024

Scheme of Service	Total of Appointment					
Appointment Due to the Needs of Specialist Services						
Medical Specialist	18					
Dental Specialist	1					
Appointment Due to the Act's Requirements for Housemanship Training	and Compulsory Service					
Medical Specialist	13,519					
Dental Specialist	2,514					
Pharmacy Officer	2,958					
Appointment to Assist the Continuity of Health Service	es Delivery					
Psychology Officer (Counsellor)	197					
Science Officer	112					
Environmental Health Officer	60					
Optometrist Officer	14					
Research Officer	1					
Assistant Medical Officer	4,099					
Environmental Health Officer Assistant	945					

Scheme of Service	Total of Appointment
Medical Laboratory Technologist	918
Dental Surgery Assistant	489
Medical Radiographer (Diagnostic)	200
Medical Occupational Therapist	185
Medical Physiotherapist	166
Dental Technologist	103
Engineer Assistant	50
Public Assistant	11
IPKKM Contract of Service Officer	2
MySTEP Personnel	4,371
Total	30,933

SCHEME OF SERVICE IN MOH

Through the Public Service Remuneration System (SSPA), which came into effect on 1 December 2024, the total number of schemes of service in the MOH is 86 compared to 100 schemes of service under the Malaysian Remuneration System (SSM). Improvements to the schemes of service under the SSPA were made by consolidating multiple schemes of service into a new multitasking scheme of service and conversion of obsolete schemes of service to the current schemes of service stipulated under the SSPA. Schemes of service in the MOH according to service categories are shown in **Figure 2.28**.

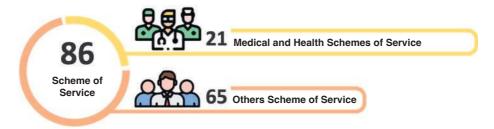


Figure 2.3 Schemes of Service According to Service Categories

Note:

The Medical and Health Schemes of Service implement the scope of medical, health, clinical tasks and service delivery to patients

ADDITIONAL PERMANENT POST

In 2024, MOH has received 16,332 new additional posts, an increase of 22.92% compared to 2023. From 2020-2024, a total of 51,093 new additional posts covering various schemes of service were created in the MOH. This increase was received due to the need for additional staffing in existing, upgraded and newly built health facilities. **Figure 2.4** indicates details of additional permanent posts received by the MOH posts over a five (5) years period.

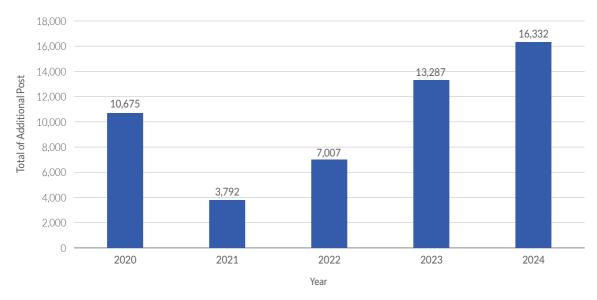


Figure 2.4 MOH Additional Permanent Post 2020-2024

PLACEMENT OF MOH STAFF IN OTHER MINISTRIES

MOH is also committed to assisting other ministries through health support services implemented by the agencies or institutions under the ministry. As of 31 December 2024, MOH has placed 2,542 officers in cadre posts in other ministries, comprising 161 officers in the management and professional groups, 1,305 in the paramedic and auxiliary groups and 1,076 in the supporting group.

Table 2.3 Placement of MOH Cadre Officers in Other Ministries 2024

Ministries	Medical Officer	Nurses	Community Nurses	Assistant Medical Officer	Health Care Assistant	Others	Total
MINDEF	-	462	146	121	189	82	1,000
KPWKM	-	25	67	8	788	58	946
KDN	56	12	1	216	52	58	395
KESUMA	21	28	-	-	-	2	51
JPM	1	-	-	2	-	46	49
KPM	-	5	-	5	7	24	41
KPKT	-	-	-	-	-	27	27
KPT	-	-	-	17	-	-	17
KBS	-	-	-	4	3	1	8
NRECC	-	-	-	-	-	5	5
KKDW	-	-	-	-	-	3	3
Total	78	532	214	373	1,039	306	2,542

ENGAGEMENT SESSION WITH TRADE UNION AND EMPLOYEE **ASSOCIATION**

Employer-employee engagement platforms such as the Departmental Joint Council (MBJ) and sessions with the trade union or employee association, are medium of two-way communication where employees are given a channel to communicate with the management in voicing out their opinions, views and contributing thoughtful ideas for the interest and conducive working environment within the MOH organisation.

To ensure efficient and effective service delivery, MOH must ensure a two-way communication implemented periodically to address emerging issues faced by its officers. Among the main engagement sessions involving associations and trade unions in 2024 are:

- Discussion session on the scheme of service pathway of the Healthcare Assistant with the Malaysian Medical Assistants Association and the Peninsular Malaysia National Union of Healthcare Assistants on 14 March 2024 at IPKKM.
- ii. Engagement session with the Peninsular Malaysia Dental Surgical Assistants Union on 2 May 2024 at IPKKM.
- iii. 2024 MOH Trade Union Convention on 12-13 August 2024 at Kuching, Sarawak.
- iv. Engagement session with the Peninsular Malaysia Assistant Medical Records Officers Union on 27-29 August 2024 at Langkawi.
- v. Engagement session on the SSPA with the Trade Union in MOH on 29 October 2024 at IPKKM.
- vi. MBJ at IPKKM, JKN, District Health Offices (PKDs) and hospitals held every guarter of 2024.





2024 MOH Trade Union Convention Image 2.1





Image 2.2 Engagement Session with Trade Union and Employee Association 2024

PROMOTIONS AND PERFORMANCE MANAGEMENT

MOH appreciates the commitment and contribution of its officers in delivering healthcare services at every level. All MOH officers will be assessed through an Annual Performance Appraisal Report (LNPT) and screened for the Excellent Service Award (APC). APC is the government's appreciation to recognise the MOH officers who have delivered excellent service based on the officer's annual performance. For 2024, 8% of all MOH officers were awarded APC. All APC recipients received an Excellence Service Certificate and incentives worth RM1,000.

In addition to the APC, MOH officers are also given career advancement opportunities through acting and promotion to a higher grade. In 2024, a total of 17,953 officers were involved in acting and promotion matters. **Figure 2.30** indicates the details of acting and promotion matters for MOH officers according to the service group in 2024.



Figure 2.5 MOH Acting and Promotion Matters 2024

HUMAN RESOURCE MANAGEMENT INFORMATION SYSTEM (HRMIS)

HRMIS provides an up-to-date, open data and flexible human resource information system to meet management needs at MOH. Therefore, MOH is committed to ensure that HRMIS is used at all levels of KKM, from IPKKM to the smallest facilities in rural and remote areas. For 2024, MOH has received a five (5) star rating from the JPA for HRMIS KPIs with an achievement of 98.39%.

WORKSHOP ON STRENGTHENING THE MOH WORK PROCESSES AND HUMAN RESOURCES

On 23-25 May 2024, BSM have organised a Workshop on Strengthening the MOH Work Processes and Human Resources at Putrajaya. This workshop involved participants consisting of the heads of programmes, heads of professions, representatives from the JKNs and hospital directors. This workshop was held to discuss the improvement of house officer service matters, strengthening the health service work processes and adaptation of technology in MOH human resource data management.





Image 2.3 Workshop on Strengthening the MOH Work Processes and Human Resources

IMPLEMENTATION OF SSPA IN MOH

SSPA was implemented through Service Circular Number 1 of 2024, which came into effect on 1 December 2024. The introduction of SSPA is part of the Public Service Reform Agenda and is implemented based on the philosophy of total reward encompassing schemes of service, service matters, salaries, allowances, facilities, retirement and retirement benefits towards increasing the motivation, performance and productivity of the public service.

To ensure the effectiveness of SSPA implementation for the 270,356 permanent appointed officers in the MOH, among the initiatives that have been implemented by BSM are:

- Establishing the SSPA Service Circular Implementation Task Force Committee to coordinate, strategise and monitor the implementation of SSPA, especially within the stipulated 40-day option period from 21 October to 30 November 2024.
- ii. Activating the SSPA Operations Centre to facilitate MOH permanent appointed officers to obtain clear, fast and accurate explanations in real time regarding the SSPA.
- iii. Developing the SSPA portal through the MOH official website to further increase access to accurate information and provide comprehensive explanations regarding SSPA to MOH permanent appointed officers.





Image 2.4 Engagement Sessions of SSPA Service Circular with JPA 2024

In addition to the initiatives, BSM have organised engagement sessions to assist MOH permanent officers to obtain in-depth explanations regarding any inquiries or confusion regarding the SSPA. Among the engagement sessions are:

- i. Engagement sessions of SSPA Service Circular with JPA on 26 September 2024
- ii. MOH Open Day Pocket Talk SSPA on 3 October 2024
- iii. Engagement sessions of SSPA in seven (7) zones nationwide on 7-22 October 2024
- iv. Engagement sessions of SSPA with the Trade Union in MOH on 29 October 2024





Image 2.5 Nationwide Engagement Sessions of SSPA 2024

TRAINING MANAGEMENT DIVISION (BPL)

BPL plays a strategic role in strengthening human capital for the MOH through a structured training framework. The division manages various in-service and pre-service training programs to enhance the efficiency and capabilities of healthcare professionals. In addition, the division also oversees the allocation of in-service training under the development budget (DE). BPL's main roles are as follows:

- i. Specialist Study Programmes
 - Managing the *Hadiah Latihan Persekutuan* (HLP) for medical and dental officers to pursue Master's, PhD or specialist studies in specific fields.
 - Implementing the Parallel Pathway Programme as an alternative route for medical officers to obtain specialist qualifications.
- ii. Pre-Service Training Programmes
 - Coordinating the intake of trainees for basic training programs at the Ministry of Health Training Institutes (ILKKM) before being absorbed into the health sector.
- iii. Competency Enhancement and Advanced Training
 - Offering Advanced Diploma Programmes and Postgraduate Certificates in critical and clinical fields to improve the skills of healthcare workers at ILKKM.

SPONSORSHIP PROGRAMME AND STUDY LEAVE BENEFITS

The BPL is responsible for managing and implementing programmes for further studies in specialist fields, PhD and Master's degrees for all professionals, as well as healthcare and allied health science staff under the MOH. This initiative aims to ensure that the management of advanced education programmes is carried out effectively, in line with strategic objectives to strengthen expertise and develop human capital in the health sector. The study leave benefits available to MOH appointed *Skim Bukan Gunasama* staff are as follows:

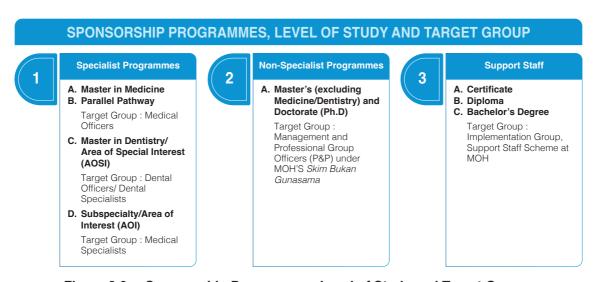


Figure 2.6 Sponsorship Programmes, Level of Study and Target Groups

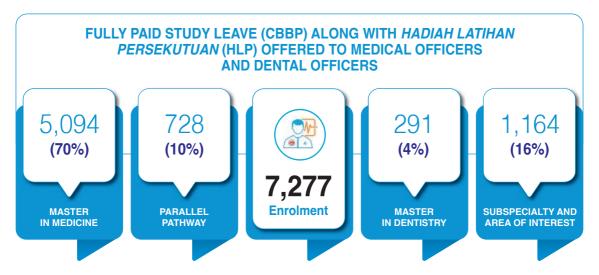


Figure 2.7 CBBP and HLP Benefits for Medical and Dental Officers

For the 2024/2025 session, a total of 1,396 medical officers have been offered to pursue the Master of Medicine and another 372 medical officers were enrolled under the Parallel Pathway Programme. Meanwhile, 77 dental officers were offered to pursue the Master of Dentistry programme. 116 officers from various schemes were offered to pursue non-specialist programmes at the Master's or Ph.D level. As for the Skim Bukan Gunasama Supporting Group, a total of 55 staff have been approved with Study Leave with Half Pay to pursue studies at the Diploma or First Degree level.

The scholarship application advertisement for the Master of Medicine, Parallel Pathway and Subspecialty Programmes for the 2025/2026 session was published through the MOH eHLP System (http://ehlp.moh.gov.my) from 23 September to 20 October 2024. A total of 4,774 applications were received based on the type of specialist programme, including Master of Medicine (3,737), Parallel Pathway (419) and Subspecialty (618).





Image 2.6 Briefing Session for Study Leave Benefits with Study Sponsorship Programme 2024/2025

PRE-SERVICE TRAINING PROGRAMME

The intake for the Pre-Service Training Programme is conducted twice (2) a year, during the January and July sessions at ILKKM. A total of 4,942 trainees reported for duty compared to 3,530 trainees in 2023 with a 40% increase. This initiative aims to equip aspiring healthcare professionals with the necessary knowledge and skills to meet the growing demands of the healthcare sector. The intake information for the Pre-Service Programme trainees in 2024 is shown in **Figure 2.8**.



TRAINING INFO	JANUARY (11 Programmes)	JULY (14 Programmes)	TOTAL
Offered	2,497	2,851	5,348
Registered	2,334	2,608	4,942

Figure 2.8 Intake of Trainees for Pre-Service Training Programme 2024

ADVANCED PROGRAMME

The Advanced Programme is an in-service training initiative offered to paramedics and health auxiliaries from government agencies, statutory bodies and private healthcare institutions. The programme is conducted at the Post-Basic Certificate and Advanced Diploma levels to enhance the competency of officers in specific areas of specialisation or expertise. Applications and intake of trainees for the Advanced Programme in 2024 as shown in **Figure 2.9**.



Figure 2.9 Intake of Trainees for Advanced Programme 2024

ILKKM CONVOCATION CEREMONY 2024

The 2024 ILKKM Convocation Ceremony, themed *Graduan ILKKM Pemangkin Kelestarian Kesihatan MADANI* was held across three (3) zones, involving a total of 5,253 graduates.

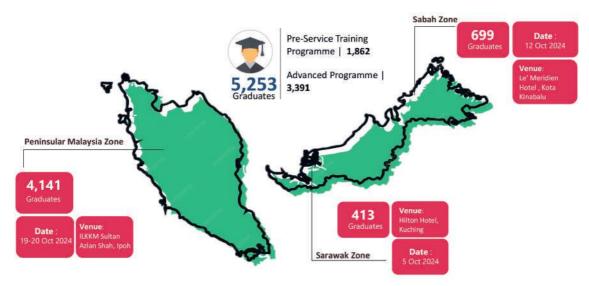


Figure 2.10 ILKKM Convocation Ceremony 2024



Scroll Presentation Ceremony by the Minister of Health to the Graduates Outstanding Graduate



Award Presentation Ceremony for the Sabah Zone by the Deputy Minister of Health

Image 2.6 ILKKM Convocation Ceremony 2024

STRATEGIC PLAN FOR ILKKM TRANSFORMATION TOWARDS BECOMING A UNIVERSITY COLLEGE

The Strategic Plan for ILKKM Transformation towards a university college aims to enhance the quality and recognition of healthcare education in Malaysia. This initiative is designed to elevate the status of ILKKM, aligning it with the higher education standards while maintaining its role as a leading institution for producing highly skilled healthcare professionals. By advancing to a university college, ILKKM will be able to offer higher-tier academic programmes, including advanced diplomas, bachelor's degrees and postgraduate studies in specialised fields.

Centre of Excellence (CoE) **ILKKM**Star Rating Phase

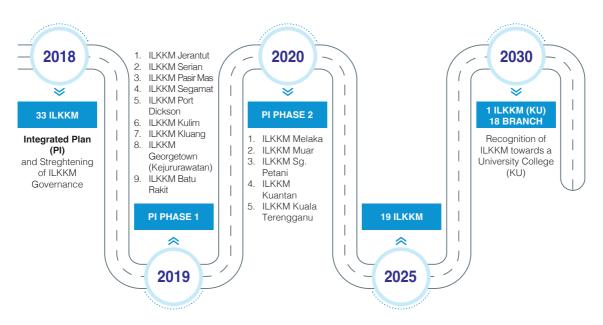


Figure 2.11 Strategic Transformation Plan of ILKKM

To realise this transformation, BPL intensified engagement sessions with stakeholders to implement the full transformation of ILKKM into a university college in stages, starting from 2025. These engagement sessions were conducted to disseminate BPL's aspirations and strengthen planning through external contributions or ideas. A total of eight (8) engagement sessions were held, involving several parties as follows:

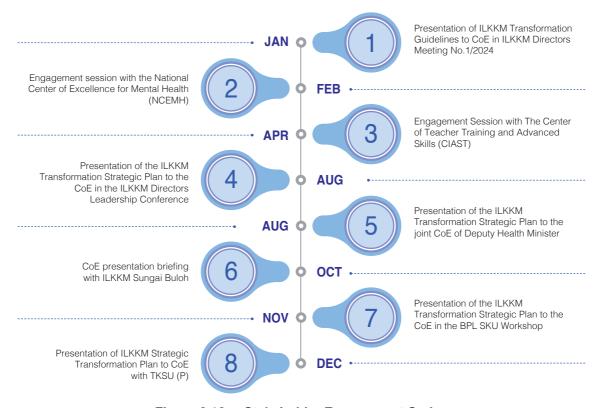


Figure 2.12 Stakeholder Engagement Series



Image 2.7 Stakeholder Engagement with NCEMH

COMPETENCY DEVELOPMENT DIVISION (BPK)

The aim of training and courses conducted by BPK is to ensure that the MOH's workers would be well equipped with necessary skills and knowledge to perform their tasks effectively. In 2024, a total of 130 courses were organised, involving 8,201 participants, as follows:

Table 2.4 Course Organised by BPK in 2024

Units	Number o	Number of	
Units	Online/Hybrid	Physical	Participants
Policy and Developments	3	5	90
Executive Development	8	9	306
Professional and Ethical	6	11	2,380
Leadership and Management	9	6	1,315
Governance and Integrity	3	11	2,600
Innovation and Quality	11	8	453
Digital and Technology	9	12	582
Departmental Subject Examination	-	11	209
Administration and Finance	-	8	266
Total	49	81	8,201

THE COMPETENCY DEVELOPMENT PROGRAMME FOR HOSPITAL DIRECTORS

The Competency Development Programme for Hospital Directors MOH was held on 22 October 2024, at the Putrajaya International Convention Centre (PICC). This programme was jointly organised by BPK, Medical Development Division (BPP), Public Health Development Division (BPKA), Human Resources Division (BSM), Training Management Division (BPL) and the Institute for Health Management (IHM).

The event hosted a total of 200 participants, including State Health Directors, Hospital Directors, Deputy State Health Directors and Deputy Hospital Directors from across Malaysia.

The programme featured various sessions, including lectures and an Executive Talk. The lecture series commenced with a session by the Malaysian Anti-Corruption Academy (MACA) titled Integrity and Corruption (White-Collar Crime). This was followed by a lecture delivered by the Public Service Department (JPA) on the Holistic Well-Being Inventory (IKH). Prior to attending the programme, participants also undertook a psychometric assessment administered by JPA.

The highlight of the event was the Executive Talk delivered by Secretary-General of MOH, on the topic of Leadership Transformation. The programme began with an opening address by Deputy Secretary General (Management).





Image 2.8 The Competency Development Programme for Hospital Directors MOH 2024

TALENT DEVELOPMENT PROGRAMME (TDP)

TDP has been initiated since 2018 specifically for all grade 41-52 MOH officers. The implementation of TDP aims to enhance the resilience of MOH personnel in facing challenges and constraints in delivering quality public services.

The theme for the TDP Cohort 6 in 2024 was ESG *Leadership: Accelerating Sustainability Transformation for Emerging Leaders*. This theme was chosen because it aligns with the significance of Environmental, Social and Governance (ESG) framework in public services. The programme was conducted according to the module in a hybrid manner from 3 March to 25 October 2024, involving the participation of 30 participants from grade 48-52 officers across 13 service schemes.

To date, this annual programme has been implemented for a total of six (6) cohorts involving 166 participants from grade 41-52. Out of this number, 80 participants consist of grade 41-44 officers (Cohorts 1, 3 and 5), while 86 participants are officers from grade 48-52 (Cohorts 2, 4 and 6). More than 20 service schemes within the MOH have been involved throughout the implementation of this programme.





Image 2.9 Talent Development Programme Cohort 6

HEALTHCARE EXCELLENCE AND LEADERSHIP PROGRAMME (HEAL)

BPK is responsible for planning and coordinating the implementation of leadership, supervision and position grade confirmation courses among senior officers of the MOH. Among the courses conducted were the HEAL in collaboration with the University of Melbourne-Melbourne Business School (MBS) which was attended by 25 officers.



Image 2.10 Healthcare Excellence and Leadership Programme 2024

MICRO-CREDENTIAL PROGRAMME (MCP)

MCP is a lifelong learning approach that offers professional certificates accredited by the Malaysian Qualifications Agency (MQA) to selected public universities (UA) and private universities (IPTS). In 2024, the BPK collaborated with Universiti Teknologi Malaysia (UTM), UNITAR International University (UNITAR) and Monash University Malaysia (MONASH) to implement the MCP, focusing on the topics of Management and Digital Health. A total of 115 officers from the management and professional group, grades 44-56, successfully obtained accredited Micro-Credential Certificates.



Image 2.11 Micro-Credential Programme 2024

BRIEFING ON THE CONCEPT OF PUBLIC SERVICE MALAYSIA MADANI (MMPA)

In 2024, a total of 274 MOH staff participated in the MMPA Concept Briefing which was held online on 15 October 2024 and 12 November 2024 as per details:

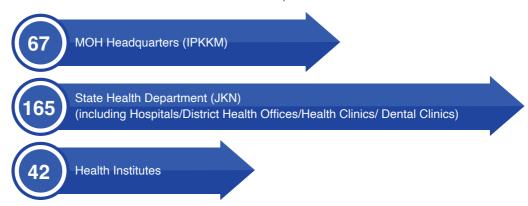


Figure 2.13 Number of Participants of MMPA Concept Briefing

CERTIFIED PROFESSIONAL COACH (CPC)

CPC course entered its second year of implementation by BPK in 2024. This course aims to develop professional coaches among civil servants to foster a coaching culture in the workplace, enhancing individual potential, confidence and competency through effective communication.

For the 2024 cohort, 19 participants out of 23 officers from the MOH who successfully joined this course will earn their certification as Professional Coaches on 16 January 2025 at the Institut Tadbiran Awam Negara (INTAN) Bukit Kiara. They will serve as Coaching Ambassadors and are listed as Professional Coaches for the public service under INTAN, where their services can be offered to all officers across all ministries.



Image 2.12 CPC Course for the 2024 Cohort at INTAN Bukit Kiara

AMBULANCE DRIVING COURSE

The Ambulance Driving Course organized by BPK was conducted in two (2) series for the year 2024. Series 1, held in collaboration with the JKN Sarawak, took place from 1-5 July 2024, in Sibu, Sarawak. Series 2, in partnership with the JKN Kelantan, was conducted from 5-9 August 2024, at the General Operations Force Base (PGA) in Pengkalan Chepa, Kelantan. A total of 60 participants attended the two courses, which targeted newly appointed ambulance drivers and those who had not yet attended the defensive ambulance driving course.

The course was conducted by combining theoretical and practical training. The theoretical sessions were conducted in a classroom setting, while practical sessions took place on designated driving tracks. Participants were introduced to 12 comprehensive modules encompassing the understanding, knowledge and skills required for competent and defensive ambulance driving. These modules also addressed the psychosocial health of ambulance drivers. The trainers for this course are from the Road Transport Department (JPJ), the Royal Malaysia Police (PDRM), the Malaysian Institute of Road Safety Research (MIROS), emergency medicine specialist consultants and clinical psychology officers.





Image 2.13 Ambulance Driving Course MOH 2024

BUSINESS PROCESS REENGINEERING (BPR)

BPR in the MOH refers to a systematic approach to analyse, replanning and improvise existing work processes within the healthcare services. The following are the new work processes which have been reengineered through the BPR process for 2024:

- i. Issuance of Approval Certificates for Medicines and Services Advertisement (Pharmacy Services Programme)
- ii. Application for Pre-Establishment of Private Healthcare Facilities or Services (KPJKS) other than private clinics (Medical Practice Division)
- iii. Baby-Friendly Hospital Accreditation in Government and Private Hospitals (Nutrition Division)
- iv. Enhancing efficiency in the Development of New Internal Applications at MOH (Information Management Division)
- v. Registration of Traditional and Complementary Medicine Practitioners (Traditional and Complementary Medicine Division)





Image 2.14 Business Process Reengineering Workshop 2024

TRAIN THE TRAINER (TTT)

BPK is responsible for planning and coordinating the implementation of leadership, supervision and position grade confirmation courses among senior officers of the MOH. Among the courses conducted were the TTT course in collaboration with the INTAN. The objective of its implementation is to empower the competence of internal speakers of the MOH.



Image 2.15 Train the Trainer Workshop 2024

COLOURED BRAIN COMMUNICATION (CBC)

CBC course is a new blended learning generic course organised by BPK. The course has been held since 2024 with the participation of 60 participants from grades 41-52, consisting of 24 service schemes from the MOH.

CBC is a model for understanding how individuals think and act based on specific colours that represent their thinking styles. The colour theory in the context of CBC classifies individual thinking styles into four (4) main colours: red (action and results oriented), blue (relationship and social oriented), purple (analytical and details oriented) and green (creative and holistic thinkers). Each colour represents a different and unique communication pattern, forming structures, conclusions, barriers and solutions. Indirectly, CBC allows individuals to understand diverse thinking styles, reduce conflicts and improve daily communication.





Image 2.16 CBC Course 2024

DEPARTMENTAL SUBJECT EXAMINATION

BPK has conducted two (2) series of Departmental Subject Examination for the year 2024. For the first series, it was held on the 21 March 2024, while the second series was held on the 12 September 2024. The Departmental Subject Examination was carried out at three (3) examination centres namely, in FT Kuala Lumpur, Sabah and Sarawak.





Image 2.17 Departmental Subject Examination 2024

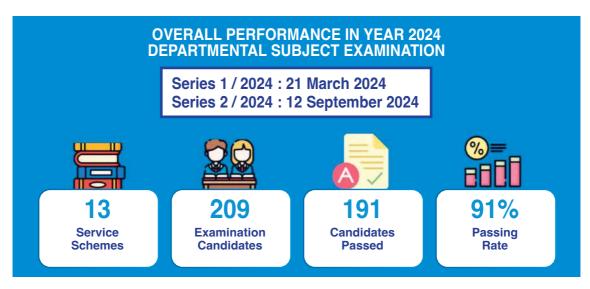


Figure 2.14 Overall Performance of Departmental Subject Examination 2024

MANAGEMENT SERVICES DIVISION (BKP)

FINANCIAL MANAGEMENT

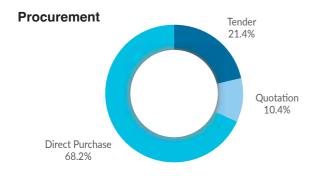
BKP is responsible for the allocation of the IPKKM Management Programme with a provision of RM2.047 billion. The performance-based expenditures for the HQ's Management Programme for the financial year ending on 31 December 2024 are 100%. Total allocations and expenditures by activity is as shown in below:

Table 2.5 Total Allocations and Expenditures by Activity under Management Programme for the Financial Year Ending 31 December 2024

Activity	Allocation (RM)	Expenditure (RM)
IPKKM Management	817,913,113.65	817,913,113.65
Human Resource	16,646,653.73	16,646,653.73
Finance	636,761,706.37	636,761,706.37
Training	518,014,512.03	518,014,512.03
Information Technology	52,055,237.80	52,055,237.80
Competency Development	5,884,631.39	5,884,631.39
Total	2,047,275,854.97	2,047,275,854.97

PROCUREMENT AND ASSET MANAGEMENT

The Procurement and Asset Management Unit is responsible for matters related to the management of government assets and procurement for the Office of the Administrative Members, Top Management and the BKP (including the Legal Advisor's Office, Integrity Unit and Corporate Communication Unit). In addition, this unit also manages the maintenance of IPKKM buildings at Complex E, Putrajaya and at Jalan Cenderasari, Kuala Lumpur. The achievements for each activity in 2024 are as follows:



	Total Procurement	Amount (RM)
Direct Purchase	87	11,326,443.38
Quotation	19	1,727,643.31
Tender	7	3,557,590.20



Building Maintenance



Premise Maintenance of IPKKM Kompleks E, Putrajaya

- · Facility Management
- Time Attendance Management System (eTAMS)



Premise Maintenance of IPKKM Jalan Cenderasari, Kuala Lumpur

- Air Conditioning and Fire Alarm Management Services
- Periodical Electrical Component Management Services
- · Landscape Services
- Housekeeping and Pest Control Services



Housekeeping and Pest Control Services

- IPKKM, Presint Diplomatik, Putrajaya
- IPKKM, Menara Prisma, Putrajaya
- · IPKKM, PERKIM, Kuala Lumpur



Total of fixed issues in Kompleks E and Jalan Cenderasari

1,385 issues

Figure 2.15 Procurement and Asset Management Unit Activities 2024

PROTECTIVE SECURITY

The Security Unit is responsible for planning, formulating, managing, coordinating and implementing protective security in the MOH holistically, in addition to providing advisory services, monitoring and enforcing laws, regulations and instructions to departments and facilities under the MOH. In addition, this unit also manages security aspects in the IPKKM building, Complex E, Putrajaya and Jalan Cenderasari, Kuala Lumpur. Achievements according to each activity for 2024 are as shown in below:

PROTECTIVE SECURITY

Security Control System







- · Closed Circuit Camera System (CCTV)
- · Access Card Management System (CAMS)
- · Visitor Management System (VMS)

Security Control Services

- · IPKKM Kompleks E (MYJ Security Sdn. Bhd.)
- · IPKKM Jalan Cenderasari (MUAZ Force Sdn. Bhd.)



Official Secrets Act (Revision and Amendment 2017) Certificate every year



The use of Digital Official Duty System Reports

VEHICLE STICKER PRODUCTION 2024-2026

ISSUE OF SECURITY PASS 2024

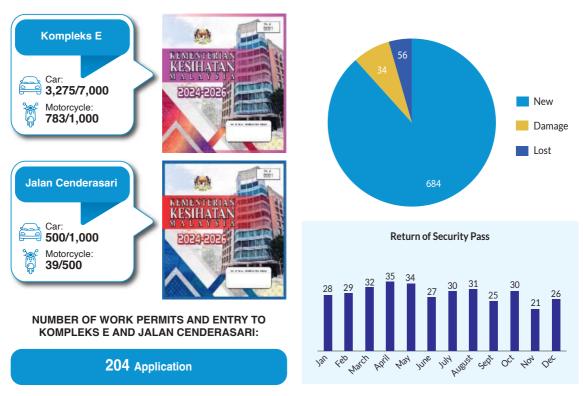


Figure 2.16 Security Unit Achievements 2024

GENERAL MANAGEMENT BRANCH

The General Management Branch manages human resources for IPKKM and matters pertaining administration including consultation for protocol, psychology and Islamic affairs based on demand in MOH. Summary of the programmes and activities for the units under the General Management Branch throughout 2024 is as below:



Figure 2.17 Human Resource Management Unit Programmes and Activities 2024

Appreciating Islamic Valus

- Appreciating Islamic Value Programmes and Celebrations of Islamic Great Days
- Ceremony of 33rd Quranic Recitation, MOH
- Ceremony of Khatam al-Quran Perdana
- Recitation Yasin, al-Kahfi & tazkirah every Friday
- Daily recitation of doa & morning message
- Programme for Tasbih Prayer

Management

- Meeting ceremony of MOH Top Management with Hajj Medical Team
- Kalam UHEI posters
- Coordination of daily Zuhur lecture and Musolla activities
- Courtesy visits to Islamic
 Affairs Unit in MOH hospital
- Tasks as prayer readers in MOH official ceremony

Course

- Islamic Affairs Services
 Competency Course
- Mortuary Management Course
- Taranum courses for participant in Ceremony of Quranic Recitation within IPKKM and MOH

Synergy

- Programme for Muslim Friendly Hospital (HMI) Certification
- Development of the guidelines for Islamic Mortuary Management
- On the job training for Islamic Affairs Executive
- Friend mosque and hospital volunteer programme
- Islamic psychospiritual course
- Used hijab collection programme at IPKKM
- Candidates as islamic medical practitioners has been presented in meeting of Islamic Medical Practitioners Council (LAJPPI)

Figure 2.18 Islamic Affairs Unit Programmes and Activities 2024

General Administration Sub Unit

- 2024 New Year Mandate by the Minister of Health
- MOH monthly assembly for March, Jun & November 2024
- National Independence Month programmes/activities in August 2024
- 5-Star and special award winner for interministrial competition of *Jiwa* Merdeka Year 2024

Coordination Sub Unit

- Certificate of appreciation for successfully organizing Majlis Bersama Jabatan 2023, adhering to the specified number and timeframe, awarded by Tan Sri KPPA
- Appointment of 2,024 Ahli Lembaga Pelawat Hospital until 31 Disember 2024
- MOH secretariat for the Civil Service (JPA) contingent in conjunction with the celebration of National Day 2024
- 100% issues resolved through SISPAA for BKP

Fleet Management Sub Unit

- Participation in Programme Longest Arrangement of Vehicle @50 WP in conjunction with 50 years of Federal Territory Anniversary
- Management of MOH fleet vehicles (SPANCO) for year 2024: CA1: 354 unit; CA2: 788 unit

Protocol Sub Un

- Chinese New Year celebration on 20 February 2024
- Ihya' Ramadan on 22 March 2024
- Hari Raya Aidilfitri celebration on 29 April 2024
- Protocol and social etiquette course on 29 September 2024
- Deepavali celebration on 20 November 2024
- Malam Mesra Kenangan on 5 December 2024

Figure 2.19 Administration Unit Programmes and Activities 2024

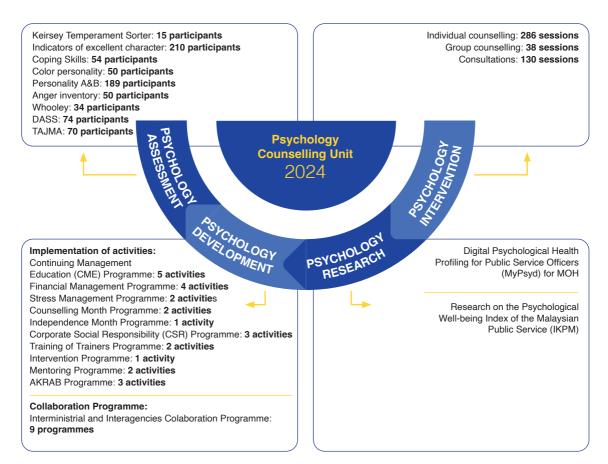


Figure 2.20 Psychology Counselling Unit Programmes and Activities 2024



Image 2.18 Star Rating Recognition and Special Awards for the Jiwa Merdeka Competition between Ministries 2024

INFORMATION RESOURCE MANAGEMENT

Information Resource Unit provides library and information services for the convenience of the MOH staffs. The unit's programmes and activities are as shown in below:

Information Management and Digitalisation

- Providing access to the Virtual Library Services (VLDS) database through https://vlib.ovidds.com/.
- Managing database subscriptions for access by MOH personnel nationwide. The databases include AccessMedicine, ClinicalKey for Nursing (e-books BibliU & Wiley), Emerald Insight (e-journal, Emerald Health and Social Care), OVID (e-journals published by Wolters Kluwer), LawNet, and eLaw.
- Providing knowledge-sharing sessions and raising awareness on the use of subscribed databases.

Collection Development and Advisory Services

- The management of documentation for materials received through purchase or donation.
- Advisory support for 78 MOH Medical Library.
- Conducting advisory service visits and inspections to selected MOH medical libraries.

Library and Information Services

- Managing library and information promotion activities through Postmaster.
- Planning and organizing library usage promotion programmes such as Jom Baca Bersama 10 Minit, Corporate Social Responsibility (CSR) Programme, Dekad Bahasa Kebangsaan and many more.

Figure 2.21 Information Resource Unit Programmes and Activities 2024

RECORDS MANAGEMENT

Records Management Unit is responsible for managing records in MOH including monitoring the implementation of the Digital Document Management System (DDMS) as well as MOH personnel files. Summary of programmes and activities of this unit is as follows:



Figure 2.22 Records Management Unit Programmes and Activities 2024

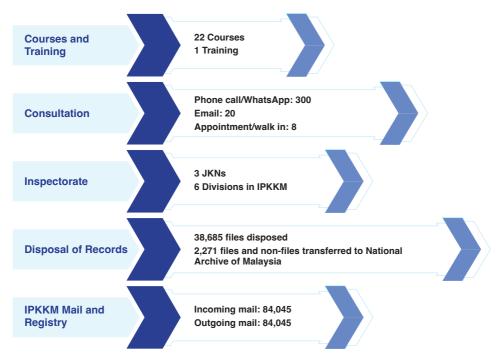


Figure 2.23 Record Management Achievements 2024

QUALITY & KEY PERFORMANCE INDICATOR (KPI)

INNOVATION AND QUALITY



Figure 2.24 Innovation and Quality Programme 2024

KEY PERFORMANCE INDICATOR (KPI)

MOH Initiatives under the Strategic Framework of Malaysia MADANI (KSMM) 2024

KPI Unit coordinates six (6) MOH reports under KSMM 2024 periodically to the Performance Acceleration Coordination Unit (PACU), Prime Minister Department (JPM).



Figure 2.25 **KSMM Initiatives 2024**

Mid-Term Review of KPI 2024 For Penjawat Pengurusan Tertinggi Perkhidmatan Awam (PPTPA) Tier 1, Tier 2 and Tier 3, MOH

BKP organised a Mid-Term Review Meeting for PPTPA Tier 1, Tier 2 and Tier 3 (Management) MOH for 2024 which was chaired by KSU on 23 September 2024.

SPECIAL TASK & EKOSISTEM KONDUSIF SEKTOR AWAM (EKSA)

Program MADANI Rakyat (PMR) for Six (6) Zones and Dua (2) Tahun bersama Kerajaan **MADANI** Programme

BKP is the main secretariat of MOH for PMR in six (6) zones across Malaysia throughout 2024, as well as the Dua (2) Tahun bersama Kerajaan MADANI Programme, which was held at the Kuala Lumpur Convention Centre from 22-24 November 2024. These programmes were also attended and officiated by the Prime Minister.

Launch of EKSA MOH Guideline Book 2024 Edition

The guideline book has been developed according to the Pekeliling Kemajuan Perkhidmatan Awam (PKPA) Bilangan 1 Tahun 2022 was launched by the Minister of Health on 20 November 2024.

INFORMATION MANAGEMENT DIVISION (BPM)

EXPANSION OF HOSPITAL INFORMATION SYSTEM

As part of the ongoing efforts to digitalise Electronic Medical Records (EMR), the Hospital Information System (HIS) and its subsystems Central Sterile Supply Services Information System (CenSSIS), Radiology Information System (RIS@KKM) and Picture Archiving and Communication System (PACS) have been gradually rolled out across MOH facilities. The implementation of HIS@KKM at Hospital Sultan Ismail aims to replace the legacy hospital information system, covering all wards, departments, clinics and laboratories starting from 30 October 2024. Additionally, the Enterprise Management (EM HIS) system at Hospital Sungai Buloh was upgraded from version 5.x to 12.x on 12 March 2024.



Image 2.19 Implementation HIS@KKM at Hospital Sultan Ismail

Additionally, the PACS has been extended to four (4) hospitals within the Ipoh Cluster, including Hospital Raja Permaisuri Bainun, Hospital Sungai Siput, Hospital Kampar and Hospital Batu Gajah. The PACS has been in operation since 15 July 2024, enabling the digital sharing of radiological information across these hospitals.



Image 2.20 Implementation of PACS at Ipoh Cluster Hospitals

The standalone version of the RIS@KKM began operation at the Department of Radiology, Hospital Tengku Ampuan Afzan on 1 January 2024, aimed at enhancing the effectiveness and efficiency of healthcare services.

BPM has taken a proactive approach by fully leveraging its in-house technical expertise and talent to implement the deployment of the CenSSIS through coaching at Hospital Sultan Idris Shah (HSIS) and Hospital Sungai Buloh. The system was implemented at the Central Sterile Supply Unit (CSSU), Pusat Jantung HSIS on 2 December 2024. The deployment of CenSSIS was also carried out at Hospital Sungai Buloh, with the kick-off meeting held on 14 May 2024.

BPM also provided project management consultancy services for the preparation of the Project Initiation Document for the Forensic Information System (FrIS) development project at the National Institute of Forensic Medicine from 2 April 2024 to 29 May 2024.

Overall, this expansion is carried out in line with the digitalisation direction of the healthcare sector to enhance the efficiency of treatment and healthcare services (continuity of care) in a more efficient and end-to-end manner. A summary of the HIS expansion in 2024 is shown in **Figure 2.26**.

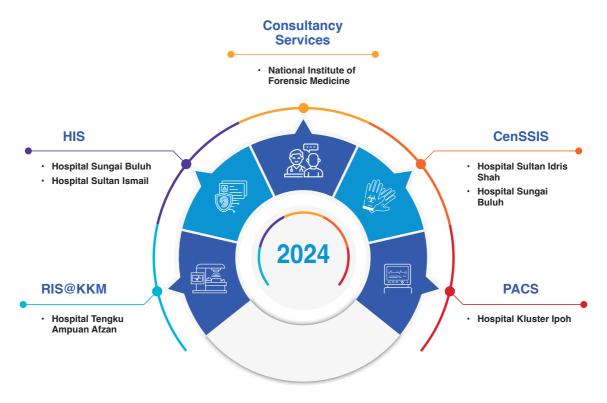


Figure 2.26 Expansion of Hospital Information System 2024

DEVOPS FOR EPLACEMENT

The DevOps initiative at MOH began in 2023 with training and support from the National Digital Department (JDN). DevOps emphasizes effective collaboration between software development team and Information Technology (IT) operation team to produce high-quality systems using the latest tools and supporting cloud native application development. To ensure the success of this initiative, the Medical, Dental and Pharmacy Officer Placement Selection System (ePlacement) has been selected as a pilot system that is fully developed using in-house expertise. The project team consists of officers from BPM and Human Resource Division (BSM).

A total of 26 coaching and training sessions by JDN were conducted, involving 25 officers from 8 November 2023 to 7 May 2024. The development of ePlacement was carried out concurrently during these sessions. In appreciation of JDN's cooperation, an appreciation ceremony was held on 26 August 2024. During this prestigious event, a certificate presentation session was held to recognise JDN and the DevOps ePlacement team members as a token of appreciation for their contributions and dedication.

Additionally, the ePlacement project team was invited to share their experiences and showcase the outcomes of ePlacement development at the DevOps Seminar organised by JDN at Hotel Tenera Bangi on 3 September 2024. ePlacement successfully launched on 19 September 2024, beginning with the placement selection for Pharmacists (Contract), followed by the selection of permanent officers from 5-11 November 2024.

Following the successful implementation of DevOps for the ePlacement system, BPM plans to expand this initiative to other in-house systems to be developed in 2025. Furthermore, BPM also plan to deploy ePlacement in the KKMCloud@CFA environment by the end of 2025 to fully leverage cloud computing technology, enabling more dynamic placement processes that meet the expectations of all stakeholders.



Image 2.21 DevOps ePlacement Team



Image 2.22 DevOps Appreciation Ceremony with JDN

INFORMATION SECURITY MANAGEMENT AUDIT

Information Security Management Audit at MOH aims to assess and monitor compliance with acts, policies, circulars and directives in force. This activity is crucial in ensuring effective information security management based on the Information Security Management System (ISMS) Standard ISO/IEC 27001:2013. Besides compliance assessment, it also serves as a medium to raise awareness and provide exposure to best practices in Information & Communications Technology (ICT) security management.

Information Security Management Audit plays an essential role in maintaining and enhancing the information security framework within MOH. The continuous efforts in assessing and promoting best practices ensure MOH facilities comply with ISMS ISO/IEC 27001:2013 and provide a secure environment for information management. In 2024, a total of five (5) audits were conducted at Jabatan Kesihatan Wilayah Persekutuan Kuala Lumpur & Putrajaya (JKWPKL&P), JKN Sarawak, JKN Johor, JKN Perlis and JKN Pahang.



Image 2.23 Information Security
Management Audit in
JKWPKL&P



Image 2.24 Information Security
Management Audit in
JKN Sarawak



Image 2.25 Information Security Management Audit in JKN Pahang

MOH GUIDELINES FOR THE PREPARATION OF ICT NETWORK EQUIPMENT SPECIFICATIONS

The MOH Guidelines for the Preparation of ICT Network Equipment Specifications were established to provide basic guidance to MOH agencies and facilities in preparing general network equipment specifications, with the aim to ensure consistency in ICT network infrastructure within MOH. The establishment of these guidelines are crucial as a reference document for determining ICT network equipment specifications to ensure network accessibility and cost efficiency for MOH.

These guidelines will assist ICT officers at facilities that require advice regarding the basic preparation of ICT network equipment specifications in the procurement documentation process. BPM organised a workshop attended by representatives from JDN, JKN, selected healthcare facilities and institutions to gather ideas and insights for further refinement of the guidelines.

In May 2024, the guidelines were reviewed and verified by JDN. Subsequently, on 2 September 2024, the guidelines received approval in the MOH ICT Steering Committee (JPICT) Meeting No. 6 of 2024.

On 5 September 2024, the guidelines were officially distributed to all healthcare facilities as a reference and guide in preparing network equipment specifications for procurement purposes.





Image 2.26 MOH Guidelines for the Preparation of ICT Network Equipment Specifications

CHAPTER 3 FINANCE

FINANCE DIVISION

The management of finances within the MOH is entrusted to the Finance Division, which holds the responsibility of overseeing the ministry's budget and revenue, as well as ensuring compliance with financial policies and regulations. This division comprises three (3) branches, namely Cawangan Dasar Kewangan, Cawangan Pengurusan Hasil and Cawangan Pengurusan Belanjawan.

BUDGET MANAGEMENT

MOH was allocated RM41.22 billion in 2024 whereby RM35.15 billion was for Operational Budget (B42) and RM6.07 billion for Development Budget (P42).

OPERATING BUDGET PERFORMANCE IN 2024

In 2024, MOH had spent RM33.96 billion (96.61%) of its total budget. The highest operating budget allocation was for the Medical Programme with RM14.15 billion (40.25%). The allocation and expenditure of each programme in 2024 as shown in **Table 3.1**.

Table 3.1 Allocation and Expenditure of Operating Budget by Programme 2024

Programme	Allocation (RM)	Expenditure (RM)
Medical	14,153,378,308	14,019,785,759
Special Programme	8,044,523,300	7,357,139,915
Public Health	6,415,729,100	6,381,635,570
Management	2,569,856,800	2,270,639,330
New Policy	123,000,000	122,256,605
Financial Commitment	1,800,000,000	1,785,825,493
Oral Health	1,256,323,711	1,250,913,138
Research & Technical Support	424,009,289	410,233,084
Pharmaceutical Services	246,354,400	244,140,605
Food Safety & Quality	117,006,892	114,646,776
Total	35,150,181,800	33,957,216,274

MEDICAL BENEFITS FOR FEDERAL PUBLIC SERVICE RETIREES AND VETERANS WITH PENSION

Beginning 1 June 2017, MOH had taken over the role of management related to medical benefits given to federal public service retirees and veterans with pension including eligible family members. This role also involves the Ministry of Higher Education (MOHE) and the Ministry of Defence (MINDEF) which covers the following functions and roles:

- i. Coordination of health budget for federal public service retirees
- ii. Processing of claims for reimbursement of medicines, medical devices and emergency treatments
- iii. Appointment of dialysis panels for retirees
- iv. Other matters relating to medical treatment benefits for federal public service retirees and veterans with pension

In 2024, RM590.53 million has been disbursed to cater for the medical treatment of pensioners at MOH healthcare facilities, university hospitals, Armed Forces Hospital and Retirement Fund (Incorporated) (KWAP). A total number of 419 dialysis panels have been appointed by MOH for dialysis treatment of 662 pensioners in the year 2024.

REVENUE MANAGEMENT

In 2024, MOH generated a total revenue of RM1.12 billion. Medical fees revenue collection formed the major part of the total revenue which contributed RM571.34 million or 50.86% to the total revenue. The breakdown of revenue categories is detailed in **Table 3.2**.

Table 3.2 Revenues Collected by Classification 2024

Code	Code Classification	Amount (RM)	(%)
71000	License, Registration Fees & Permits	33,398,064.19	2.97
72000	(i) Medical Fees	571,342,203.27	50.86
	(ii) Others (non-medical fees)	67,499,628.08	6.01
73000	Sales of Goods	6,151,801.62	0.55
74000	Rentals	46,001,337.33	4.09
75000	Interests & Return on Investment	405,353.31	0.04
76000	Fines & Penalties	163,518,364.04	14.55
77000	Contributions & Compensations from Overseas and Local Contributions	10,879,342.36	0.97
80000	Non-revenue Receipts	224,193,561.75	19.96
	Total	1,123,389,655.95	100.00

In 2024, the total outstanding medical fee charges were RM40.89 million which accounted for 7.16% of the RM571.34 million revenue collected from medical fees. 82.51% of the total outstanding medical fees were attributed to non-Malaysian patients. **Table 3.3** presents a detailed breakdown of collection records and outstanding amounts categorised by citizenship while **Figure 3.1** illustrates the medical fees revenue collected and outstanding from 2020-2024.

Table 3.3 Outstanding and Revenues Collected under the Fees (Medical)
Order according to Citizenship 2024

Citizenship	Outstanding	Fees	Fees Collected		
Citizensinp	(RM)	(%)	(RM)	(%)	
Malaysian	7,149,700.83	17.49	286,257,400.09	50.10	
Non-Malaysian	33,743,883.54	82.51	285,084,803.18	49.90	
Total	40,893,584.37	100.00	571,342,203.27	100.00	

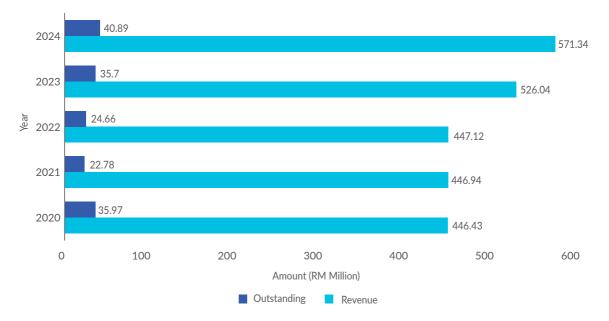


Figure 3.1 Collected and Outstanding Medical Fees Revenues 2020-2024

GO CASHLESS KKM CAMPAIGN

The MOH cashless payment campaign initiative which began in October 2022 was further expended in 2024. The *Go Cashless KKM* campaign, launched in June 2023, which involved various promotional activities and engagement sessions with the public in MOH facilities nationwide, continued in 2024 with the implementation of the *Go Cashless 2.0* campaign. As a result, MOH recorded a significant increase in cashless payment transactions at all MOH facilities in 2024.

The total number of ePayment transactions has increased from 1.32 million in January 2024 to 1.92 million in December 2024. This represents a notable increase, rising from 62.97% to 75.50%. The increase in the number of recorded ePayments compared to conventional (cash and cheque) transactions in 2024 as shown in **Figure 3.2**.

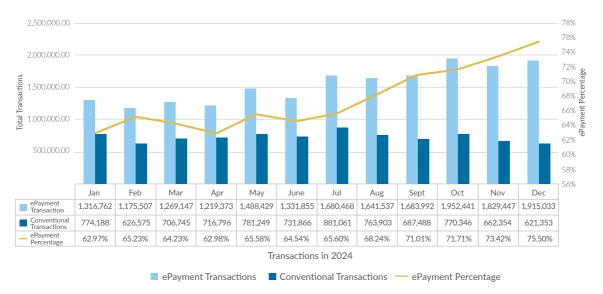


Figure 3.2 ePayment Compared to Conventional Transactions 2024

FINANCIAL AID AND GRANT

MEDICAL ASSISTANCE FUND (TBP)

TBP was established in 2005 under Section 10 of the Financial Procedure Act 1957. It is governed by the Trust Deed and TBP Guidelines. TBP aims to assist underprivileged patients in financing their treatment costs and purchase of medical supplies including medicines at MOH hospitals and public university hospitals. **Figure 3.3** below shows the allocation of TBP, the number of patients and the total amount of TBP approvals from 2005-2024. In 2024, the total TBP benefit recipients was 4,667 covering 24 different disciplines as shown in **Figure 3.4**.

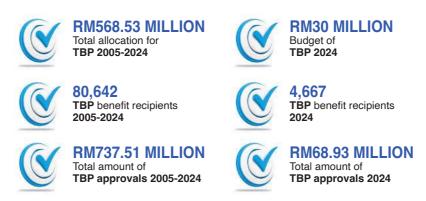


Figure 3.3 TBP Allocation 2005-2024

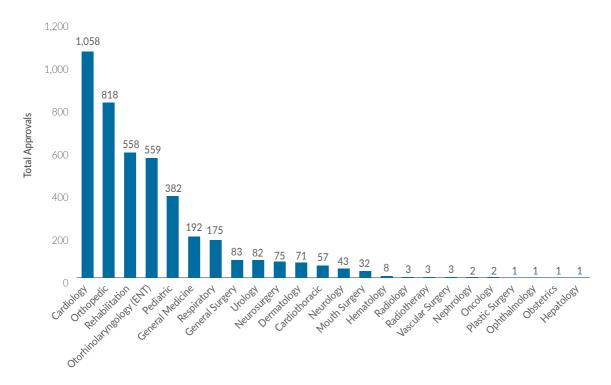


Figure 3.4 TBP Approval by Disciplines 2024

SUBSIDY PROGRAMME FOR HAEMODIALYSIS TREATMENT AND ERYTHROPOIETIN (EPO) INJECTION

Since 1 April 2001, towards helping the poor and underprivileged patients, subsidies for haemodialysis treatment and EPO injection are given to patients who seek treatment at NGO haemodialysis centres. This financial assistance is in the form of subsidised treatment cost of RM100 for each treatment of haemodialysis while the subsidy for each EPO injection is RM18.50.

The total overall subsidy for each patient, which includes haemodialysis treatment and EPO injection, is RM1,640.50 per month. The cumulative number of patients that received subsidised treatment in 2024 is 1,661. The total allocation in 2024 was RM27.08 million with expenditure of RM23.56 million. The total number of NGOs that have been registered under this programme is 63 NGOs involving 138 dialysis centres as shown in **Figure 3.5**.

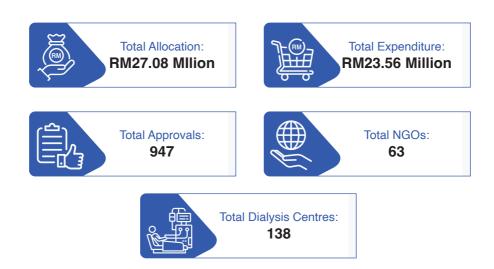


Figure 3.5 Allocation and Expenditure of Subsidy Programme for Haemodialysis Treatment and EPO Injection 2024

FINANCIAL ASSISTANCE TO NGOs

Financial assistance to NGOs was allocated RM2.5 million, in budget 2024. This included disbursement of aid to 19 NGOs for palliative care (RM1.73 million), 13 NGOs for tuberculosis treatment (RM0.42 million) and 22 NGOs for health promotion (RM0.25 million). The total allocation and expenditure of financial assistance to NGOs in 2024 as shown in **Figure 3.6**.

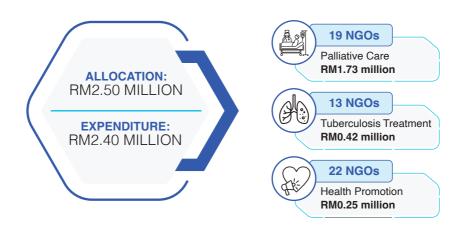


Figure 3.6 Allocation and Expenditure for Financial Assistance to NGOs 2024

Overall, the total expenditure for TBP, Haemodialysis Treatment Cost Subsidies and financial aid to NGOs from 2019-2024 as shown in **Table 3.4**.

Table 3.4 Expenditure and Number of Benefit Recipients under MOH Medical Assistance Programme 2019-2024

Type of	Expenditure and Number of Patients/NGOs					
Assistances	2019	2020	2021	2022	2023	2024
Medical Assistance Fund (TBP)	RM46.5 mil (4,615 patients)	RM40.5 mil (3,330 patients)	RM44.2 mil (3,459 patients)	RM48.9 mil (3,812 patients)	RM63.5 mil (4,588 patients)	RM68.9 mil (4,667 patients)
Haemodialysis Treatment Cost Subsidies	RM35.45 mil (2,015 patients)	RM33.38 mil (2,339 patients)	RM36.44 mil (2,615 patients)	RM26.97 mil (2,881 patients)	RM24.63 mil (1,894 patients)	RM23.56 mil (1,661 patients)
Financial Assistance to NGOs	RM4.76 mil (66 NGOs)	RM3.43 mil (40 NGOs)	RM3.13 mil (44 NGOs)	RM4.83 mil (81 NGOs)	RM2.31 mil (58 NGOs)	RM2.4 mil (54 NGOs)

PROCUREMENT AND PRIVATISATION DIVISION (BPPs)

The BPPs is responsible for planning, managing and implementing procurement, privatisation programmes as well as asset and store management in MOH.

This division serves as the secretariat for:

- i. The Procurement Board of the Ministry of Health (LPKKM) consist of senior government officers and representatives from central and technical agencies.
- ii. The Government Movable Asset Management Committee (JKPAK), overseeing the management of MOH's movable assets and storage facilities.
- iii. Penerimaan Hadiah Bukan Tunai bagi Kegunaan Jabatan where the Approval Authority lies with the KSU.

BPPs is responsible for managing privatisation programmes involving medical supply and logistics services, procurement and maintenance of medical equipment at MOH clinics, Hospital Support Services as well as Foreign Workers Health Supervision and Inspection Services (FOMEMA). These privatisation programmes are in line with the National Privatisation Policy. Therefore, the programmes have been closely monitored and improved constantly to ensure they achieve their objectives and desired output. The division also regulates the management of stores, inventories and MOH assets to ensure all applicable rules are always adhere to.

PROCUREMENT PERFORMANCE

In 2024, MOH undertook procurement amounting to RM2,834,736,056.00 and obtained savings of RM130,721,719.80 or 4.61% which covered the procurement of pharmaceuticals, medical equipment, services, uniform (fabric), medical gases, information and communications technology (ICT), vehicles and toner supplies. **Table 3.5** shows the achievement of MOH procurement in 2024 by categories.

In line with the government resource optimisation policy, MOH has secured savings in procurement expenditure to ensure the allocation received is sufficient to cover core services and patient care needs. This was also to ensure healthcare services were not affected. The savings obtained were based on the comparisons between the department's estimated price with contract price offered as well as negotiated prices from companies.

Table 3.5 Achievement of MOH Procurement 2024

Category	Procurement Value (RM)	Savings (RM)
Pharmaceutical	1,041,787,453.00	1,7953,632.80
Medical Equipment & Vehicle	452,970,294.00	37,521,172.00
Services	650,557,721.19	18,886,657.86
ICT	99,064,046.80	4,438,755.40
Toner	42,844,710.38	4,688,103.65
Multimodal Transport Operator (MTO)	9,758,309.13	421,795.87
Medical Gas	439,404,144.95	55,740.00
Uniform (Fabric)	98,349,394.56	46,755,862.26
Total	2,834,736,056.00	130,721,719.80

MANAGEMENT OF PRIVATISATION OF SUPPLIES AND SERVICES

BPPs is responsible for managing three (3) privatisation projects and one (1) outsourcing services-based project as follows:

Service privatisation projects:

- i. Hospital Support Services (PSH)
- ii. Medical Equipment Enhancement Tenure (MEET)
- iii. Concession of *Perkhidmatan Logistik Bekalan Perubatan* Logistics Concession that replaced *Makmal Ubat* and *Stor* Concession (starting from 1 July 2023)

Outsourcing project:

 Foreign Workers Medical Examination Coordination and Surveillance System (FWMES) in Peninsular Malaysia and FT Labuan

FWMES Concession Agreement was signed by MOH, the Ministry of Home Affairs, and FOMEMA Sdn. Bhd. on 16 December 2023. This concession agreement covers Peninsular Malaysia and the FT Labuan only. The primary purpose of the annual medical examination for foreign workers is to prevent the spread of infectious diseases to Malaysian citizens and to ensure that only healthy foreign workers are employed in Malaysia. In 2024, a total of 2.2 million foreign workers were confirmed to have undergone health examinations coordinated by FOMEMA Sdn. Bhd.

These privatisation and outsourcing projects have provided various benefits to the government. The implementation of the PSH and MEET projects have enabled comprehensive maintenance on the facility and biomedical equipment. The MOH concession of *Perkhidmatan Logistik Bekalan Perubatan* has facilitated the supply of drugs and non-drugs to MOH facilities. The FWMES project has enabled MOH in ensuring only healthy foreign workers are eligible to work in Malaysia.

ePEROLEHAN (eP) SYSTEM

The usage of eP in 2024 recorded the highest transaction value in the past five (5) years, with a total value of RM8,302,665,831.00. This achievement reflects a strong performance at the RC level, where procurement was fully carried out through the eP system, from the advertisement to the payment process. The performance achievement of the eP system usage for 2020-2024 as shown in **Table 3.6**.

Table 3.6 MOH Achievements in the Use of the eP System 2020-2024

Year	Total Transaction	Transaction Value (RM)	Budget Allocation (RM)	Achievement (%)
2020	715,345	5,731,877,322.29	7,000,000,000.00	81.89
2021	695,556	6,601,673,230.00	7,000,000,000.00	94.31
2022	776,779	7,465,679,863.00	6,000,000,000.00	124.43
2023	818,881	7,534,635,105.00	6,000,000,000.00	125.58
2024	841,773	8,302,665,831.00	7,000,000,000.00	118.61

Note:

Amount of Budget Allocation (RM) is based on amount that has been declared to MOF for the respective years

Source: eP System, MOF

To ensure a better understanding, MOH has carried out series of engagement sessions and continuous updates regarding the usage of eP system through online briefing sessions as well as circular letters to all RCs. Information on the latest amendments to the eP system is also disseminated through WhatsApp application as it is fast and effective communication medium.

MANAGEMENT OF MOVABLE ASSETS AND STORAGE

As of 31 December 2024, MOH reported a total of 3,057,504 units of movable assets, valued at RM16,878,285,289.62 in acquisition costs. The remaining stock as at 31 December 2024 is valued at RM877,790,529.43 with MOH achieving a notable 7.25 Kadar Pusingan Stok (KPS) for store management performance throughout 2024. Reports on movable assets and store management are required to be prepared quarterly and validated during the JKPAK meetings to ensure compliance with the procedures and circulars issued by Ministry of Finance (MOF).

ACCOUNT DIVISION (BA)

BA is responsible for providing efficient and high-quality accounting services to ensure that all transactions from RCs are accurately and completely recorded within the stipulated timeframe.

FINANCIAL MANAGEMENT

BA is responsible for preparing the Ministry's Financial Statements (PKK) for the Pre-Transition Period (Accrual Ledger) on a monthly basis, as well as the annual PKK to be submitted to the Accountant General's Department of Malaysia (JANM). These PKK are prepared to report the Statement of Financial Position, Statement of Financial Performance, Statement of Changes in Net Assets, and Notes to the Financial Statements. The PKK also contains information on the ministry's expenditure performance and revenue collection. The Summary of MOH Financial Position and Performance for 2024 as shown in **Figure 3.7**.

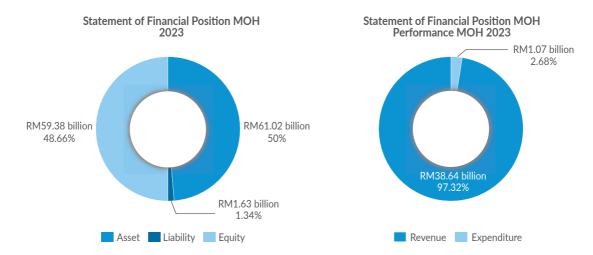
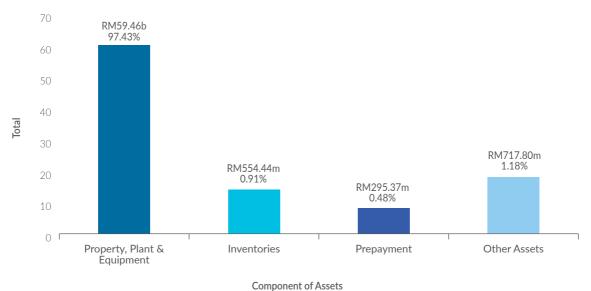


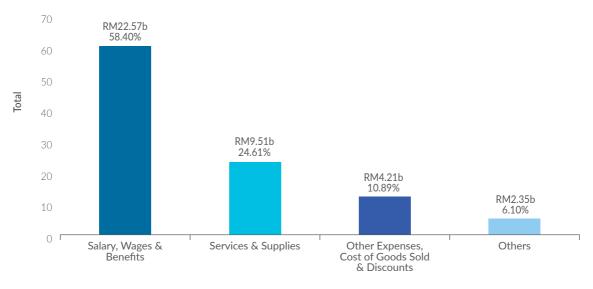
Figure 3.7 MOH Financial Position and Performance 2024

Based on the Ministry's Statement of Financial Position, assets recorded the highest amount of RM61.02 billion, with the Property, Plant & Equipment component accounting for the highest transaction value at RM59.46 billion (97.43%). Meanwhile, expenditure recorded the highest amount in the Ministry's Statement of Financial Performance, which stands at RM38.64 billion. The highest expenditure component is Salaries, Wages & Benefits, amounting to RM22.57 billion (58.40%). MOH's Assets Position and Expenditures Performance for 2024 are shown in **Figure 3.8.**

MOH's Assets Position 2024



MOH's Expenditures Performance 2024



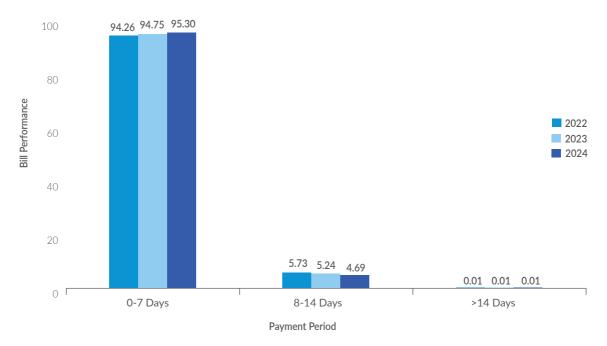
Component of Expenses

Figure 3.8 MOH's Assets Position and Expenditures Performance 2024

As of 31 December 2024, the Ministry's Financial Position recorded total accumulated assets of RM61.02 billion, consisting of liabilities amounting to RM1.63 billion and equity valued at RM59.39 billion. The Ministry's Financial Performance reflects expenditures exceeding revenues by RM37.57 billion. Total expenditures as of 31 December 2024, stood at RM38.64 billion, while total accumulated revenues amounted to RM1.07 billion.

BILL PERFORMANCE MANAGEMENT

The overall bill payment performance within 14 days for the year 2024 recorded a rate of 99.99%, involving 2,230,188 bills with a total payment amounting to RM15.98 billion. A total of 95.30% of bills were paid within 0-7 days, an increase compared to 94.26% in 2022 and 94.75% in 2023. Late payments exceeding 14 days continued to decline by 55.14% since 2022, with only 0.01% (131 bills) recorded for 2024, amounting to RM2.17 million. Overall, bill payment performance within 14 days has remained consistent at a rate of 99.99% from 2022-2024, as shown in **Figure 3.9.**



Year	0-7 Days	8-14 Days	>14 Days	Total Bills
2022	2,091,584	127,114	292	2,218,990
2023	1,981,387	109,635	136	2,091,158
2024	2,125,403	104,654	131	2,230,188

Figure 3.9 Bill Payment Performance within 14 Days 2022-2024

MOH ACCOUNTANTS CONFERENCE

The MOH Accountants Conference 2024 was held from 22-24 June 2024 at Langkawi. The conference was officiated by the Deputy Secretary-General (Finance) and was attended by 73 accountants from RCs across Malaysia. The main objectives of the conference were to promote positive values among MOH accountants, equip them with leadership, interpersonal and communication skills as well as enhance their knowledge to elevate professionalism in performing daily tasks. This conference served as a significant platform to strengthen the competence and professionalism of MOH accountants.



Image 3.1 MOH Accountant Conference 2024

ENGAGEMENT SESSIONS ON ACCOUNTING AND FINANCIAL MANAGEMENT

Throughout 2024, the division successfully conducted 14 Engagement Sessions on Accounting and Financial Management with RCs under MOH across all states. These sessions involved the participation of RC Heads, Accounting Officers, and Financial Officers from all MOH RCs. The sessions served as a platform to discuss accounting performance and address issues faced in carrying out accounting and financial tasks. Key topics covered included the management of trust accounts and deposits; audit document management; asset accounting; bill payment performance and cost implementation as well as the management of payments, receipts and audit findings by JANM for the respective states involved. These sessions successfully achieved their objectives by enhancing understanding and improving the effectiveness of accounting and financial management at the RC level.



Image 3.2 Engagement Session on Accounting and Financial Management with RCs in Kedah



Image 3.3 Engagement Session on Accounting and Financial Management with RCs in Negeri Sembilan

FINANCIAL AND ACCOUNTING TRAINING WITH MOH RCs

In 2024, a total of 29 financial and accounting training sessions were successfully conducted, involving 2,087 officers. These sessions covered various topics, including trust account and deposits management, as well as management accounting, asset accounting and emolument management.

Federal Government Account Closing Process Briefing 2024 was organised online on 22 November 2024 for all RCs at the IPKKM. The briefing aimed to inform about to the final deadlines for financial document submissions, ensuring a seamless account closing process for 2024.



Image 3.4 Training on Deposit Account Management for RCs in the Northern Zone



Image 3.5 Refresher Course on PTJ
Based Costing



Image 3.6 Training of Trainers (ToT) on Aset Accounting in iGFMAS

SPECIAL AUDIT ON IMMOVABLE ASSETS LAND (ATAT) AND BUILDINGS (ATAB) 2024

The Special Audit on ATAT and ATAB at the RC was conducted from February to October 2024, covering 14 states. This audit was carried out by the BA and the State or Branch Accounting Offices in collaboration with the Development Division, Engineering Services Division and JKN.

The audit involved a 100% review of documents and physical site inspections of ATAT and ATAB owned by the MOH as of 31 December 2023. The objective was to verify asset ownership, physical existence and the valuation of land and building, ensuring these were properly accounted for in the PKK with accurate amounts supported by complete documentation. A total of 7,712 Asset IDs for land and buildings were reviewed during this exercise.



Image 3.7 Meeting for Special Audit JKN Johor



Image 3.8 Meeting for Special Audit JKN Pahang

CHAPTER 4 PUBLIC HEALTH

PUBLIC HEALTH PROGRAMME

The Public Health Programme is responsible for assisting individuals and communities in achieving and maintaining optimal health levels through integrated preventive, screening, and disease control services, as well as curative and rehabilitative care at all levels of health services. It also promotes healthy lifestyles to become a practice among every individual and society. The divisions under the Public Health Programme are as follow:

- i. Public Health Development Division (BPKA)
- ii. Disease Control Division (BKP)
- iii. Family Health Development Division (FHDD)
- iv. Nutrition Division
- v. Health Education Division (BPK)

PUBLIC HEALTH DEVELOPMENT DIVISION (BPKA)

The roles of BPKA include the following:

- Planning, coordinating and monitoring the delivery of health services for the rural Orang Asli community through the *Pasukan Bergerak Orang Asli* (PBOA) and Flying Doctor Service (PDU).
- ii. Ensure performance monitoring of implementation, Quality Management System for Public Health Programmes.
- iii. Ensuring training planning in and out of the country for the Public Health Programmes.
- iv. Ensuring compliance and coherence of effective and sustainable policies between national health policies and international health policy benchmarks in arenas such as the World Health Organisation (WHO), Association of Southeast Asian Nations (ASEAN), Organisation of Islamic Cooperation (OIC) and others.
- v. Reviewing the proposed allocation and procurement requirements for vaccines not under the National Immunisation Programmes, as well as non-drugs and reagents in Public Health.
- vi. Ensure enforcement activities in the field are carried out.

ORANG ASLI HEALTH AND WELL-BEING AGENDA (OASS)

More than a decade after assuming responsibility over health and medical services for the *Orang Asli* from the Department of *Orang Asli* Development (JAKOA), MOH remains committed to ensure that the health status of the *Orang Asli* is on par with that of the general population in Malaysia. By prioritising culturally sensitive approaches, MOH with collaboration from JAKOA is involved in implementing targeted health programmes, improving access to healthcare facilities, and fostering community engagement to address the health need with the aim to empower the Orang Asli in managing health and well-being effectively.

According to the findings of the *Orang Asli* Health Survey (OAHS) conducted in 2022, there is a health status disparity between the *Orang Asli* and the general population, especially in remote areas. Social Determinants of Health (SDH) elements, such as socio-economic factors and education have been found to be the cause of the health gap in the *Orang Asli* community.

Most of these factors are beyond the purview of the MOH and require commitment and support from various stakeholders. By implementing comprehensive strategies that focus on improving SDH, it is possible to enhance the overall well-being of the *Orang Asli* population and bridge the existing health gap.

To address this issue, two (2) committees at the ministry level have been established, namely the Steering Committee on SDH for *Orang Asli* and the Technical Committee on SDH for *Orang Asli*. These committees consist of 18 representatives from relevant ministries and agencies, including representatives from the *Orang Asli* community. By fostering collaboration among various stakeholders, the committees aim to create a comprehensive approach that addresses the unique challenges faced by the *Orang Asli*, ultimately promoting health equity and sustainable development.

The National Strategic Plan for *Orang Asli* based on SDH, known as the *Orang Asli* Health and Well-being Agenda (OASS), will be established with the involvement and cooperation of various ministries and agencies through the whole of government and society approach. The collaboration aims to ensure that the unique needs of the *Orang Asli* community are met effectively and sustainably. By integrating diverse perspectives and expertise, the OASS is poised to create impactful health initiatives that promote overall well-being and address the social determinants affecting this community. **Image 4.1** shows a meeting session of the National Strategic Plan Development on SDH for *Orang Asli* in Subang Jaya, Selangor, on 16-18 July 2024.





Image 4.1 Strategic Plan Development Meeting Session on SDH for the Orang Asli

THE PUBLIC HEALTH PROFESSION DEVELOPMENT

BPKA via Public Health Profession Development Section is responsible for the development and the advancement of the profession in the Public Health Programme. The section ensures that staff in the Public Health Programme meet the competency standard in delivering services to citizens. Among the key activities carried out by this section are:

- i. Public Health Medicine Specialty Service Development
- ii. Public Health Professions Development
- iii. Human Capital and Continuing Professional Development (CPD)
- iv. Monitoring of Public Health Facilities Usage for Training

The section monitors the training planning and the implementation to the staff in the Public Health Programme. In 2024, a total of 6,712 courses were conducted or participated throughout the country with value of RM10,127,518.04 as compared to 6,331 courses with value of RM6,823,030.20 in 2023. There were 19 staff sent abroad to attend short-term training courses in 2024 with a value of RM329,116.43. The overall achievement for In-service Training Programme carried out in year 2023 and 2024 are as shown in **Table 4.1**.

Table 4.1 In-service Training Achievement for Public Health Programme 2023-2024

	Achievement				
	20	2023		2024	
Training	No. of Course Attended	Expenditure (% from Annual Allocation)	No. of Course Attended	Expenditure (% from Annual Allocation)	
Local	6,331	RM6,823,030.20 (99.47%)	6,712	RM10,127,518.04 (98.61%)	
Overseas	7	RM123,586.64 (91.89%)	19	RM329,116.43 (80.52%)	

This section is also responsible for monitoring application and the usage of public health facilities in the District Health Offices, Health Clinics and Public Health Laboratories for training purposes. In 2024, a total of 33 facility usage applications were approved either for the renewal of a Memorandum of Agreement (MoA) or for additional facility applications involving 14 for Nursing Programmes, eight (8) for Allied Health Sciences Programmes, two (2) for Pharmacy Programme and nine (9) for Medical Programmes.

154TH SESSION OF THE WHO EXECUTIVE BOARD

Malaysia was represented at the 154th session of the WHO Executive Board by the Director-General of Health, who led the delegation, accompanied by MOH senior officers from 22 to 27 January 2024. As this session marked Malaysia's final term as an Executive Board Member, the delegation played a significant role, delivering 17 interventions on key technical and governance agenda items. These included Universal Health Coverage (UHC), Infection Prevention and Control, the Immunisation Agenda 2030 and Polio Eradication. The delegation also witnessed the historic endorsement of Dr. Saia Ma'u Piukala of Tonga as the Regional Director for the Western Pacific Region.

8TH INTERGOVERNMENTAL NEGOTIATING BODY (INB8)

The Global Health Section, in collaboration with the Disease Control Division and the Policy and International Relations Division, coordinated Malaysia's participation in the INB8 session from 19 February to 2 March 2024, via virtual platform from Kuala Lumpur. The secretariat facilitated the engagement of key stakeholders from various government ministries and supported

the Malaysian delegation attending in-person sessions at WHO Headquarters in Geneva. Contributions included providing technical input, drafting intervention notes and offering logistical and operational support throughout the negotiations.

SHORT-TERM ATTACHMENT OF MOH OFFICER AT WHO HEADQUARTERS, GENEVA

The Global Health Section organised a short-term attachment programme at WHO Headquarters in Geneva as part of the MOH's training initiative. In 2024, a representative from the Nursing Division participated in the programme from 23 to 25 May 2024. The three-day attachment focused on the UHC, Nursing Unit at WHO, followed by attendance at the 77th World Health Assembly (WHA77).

77TH WORLD HEALTH ASSEMBLY (WHA77)

The Minister of Health accompanied by the Director-General of Health and a representative from the Disease Control Division, led the Malaysian delegation to WHA77 from 27 May to 1 June 2024. Themed *All for Health, Health for All*, WHA77 addressed critical global health issues. Malaysia delivered intervention notes on topics including Antimicrobial Resistance, the End TB Strategy, the Roadmap for Neglected Tropical Diseases, Maternal, Infant & Young Child Nutrition, SDH and Economics for Health. This assembly marked a historic milestone as all 194 Member States adopted a package of amendments to the International Health Regulations (IHR). These amendments were the culmination of negotiations since 2022, aim to strengthen global preparedness and response to public health emergencies, including pandemics.

ASEAN 2025 WORKSHOP ON LANGUAGE OF MEETINGS AND NEGOTIATION

The Global Health Section of BPKA in collaboration with the Institute of Diplomacy and Foreign Relations (IDFR) successfully hosted the ASEAN 2025 Workshop on Language of Meetings and Negotiation on 4-5 March 2024. Expert trainers led sessions on negotiation skills, practical insights and role-play activities, engaging participants in a dynamic learning experience.

18TH ASEAN SENIOR OFFICIALS MEETING ON HEALTH DEVELOPMENT (SOMHD) AND RELATED MEETINGS

The 18th ASEAN SOMHD and Related Meetings held in Vientiane, Lao PDR, from 1-5 July 2024, focused on advancing the theme of *A Healthy, Caring, and Sustainable ASEAN Community.* Malaysia's delegation was led by the Deputy Director General of Health (Public Health) and included representatives from the Disease Control Division, the Public Health Development Division and the Policy and International Affairs Division. Highlights included updates from ASEAN Health Clusters (AHC) which included addressing new initiatives by Malaysia like the ASEAN Drug Security and Self Reliance (ADSSR) and ASEAN Prosperity Through Industry Sponsored Clinical Trials. Key discussions addressed regional health resilience, health system strengthening, and pandemic preparedness, supported by collaborations with international dialogue and development partners like ASEAN Plus Three nations, WHO, USAID, UNICEF and GAVI. The meeting reinforced Malaysia's leadership role, preparing for its chairmanship of the ASEAN Health Ministers Meeting 2024-2026.

16TH ASEAN HEALTH MINISTERS MEETING (AHMM) AND RELATED EVENTS

The 16th AHMM and related events were held in Vientiane, Lao PDR from 5-9 August 2024 addressed regional health challenges and strategies under the theme *Transforming ASEAN Health Development Resilience in a New Context*. Malaysia's delegation, led by Health Minister with Deputy Director General of Health (Public Health) actively participated in discussions on post-pandemic health system resilience, digital health innovations and collaborative strategies for public health emergencies. Key achievements included the adoption of Malaysia-led initiatives on quality healthcare and drug security, as well as discussions on universal health coverage and digital transformation in healthcare. Collaborative sessions with ASEAN Plus Three, China and the United States of America (USA) emphasised strengthening partnerships and advancing health security. Malaysia demonstrated its leadership and readiness to chair future ASEAN health meetings, solidifying its role in enhancing regional health development.

CONTINUING EDUCATION FOR PUBLIC HEALTH PHARMACY PERSONNEL

In 2024, seven (7) sessions were conducted including five (5) virtual continuing educations, to escalate knowledge and skills of public health pharmacy personnel. These sessions were attended by 2,731 pharmacy personnel along with 232 other healthcare professionals. The Public Health Pharmacy Seminar was held for the first time on 2-3 July 2024 at The Pearl Kuala Lumpur Hotel. This seminar successfully achieved its targeted objectives, which included:

- i. Exposure to pharmacy staff on the implementation of both communicable diseases (CDs) and non-communicable diseases (NCDs) programmes especially in Public Health.
- ii. Enhancing knowledge of pharmacotherapy updates for CDs and NCDs.
- iii. Strengthening pharmacy services delivery for CDs and NCDs.





Image 4.2 Public Health Pharmacy Seminar in Kuala Lumpur

APPOINTMENT OF AUTHORISED OFFICERS (PDK) AND DELEGATION OF AUTHORITY

The appointment of PDK under public health legislation aims to ensure that enforcement activities are carried out in accordance with the provisions of the legislation and compliance with Standard Operating Procedures (SOPs). In October 2024, the Control of Smoking Products for Public Health Act 2024 [Act 852] came into force. Overall, the number of appointments for PDK under public health legislation is as in **Table 4.2**.

Table 4.2 Appointment of PDK and Delegation of Authority 2020-2024

Appointment of PDK and Delegation of Authority	2020	2021	2022	2023	2024
PDK in Prevention and Control of Infectious Diseases Act 1988	793	940	1,523	964	350
Authorisation to Compound in Prevention and Control of Infectious Diseases Act 1988	247	34	26	36	25
PDK in Food Act 1983	651	926	1,535	1,028	368
Authorisation to Compound in Food Act 1983	380	800	1,387	949	324
Authorisation to Close Food Premises in Food Act 1983	80	91	70	102	43
Enforcement Officer Identity Card	291	322	311	201	46
PDK in Control of Smoking Products for Public Health Act 2024					6,312
Authorisation to Compound in Control of Smoking Products for Public Health Act 2024					6,265

PUBLIC HEALTH LEGISLATION

In 2024, 25 SOPs have been revised while nine (9) new SOPs have been enacted. The drafting of these new SOP includes the enforcement work process under the Public Health Smoking Products Control Act 2024 [Act 852] and public health legislative intelligence. In addition, the Inspectorate & Legislation Sector (SIP) provides technical advisory services related to the Amendment of the Infectious Disease Prevention and Control Act 2024 [Act 342] during the presentation and debate process in Parliament. For the monitoring of SOP compliance in the field, a total of 15 technical audits of enforcement and public health legislation have been conducted throughout the country.

INTELLIGENCE ACTIVITIES OF PUBLIC HEALTH LEGISLATION

Throughout the year 2024, a total of 8,522 public health legal intelligence activities have been carried out throughout the country. The details of the number of intelligence activities are as in **Table 4.3**.

Table 4.3 Intelligence Activity in Public Health Legislation 2023-2024

Year	Active Intelligence	Passive Intelligence
2023	1,762	109
2024	4,811	3,711

ENFORCEMENT OF DESTRUCTION OF DISEASE-BEARING INSECTS ACT 1975 [ACT 154]

In order to deal with the spread of dengue fever cases, a total of 12 series of *Ops Gempur Aedes* (OGA) at the national level were conducted throughout the year 2024. In addition, a total of 11,021 daily and monthly operations were conducted throughout the year. The overall achievement of Act 154 enforcement activities is as shown in **Table 4.4**.

Table 4.4 Enforcement of Destruction of Disease-Bearing Insects Act 1975 [Act 154] 2020-2024

Year	No. of Premises Inspected	No. of Premises with Positive Breeding	No. of Compound Issued	No. of Premises Closed	Total Amount of Compound Paid (RM)	Court Fine (RM)
2020	4,685,063	175,642	21,748	71	3,448,147	836,460
2021	3,953,480	140,415	21,976	52	2,507,818	536,450
2022	5,054,076	165,505	28,889	59	3,737,290	923,350
2023	6,404,983	206,558	36,426	79	5,498,477	2,349,950
2024	5,863,660	229,227	37,603	106	6,775,311	1,819,190

ENFORCEMENT OF THE CONTROL OF TOBACCO PRODUCT REGULATIONS 2004 (PPKHT 2004)

Until September 2024, a total of 13,561 operations were carried out across the country while ten (10) national-level operations were carried out to inspect 226,176 premises. As a result of enforcement, 42,518 tobacco products were confiscated with a value of RM259,267.35. The overall achievement of PPKHT 2004 enforcement activities is as shown in **Table 4.5**.

Table 4.5 Enforcement of the Control of Tobacco Product Regulations 2004 2020-2024

Year	No. of Section 32B Notice Issued	No. of Compound Offered	Amount of Compound Paid (RM)	Court Fine (RM)
2020	34,338	19,433	2,615,814	170,135
2021	15,163	12,012	1,493,617	51,280
2022	81,703	50,138	5,813,556	126,770
2023	112,455	63,039	8,378,472	281,819
2024	112,511	60,509	8,127,992	215,402

ENFORCEMENT OF CONTROL OF SMOKING PRODUCTS FOR PUBLIC HEALTH ACT 2024 [ACT 852]

This act was enforced starting 1 October 2024 replacing the enforcement of The Control of Tobacco Product Regulations 2004. This Act has a broader aspect including registration, advertisement, control of selling and purchasing tobacco product, smoking substance and tobacco product substitutes. In the period of three (3) months of enforcement, 4,595 enforcement actions have been conducted with 115,980 premises inspected. As a result, a total of 9,453 smoking products were confiscated valued at RM237,852.00. The overall enforcement achievements under Act 852 up to December 2024 are detailed in **Table 4.6** and **Image 4.3** show enforcement operations in the field.

Table 4.6 Enforcement of Control of Smoking Products for Public Health Act 2024 [Act 852] from October - December 2024

Year	No. of Section 47 Notice	No. of Compound	Amount of Compound
	Issued	Offered	Issued (RM)
Oct - Dec 2024	8,292	1,460	352,400





Image 4.3 Enforcement of Control of Smoking Products for Public Health Act 2024 [Act 852] Activities

ENFORCEMENT OF FOOD ACT 1983 [ACT 281] AND SUBSIDIARY REGULATIONS

This act is enforced to protect the public from food-related health risks starting from the preparation, selling and consumption of foods. Act 281 has two (2) subsidiary regulations namely Food Regulations 1985 and Food Hygiene Regulations 2009. In 2024, 107,951 food premises were inspected and 2,472 premises were instructed to close due to hygiene factors. **Table 4.7** below shows the enforcement outcome.

Table 4.7 Enforcement of Food Act 1983 and Subsidiary Regulations 2020-2024

Year	No. of Section 32B Notices Issued	No. of Compound Offered	Amount of Compound Paid (RM)	Court Fine (RM)
2020	19,571	14,842	4,149,146	739,970
2021	10,735	7,340	2,176,986	937,145
2022	31,297	30,098	7,400,840	1,035,895
2023	40,937	32,975	10,466,999	1,355,830
2024	48,637	39,884	12,554,271	1,511,240

PROSECUTION IN PUBLIC HEALTH LEGISLATION

In 2024, a total of 22,135 cases were registered and handled in magistrate courts. Consequently, 22,265 cases resulted in fines amounting to RM3,108,542.00. The prosecution performance by act/regulation is illustrated in **Figure 4.1**.

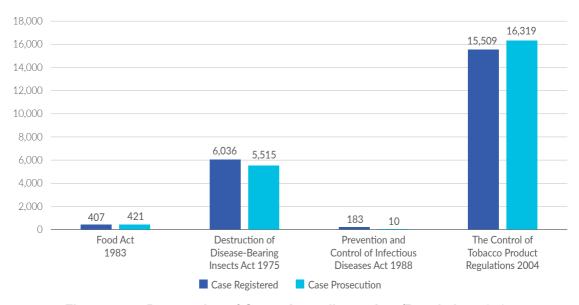


Figure 4.1 Prosecution of Cases According to Acts/Regulations 2024

FUMIGATION

In 2024, the Fumigation Subunit registered 292 Licensed Operators, conducted fumigation examinations for 74 pesticide operators, and trained 111 Environmental Health Officers or Environmental Health Assistant Officers as Competent Auditors.

DISEASE CONTROL DIVISION (BKP)

BKP is responsible for preparedness, surveillance, early detection and response to public health crises; including non-communicable and infectious diseases (endemic, emerging or reemerging) and public health events that could pose a threat to public health. All these activities involve collaboration with various agencies, including those at the international level.

BKP consists of three (3) sections and 15 sectors, as listed below:

- i. Preparedness, Surveillance, and Response Section
 - a. Disease Surveillance Sector
 - b. Disaster, Outbreak, Crisis, and Emergency Management Sector
 - c. International Health Regulations and Travel Health Sector
 - d. Information and Documentation Sector
- ii. Communicable Diseases Section
 - a. Tuberculosis and Leprosy Control Sector
 - b. HIV, STI and Hep C Control Sector
 - c. VPD and FWBD Control Sector
 - d. Zoonosis Control Sector
 - e. Vector-Borne Diseases Control Sector
 - f. Entomology and Pest Sector
- iii. Non-Communicable Diseases Section
 - a. CVD/Diabetes/Cancer Control and Prevention Sector
 - b. NCD Intervention Sector
 - c. Occupational Safety and Health Sector
 - d. Environmental Health and Climate Change Sector
 - e. Tobacco Control and FCTC Sector

INFECTIOUS DISEASES PREVENTION AND CONTROL (AMENDMENT) BILL 2024

The year 2024 marked a significant milestone with the approval of amendments to the Infectious Diseases Prevention and Control Act 1988 [Act 342] by the Dewan Rakyat on 14 October 2024 and the Dewan Negara on 2 December 2024. These amendments are the result of comprehensive efforts by various stakeholders to strengthen the legislative framework in managing increasingly complex infectious disease challenges, taking into account the experiences of the COVID-19 pandemic.

The process of gazetting these amendments is in its final stages, with plans to implement gazettement and enforcement in the first quarter of 2025. This will ensure that the country is better prepared to address infectious disease threats through stricter enforcement measures and enhanced collaboration between various agencies.



Image 4.4 Approval of Amendment to Infectious Diseases Prevention and Control Act 1988 [*Act 342*] in the Dewan Negara

EXPANSION OF THE NATIONAL INFLUENZA IMMUNIZATION PROGRAMME FOR HEALTHCARE WORKERS

The National Influenza Immunization Programme was launched in 2006, initially focusing on MOH frontliner only. The program provides voluntary vaccination to eligible individuals, prioritising those at higher risk of influenza infection. In mid-October 2024, the programme's scope was expanded to cover all healthcare personnel within the MOH. This expansion aimed to enhance the health security of the workforce and offer comprehensive protection to all MOH staff. In 2024, 93.1% of healthcare workers had received the influenza vaccine, highlighting the programme's success and commitment of all staff. In 2025, the programme will be further expanded to include other high-risk groups, strengthening the MOH's efforts to improve the nation's defence against influenza and protect public health.

MALAYSIA NATIONAL ACTION PLAN FOR HEALTH SECURITY (MyNAPHS) 2025-2030

The MyNAPHS 2025-2030 has been developed to strengthen the country's capacity to prevent, detect, and respond rapidly to public health threats, in line with the International Health Regulations (IHR 2005). MyNAPHS is based on Malaysia Strategy for Emerging Diseases and Public Health Emergencies (MySED) and adopts a multisectoral and whole-of-society approach. It will address gaps identified in recent assessments, which is the Joint External Evaluation (JEE) by the World Health Organization (WHO).

The plan has garnered broad involvement and collaboration from key stakeholders, with contributions from agencies both within and outside MOH. Key achievements include the establishment of Technical Working Groups (TWG) and Steering Committees to drive implementation, strengthening disease surveillance systems, improving laboratory capacity for rapid diagnostics and enhancing the One Health initiative to address health threats at the human-animal-environment interface.

The key performance indicator for MyNAPHS is to achieve 100% preparedness across all domains of health security, ensuring comprehensive readiness for future public health emergencies. Upcoming initiatives include expanding preparedness efforts, establishing a National Health Emergency Operations Centre and promoting regional and global partnerships. MyNAPHS aims to position Malaysia as a regional leader in health security, enhancing resilience and building public confidence in managing health emergencies.



Image 4.5 MyNAPHS 2025-2030 Workshop

IHR 2005 AMENDMENTS AND THE ESTABLISHMENT OF MALAYSIA'S NATIONAL IHR AUTHORITY

Following the confirmation of targeted amendments to the IHR 2005 during the World Health Assembly (WHA) in May 2024, Malaysia has initiated the establishment of the National IHR Authority to align with current requirements. The Terms of Reference (TOR) for the authority has been finalised and its development and enforcement are now awaiting approval. This initiative has received widespread support and collaboration from key stakeholders, involving agencies both within and outside the MOH. Key achievements include the formation of TWG and a Steering Committee to drive implementation, strengthening disease surveillance systems, enhancing laboratory capacity for rapid diagnostics and advancing the One Health initiative to address health threats at the human-animal-environment interface.

This initiative is aligned with the MyNAPHS 2025-2030, which demonstrates the country's commitment to achieving 100% preparedness across all core IHR capacities. Through these targeted amendments and the establishment of the National IHR Authority, Malaysia is enhancing its national health security framework to safeguard public health interests and effectively meet international standards.

THE SEPANGGAR 2024 SIMULATION TRAINING (NATIONAL LEVEL CHEMICAL, BIOLOGICAL, RADIOLOGICAL, NUCLEAR AND EXPLOSIVE (CBRNe) INCIDENT) AND THE NATIONAL EMERGENCY OPERATION CENTRE SIMULATION EXERCISE (NEOCX) AT THE NATIONAL LEVEL

The exercise took place at Sepanggar Bay Container, Kota Kinabalu, Sabah, from 20-22 August 2024, involving 151 officers from the MOH and related agencies. The NEOCX and Sepanggar Simulation Exercise (SSE 2024) focused on CBRNe incidents and was organized in collaboration with Sabah State Health Department (JKN). The objective was to assess and improve the capabilities, coordination and effectiveness of the Public Health Emergency Operations Centre (PHEOC) during emergency situations, while also enhancing the skills and preparedness of MOH personnel in handling CBRNe disasters. This programme is part of an initiative under the Association of Southeast Asian Nations (ASEAN) Emergency Operations Centre Network (ASEAN EOC Network), in collaboration with the ASEAN Secretariat and Global Affairs Canada (GAC) and JKN Sabah.





Image 4.6 The Sepanggar Simulation 2024 and NEOCX

DISASTER MANAGEMENT CONFERENCE 2024

This conference was organized in conjunction with National Preparedness Month and took place in Kuala Lumpur, on 16 October 2024. The event aimed to enhance knowledge and skills in disaster management among MOH personnel and related agencies. The opening ceremony was officiated by the Minister of Health and also attended by the Secretary-General of MOH and the Deputy Director-General of Health (Public Health).

Minister of Health have launched five (5) guidelines -the Disaster Management Plan Guidelines, the Crisis Preparedness and Response Centre (CPRC) Standard Operating Procedure Guidelines, the Human Resource Mobilisation During Public Health Emergencies Guidelines, the Rapid Assessment Team (RAT) and Rapid Response Team (RRT) Guidelines, as well as the Chemical, Biological, Radiological, Nuclear and Explosives Management Guidelines.





Image 4.7 Disaster Management Conference in Conjunction with the National Preparedness Month at MOH 2024

ASEAN PUBLIC HEALTH EMERGENCY MANAGEMENT EMERGING LEADERS PROGRAMME (ASEAN PHEM ELP)

MOH in collaboration with the ASEAN Secretariat and the United States Centers for Disease Control and Prevention (U.S. CDC), organised this programme, which saw the participation of the first cohort with 22 members from ASEAN countries (excluding Viet Nam and Indonesia). The programme ran from 22 April - 2 August 2024, and aimed to strengthen and expand the capacity of the public health emergency management workforce at both national and regional levels, specifically for preparedness and response to public health threats. The second cohort programme commenced on 21 October 2024 and will conclude on 24 January 2025, with 26 participants from each ASEAN member country.





Image 4.8 ASEAN PHEM ELP

TRAINING ON SUPERVISION PROCEDURES FOR EMBALMING ACTIVITIES

The training was held on 13 June 2024, at the Dissection Hall, Department of Anatomy, Preclinical Building, Faculty of Medicine, Universiti Kebangsaan Malaysia (UKM) involving 40 MOH officers from all over Malaysia. This was the first time the course was organised in collaboration with the Department of Anatomy, with the aim of providing field officers with guidance and exposure to the body preservation procedures. This exposure is crucial in assisting officers to carry out the monitoring and supervision of body preservation procedures, which are mandatory before issuing import permits.



Image 4.9 Embalming Course

WHO IHR CRYSTAL EXERCISE

The annual WHO IHR Crystal Exercise was held on 13 November 2024, with the theme of Vector-Borne Disease Incidents. It involved the participation of MOH officers from various levels and departments, as well as officers from the Department of Veterinary Services, PERHILITAN, and the National Public Health Laboratory. The exercise successfully tested the effectiveness of the communication functions of the IHR National Focal Point (NFP), including aspects of information sharing, risk assessment, and decision-making processes.



Image 4.10 IHR Crystal Exercise

WORKSHOP ON HEALTH MANAGEMENT AND GUIDELINE UPDATES FOR MEDICAL EXAMINATION OF SUSPECTED TRAFFICKING VICTIMS 2024

The Workshop on the Updating of Medical Examination Guidelines for Individuals Suspected to be Victims of Human Trafficking was held from 18-20 September 2024, at the Noble Resort Hotel, Melaka. The workshop aimed to enhance the knowledge and awareness of medical officers at the state and district levels regarding human trafficking issues. It was attended by 40 officers from MOH, Shelter Homes as well as the Department of Social Welfare (JKM), to discuss issues related to human trafficking and the role of the healthcare sector in addressing this problem.



Image 4.11 Workshop on Health Management and Guideline Updates for Medical Examination of Suspected Trafficking Victims 2024

DEVELOPMENT OF ELECTRONIC SYSTEM NATIONAL CENTER FOR DISEASE CONTROL (eNCDC)

The pre-development activities for eNCDC carried out in 2024 included workshops on the integration of internal and external systems within the MOH, gap analysis, workflow needs analysis and restructuring of workflows. Change Management is crucial in any digital health project to ensure the readiness of end users for system adoption. To support this, a digital change management guide for eNCDC was developed, serving as a resource for end users during the implementation phase. The review of this digital guide content by the Disease Control Division's Project Committee marks the completion of activities for the year 2024.

UPDATE ON CASE DEFINITIONS FOR INFECTIOUS DISEASES IN MALAYSIA BOOK

The Third Edition of the Case Definitions for Infectious Diseases in Malaysia Book was published in 2017. An update has been carried out to include the latest information on case definitions, laboratory tests, case classifications, notification methods, special aspects, reference laboratories, and referral guidelines. The notification methods are categorized into two (2) types which is diseases that must be reported under Prevention and Control of Infectious Diseases Act 1988 [Act 342] and diseases that need to be reported according to current administrative instructions. New diseases that have been added to the updated edition include Covid-19, Mpox and Marburg.

EMPOWERING COMMUNITIES IN DENGUE PREVENTION AND CONTROL

Dengue cases in Malaysia follow a cyclical pattern, peaking every four (4) to 5 (five) years, with significant increases observed in 2015, 2019 and 2023. In 2024, dengue cases saw a slight decrease of 0.6%, with 122,423 cases reported compared to 123,133 cases in 2023. The dengue case fatality rate (CFR) has consistently remained below the national target of 0.2% since 2018. For 2024, the CFR was 0.10%, with 117 deaths. MOH has organised the *Gotong Royong Mega Perangi Aedes* twice a year. This national-level programme was launched by the Minister of Health and brought together various government agencies, local authorities and

community volunteers in a large-scale environmental clean-up effort using a Whole of Nation approach. Similar activities are also conducted at the state and district levels to eliminate potential Aedes mosquito breeding sites, serving as a primary advocacy platform to promote Aedes-free environments.

STRENGTHENING THE MALARIA ELIMINATION PROGRAMME

Malaysia has successfully maintained its achievement of zero indigenous human malaria cases since 2018. In 2024, a total of 2,246 malaria cases were reported, with 1,821 (81.08%) being zoonotic malaria cases. Only 425 (18.92%) were human malaria cases, of which 367 (86.35%) were imported, 58 (13.65%) were introduced, and there were no indigenous cases. There was a significant reduction in malaria-related deaths, from 16 deaths in 2023 to three (3) deaths reported in 2024, reflecting 81.3% decrease. The National World Malaria Day celebration was successfully held on 12 May 2024, at the Universiti Malaysia Sabah, officiated by the Minister of Health. The Vector-Borne Disease Sector, Disease Control Division, MOH, also successfully developed the Knowlesi Malaria Management Guidelines, which serve as a reference for all parties.

PROGRESS TOWARDS LYMPHATIC FILARIASIS ELIMINATION

In 2024, the main focus was on reducing morbidity and preventing disability among patients with elephantiasis (lymphatic filariasis). To strengthen the National Lymphatic Filariasis Elimination Programme (PEFLK), a *Bengkel Pengurusan Pesakit Kaki Gajah* workshop was held on 22-24 October 2024, in Kuala Terengganu. The objectives of this workshop were as follows:

- i. To raise awareness among healthcare personnel about the National Lymphatic Filariasis Elimination Programme.
- ii. To train healthcare workers on using the WHO manual titled New Hope for People with Lymphedema.
- iii. To enhance the skills of healthcare workers in managing patients with elephantiasis.

TAKE THE RIGHTS PATH

New HIV/AIDS infections in Malaysia generally decreased by up to 50% between 2000 and 2009. However, from 2010 until now, the rate of decline has slowed, with only a 25.4% reduction between 2010 and 2024. By 2030, the national target is to reduce HIV infections by 90% from the 2010 level, but inequalities pose a barrier to achieving this target.

To ensure equality is achieved, the MOH has implemented several strategies:

- i. The PROSTAR 2.0 programme has been implemented to raise awareness among adolescents and youth about HIV/AIDS. In the year 2024, a total of 348 PROSTAR 2.0 activities were conducted involving 42,710 students from schools and higher education institutions (IPT). This initiative has resulted in a 47% increase in knowledge.
- ii. Test and Treat HIV/AIDS: The TestNow website (testnow.com.my) for self-screening of HIV has been introduced to encourage more individuals from key populations and their partners to undergo screening and subsequent treatment. A total of 90,074 people has visited TestNow, with an average of 304 visitors per day.

- iii. The Differentiated HIV Services for Key Populations (DHSKP) Model KK 2.0 was implemented in 33 health clinics through a smart partnership between the GO-NGO (government and non-governmental organizations). This initiative will be expanded to enhance service delivery, particularly to key populations.
- iv. The concept of U=U (*U* equal to *U*) or Undetectable = Untransmittable means that People Living with HIV/AIDS (PLHIV) who take antiretroviral (ARV) medication as prescribed can live like individuals without HIV because the virus becomes undetectable and generally cannot be transmitted to others. The MOH targets to continuously increase ARV treatment among PLHIV. Partners of PLHIV are advised to undergo HIV prevention treatment, known as Pre-Exposure Prophylaxis (PrEP). PrEPGov was implemented in 34 clinics with 7,053 people participating in the year 2024.





Image 4.12 PROSTAR 2.0 at Kolej Vokasional Slim River and HIV Self-Test Website TestNow

TOWARDS END TB 2035

The MOH is committed to ending tuberculosis (TB) by 2035, with a primary focus on early detection and treatment of TB cases, as well as reducing morbidity and mortality related to TB. In 2024, the TB incidence rate was 75.85 per 100,000 population, and the TB mortality rate was 7.69 per 100,000 population. A total of 138 cases of multi-drug resistant TB (MDR-TB) and rifampicin-resistant TB were registered in 2024. Additionally, 196,959 TB contacts were screened, and of these, 1,008 (0.5%) were confirmed to have TB. A total of 13,966 individuals were eligible for TB preventive treatment (TPT), and 11,764 (84.2%) completed their TPT course. The treatment success rate for TB was 92.1%.

NEW TARGET FOR LEPROSY ELIMINATION BY 2030

Malaysia achieved the target of eliminating leprosy as a public health burden in 1994, with a prevalence rate of 0.9 cases per 10,000 population. The number of cases has consistently decreased since then, and the current prevalence rate remains below 1 per 10,000 population. However, to completely interrupt the transmission of leprosy, the WHO has set a new target of zero new local cases by 2030.In 2024, 292 leprosy cases were reported, an increase of 36 cases (14%) compared to the 256 cases reported in 2023. Of these, 179 were new local adult cases and 11 were children. A total of 20 new leprosy cases with grade 2 disblities (G2D) were registered, with a rate of 0.6 per 1 million population. The treatment success rate was 83% for Multibacillary sub-diagnosis and 100% for Paucibacillary sub-diagnosis.

TOWARD RABIES ELIMINATION 2030

There were eight (8) cases of rabies reported among humans (human rabies) in 2024 with eight (8) deaths (case fatality rate: 100%). All deaths occurred in Sarawak (local transmission). A total of 86 cases with 78 deaths (case fatality rate: 91%) have been reported among humans since the rabies outbreak was declared in 2017.

RABIES COMMUNITY ENGAGEMENT - KUCHING

Rabies community engagement programme was conducted in Kuching, Sarawak, from 28-29 June 2024, focusing on raising awareness, promoting responsible pet ownership and enhancing collaboration between local authorities and communities to prevent the spread of rabies.





Image 4.13 Engagement and Declaration Session for Rabies Community Coordinators

NATIONAL STRATEGIC PLAN (NSP) FOR RABIES ELIMINATION WORKSHOP

A workshop to develop the NSP for Rabies Elimination was organised on 16-18 October in Sepang, Selangor, focusing on outlining strategies and actions to achieve zero human deaths from rabies by 2030 through enhanced multi-sectoral collaboration and community engagement.

STATUS OF OTHER ZOONOTIC DISEASES

In 2024, HFMD cases decreased by 40.7%, totaling 80,964, with coxsackie A16 identified as the primary causative agent (57.5%). Leptospirosis accounted for 2,445 laboratory-confirmed cases and 46 deaths (case fatality rate: 1.9%). Brucellosis was reported in eight (8) cases, including one (1) fatality, primarily linked to the consumption of unpasteurized goat's milk. Mpox had two (2) reported cases associated with high-risk activities, both classified as clade II. Melioidosis recorded 876 cases with 139 deaths. No cases of avian flu, ebola, nipah or MERS-CoV were reported.

STRENGTHENING ONE HEALTH FOR ZOONOTIC DISEASES

To enhance cross-sectoral collaboration in the prevention and control of zoonotic diseases, MOH, in partnership with local agencies such as the Department of Veterinary Services (DVS), PERHILITAN and Ministry of Natural Resources and Environmental Sustainability (NRES), along with international organizations including WHO, World Organisation for Animal Health (WOAH) Food and Agriculture Organisation (FAO) and United Nations Environment Programme (UNEP), organised the Internasional Health Regulation - Performances of Veterinary Services (IHR-PVS) *National Bridging Workshop* in Putrajaya on 13-15 November 2024.





Image 4.14 National Bridging Workshop IHR-PVS

VACCINE-PREVENTABLE DISEASES PREVENTION AND CONTROL PROGRAMME

The incidence of measles increased in 2024 to 119.7 cases per 1,000,000 population, compared to 60.0 cases in 2023, with 237 measles outbreaks reported throughout the year. Due to the high risk of measles transmission, supplementary immunisation campaigns were conducted in measles outbreak areas throughout 2024, with a nationwide campaign planned for 2025.

The incidence of hepatitis B also rose in 2024 to 26.33 cases per 100,000 population, compared to 20.73 cases in 2023. To prevent the spread of chronic hepatitis B infection, a universal screening program for pregnant women will be launched nationwide in 2025.

The incidence of whooping cough (pertussis) in 2024 was 1.4 cases per 100,000 population. A nationwide vaccination program for pregnant women, using the Tetanus-Diphtheria-Pertussis (Tdap) combination vaccine, will be implemented in 2025, once the vaccine supply is available at health facilities.

The incidences of diphtheria, tetanus, and rubella remain under 1 case per 100,000 populations. Malaysia also remained polio-free throughout 2024.

FOOD AND WATERBORNE DISEASES

The incidence of food and waterborne diseases in Malaysia remains generally low, thanks to the widespread access to treated water supply and high sanitation coverage.

However, the incidence of food poisoning has increased in 2024, rising to 70.00 cases per 100,000 population, compared to 51.70 cases in 2023. The number of food poisoning episodes also increased from 496 episodes in 2023 to 707 episodes in 2024. Of the 707 reported episodes, 234 (33.10%) occurred in schools under the Ministry of Education (MOE), 66 (9.34%) in non-KPM schools, 63 (8.91%) in other institutions, 182 (25.74%) in private homes, and 162 (22.91%) in other categories.

There was a slight increase in the incidence of typhoid/paratyphoid, cholera, and hepatitis A, but these remain below 1.00 case per 100,000 population. The incidence of dysentery rose to 2.37 cases per 100,000 population, marking the highest level in the past ten (10) years.

INNOVATION IN DENGUE CONTROL THROUGH WOLBACHIA-INFECTED AEDES MOSQUITO RELEASE

In 2024, Wolbachia-infected Aedes mosquitoes release operation was expanded to six (6) new localities involving four (4) states: two (2) in Melaka, two (2) in Johor, one (1) in FT Kuala Lumpur & FT Putrajaya and one (1) in Pahang. This expansion brings the total number of localities involved in the Wolbachia-infected Aedes mosquito release operations in Malaysia to 41 localities in eight (8) states with high dengue cases. This innovative will continue in 2025, targeting an additional ten (10) new localities according to the annual plan. The outsourcing of Wolbachia-infected Aedes mosquitoes' supply will commence in 2025 to support the resource needs for expanding this operation.

ENTOMOLOGICAL INVESTIGATION (EI) FOR VECTOR-BORNE DISEASES AND PEST OF PUBLIC HEALTH IMPORTANCE

Throughout 2024, El activities for *Aedes* mosquitoes were conducted in 3,385 dengue outbreak localities, which includes Controlled Outbreaks (2,413 localities), Uncontrolled Outbreaks (369 localities) and Hotspots (603 localities). El findings indicated that 2,061 (60.9%) dengue outbreak localities remain at risk of continuous transmission.

El was also conducted in 13 localities reporting introduced malaria cases to ensure no indigenous human malaria infections occur. Six (6) localities were classified as having high receptivity level, three (3) as moderate, and four (4) as low. Localities with high receptivity level will be prioritised for monitoring.

As for *Mansonia sp.*, a total of 64 (39%) El activities were conducted, focusing on cases of *Brugia malayi* parasites infection. The main *Mansonia* species recorded were *M. bonneae*, *M. uniformis*, *M. dives*, and *M. annulata*. Parasite detection in mosquitoes was carried out in 31 localities, and mosquitoes collected from two (2) localities in Sarawak were found positive for filariasis parasites.

CONSULTATION ON PEST OF PUBLIC HEALTH IMPORTANCE

Entomology and Pest Sector (SEP) also provide consultation and control measures on complaints of public health importance pests such as termites, rodents, fleas, and others. A total of 552 complaints were received by Entomology & Pest Unit at state and district level involving health facilities (70.11%), government premises (21.20%), residential houses (6.34%) and other premises (2.36%).

NATIONAL HEALTH SCREENING INITIATIVE (NHSI)

In 2024, a total of 1,861,490 individuals were successfully screened. Of these, 1,152,274 or 81.3% had no history of non-communicable diseases (NCDs). However, the screenings revealed that 199,352 (17.3%) individuals had high blood pressure, 101,758 (8.8%) had elevated glucose levels and 147,864 (39.0%) had high cholesterol levels. Additionally, 405,097 (35.2%) individuals were found to be obese, and 405,194 (35.2%) had overweight issues. The NCD risk classifications were as follows:

- i. Healthy: 116,448 (10.1%) individuals.
- ii. Healthy but at risk: 126,731 (11.0%) individuals.
- iii. At risk of developing NCDs: 909,090 (78.9%) individuals. These individuals had at least one (1) risk factor for NCDs.

WORLD CANCER DAY 2024

The World Cancer Day was held on 17 February 2024 at Cyberjaya University, jointly organized by the MOH and the National Cancer Society Malaysia (NCSM). The theme, *Close the Care Gap*, is the World Cancer Day theme for 2022-2024, emphasizing equity in cancer care by ensuring that all cancer patients receive the appropriate care they need. MOH has also established strategic collaborations with cancer NGOs in Malaysia to assist in bridging gaps in cancer prevention and care. A total of 23 NGOs has signed a pledge of collaboration with the MOH to narrow these gaps.





Image 4.15 World Cancer Day at Cyberjaya University

RUMAH BEBAS ASAP ROKOK (RBAR) KOSPEN

One of the MOH KPIs monitored is the RBAR initiative aiming to create a smoke-free environment to protect non-smokers from exposure to second-hand smoke. This policy is implemented with the homeowner's consent, whereby the home is officially declared a smoke-free zone and an RBAR sign is placed at the front door.

In 2024, all 837 KOSPEN localities successfully achieved at least 5% of households in each locality participating in the RBAR initiative. A total of 19,292 RBARs have been established. This initiative has had a positive impact by raising community awareness about the dangers of smoking and promoting a healthier, smoke-free environment.





Image 4.16 RBAR Signage

KOSPEN WOW PROGRAMME 2024

In 2024, a total of 350 public and private agencies participated in the KOSPEN WOW Programme. Of the 11,673 eligible employees, 10,547 (90.4%) underwent health screenings. The screening results showed that 1,653 participants (15.7%) had blood pressure readings of \geq 140/90 mmHg, while 1,655 participants (15.7%) recorded capillary glucose levels of either \geq 5.6 mmol/L (fasting) or \geq 7.8 mmol/L (random). A total of 447 (27%) had blood pressure readings of \geq 140/90 mmHg and 616 (37.2%) recorded capillary glucose levels of either \geq 5.6 mmol/L (fasting) or \geq 7.8 mmol/L (random) were referred to healthcare facilities for further evaluation. Meanwhile, individuals with abnormal readings who did not meet the referral criteria were provided with appropriate interventions, such as participation in Weight Management Programmes, Physical Activity and Healthy Eating Practices.

THE CONTROL OF SMOKING PRODUCTS FOR PUBLIC HEALTH ACT 2024 [ACT 852]

The Control of Smoking Products for Public Health Act 2024 [Act 852], along with its regulations and orders, take effect nationwide starting 1 October 2024. The implementation Act 852 will follow diplomatic, wise and effective approach, with continued enforcement of the Control of Tobacco Product Regulations (CTPR) 2004 to uphold smoking bans in designated smoke-free areas prevent the sale, purchase and use of smoking products by minors.

Phased enforcements will take place over three (3) to 12 months for specific provisions:

- i. 1 January 2025 smoking ban in launderettes and workplaces
- ii. 1 April 2025 prohibition of sales of smoking products to minor and display of warning sign of prohibition of smoking at the non-smoking area or place
- iii. 1 October 2025 regulations on packaging and labelling

Immediate enforcement action has been implemented starting 1 October 2024 for provisions related to the prohibition of advertisement, promotion and sponsorship, as well as the prohibition of sales in educational institutions, online platforms, vending machines and retail markets, in addition to packaging that resembles toys or food products.

The enforcement of Act 852 is a testament to the concern of the government in ensuring the health and safety of all Malaysians, particularly children, by protecting them from the dangers of smoking products such as electronic cigarettes or vapes. This also supports the government's efforts to make Malaysia a smoke-free nation by 2040.





Image 4.17 Enforcement of the Control of Smoking Products for Public Health Act 2024 [Act 852]

WALKABOUT PREMIS BERSIH BEBAS ASAP (BeBAs) PROGRAMME

The Walkabout *Premis Bersih Bebas Asap* (BeBAs) programme started on 17 February 2024, in Jalan Alor, Bukit Bintang, Kuala Lumpur. It has been successfully carried out in ten (10) states (Kuala Lumpur, Negeri Sembilan, Sabah, Perlis, Johor, Terengganu, Kelantan, Selangor, Pahang and Pulau Pinang) in 2024, and will continue in 2025. The programme aims to enhance community understanding, support and compliance with cleanliness standards and the smoking ban at food premises. It emphasizes community empowerment, requiring collaboration between food premise owners, government agencies, private sectors, volunteers, professionals and NGOs.

The program will measure four (4) key indicators such as reduced enforcement notices, complaints monitoring, increased *Premis Bersih dan Selamat* (BeSS), and expansion of *Rakan Nasihat Komuniti Lapangan* (RNKL). Positive feedback from food premises owners and local communities has been received, and the MOH will continue the initiative to many more localities to ensure food premises comply with hygiene standards and smoking regulations to protect public health.





Image 4.18 Walkabout BeBAs Programme

SHARPS INJURY SURVEILLANCE (SIS)

A total of 2,161 cases of sharps injuries were notified to the Occupational Safety and Health (OSH) Sector, MOH in 2024. The number of cases reported showed an increase of 10.7% compared to the 1,930 cases in 2023. In 2024, from the total cases of sharps injuries, 1,964 were cases of needle stick injuries.

ACCIDENTS AND INJURIES, DANGEROUS OCCURRENCE, OCCUPATIONAL POISONING AND OCCUPATIONAL DISEASES SURVEILLANCE AMONG MOH HEALTHCARE WORKERS

There were 2,917 cases of accidents and injuries (not including sharp injuries) reported among MOH healthcare workers in 2024 which was an increase of 10.0% as compared to 2023 and 129 cases of occupational poisoning reported in 2024 which was 51.9% increase as compared to the year 2023. Meanwhile, there were 209 cases of occupational lung diseases notified in 2024 compared to 315 cases in 2023.

OCCUPATIONAL HEALTH DOCTOR (OHD) COURSE

OHD course for MOH officers is a yearly event aimed to increase the number of OHD among MOH medical officers to carry out occupational health services in MOH facilities. In 2024, it was held in the National Institutes of Health (NIH) comprising a total of 36 participants all over the country. This course was held in three (3) sessions which were Session 1 (16-18 August 2024), Session 2 (20-22 September 2024) and Session 3 (18-21 October 2024).

OCCUPATIONAL SAFETY AND HEALTH (OSH) MONTH

In the month of October 2024, OSH sector had organised OSH Month celebration which was launched by Minister of Health on 25 October 2024. The OSH Month celebration in MOH Headquarters (IPKKM) was mainly carried out by the main Safety and Health Committee with all the other safety and health committees of each block in IPKKM. During this OSH Month many activities were carried out including Occupational Safety and Health (OSH) Coordinator Course, Basic Life Support (BLS) course, Obstructive Sleep Apnea (OSA) screening, OSH seminar and exhibition, hiking Gunung Angsi activity and many more.



Image 4.19 OSH Month 2024 Celebration in IPKKM

CLIMATE CHANGE MONITORING IN 2024

The National Flood Operations Room was activated twice (2) in 2024, during the Northeast Monsoon (MTL) 2023/2024 from 26 December 2023 to 18 January 2024, and the Northeast Monsoon (MTL) 2024/2025 starting from 27 November 2024. Meanwhile, monitoring of weather-related diseases recorded 140 cases with seven (7) fatalities from Epidemiological Weeks (EW) 5-46 of 2024. There were no haze incidents reported in 2024.

ENVIRONMENTAL IMPACT ASSESSMENT (EIA)

Health impact assessments were conducted for 55 development projects that are subject to EIA under the Environmental Quality Act 1974. Relevant sectors also attended 50 EIA Technical Committee meetings, providing technical input on the health impacts of the proposed development projects.

PARTICIPATION AS AN EVALUATOR IN NATIONAL SIMULATIONS

Environmental Health and Climate Change Sector (SKPPI) also participated as an evaluator in two (2) national simulations: the Field Training Exercise (FTX) for the implementation of the National Comprehensive Security Exercise (EX COMSEC) Series 2 in 2024, held in Melaka on 10-11 August 2024, and the National Emergency Operations Centre Exercise (NEOCX) as well as the Sepanggar Simulation Exercise (SSE 2024) - National Level CBRNe Incidents at Sepanggar, Kota Kinabalu, Sabah, from 20-22 August 2024.

CLIMATE CHANGE SEMINAR

The Climate Change Seminar, themed *Climate Change and Its Impact on Public Health* was held on 5 November 2024. The seminar involved various categories of healthcare staff from across the country and was officiated by the Deputy Director (Non-Communicable Diseases), Disease Control Division. A total of 88 participants attended the event.



Image 4.20 Climate Change Seminar

ROUTINE ENVIRONMENTAL HEALTH INSPECTIONS IN PRISONS, TEMPORARY DETENTION DEPOTS (DTS) AND DAY CARE CENTRES (PJH)

Routine environmental health inspections were carried out throughout last year at prisons, DTS and PJH. During the first cycle, a total of 19 DTSs (100%), 1,075 PJHs (100%), and 42 prisons (100%) were inspected. Additionally, 42 prisons (100%) were inspected in the second cycle last year.

NATIONAL PUBLIC HEALTH LABORATORY (NPHL)

Throughout 2024, NPHL has continuously strived to improve its technical capability as part laboratory preparedness and response for public health emergencies or crises. Among key achievements for 2024 are the following:

WORKSHOP ON THE CONSOLIDATION AND VALIDATION OF SWOT ANALYSIS FOR THE DEVELOPMENT OF THE NATIONAL LABORATORY STRATEGIC PLAN (NLSP)

This workshop was conducted in Shah Alam, Malaysia, from 29 July to 1 August 2024, with the aim of integrating and validating the SWOT analysis from various ministries for the development of the National Laboratory Strategic Plan 2025-2029. The workshop involved collaboration between the Regional Public Health Laboratory (RPHL) and the WHO, covering three (3) countries: Thailand, Philippines and Malaysia. It was attended by various representatives from ministries, including those from clinical, veterinary and food laboratory services.



Image 4.21 NLSP SWOT Analysis Consolidation and Validation Workshop

WHO EXTERNAL QUALITY ASSURANCE (EQA) PROGRAMME FOR MEASLES AND RUBELLA LABORATORY

The NPHL and the regional Public Health Laboratories (PHL) in Malaysia are part of the Western Pacific Regional measles/rubella laboratory network. In this regard, WHO provides EQA serum samples as part of the accreditation process for the measles/rubella public health laboratory network. In 2024, all participating PHLs demonstrated exceptional performance, achieving scores exceeding 90% for both measles and rubella IgM testing. Detailed results are presented in the **Table 4.8**.

Table 4.8	WHO Serology EQA Sco	ores for PHL in 2024
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Laboratory	Meas	sles IgM	Rube	ella IgM
Laboratory	Results	Percentage (%)	Results	Percentage (%)
NPHL	10/10	100	9/10	92.5
PHL Ipoh	10/10	100	10/10	100
PHL Johor Bahru	10/10	100	10/10	100
PHL Kota Bharu	10/10	100	10/10	97.7
PHL Kota Kinabalu	10/10	100	10/10	100

STRENGTHENING EXTERNAL QUALITY ASSURANCE (EQA) FOR SYPHILIS SEROLOGY PROGRAMME

Malaysia became the first country in the WHO Western Pacific Region to receive validation certification for the Elimination of Mother-To-Child Transmission (EMTCT) of HIV and syphilis in October 2018. To maintain this certification, the Bacteriology section was tasked to establish an EQA Program for Syphilis screening at the primary healthcare facilities, ensuring accurate laboratory testing for antenatal mothers. Beginning in 2018, the EQA Syphilis Serology Pilot Project was implemented on 4.1% and has been expanded to include other primary healthcare clinics by 18.7% (2019), 23.1% (2020), 42.2% (2023) and 54.8% (2024).

MONITORING EXTERNAL QUALITY ASSESSMENT (EQA) PERFORMANCE PROGRAM IN PRIMARY CLINICS

Biochemistry Section NPHL serves as one of the coordinators for the EQA Performance Evaluation Monitoring Programme for 724 primary health clinic laboratories, to enhance laboratory test quality nationwide. The adoption of digital platform, the EQA Monitoring Application (APEQ) among primer clinic users has increase from 76% in 2023 to 89% in 2024. Furthermore, monitoring visits by NPL to primary healthcare clinics also utilize the APEQ platform to ensure early interventions which is more effective and targeted.

QUALITY ASSURANCE (QA) PROGRAMME FOR MALARIA MICROSCOPY

Parasitology section, PHRL is responsible for this QA activities for ensuring accurate and reliable diagnostic results for parasitic diseases, particularly malaria and filaria. These activities include cross-checking for malaria microscopy to validate accuracy of the reported results. Training programmes for malaria and microfilariae microscopy are conducted to retrain the laboratory personnel to maintain their skills and competency in identifying malaria and filaria parasites. Proficiency testing (PT) for malaria microscopy is conducted twice (2) yearly to evaluate and maintain the competency of microscopists in PHL and State Vector Laboratories. Additionally, assessments and certification of malaria microscopists are conducted to ensure the microscopists meet the required standards as malaria microscopy trainers. These efforts collectively support the accurate diagnosis of parasitic diseases and contribute to effective disease management and control.

ACCREDITATION AND CERTIFICATION OF PUBLIC HEALTH LABORATORY

As part of continuous improvement, NPHL has successfully acquired accreditation and certification under the following standard ISO/IEC 9001:2015, ISO 15189:2014, ISO 17025:2017, and ISO 17043: 2010.

STRENGTHENING LABORATORY CAPACITY ON PATHOGEN GENOMIC SEQUENCING FOR RE-EMERGING AND NEW DISEASES

The Bacteriology section successfully conducted a workshop Strengthening Laboratory Capacity on Bio-Genomic Building and Analysis for Emerging and Re-emerging Diseases from 14-25 October 2024, at the Malaysian Genome and Vaccine Institute (MGVI) in Kajang, Selangor, led by an expert team from the University of Malaya. This 10 days training workshop was part of

the ASEAN Emergency Operations Centre (EOC) for the Mitigation of Biological Threats (MBT) Phase 3 Programme, supported by the Canada Fund. It served as a technical training session focused on enhancing laboratory capacity for bacterial genomic sequencing of pathogen of interest using a One Health Approach. A total of 18 participants from the MOH (Public Health Laboratories), Food Division, Institute of Medical Research, Department of Veterinary Services and National Water Research Institute of Malaysia (NAHRIM) attended this workshop.

MOSQUITO INSECTICIDE SUSCEPTIBILITY TESTING AND PATHOGEN SURVEILLANCE IN MOSQUITOES

The Entomology Section of NPHL offered insectarium services for the colonization of both laboratory and wild strains of Aedes mosquitoes, mosquito susceptibility testing, as well as pathogen detection testing in mosquitoes. These tests cover arboviruses (dengue, chikungunya, zika, japanese encephalitis) as well as malaria parasites and microfilariae. In 2024, 100 samples were tested for insecticide susceptibility. A total of 66 insecticide susceptibility tests were conducted and 615 reports were received and verified. The analysis were discussed in Technical Working Group on Insecticide Resistance for MOH Public Health Use. The meeting was held twice in 2024, first on 26-27 March 2024 (covering data from July - December 2023) and second on 30-31 July 2024 (covering data from January - June 2024).

MYCOTOXIN TECHNICAL TRAINING UNDER NATIONAL REFERENCE LABORATORY

The Mycotoxin Technical Working Group (KKT) meeting under the Food Analysis Committee (JKAM) was held at the Malaysian Cocoa Board on 17 July 2024. This meeting was chaired by the Head of the Food Division, NPHL as Chairman of the working group. Among the agenda of this meeting includes training for Afla WBSR+ detection using the High Chemical Tolerate IA Column and an introduction to the Ochra-V-Max rapid detection kit for ochratoxins in cocoa powder. The working group also had a sharing session titled Importance in Regulatory Trends of Using Isotope Calibrant and IAC Columns in Mycotoxin Testing. During a visit to the Malaysian Cocoa Board laboratory, participants learned about cocoa sample extraction methods (QuEChERS technique) and were introduced to the related instrumentation. The meeting attended by representatives from various agencies and public universities hoped to continue in the future as a medium of information sharing to promote continuous improvement in food safety, especially in the field of mycotoxin analysis.





Image 4.22 Mycotoxin Technical Training

STRENGTHENING ENVIRONMENTAL LABORATORY SERVICES

NPHL is a member of the National Project Counterpart under the Technical Cooperation Project: Strengthened National Capacity in Nuclear and Molecular Techniques in Supporting Transboundary Animal and Zoonotic Diseases of Veterinary Public Health Significance under the International Atomic Energy Association (IAEA). This project commenced on March 2022, and is expected to be completed in March 2025. The primary objective of this project is to enhance laboratory capacity for the detection, control and response to zoonotic diseases, while strengthening public health services and livestock production in Malaysia. One of the activities carried out was a scientific visit to the National Institute for Environmental Studies (NIES), Japan in November 2024.



Image 4.23 Lecture on Radiation and Health by the Senior Researcher, National Institute of Public Health Japan

FAMILY HEALTH DEVELOPMENT DIVISION (FHDD)

FHDD provides primary healthcare through numerous clinics and outreach services, ensuring comprehensive services for all, including health promotion, disease prevention, detection and early treatment, chronic disease care, rehabilitation services, domiciliary care and palliative care from pregnant mothers to the elderly population. They maintain healthcare quality through support services, human resource development and the implementation of tele-primary care.

PRIMARY HEALTHCARE INFRASTRUCTURE DEVELOPMENT

As of October 2024, the total number of primary healthcare facilities is 2,839, consisting of 1,098 Health Clinic (KK), 76 Maternal and Child Health Clinic (KKIA) 1,665 Rural Clinic (KD) and 174 Community Clinic (KKom). The number of primary healthcare facilities is updated based on the implementation of new facility constructions, upgrades and closures of existing facilities. In 2024, 15 KK construction projects (Type 2 and 3) were approved under the 12th Malaysia Plan (Rolling Plan 5) nationwide, expected to provide comprehensive primary healthcare services to local population. Primary healthcare facilities were also upgraded in the *Klinik Daif* Project in 2024, involving 422 facilities with a total allocation of RM150 million. In 2025, it is expected that 445 healthcare facilities will be undergo upgraded with an allocation of RM300 million.

CLINICAL SUPPORT SERVICES AT PRIMARY HEALTHCARE FACILITIES

In 2024, clinical support services at the primary healthcare level showed a 2.35% increase in radiology services rising from 255 KKs in 2023 to 261 KKs throughout Malaysia. The number of primary healthcare laboratories in health facilities (KK and KKIA) has also increased from 777 in 2023 to 780 laboratories in 2024. In terms of medical laboratory technologist positions, 94.9% (n=2,392) have been filled compared to 94.7% (n=2,324) in the previous year. For dietetic services, the number of appointments increased to 163, with dietetic service coverage at 618 KKs.

There were a total of 503 physiotherapists of various grades, consisting of 441 permanent physiotherapists and 62 contract physiotherapists providing physiotherapy services in 834 KKs. Meanwhile, 437 occupational therapy practitioners provided occupational therapy services in 258 KKs. However, only four (4) speech language therapy officers were placed in four (4) KKs.

For medical social work services, 27 medical social work officers were placed in 26 KK yet provided visiting services to 255 other KKs. In optometry services, two (2) permanent optometrists and 15 contract optometrists were placed in 17 KKs. Counselling services were provided by 26 permanent psychology officers and 199 contract psychology officers. A total of 340 nutritionists were also available to contribute to primary care services in 2024.

PRIMARY HEALTHCARE PATIENT ATTENDANCE

In 2024, a total of 91,999,859 patients received treatment at primary healthcare facilities throughout Malaysia. The trend of patient attendance at these facilities showed a consistent increase each year, except during the COVID-19 pandemic and the Movement Control Order (MCO) in 2020 and 2021. Selangor recorded the highest patient attendance from year 2019 to 2024, followed by Johor and Perak, as shown in **Figure 4.2**.

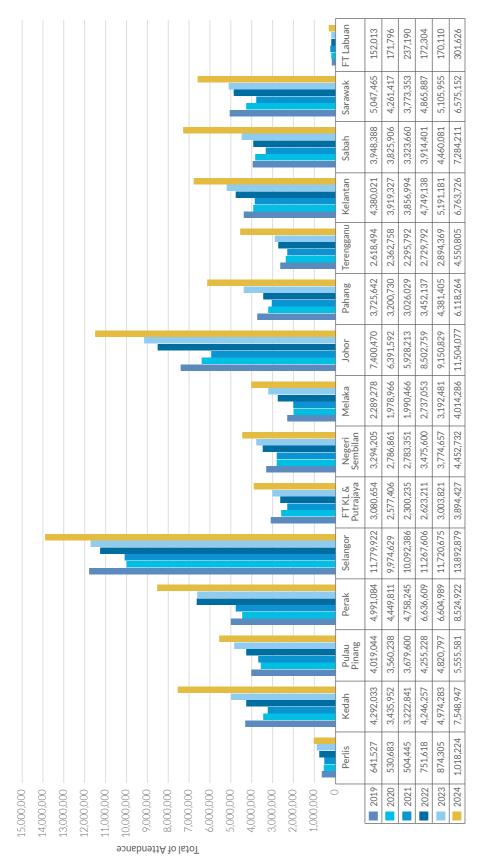


Figure 4.2 Total Attendance to Primary Healthcare Facilities 2019-2024

HEALTH CLINIC ADVISORY PANEL (HCAP)

For the session from 1 June 2023 to 31 December 2026, a total of 14,582 HCAP members were appointed, consisting of 3,440 healthcare personnel and 11,142 community representatives. This HCAP session involved 1,019 facilities, including 974 KKs, 33 KKIAs and 12 KDs. A total of RM5,095,000.00 was allocated to 15 JKNs in 2024. Based on monitoring, HCAP under the supervision of 14 JKNs successfully spent 100% of the allocated funds, while one (1) JKN utilised only 80% of its allocation.

On 28 June 2024, the appointment of HCAP members for the session from 1 June 2023, to 31 December 2026, was terminated, effective 31 December 2024, following the directive of the Minister of Health.

MOBILE HEALTH SERVICES

In 2024, Mobile Clinic Services were implemented at 2,181 locations across eleven (11) states, involving 243 teams-99 in Peninsular Malaysia, 40 in Sabah and 104 in Sarawak. A total of 399,075 patient visits are expected for Mobile Clinic Services in 2024, with 81.0% of services provided via land, 11.0% via water and 8.0% via air.

The specific financial allocation for Mobile Clinic Services in 2024 is RM16,183,306.00, which is lower than the RM20 million allocated in 2023.

CLINIC SERVICES AFTER OFFICE HOURS (EXTENDED HOUR)

The Extended Hour (EH) at KK was implemented to reduce congestion at the Emergency and Trauma Department of nearby hospitals. In 2024, a total of 49 KKs are implementing EH, compared to 52 KKs in 2023. The decrease is due to the JKN's coordination of after-hours service implementation.

In 2024, a total of 880,868 patient visits were recorded during EH operations, with 20,059 (2.27%) classified as emergency cases. Among these, 72.4% were referred to hospitals for further treatment.

MATERNAL HEALTH CARE AND FAMILY PLANNING

Maternal health care includes antenatal care, intrapartum care and postpartum care, including family planning. This care has been extended to pre-pregnancy care, focusing on women in reproductive age with medical conditions, to ensure their optimal health before embarking pregnancy.

In 2024, 90.1% received maternal health services with at least one visit, 99.4% safe deliveries, and 100% received postnatal home visits. On average antenatal visits per person exceeded 12 visits. Screening activities for Gestational Diabetes Mellitus (GDM) in 2024 detected 22.0% antenatal mothers with GDM and 2.4% postnatal mothers with GDM were confirmed diabetic.

The Maternal Mortality Ratio (MMR) showed a slight decrease from 26.0 (2022) to 25.7 per 100,000 live births in 2023 (Ref.: Department of Statistics Malaysia, October 2024). The main causes of maternal deaths include associated medical conditions, postpartum haemorrhage (PPH), hypertensive disorders in pregnancy and ectopic pregnancy.

NEONATAL AND CHILD HEALTH CARE

CHILDREN IMMUNISATION

In 2024, immunisation coverage achievement exceeded the target, reaching 95% for all types of immunisations under the National Immunisation Programme (NIP). **Table 4.9** shows the coverage achievement for key in at the national level in 2024.

Table 4.9 Immunisation Coverage Achievement for National Key Indicators 2024

Key Indicator	Type of Immunisation	Achievement (%)
Sustainable Development Goals (SDGs)	3 rd Dose DTaP-IPV-HepB-Hib	99.64
	2 nd Dose PCV	98.35
	2 nd Dose MMR	101.60

EARLY DISABILITY SCREENING

Health services for children with disabilities prioritise early disability screening, confirmation and rehabilitation. In 2024, early screening for children with disabilities aged 0-1 year achieved 0.18%, surpassing the MOH's target of 0.12%. Furthermore, all 371,145 children aged 18-24 months were screened using the M-CHAT tool. Among them, 1,453 children (0.39%) failed the screening, with 167 cases (11.49%) confirmed as autism spectrum disorder (ASD).

UNDER-5 MORTALITY SURVEILLANCE

In Malaysia, the under-5 mortality rate significantly decreased from 1990 to 2000 due to improvements in perinatal and child healthcare services, the establishment of NIP, nationwide nutrition programmes and health promotion activities and campaigns. However since 2000, the under-5 mortality rate has remained stagnant, ranging from 8 to 9 per 1,000 live births. The five (5) main causes of under-5 mortality are conditions originating from perinatal period, congenital malformation, injuries, infection and respiratory diseases. More than half of these death occur in neonatal age group, the majority of which are non-preventable. In 2023, the under-5 mortality rate is 8.3 per 1,000 live births while the neonatal mortality rate is 4.3 per 1,000 live births. **Figure 4.3** shows the trend of the under-5 mortality rate, infant mortality rate and neonatal mortality rate since 1990.

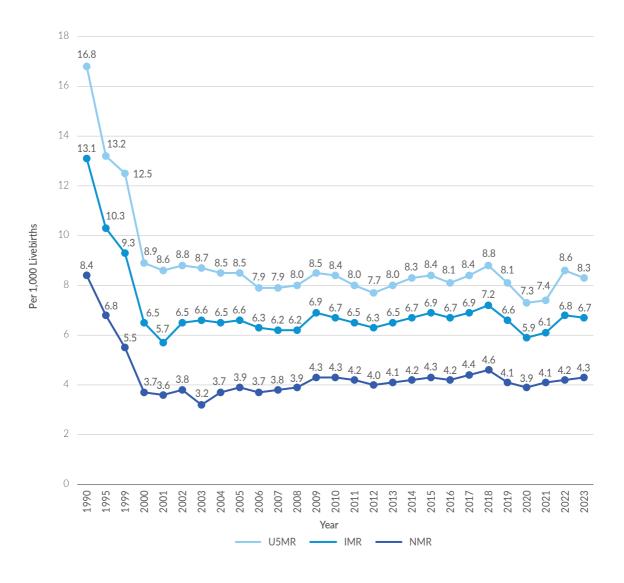


Figure 4.3 Under-5 Mortality Rate (U5MR), Infant Mortality Rate (IMR) and Neonatal Mortality Rate (NMR) in Malaysia 1990-2023

Notes:

- 1. U5MR = Under-5 Mortality Rate
- 2. IMR = Infant Mortality Rate
- 3. NMR = Neonatal Mortality Rate

Source: Department of Statistics Malaysia

HEALTH SCREENING

ADOLESCENT HEALTH

A total of 226,339 adolescents were screened, representing 4.23% of Malaysia's adolescent population of 5,345,000 (aged 10-19 years) from January to September 2024. The five (5) main health issues identified through the health screening were as follows:

i. Nutritional health issues: 20,212 cases (8.93%)

ii. Physical health issues: 5,562 cases (2.46%)

iii. Risky behaviour health issues: 4,915 cases (2.17%)

iv. Mental health issues: 2,919 cases (1.29%)

v. Sexual and reproductive health issues: 2,185 cases (0.97%)

The attendance of new antenatal cases among adolescents registered at MOH primary healthcare facilities showed a decline from 10,349 cases in 2019 to 8,464 cases in 2023. From January to September 2024, a total of 5,953 cases were reported, with 2,604 cases (43.74%) were unmarried and 4,874 cases (81.87%) were not in school. During this period, Sarawak recorded the highest number of cases (1,479), followed by Sabah (822 cases) and Selangor (555 cases).

In 2024, an additional 43 KKs were nominated under the Best Practice Adolescent Friendly Health Services (AFHS) programme. This programme encompasses the evaluation and recognition of health clinics, based on WHO criteria, Standard Operating Procedures (SOPs) and MOH guidelines. Since its implementation from 2019 to 2024, a total of 121 KKs nationwide have been nominated and 115 KKs have successfully received recognition as Best Practice AFHS.

ADULT HEALTH

The Women's Reproductive Cancer Screening Programme encompasses cervical and breast cancer screenings. As of September 2024, 283,131 women age 30-65 have been screened for cervical cancer, contributing to a screening coverage of 15.1%. Among them, 89,253 women underwent HPV testing, while 193,878 were screened using cytology methods.

For breast cancer, clinical breast examinations (CBE) are offered to women aged 30 and above at healthcare facilities. Mammogram screenings are available for high risk women aged 40 and above and are conducted once every two (2) years for women aged 50 and above without major risk factors. As of September 2024, a total of 464,518 women have undergone clinical breast examinations, and 7,506 high-risk women have undergone mammograms. Mammogram results identified 113 cases of breast cancer, with a detection rate of 1.50%.

In April 2024, a pilot project for Early Detection Services for Men's Sexual and Reproductive Health (SRH) Issues was launched in the FT of Kuala Lumpur & Putrajaya, Kelantan and Kedah. This service focuses on early detection of erectile dysfunction (ED), benign prostatic enlargement (BPE) and prostate cancer. By December 2024, a total of 32 clinics were offering these services,

and as of September 2024, 791 patients had been screened. The results revealed that 392 patients (49.56%) were diagnosed with ED while 256 (32.36%) had BPE. This service is planned for expansion to Melaka, Johor and Terengganu in 2025.

ELDERLY HEALTH

The Elderly Health Services Action Plan 2023-2030 (PTPKWE 2023-2030) and the Dementia Action Plan 2023-2030 were launched on 1 October 2024, in conjunction with the Senior Citizens Day 2024 Celebration by the MOH. It aims to strengthen health services for the elderly through comprehensive healthcare services and an Integrated Elderly Health Care approach that will involve all levels in the community, primary and tertiary healthcare, as well as collaboration and coordination between various ministries, agencies and NGOs organisations to enhance Universal Health Coverage (UHC).

Integrated care for the elderly at the primary health level (GeCares) is a proactive approach designed to ensure more sustainable and holistic primary healthcare. Its main goal is to address the health and well-being of the elderly by providing integrated and patient-centered care, as well as optimising intrinsic capacity and functional ability as individual ages. Screened seniors will be referred to family physicians for a detailed assessment and the preparation of a personalised care plan.

In addition, the Community Nurses (JM) role expansion programme at KD in the elderly healthcare is an initiative aimed to expand services through Community Based Primary Healthcare approach. This initiative has been implemented in phases since 2019 and as of 2023 all states have implemented it. Currently, 434 KD are implementing this initiative.

The Elderly Club was established under the coordination of KK to encourage the community and NGO involvements in the elderly healthcare. As of December 2024, a total of 11,819 members are covered under 285 active senior citizens clubs. These club organise various activities including health promotional activities and health screenings for the local elderly.

OUTREACH SERVICES

SCHOOL HEALTH SERVICES

The School Health Programme was started in 1967 with the aim of ensuring its optimal health of school children. School health services are given to pre-school children until Form 4 students according to a set schedule. These services consist of health education, screening, health appraisal, immunisation, treatment, referral and other related services which are conducted annually in school. In 2024, the school health services coverage for Year 1, Year 6 and Form 3 students exceeded 97%.

For the prevalence of low vision among Year 1 students in 2024, FT Kuala Lumpur showed the highest percentage at 7.16% followed by Terengganu and Sarawak at 7.11% and 6.53% respectively.

Regarding the nutritional status in 2024, Sarawak showed the highest percentage of overweight and obese among Year 1 students at 19.18%. Perak showed the highest percentage of overweight and obese among Year 6 students with 32.36% while Melaka had the highest percentage of overweight and obese among Form 3 students at 23.43%.

The school health immunisation service is provided on a scheduled basis to Year 1 students receive the diphtheria and tetanus (DT) immunisation, female Form 1 students receive the HPV immunisation, and Form 3 students receive the anti tetanus toxoid (ATT) immunisation. In 2024, the coverage for DT and ATT immunisations were 95.1% and 91.0%, respectively. Starting in May 2024, a Catch-up HPV immunisation programme was conducted for Form 1 female students who had not yet received the HPV vaccine. The coverage of HPV immunisation for Form 1 female students in the 2021, 2022, 2023 and 2024 cohorts were 94.5%, 90.8%, 87.5% and 89.7%, respectively.

THE FORM 4 THALASSAEMIA SCREENING PROGRAMME

In 2024, a total of 312,376 Form 4 students were offered thalassaemia screening to determine their carrier status. Of those offered screening, approximately 276,428 underwent screening, indicating a 10.41% increase compared to the previous year. The results showed 169,781 students (61.41%) were not thalassaemia carriers, while 66,294 students (23.98%) were suspected carriers. Additionally, 36,573 students (13.23%) were detected to have iron deficiency anaemia and 3,780 students (1.37%) had other causes of anaemia.

COMMUNITY-BASED REHABILITATION (PDK) VISIT

A total of 567 PDK centres were visited for health checks and early health interventions for persons with disabilities (PWD). Out of 18,320 children with disabilities, 18,130 (98.96%) underwent health checks and received early interventions as required.

DOMICILIARY CARE SERVICES (PPD) AND DOMICILIARY PALLIATIVE CARE SERVICES

The focus of health services for adults with disabilities includes PPD and Domiciliary Palliative Care Services. As of September 2024, a total of 441 KKs have implemented PPD, while 257 KKs have implemented palliative care. A total of 3,976 bedridden patients have received PPD and 649 patients under palliative medical scope have been treated. In 2024, the scope of palliative medical care was expanded to Terengganu.

EMERGENCY AND AMBULANCE SERVICES IN PRIMARY HEALTH FACILITIES

In 2024, the sector collaborated with the National Committee on Resuscitation Training (NCORT) to conduct a Basic Life Support (BLS) Instructor Course. This course included family medicine specialists, medical officers, assistant medical officers (AMOs), and nurses from MOH health clinics, with a total of 108 individuals trained. The percentage of AMOs holding valid BLS certificates declined from 92% in 2023 to 80.40% in 2024. Pahang, Negeri Sembilan, FT Labuan and Kelantan managed to achieve the target of 95% certification.

The total of ambulances at MOH primary healthcare facilities is 827 units. Among them, 701 units are functional, 65 units are damaged and awaiting repair, 30 units are in the process of being declared beyond economic repair (BER), and 31 units have already been declared BER. Additionally, in 2024, six (6) new Type B ambulances were distributed to KKs in Kedah.

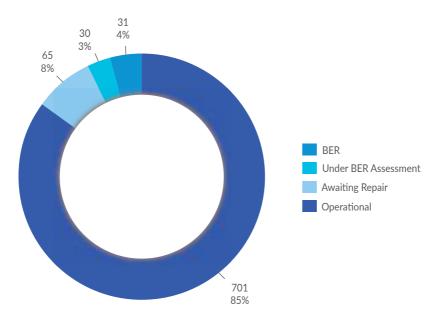


Figure 4.4 Ambulances Status in Primary Healthcare Facilities

PRIMARY MEDICAL CARE

CARDIOVASCULAR PREVENTION CONTINUING MEDICAL EDUCATION (CME) PROGRAMME

On 19 November 2024, the MOH signed a Memorandum of Understanding (MoU) with the National Heart Institute (IJN) to implement the Cardiovascular Prevention CME Programme. This program aims to enhance the knowledge and skills of healthcare personnel in both public and private primary healthcare facilities in the prevention of cardiovascular diseases.



Image 4.24 The Signing of MoU between MOH and IJN for the Cardiovascular Prevention CME Programme

NATIONAL WOUND CARE PROGRAMME IN PRIMARY HEALTHCARE

A total of 15 wound care training modules for primary healthcare have been established for healthcare providers to strengthen wound care service delivery in primary healthcare facilities. The Training of Trainers (ToT) *Modul Latihan Penjagaan Luka di Kesihatan Primer Peringkat Kebangsaan KKM* Workshop was held on 15-17 May 2024.



Image 4.25 ToT Modul Latihan Penjagaan Luka di Kesihatan Primer Peringkat Kebangsaan KKM Workshop

ENHANCED PRIMARY HEALTHCARE (ENPHC) INITIATIVE IN HEALTH CLINICS

EnPHC is an initiative aimed at improving the health of Malaysians through a systematic approach in the managing of NCD at the primary healthcare level, focusing on prevention, early detection and treatment.

A workshop to enhance understanding and improve the effectiveness of EnPHC implementation at the field level was held from 10-12 June 2024. The workshop was attended by experts, officers and representatives from five (5) participating states which is Johor, Selangor, Kelantan, Negeri Sembilan and Perlis, as well as divisions within the ministry.



Image 4.26 Workshop on Strengthening the Implementation of EnPHC

As of December 2024, the EnPHC initiative has been implemented in 86 KKs across five (5) states which is Johor, Selangor, Negeri Sembilan, Kelantan and Perlis. **Table 4.10** illustrates the increase in the number of KK adopting the EnPHC initiative from 2017 to 2024.

Table 4.10 Number of KK Implementing the EnPHC Initiative 2017-2024

State	2017-2018	2019	2020	2021	2022	2023	2024	Total
Perlis	0	0	0	10	0	1	0	11
Selangor	9	6	0	0	2*	0	0	15
Negeri Sembilan	0	3	0	0	0	0	0	3
Johor	11	11	0	0	0	0	0	22
Kelantan	0	0	5	0	0	17	13	35
Total	20	20	5	10	2*	18	13	86

Note:

*KK Balakong (2017-2018) and KK Sepang (2019) in Selangor were discontinued from the programme and replaced by KK Bandar Sri Putra and KK Sg. Pelek.

To ensure the smooth and effective implementation of the EnPHC initiative, ten (10) indicators have been established and are regularly monitored at the national level. These indicators also include clinical outcomes to assess the initiative's impact on the management of diabetes mellitus (DM) and hypertension (HPT) among patients.

In 2024, a total of 1,499,452 individuals were assigned, of whom 1,291,702 (86.14%) were enrolled and 587,449 (39.18%) underwent screening for NCD risk. Among those screened, 11.8% were newly diagnosed with HPT, 8.7% with DM and 14.1% with dyslipidaemia.

The medication adherence rate among patients was 78.6%, while adherence to clinic and hospital appointments stood at 85.6% and 90.2%, respectively. In terms of disease control, 32.9% of DM patients achieved controlled HbA1c levels (≤6.5%), while 67.6% of patients maintained controlled blood pressure (<140/90 mmHg).

This initiative will continue to be expanded in phases to strengthen primary healthcare services. It serves as a platform for early detection of NCDs within the community, ensuring that patients receive holistic and systematic treatment with a focus on person-centred care.

DIGITAL TRANSFORMATION OF PRIMARY HEALTHCARE

In 2024, several digital health transformation initiatives have been implemented in primary healthcare. There was an increase in the digitalisation of health records in KK including the adoption of the Cloud-based Clinic Management System (CCMS) SystmOne in 50 KKs, the Teleprimary Care-Oral Health Clinical Information System (TPC-OHCIS) in 107 KKs, Advanced Clinic Management (ACM) in 45 KKs, RekodPesakit in 26 KKs and Fisicien in one (1) KK. Among these systems, SystmOne, TPC-OHCIS, and RekodPesakit utilise cloud-based technology to enhance accessibility and efficiency.

Additionally, KK continue to implement the MySejahtera online appointment system and the Picture Archiving and Communication System (PACS). This year, a total of 168,408 virtual consultation sessions have been successfully conducted, marking a 24% increase from the previous year.

The digitalisation of primary healthcare services has been further strengthened with the completion of the Health Information Exchange (HIE) integration platform, incorporating the latest technology, equipped with lifetime health records, continuity of care and patient empowerment.

FHDD has actively supported various digital health transformation initiatives, involving healthcare personnel across almost all levels and roles in primary healthcare facilities. Their strong commitment and adaptability in integrating technology into healthcare services are crucial in advancing the health transformation agenda outlined in the Malaysian Health White Paper.

PRIMARY QUALITY AND INNOVATION

INFECTION PREVENTION AND CONTROL

A total of 723 Compliance to Standard Precautions Practices Audit was carried out in 2024. The compliance percentage was 96.9%, an increase of 0.3% compared to 2023 and successfully achieving the national target of 95%. Hand Hygiene Compliance Survey 2024 was conducted in two (2) phases. For phase 1, it was implemented in 926 KKs, where 94.18% of hand hygiene practices were implemented based on 416,700 audited moments of hand hygiene. Phase 2 was implemented in 934 KKs, where 95.33% of hand hygiene practices were implemented based on the 420,300 audited moments of hand hygiene.

ANTIMICROBIAL STEWARDSHIP (AMS)

AMS Clinical Audit was conducted in 995 KKs in 2024. The overall achievement of appropriate antibiotic prescriptions was 93%, reflecting a 4% increase from 2023. The two (2) elements with the lowest percentages are health education on antibiotic compliance or side effects given to patients, as well as statements regarding medication allergies.

PATIENT SAFETY

A total of 696 patient safety-related incidents out of 776 reports received in 2024 were patient-safety related. Selangor recorded the highest number of reports sent, followed by Johor and Perak. Medication Error emerged as the most frequently documented category with 240 incidents, while patient falls during visits to primary healthcare facilities accounted for 171 incidents.

LEAN

A total of 19 Type 1-4 KKs participated in three (3) workshop sessions held at NIH. The scope of the workshops included Introduction of Lean Healthcare, Waste & Value, Common Tools & Technique, Value Stream Mapping, A4 Quadrant Presentation and A3 Report Presentation.

CUSTOMER SATISFACTION SURVEY

The Customer Satisfaction Survey 2024 was conducted in 1,075 KKs (97.8%), gathering feedback from 121,918 respondents. The national median score in 2024 for customer satisfaction was 94%, marking a 3.2% increase from 2023.

ASTHMA CLINICAL AUDIT

A total of 271,767 patient records from 892 KKs were audited for Asthma Clinical Audit 2024. The asthma clinical audit achievement for 2024 increased by 2%, reaching 90% compared to 88% in 2023.

WAITING TIME MONITORING

Waiting time monitoring was implemented across nine (9) states, involving health clinics utilizing TPC-OHCIS and CCMS systems. A total of 90% of patients were attended to by medical officers within 90 minutes.

NUTRITION DIVISION

The Nutrition Division is organised into three (3) core sections: the Nutrition Planning and Policy Section, the Family Nutrition Section, and the Community & Inter Agency Nutrition Section. Each section plays a distinct role in fulfilling the division's primary mandate, encompassing the planning, development, implementation, monitoring and evaluation of nutrition programmes. These programmes address four (4) critical areas which are prevention, intervention, advocacy and nutrition surveillance.

THE IMPLEMENTATION OF ADVOCACY ACTIVITIES: WAR ON SUGAR 2024

War on Sugar is an initiative coordinated by the MOH aimed to reduce sugar consumption among Malaysians. This initiative aims to reduce the prevalence of obesity and NCDs such as diabetes and dental caries in the country.

To ensure the success of this initiative, various advocacy activities have been conducted throughout 2024 to educate the public on the importance of reducing sugar intake. These efforts encompass strategies such as campaigns, community engagement programmes and stakeholder collaborations, all of which are designed to encourage healthier dietary habits especially to reduce sugar consumption among Malaysians.

WAR ON SUGAR CAMPAIGN IN CONJUNCTION WITH THE NATIONAL BULAN MALAYSIA SIHAT SEJAHTERA (BMSS) 2024

The War on Sugar Campaign was officially launched by the Prime Minister on 8 September 2024 at Port Dickson, Negeri Sembilan. Various activities were carried out at the War on Sugar Zone from 6-8 September 2024, focusing on educating the community about sugar and its health risks.

Among the activities conducted are advocating nutrition information on food label reading Healthier Choice Logo (HCL), Energy Icon, Nutrition Information Panel (NIP), nutrition claim and ingredient list modification of less sugar drinks (*teh tarik, cendol*, hydraboost), advocacy of *Penyajian Hidangan Sihat Semasa Mesyuarat* (PHSSM), cooking demonstration, pocket talk, sugar-related interactive games and exhibition. These activities served to make the campaign both informative and enjoyable, enhancing participants' understanding of the importance of reducing sugar consumption in their daily lives. Throughout the event, the zone attracted a total of 617 visitors, marking active community engagement and participation in this campaign.





Image 4.27 War on Sugar Campaign Launching in conjunction with The National BMSS

WAR ON SUGAR ADVOCACY DURING THE LAUNCH OF *PUTRAJAYA SIHAT SEJAHTERA* (PSS) IN CONJUNCTION WITH BMSS AT PUTRAJAYA LEVEL

Advocacy for the War on Sugar in conjunction with the launch of *PSS* was held from 27-29 September 2024 at Dataran Wawasan, Putrajaya. The programme was officiated by Minister of Health on 28 September 2024. Various sugar-related advocacy activities were carried out at the War on Sugar Zone that attracting 710 visitors.





Image 4.28 War on Sugar Advocacy at the Launch of PSS

WAR ON SUGAR SHOWCASE IN CONJUNCTION WITH WELLNESS PROGRAMME WITH MEMBERS OF PARLIAMENT

The Wellness Programme with Members of Parliament is an effort by the MOH to bring health services closer to the people through the Health Services Showcase. This initiative featured nutrition activities such as the War on Sugar Initiative and the First 1,000 Days of Life Initiative. The showcase was officiated by the Speaker of the Parliament on 6 October 2024.

The programme's objective was to promote the War on Sugar Initiative to all members of parliament, encouraging its implementation in their respective constituencies. The programme took place from 4-14 October 2024 at the lobby area of the Parliament building.



Image 4.29 Wellness Programme with Members of Parliament

LAUNCHING OF THE STRATEGIC PLAN TO REDUCE SUGAR INTAKE AMONG MALAYSIANS, 2024-2030 IN CONJUNCTION WITH NUTRITION MONTH MALAYSIA 2024 AT MOH LEVEL

The Strategic Plan to Reduce Sugar Intake among Malaysians, 2024-2030, was developed as an integrated effort to combat high sugar intake in Malaysia. This initiative involves collaboration across multiple sectors, including government agencies, private sectors, NGOs, academicians, industry players, the public, local and international organisations. The plan was launched on 29 June 2024 by the Minister of Health during the Nutrition Month Malaysia celebration at the MOH level which will be celebrated annually.

The plan comprises six (6) key strategies with 38 initiatives and 65 activities. The strategies and initiatives covered policies, advocacy and public-private partnerships through a whole-of-nation and whole-of-society approach. As of October 2024, 30.7% of the planned activities and initiatives under this plan have been implemented.





Image 4.30 Launching of the Strategic Plan to Reduce Sugar Intake among Malaysians 2024-2030

COLLECTION OF ASPIRASI PEMAKANAN RAKYAT (ASPERA) FOR THE FOURTH NATIONAL PLAN OF ACTION FOR NUTRITION OF MALAYSIA (NPANM IV, 2026-2030)

The MOH is in the process of drafting the NPANM IV, 2026-2030, which aligns with the Health White Paper, the Thirteenth Malaysia Plan (13MP), the SDG 2030, and various national and international nutrition commitments.

The Minister of Health launched the ASPERA Portal on 2 August 2024, during the National Food and Nutrition Safety Council (MKMPK) meeting. This portal aims to collect input and feedback from all levels of society over the next five (5) years. The ASPERA collection process was conducted from 2 August 2024 to 31 January 2025, using several platforms involving various stakeholders. ASPERA was also collected through Focus Group Discussion (FGD) sessions held from 14-16 August 2024, involving 80 participants, including implementation-level stakeholders such as NGOs, influencers and related international organisations. This initiative was undertaken to ensure that the plan developed is comprehensive, practical and tailored to meet the population's needs.

It is hoped that the ASPERA collection process will support the development of a more comprehensive NPANM IV and subsequently drive reforms in the national food system to encourage healthier dietary practices among the population.





Image 4.31 The Launching of ASPERA Portal





Image 4.32 FGD Session on ASPERA

NATIONAL STRATEGIC PLAN TO COMBAT THE DOUBLE BURDEN OF MALNUTRITION (DBM) AMONG CHILDREN IN MALAYSIA 2023-2030

The National Strategic Plan to Combat the DBM among Children in Malaysia, 2023-2030, was developed and monitored through the Special Committee on Combating the DBM among Children (JKMMBBM). As of November 2024, two (2) initiatives have been fully completed, two (2) are in the process of approval by the cabinet committee or council, two (2) are being implemented as pilot projects and 25 initiatives are in the implementation and consolidation phase.

The JKMMBBM meeting chaired by the Deputy Prime Minister was participated by Ministers, Deputy Ministers, the Chief Secretaries, the Director-General of Health, senior officers of the relevant ministries and agencies. Advocacy for this DBM Strategic Plan was conducted through the distribution of the plan's booklet to all Members of Parliament in the Dewan Rakyat on 15 October 2024. Additionally, a showcase of the plan and the First 1,000 Days of Life programme was organised with the Speaker of the Dewan Rakyat and all Members of Parliament from 4-14 November 2024.

Strengthening the First 1,000 Days of Life initiative is a key component of this DBM Strategic Plan. It aims to combat the double burden of malnutrition, striving for Towards Healthy Malaysian Children 2030, through collaboration with multiple stakeholders and strategic partners.





Image 4.33 The National Strategic Plan to Combat the DBM among Children Book Disseminated to Members of Parliament in the Dewan Rakyat



Image 4.34 The DBM Showcase and the First 1,000 Days of Life Initiative

2024 NUTRITION NEXUS: EMPOWERING POLICYMAKERS WITH RESEARCH INSIGHT

The Nutrition Nexus: Empowering Policymakers with Research Insights seminar, organised by the Technical Working Group on Nutrition Research, National Coordinating Committee on Food and Nutrition (NCCFN), was held in a hybrid format on 14 May 2024, at Damar Sari Hall, Putrajaya. The seminar aimed to provide a platform for nutrition research to inform policymaking, strengthen collaboration between researchers and policymakers and raise awareness of an integrated approach to public health policy development.

The event was officiated by Director of the BPKA, representing the Deputy Director-General of Health (Public Health). It was attended by 532 participants comprising health professionals and stakeholders from ministries, universities, professional bodies, and related agencies. Six (6) key research findings were presented, including adolescent dietary patterns, obesogenic food environments, school-based nutrition interventions, low-sodium *keropok lekor*, early infant nutrition & health outcomes and parathyroid hormone response to vitamin D3. An interactive Policy Insight session was also held, enabling in-depth discussions between participants and panellists on the topics presented.

The discussions resulted in key recommendations to address nutrition issues in Malaysia, including the implementation of sugary food tax, strengthening nutrition advocacy in schools, promoting vitamin D through awareness programmes & food fortification, reformulating traditional foods and initiating community programmes such as urban farming and cooking workshops to improve access to healthy foods.





Image 4.35 The Nutrition Nexus: Empowering Policymakers with Research Insights seminar

THE LAUNCH AND DIALOGUE SESSION ON THE UP-SCALING OF THE FIRST 1,000 DAYS OF A CHILD'S LIFE IN MALAYSIA

On 6 August 2024, the MOH organised the Launch and Dialogue Session on the Up-Scaling of the First 1,000 Days of a Child's Life at the Putrajaya International Convention Centre (PICC). The event, officiated by Minister of Health, was part of the National Strategic Plan to Combat the DBM 2023-2030. It aimed to strengthen efforts to address DBM among children under two years old, aligning with the whole-of-nation approach involving various stakeholders, including representatives from the private health sector, professional health associations and NGOs.

The event began with a Pocket Talk Session by Professor Dr Muhammad Yazid Jalaludin, highlighting the role of healthcare practitioners in addressing DBM. This included monitoring children's nutritional status, immunisation and growth. The subsequent dialogue session discussed the need for standardised growth charts across all private healthcare facilities and the importance of improving parental health literacy to ensure children receive optimal care during the critical first 1,000 days of life.

To ensure the success of this initiative, follow-up actions were proposed such as enhancing training for healthcare practitioners in women's and children's health, advocating comprehensive nutrition and health awareness and strengthening the use of standardised growth charts to monitor children's development. Collaboration between government agencies, the private sector and NGOs will continue to be reinforced to achieve the initiative's goals.

The launch also featured the presentation of commitment certificates to 22 Strategic Partners as a show of support for the initiative. Additionally, 40 private hospitals participating in the Baby-Friendly Hospital Initiative (BFHI) received recognition, symbolising their commitment to promote breastfeeding.





Image 4.36 Launch and Dialogue Session on the Up-Scaling of the First 1,000 Days of a Child's Life in Malaysia

HEALTH EDUCATION DIVISION (HED)

The HED has been a leading organisation in implementing national health promotion activities since 1991. Over its three (3) decades of establishment, the HED has undergone several evolutions in delivering health promotion services aimed at enhancing the health literacy of Malaysians through disseminating health information across various media platforms, modification of health behaviour, advocacy, and community empowerment. The *Agenda Nasional Malaysia Sihat* (ANMS) focuses on four (4) thrusts namely; *Strengthening the Promotion of a Healthy Living Culture, Strengthening Health Wellness Services, Empowering Self-Health Control* and *Strengthening Environmental Cleanliness*. The ANMS is also strengthened through the development of policies and frameworks, as well as the continuous implementation of collaborations and stakeholder engagement.

STRENGTHENING GOVERNANCE AND THE DEVELOPMENT OF POLICIES AND FRAMEWORKS THAT SUPPORT ANMS

ANMS CABINET COMMITTEE MEETING

ANMS governance is also strengthened through the implementation of the ANMS Cabinet Committee Meeting, held twice a year. In 2024, the meetings were conducted on 4 March and 24 September, both chaired by the Deputy Prime Minister of Malaysia. During these meetings, the ANMS Cabinet Committee is responsible for approving strategic directions, resource requirements, and policies from various ministries and agencies to address national health issues and establish an ecosystem that supports a healthy living culture.





Image 4.37 ANMS Cabinet Committee Meeting

ENGAGEMENT AND CAPACITY BUILDING WITH ANMS STRATEGIC PARTNERS

In 2024, HED, through the ANMS Secretariat at the state level nationwide has successfully conducted ANMS engagement sessions with 993 strategic partners, comprising 626 public sectors including ministries, 153 private sectors, and 214 NGOs. As a result of these engagements, 94% of these strategic partners successfully implemented at least four (4) ANMS initiatives, with a total of 5,213 activities carried out.

DEVELOPMENT OF THE NATIONAL HEALTH LITERACY POLICY (DLKK)

DLKK is one of the key initiatives supporting ANMS and the Twelfth Malaysia Plan 2021-2025 (Twelfth Plan). It consists of three (3) policy thrust, six (6) strategies and 16 initiatives. In 2024, a DLKK Townhall session was held from 22-24 April in Port Dickson, attended by 45 focal points representing 25 ministries, 6 state health departments, and 14 agencies under the MOH. The objectives of this townhall were to present the draft content of the DLKK for stakeholder feedback, update the DLKK content, develop DLKK initiatives and activities in phases. The DLKK was officially launched on 8 September 2024 by the Prime Minister and the key outcomes of DLKK will be evaluated based on improvement in the health literacy competency of the population, the establishment of a conducive ecosystem that supports health literacy and synergised and integrated health literacy governance.





Image 4.38 DLKK Launching Ceremony and DLKK Book

THE LUNCH OF PUTRAJAYA SIHAT SEJAHTERA (PSS)

The PSS was launched on 28 September 2024 by the Minister of Health at Dataran Wawasan Putrajaya. The purposes of the PSS are to produce public servants in Putrajaya with optimal health status, productive and resilient, thereby contributing more comprehensively towards the nation's development. PSS initiative is set to continue until 2030, with an initial pilot phase scheduled from 2024 to 2025. In conjunction with the launch, the PSS Strategic Plan was also launched, serving as a guideline and reference for relevant stakeholders towards the successful implementation of this initiative.





Image 4.39 PSS Launching Ceremony and PSS Book

DEVELOPMENT OF THE PULAU SIHAT SEJAHTERA STRATEGIC PLAN

The *Pulau Sihat Sejahtera* initiative aligns with ANMS, aiming to create an ecosystem that supports the culture of healthy living and environmental cleanliness. From 28-30 October 2024, a total of 42 meeting participants from federal ministries, government departments, local authorities (PBT), NGOs and community leaders in Sabah attended the Health and Wellness Action Plan Preparation Meeting. This meeting focused on formulating the *Pulau Sihat Sejahtera* Strategic Plan, which will be published as a guideline and reference for relevant stakeholders to support the successful implementation of this initiative.





Image 4.40 The Pulau Sihat Sejahtera Action Plan Preparation Meeting in Sabah

STRENGTHENING THE PROMOTION OF HEALTHY LIVING CULTURE THROUGH MEDIA AND ACTIVITIES

A healthy lifestyle and a supportive environment are vital for health and well-being. To promote healthy living and enhance access to health information, various media platforms and health promotion activities are utilised to ensure the public receives accurate and relevant health messages.

PROMOTION OF HEALTHY LIFESTYLE CULTURE THROUGH OUTDOOR MEDIA, SOCIAL MEDIA, CONVENTIONAL MEDIA, AND THE PUBLICATION OF HEALTH PROMOTION MATERIALS

The promotion of the ANMS Healthy Lifestyle Culture was further strengthened in 2024 through the implementation of the National Health Promotion Campaign, aimed at increasing awareness, understanding, and behavioural change among Malaysians towards adopting a healthy lifestyle. Under this campaign, one of the key initiatives was the utilisation of e-hailing platforms, with the participation of 300 vehicles nationwide serving as promotional agents for the ANMS healthy lifestyle culture. This initiative successfully recorded 253.2 million impressions within six (6) months. In addition, billboards were installed at 84 strategic locations, including high-impact areas and remote regions, to ensure that messages promoting a healthy lifestyle are accessible to all Malaysians.

Social media platforms also served as the backbone of the 2024 National Health Promotion Campaign. Through these digital platforms, a total of 365 live-streaming sessions were successfully conducted, alongside 39,038 posts, generating an overall reach of 38.1 million. In addition, an interactive approach through the PodcaSTERK podcast garnered 106,000 views via TikTok Live and Facebook Live. The year 2024 also marked a milestone as the MyHEALTH KKM YouTube channel received the Silver Creator Award for surpassing 100,000 subscribers, reaching a total of 123,046 subscribers and 37.8 million views.

The campaign was further strengthened through conventional media such as television and radio, which successfully contributed to 1,222 broadcast slots and 2,499 outdoor media advertisements. In addition, a total of 21,867 health promotion and educational materials were produced, and 808,267 materials were distributed in various formats, including infographics, videos, e-magazines, books, posters and leaflets.

INVOLVEMENT OF KEY OPINION LEADERS (KOLS) IN OUTREACH ACTIVITIES

To strengthen and amplify healthy lifestyle messages under the ANMS initiative, the involvement of KOLs has proven to be a vital and effective medium for public engagement. Throughout 2024, a total of eight (8) KOLs namely Achey, Mek Yun, Bell Ngasri, Atu Zero, Chi Howe, Ravi Zephyr, Arwan and Aliana Azizan have actively promoted healthy lifestyle practices through various ANMS outreach activities across Malaysia. These KOLs participated in diverse activities and challenges alongside the public at outreach event locations nationwide. Some of the key challenges included Kayuh Kilat Challenge, Lumba Langkah (Step Race), Ragbi Target, Subsoccer, ANMS Wau Bulan, ANMS Origami, Healthy Eating VR and Healthy Living VR.

The dissemination of healthy lifestyle messages through the KOLs' respective social media platforms resulted in an impressive 6,187,168 impressions and 434,772 engagements. The strong public response to these posts highlights the significant impact of engaging KOLs from diverse backgrounds in promoting healthy living messages effectively to various segments of the community.

CELEBRATION OF BULAN MALAYSIA SIHAT SEJAHTERA (BMSS) AND BMSS @HePILI 2024, THE LAUNCH OF DLKK AND THE WAR ON SUGAR CAMPAIGN

The promotion of a healthy lifestyle was further strengthened through the celebration of BMSS 2024 and BMSS@HePiLI nationwide. BMSS is an initiative under the ANMS aimed at enhancing strategic collaboration in promoting a healthy lifestyle across various settings. The national-level BMSS Launch Ceremony was officiated by the Prime Minister on 8 September 2024 in Port Dickson. During this ceremony, the Prime Minister also launched the DLKK and the War on Sugar Campaign. DLKK aims to improve health literacy among Malaysians while the War on Sugar Campaign advocates for the reduction of sugar intake to prevent diabetes and lower the risk factors associated with obesity among Malaysians. Throughout BMSS 2024, various activities were held nationwide, including the state-level BMSS Celebrations, the Wellness Day events at Wellness Hubs and BMSS@HePiLI activities in 127 schools, engaging 106,032 students. Overall, BMSS 2024 successfully recorded approximately 1,500,080 participants, reflecting the strong commitment of all stakeholders through a whole of nation approach towards fostering a healthy lifestyle culture.





Image 4.41 National-Level BMSS Launch and BMSS Run Activity

CELEBRATION OF WORLD PHYSICAL ACTIVITY DAY (WoPAD)

Have a Good Time! Be Active! was the theme for the 2024 World Physical Activity Day (WoPAD), celebrated globally on 6 April each year. In conjunction with WoPAD 2024, some of the activities held included the Road to Syawal Challenge, which took place from 12 March to 12 April, attracting 3,146 participants, meanwhile, ANMS Challenge, held throughout April 2024, engaged 1,420 participants. Additionally, various videos promoting the message of an active lifestyle were produced. The overall performance of the WoPAD 2024 Campaign recorded impressive outcomes, achieving 132,945 reach, 16,653 engagements, 1,062 likes and 620 shares.





Image 4.42 WoPAD 2024 Promotional Infographic

KEMBARA SIHAT SEJAHTERA AND MEET & GREET HePILI BERSAMA DIDI & FRIENDS PROGRAMME

This programme is a collaborative initiative between the MOH and the animated characters Didi & Friends, aimed at disseminating messages on healthy living culture among the public, particularly children, through an edutainment approach. Throughout this tour, various engaging activities focusing on six (6) health behaviours were offered, namely personal hygiene, environmental cleanliness, healthy eating, being physically active, say no to smoking & vaping and mental well-being. In 2024, the tour was held in three (3) zones namely the Northern Zone (Kedah), East Malaysia Zone (Sarawak), and Southern Zone (Melaka & Johor), with a total participation of 63,801 individuals. Additionally, six (6) schools in Perak, Sarawak, and Johor were selected as locations for the Meet & Greet HePiLI with Didi & Friends activities, involving a total of 7,173 students. A survey conducted among 6,016 visitors also revealed that 99.50% agreed that this tour encouraged them to adopt a healthy lifestyle, demonstrating that the implementation of such programmes can contribute to improving the health literacy of the population.





Image 4.43 Launch Ceremony of the *Kembara Sihat Sejahtera* HePiLI Programme with Didi & Friends and Meet & Greet Activities with Students

STRENGTHENING HEALTH WELLNESS SERVICES

Health wellness services serve as an enabling factor for creating an environment that supports the culture of healthy living among the population through the strengthening of health wellness services via Wellness on Wheels (WoW) and Wellness Hub (WH).

WELLNESS ON WHEELS (WoW) SERVICES

WoW is an initiative by the MOH that provides mobile health wellness services to communities through outreach activities. Its objectives are to enhance access to health promotion services, empower communities to take greater responsibility for their health, and encourage the adoption of an active lifestyle. As of December 2024, there are 19 WoW units nationwide, with the service further expanded to include six (6) Hilux vehicles known as WoW Zoomers, operating in the states of Terengganu, Kelantan, Melaka, Johor, Kedah and Pulau Pinang. Throughout 2024, WoW activities were successfully conducted in 1,048 localities, engaging a total of 481,394 participants.





Image 4.44 WoW Outreach Activities with Local Communities

WELLNESS HUB (WH) SERVICES

WH is a one-stop centre that provides comprehensive health wellness services to local communities. This initiative aligns with the MOH's goal to shift from Sick Care to Health Care, enabling individuals to manage their own health, as well as the well-being of their families and communities. In 2024, a total of 33 WHs were operational nationwide, recording a total customer attendance of 380,938 individuals. The number of new WH clients across the country reached 21,566, with 89% of them successfully referred to at least two (2) health wellness packages, thus meeting the set KPI for new client referral criteria. Additionally, the appointment booking system at WHs has been improved, allowing the community to schedule appointments through the MySejahtera application. As of December 2024, a total of 16,105 appointment bookings to WHs were received and 212 patients were referred via the MyVAS system. The enhancement of health wellness service offerings through WHs has also been strengthened through partnerships and collaborations with strategic partners from various.







Image 4.45 Various Activities at the WH

EMPOWERING SELF-HEALTH CONTROL

This initiative aims to empower individuals, families, communities, and strategic partners in fostering a healthy lifestyle, enabling them to manage their own health for overall well-being.

WEIGHT MANAGEMENT PROGRAMME I FIT EAT RIGHT (IFitEr)

IFitEr Weight Management Programme is an initiative by the MOH aimed at assisting communities facing issues related to overweight and obesity. In addition to providing support for weight management and improving fitness levels, this programme also empowers communities to adopt a healthy and active lifestyle. In 2024, the implementation of the IFitEr programme consists of two (2) components namely a physical programme (6 months) and an online programme known as MyVIFitEr 4.0. In 2024, a total of 132 IFitEr programme sessions were successfully conducted with the participation of 4,735 individuals. Of this number, 88% of participants successfully completed the programme and 77% showed improvements in their fitness levels. For weight loss success, 74% of participants managed to achieve their weight loss goals, with 21% of these participants successfully reducing at least 10% of their initial body weight by the end of the intervention. All these achievements met all the KPIs set for the programme. The programme was also expanded through a special collaboration with the Fire and Rescue Department of Malaysia (JBPM), involving 1,181 firefighters, where 83% successfully reduced their body weight by the end of the intervention.







Image 4.46 MyVIFitEr Promotional Infographic and IFitEr Programme with JBPM

GUIDELINES FOR THE IMPLEMENTATION OF X-BREAK TO PROMOTE AN ACTIVE LIFESTYLE AMONG CIVIL SERVANTS IN MALAYSIA

On 30 September 2024, the Public Service Department of Malaysia (JPA) issued the *Guidelines* for an Active Lifestyle Among Civil Servants through the X-Break and Sports Culture initiative, developed in collaboration with the MOH and the Ministry of Youth and Sports (KBS). These guidelines amend the previous directive outlined in the Circular on Light Exercises or the 15-Minute X-Break During Working Hours. The new guidelines include initiatives for the implementation of light exercises and stretching during working hours, as well as regular sports and physical activities to be carried out across all ministries and agencies. This effort aims to ensure that civil servants remain healthy, active and productive.



Image 4.47 Circular on the Guidelines for the Implementation of X-Break Issued by JPA

IMPLEMENTATION OF ACTIVE LIFESTYLE CULTIVATION FOR MOH PERSONNEL

The Active Lifestyle Cultivation Programme is an initiative that supports the ANMS in promoting an active lifestyle among MOH personnel. This programme is conducted on every Wednesday, aiming to foster active, productive, and efficient MOH staff, instil healthy living habits, prevent a sedentary lifestyle through consistent activities, enhance positive mental health, and reduce stress levels. Key activities under this programme include the 10,000 Steps Challenge, Putrajaya Tanggathon, Aerofithon (ZumBatik, Tabata, Circuit Training), as well as Basikalthon and Go Fit Games. Throughout 2024, a total of 2,999 participants have taken part in this programme.





Image 4.48 Infographic Announcement for the Putrajaya Tanggathon Activity and MOH 10,000 Steps Challenge

KOSPEN@ACTIV CHALLENGE

KOSPEN@Activ is an initiative by the MOH to encourage an active lifestyle among MOH personnel and the public using BookDoc application. This digital application utilises a gamification concept through smartphones and fitness trackers to monitor the number of steps taken by individuals, rewarding them upon reaching specific milestones. In 2024, this programme successfully offered 225 virtual challenges, with a total participation of 776,684 individuals. Overall, the cumulative number of steps recorded reached more than 154 billion steps.

LANGKAH SIHAT PUTRAJAYA CHALLENGE 2024

This challenge is an initiative implemented by the MOH to promote an active lifestyle among civil servants in Putrajaya. The 10,000 steps-a-day walking activity challenge is conducted virtually using the BiiB application. This challenge took place over 15 days from 20 August to 3 September 2024, involving 13,031 participants from 26 ministries in Putrajaya. The programme was organised with the support of Decathlon, Fave, MissClaire and Anta Running Shoes. The Putrajaya Healthy Steps Challenge 2024 was won by GengHecc10ksteps from the HED, while the winners in each category were the Prime Minister's Department (JPM) (Category XL), Ministry of Agriculture and Food Security (MAFS) (Category L), Ministry of Women, Family and Community Development (KPWKM) (Category M) and Ministry of Science, Technology, and Innovation (MOSTI) (Category S). These categories were determined based on the number of participants in each ministry's group.





Image 4.49 Infographic on *Langkah Sihat* Putrajaya Challenge 2024 and Award Presentation to the Champion (GengHecc10ksteps)

TRAINING OF TRAINERS (ToT) FOR PUTRAJAYASIHAT SEJAHTERA (PSS) COORDINATORS

The ToT programme for PSS coordinators from various ministries was held from 26-27 June 2024 at Kompleks Kejiranan Presint 11, Putrajaya. The event involved 85 PSS coordinators from 26 ministries and agencies. The objective of this training was to impart knowledge and skills necessary to drive PSS initiatives at their respective ministries and agencies.





Image 4.50 ToT Programme with PSS Coordinators from Ministries in Putrajaya

PUTRAJAYA SIHAT SEJAHTERA (PSS) ROADSHOW

The PSS Roadshow is a proactive measure undertaken by MOH to introduce the PSS initiative to all civil servants in Putrajaya and to conduct PSS surveys for collecting baseline data on individuals' health status. Throughout the PSS Roadshow, a total of 9,207 civil servants from 23 ministries, including the JPM, underwent health screenings. As of 30 November 2024, the health screening results revealed that 6,218 individuals were overweight or obese, 1,082 had high blood pressure, 612 were detected with high blood sugar levels, 2,288 had elevated cholesterol levels, 572 were identified as smokers and referred to the Quit Smoking Clinic, 453 had good dental health status, 281 individuals were at risk of depression and 132 were at risk of experiencing anxiety.





Image 4.51 Health Screening Activities at Ministries During the PSS Roadshow

CAPACITY BUILDING OF THE MALAYSIAN COMMUNITY HEALTH AGENT (MyCHAMPION)

MyCHAMPION is a volunteer service collaboration across ministries and agencies aimed at empowering communities to cultivate healthy living, self-health management, and sustain environments that support health and well-being. MyCHAMPION serves not only to support the implementation of ANMS but also acts as a spokesperson, facilitator, and agent of behavioural change to promote a healthy lifestyle within communities. As of December 2024, the registered membership of MyCHAMPION stands at 17,375. Of this number, 6,817 have registered under the MOH team. For MyCHAMPION (MOH), a total of 5,074 individuals have been trained and have implemented at least four (4) ANMS initiatives.

COMMUNITY EMPOWERMENT THROUGH MYCHAMPION COMBI

COMBI, which stands for Communication for Behavioural Impact, is a social mobilisation and communication strategy designed to influence and empower individuals, families, and communities towards a culture of healthy living and environmental cleanliness. In 2024, MyCHAMPION COMBI conducted various activities with communities, including healthy lifestyle promotion through social media (1,239 activities) and conventional media (98,411 activities), educational community mobilisation activities (1,585 activities) and outreach activities (197,324 activities). The total number of MyCHAMPION COMBI members nationwide is 32,949, with 104 new COMBI localities established, bringing the total to 2,633 localities.





Image 4.52 MyCHAMPION COMBI Empowerment Activities

EMPOWERMENT OF THE SISWA SIHAT PROGRAMME (PROSIS)

In 2024, three (3) empowerment sessions for the *Siswa Sihat* Programme (PROSIS) were conducted, involving 26 Institutes of Teacher Education Malaysia (IPGM) with a total of 80 student participants. These sessions took place from June to July 2024 across different zones namely Central & Southern Zone (10 campuses), East Malaysia Zone (7 campuses), and Northern & East Coast Zone (9 campuses). The main objective of these empowerment sessions was to strengthen and build the capacity of PROSIS students to become agents of healthy lifestyle culture among their peers and the IPGM community. Six (6) health behaviour scopes were emphasised for participants such as Personal Appearance, Healthy and Safe Eating, Physical Activity, Nurturing a Healthy Mind, Risk Behaviour and Environmental Cleanliness.

STRENGTHENING ENVIRONMENTAL CLEANLINESS

Environmental cleanliness is a shared responsibility of all levels of society. The state of an environment has significant implications for the health and well-being of Malaysians. Therefore, efforts to foster a sense of ownership and collective responsibility in maintaining and sustaining environmental cleanliness to support health and well-being must be prioritized.

ENVIRONMENTAL CLEANLINESS ACTIVITIES BY THE COMMUNITY

Environmental cleanliness is a crucial element in the prevention of vector-borne diseases such as dengue, malaria and chikungunya. In 2024, a total of 6,954 communities were empowered with healthy living practices and carried out health education activities related to environmental cleanliness. For the households in the trained COMBI locality, 182,062 out of 477,956 households successfully implemented the Search and Destroy activity to eliminate potential mosquito breeding sites, particularly for dengue prevention.







Image 4.53 Gotong-Royong Activities, Search and Destroy Aedes Breeding Sites and Community Monitoring of Localities

ENVIRONMENTAL CLEANLINESS PROGRAMME IN PUTRAJAYA EDUCATIONAL INSTITUTIONS

The organisation of this activity emphasizes the importance of cleanliness among members of educational institutions, particularly in fostering a healthy lifestyle culture among the younger generation. This activity was conducted from May to June 2024 in four (4) schools in the FT of Putrajaya, namely SMK Putrajaya Presint 18(1), SK Putrajaya Presint 8(2), SK Putrajaya Presint 5(1) and SK Putrajaya Presint 9(1), in conjunction with the *Gotong-Royong* Programme of the Parent-Teacher Association (PIBG) of the FT of Putrajaya Education Department. The activities were also supported by other government agencies such as the Solid Waste Management and Public Cleansing Corporation (SWCorp), Alam Flora and private companies such as Unilever and Kara Marketing. Throughout the programme, a total of 6,533 students participated.





Image 4.54 Environmental Cleanliness Activities in Putrajaya Schools

THE PULAU SIHAT SEJAHTERA

The *Pulau Sihat Sejahtera* Programme was introduced to improve the well-being and health of island communities in Malaysia by promoting environmental cleanliness practices. This concept aligns with Thrust Four of ANMS, which focuses on *Strengthening Environmental Cleanliness and supports the National Cleanliness Policy* under the Ministry of Housing and Local Government (KPKT). To develop the guidelines and strategic plan for the Healthy Island initiative, a stakeholder engagement session was held on 5 July 2024 with members of the Council and the Semporna District Office to discuss the implementation of the programme in Semporna, Sabah, which was chosen as the pilot project. Additionally, a site visit with strategic partners was conducted around the town and islands of Semporna to gain insight into the local community's conditions.





Image 4.55 Site Visit & Engagement Session between MOH with Sabah District Council Members and Semporna District Office

CHAPTER 5 MEDICAL

MEDICAL PROGRAMME

The Medical Programme is responsible for matters related to hospital medical services. It is headed by the Deputy Director General of Health (Medical). This programme consists of five (5) divisions which are:

- Medical Development Division (MDD)
- ii. Allied Health Sciences Division (AHSD)
- iii. Nursing Division
- iv. Traditional and Complementary Medicine Division (T&CMD)
- v. Medical Practice Division (BAP)

MEDICAL DEVELOPMENT DIVISION (MDD)

MDD is responsible for policymaking, planning, implementation and development of medical services. All these functions are fulfilled by four (4) sections and two (2) units as below:

- Medical Services Development Section
- ii. Medical Profession Development Section
- iii. Medical Care Quality Section
- iv. Malaysian Health Technology Assessment Section
- v. Medical Aid Fund Technical Assessment Unit
- vi. Medical Compensation Technical Evaluation Unit

MEDICAL SERVICES DEVELOPMENT SECTION (CPPP)

CPPP is the largest section under the MDD, with its primary scope involving coordinating and ensuring access to clinical/specialist services delivery, encompassing aspects of hospital management, 123 specialist/subspecialist services and medical resource management. The following table lists CPPP's achievements throughout 2024:

Table 5.1 Achievements of CPPP 2024

Achievements and Activities of CPPP in 2024	Total
Organisation of International Conferences/Seminars	4
Organisation of National Conferences/Seminars	16
Development of Policies/Guidelines/Manuals and Protocols	77
Publications	14
Number of Technical Workshops/Courses/Training	125
Public-Private Partnership (PPP) and External Agency Projects	19
Service Monitoring Visits	106
Number of International Collaborations	11
Involvement in Research	22

Achievements and Activities of CPPP in 2024	Total
Technical/Expert Meetings	729
Health Day Celebrations	13
Preparation and Presentation for the Top Management	17
Integration of Modalities, Systems and Digital Applications	73

Below are among the programmes and collaborations carried out in 2024:

HOSPITAL SERVICES OUTSOURCING PROGRAMME (HSOP)

This programme involves outsourcing patients from all MOH hospitals to 91 private healthcare facilities and services (PHFS) including private healthcare centres within the University Teaching Hospital Network (PPS-HPU). In 2024, HSOP covered four (4) service types: Radiology & Imaging (CT scan, MRI, Ultrasound), Nephrology (AVF Surgery), Cardiothoracic Surgery (Adult & Paediatric Heart Surgery), and Cardiology (Investigations and Interventions). A total of 25,162 patients benefited from this programme, as detailed below:

Table 5.2 HSOP Patients by Service Type

Service Type	Nephrology	Cardiology	Cardiothoracic Surgery	Radiology
Number of Patients	1,027	7,899	344	15,162

STRATEGIC COLLABORATION BETWEEN MOH AND IHH HEALTHCARE FOR CANCER PATIENT TREATMENT

The collaboration between MOH and IHH Healthcare for radiotherapy and radiosurgery treatments for government hospital patients at IHH Healthcare Berhad hospital network began in 2023. This partnership continued with the renewal of a memorandum of understanding (MoU), benefiting 500 patients in 2024. These patients were identified by MOH specialists and received treatment at seven (7) IHH hospitals in Malaysia equipped with Gamma Knife and Linear Accelerator (LINAC) machines. This MoU also supports the National Strategic Plan for Cancer Control (2021-2025) to enhance access to care and treatment for cancer patients in the country.

THE HEALTHCARE EQUITY FOR AFFORDABLE AND RAPID TREATMENT (H.E.A.R.T.) PROGRAMME

H.E.A.R.T. Programme is a strategic collaboration between MOH and Management Science University (MSU). It enables MOH patients to undergo free laparoscopic or open hernia surgeries and laparoscopic or open cholecystectomy at MSU Medical Centre. A total of 130 patients benefited from this initiative, reducing the waiting time for these surgeries from 9 months to less than 3 months.

COLLABORATION WITH THE WORLD HEALTH ORGANIZATION - WESTERN PACIFIC REGION OFFICE (WHO-WPRO) FOR MENTARI CASE STUDY AND STAKEHOLDERS WORKSHOP

The Community Mental Health Centre (MENTARI) has been recognised by WHO and included in the WPRO Regional Framework for the Future of Mental Health in the Western Pacific 2023-2030. The Mentari IT System 2.0 and Portal were selected as innovation projects to streamline workflows at MENTARI, including the Self-Harm Hospital-Acquired Reporting Project (SHHARP) involving 69 MOH psychiatric hospitals. This system offers online screening via www.mentari. moh.gov.my, enabling monitoring and linking mental health services in the community with NGOs, employers and volunteers. The 37 MENTARI Centres nationwide provide mental health services focusing on employment support. Collaboration with WHO-WPRO for the MENTARI Case Study involving six (6) MENTARI Centres in urban and rural areas was conducted from May to September 2024. The study results were presented on 25 September 2024 at Days Hotel and Suites, Kuala Lumpur.



Image 5.1 Memorandum Signing Ceremonies and Stakeholder Meetings

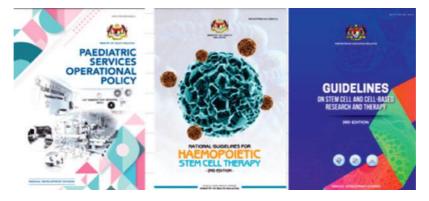


Image 5.2 Published Guidelines, Policies and Protocols by CPPP in 2024



Image 5.3 Organisation of National Conferences and Seminars



Image 5.4 Celebration of National Health Day

MEDICAL PROFESSION DEVELOPMENT SECTION

SELECTION OF HAJJ OFFICERS (MEDICAL) MISSION

MOH has provided a platform to smooth the selection process to be more transparent and faster through the *Medical Programme Information System* (MPIS). Applications to all MOH facilities have been open since 25 October 2024 until 7 November 2024. The candidates for Hajj Officers (Medical) for the 1446H/2025 Hajj season have been shortlisted to a total of 154 new staff and 114 experienced staff.

GARIS PANDUAN KUMPULAN SOKONGAN KESIHATAN MENTAL BAGI PEGAWAI PERUBATAN SISWAZAH - HOUSE OFFICER ENCOURAGEMENT AND REASSURANCE THROUGH SHARING & SUPPORT (H.E.A.R.T.S.)

MDD officially introduced H.E.A.R.T.S. on 9 December 2024. The guidelines aim to provide a mental health and emotional well-being support platform to House Officers (HOs) throughout the postgraduate training period. In addition, the H.E.A.R.T.S. group is also expected to help HOs to build confidence throughout the training successfully.

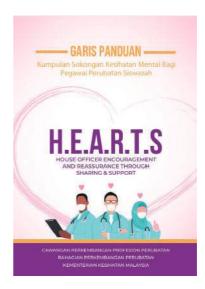


Image 5.5 H.E.A.R.T.S. Guidelines

TRAINING COURSE ON THE USE OF HO DIGITAL LOGBOOK IN MPIS

In 2024, the MDD successfully conducted several training sessions for HO digital logbook users using MPIS. The initiative started at Hospital Tuanku Ja'afar, Seremban in February 2024, followed by a user training session to Hospital Sultan Idris Shah, Serdang in July 2024. In September, this training was extended to Hospital Melaka and Hospital Sultan Aminah, Johor Bahru. This is to ensure a uniform assessment of the newly appointed HOs in 2024 with the use of the digital logbook.

REBRANDING OF HO TRAINING PROGRAMME

MDD has focused on activities to rebrand graduate training in 2024 by introducing several new strategies and initiatives for the short and long term. In this regard, the HO Job Description Refinement Workshop was held on 21 May 2024 and the Graduate Training Rebranding Workshop was held from 23-24 October 2024. Through this activity, several strategies and initiatives have been formulated to give a new face and perspective to postgraduate training in the country to become more relevant, attractive and have a positive impact on graduates and the health sector as a whole.

COMPULSORY SERVICE ARRANGEMENTS

From 2022-2024, a total of 2,095 applications for compulsory service relaxation were received. These comprised 1,810 applications for reduction, 38 for deferment, 96 for consideration, and 151 for exemption. However, effective 14 August 2024, the benefits under the reduction category and exemption category II will be discontinued. The remaining three (3) categories, namely category deferment, exemption 1 and consideration, will continue to be processed as usual.

The increasing number of medical practitioners leaving public service early for other sectors has generally affected the continuity of healthcare services, particularly in the public sector. Thus, the withdrawal of compulsory service relaxation benefits acts as a control measure to ensure that the objectives of the compulsory service policy are achieved.

Table 5.3 Compulsory Service Relaxation Applications 2022-2024

Category	2022	2023	2024	Total
Reduction	690	885	235	1,810
Deferment	12	17	9	38
Exemption 1	9	30	28	67
Exemption 2	20	54	10	84
Consideration	31	46	19	96
Total	762	1,032	301	2,095

MEDICAL ACT AMENDMENT 1971 [ACT 50]

The amendment to the Medical Act 1971 [Act 50] aims to resolve the issue of irregularities in the recognition of qualifications and training of specialists, as well as issues related to the registration of specialists from a legal aspect. Various engagement sessions were held with stakeholders and the Bill was passed at the Dewan Rakyat level on 17 July 2024 and approved by the Dewan Negara on 29 July 2024. The Medical (Amendment) Act 2024 was assented to by the Yang Di-Pertuan Agong on 9 October 2024 and gazetted on 17 October 2024.



Image 5.6 Amendment of the Medical Act 1971 [Act 50]

IMPLEMENTATION OF SPECIALIST TRAINING

Master of Medicine Programme and Specific Focus Field Training

- i. The Master of Medicine Programme is managed by eight (8) public universities in collaboration with MOH, involving 23 basic areas of expertise offered. In 2024, a total of 1,427 Hadiah Latihan Persekutuan (HLP) slots has been offered to eligible medical officers to pursue a Medical Master Programme. As of 31 December 2024, there are a total of 5,124 trainees studying for the Master of Medicine Programme.
- ii. Specialisation training refers to training that leads to the awarding of academic qualifications for certain areas required by the service other than those recognised as basic specialty by the Malaysian Medical Council (MMC). In 2024, a total of 40 medical officers have been offered Fully Paid Study Leave With or Without HLP to pursue their studies in specialised fields at the Master's and Doctoral levels.

Parallel Pathway Specialist Training

Parallel Route Specialist Training is a medical specialty training conducted by MOH with trainees awarded international qualifications recognised by the MMC. MOH provides supervised training in the specialties based on the standards set by the MMC. Parallel Pathway Specialist Training is implemented for 14 specialties involving 17 qualifications. As of 31 December 2024, there are a total of 3,576 trainees undergoing Parallel Route Specialist Training with 602 under the sponsorship of BPL.

Table 5.4 Total Trainees in Master of Medicine Programme and Parallel Pathway Specialist Training

Specialty	Master	Parallel Pathway
Anaesthesiology & Critical Care	503	56
Cardiothoracic Surgery	-	17
Clinical Radiology	392	68
Emergency Medicine	380	123
Family Medicine	404	1,749
Forensic Pathology	39	4
General Paediatric	302	284
General Surgery	332	-
Internal Medicine	500	755
Neurosurgery	77	-
Nuclear Medicine	21	-
Obstetrics & Gynaecology	331	263
Oncology	62	10
Ophthalmology	251	45
Orthopaedic	349	-
Otolaryngology	173	-
Pathology	231	-
Paediatric Surgery	18	-
Plastic Surgery	29	12
Psychiatry	211	154
Public Health	387	-
Rehabilitation Medicine	59	-
Sports Medicine	33	-
Transfusion Medicine	40	-
Urology	-	36
Total	5,124	3,576

Subspecialty Training Programme/Area of Interest

The MOH Subspecialty/Area of Interest Training Programme is implemented in a structured manner, either fully abroad, completely domestically or in a combination of domestic and overseas. A total of 96 sub-specialties and 105 Areas of Interest in various fields. Currently, 343 qualified specialist medical officers successfully pursue the Subspecialty/Area of Interest Programme in 2024. As of 31 December 2024, a total of 1,090 specialist medical officers are participating in the MOH Sub-Specialty/Area of Interest Training Programme.

GAZETTEMENT FOR SPECIALTY AND SUBSPECIALTY

Throughout 2024, a total of 1,027 medical specialist have been gazetted, which is 95% of the 1,080 gazetting applications received by the MOH for the year 2024 based on the General Order Chapter F, Part (V) of various Clauses 27(a) and (b).

Table 5.5 Gazetted Medical Specialist 2016-2024

Total Gazetted Medical Specialist								
2016	2017	2018	2019	2020	2021	2022	2023	2024
586	707	777	603	727	749	1,264	921	1,027

DEVELOPMENT OF SUBMODULE E-WARTA WITHIN HUMAN RESOURCE MODULE (HRM) IN MPIS SYSTEM

In line with the development of the specialist database in MPIS, the e-warta system was developed to facilitate the online gazettement process. A pilot project was successfully implemented involving 19 gazettement candidates, namely 16 at Tengku Ampuan Rahimah Hospital, one (1) at Sultan Idris Shah Hospital and two (2) at Penang Hospital. The e-warta pilot project is expected to be expanded to hospitals in the Central Zone, involving the states of Selangor, FT Kuala Lumpur and Putrajaya. A Training of Trainers (ToT) Workshop on E-Warta involving 17 hospital representatives was conducted for the Central Zone (Selangor, FT Kuala Lumpur and Putrajaya) on 14 October 2024.

MYCPD SYSTEM

The myCPD system has been in development since 2015 and was launched in 2017. The system allows healthcare workers to record their CPD activities in a logbook format online. The use of CPD points is tailored to different needs or purposes such as for the renewal of the Annual Practicing Certificate (APC) for the health personnel involved and other training requirements. The system has also been integrated with systems such as the Medical Register Information and Technical System (MeRITS System), Academy of Medicine Malaysia (AMM), MMA Mobile App, Pharmacist Registration Management System (PRiSMA), Malaysian Healthcare Practitioners System (MHPS), Business Licensing Electronic Support System (BLESS) and *Sistem Rekod Latihan Hospital Selayang* (e-LATS).

Table 5.6 myCPD System 2024

User	Supervisor	Provider	Health Services Scheme
298,416	27,247	2,450	38

IN-SERVICE TRAINING (LDP) MEDICAL PROGRAMME

The achievement of the local LDP in 2024 is 100%. Meanwhile, there are 48 people for overseas training and four (4) people for the Advance Competency Programme.

MEDICAL CARE QUALITY SECTION (CKPP)

CKPP plays a role in planning, implementing, monitoring, improving medical services to ensure the safety, quality and effectiveness of health services, as well as meeting the needs and expectations of patients and the community. The achievements of CKPP throughout 2024 are as shown below:

Table 5.7 Activities of CKPP 2024

Achievement/Activity	Total
Technical Consultation	88
Conference	16
Surveillance Programme	21
Technical Report	57
Guideline/Module/Policy	20
Workshop/Course/Training	66
Research	5

WORLD ANTIMICROBIAL RESISTANCE (AMR) AWARENESS WEEK (WAAW) 2024

The National-Level WAAW 2024 was held on 19 November 2024 with the theme *Educate. Advocate. Act Now.* The event was a collaboration between the MOH, the Ministry of Agriculture and Food Security (MAFS), the WHO and other partners. It aimed to raise awareness about AMR, a critical global health threat. The event supports the Malaysian Action Plan on Antimicrobial Resistance (MyAP-AMR) 2022-2026 by promoting education, surveillance, infection prevention and the responsible use of antimicrobials through a *One Health* approach.



Image 5.7 World AMR Awareness Week 2024

WORLD PATIENT SAFETY DAY 2024

World Patient Safety Day, which is observed annually on 17 September, is a global initiative aimed at highlighting patient safety issues and promoting preventive measures to enhance safety in healthcare. The 2024 celebration in Malaysia focused on the theme of *Improving Diagnosis for Patient Safety* in alignment with WHO's theme. The national-level celebration featured two (2) main events, which are the Light up in Orange of Graha Makmur Building, Melaka on 17 September 2024 and the World Patient Safety Day Seminar on 24 September 2024.



Image 5.8 Light up in Orange of Graha Makmur Building

WORLD OCCUPATIONAL SAFETY AND HEALTH (OSH) DAY 2024

From 11-13 June 2024, MOH in collaboration with the *Jabatan Perubatan Kesihatan Awam*, Universiti Teknologi MARA (UiTM) and the Malaysian Society of Occupational Health Doctors (MSOHD), organised the National-Level Celebration and Conference for World OSH Day 2024. The event was attended by 455 participants from various sectors as an effort to strengthen knowledge and practices related to safety and health across all facilities.



Image 5.9 World OSH Day 2024

NATIONAL CIRCUMCISION SYMPOSIUM (NCS) 2024

The National Circumcision Symposium was held for the first time on 24–26 October 2024 through a collaboration between the MOH and the Terengganu Assistant Medical Officers Association (TAMO), with the theme *Navigating the Male Circumcision Landscape in Malaysia*. The symposium was attended by 200 participants from across Malaysia, consisting of medical officers and assistant medical officers from both public and private healthcare facilities. It is hoped that this symposium will help healthcare workers gain an understanding of the importance of safe circumcision practices.



Image 5.10 National Circumcision Symposium 2024

MALAYSIA HEALTH TECHNOLOGY ASSESSMENT SECTION (Mahtas)

MaHTAS is responsible for providing evidence-based information on the value of new and existing technology, including aspects of safety, effectiveness, cost-effectiveness, organisational, social and ethical considerations when making decisions at various levels of ministry. Assessments are presented in the form of Health Technology Assessment (HTA) reports, Technology Reviews (mini HTA), Rapid Review (Information Brief), TechScan and TechBrief. These reports were developed to accommodate the formulation of safe and effective policies for patient-focused health technologies.

MaHTAS also ensures the development and implementation of Clinical Practice Guidelines (CPG). For the year 2024, there are seven (7) CPGs that have been approved by the HTA-CPG Council Meeting, namely:

- i. Management of Thalassemia (Second Edition)
- ii. Management of Bipolar Disorder (Second Edition)
- iii. Management of Erectile Dysfunction
- iv. Management of Early Childhood Carries (Third Edition)
- v. Management of Asthma in Adults (Second Edition)
- vi. Management of Psoriasis (Second Edition)
- vii. Antibiotic Prophylaxis in Oral and Maxillofacial Surgery for Prevention of Surgical Site Infection (Third Edition)

In addition, there are four (4) HTA reports that have been approved, namely Biologics in Severe Asthma, Computer-aided Detection or Artificial Intelligence for Chest X-ray in Early Detection of Tuberculosis, Use of WHO Oral Regime for Drug Resistant Tuberculosis and Chimeric Antigen Receptor (CAR)-T Cell for Treatment of Relapse or Refractory Acute Lymphoblastic Leukemia. A total of 69 health technology reports have been produced for 2024 as shown below.

Table 5.8 Health Technology Assessment Report 2024

Types of Report	Total
Clinical Practice Guidelines	7
Health Technology Assessment	4
Technology Review (mini-HTA)	20
Information Brief	13
TechBrief	14
TechScan	2
Technical Review	9
Total	69

MaHTAS has organised four (4) CPG Training of Core Trainers and Training Modul and published four (4) Quick References and two (2) Patient Information Leaflets. MaHTAS also has organised three (3) Training for Primary Care Providers in Malaysia to provide knowledge to the medical doctors in government and private clinics. The topics covered in these training sessions are Management of E-cigarette or Vaping Use-Associated Lung Injury (EVALI), Management of Gout and Management of Dementia.

MOH SINGLE-DOOR INITIATIVE

MaHTAS has been appointed as the MOH Single-Door for the health industry on 4 December 2024, which was launched by the Deputy Minister of Health. This initiative aimed to accelerate the development of the health technology industry by providing a single platform for industries to obtain assessment, registration and implementation of health technologies. Services provided include initial scientific advice, assistance in testing at health facilities and various health technology assessments.

The first technology introduced under this initiative was Diabetic Retinopathy Inference with Multi Artificial Neural Network Technology Automation, also known as DR. MATA, which was an innovative solution powered by Artificial Intelligence (AI). DR. MATA was designed to detect and diagnose diabetic retinopathy, providing significant benefits such as early detection, increased accessibility and improved patient outcomes.



Image 5.11 Single-Door Initiative

HEALTH TECHNOLOGY ASSESSMENT TRAINING COURSE (SOUTHERN ZONE) 2024

MaHTAS has organised a Health Technology Assessment Training Course (Southern Zone) on 28-30 May 2024. This course aimed to increase awareness and strengthen understanding related to health technology assessment; its functions, objectives and roles in creating an efficient, equitable and high-quality health system. This course was attended by representatives from JKN Johor, Melaka and Negeri Sembilan. This course was also attended by the hospital directors and district health officers, who were the key decision-makers and stakeholders in the Southern Zone. The course was also delivered virtually to other officers from the respective JKNs.



Image 5.12 Health Technology Assessment Training Course (Southern Zone) 2024

MEDICAL AID FUND (TBP) TECHNICAL ASSESSMENT UNIT

Starting from 2005-2024, TBP has assisted a total of 79,876 patients with an amount of RM718.28 million, covering various treatment aids. For the year 2024, the number of applications received was 5,317 with a total of RM82,369,328.78.

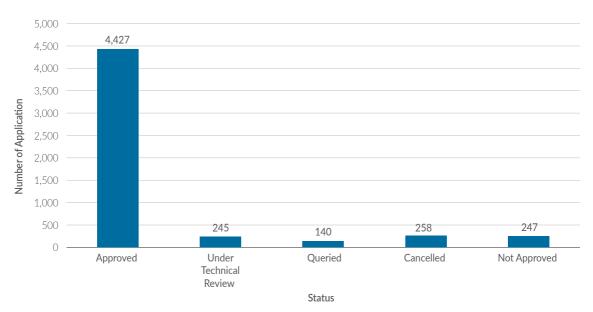


Figure 5.1 TBP Applications 2024

Table 5.9 Medical Treatment Costs of TBP by State

State	Number of Approvals	Treatment Cost (RM)	Percentage (%)
Selangor	666	12,111,936.20	14.29
Sarawak	492	8,911,744.25	10.57
Kedah	529	8,029,903.80	11.35
WP Kuala Lumpur	415	7,333,038.90	8.90
Sabah	458	6,594,633.58	14.92
Perak	556	5,944,027.80	11.93
Johor	455	5,649,931.10	9.77
Pulau Pinang	237	5,644,104.40	5.09
Kelantan	367	4,578,604.35	7.88
Pahang	155	1,438,676.75	3.33
Terengganu	180	1,359,558.00	3.87
Negeri Sembilan	74	512,208.80	1.58
Melaka	56	478,026.05	1.20
FT Labuan	8	145,011.30	0.17
FT Putrajaya	10	83,486.40	0.21

MEDICAL COMPENSATION TECHNICAL ASSESSMENT UNIT

This unit is responsible for conducting assessments for MDD regarding medical facility expenditures as per the Medical Facilities Human Resource Service Circular (PPSM) allocated to federal public officers and retirees as well as their eligible family members. The total applications are as follows:

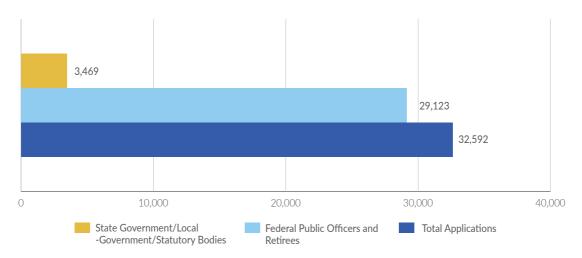


Figure 5.2 Applications for Medical Remuneration in 2024

ALLIED HEALTH SCIENCES DIVISION (AHSD)

AHSD is responsible for 29 Allied Health Professions (AHP) under the MOH, encompassing a workforce of more than 31,000 personnel at present. The main functions of AHSD include managing and coordinating the development of allied health policies, enhancing professional and service development, quality control, research activities, setting competency and training standards, as well as managing health resource requirements.

MALAYSIAN ALLIED HEALTH PROFESSIONS COUNCIL (MAHPC)

MAHPC was established under the Allied Health Professions Act 2016 [Act 774] with the purpose of regulating 16 AHP (Amendment of Second Schedule) 2022. MAHPC has following key roles and responsibilities:

- i. Registering and issuing certificates to registered allied health practitioners
- ii. Determining the qualifications for AHP
- iii. Determining the requirements and prerequisite for AHP
- iv. Regulating the ethics and conduct of registered allied health practitioners
- v. Regulating the practice of registered allied health practitioners



Image 5.13 9th Meeting of the MAHPC No. 1/2024

REGISTRATION OF ALLIED HEALTH PRACTITIONERS

The registration of allied health practitioners began on 1 July 2022 according to the rotation schedule set by the MAHPC, with the transition period ending on 30 June 2025. In 2024, a total of 9,417 registrations were approved by the council. The total number of registrations from 1 July 2022 to 31 December 2024 is 27,761 with a revenue collection of RM4,504,350.

Table 5.10 Registered Allied Health Practitioners for 2022-2024

Professions	2022	2023	2024	
Audiologist	186	80	371	
Dietitian	372	226	805	
Entomologist (Public Health)	6	127	19	
Physiotherapist	1,715	652	1,937	
Medical Physicist	59	117	233	
Nutritionist	115	409	226	
Clinical Psychologist	73	330	177	
Diagnostic Radiographer	1,755	1,084	1,518	
Medical Laboratory Scientist	94	1,385	1,722	
Occupational Therapist	1,216	789	526	
Speech-Language Therapist	160	197	150	
Radiation Therapist	105	217	150	
Medical Laboratory Technologist	51	4,728	1,072	
Dental Technologist	899	223	147	
Environmental Health Officer	17	919	279	
Health Education Officer	18	20	85	
Total	6,841	11,503	9,417	
Cumulative Total		27,761		

ACCREDITATION FOR EDUCATION PROGRAMME

The MAHPC secretariat is responsible for the evaluation and recognition of allied health education programs coordinated by the Malaysian Qualifications Agency (MQA). As of 31 December 2024, a total of 13 full accreditation evaluations and eight (8) provisional accreditation assessments have been conducted.

ACTIVITIES OF THE MAHPC SECRETARIAT

The MAHPC Secretariat has successfully carried out several important activities such as meetings, workshops and briefings in an effort to develop policies and guidelines, raise awareness on registration, enforce the act as well as manage the affairs of the council. These activities also included dissemination of information to practitioners and stakeholders regarding the importance of registration. Additionally, these activities involved collaboration with various agencies and sectors to gather feedback from all parties ensuring that the MAHPC's planning and operations proceeded smoothly and efficiently.

Table 5.11 MAHPC Secretariat Activities

Secretariat Activities	Quantity
Meeting	Quantity
Malaysian Allied Health Professions Council Meeting	3
Joint Technical Committee (JTC)	4
Standard programme	2
Committee meeting	27
Meeting with agencies	4
Others meeting and discussion	52
Briefing	
Act/Registration	18
Continuing Professional Development (CPD)	3
Workshop	
Workshop on the Evaluation of the Code of Practice for Programme Accreditation Edition 2.0 (COPPA 2.0) under the Allied Health Professions Act 2016 [Act 774]	2
Workshop on the Development of Open and Distance Learning (ODL) Guidelines for Allied Health Fields	2
Workshop on the Interpretation of the Allied Health Professions Act 2016 [Act 774]	1
Workshop on the Preparation of the Registration Regulations and Disciplinary Proceedings for Allied Health Practitioners under the Allied Health Professions Act 2016 [Act 774]	3
Workshop on the Evaluation of Allied Health Foreign Qualifications under the Allied Health Professions Act 2016 [Act 774]	1
Roadshow on Temporary Practice Certification for Non-Malaysian Allied Health Professionals for the Employers	1



Image 5.14 Workshop on the Evaluation of Allied Health Foreign Qualifications under the Allied Health Professions Act 2016 [*Act 774*]



Image 5.15 Workshop on the Development of ODL Guidelines for Allied Health Fields

THE POLICY AND STRATEGIC PLANNING SECTION

The Policy and Strategic Planning Section is responsible for implementing, reviewing and updating the policies and strategies of the AHSD. This is aimed at ensuring that AHP continue to deliver healthcare services that are safe, effective, efficient and of high quality, in line with current developments in the healthcare sector.

REGULATORY IMPACT ANALYSIS (RIA) OF THE GOVERNANCE FRAMEWORK FOR THE UNREGULATED AHP IN MALAYSIA

In 2024, the RIA for the Governance Framework for the Unregulated AHP in Malaysia was completed, incorporating a cost-benefit analysis and risk assessment, consultation processes, conclusions and recommendations for improvements, as well as implementation strategies.

A consultation session with all stakeholders was held in a hybrid manner on 5 July 2024. In this session, the MOH presented proposed regulatory procedures for six (6) allied health professions, namely cardiovascular technology, perfusion, sonography, music therapy, genetic counselling, as well as prosthetics and orthotics. The participants have provided feedback to improve the regulatory options that have been proposed. MOH has looked into all the responses and taken note of their appropriateness and feasibility from a legal aspect.

Several discussion sessions have also been held at the top management level of MOH as well as the MOH Legal Adviser's Office. All the results of discussions and analyses carried out have been summarised in a regulatory impact statement (RIS) document. This document has been submitted to Malaysia Productivity Corporation (MPC) for final evaluation and approval. This proposed framework will not only empower AHP, but also ensure that the services provided are safe, of high quality and easily accessible to the public.

WORKSHOP ON THE GOVERNANCE OF MEDICAL ULTRASOUND PRACTICE

Ultrasound services in Malaysia are one of the important components of the healthcare system that are widely used in the medical field for the purpose of diagnosis and monitoring of various medical conditions. Along with the development of technology, the use of ultrasound is becoming more widespread both in the public or private sector including those given by health practitioners who are not registered with any professional act. Following that, a workshop was held on 11-13 September 2024 at the Medical Devices Authority (MDA) to discuss the practice of medical ultrasound. This workshop aims to refine the draft guidelines that have not yet been published, so that they are in line with existing guidelines and those that are still in the process of development, as well as avoiding any contradictions.

A total of 40 participants attended this workshop consisting of representatives from the AHSD, Medical Development Division, Radiology Services, Obstetrics & Gynaecology Services, Cardiology Services, Emergency Medicine Services, General Surgery Services, Point of Care General Medicine, Sports Medicine, Anaesthesiology and Intensive Care, Family Health Development Division, Medical Radiation Regulatory Division, Medical Practice Division, MDA and experts from private medical centres.

QUALITY ACTIVITIES

AHSD managed and monitored various quality indicators, encompassing 36 Key Performance Indicators (KPIs) as below:

- i. Deputy Director-General of Health (Medical): 1
- ii. Director of AHSD: 4
- iii. Senior Deputy Directors of AHSD: 4
- iv. AHP: 27

All indicators successfully achieved 100% of the set targets.

AHSD also monitored 14 quality objectives were achieved excellent results to ensure the best service for customers. Additionally, four (4) National Indicator Approaches (NIA) and one (1) Universal Health Coverage (UHC) indicator, involving the percentage of utilisation of allied health rehabilitation services, were also monitored in 2024. AHSD also continues to monitor Quality Assurance (QA) projects involving ten (10) professions.

HIGH-IMPACT PROJECTS

Two (2) high-impact projects under the WHO programme budget were successfully completed in early 2024:

- i. Development of Credentialing, Competency and Capability Framework for Allied Health Professions in Ministry of Health Malaysia
- ii. Occupational Engagement Activities Among the Elderly to Promote Health and Well-Being in the Community

The findings from these projects have contributed to the development of new policies related to career development for AHP and improvements in elderly healthcare services in Malaysia. In addition, the Quality of Refractive Error Care in Malaysia Study, funded by a research grant, was successfully completed in collaboration with the Malaysian Optical Council. Aligned with the Health White Paper, AHSD also completed a Desk Review Study on Allied Health Services in Primary Care, emphasizing the significant role of AHP in health promotion, disease prevention and controlling complications of non-communicable diseases within the primary care setting. Additionally, a research proposal titled Prevalence of Burnout among Allied Health Practitioners in Malaysia was presented to the Board Review Committee at National Institutes of Health (JPP-NIH) for ethical and research grant approval.

DEVELOPMENT SECTION

The Development Section plays a role in coordinating, enhancing, monitoring and providing advisory services related to the development of the AHP. This includes the development of resources, staffing and career advancement.

HUMAN RESOURCE DEVELOPMENT

The Development Section consistently plays a role in planning, coordinating, managing, facilitating and addressing the needs and issues regarding staffing and placement related to the 29 AHPs.

In 2024, AHSD participated in four (4) visits and meetings to verify staffing needs for new facilities, upgrades and staffing audits in existing facilities. This included visits to Hospital Tawau, Hospital Banting, Hospital Miri and Hospital Limbang. AHSD also took part in a visit by the Deputy Minister of Health to health facilities in Sabah from 3-6 May 2024.

Throughout 2024, a total of 1,807 new staffing applications for AHP were submitted to the Public Service Department (PSD) and 3,485 contract positions were approved in healthcare facilities.

AHSD has produced several reports related to staffing for AHP. In April 2024, a report on Human Resource for Health (HRH) for the year 2023 was prepared. This report covered all AHPs under the MOH. It also included staffing data for cadres, divided into Diploma/Bachelor/Master graduates. Among the reports produced are those detailing the number of graduates with Diploma/Bachelor/Master qualifications filling AHP positions from public or private universities both locally and internationally, staffing data by state, the number of civil servants by age category and the number of civil servant placements by facility category.

In addition, staffing analysis for 25 AHPs with complete data was carried out. This analysis covered total staffing and vacancy rates by grade, and staff filling positions were categorised by ethnicity, gender and age. Furthermore, the number of officers leaving the service across various categories was also analysed.

The Development Section was also involved in preparing various reports according to specific templates/formats, based on the requirements and appropriateness for stakeholders. Some of these reports include The Tenure of AHPs, Lists of AHPs by MOH Facilities, Distribution of Civil Servants by Profession in MOH Facilities, Staffing/Position Filling/Vacancy Reports by Profession, Numbers of AHP by Diploma/Bachelor/Master Qualifications and AHP Staffing Projections through to 2030.

ALLIED HEALTH PROFESSIONS CAREER PATHWAY

The Development Section is also responsible for implementing the Medical Programme and AHSD Strategic Plan specifically *Strategy 3: Enhance Capacity and Capability of Human Resource for Health, Implementation Plan 33: To improve career pathway for medical personnel: (9) To establish career pathway framework for AHP.* In developing this career pathway framework, a *Scoping Review of the Career Pathway Framework for Allied Health Professions* has been conducted and a draft of the technical report on the scoping review has been completed, with publication scheduled for 2025.

PUBLICATION OF STANDARD OPERATING PROCEDURE (SOP) FOR ALLIED HEALTH SERVICES

A total of 20 Standard Operating Procedures (SOPs) were published in April 2024, covering four (4) services, namely Science (Embryology) Services, Dietetics Services, Occupational Therapy Services, and Physiotherapy Services. This SOP book can be accessed via the following link: https://hq.moh.gov.my/alliedhealth

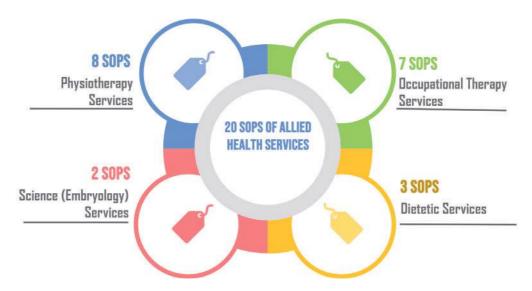


Figure 5.3 SOP for Allied Health Services Published in 2024

PROPOSAL PAPER FOR THE ENHANCEMENT OF THE AHP SCHEME

In strengthening the governance of the AHP, AHSD plays a role in preparing a proposal paper to enhance the AHP scheme. In 2024, the paper focuses specifically on *Kertas Cadangan Tukar Lantik Skim Penolong Pegawai Sains (PPS) kepada Skim Juruteknologi Makmal Perubatan (JTMP) di KKM.* The completed proposal was submitted to the Human Resource Division (BSM) of the MOH on 17 January 2024 to obtain approval from the PSD.

PRACTICE SECTION

Practice Section plays a vital role in strengthening the delivery of services for AHP by monitoring and evaluating service implementation in alignment with the Strategic Plan of the MOH and the AHSD, while managing the governance of AHP. Practice Section is also responsible for managing the placement of students from Higher Education Provider (HEP) in MOH facilities, preparing and ensuring compliance with the Memorandum of Agreement (MoA) between the MOH and HEP. Furthermore, this section coordinates human resource development programmes, competency, credentialing applications and professional expertise assessments to ensure the continuous quality and professionalism of services.

STUDENT PRACTICAL TRAINING IN MOH FACILITIES

In 2024, a total of 45 HEPs comprising eleven (11) public HEPs and 34 private HEPs, signed a MoA with the Government of Malaysia, represented by the MOH, for the purpose of student internship placement in MOH facilities. This includes 110 Allied Health Programmes and 409 MOH facilities approved by the *Jawatankuasa Penggunaan Fasiliti KKM*.

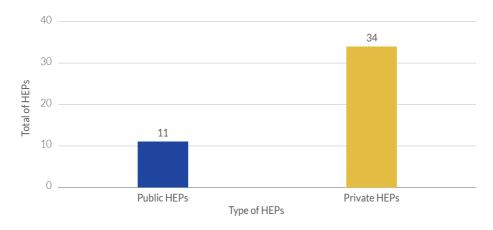


Figure 5.4 Number of HEPs that Signed the MoA in the Allied Health Programme 2024

ALLIED HEALTH PROFESSION WEBINAR PROGRAMME

This webinar program, organised by the AHSD in collaboration with AHP, is an initiative to introduce the services provided by AHP to the public. Additionally, this webinar serves as a method of learning and sharing new knowledge with professionals in the field. Each webinar series will also be shared through the AHSD Facebook social media platform. A total of 16 webinar series were successfully held in 2024, with 13,309 participants joining the webinars both live and via Facebook.



Image 5.16 AHP's Webinar Poster

ALLIED HEALTH PROFESSION HUMAN RESOURCE DEVELOPMENT

Human resource development is crucial for building a sustainable, highly skilled and efficient workforce within the MOH to deliver services. In 2024, a total of 27 human resource training sessions were conducted, involving 1,328 officers across 17 AHPs as shown in **Table 5.12**.

Table 5.12 Total Number of Officers Trained by Profession

Profession	Number of Officers
Diagnostic Radiographer	272
Clinical Scientist (Biochemistry)	166
Occupational Therapist	131
Optometrist	100
Audiologist	91
Clinical Scientist (Forensic)	67
Medical Laboratory Technologist (MLT)	64
Food Service Officer and Assistant Food Service Officer	60
Dental Technologist	55
Physiotherapist	55
Dietitian	53
Radiation Therapist	51
Clinical Psychologist	45
Clinical Scientist (Biomedical)	42
Medical Social Officer	37
Clinical Scientist (Genetics)	26
Psychology Officer (Counselling)	13
Total	1,328

INTEGRATED ORIENTATION TRAINING FOR ALLIED HEALTH SERVICES

Orientation training was conducted online from 16-18 July 2024, with the participation of 595 new officers from 17 AHPs. The purpose of this training was to provide information and early exposure to newly appointed officers regarding administrative procedures and instructions, as well as to cultivate excellent work ethics in public service. The course covered general modules focusing on basic administrative aspects, followed by specific modules tailored to the needs of each profession.

COMPETENCY ATTACHMENT TRAINING

Competency Attachment Training for newly appointed AHP officers in is designed to ensures that officers achieve the competency level required in clinical/technical practice. This training emphasises mastery of basic skills, understanding of SOPs, as well as the development of professional values, including work ethics and effective communication. Throughout 2024, the AHP received applications for competency attachment training from 14 professions and a total of 371 competency certificates were issued to officers who successfully completed the training.

CREDENTIALING

Credentialing is a key element in ensuring that allied health practitioners are competent and high-performing in delivering quality healthcare services, while meeting the established standards to remain relevant and aligned with the latest developments in the healthcare field. To date, nine (9) AHPs have established credentialing systems, namely Diagnostic Radiographer, Radiation Therapist, Physiotherapist, Occupational Therapist, Speech-Language Therapist, Audiologist, Optometrist, Dietitian and Dental Technologist. In 2024, a total of 373 credentialing applications for various procedures were approved by the National Credentialing Committee (NCC).



Image 5.17 AHPs Involved in the Credentialing Application

ENFORCEMENT SECTION

The Enforcement Section is responsible for administering, coordinating, adding value, monitoring and providing advisory services in the development and implementation of enforcement activities and compliance with Act 774. The Enforcement Section is also responsible for ensuring that all allied health practitioners practise ethically, with integrity, safely and in compliance with the requirements of Act 774, in line with the objective of enforcing the act, which aims to enhance the quality of health and the well-being of the people.

EDUCATIONAL ENFORCEMENT VISITS

Educational enforcement visits were conducted at 105 private allied health premises across nine (9) states. These visits aimed to raise awareness about compliance and enforcement of Act 774. The number of visits conducted in 2024 shows a significant increase compared to previous years, as shown in **Figure 5.5**.

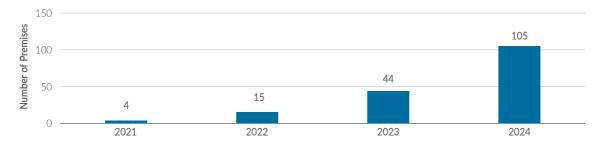


Figure 5.5 Number of Premises with Educational Enforcement Visits

COMPLAINTS AND ENQUIRIES MANAGEMENT

A total of 31 complaints related to offences under Act 774 and 15 enquiries related to the practices of AHP were received via the MOH *Sistem Pengurusan Aduan Awam* (SISPAA). The total number of complaints remains the same as that of 2023, but it shows an increase compared to the two previous years, as shown in **Figure 5.6**.

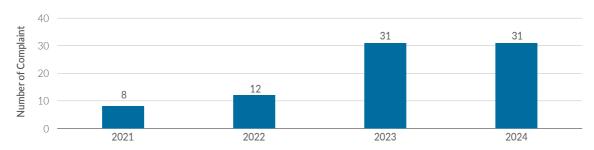


Figure 5.6 Number of Complaints Received Regarding Allied Health Practitioners for Offences under Act 774 (2021-2024)

RECOMMENDATION AND REVIEW APPLICATIONS REGARDING THE OPENING/RENEWAL OF LICENCES FOR STANDALONE PRIVATE ALLIED HEALTH PREMISES

AHSD received ten (10) applications for recommendations and reviews regarding the opening/renewal of licences for standalone private allied health premises. The recommendations and reviews were provided based on *Garis Panduan Kemudahan dan Perkhidmatan Jagaan Kesihatan Bersekutu Swasta* Standalone. The Local Authority (PBT) will use these recommendations and reviews as guidance during the approval process for the opening/renewal of the premises licence.

STRENGHTENING OF ENFORCEMENT

The Enforcement Section is responsible for providing training to Enforcement Officers of Act 774 to produce competent, well-trained, and integrity-driven enforcement officers. In addition, The Enforcement Section is also responsible for preparing guidelines related to investigation and enforcement activities. The following trainings have been conducted to achieve these objectives as shown in **Table 5.13**.

Table 5.13 Total Trainings Conducted in 2024

Activity	Date	Total Participants
Investigation Techniques Course (Group III)	29-30 July 2024	30
Workshop on Review of SOP for the Enforcement of Act 774	16-18 October 2024	33
Advanced Investigation Techniques Course (Group III)	28-30 October 2024	22

ADMINISTRATION AND FINANCE UNIT

The Administration and Finance Unit is responsible for managing administrative affairs and handling the financial matters of AHSD to ensure the delivery of high-quality and efficient services. This unit is also responsible for managing communication, protocols and the effective dissemination of information.

The Administration and Finance Unit has organised several trainings for AHSD staff to achieve these objectives. The trainings are as follows:

- i. Program Pemantapan Organisasi
- ii. Bengkel Pelaksanaan Kemudahan Latihan Secara Pakej dan Bukan Pakej serta Tatacara Tuntutan
- iii. Bengkel Pemantapan Perancangan Aktiviti BSKB bagi Tahun 2025
- iv. Bengkel Pengukuhan Jati Diri

PROGRAM PEMANTAPAN ORGANISASI

This programme was held from 27-28 April 2024, at Port Dickson, Negeri Sembilan. This programme was conducted to provide explanation and exposure on how to become excellent and proactive civil servants in every action taken and implemented, while maintaining motivation in performing office duties. The course was attended by 46 participants.



Image 5.18 Program Pemantapan Organisasi

BENGKEL PELAKSANAAN KEMUDAHAN LATIHAN SECARA PAKEJ DAN BUKAN PAKEJ SERTA TATACARA TUNTUTAN

This workshop was held on 3 September 2024 at AHSD. This workshop was organised to provide clarification and exposure to the guidelines in line with the Treasury Circular on Government Procurement PK 7.2. The workshop also aimed to standardise the implementation of training and encourage prudent spending at AHSD, as well as to raise awareness regarding the eligibility for claims by AHSD staff. A total of 43 participants attended the workshop.

BENGKEL PEMANTAPAN PERANCANGAN AKTIVITI BSKB BAGI TAHUN 2025

This workshop was held from 3-4 October 2024, at the Institute of Leadership and Development (ILD) UiTM, Bandar Enstek, Nilai, Negeri Sembilan. The purpose of this workshop was to plan and prioritise activities (POA) and training (POL) for the year 2025 for the AHSD including financial planning, resources, training and printing. A total of 33 participants attended the workshop.



Image 5.19 Bengkel Pemantapan Perancangan Aktiviti BSKB bagi Tahun 2025

BENGKEL PENGUKUHAN JATI DIRI

This workshop was held from 8-10 November 2024, at Eagle Ranch Resort, Port Dickson to create a sense of belonging and unity among team members, as well as to expose leadership potential in participants and help them work together to achieve common goals. This workshop was attended by 26 participants.



Image 5.20 Bengkel Pengukuhan Jati Diri

INFORMATION MANAGEMENT UNIT

The Information Management Unit plays a strategic role in ensuring optimal use of information technology to support AHSD's digital transformation initiatives by introducing new technologies and providing guidance on the latest technological applications to enhance operational effectiveness.

The Information Management Unit organized an AI & Digital Transformation in Office Management Course on 9-10 October 2024, attended by 30 AHSD officers. The course aimed to provide a deep understanding of artificial intelligence (AI) applications and digital technology in office management. It was also designed to empower participants with current knowledge and skills to enhance operational effectiveness, productivity and innovation in the workplace.



Image 5.21 Al & Digital Transformation in Office Management Course

NURSING DIVISION (BKj)

BKj is responsible for planning the development of nursing services in line with the aspirations of the MOH and managing the nursing fraternity in a constructive and productive manner to maintain nursing standards.

NURSING POLICY AND PRACTICE BRANCH

QUALITY AND TRAINING SECTOR

This sector has three (3) indicators that are monitored for the nursing division, which are the Director of Nursing's KPI, quality objectives and customer charter. As for the national level, three (3) indicators are monitored, namely the National Nursing Audit (NNA) for Medical Programme and Public Health, the National Operating Room Nursing Audit (NORNA) and the National Nursing Indicator Approach (NNIA).

NURSING QUALITY STANDARDS DEVELOPMENT UNIT

The following are the KPI achievements of the Director of Nursing's as shown in **Table 5.14**.

Table 5.14 KPI Achievements for the Director of Nursing 2024

Indicators	Target (%)	Achievement (%)
The percentage of registered nurses holding a Post Specialisation Certificate placed by field of specialisation	≥95	98.29
The percentage of phlebitis incidence among inpatients with intravenous (IV) cannulation	≤35	2.86
The percentage of nurses who work in clinical placements for more than 6 months are certified to pass and get privileging	≥80	78.65

Nursing standards and competencies of nurses in hospitals are measured using the Medical Programme NNA which has five (5) elements as shown in **Table 5.15**.

Table 5.15 Achievement of Medical Program NNA 2024

Elements	Target (%)	Achievement (%)
Administration of Intravenous Infusion	90	99.40
Aseptic Wound Dressing	90	98.90
Pain as 5 th Vital Sign	90	99.60
Blood or Blood Component Transfusion	100	99.84
Administration of Oral Medication	100	99.66

A total of 12 elements of Public Health NNA were audited for 2024 as shown in **Table 5.16**.

Table 5.16 Achievement of Public Health NNA 2024

Elements	Target (%)	Achievement (%)
Handling of high risk pregnancy - anaemia	≥90	92.55
Handling of high risk pregnancy - pregnancy induce hypertension	≥90	93.62
Handling of high risk pregnancy - gestational diabetes mellitus	≥90	92.63
Physical examination and palpation of pregnant mothers' abdomen at the clinic for antenatal and repeated	≥90	99.19
Postnatal examination at homes - mother	≥95	99.49
Postnatal examination at homes - baby	≥95	99.62
Vaccination by immunisation injection	100	99.67
Cold Chain Maintenance	100	99.89
Evaluation of growth and development in babies and children	100	99.74
Handling of children among infants and children aged 6 months to 6 years from basket recipients including special milk	≥80	88.17
Leadership and administration of nursing services	≥90	98.49
Human resource management at the primary healthcare level	≥90	98.91

In order to maintain safe patient care, the indicators that are being monitored under the NNIA have achieved standards as shown in **Table 5.17**.

Table 5.17 Achievement NNIA 2024

Indicators	Target (%)	Achievement (%)
Incidence of patient fall	≤4.0	0.29
Incidence of phlebitis	≤35.0	2.86
Incidence of pressure injury	≤2.1	1.02

NURSING PROFESSIONAL DEVELOPMENT UNIT

For the year 2024, a total of three (3) courses were organised by the BKj. This unit is a regulatory body in awarding CPD credit points for organiser who conduct courses. This unit had received 1,665 applications from government and private sectors for approval. A total of 1,396 (83.84%) programmes were approved meanwhile 269 (16.15%) were rejected because not meeting the application requirements.

CREDENTIALING AND PRIVILEGING UNIT (C&P)

There are 13 disciplines that are accredited with credentialing certificates for three (3) years by NCC. The approval of applications from the intensive care discipline is the highest, credentialing (535) and the peri-operative discipline is the highest for re-credentialing (704) while the credentialing & privileging committee at the hospital level will handle privileging in their respective hospitals.

COMPLAINTS AND FEEDBACK UNIT

BKj has made improvements through courses, workshops and monitoring visits related to the scope of complaints and customer satisfaction for MOH nurses. Soft skill is the main causes of complaints about nurses which is 223 (32.0%) followed by various complaints 221 (31.0%) for 2024.

NURSING RESEARCH UNIT

The achievements of the Nursing Research Unit for the year 2024 as shown in **Table 5.18** and **Image 5.22**.

Table 5.18 Achievements of Nursing Research Unit 2024

Activities	Achievements
Appointment of research coordinator at state, institutional and MOH hospital level	Appointment of 120 nurses with qualification of Bachelor of Nursing
Provide advisory and facilitation services in nursing research	Six (6) facilities with six (6) applications for advisory and facilitation services were carried out
Collaboration in research, training, presentation and nursing research publication	Six (6) research studies from six (6) facilities (NIH, MOH, public & private universities) Research publication achievements: i. The Effects of Caring-based Education Program Caring behaviour, Caring Efficacy and Healthy Working Environment Among Critical Care Nurses in Penang Public Hospitals Practical Experience Utilising a Rapid Review Process for Nursing Practice Decision-Making on Pressure Injury Outcome Indicators ii. Developing Hospital Nurses' Clinical Reasoning Abilities in Assessing and Managing Clinical Deterioration Using a Virtual Patient Simulation: A Quasi-Experimental Study
Organising national nursing conference	27 th Joint Malaysia Singapore Nursing Conference on 26-28 June 2024 with 340 nursing participations
BKj report publication	BKj Annual Report Book, BKj e-Bulletin, Midwife & Nurse Day Celebration Report and National Month Programme
Nurse appreciation	Appreciation in terms of academic and nursing services



Image 5.22 BKj Report Publication 2024

PRACTICE SECTOR

NURSING PRACTICE UNIT (MEDICAL AND PUBLIC HEALTH)

Supervision and monitoring visits have been carried out at 24 MOH facilities in 2024. The assessment during the visit is to identify the level of service delivery in compliance with the targets set by the BKj as shown in **Image 5.23**.



Image 5.23 Monitoring and Supervisory Visits of Practice Sector 2024

REGULATORY BRANCH

REGISTRATION AND ENFORCEMENT SECTOR

REGISTRATION AND ANNUAL PRACTICING CERTIFICATE (APC) UNIT

In year 2024, a total of 5,448 nurses have been registered with the Malaysian Nursing Board (MNB) consisting of 4,279 Registered Nurses, 15 Assistant Nurses, 297 Public Health Nurses, 60 Mental Health Nurses and eight (8) Malaysian Trained Oversea (MTO). Meanwhile, 789 Midwives Part 1 have been registered with the Malaysia Midwives Board (MMB).

A total of 150,104 nurses were given APC consisting of 130,909 Registered Nurses, 1,309 Nurse Assistants and 17,886 Community Nurses. The total number of applications to serve abroad is 3,021 nurses. Applications to serve in Saudi Arabia (1,782) are the highest followed by Singapore (1,038).

TEMPORARY PRACTICING CERTIFICATE (TPC) REGISTRATION & INTERNATIONAL RELATIONS UNIT

A total of 62 *Jururawat Terlatih Warganegara Asing* (JTWA) got quota approval, consisting of 58 new quota categories, three (3) renewed quota categories and one (1) additional quota category. In year 2024, there are 293 TPC applications for JTWA consisting of 260 new TPC approvals, 31 renewal TPCs and two (2) elective TPCs.

The Asean Joint Coordinating Committee on Nursing (AJCCN) meeting was held face to face on 25-27 February 2024 in Bandung Indonesia, 21-25 October 2024 in Jakarta Indonesia, the Western Pacific Regional Meeting was held on 14-16 February 2024 in Manila Philippines and WHO: Global Partner Meeting in Nursing and Midwifery in Geneva Switzerland. The 27th Joint Malaysia-Singapore Nursing Conference (JMSNC) was held on 26-28 June 2024 at The Everly Hotel Putrajaya with a total of 340 participants from Malaysia.

STANDARDS AND ACCREDITATION SECTOR

NURSING CURRICULUM ASSESSMENT UNIT

The number of nursing training institutions and accreditation assessment visits for year 2024 as shown in **Table 5.19**.

Table 5.19 Nursing Training Institutions and Accreditation Assessment Visits 2024

Institutions	Facilities	Visits
MOH Training Institution (ILKKM)	16	17
Public University	9	4
Private Higher Learning Institution	48	26
Ministry of Defense	1	0
Total	74	47

In 2024, 179 applications for teaching permits had been processed, with 161 of them being approved. Of these, 41 were from the teacher category and 120 were from the clinical instructor category.

EXAMINATION UNIT

The total number of candidates who registered for the MNB and MMB examinations in 2024 is 5,541 in which 5,535 (99.89%) sitting for the examination. The number of candidates who registered for the MNB qualification examination for JTWA is 294, with 289 (98.30%) sitting for the examination.

MOH FACILITY UTILISATION MANAGEMENT FOR INSTITUTES OF HIGHER EDUCATION UNIT

In 2024, 54 HEPs have signed a MoA with the MOH to undergo training at the MOH's facilities. This unit carries out compliance monitoring of the usage of MOH facilities for the purpose of providing clinical training for nursing students or trainees. Monitoring at 12 hospitals and seven (7) public health facilities of the MOH was conducted.

CORPORATE MANAGEMENT SECTOR

In 2024, the Nursing Human Resource Planning Unit appointed a total of 866 nurses on a permanent position. The Administration and Finance Unit had achieved 100% of its HRMIS KPI targets in accordance with guidelines and regulations. Meanwhile, the Information Technology Unit organised one (1) information and communication technology (ICT) course and one (1) Continuous Nursing Education (CNE) session, including the myMesyuarat 2.0 course held on 1-2 October 2024 with 31 participants, and a CNE titled *Introduction to Digital Scamming and How to Avoid Being Scammed* on 16 August 2024, attended by 15 participants.

TRADITIONAL AND COMPLEMENTARY MEDICINE DIVISION (T&CMD)

T&CMD is responsible for developing policies and regulating traditional and complementary medicine (T&CM) services and practitioners in Malaysia.

- i. The division comprises five (5) sections as follows:
- ii. Policy and Development Section
- iii. Traditional and Complementary Medicine Practice Section
- iv. Traditional and Complementary Medicine Council Section
- v. Inspectorate and Enforcement Section
- vi. Professional Development Section

For the year 2024, the division's commitments are to strengthen the international collaborative ties with ASEAN member states, India, and China, as well as participate actively in WHO activities in the T&CM field. The Division's main achievements include the 10th INTRACOM T&CM International Conference held in collaboration with India, the launch of Research Priorities in T&CM for Malaysia 2024-2029, and the reinforcement of the regulation activity according to the Traditional & Complementary Medicine Act 2016 [Act 775].

COLLABORATION BETWEEN THE GOVERNMENT OF MALAYSIA AND THE GOVERNMENT OF INDIA IN THE FIELD OF TRADITIONAL MEDICINE

Following the ending of the first Memorandum of Understanding (MoU), a new MoU between Malaysia and India in the field of Ayurveda and Other Traditional Medicine Systems was signed on 20 August 2024 in India.

The action plan under this MoU is regularly reviewed during bilateral technical meetings (BTM). The 9th BTM was held on 26 November 2024 in Putrajaya, Malaysia. The Director-General of Health (DG) led Malaysian delegates including senior MOH officials. The Indian delegation, led by the Secretary of the Ministry of Ayush, was accompanied by the High Commissioner of India to Malaysia and traditional medicine experts from India.

The proposed collaborative areas in this meeting included the development of education and training programmes to enhance the skills of Malaysian healthcare personnel in traditional Indian medicine (TIM) and joint research in integrative medicine, medicinal plants, and non-pharmacological interventions.

The Government of India also actively supports education in Malaysia through initiatives such as the Ayush Scholarship Scheme, which allows Malaysians to pursue studies in TIM in India. Until 2024, 26 Malaysian students have benefited from this scheme. Additionally, the Ayurveda Chair which was established in the Universiti Tunku Abdul Rahman (UTAR) by the Ministry of Ayush through the deputation of Ayurvedic Medicine Expert, Dr. Binod Bihari Dora, plays a vital role in advancing education and research in the TIM field in Malaysia.

The T&CM Division also actively participates in events organised by the Indian High Commission in Malaysia. Among these was the Ayurveda and Siddha Day celebration, themed Ayurveda Innovation for Global Health, to promote the innovation and advancement of TIM practitioners and members of the public in this field.



Image 5.24 Exchange of MoU - Cooperation in Ayurveda and Traditional Medicine Systems in Hyderabad House, India

COLLABORATION BETWEEN THE GOVERNMENT OF MALAYSIA AND THE GOVERNMENT OF CHINA IN THE FIELD OF TRADITIONAL MEDICINE

The Malaysian delegation's visit to China in December 2024 marked a significant milestone in celebrating 50 years of diplomatic relations between the countries and strengthening cooperation in traditional medicine. This collaboration reaffirmed commitments under the MoU between both governments to advance traditional medicine.

The Malaysian delegation was led by the Deputy Director-General of Health (Medical), along with the Director of the T&CM Division and two (2) technical officers. On 2 December 2024, the delegation attended the 6th BTM with China's National Administration of Traditional Chinese Medicine (NATCM) in Beijing. The meeting resulted in consensus on short-term training programmes in fertility care and certain paediatric diseases, the establishment of a joint herbal medicine laboratory, and plans for a traditional Chinese medicine (TCM) centre in Malaysia under the Belt and Road Initiative.

The delegation also visited Guanganmen Hospital to discuss TCM clinical care, capacity-building, and nursing standards in TCM. At the Chinese Academy of Chinese Medical Sciences (CACMS), they explored the development of TCM standards and high technology such as Albased TCM diagnostics and pre-clinical studies.

On 3-4 December 2024, the delegation participated in the World Conference on Traditional Medicine at the National China Conventional Centre, which focused on governance, evidence-based traditional medicine practices, and traditional medicine education standards. The conference concluded with the Beijing Declaration, which emphasised traditional medicine's role in public health and its integration into health systems.

The T&CM Division representatives also participated in the WHO Collaborating Centre and International Traditional Medicine Clinical Trial Registry (ITMCTR) meetings, focusing on the WHO Traditional Medicine Strategy 2025-2034. The T&CMD Director was appointed as an advisor for the 2nd ITMCTR Advisory Group Meeting, which focuses on solving challenges in the registration of clinical research for traditional medicine.



Image 5.25 The China-Malaysia Delegation Who Attended The 6th BTM





Image 5.26 Visit to Guanganmeng Hospital and CACMS, Beijing

Throughout the year 2024, both countries maintained a strong connection through information-sharing programmes organised by China, including:

1. China (Guangxi) Traditional Chinese Medicine Import and Export Supplier Conference

Date : 6 March 2024

Venue : Nanning, Guangxi, China

Organiser : Nanning Municipal People's Government

The conference introduced Nanning as a new trade hub for Chinese medicinal herbs between China and ASEAN. This event involved over 300 participants, including government officials and business industry leaders. It featured the inauguration of key facilities, such as the Guangxi Chinese Medicinal Herb Trade Centre and the signing of 21 projects covering herbal processing, trade, circulation and testing services.





Image 5.27 T&CM Division Representatives Attending the 2024 China (Guangxi)
Traditional Chinese Medicine Import and Export Supplier
Conference

2. Seminar on Evidence-Based Practice of Traditional Chinese Medicine

Date : 15-16 July 2024

Venue : Hotel Royale Chulan, Kuala Lumpur

Organiser : T&CMD with National Administration of Traditional Chinese

Medicine (NATCM)

The primary purpose of this seminar was to enable a platform for knowledge exchange and experience sharing between the two (2) countries to advance T&CM services. It also aimed to improve efforts in research related to the T&CM and its application in policy decision-making for the T&CM field. More than 60 participants from various backgrounds, including MOH regulatory bodies, practitioners, researchers, and academics in the field of T&CM in Malaysia attended this seminar. The seminar covered the sharing of views and experiences from six (6) TCM medicine experts from the CACMS.

The direction of T&CM research and services in Malaysia can be strengthened through proactive initiatives such as the development of the T&CM Clinical Practice Guidelines in Malaysia and the development of certification and accreditation programme for T&CM research evaluation ethics committees in educational institutions in Malaysia. Other efforts include increasing local study data by establishing international collaborations to conduct

high-quality T&CM clinical research and expanding T&CM services provided at MOH facilities to benefit more patients.



Image 5.28 Seminar on Evidence-Based Practice of Traditional Chinese Medicine

3. Global TCM Health Industry Knowledge Alliance Summit

Date : 12 September 2024 Venue : Beijing, China (virtual)

Organiser : Beijing Administration of Traditional Chinese Medicine

T&CMD

representative : Division Director

This summit, as part of the 2024 China International Fair for Trade in Services, aimed to achieve several key objectives. These included promoting cooperation in chronic disease management, developing a healthy society in China and fostering international collaboration in urban health industries, innovation and talent cultivation, advancing T&CM globally. T&CM Division Director delivered virtual remarks regarding Malaysia's efforts in integrating traditional and modern medicine to address the rising burden of chronic diseases. Among the initiatives shared including evidence-based T&CM research, capacity-building for practitioners and partnership ties with China.



Image 5.29 Virtual Remarks by T&CM Division Director at the Summit

10TH INTERNATIONAL CONFERENCE ON TRADITIONAL AND COMPLEMENTARY MEDICINE (10TH INTRACOM) 2024

10th INTRACOM 2024 was held successfully on 27-28 November 2024 at the NIH, Setia Alam. The conference was organised by the T&CM Division in collaboration with Sunway TCM Centre and the Ministry of Ayush, India, as the country partner.

With the theme *Traditional and Complementary Medicine (T&CM)* in the Digital Age, the conference brought together 400 participants and speakers from more than 20 countries. It aimed to promote the integration of digital technologies into healthcare systems, advance digital innovation for evidence-based holistic care, and strengthen collaborations among stakeholders on digital solutions in T&CM.

The keynote address by the DG of Health Malaysia highlighted key digital transformation initiatives in healthcare and outlined the future direction of T&CM in Malaysia. Key sessions explored the role of digital technologies in optimising T&CM to achieve universal health coverage, enhance service delivery, and support evidence-based practices. Symposiums focused on real-time monitoring systems, artificial intelligence (AI), and the adoption of digital applications in clinical decision-making.

WHO experts and international scholars shared valuable insights into global innovations in T&CM and showcased how digital advancements are driving progress at an international level. The conference also featured over 25 exhibition booths showcasing innovations in T&CM and digital health. It helped to enrich participants' understanding and foster meaningful knowledge exchange.

One of the significant milestones of the conference was the launch of the Research Priorities in Traditional and Complementary Medicine for Malaysia 2024-2029, a strategic document that outlines the research agenda for T&CM in Malaysia. This document focuses on addressing existing gaps, generating scientific evidence to advance T&CM, supporting its integration into modern healthcare systems, and enhancing the quality, safety, and efficacy of T&CM practices and products. The conference created opportunities for fostering collaboration and innovation in advancing T&CM, with aspirations to inspire continued efforts towards effective transformation in this field.



Image 5.30 Officiation Ceremony of 10th INTRACOM Conference



Image 5.31 10th INTRACOM Conference Participants

LAUNCH OF RESEARCH PRIORITIES IN TRADITIONAL AND COMPLEMENTARY MEDICINE FOR MALAYSIA 2024-2029 BOOK

The Minister of Health launched the Research Priorities in Traditional and Complementary Medicine for Malaysia 2024-2029 book at the NIH on 27 November 2024 as one of the main agendas in the 10th INTRACOM conference. This publication is the result of the collaboration between T&CMD and the Evidence-Based Healthcare Sector, NIH. It serves as a reference and guide for stakeholders in the T&CM industry in Malaysia, particularly in identifying priority areas within the sector.

Establishing the T&CM research priorities for Malaysia marks a significant milestone in advancing the sector. This initiative aligns with key national and international frameworks, including the WHO Traditional Medicine Strategy 2014-2023, the National Policy on T&CM 2007, and the T&CM Blueprints.

A systematic process was undertaken to develop Malaysia's first T&CM research priorities. This process involved an extensive literature review, situational analyses, and stakeholder engagements to identify their perceived priorities and formulate key research domains. Referring to **Table 5.20**, the finalised research priorities in T&CM for Malaysia include T&CM practice evaluation, T&CM product development, as well as innovation and education needs of T&CM.

Table 5.20 T&CM Research Priorities in Malaysia

Research Domain	Research Scope
T&CM Practice Evaluation	 T&CM practice demand and delivery Quality of T&CM practices Healthcare financing Integration of T&CM services with modern medicine Regulations related to T&CM practices and facilities Traditional knowledge among indigenous and local communities in Malaysia
T&CM Product Development	 Demand and supply of T&CM products that are used in Malaysia Effectiveness and safety of T&CM products Standardisation and quality control of T&CM products Regulations related to T&CM products Natural products with therapeutic claims
Innovation and Education Needs of T&CM	 Health literacy among public and healthcare personnel related to the T&CM industry Quality and competency of the T&CM industry Innovation and technology



Image 5.32 Launch Ceremony of Research Priorities in Traditional and Complementary Medicine for Malaysia 2024-2029 Book

WHO COLLABORATIONS: WHO COLLABORATING CENTRE FOR TRADITIONAL, COMPLEMENTARY AND INTEGRATIVE MEDICINE (WHOCC TCI)

T&CMD's designation as a WHOCC TCI began in 2020 and has now been extended for another four (4) years, from 29 June 2024 to 29 June 2028.

This re-designation reaffirms the T&CM division's commitment to support WHO's strategic objectives by enhancing the knowledge base on the integration of T&CM into national health systems. The division will also aid the WHO in capacity building of WHO Member States and non-profit stakeholders in T&CM. Key action plans to be carried out include collaborating with

WHO to collect and analyse data on T&CM in primary healthcare and exploring its role in healthy aging, as well as facilitating technical activities through information dissemination and capacity-building programs.

In 2024, the T&CMD's participation in WHO activities includes:

- Member State Consultation on Progress in Implementing the Regional Framework for Harnessing T&CM for Achieving Health and Well-being in the Western Pacific and feedback session on the draft WHO Traditional Medicine Strategy 2025-2034 on 28-29 August 2024 in Seoul, Republic of Korea
- ii. WHO Technical Meeting on Artificial Intelligence (AI) for Global Health: Advancing Traditional Medicine on 11-12 September 2024 at the All India Institute of Ayurveda (AIIA), New Delhi, India
- iii. WHO Technical Meeting on the Finalisation of the ICD-11 Traditional Medicine Chapter Module 2 (TM2) Release Version and the Development of a Minimum Data Set (MDS) and Reporting Form on 25-26 November 2024 at the NIH, Setia Alam, Malaysia
- iv. Meeting for the WHO Collaborating Centres for Traditional Medicine on 4 December 2024 in Beijing, China



Image 5.33 WHO Technical Meeting at AlIA, New Delhi, India

ENFORCEMENT OF THE TRADITIONAL AND COMPLEMENTARY MEDICINE ACT 2016 [ACT 775]

The Traditional and Complementary Medicine Act 2016 [Act 775] is an act to provide for the establishment of the T&CM Council to regulate the T&CM services in Malaysia pertaining to related matters.

The enforcement of the Act 775 has now entered Phase 3, which is the final phase, and has come into operation on 1 August 2024. In the enforcement of Phase 3, the sections that come into operation are as in Part IX, enforcement under Act 775. In this phase, enforcement activities and legal action will begin. The implementation will be divided into two (2) stages, namely:

i. During the Transitional Period (Until 28 February 2025)

During this period, enforcement activities and legal action may be taken, however, limited through an educational enforcement approach to T&CM practitioners in the recognised practice areas only.

This approach is an awareness and monitoring activity for T&CM practitioners in the recognised practice areas to ensure that T&CM practitioners comply with the requirements set out under Act 775 as well as their obligations as registered practitioners in providing quality and safe T&CM services.

Among the educational enforcement approaches are monitoring of T&CM practitioners in the recognised practice areas, screening of advertisements for T&CM skills and services as well as continuous briefing of T&CM practitioners in the recognised practice areas regarding registration and compliance with Act 775.

ii. After the Transitional Period Ends (Beginning 1 March 2025)

After the transitional period ends, beginning 1 March 2025, enforcement activities will be strengthened, and legal action will be taken against T&CM practitioners in recognised practice areas who are found to have committed offenses under Act 775.





Image 5.34 Monitoring Activities of T&CM Practitioners

STATISTICS OF PRACTITIONERS REGISTERED WITH THE T&CM COUNCIL 2024

T&CMD through the Traditional and Complementary Medicine Council Section is responsible in processing the T&CM practitioner registration applications. As reported in **Table 5.21**, in 2024, 7,031 new local T&CM practitioner registration applications were approved and 2,208 Registered Practitioner's Practising Certificates (RPPC) were issued. For the foreign T&CM practitioner registration applications, 48 new Temporary Practicing Certificates (TPCs) were approved and 67 renewals were issued.

Table 5.21 Total Number of Local and Foreign T&CM Practitioners Registered with T&CM Council 2024

	Local T&CM Practitioners		Foreign T&CM Practitioners	
Recognised Practice Area	Number of New Practitioner Applications Approved	Number of RPPC Issued	Number of New TPC Applications Approved	Number of Renewal TPC Issued
Traditional Malay Medicine	3,424	715	Not Applicable	Not Applicable
Traditional Chinese Medicine	2,460	1,096	36	39
Traditional Indian Medicine	221	77	5	7
Homeopathy	165	66	0	3
Chiropractic	194	98	5	12
Osteopathy	1	0	2	6
Islamic Medical Practice	566	156	Not Applicable	Not Applicable
Total	7,031	2,208	48	67

MEDICAL PRACTICE DIVISION (BAP)

PRIVATE MEDICAL PRACTICE CONTROL SECTION (CKAPS)

CKAPS undertakes the role to implement and enforce the Private Healthcare Facilities and Services Act 1998 [*Act 586*]. The regulation and control for private healthcare facilities and services (PHFS) under Act 586 include registration, approval, licensing, handling of complaints, evaluation of quality, enforcement activities and matters relating to PHFS. As of December 2024, a total of 16,513 PHFS have been registered and licensed under Act 586.

CKAPS REVENUE

In 2024, CKAPS collected a total of RM7,315,494 from processing fees, issuance fees, administrative fees, compound fines and court fines. This amount is 42% higher compared to the revenue collected in 2023 and reflects a continuous increase since 2020.

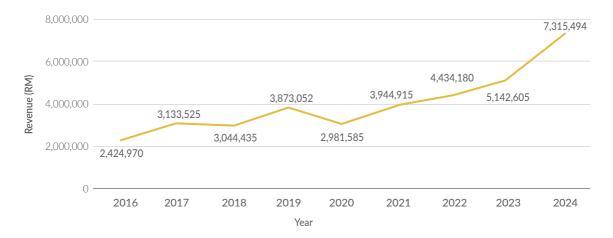


Figure 5.7 CKAPS Revenue 2016-2024

REFINEMENT OF STANDARD OPERATING PROCEDURES (SOP) AND GUIDELINES RELATED TO THE IMPLEMENTATION OF ACT 586 WORKSHOP

This workshop was held from 6-8 August 2024 at Hotel Neo+ Penang, Penang. During the workshop, the 80 representatives from CKAPS Headquarters (HQ) and JKN discussed the draft instructions, SOP and guidelines related to Act 586 that have been developed and identified issues concerning the implementation of Act 586 and the Mental Health Act 2001 [Act 615] and its regulations.

TRAINING OF TRAINERS (TOT) WORKSHOP ON LICENSING MODULE FOR PHFS

Following the planning of the Training of Trainers (ToT) for the improvement in the licensing process, which was planned in 2023, a total of four (4) ToT sessions have been successfully carried out as follows:

Table 5.22 ToT Workshop on Licensing Module for PHFS

Workshop Title	Date	
Handling Application Documents under Act 586 (Administrative Assistant)	26-27 February 2024	
Licensing Module for Central and Southern Zone	4-6 March 2024	
Licensing Module for Northern and East Coast Zone	4-6 June 2024	
Licensing Module for Borneo Zone	29-31 July 2024	

WORKSHOP AND TRAINING FOR CKAPS OFFICERS

To strengthen work procedures and cooperation among CKAPS staff, two (2) workshops have been successfully organised as follows:

- i. Quality Management Refinement and Digitalisation Action Plan was held from 3-5 July 2024 at Ibis KLCC, aimed to refine CKAPS's digitalisation plan in line with the *Pelan Strategik Programme Perubatan* and to empower CKAPS officers in SPK MS ISO 9001:2015.
- ii. CKAPS Team Enhancement and Customer Management was held form 25-27 October 2024 at the Institut Pengurusan Peladang Langkawi, aimed to enhance motivation, communication and team spirit among the staff.

COURSE ORGANISED BY SERVICE EVALUATION SECTOR

To enhance the knowledge and quality of prosecuting officers at CKAPS, the Basic Course for CKAPS Prosecuting Officers was held from 7-10 October 2024 in Kuala Lumpur, and was attended by officers from CKAPS HQ and JKN.

IMPROVEMENT OF WORK PROCESSES RELATED TO REGISTRATION AND LICENSING OF PHFS

Recognising the greater challenges in meeting stakeholder expectations and the dynamic advancement of technology, CKAPS acknowledges that governance changes are necessary to further strengthen the service delivery system. In this regard, work process improvements have been made through the Business Process Re-engineering (BPR) platform and digitalisation initiatives, which indirectly shorten the processing time of applications and enhance access to private healthcare service delivery.

BUSINESS PROCESS RE-ENGINEERING (BPR)

CKAPS has participated in several workshop sessions for the MOH BPR initiative, coordinated by the Competency Development Division in collaboration with the National Digital Department (JDN). As a result of the workshops organised under this initiative, several improvements have been successfully implemented in phase starting from 2 September 2024 as follows:

- i. The abolition of the pre-establishment zoning process for the establishment of private hospitals and private haemodialysis centres.
- ii. The update of the approval application for the establishment or maintenance (Form 1) and the application for new licenses.
- iii. The improvement of the work process for the registration of private clinics.

The implementation of the online submission for applications to establish or maintenance (Form 1) and applications for new license through myBRP@CKAPS system is expected to commence by mid-2025.

CKAPS DIGITALISATION INITIATIVE

To accelerate the nation's digital transformation agenda, CKAPS has implemented several initiatives towards the digitalisation of work processes as follows:

- i. Developing the myBRP@CKAPS system, in which the PHFS license renewal module has been in use since 1 July 2024.
- ii. Introducing the MyGeoCKAPS application, an interactive map to display the distribution of private healthcare facilities under Act 586.

The launch of the myBRP@CKAPS system was officiated by the Minister of Health on 20 June 2024. The development of this system is being carried out in phases and is expected to be completed by 2027.





Image 5.35 The Launching Ceremony of myBRP@CKAPS System

CKAPS ENGAGEMENT

To help people better understand the goals and direction of the government, CKAPS has taken part in several events, including:

- i. Hari Bertemu Pelanggan KKM on 3 October 2024
- ii. Dua Tahun Kerajaan MADANI Programme from 22-24 November 2024





Image 5.36 CKAPS Engagement

MEDICAL LEGISLATION SECTION (CPP)

CPP consists of five (5) sectors:

- i. Drafting
- ii. Private Health Facility Fee
- iii. Aesthetic Medical Practice
- iv. Globalisation
- v. Health Tourism

Throughout 2024, CPP demonstrated remarkable progress and achievements through active collaboration with government bodies, private agencies and stakeholders. This year's accomplishments reflect our commitment to advancing healthcare standards and addressing emerging challenges in line with the ministry's mission and vision.

DRAFTING SECTOR

The drafting of new regulations for private standalone ambulance services was continued with engagement with several government and private agencies such as PUSPAKOM, the Department of Occupational Safety and Health (DOSH), St. John Ambulance of Malaysia (SJAM) and the Malaysian Red Crescent Society (MRCS). Visits were also conducted to several private standalone ambulance service providers to gain a deeper understanding of their operations, including a visit to the boat ambulance services by JKN Terengganu.





Image 5.37 Private Standalone Ambulance Provider Visits

The drafting process for the Pathology Laboratory Regulation has shifted direction following a recent legal analysis, which recommended the repeal of the Pathology Laboratory Act 2007 and regulation of private pathology laboratories to be made under suitable existing act. This move aligns with the goal of reforming the regulatory framework for private healthcare facilities and services, streamlining the enforcement process and integrating digital mechanisms. A public consultation was held on the Unified Public Consultation (UPC) website to solicit feedback from various stakeholders.

The Drafting Sector has collaborated with Taylor's University and a health clinic in Pulau Pinang for a paper titled *The Lost Identity and Statelessness: The Consequence of Unregulated Third-Party Involvement of Assisted Reproductive Technology in Malaysia*, which was presented at the SDG Conference 2024. The paper was subsequently published in MySDG Academy APPGM-SDG book, which was approved by the 15th Malaysian Parliament.

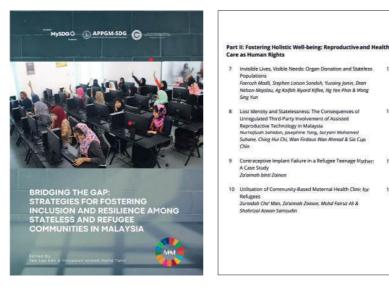


Image 5.38 The Lost Identity and Statelessness: Consequences of Unregulated Third-Party Involvement in ART in Malaysia Publication

Various stakeholder engagements were held throughout 2024 to amend the Private Healthcare Facilities and Services Act 1998 [Act 586] including town hall with private healthcare service providers such as medical clinics, dental clinics, hospitals and relevant associations to gather their feedback.





Image 5.39 Consultations with Stakeholders

PRIVATE HEALTH FACILITY FEE SECTOR

In 2024, the Private Healthcare Facility Fee Sector continued efforts to ensure private medical practitioners comply with professional fees under Act 586 to help control rising healthcare costs. A total of 385 inquiries and complaints on professional fees were received, with 367 cases (95%) resolved. A draft amendment to the 13th Schedule, which adds 1,268 new procedures and notes, was submitted to the MOH Legal Advisor for review. The sector also registered three (3) new Managed Care Organisations (MCOs), bringing the total to 63. It actively engaged with private hospitals, insurance companies, and associations through briefings and discussions to improve understanding of hospital charging protocols. The sector also participated in talks with Bank Negara and other stakeholders on health insurance and healthcare cost issues. To improve service quality, an officer attended a short-term Medical Professional Coding course in Chicago, USA.





Image 5.40 Briefing on The Amendment to the 13th Schedule and Appointment of Members of MCOs

AESTHETIC MEDICAL PRACTICE SECTOR

The Aesthetic Medical Practice Sector, which serves as the secretariat for the Main Credentialing and Privileging Committee of Aesthetic Medical Practice, conducted two (2) assessment sessions for Letter of Credentialing and Privileging (LCP) Chapter 1 in 2024. These sessions are aimed at registered medical practitioners seeking to provide aesthetic medical services. A total of 174 candidates were involved in the assessment. As of December 2024, 1,004 registered medical practitioners are holding the LCP, which are Chapter 1 (General Practitioners): 795, Chapter 2 (Medical Specialists): 97 and Chapter 3 (Surgical Specialists): 112.



Image 5.41 Written Assessment Session for the LCP

In 2024, this sector launched public awareness and education campaigns on safe aesthetic medical practices through various initiatives, including participation in the *Programme MADANI Rakyat* (PMR), organised by the Prime Minister's Office. The sector participated in five (5) PMR events across different zones in Malaysia which were Kuantan (East Zone), Skudai (South Zone), Miri (Sarawak Zone), Kota Kinabalu (Sabah Zone) and the MADANI Government's 2-Year Anniversary at Kuala Lumpur Convention Centre (KLCC). In addition, the sector actively engaged with the public through media platforms such as TV3's Malaysia Hari Ini, BERNAMA Radio and TV, TV Alhijrah, RTM, Traxx.fm and local radio stations to further promote awareness of safe aesthetic practices.





Image 5.42 Programme MADANI Rakyat (PMR)

GLOBALISATION SECTOR

Working closely with the Ministry of Investment, Trade and Industry (MITI), this sector analysed and provided technical inputs for new and existing international trade agreements concerning the liberalization of the private healthcare sector. Through this collaboration, this sector, along with other MOH division and agencies, has successfully finalised the pre-zero draft of the transposition of the ASEAN Framework Agreement on Services (AFAS) to the newer ASEAN Trade in Services Agreement (ATISA) in March 2024.

This sector also represented Malaysia in the ASEAN Joint Coordinating Committee on Medical Practitioners (AJCCM), which deliberates on the objectives of the ASEAN Economic Community, particularly the Mutual Recognition Arrangement (MRA) for medical practitioners. The representative from this sector attended both the AJCCM meetings for 2024, hosted by Indonesia in Bandung on 27 February 2024 and the ASEAN Secretariat at the ASEAN Headquarters in Jakarta on 22 October 2024.





Image 5.43 34th AJCCM Meeting in Bandung, Indonesia & 35th AJCCM Meeting at the ASEAN Headquarters in Jakarta, Indonesia

MEDICO LEGAL SECTION

Throughout 2024, the Medico Legal Section has been battling medico legal cases tirelessly. This year's focus was on enhancing the early resolution of cases, strengthening collaboration with stakeholders and advancing medico legal competency among healthcare professionals. The following report outlines key activities, achievements and future directions.

KEY HIGHLIGHTS OF 2024

- A total of 336 medico legal complaints and 118 litigation cases were reported across MOH facilities.
- ii. 85.30% of medico legal complaints were resolved within 365 days.
- iii. Ex gratia payments were recommended for 41 cases.
- iv. Technical meetings, expert witness training and workshops were held to strengthen medico legal competency.

CASE MANAGEMENT OVERVIEW

In 2024, the Medico Legal Section registered 336 complaints, with initial investigations conducted at facility levels and subsequent reviews by the central section. Independent Inquiry Committees were convened for 76 complex cases involving compensation claims. A notable achievement was resolving 85.30% of medico legal cases within 365 days.

LITIGATION

The Medico Legal Section worked closely with the Attorney General Chambers (AGC), providing expert advice and facilitating expert witness appointments for court proceedings. A total of 118 litigation cases were initiated against MOH healthcare facilities. The technical support provided contributed to efficient case management and expedited settlements.

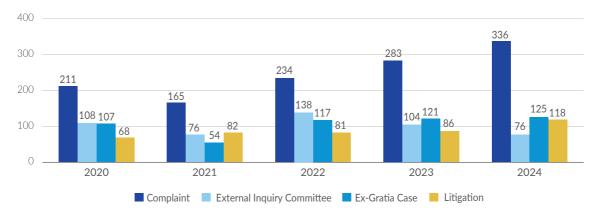


Figure 5.8 Medico Legal Statistics 2020-2024

SURVEILLANCE AND MONITORING

The section conducted ongoing surveillance of medico legal practices, ensuring recommendations from Independent Inquiry Committees were effectively implemented. Key meetings in 2024 included:

- Meeting of Heads of Emergency Medicine Speciality and Emergency Medicine Specialists MOH on 23 April 2024
- ii. Meeting of Heads of General Surgery Speciality, Heads of General Surgery Subspecialties and Heads of General Surgery Departments MOH on 23 May 2024
- iii. Meeting of Heads of Orthopaedic Speciality MOH on 26 June 2024
- iv. Medico Legal Case Management Audit at Hospital Tuanku Ja'afar on 16 December 2024

COMPETENCY DEVELOPMENT INITIATIVES

In 2024, 83 medico legal lectures were delivered, and the following training programmes were held:

Table 5.23 Competency Activities

Programme	Date	Participant
Medico Legal Section Team Building	31 July - 2 August	18
Professional Certificate in Medico Legal Healthcare Practice	19 February - 9 March	11
External Inquiry Chairperson Workshop (MOH O&G Services)	15-17 July	47
Technical Meeting and Medico Legal Case Management Workshop	9-11 October	26
Expert Witness Training Course	28-30 October	31
Medico Legal Upskill & Dispute Resolution	4-7 November	41





Image 5.44 Medico Legal Section Team Building, Bentong & Professional Certificate in Medico Legal Healthcare Practice, UKM





Image 5.45 External Inquiry Chairperson Workshop (MOH O&G Services) at SOCSO Melaka & Expert Witness Training Course in Alor Setar





Image 5.46 Technical Meeting and Medico Legal Case Management Workshop in Melaka & Medico Legal Upskill & Dispute Resolution in Kuala Lumpur

ASSISTANT MEDICAL OFFICER SERVICES SECTION (CPPPP)

CPPPP is an organisation that regulates the registration, development and direction of the Assistant Medical Officer (PPP) profession in Malaysia. Registration of Assistants Medical Officers are regulated under Medical Assistants (Registration) Act 1977 [*Act 180*]. The Assistant Medical Officer Services Section (CPPPP) is also responsible for regulating of Estate Hospital Assistants under Estate Hospital Assistants (Registration) Act 1965 [*Act 435*]. Since 2015, Health Care Assistant Profession were also placed under the responsibility of CPPPP.

CERTIFICATE OF REGISTRATION AND ANNUAL RENEWAL UNIT

In 2024, the Registration and Annual Renewal Unit aimed to process 85% of Form 3 (Rule 16 (1)) Certificate of Registration as Medical Assistants within 45 working days. Based on the performance data, the unit achieved 100% compliance in all months when 697 registrations were recorded, with no cases of non-compliance.

COMPULSORY PLACEMENT PROGRAMME (PPW)

The 6-month PPW in the Emergency Department trains newly appointed PPP in the MOH to standardise all new PPP appointments, strengthening clinical skills, enhancing decision-making abilities, and improving communication effectiveness.

Table 5.24 PPW 2024

State	Group 30/2024	Group 31a/2024	Group 31b/2024	Group 32/ 2024	Group 33/2024	Total
Perlis	0	2	0	4	2	8
Kedah	4	12	10	14	0	40
Pulau Pinang	8	20	18	7	0	53
Perak	8	18	6	8	2	42
Selangor	0	46	46	36	2	130
FT KL & Putrajaya	5	7	7	1	0	20
HKL	3	1	0	14	3	21
Negeri Sembilan	2	9	10	4	0	25
Melaka	5	9	8	8	0	30
Johor	10	0	18	7	0	35
Pahang	7	3	7	24	3	44
Terengganu	8	3	7	17	3	38
Kelantan	6	13	15	16	2	52
Sarawak	15	24	23	9	26	97
Sabah	15	15	30	12	24	96
FT Labuan	0	2	2	0	1	5
Total	96	184	207	181	68	736

MALAYSIAN OPTICAL COUNCIL (MOC)

MOC is a regulatory body responsible for enforcing the Optical Act 1991 [Act 469] and the Optical Regulations 1994. The regulation of the optometrist and optician professions under Act 469 includes registration, issuance of Annual Practicing Certificates (APC), handling complaints, regulating optometry practices, and other related matters. MOC is also responsible for the evaluation and accreditation of Optometry and Opticianry programmes conducted by Higher Education Providers in Malaysia.

RECOGNITION, OPERATION & FINANCE SECTOR

This sector is responsible for the recognition of the Optometry & Opticianry Programme and APEL (C) Assessment for registered opticians.

ACCREDITATION MONITORING EVALUATION OF PROGRAMMES

The full accreditation monitoring evaluation of two programmes was conducted in 2024, namely the Bachelor of Optometry (Hons.) programme at SEGi University on May 9, 2024, and the Bachelor of Optometry (Hons.) programme at UiTM on May 20, 2024.

PROVISIONAL ACCREDITATION MONITORING EVALUATION

Provisional accreditation monitoring evaluations were conducted for the Bachelor of Science (Hons.) Optometry programme at SEGi University on 6 June 2024. Provisional accreditation evaluations were also conducted for two (2) opticianry programmes, namely the Diploma in Opticianry at UCSI University on 4 June 2024, and the Diploma in Opticianry at Twintech University College of Technology on 5 September 2024.

CODE OF PRACTICE FOR PROGRAMME ACCREDITATION UNDERGRADUATE ACCELERATED OPTOMETRY DEGREE PROGRAMME VERSION 2.0

Notification regarding the enforcement of this document was issued to the Malaysian Qualifications Agency (MQA) and Higher Education Institutions offering Optometry (Accelerated) programmes on 4 December 2024.

This document was approved by the MOC's 85th meeting and will be fully implemented starting 1 January 2025, for the offering of Optometry (Accelerated) programmes.

EVALUATION OF ACCREDITATION OF PRIOR EXPERIENTIAL LEARNING FOR CREDIT AWARD [APEL (C)]

Several activities related to APEL (C) were conducted in 2024, as shown in **Table 5.25**.

Table 5.25 APEL (C) Evaluation Activities

Aktiviti	Tarikh	Sasaran
Self-assessment form briefing by APEL (C) MOC Advisor	28 February 2024	Registered opticians who have completed the Bridging Programme
APEL (C) Portfolio Briefing by APEL (C) MOC Advisor	19 July 2024	Registered opticians registered for APEL (C) evaluation
APEL (C) Portfolio Evaluation Meeting	24 & 30 October 2024 4 November 2024	9 portfolios of APEL (C) MOC candidates

REGISTRATION SECTOR

This sector is responsible for managing matters related to registration and APC for optometrists and opticians in Malaysia.

REGISTRATION OF OPTOMETRY PRACTITIONERS

The registration process for optometry practitioners handled by MOC requires applicants to attend a briefing session at MOC. Applicants present at the session are registered on the same day. 14 briefing sessions were held in 2024 and 173 new practitioners registered.

Table 5.26 Total registered Optometrists and Opticians in 2024

	New Practitioners	Registered Practitioners	Deceased & Retired
Optician	35	3,517	237
Optometrist	138	3,184	22
Total	173	6,701	259

ANNUAL PRACTICING CERTIFICATE (APC)

APC applications are made through the Malaysian Healthcare Practitioners' System (MHPS), which has been in use since 2023. In addition to issuing reminders to renew APCs on the MOC website and official Facebook page, the APC Unit under the Registration Sector set up a booth at the Orthoptic Workshop in Petaling Jaya, Selangor on 15 August 2024 to assist practitioners in using the MHPS system.

Table 5.27 Number of Renewed APCs for 2024

Optician	2,177
Optometrist	2,454
Total	4,631

PROFESSIONAL QUALIFYING ASSESSMENT (PQA)

The PQA for opticians and optometrists, conducted by the *Pertubuhan Akademi Optometri Malaysia* (PAOM), was successfully implemented. The PQA for opticians was held at the UKM Optometry Clinic on 4 May 2024, involving two (2) candidates.

For the optometrist PQA, the theory component was successfully held on 29 April and 27 June 2024, while the practical component took place on 28 June 2024. Both components were attended by a total of two (2) candidates.

COMPETENCY SECTOR

This sector is responsible for managing matters related to Continuing Professional Development (CPD) for registered optometrists and opticians, as well as the administration of contact lens examinations for registered opticians under Section 30(5) of the Optical Act 1991.

CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

To ensure systematic lifelong learning and professional development among registered optometrists and opticians, MOC encourages all optometry practitioners to register and actively claim CPD points in the myCPD 2.0 system.

Table 5.28 Registered Optometrists and Opticians in the myCPD 2.0 System

Category	Optometrists	Opticians
Public Sector	406	-
Private Sector	2,188	1,237
Total by Profession	2,594	1,237
Total Registered Practitioners in myCPD System	3,8	31

A total of 181 CPD points applications for programmes submitted through the myCPD 2.0 system were approved, while 108 manual CPD points applications were also verified.

ETHICS AND ACT SECTOR

This sector is responsible for the implementation of the Optometry Bill, amendments to the Schedules of the Optical Act 1991, the Optical Regulations 1994, handling complaints related to optometry practitioners and MOC services and conducting Optical Surveillance Audits (ASO) on optometrists and opticians in the private sector.

COMPLAINTS

MOC receives complaints through various channels including email (eaduan.moc@moh. gov.my), letters and phone calls. The number of complaints managed by MOC is detailed in **Figure 5.9**.

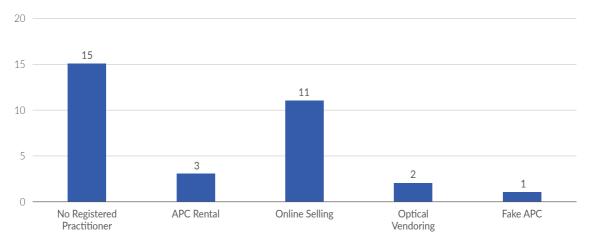


Figure 5.9 Complaints According to Category 2024

OPTIC SURVEILLANCE AUDIT (ASO)

The ASO is periodically conducted on registered optometrists and opticians to ensure compliance with the Optical Act 1991 in optical premises. In 2024, 69 registered optometrists and 134 registered opticians were audited which covering 127 optical premises in the FT Kuala Lumpur.

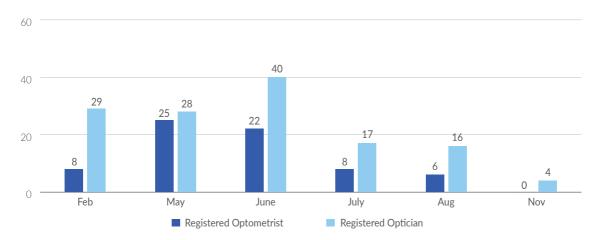


Figure 5.10 Optic Surveillance Audit 2024

CHAPTER RESEARCH AND TECHNICAL SUPPORT

RESEARCH AND TECHNICAL SUPPORT PROGRAMME

This programme, led by the Deputy Director of Health (Research and Technical Support) [TKPK (P&ST)], is pivotal in formulating strategic health policies, developing comprehensive health plans and enhancing the quality of health services across the nation. This programme includes:

- i. Planning Division
- ii. Engineering Services Division
- iii. Medical Radiation Surveillance Division
- iv. National Institutes of Health (NIH)

PLANNING DIVISION

The Planning Division focuses on several crucial activities such as the formulation of the Health Sector Transformation Plan, improving the quality of health data, implementation of health informatics standards in Malaysia as well as planning, developing and evaluating the programmes or projects as planned in the Twelfth Malaysia Plan (12MP). The Planning Division consists of six (6) sections:

- i. Health Plan and Policy Planning (PDPK)
- ii. National Health Financing (NHF)
- iii. Malaysia National Health Accounts (MNHA)
- iv. Health Informatics Centre (HIC)
- v. Health Facility Planning (PFK)
- vi. eHealth Planning

HEALTH PLAN AND POLICY PLANNING (PDPK) SECTION

MID-TERM REVIEW OF MOH STRATEGIC PLAN (MTR MOHSP) 2024-2025

Among the activities are as follow:

Table 6.1 MTR MOHSP 2024-2025 Activities

Activity	Date
MTR MOHSP 2024-2025 Technical Committee Meeting	7 June 2024
MTR MOHSP 2024-2025 Preparation Workshop	18-19 July 2024
Presentation of the Draft MTR MOH SP 2024-2025 at the MOH's highest management meeting for approval	2 October 2024





Image 6.1 MTR MOHSP 2024-2025 Preparation Workshop

SUSTAINABLE DEVELOPMENT GOALS (SDG) AND UNIVERSAL HEALTH COVERAGE (UHC)

MOH is designated as the lead ministry for SDG 3: Ensure Healthy Lives and Promote Well-Being for All at All Ages and remains committed to monitoring the progress of the health sector in achieving the goals outlined in the 2030 Agenda. The MOH consistently promotes SDG activities that involve all MOH worker, as outlined below:

Table 6.2 SDG Activities 2024

Activity	Date
Training of Trainers (ToT) Workshop for SDG Health Sector Peninsular Level	21 May 2024
Training of Trainers (ToT) Workshop for SDG Health Sector Borneo Level	12 September 2024
SDG3 Indicator Mortality Data Improvement Workshop	25 July 2024



ToT Workshop for SDG Health Sector at PICC, Putrajaya



ToT Workshop for SDG Health Sector at RAIA Hotel, Sabah

Image 6.2 ToT Workshop for SDG Health Sector

MINISTRY OF HEALTH'S POLICY AND PLANNING COMMITTEE (JDPKK)

The JDPKK is the highest body in the MOH in making key policy decisions, planning and development in the MOH holistically and in line with national policies and vision. The main function of JDPKK is to review and consider matters related to policy proposals, strategic planning and direction of the MOH. A total of 13 policy papers were presented throughout the year 2024, as shown in **Table 6.3**.

Table 6.3 JDPKK Meetings 2024

Paper Work	Status	Programme/ Division
JDPKK No. 1/2024 (19		
Expansion of HPV Screening Test (Cervical Cancer Screening) Under the Sensitive Screening Programme B40	Approved with suggested improvements	Family Health Development Division
Development of Online Health Services (OHS) Guidelines	Need further discussion	Planning Division
JDPKK No. 2/2024 (1	8 March 2024)	
Malaysia Advanced Clinical Pharmacy Programme (MyACPP)	Approved with suggested improvements	Pharmacy Services Programme
Policy Determination Regarding the Sale of Cultured Meat and Cultured Meat Products in Malaysia	Approved	Food Safety and Quality Programme
JDPKK No. 3/2024 (2	27 June 2024)	
Implementation of the Strategic Plan and Action Plan for the National Thalassemia Control and Prevention Programme 2024-2030	To be refined	Family Health Development Division
Implementation of Strengthening HIV Treatment and Prevention Using TLD Medicines as the Main Regimen	Approved	Disease Control Division
Improvements in Food Service Outsourcing Implementation at Putrajaya Hospital & Ministry of Health's Food Service Outsourcing Policy	Approved	Medical Development Division
Results of Dealing with the Proposed Amendment to the Food Act 1983 [Act 281]	Approved	Food Safety and Quality Programme
JDPKK NO. 4/2024 (24	December 2024)	
The establishment of Seven (7) District Health Offices (PKD) in Sabah to the Centre of Responsibility	Approved with condition	Public Health Development Division
Reclassification of Hospital Types and Determination of the Number of Deputy Hospital Directors (Medicine)	Approved	Medical Development Division
Realignment of Fees and Placement of Higher Education Providers (PPT) Students for the Purpose of Charity Training at MOH Facilities	Approved	Allied Health Sciences Division
Improvement of Services & Structure of the MOH Biobank	Approved	Public Health Development Division

Paper Work	Status	Programme/ Division
Implementation of Pre-Exposure Prophylaxis (Prep) Services at the MOH Health Facilities for HIV Prevention in Malaysia	Approved	Disease Control Division

SUPPLY AND DEMAND STUDY FOR HEALTHCARE FACILITY, EQUIPMENT AND HUMAN RESOURCE CAPACITY IN MALAYSIA PHASE 1 2023-2024

The Supply and Demand Gap Study of Health Facilities, Equipment, and Human Resource Capacity for Health in Malaysia Phase 1 (2023-2024) has been successfully implemented according to the set timeline, starting from October 2023 till November 2024. This study was approved under Rolling Plan 3 (RP3), 12MP by using the services of consultants from the World Bank Group.

The study aims to identify and map existing health resources in the public and private sectors, analyse health resource needs based on population, disease burden and service utilization, and recommend standards for facilities, equipment and human resources. It also assessed the gap between supply and demand, projected resource requirements up to 2040 and developed an interactive visual mapping platform using Geographic Information Systems (GIS).

The findings of the study that has been conducted are as follows:

- i. Collection of Current Supply Data through the National Health Demand & Supply Survey (NHDS)
- ii. Development of Health Resource Standards
- iii. Visual Platform Development





Image 6.3 Supply and Demand Study for Healthcare Facility, Equipment and Human Resource Capacity in Malaysia Phase 1

NATIONAL HEALTH FINANCING (NHF) SECTION

This section was established back in 2009, to focus on planning, studying, designing, developing, implementing, and monitoring policies, strategies and activities related to the financing of the Malaysian health system.

GOVERNANCE, MONITORING & EVALUATION COMMITTEE (GMEC)

GMEC is responsible to oversee and assess the activities carried out by ProtectHealth Malaysia (PHM) and ProtectHealth Corporation Sdn. Bhd. (PHCorp). GMEC is tasked to ensure both these entities execute and implement health financing projects, programmes and initiatives in accordance with the MOH policies and healthcare social agenda. This committee is chaired by the TKPK (P&ST) with the representatives from MOH, academia and other government agencies.

In carrying out its mandate, GMEC actively reviews periodic reports and performance data from PHM and PHCorp, assesses their progress, identify areas for improvement and provides recommendations. NHF Section as the secretariat accomplished focused monitoring of ongoing key programmes and explored the introduction of a new initiatives. These programmes include:

- i. Skim Peduli Kesihatan untuk Kumpulan B40 (PeKa B40): Expanding healthcare access in detecting Non-Communicable Diseases in B40 group
- ii. Electronic Service Provider (ESP) SPIKPA: Enhancing digital service accessibility.
- iii. National COVID-19 Immunisation Programme (PICK): Safeguarding public health through nationwide immunisation of COVID-19
- iv. Skim Perubatan Madani (SPM): Increase healthcare access of B40 to acute services in private clinics
- v. Hospital Services Outsourcing Programme (HSOP): New programme in 2024 to optimize hospital operations via strategic outsourcing

SKIM PERLINDUNGAN INSURANS KESIHATAN PEKERJA ASING (SPIKPA)

SPIKPA is an initiative introduced and implemented since 1 January 2011, by the government to cover hospital admission costs for registered foreign workers receiving inpatient treatment at government hospitals. The scheme is offered by 23 insurance/takaful companies and two (2) Third Party Claims Administrator companies appointed by the insurance/takaful providers to manage the claims. Meanwhile, the SPIKPA system is managed by ProtectHealth Corporation Sdn. Bhd.

In 2024, NHF section took over the monitoring of the scheme from the Financing division and subsequently examined the available data. Trend analysis in terms of number of claims and the total amount of claims of SPIKPA from 2011 to 2023 was carried out. The highest number of SPIKPA claims was recorded in 2015, with 28,300 claims amounting RM30 million. However, in 2016, the total amount of claims increased to RM45 million with 26,700 claims, indicating a rise of the average cost per claim in 2016 compared to 2015, from RM1,000 to RM1,700. This is consistent with the implementation of full charges for treatment and healthcare services for foreign nationals in MOH facilities. The number of claims and the total value of claims decreased in 2021 and 2022 due to the COVID-19 pandemic, during which the number of foreign workers covered by SPIKPA also declined.

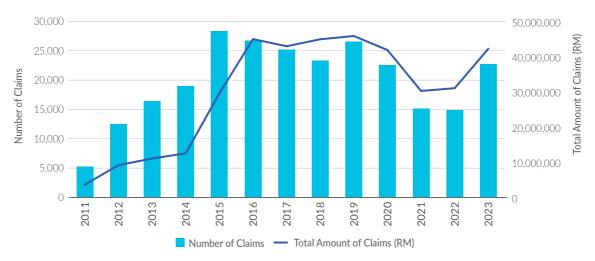


Figure 6.1 Number and Total Amount of Claims (RM) SPIKPA

JOINT LEARNING NETWORK (JLN)

The Planning Division through the NHF Section acts as the coordinator for the Country-Core Group (CCG) Joint Learning Network (JLN) Malaysia and this platform is chaired by the Director of the Planning Division. Among the JLN collaborations that Malaysia participated in during 2024 are the Health Emergency Preparedness Collaborative, Climate Smart Health Systems Collaborative, Primary Healthcare (PHC) Foundational Reforms Collaborative, Digital Health Collaborative, Primary Health Care Performance Management Learning Collaborative and Contracting Organizations for Health-Related Services Collaborative. In addition to this, NHF section also contributed and shared technical knowledge as below:

- i. PHC Foundational Reforms Collaborative Workshop in Nairobi, Kenya, from 23-25 April 2024
- ii. Contracting Organizations for Health-Related Services Workshop in New Delhi, India, from 1-3 October 2024

The NHF Section proactively participated in and presented a poster on JLN initiatives using knowledge products developed by the network during the 8th Asia-Pacific Public Health Conference held in Kuching from 9-11 July 2024.





Image 6.4 JLN International Activities in 2024

INTERNATIONAL COLLABORATION

The NHF Section continues to ensure good cooperation on international platforms, to gain experience and support policy makers to strengthen the country's healthcare financing system. The collaborative activities carried out in 2024 are:

Table 6.4 International Collaboration in 2024

International Collaboration	Date/Place	Areas of Collaboration
Presentation Session of the Report Sustainable Health Care Financing for SDG 3 in ASEAN 6 by the US-ASEAN Business Council (USABC)	2 May 2024 MOH, Putrajaya	Health Financing Strategy
Visit by the Delegation of the National Healthcare Security Administration (NHSA) of China	25-27 November 2024 MOH, Putrajaya	Health Financing and Service Delivery
Taiwan's National Health Insurance: Policy Development, Implementation, and Quality Assurance	2-13 September 2024 Taiwan International Healthcare Training Centre, Taiwan	Taiwan's National Health Insurance
The 21st NHIS UHC Global Academy (NUGA 2024)	23-27 September 2024 Seoul, Korea	UHC
Preparation of Country Cooperation Strategy (CCS 2024-2028) with WHO	July 2024	MOH & WHO Collaboration Plan







Imege 6.5 International Collaboration in 2024

MALAYSIA NATIONAL HEALTH ACCOUNTS (MNHA) SECTION

Section remains committed to reporting national health expenditure data to ensure health policies are developed based on validated evidence. Since 2006, MNHA has regularly published the National Health Expenditure Report, with the latest data covering 27 years, from 1997-2023.

A wide range of macro-level health expenditure data supports national policy development and assists researchers and other stakeholders in addressing current needs. To uphold data quality and transparency, the MNHA Technical Advisory Committee (TAC) comprising representatives from various divisions within the MOH is appointed to review data sources, methodologies, and findings. The validated data is then presented to the MNHA Steering Committee for approval before being published. This committee is co-chaired by the Secretary-General (KSU) and the Director-General of Health (DG), with members consisting of senior management from various public and private sector agencies.

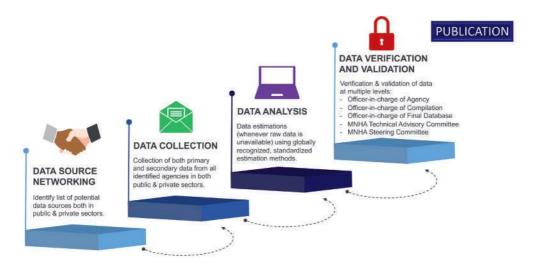


Figure 6.2 Illustration of the MNHA Methodology

MNHA HEALTH EXPENDITURE 2011-2023

The key macro-level data generated using the MNHA framework are Total Expenditure on Health (TEH) as a percentage of Gross Domestic Product (GDP), the burden of Out-of-Pocket (OOP) Health Expenditure, hospital health expenditure, and other related data. According to the latest time-series report, TEH for 2023 amounted to RM84,192 million (Figure 6.3), marking a 6.2% increase compared to TEH in 2022 (RM78,945 million). Meanwhile, TEH as a percentage of GDP was reported at 4.6%, with per capita health expenditure reaching RM2,521. The rise in national health expenditure is attributed to population growth, increasing treatment costs, advancements in medical technology, rising cases of chronic diseases, and an aging population. Additionally, inflation and rising prices have also impacted health expenditures.

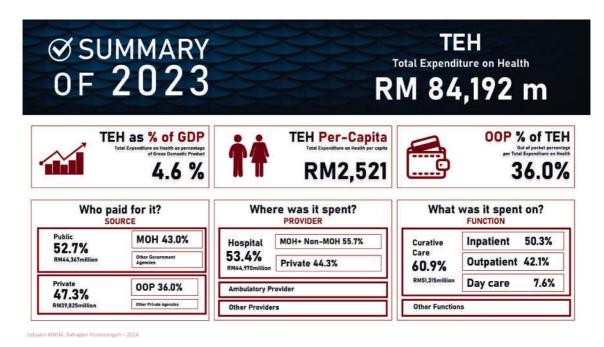


Figure 6.3 Summary of National Health Expenditure 2023

ESTIMATION OF NATIONAL PHARMACEUTICAL EXPENDITURE 2018-2023

In 2024, MNHA produced the Estimated National Pharmaceutical Expenditure for 2018-2023. The estimated pharmaceutical expenditure for 2023 was RM16,921 million, representing 20.1% of TEH **(Figure 6.4)**. MOH spent 12.4% of its total expenditure to pharmaceutical spending.

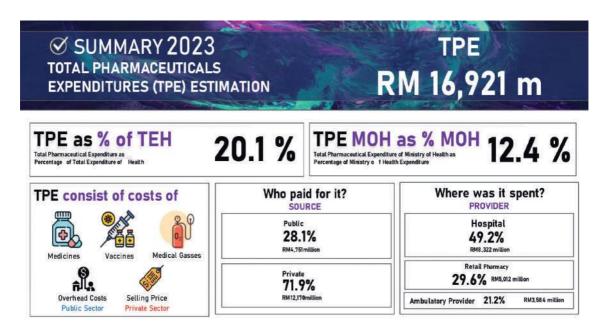


Figure 6.4 Summary of Estimated National Pharmaceutical Expenditure 2023



Image 6.6 MNHA Steering Committee Meeting 2024

COLLABORATIVE ACTIVITIES

In 2024, MNHA welcomed an official visit from Brunei Darussalam's NHA team, which is in the process of developing and producing its national health expenditure report. The objective of this visit is for experience sharing and technical knowledge exchange in generating national health expenditure data using the NHA framework.



Image 6.7 NHA Brunei Delegation with the MNHA Team

Additionally, the WHO has long collaborated with partners such as the Organisation for Economic Co-operation and Development (OECD) in supporting the global production of Health Accounts (HA). Malaysia hosted the 19th WHO-OECD Asia-Pacific Health Accounts Experts Annual Meeting, which brought together representatives from WHO Member States in the Western Pacific (WPRO) and Southeast Asia (SEARO) regions. The event was held at the Pullman Kuala Lumpur City Centre Hotel & Residences on 27-29 August 2024.

This annual meeting serves as a platform for National Health Accounts (NHA) experts to discuss technical concepts, methodology improvements and evolving health expenditure data collection mechanisms. For the first time, Malaysia was selected as the host country, recognising its active involvement in supporting neighbouring countries such as Brunei and Indonesia in their NHA development efforts.



Image 6.8 19th WHO-OECD Asia-Pacific Health Accounts Experts Annual Meeting at Pullman KLCC Hotel & Residences

HEALTH FACILITY PLANNING SECTION (PFK)

The PFK Section plays an important role in ensuring that the planning and development of health facilities are in line with the policies of the MOH which includes identifying new facilities that need to be built or upgraded to improve access to healthcare services nationwide.

PROJECTS APPROVED IN 2024

A total of 17 projects were approved for implementation in 2024. These projects include 15 replacement and new health clinics (KK). Additionally, there are two (2) hospital-upgrading projects.

PROJECTS HANDED OVER IN 2024

In 2024, 17 projects were successfully handed over for operation. These projects include twelve 12 hospital upgrading projects and five (5) new or replacement KK projects. The distribution of the projects handed over in 2024 is as shown below.

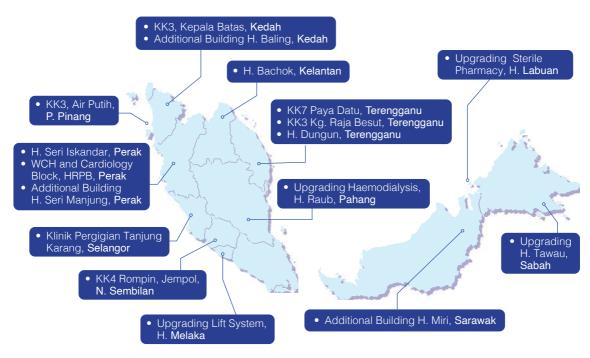


Figure 6.5 Projects Handed Over in 2024

HEALTH FACILITY PLANNING SEMINAR 2024

The Health Facility Planning Seminar 2024 was held from 10-13 September 2024, at Shah Alam, Selangor. The objective of the seminar was to provide basic guidance and exposure regarding the process of planning and developing health facilities for the MOH. The seminar received encouraging participation with 112 participants from across Malaysia, including representatives from the State Health Departments (JKN), Public Works Department (JKR) and programmes at the MOH Headquarters (IPKKM).



Image 6.9 The Health Facility Planning Seminar 2024

POST OCCUPANCY EVALUATION (POE)

POE is conducted to assess the design and functionality of spaces in a facility after the project has been handed over upon completion. The findings from this evaluation are important as a guide for improving the planning of future health facilities. In 2024, POE was carried out on two (2) types of facilities which is hospitals and KK. The facilities evaluated include KK2 Batu Muda in Kuala Lumpur, KK3 Bandar Tun Hussein Onn in Selangor as well as KK7 Karangan, KK7 Peria and Hospital Kuala Krai in Kelantan.

EQUIPMENT GUIDELINES

Two (2) equipment guideline documents were successfully finalised with the cooperation of consultants and programme representatives such as the Medical Development Division (BPP) and the Family Health Development Division (FHDD). These documents are:

- i. Equipment Guidelines for A 300-Bed Hospital
- ii. Equipment Guidelines for Type 4, 5 and 6 Health Clinics

eHEALTH PLANNING SECTION

ONLINE HEALTHCARE SERVICES (OHS) ACTIVITIES

OHS is healthcare services provided online by OHS Platform Providers, which consist of business entities, technology companies, and private hospitals or clinics. This new service model needs to be regulated to ensure that the services provided are safe and of high quality, The MOH has implemented the OHS Regulatory Lab (RegLab), involving collaboration with various stakeholders, from 17 February 2022 until its completion in December 2024.

The implementation of the OHS RegLab has reached an agreement to regulate OHS Platform Providers through interim guidelines pending the new Bill. The finalised OHS Guidelines, based on version 2.0, have been approved as the main reference to ensure safe and quality healthcare services.





Image 6.10 OHS RegLab Activities

PROJECT HEALTH INFORMATION EXCHANGE - VIRTUAL CLINIC (HIE-VC) 2024

Project HIE-VC aims to enhance health information management and facilitate access to medical records digitally through the development of the RekodPesakit, RekodSaya and RekodKesihatan portals.

The Virtual Clinic service is an initiative introduced through the RekodPesakit and RekodSaya platforms, aimed at providing virtual clinical consultations and treatment plans for selected healthcare services identified by the MOH. It facilitates communication between medical practitioners and patients while improving access to healthcare services. The service also includes features such as online appointment, group video consultations and an online payment module for user convenience.

The promotion of the RekodSaya app was carried out in collaboration with the National Blood Centre (PDN) during blood donation activities at healthcare facilities in Negeri Sembilan, Melaka, Perak and Selangor. This app allows users to monitor their blood donation history, assess their health status and access medical records, thereby raising awareness of better health care practices.

Overall, the HIE and VC projects have successfully enhanced health data integration, reduced manual processes and strengthened the delivery of healthcare services through a virtual platform accessible from various locations.





Image 6.11 Activities for the HIE-VC Project

HEALTH INFORMATICS CENTRE (HIC) SECTION

INTEGRATED HEALTH DATA COLLECTION

Since 2017, the Malaysian Health Data Warehouse (MyHDW) became the centralised health data collection system in MOH. This transformative digitalisation effort enables comprehensive data collection, management and analysis, facilitating evidence-based decision-making in resource allocation, public health interventions, and healthcare system improvements. MyHDW was developed to integrate several data sources that collect patient visit records across all government healthcare facilities, university hospitals and private hospitals.

As of 2024, MyHDW has significantly expanded Malaysia's health data integration by collecting records for 24 million patients, consolidating information from public and private healthcare

facilities to enhance epidemiological surveillance, resource allocation, and public health strategies. The growing demand for medical services, driven by population growth and the increasing prevalence of chronic diseases, is reflected in the 112 million healthcare facility visits documented since 2017. While most visits occur at primary care facilities, hospitals handle emergency and specialised cases, emphasising the need for targeted healthcare resource distribution.

Additionally, MyHDW has recorded over 27 million patient encounters, including physiotherapy, dietetics and radiology, highlighting the vital role of allied health services. Despite its vast database, challenges such as data completeness, duplication, and system interoperability persist, requiring ongoing improvements in data validation, integration, and analytics to support evidence-based decision-making to enhance Malaysia's healthcare system.

Cumulative Patient Health Records

24,997,339

*Based on cumulative Virtual Personal Identifier (VPI) Number of Visits Since 2016

112,183,821

*Visits = Recorded client visitation to obtain healthcare services Cumulative Number of Encounters

27,310,050

*Clinical Support encounters only

Figure 6.6 MyHDW Data Analysis

MALAYSIA AS EARLY ADOPTER OF WHO INTERNATIONAL CLASSIFICATION OF DISEASES (ICD)-11

The ICD, developed by the WHO, is a global system for coding diseases and health conditions. The shift from ICD-10 to ICD-11 enhances data precision, interoperability and clinical applicability, ultimately improving healthcare reporting and decision-making globally.

The transition from ICD-10 to ICD-11 marks a significant advancement in disease codification and reporting, aligning Malaysia's health data system with international standards. This process began with training and preparatory workshops conducted by HIC which began in 2019, followed by virtual engagements in 2020. By 2022, the transition commenced within key national health data systems, including Sistem Maklumat Rawatan Pelanggan (SMRP)-MyHDW.

Throughout 2023, pilot implementations and system adaptations were conducted to ensure a seamless transition. In 2024, full ICD-11 functionality will be integrated into SMRP-MyHDW and Medical Programme Information System (MPIS), paving the way for Malaysia's first ICD-11-based health data reporting in 2025. This transition enhances data accuracy, interoperability, and healthcare decision-making, reinforcing Malaysia's commitment to global health data modernisation.



Figure 6.7 ICD-11 Implementation Milestones in Malaysia

MASTER HEALTH FACILITY LIST MALAYSIA (MHFL)

The MHFL is an authoritative directory that provides a unique identifier for public and private healthcare facilities in Malaysia. It includes essential details such as the address and geolocation of facilities such as hospitals, clinics, dental clinics, laboratories and health community centres. MHFL strengthens Malaysia's health information infrastructure by standardising facility data across digital health systems. MHFL was published in 2024 to enable the mapping and spatial analysis of healthcare resources, thus enhancing the planning, monitoring and decision-making in the health sector. Guided by the vision of creating a unified healthcare information system, the MHFL lays the groundwork for expanding coverage to all regulated facilities, fostering collaboration and improving service delivery nationwide.

Functions

- Standardise facility data with a unique identifier.
- Maintain a comprehensive list of health facilities.
- Ensure data is digitally available and easily accessible.

Benefits

- Strengthens Malaysia's health information infrastructure by standardising facility data across digital health systems.
- Enables the mapping and spatial analysis of healthcare resources.
- Enhances the planning, monitoring and decision-making in the health sector.





Figure 6.8 Function and Benefits Master Health Facility List Malaysia

ENGINEERING SERVICES DIVISION (ESD)

ESD is responsible for planning, implementing and monitoring engineering services at MOH health facilities, including maintenance services and project implementation. ESD also plays a role in implementing public health engineering activities. ESD comprises of:

- i. Planning Branch
- ii. Service Branch
- iii. Regulatory Branch
- iv. Biomedical Sector

PLANNING BRANCH

HEALTHCARE ENGINEERING POLICY AND PLANNING

ESD, through the Planning Branch, is responsible for coordinating policies and directions related to healthcare engineering to ensure that facility management services, project implementation, and public health engineering can be effectively carried out to support the continuity of healthcare services in MOH. ESD is also involved in planning the supply of ambulance vehicles

and coordinating the implementation of the ministry's direction involving technical aspects, including facilitating the installation of telecommunication infrastructure and the use of technology for parking facilities. In addition, ESD, through this branch, also coordinates technical support services in the implementation of special projects through public private partnerships (PPP) and private financing initiatives (PFI), as well as assisting in coordinating technical aspects related to compliance with the Private Healthcare Facilities and Services Act 1998 [Act 586].

MANAGEMENT OF IMMOVABLE ASSET

ESD responsible to coordinating the implementation *Dasar Pengurusan Aset Kerajaan* involving the MOH immovable asset in accordance with the *Pekeliling Am Bil. 3 Tahun 2021: Tatacara Pengurusan Aset Tak Alih Kerajaan*. Below are the activities being held in 2024:

Table 6.5 Almmovable Asset Management Activities 2024

Activities	Number of Activities
Pendaftaran Daftar Premis Aset (DPA)	7 DPA
Condition Assessment Reporting	331 Reports
Disposal Reporting	157 Reports
Loss/Write-Off Reporting	27 Reports

MINISTRY OF HEALTH MALAYSIA ENGINEERING CONVENTION 2024 (MOHEC 2024)

ESD has organised the MOHEC 2024 at Grand Lexis, Port Dickson on 9-11 June 2024, which was officiated by the TKPK (P&ST). The main objective of organizing MOHEC 2024 is to provide an exclusive platform for the sharing of strategic vision and leadership mandates by the top management of ESD as well as a constructive discussion space between participants based on their respective experiences and expertise. This convention has also successfully brought together 200 participants involving engineers and assistant engineers from all over Malaysia.





Image 6.12 MOHEC 2024 Opening Ceremony

SERVICE BRANCH

MOH PROJECT IMPLEMENTATION

ESD has implemented 79 projects under the Development Allocation, Sinking Fund and PFI Funds. **Figure 6.9** shows the breakdown of projects managed by ESD according to the implementation category.

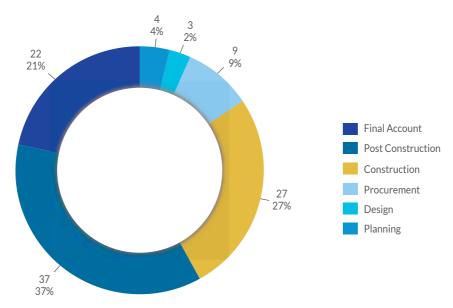


Figure 6.9 Percentage of Projects 2024 According to Implementation Category

A total of 18 projects worth RM52.1 million were fully completed and handed over to the users in 2024 and have begun operations.



T&C for Replacement Works of Cargo Lift at Hospital Selayang



T&C for Replacement Work of Centralized Air-Cooling System at Hospital Teluk Intan



Completion Work Conditioning System Installation Project at Hospital Kuala Lumpur (HKL)

Image 6.13 Handover and Testing & Commissioning (T&C) Session for ESD Projects

ESD is involved in providing technical advice and engineering expertise for upgrading projects at health facilities with other divisions at the IPKKM and other agencies.



Technical Visit at ILMOH Kuching to Observe the Problems of the Air Conditioning System



Testing of Distribution Board (DB) for Replacement Work for Lift at Hospital Teluk Intan and Hospital Selayang

Image 6.14 Technical Advisory Services

HOSPITAL SUPPORT SERVICES (HSS)

HSS Programme is a privatisation contract agreement that has been signed by five (5) concession companies and seven (7) non-concession companies. The service being provided consists of six (6) scopes which are:

- Facility Management Services (FMS)
- ii. Facility Engineering Management Services (FEMS)
- iii. Biomedical Engineering Management Services (BEMS)
- iv. Healthcare Waste Management Services (HWMS)
- v. Cleansing Services (CLS)
- vi. Linen and Laundry Services (LLS)

The number of hospitals and institutions involved with HSS concession contracts is 148 with the contract value of RM1.92 billion per year while for non-concession contracts, there are eleven (11) hospitals and institutions with contract value of RM584 million.



Figure 6.10 Number of Hospitals and Institutions by Concession Companies

In order to ensure the company's compliance with the requirements and obligations of the HSS contract, ESD also conducts Technical Audit inspections. In addition, technical visits related to forensic matters were also carried out throughout 2024 at hospitals/institutions in order to provide technical advisory services.





Image 6.15 Audit Technical Inspections

CLINIC SUPPORT SERVICE (CSS)

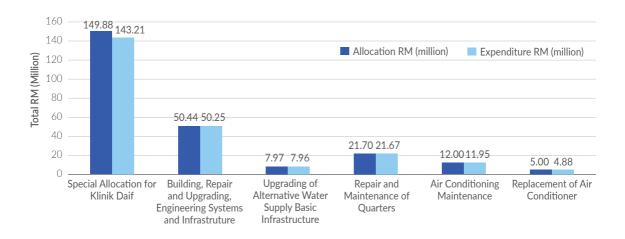
CSS programme is a contract involving 14 companies in 201 clinic facilities with an annual ceiling cost of RM138 million. The services provided consist of three (3) scopes which are:

- i. Facility Engineering Maintenance Services (FEMS)
- ii. Biomedical Engineering Maintenance Services (BEMS)
- iii. Cleaning Services (CLS)

Technical Audit Inspections were also carried out at 18 clinics to ensure CSS implementation complies with contract requirements and maintenance is carried out in accordance with good engineering practice.

CLINIC FACILITY ENGINEERING

In 2024, an amount of RM246 million has been allocated for 671 projects to ensure safety and functionality of the clinic is optimal for user comfort. Among the activities that have been carried out are planning, coordinating and monitoring, which involve repairing and upgrading buildings, replacing and maintaining engineering systems and infrastructure at MOH clinic facilities.



Clinic Facility Engineering Works

Figure 6.11 Allocations and Expenditure for the MOH Clinic Facility Engineering Works 2024

SUSTAINABILITY PROGRAMME (SP)

SP has been implemented since 2015 to support the government's ambition to reduce carbon emissions by 45% by 2030. The implementation of SP also ensures that MOH healthcare facilities achieve carbon neutrality as early as 2045, aligning with the government's aspiration to become a net-zero country by 2050.

As of 2024, MOH has achieved numerous international and national awards through the implementation of SP. MOH also received a special award (Energy Management) from the Ministry of Natural Resources, Environment and Climate Change (NRES), recognising its commitment to comprehensive energy management in healthcare facilities.



Figure 6.12 SP Achievements 2024





Image 6.16 ASEAN Energy Management Scheme (AEMAS) - Energy Management Gold Standard (EMGS) Award Ceremony

REGULATORY BRANCH

WATER QUALITY BILL PROGRAMME (KMAM)

In 2024, 97.63% of the more than 1.6 million tested treated water quality parameters across Malaysia complied with the National Drinking Water Quality Standards. Among the activities that have been carried out for 2024, there are three (3) KMAM Programmes in Johor, Kelantan and Pahang, two (2) technical visits to Port Klang and Kuala Lumpur International Airport (KLIA) water carriers as well as the 2024 National Level Public Water Supply System Health Risk Assessment (Hygiene Study) activity were carried out at the Kogopon Water Treatment Plant, Papar, Sabah.







Image 6.17 KMAM Technical Visits and Health Risk Assessment Activities

RURAL ENVIRONMENTAL SANITATION PROGRAMME (BAKAS)

In 2024, the BAKAS programme continued with the implementation of water supply and sanitation subsidy projects for rural residents. A total of 592 water supply systems were built where clean water is supplied to 2,579 households which involves allocation of RM7.8 million. Meanwhile, as for sanitation facilities, a total of 977 households were provided with sanitary latrines, 813 households with sullage disposal management systems and 1,046 households with solid waste management systems with a total cost of RM6.5 million.









Image 6.18 BAKAS Activities Include Implementation of Tube Well Water Supply System, Sanitary Toilet and Solid Waste Management

WATER POLLUTION UNIT (UPA)

The activities implemented are the monitoring water quality for swimming pool water, the monitoring water quality for natural recreational water (fresh water and marine water), the monitoring of sanitation in the tourist centres and the cleanliness programme for public toilets in the MOH facilities to reduce the risk of disease transmission to the public.







Image 6.19 Monitoring of Swimming Pools and Natural Recreational Water

RESEARCH ON MICROPLASTICS IN SELECTED RIVER BASINS

ESD collaborated with the Water Research Forensic Laboratory, National Water Research Institute of Malaysia (NAHRIM), to identify the abundance of microplastics in the Sungai Muda Basin and Sungai Perak Basin, as well as in water treatment plants that utilise water sources from these river basins.





Image 6.20 Microplastic Sampling Activities at Sungai Muda and Sungai Perak Basin

NATIONAL ENVIRONMENTAL HEALTH ACTION PLAN (NEHAP)

In 2024, the Secretariat of NEHAP Malaysia has organised the 10th NEHAP Conference with the theme *Environmental Health in The New Era: Journey to A Sustainable Future*. The conference gathered a total of 200 participants who were involved in the development of the Malaysia NEHAP and State Environmental Health Action Plan (SEHAP) action plans.





Image 6.21 10th NEHAP Conference 2024

AIR QUALITY UNIT (UKU)

The main activities and programmes carried out by UKU in 2024 are as shown in **Figure 6.13** and **Image 6.22**.



Figure 6.13 Implementation of IAQ Programmes 2024





Image 6.22 IAQ Programme 2024

ENVIRONMENTAL HEALTH PROTECTION UNIT (PEKA)

PEKA's activities in 2024 are focused on strengthening the Environmental Health Risk Inventory (EHRI) System and providing technical comments for the Environmental Impact Assessment (EIA) Report.

Conduct a series of briefings to improve skills and knowledge related to environmental health risk management for officers and staff of the JKN and PKD in Perlis, Selangor, Sarawak, and FT Labuan.

Carry out further studies related to Environmental Health Risk Assessment (EHRA) on water-related contamination exposure in the Semenyih River Basin.

Conducting audits to verify EHRI data in Perlis, Sarawak, FT Labuan and Melaka.

Figure 6.14 Achievements of PEKA 2024

Additionally, there were 90 EIA reports that have been received by PEKA for technical reviews to fulfil the requirements of the Environmental Quality (Prescribed Activities) EIA Order 2015 and submitted to the Department of Environment (DOE).

WATER, SANITATION AND HYGIENE (WASH) IN MOH HEALTHCARE FACILITIES

ESD has been submitted a report on WASH services level in MOH healthcare facilities for every two (2) years to WHO/ United Nations Children's Fund (UNICEF) Joint Monitoring Programme for Water Supply, Sanitation and Hygiene (JMP) concerning the Country File on WASH in Healthcare Facilities for Malaysia. Information about WASH services level in MOH healthcare facilities can be found in the document WASH in Health Care Facilities 2023 Data Update: Special focus on primary health care (https://washdata.org/reports/jmp-2024-wash-hcf) published on 3 October 2024.

DEVELOPMENT PROJECTS UNDER ROLLING PLAN 4 (RP4), TWELFTH MALAYSIA PLAN (TWELFTH PLAN) 2024

A total of 25 new development projects have been approved under RP4 Twelfth Plan to be implemented in 2024, involving the upgrading toilet facilities in existing KK to comply with the WHO/UNICEF JMP requirements under the Building, Engineering and Infrastructure Repair and Upgrading Project at KK (scope of work: Building - development and upgrading of buildings, including structure, roof and ceiling, walls, flooring, sewerage systems and water supply systems). Several monitoring visits were also conducted to facilities involved to ensure compliance with the established specifications.







KK Mempaga, Pahang



KK Dengkil, Selangor

Image 6.23 Visit to the RP4 MP12 Projects

THE UN-WATER GLOBAL ANALYSIS AND ASSESSMENT OF SANITATION AND DRINKING-WATER (GLAAS) 2024 COUNTRY SURVEY

An engagement session was held with WHO Malaysia and several relevant ministries and agencies regarding the UN-WATER Global Analysis and Assessment of Sanitation and Drinking-Water (GLAAS) 2024 Country Survey, which was held on 12-13 September 2024. The WHO is the co-custodian of GLAAS, along with the OECD and UN Environment, is responsible for monitoring the implementation of SDG 6.



Image 6.24 Engagement Session GLAAS 2024 Country Survey

BIOMEDICAL SECTOR

The biomedical engineering functions as follows:

- Supervise the BEMS at MOH healthcare facilities under the HSS Concession Agreement, Medical Equipment Enhancement Tenure (MEET) Programme and other BEMS contracts
- ii. Supply medical equipment in MOH facilities
- iii. Provide advisory services such as forensic investigation, technical advice and development of standards and guidelines

Table 6.6 **Biomedical Sector Activities 2024**

Cubinat		Supervision		Supervision Supply of Medical Equipment		
Subject	HSS (Concession)	HSS (Non-Concession)	MEET	Supply & Installation		
No. of Facility	148	11	2,988	18		
No. of Equipment	218,083	14,892	141,264	19		

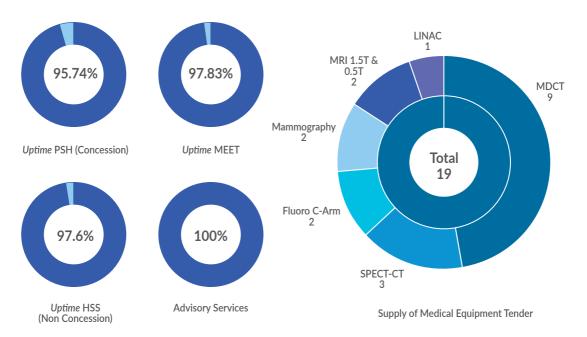


Figure 6.15 **Biomedical Sector Achievement 2024**



Mammography at Hospital Melaka



Multidetector Computed Tomography (MDCT) at Hospital Beaufort



Magnetic Resonance Imaging (MRI) at NIH

Biomedical Equipment Supply and Installation Projects 2024 Image 6.25

NATIONAL ADVISORY COUNCIL FOR BIOMEDICAL ENGINEERING (NACBE) INAUGURATION CEREMONY AND BIOMEDICAL TECHNICAL PERSONNEL (BTP) COMPETENCE CERTIFICATE AWARD CEREMONY

The launching ceremony of the NACBE was held on 15 July 2024 at Everly Putrajaya and officiated by the TKPK (P&ST). NACBE is the highest national-level committee to discuss and approve strategic issues of biomedical engineering services, the development of biomedical disciplines, and collaboration between agencies and external parties.

The launch of NACBE was held in conjunction with the BTP Competency Certificate Presentation Ceremony in recognition of the efforts and commitment of the BEMS maintenance companies throughout the country.





Image 6.26 Inauguration Ceremony of NACBE 2024 and BTP Certification Award

MEDICAL RADIATION SURVEILLANCE DIVISION (MRSD)

MRSD is the secretariat to the DG, responsible for controlling the use of ionising radiation (IR) in medicine through the enforcement of the Atomic Energy Licensing Act [Act 304]. The main role of MRSD involves various regulatory activities, including licensing, enforcement, monitoring and the development of legal and non-legal documents. MRSD provides technical advice on radiation safety and protection, including the field of medical physics. MRSD collaborates with various agencies at the national and international levels to ensure that the radiation safety programme meets international standards. MRSD comprises four (4) branches:

- i. Licensing and Registration Control Branch
 - a. Licensing Section
 - b. Registration Section
- ii. Enforcement and Prosecution Branch
 - a. Enforcement Section
 - b. Prosecution Section
- iii. Medical Physics Services Branch
 - a. Code and Standard Section
 - b. Technical Service Section
- iv. Inter-Agency Cooperation and Training Branch
 - a. Inter-Agency Cooperation Section
 - b. Training Development Section

ACTIVITIES AND ACHIEVEMENTS

APPROVAL OF LICENSING AND REGISTRATION APPLICATIONS BY THE DIRECTOR GENERAL OF HEALTH (DG)

The DG has approved a total of 2,168 new and renewal license applications for private medical facilities for medical purposes in 2024. **Table 6.7** shows a summary of the number of new and renewal licenses approved for private medical facilities in 2024.

Table 6.7 Number of License Approvals

Type of License	Number of License	
New License	549	
Renewal License	1,619	
Total	2,168	

There are 6,819 government and private medical facilities, consisting of 1,107 government medical facilities and 5,712 private medical facilities, as detailed in **Table 6.8**.

Table 6.8 Number of Registered (Government) or Licensed (Private)
Medical Institutions under the Act 304

Turn of Promises	Healthcare Facilities		Total
Type of Premises	Government	Private	Total
Dental Clinic	567	3,220	3,787
General Practitioner Clinic		1,837	1,837
Hospital (Radiology)	158	208	366
Health Clinic	296		296
Veterinary Clinic	6	238	244
Non X-Ray Radiology Specialist Clinic		70	70
Radiology Clinic		46	46
Military Healthcare Facilities (Hospital/Medical Centre/ Dental Clinic)	59		59
Nuclear Medicine Centre	7	30	37
Radiotherapy Centre	7	37	44
Blood Irradiator Centre	4	5	9
Mobile X-Ray Services Clinic	3	9	12
Medical Physics Consultancy Company (Class H)		12	12
Total	1,107	5,712	6,819

Meanwhile, a total of 12,732 registered or licensed irradiation apparatus in government and private medical facilities, as stated in **Table 6.9**.

Table 6.9 The Total Number of Irradiation Apparatus in Government and Private Medical Facilities

Time of Invadiction Augustus	Medical Facilities		Total
Type of Irradiating Apparatus	Government	Private	Total
General/Mobile X-Ray/Veterinary	1,402	2,833	4,235
Dental (Intra Oral/OPG/CBCT)	845	5,662	6,507
Fluoroscopy (Statik/Mobile)	297	482	779
Angiography	39	158	197
CT Scanner	103	208	311
Mammography	67	207	274
Lithotripter	15	24	39
Bone Densitometer	22	119	141
Linear Accelerator (LINAC)/Robotic LINAC	18	60	78
LINAC-kV Imaging	17	50	67
Intraoperative Radiotherapy (IORT)		9	9
Gamma Knife-CBCT		4	4
Simulator/CT Simulator	9	23	32
Tomotheraphy	2	7	9
PET-CT/SPECT-CT	14	33	47
Medical Cyclotron	1	2	3
Total	2,851	9,881	12,732

In addition to irradiation apparatus, a total of 1,563 radioactive material sources, consisting of 1,345 sealed sources and 218 unsealed sources, are registered or licensed in government and private medical facilities as shown in **Table 6.10**.

Table 6.10 The Number of Registered or Licensed Radioactive Sources

Type of Source	Service	No. of Sources		Total
Type of Source		Government	Private	iotai
Octobril Octobri	Radioteraphy	6	809	815
	Nuclear Medicine	256	257	513
Sealed Sources	Blood irradiator	11	5	16
	Class H		1	1
Harris de Origina	Nuclear Medicine	57	159	216
Unsealed Sources	Class H		2	2
Total		330	1,233	1,563

Meanwhile, the total fee collection for the year 2024 is RM1,546,625.10 as shown in the **Table 6.11**.

Table 6.11 Total Fee Collection for 2024

	Total (RM)
License Fee	1,495,830.10
Process Fee	50,795.00
Total	1,546,625.10

MONITORING AND ENFORCEMENT ACTIVITIES

Throughout 2024, a total of 1,224 license renewal notices were issued by Science Officers (Physics) at the JKN. Inspection visits were conducted to confirm compliance with the regulatory requirements under Act 304 based on the conditions set in the licenses. The verification of the visits involved compliance with aspects related to equipment, facilities, personnel and procedures. Investigation visits were also carried out to premises based on complaints received and premises suspected of violating the established requirements.

The total of 881 medical facilities were inspected, covering both government and private medical facilities. The results of the inspections showed that 92.85% of the medical facilities complied with regulatory requirements, while 7.15% of the facilities did not comply during the inspection visits, as stated in **Table 6.12**. Follow-up actions have been taken to ensure all medical facilities comply with the regulatory requirements set under Act 304.

Table 6.12 Inspection Visit Activities 2024

Catavawi	No. of	Status of Compliances	
Category	inspection	Comply	Not Comply
Compliance of government and private medical facilities	881	818	63
% of Compliance		92.85	7.15





Image 6.27 Inspection Visit to Government and Private Medical Institutions

Throughout 2024, MOH conducted compliance audits on 191 government and private medical facilities. **Table 6.13** shows the results of the non-compliance study against the imaging/radiography audit criteria that were conducted.

Table 6.13 Radiographic Quality Audit Report Results

Audit Status	Total of Facilities	%
Satisfactory	157	82.20
Unsatisfactory	34	17.80

Non-compliance in the radiographic quality audit is due to the failure to use a primary marker, improper positioning techniques and poor collimation of images. Premises that fail to comply with radiographic quality audits will be monitored until they meet the required standards.

COMPLAINT MANAGEMENT AND NON-COMPLIANCE REPORTING

The MOH received a total of seven (7) notifications of radiation workers who were exposed to doses exceeding the allowable annual dose limit, as well as two (2) cases of accidental exposure involving the public. Full investigation reports were submitted by the respective premises, along with the corrective actions taken. Continuous monitoring is being carried out on the affected premises to ensure such incidents do not recur.

Throughout the year, MOH received 20 complaints related to violations under Act 304 committed by private medical facilities. Most of the non-compliance issues involved irradiation apparatus being operated by unregistered personnel and premises purchasing and using irradiation apparatus without a valid license under Act 304.

Based on the recorded violations of Act 304, a total of 14 cases were prosecuted and fined by the court. The total amount of fines is RM175.000.00.

TECHNICAL ADVISORY SERVICES TO GOVERNMENT MEDICAL FACILITIES

The main technical advisory services related to IR for government medical facilities as shown in **Table 6.14**.

Table 6.14 Technical Advisory Services Related to IR

Type of Activity	Total
Preparation and evaluation of irradiation apparatus specifications & associated facilities	20
Site Visits, Advisory Services and Testing and Commissioning	
(T&C):i. Review of Technical Specification Adherence (TSA)/site visit/preparation	128
of pre-bid documents/kick-off/T&C ii. Radiation safety shielding thickness verification	17
Review of plans, radiation protection and technical services for new/existing projects for government clinics/hospitals	30
Implementation of the Quality Assurance Programme (QAP) in Radiology, Radiotherapy, Nuclear Medicine and Dentistry services: • Mesyuarat Jawatankuasa Induk dan Jawatankuasa Kerja Pelaksanaan QAP, QAP Implementation Visit and QAP Programme Engagement Session	23

DEVELOPMENT ACTIVITIES OF GUIDELINES/MANUAL/TECHNICAL PAPERS

The preparation of documents is an activity for the development of codes and standards to enhance the regulatory system under Act 304 for medical purposes. The number of documents related to medical radiation currently being developed in 2024 is as shown in **Table 6.15**.

Table 6.15 List of Documents Being Developed

Title
Guidelines of Internal Dosimetry Procedure in Nuclear Medicine 202X
Guidelines on Ultrasound Usage in Medical Practice - Pindaan 202X
Handbook of Internal Dosimetry in Nuclear Medicine 202X
Manual Pelaksanaan Program Jaminan Kualiti (QAP) dalam Perkhidmatan Radioterapi - Pindaan 202X
Guidance Document on Radiological Emergency Preparedness for Medical Physicist (Pindaan 2024)
Standard Operating Procedure (SOP) for Unintended and Accidental Radiation Exposures in Medical Practice under Act 304 202X
Guidelines for Radioactive Waste Management in Healthcare Facility under the Act 304 202X
Guidelines on Magnetic Resonance Imaging (MRI) Safety for Medical Practice 202X

MEDICAL RADIATION EXPOSURE STUDY

MRSD is conducting the Medical Radiation Exposure Study for the Development of Malaysian Diagnostic Reference Levels (DRL) in Medical & Dental Imaging Services and Nuclear Medicine. The findings of this study are shown in **Table 6.16**.

Table 6.16 Medical Radiation Exposure Study Findings 2024

Title	Documents
Medical Radiation Exposure Study for the Development of Malaysian Diagnostic Reference Levels (DRL) in Medical & Dental Imaging Services and Nuclear Medicine	 i. Draft Report on the Medical Radiation Exposure Study Data for the Development of Malaysian Diagnostic Reference Levels (DRL) ii. Draft Malaysian Diagnostic Reference Level (DRL) for Radiology and Dental 2024 iii. Draft Malaysian Diagnostic Reference Levels (DRL) for Nuclear Medicine 2024

TRAINING AND HUMAN CAPITAL DEVELOPMENT

The development of training and human capital is a critical requirement for an organisation in nurturing quality, productive and highly skilled worker. A summary of the training activities and engagement sessions conducted is shown in **Table 6.17**.

Table 6.17 Training and Human Capital Development Activities 2024

Activity	Total
Number of approvals for the organisation of Continuing Medical Education (CME) under Act 304 to organising agencies	434
Number of information disseminations through CME sessions under Act 304	241
Total hours of information dissemination by MRSD officers through CME programmes	264
Number of trained MOH worker: i. Management and Professional Group ii. Implementing Group	769 106
Number of organised training programmes/generic & functional courses for MRSD officer	375
Number of Training Centre accredited under Act 304: i. Nuclear Medicine ii. General Medical Practitioners iii. Dental Orthopantomagram (OPG) and CBCT iv. Radiation Protection Officers	2 3 2 1
Continuing Professional Education (CPE) Programmes Technology/products by local and international suppliers	9
Number of certifications as Trained Physics Science Officers in the MOH in the field of quality control testing for general radiography and intra-oral machines at the IPKKM, JKN and hospitals (radiology)	80

TECHNICAL COLLABORATION WITH DOMESTIC AND INTERNATIONAL AGENCIES

MRSD always ensures that the level of regulation carried out aligns with current requirements, particularly the recommendations from international agencies. Among the activities/programmes carried out for the year 2024 are as shown in **Table 6.18**.

Table 6.18 Agency Collaboration Activities 2024

Activity	Items	
Participation in board meetings and coordination meetings for activities under Act 304 for the current year	 Follow-up Meeting to Discuss the Working Paper on the Determination of the Licensing Authority for the Sale of Radioactive Materials by the National Cancer Institute (IKN) 113th, 114th and 115th Board Meetings Coordination and Implementation Meetings for Activities under the Atomic Energy Licensing Act [Act 304] 	
Preparation of feedback on summary notes/speech inputs/collaboration inputs/ collaboration notes for bilateral relations between MRSD and domestic and international agencies	• 11 responses to summary note (<i>Ikhtisar</i>) and speech note requests related to bilateral cooperation and health-related issues between Malaysia and foreign countries have been prepared. The countries involved include the Federal Republic of Germany, the United Kingdom, the Czech Republic, Hungary, the Republic of Rwanda, Bahrain, the Republic of Cuba, the Republic of Sudan, the Republic of Ethiopia, Belgium and France.	
Implementation of activities under the Nuclear Security Programme based on the planning for the current year	 Member of the Steering Committee for the Development of the Nuclear Security Programme at MOH for the 2024-2026 Term Member of the Core Team Committee for the Development of the Nuclear Security Programme at MOH for the 2nd Term (2024-2026) Meeting of the Working Committee for the Development of the Alternative Technology Programme at MOH 4th Meeting of the Steering Committee for the Development of the Nuclear Security Programme at MOH Inspection Visit for the Physical Security System at three (3) medical facilities: Hospital Likas, Hospital Pantai Kuala Lumpur and the Advanced Medical & Dental Institute (IPPT) USM 	
Nuclear Security Culture activities implemented based on the annual plan	 Monitoring the Implementation of the Plan of Action (POA) and the Security Culture Enhancement Programme Report for the PDN and Hospital Ampang Monitoring the POA Establishment Programme for Hospital Canselor Tuanku Muhriz (HCTM) UKM, HUSM, Hospital Gleneagles, Hospital Wanita dan Kanak-Kanak Sabah (HWKKS) dan Hospital Tunku Azizah (HTA) Distribution of the Guideline on Nuclear Security Culture Programme for Medical Facilities in Malaysia 	
Nuclear Security Physical Protection activities implemented based on the annual plan	 Management of contract renewals and new contracts for five (5) facilities Participation in the Office of Radiological Security (ORS) site visit at Hospital Pantai Kuala Lumpur Meetings related to the upgrading of physical security system installations at two (2) facilities 	

Activity	Items
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Involvement in the planning, monitoring and implementation of the Country Programme Framework 2022-2027 based on the planned strategy

tion for the Diss

Implementation of technical cooperation programmes related to safety and security with international agencies based on agreements

- Monitoring the proposed implementation of the International Atomic Energy Agency (IAEA) Technical Cooperation (TC) Project MAL 9019 for the 2022 Cycle
- Dissemination and management of the *Planning and Design of the IAEA TC Programme 2026-2027*
- Secretariat for the dialogue session on the TC Programme under the IAEA
- Safety Expert Mission on Safety Culture Self-Assessment for Senior Management and Regulatory Staff
- Security ORS Technical Visit to Hospital Pantai Kuala Lumpur
- Malaysia/ORS Alternative Technologies Projects for Blood Irradiation Discussion



Image 6.28 Knowledge Sharing Visit to the National Research & Innovation Agency, Tangerang, Indonesia

MRSD is committed to strengthening and expanding medical radiation safety activities, covering aspects of safety, security control and regulatory aspects. The focus is on effective and efficient control of IR use in the medical field to ensure the safety of patients, workers and the public through approaches based on transformation, technology, innovation, quality and sustainability. Regulatory activities are also carried out in line with the service requirements outlined in the MOH Strategic Plan.

NATIONAL INSTITUTES OF HEALTH (NIH)

OFFICE OF THE NIH MANAGER

The Office of NIH Manager is responsible for managing the implementation of health research at the MOH. The activities involved are from the beginning of research planning and research

conduct, application and disbursement of research grants and the dissemination of scientific research results. The Office of NIH Manager plays an important role in ensuring that the health research programme at the MOH runs smoothly in achieving research outputs and outcomes to support the development of national health policy.

The Research and Grant Management Unit plays a role in processing research allocation applications from MOH researchers and is also responsible for coordinating meetings of the NIH Research Review Committee (JPPNIH) and the MOH Research Grant Evaluation Panel. In addition, this unit also manages the distribution process and conducts monitoring of research allocations. For the year 2024, a total of RM26,748,056 has been distributed and 97% was spent on implementing projects according to the following clusters.



Figure 6.16 Research Allocation under Research and Development

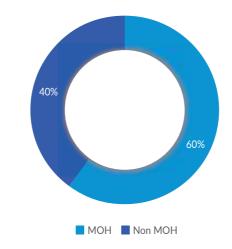


Figure 6.17 Consultation and Training

The Sector for Ethics and Research Surveillance (SEPP) successfully processed NMRR registrations for 4,111 research projects and granted ethics approval for 2,734 research projects in 2024. Additionally, the sector also approved various post-approval aspects, including research modifications, ethics approval renewals, project termination approvals, as well as evaluating Serious Adverse Events (SAE) reports and Protocol Deviation (PD) reports. SEPP also conducted compliance reviews for eleven (11) research projects throughout 2024. As part of its efforts to enhance researchers' capacity, SEPP organised NMRR Submission Workshops to assist researchers in the registration process and obtaining ethics approval. Furthermore, SEPP provided training to other ethics committees through the Network of Ethics Committees in Malaysia (NERCIM) to strengthen ethical understanding and practices in research.

The Sector for Biostatistics and Data Repository (SBDR), in partnership with the HIC, has taken a pivotal step in strengthening health data governance in Malaysia by developing the Guidelines on Patient Registry Establishment and Implementation in MOH. This landmark document, launched by the Minister of Health on 20 August 2024 during the prestigious 15th MOH-AMM Scientific Meeting, serves as a foundational framework for advancing patient registries across the MOH. In alignment with the MOH's commitment to enhancing registry governance and driving data transformation, the Registry Data and Information Governance Committee was formed at the ministry level. Chaired by the TKPK (P&ST) this committee provides strategic leadership in overseeing registry operations and data governance. Its initiatives are jointly supported by the NIH Manager and the Deputy Director of HIC, who serve as secretariat leads. SBDR, as an integral part of the secretariat team, plays a crucial role in enabling the committee's mission of fostering robust, standardised and impactful data practices across the healthcare ecosystem.

The Sector for Evidence-Based Healthcare functions to provide consultation services related to systematic reviews, meta-analyses, evidence maps, scoping reviews and other scientific studies.









Figure 6.18 Delegation and Collaboration

Cochrane Malaysia commemorated the Cochrane 10th Anniversary Celebration on 26 September 2024 at Avante Hotel, Bandar Utama, Selangor. The event, jointly organised by the Evidence-Based Healthcare Sector and Cochrane Malaysia, was graced by distinguished guests, including the Deputy Minister of Health Malaysia, Dato' Lukanisman bin Awang Sauni; Ms. Catherine Spencer, CEO of Global Cochrane; and H.E. Orla Tunney, Ambassador of Ireland. The celebration highlighted Cochrane Malaysia's latest advancements and the impactful application of research evidence, aligning with publications in the Cochrane Library.



Image 6.29 The Cochrane 10th Anniversary Celebration

The Collaboration and Innovation Unit (UKI) is responsible for coordinating strategic networks and helping to manage collaborative initiatives between agencies, institutions, and innovation bodies at national and international levels. UKI also represents NIH as one of the focus groups in the Intergovernmental Negotiating Body (INB) on Pandemic Agreement.

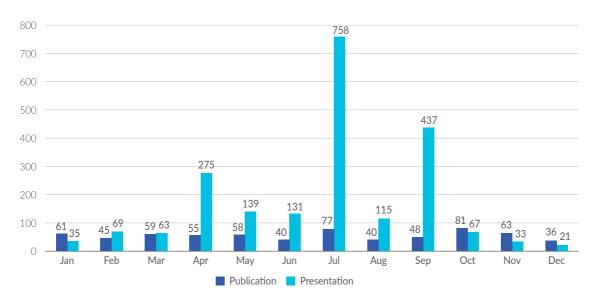


Figure 6.19 MOH Scientific Presentations and Publications Approved 2024

The Research Information Resources Sector (SSMP) or NIH Library supports NIH research activities by providing reference sources needed by NIH members. To meet the information needs of NIH constituents, the SSMP subscribed to three (3) e-journal databases and three (3) reference databases in the year 2024. Research reference activities have been implemented to assist in using support research tools and e-journal databases for reference.

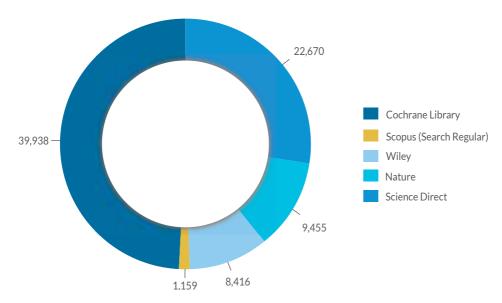


Figure 6.20 Total of NIH Database and e-Journal Subscription 2024

INSTITUTE FOR MEDICAL RESEARCH (IMR)

IMR conducts biomedical research, specialised diagnostic tests, consultation, training and technology transfer activity. Laboratory services were provided for special diagnostics and in support of transplantation. Ongoing international efforts included research for the drugs for neglected disease and training of participants from Southeast Asian countries in the areas of medical microbiology, parasitology and entomology through its Southeast Asia Ministers of Education Organisation (SEAMEO) network. IMR consist of eight (8) centres which are:

- i. Infectious Diseases Research Centre (IDRC)
- ii. Allergy & Immunology Research Centre (AIRC)
- iii. Cancer Research Centre (CaRC)
- iv. Environmental Health Research Centre (EHRC)
- v. Herbal Medicine Research Centre (HMRC)
- vi. Nutrition, Metabolism & Cardiovascular Research Centre (NMCRC)
- vii. Specialised Diagnostic Centre (SDC)
- viii. Special Resource Centre (SRC)

MYGENOM INITIATIVE: ESTABLISHING A REFERENCE GENOME FOR PRECISION MEDICINE IN MALAYSIA

The MyGENOM Initiative marks the first phase of Malaysia's national population genomics effort. This collaboration between the MOH and MOSTI aims to sequence 10,000 genomes and generate a reference genome representative of the Malaysian population. The current phase focuses on recruiting healthy Malaysians across various sites in the country and is led by the NIH. Since its launch in August 2024, the team has successfully recruited over 1,800 participants across Peninsular Malaysia from sites including NIH Setia Alam, Pusat Darah Negara (PDN) and major hospitals in Johor, Pulau Pinang and Perak. Participants underwent blood sample collection,

completed self-administered questionnaires, participated in body composition measurement, heart rhythm assessment and cognitive assessment. The collected blood samples were processed under strict biobanking protocols and sequenced by Malaysian Genome Vaccine Institution (MGVI), MOSTI.

In line with the commitment to inclusivity, IMR planned to extend our recruitment in 2025 to additional sites, focusing on under-represented communities such as the *Bumiputera Sarawak, Bumiputera Sabah* and *Orang Asli.*



Image 6.30 MyGENOM NIH Recruitment Team



Image 6.31 MyGENOM NIH-Clinical Collaborators Meeting





Image 6.32 Recruitment at Various Sites in 2024

SEAMEO TROPMED MALAYSIA

SEAMEO TROPMED Malaysia continued to promote education, research and capacity building in tropical medicine across Southeast Asia. As the SEAMEO TROPMED Regional Centre for Microbiology, Parasitology and Entomology, IMR hosted several visits from prominent SEAMEO officials. In February, IMR welcomed a high-level delegation that included the Vice President of the Republic of the Philippines, the Minister of Education of Malaysia and the Deputy Minister of Health of Malaysia. In December, IMR organised a workshop on Clinical and Laboratory Diagnosis of Emerging Fungal Infections. IMR has also successfully conducted the 53rd Postgraduate Diploma in Applied Parasitology and Entomology (DAP&E) and the 45th Postgraduate Diploma in Medical Microbiology (DMM).



Image 6.33 Student Learning Activities





Image 6.34 Workshop on Clinical and Laboratory Diagnosis of Emerging Fungal Infection officiated by Secretary-General SEAMEO TROPMED Network with Chairman of the Commission on Higher Education, Republic of Philippines





Image 6.35 Official Visit of the Vice President of Republic of the Philippines and Delegates

DENGUE ALLIANCE PROGRAMME

The Dengue Alliance, established in 2022, unites institutions from dengue-affected countries to develop affordable treatments, including antiviral and host-directed therapies. The Dengue Alliance partners are the MOH, Drugs for Neglected Diseases Initiative (DNDi), Switzerland, Faculty of Medicine Siriraj Hospital, Mahidol University, Thailand, Oswald Cruz Foundation (Fiocruz), Brazil, Translational Health Science and Technology Institute (THSTI), India and

Universidade Federal de Minas Gerais (UFMG), Brazil. Annual meetings are held to assess progress and plan research & development (R&D) strategies. The Joint-Steering Committee meeting took place at NIH in March 2024. Discussions focused on preclinical and clinical research advancements. Preclinical research focuses on drug repurposing, with in vitro and in vivo studies using local dengue virus isolates. IMR screened eleven (11) drugs, shortlisting obeldesivir and niclosamide for further studies in dengue mouse models. Efforts also target biomarker discovery and improving diagnostics. A biomarker working group meeting chaired by DNDi in 2024 has identified biomarkers for host-directed therapies.





Image 6.36 Dengue Alliance and Joint-Steering Committee Meeting 2024



Image 6.37 The Official Announcement of Dengue Alliance in Dengue Research Visibility Day

WOLBACHIA MALAYSIA

The Wolbachia Malaysia research project commenced in 2016 through a collaboration with the University of Glasgow and the University of Melbourne, funded by the Wellcome Trust (UK). This project aims to combat dengue cases in Malaysia using innovative vector control strategies involving Wolbachia-infected mosquitoes. The success of the Wolbachia research project in reducing dengue cases in seven (7) research localities has had a significant impact on the BKP. The project's success led to the adoption of mosquito release strategies involving Wolbachia-infected mosquitoes to manage dengue cases in Malaysia. As of 2024, eleven (11) research localities under the IMR and 36 operational localities with four (4) cohorts under the BKP have become sites for releasing Wolbachia-infected mosquitoes. These activities involve nine (9) states in Malaysia, including FT Kuala Lumpur & Putrajaya, Selangor, Negeri Sembilan, Melaka, Johor, Pulau Pinang, Pahang and Kelantan.

The Wolbachia Laboratory, located at the Medical Entomology Unit, IMR Jalan Pahang, serves as a hub for large-scale colonisation of Wolbachia-infected mosquitoes. This facility supplies mosquitoes for dengue control activities across all states in Malaysia. The Wolbachia Laboratory also provides training for researchers from Paraguay, Burkina Faso and Saudi Arabia. Additionally, researchers from various countries, including Taiwan, Thailand, South Korea and Saudi Arabia, have visited the facilities and the Wolbachia Laboratory, and have expressed interest in collaborating on Wolbachia-related projects. The Wolbachia Laboratory is frequently invited to exhibit at relevant programmes and public health seminars.



Image 6.38 Release of *Wolbachia*-Infected Mosquitoes with the Community at AU2 Keramat





Image 6.39 The AUDA-NEPAD High Level Field Visits Delegation of the Africa IVM Platform-Optimal Deployment of *Wolbachia* for Dengue Control

RARE DISEASE DAY 2024 CELEBRATION

MOH defines rare diseases as conditions that occur infrequently (<1 in 4,000) and may be life-threatening and/or cause chronic disabilities. The Rare Disease Day celebration was held on 29 February 2024, with the theme *Share Your Rare, Show You Care* and was officiated by the TKPK (P&ST).

This year's celebration, targeting healthcare workers in MOH and academics from local universities in the Klang Valley, aimed to raise awareness about rare diseases. The event was also enlivened by the presence of representatives from patient support associations. Various activities were held, including a creative video competition, an awareness as well as a sketch performance highlighting the role of IMR as a referral and research centre for rare diseases.





Image 6.40 Rare Disease Day 2024 Celebration

ORAL CANCER AWARENESS DAY 2024 CELEBRATION

On 27 February 2024, CaRC in collaboration with Selangor and Negeri Sembilan State Dental Health Departments, organised an Oral Cancer Awareness Day in conjunction with Mouth Cancer Awareness Month.

In line with the initiatives of the National Oral Health Strategic Plan (NOHSP) 2022-2030, the event's main mission is to encourage the practice of Mouth Self-Examination as well as increase the awareness of oral cancer. Informative lectures were delivered by esteemed specialists of the field focusing on topics such as *Oral Potentially Malignant Disorders* (OPMDs) and the treatment modalities of oral cancer followed by a moving forum featuring an oral cancer warrior and her husband as the main caregiver who shared their personal experience coping with the disease, treatment and rehabilitation. There were also dental exhibitions by the Selangor dental health team, along with free oral cancer screening and basic dental treatments provided by the Negeri Sembilan dental health team.





Image 6.41 Oral Cancer Awareness Day 2024 Celebration

INSTITUTE FOR PUBLIC HEALTH (IKU)

THE 2024 NATIONAL HEALTH AND MORBIDITY SURVEY (NHMS) STEERING COMMITTEE MEETING

NHMS Steering Committee convened on 15 April 2024, chaired by the Director-General of Health Malaysia. The meeting agenda included the presentations and discussion of findings from the surveys conducted in 2023, namely the NHMS 2023: Non-Communicable Diseases and Healthcare Demand, the Prevalence of Metabolic Syndrome and Metabolic Dysfunction-

Associated Fatty Liver Disease in Malaysia, the Global Adult Tobacco Survey (GATS) Malaysia 2023, and the Malaysia Health Literacy Survey (MHLS) 2023. Thereafter, the committee also reviewed the scope of NHMS 2024, which focuses on a nutrition survey. Additionally, the scope of smaller studies conducted alongside NHMS 2024, including the Prevalence of Chronic Kidney Disease Study Among Adults in Malaysia (MyCKD 2024) and the Malaysian Community Salt Study (MyCoSS 2.0), was also presented.





Image 6.42 The NHMS Steering Committee Meeting 2024

THE LAUNCHING OF THE FINDINGS OF THE NATIONAL HEALTH AND MORBIDITY SURVEY (NHMS) 2023: NON-COMMUNICABLE DISEASES (NCD) AND HEALTHCARE DEMAND (HCD) AND GLOBAL ADULT TOBACCO SURVEY (GATS) MALAYSIA 2023

On 16 May 2024, the Minister of Health officially launched the findings of the NHMS 2023 and GATS Malaysia 2023 at IPKKM. Data collection for NHMS 2023 took place from July-September 2023, covering 499 enumeration blocks and 5,553 living quarters. The overall response rate for NHMS 2023 field data collection was 83.20%, with 5,006 (90.10%) living quarters successfully visited and 13,616 (92.10%) individuals participating in the survey.

The objective of NHMS survey was to assess the current health status of the adult population in Malaysia, with findings contributing to international monitoring as outlined by the WHO under SDG and UHC indicators and national targets such as the National Strategic Plan for Non-Communicable Diseases (NSP-NCD) 2016-2025. The survey findings were published on the IKU website (https://iku.moh.gov.my/).

At the same ceremony, the findings of GATS Malaysia 2023 were launched. GATS is a collaboration study with the U.S. Centers for Disease Control and Prevention (CDC) and WHO. GATS 2023 covered findings on tobacco use (smoked, smokeless and heated tobacco products), electronic cigarette use, cessation, second-hand smoke, economics, media, knowledge, attitudes and perceptions towards tobacco use.

The data collection was conducted from June-July 2023 by IKU. A total of 5,780 households were surveyed and one (1) individual was randomly selected from each participating household to complete the survey. Survey information was collected electronically by using handheld devices. A total of 4,269 individual interviews were completed, yielding an overall response rate of 81.50%.





Image 6.43 The Launching of NHMS 2023 and GATS Malaysia 2023

NHMS 2023: NCD & HCD AND GATS MALAYSIA 2023 SEMINAR

From 26-28 June 2024, IKU hosted a seminar to present the findings of NHMS 2023 and GATS 2023. The seminar brought together key stakeholders from the MOH and JKNs. The primary objective was to share and discuss the results of these two (2) surveys, focusing on the status of NCDs, risk factors, healthcare demand and tobacco use patterns in Malaysia.





Image 6.44 The NHMS 2023 and GATS Malaysia 2023 Seminar

THE LAUNCHING OF THE ORANG ASLI HEALTH SURVEY (OAHS) 2022 FINDINGS

On 28 October 2024, the Minister of Health officially launched the OAHS 2022 findings at the Parliament Building. This health survey is the first of its kind, conducted comprehensively within the Orang Asli community by IKU. The primary objective of this survey was to obtain comprehensive, evidence-based data on significant health issues affecting the Orang Asli community in Peninsular Malaysia. Data collection for this survey was carried out from July-September 2022, involving 68 randomly selected Orang Asli villages. A total of 15,950 Orang Asli individuals, representing three (3) major ethnic groups across various age groups which are Senoi, Proto-Malay and Negrito.





Image 6.45 The Launching of OAHS 2022 Findings

ZOONOTIC LYMPHATIC FILARIASIS: A QUASI-EXPERIMENTAL POPULATION STUDY ON THE EFFECTIVENESS OF THE VETERINARY INTERVENTION (VI) IN THE LYMPHATIC FILARIASIS ENDEMIC IN SABAH (SABAH-VI)

Lymphatic filariasis (LF) is a neglected tropical disease that has been a significant public health concern particularly in Sabah. The disease is caused by Brugia malayi filarial worms, which are transmitted to humans by mosquito vectors. The adult filarial worm will remain in the lymphatic system for 6-8 years after infection, resulting in inflammation and obstruction of lymphatic vessels. The current standard practice for the elimination of LF entails the administration of a weight-based dose of the triple-drug IDA (Ivermectin, Diethylcarbamazine and Albendazole) through mass drug administration (MDA) in the red IUSs (Implementation Units) community. The integration of human MDA and VI has the potential to control the transmission of LF in communities, particularly in areas susceptible to zoonotic LF. Therefore, a collaborative One Health research project was established between several agencies to explore the potential and impact of VI to curb zoonotic LF in areas where LF is persistent.

The SABAH-VI project is a quasi-experimental study involving two (2) arms: the veterinary intervention arm (VI) and the non-intervention arm (NVI). The study aims to examine the effectiveness of VI by treating the animals in the VI arm once a week for six weeks in combination with the current MDA programme. The study will elucidate the prevalence of Brugia malayi in humans, animals, and mosquitoes both prior to and following the implementation of MDA in both intervention and non-intervention arms.

Subsequent animal treatment from the NVI arm will be administered during the crossover period at month 12 (T12). It is anticipated that this crossover animal intervention in the community will provide us with a more comprehensive understanding of the overall transmission dynamics of LF within the endemic areas, which will be beneficial for the control of LF. IKU anticipated that the transmission cycle of filarial worms in the community will be disrupted, thereby reducing the burden of human LF by targeting the animal reservoir of the worms.

This study is conducted in collaboration with several agencies include IKU, IMR, BKP, National Public Health Laboratory Kota Kinabalu, National Public Health Laboratory Kota Bharu, Faculty of Veterinary Medicine, Universiti Putra Malaysia (UPM), Department of Medical and Health Sciences, Universiti Malaysia Sabah (UMS) and the Department of Parasitology and Medical Entomology, Universiti Kebangsaan Malaysia (UKM). The study was funded by the Bill and Melinda Gates Foundation.





Image 6.46 Mosquito Larvae Collection and Animal Capture such as Cats and Dogs for Blood Sampling Activities

NHMS 2024: NUTRITION

The data collection activities for NHMS 2024: Nutrition was officially commenced on 22 July 2024, launched by TKPK (P&ST) at Port Dickson. The findings from the NHMS 2024 survey are expected to be critical in shaping policies to combat the double burden of malnutrition and shed light on the eating habits of Malaysians that contribute to NCD and their risk factors.





Image 6.47 The Launching of Data Collection Activity for NHMS 2024





Image 6.48 Deputy Health Minister Visits Data Collection Activity for NHMS 2024 in Miri

INSTITUTE FOR CLINICAL RESEARCH (ICR)

ICR remains steadfast in its commitment to advancing rigorous clinical research. Throughout 2024, ICR was instrumental in generating evidence-based knowledge that significantly influenced healthcare policies and practices.

ICR's publication numbers declined after 2021 but have since stabilised. The higher numbers in 2020 and 2021 were largely driven by research related to COVID-19. In 2024, ICR published a total of 133 manuscripts, with 104 (78.20%) appearing in international journals, reflecting the institute's sustained global reach. ICR and its Network of Clinical Research Centres (CRCs) across Malaysia collectively conducted 824 research projects in 2024, marking a substantial endeavour in advancing medical knowledge. This encompassed 519 Investigator-Initiated Research (IIR) projects, 305 Industry-Sponsored Research (ISR) projects, including Phase I Clinical Trial, reflecting a diverse range of collaborative efforts among MOH, non-MOH and international institutions.

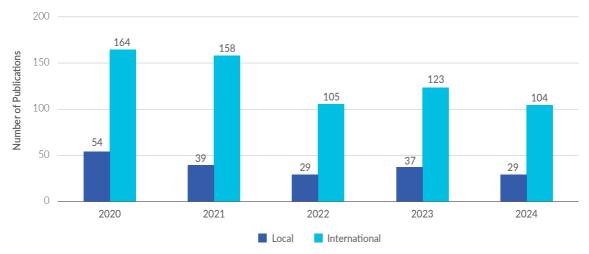


Figure 6.21 Trend of Publication 2020-2024



Figure 6.22 Trend of Research Project 2020-2024

STRENGTHENING MALAYSIA'S CLINICAL TRIAL ECOSYSTEM

In November 2023, during the inaugural WHO Global Clinical Trial Forum in Geneva, a shared vision was developed to enhance global clinical research capabilities in alignment with the World Health Assembly resolution (WHA75.8). Building on this momentum, ICR, in collaboration with WHO's Western Pacific Regional Office (WPRO), organised a pivotal workshop on 30 September 2024, titled *National Clinical Trial Ecosystem in Malaysia*.

The primary objective of the workshop was to identify key challenges within Malaysia's clinical trial ecosystem and outline priority actions to address them, leveraging support from WPRO. This workshop followed an expert consultation meeting held earlier in March 2024, which focused on implementing WHA75.8 in the region.

The workshop brought together 35 participants representing key stakeholders from Malaysia's clinical research ecosystem, including clinicians, researchers, and representatives from various public and private entities such as the IMR, Medical Research Ethics Committee (MREC), National Pharmaceutical Regulatory Agency (NPRA), Medical Device Authority (MDA), University Malaya Medical Centre (UMMC), Clinical Research Malaysia (CRM), Cancer Research Malaysia (CRMY), DNDi and Third World Network. These participants shared their valuable perspectives and experiences, fostering a dynamic dialogue to identify actionable priorities to enhance Malaysia's clinical trial ecosystem. The discussions emphasised addressing local health challenges while strengthening the nation's capacity for innovative problem-solving.



Image 6.49 National Clinical Trial Ecosystem in Malaysia Workshop

THE 15TH MINISTRY OF HEALTH-ACADEMY OF MEDICINE MALAYSIA (MOH-AMM) SCIENTIFIC MEETING IN CONJUNCTION WITH THE 25TH NATIONAL INSTITUTES OF HEALTH (NIH) SCIENTIFIC CONFERENCE 2024

The 15th MOH-AMM Scientific Meeting in conjunction with the 25th NIH Scientific Conference 2024 was held on 20-22 August 2024 at the NIH Complex in Setia Alam. The theme *Navigating the Future: Synergising Evidence for Sustainable Health Systems* underscores the critical need for integrating evidence-based practices to develop resilient healthcare systems. The opening ceremony was officiated by the Minister of Health, with the attendance of 660 participants

from diverse backgrounds. A total of 26 speakers and panellists shared their knowledge and perspectives on health financing, health system reform, and healthcare workforce development through five (5) plenary sessions and six (6) symposia. In conjunction with the event, two (2) national guidelines, National Guidance on Advance Care Planning and Guidelines on Patient Registry Establishment and Implementation in Ministry of Health Malaysia, were also launched.



Image 6.50 15th MOH-AMM Keynote Address by the Minister of Health

NIH AI DAY 2024

The inaugural NIH AI Day 2024 was launched on 21 October 2024 at NIH Complex. This strategic event united healthcare professionals and technology leaders under the theme Embracing AI for a Better Future. The primary objective was to establish a platform for knowledge exchange and innovation in healthcare technology, whilst fostering meaningful partnerships between the public healthcare sector and industry pioneers.

The full-day program featured six (6) distinguished presentations, with industry leaders delivering specialised sessions on AI applications in healthcare. Highlights included Intel Malaysia introducing foundational concepts of AI in healthcare, Vidanex exploring AI use in pathology, Qmed Asia presenting advanced healthcare solutions, CelcomDigi showcasing AI-powered precision surgery through Holomedicine®, Awantec demonstrating workplace applications of Gemini (Gen AI) and Microsoft concluding with transformative insights on Copilot integration and the reimagination of public healthcare.

Eight (8) prominent technology companies such as Intel, Microsoft, Vidanex, Qmed Asia, Awantec, TM One Malaysia, eCloud Security and CelcomDigi Berhad showcased their latest healthcare Al innovations. The event garnered significant interest and was joined by 364 participants





Image 6.51 NIH AI Day 2024

ICR LEADERSHIP AND STRATEGIC PLANNING WORKSHOP

On 4-6 July 2024, the Strategic Governance and Management Unit (SIGMA) organised a Leadership and Strategic Planning Workshop in Kuala Lumpur. This workshop brought together all the heads of CRCs to strengthen the Network of CRCs. The main objectives were to draft a strategic plan to advance Investigator-Initiated Research/Trials (IIR/IIT), support ISR and build sustainable clinical research capacity for the future.

A key highlight of the workshop was the Dialogue Session with the Minister of Health, which underscored the pivotal role of clinical researchers as the foundation of evidence-based medicine. The session highlighted of clinical researchers essential contribution in generating high-quality scientific evidence to enhance patient outcomes and strengthen overall healthcare delivery.



Image 6.52 ICR Leadership and Strategic Planning Workshop

COLLABORATION BETWEEN ICR AND TOY EIGHT FOR VALIDATION OF A CHILD DEVELOPMENTAL DELAY SCREENING TOOL (DADOC-TOY8)

In February 2024, researchers from ICR kick-started a collaborative research project with TOY EIGHT, a Japanese education company based in Malaysia, to validate a digital screening tool for developmental delay in children aged 3-5 years, known as the TOY8 screening tool. Early identification of children with developmental challenges enables individualised and prompt intervention to assist the children towards average development. Currently, no local screening tools are available for screening of child developmental delays in the community setting.

Case-Control Accuracy Study for Developmental Delay among 3–5-year-old children: TOY8 Digital Developmental Screening Tool (DADOC-TOY8) is set to demonstrate the accuracy of TOY8 in screening for developmental delay by the cognitive, fine motor, speech and language, personal and adaptive behaviour and gross motor domains among children in the Malaysia population. A total of 128 children have participated in this study.





Image 6.53 DADOC-TOY8 Kick-off Meeting and TOY8 Digital Screening Tool

RESEARCH CAMPS 2024

Three (3) research camps were organised in 2024 to enhance clinical research knowledge, strengthen the research community and expand the capacity for meaningful research projects within the MOH. The Northern Region Research Camp was co-organised by CRC Hospital Seberang Jaya and CRC Hospital Pulau Pinang. Meanwhile, the Sabah Research Camp was organised by CRC Hospital Queen Elizabeth II in collaboration with the Persatuan Penyelidikan Klinikal Hospital Queen Elizabeth II. The ICR Research Camp was held in Kuala Lumpur, organised by the Centre for Coordination of Clinical Research Network (CCRN) of ICR. These camps featured hands-on sessions facilitated by experienced clinicians and researchers, focusing on developing research proposals and writing manuscripts. Participants were also guided on structuring quality research proposals, planning study designs and statistical analysis, and refining manuscripts.

A total of 74 participants attended the camps, with 25 in the Northern Region Research Camp, 26 in the Sabah Research Camp and 23 in the ICR Research Camp. Additionally, 20 facilitators were involved across the camps. The Northern Region and Sabah Research Camps centred on proposal development, while the ICR Research Camp was dedicated to manuscript writing.







Sabah Research Camp



ICR Research Camp

Image 6.54 Research Camps 2024

INSTITUTE FOR HEALTH SYSTEMS RESEARCH (IHSR)

IHSR is dedicated to enhancing Malaysia's healthcare delivery through comprehensive research and policy development. Its key functions include conducting health systems analyses to improve efficiency and equitable access, providing evidence-based insights to inform health policies and developing strategies to enhance service quality. Additionally, IHSR evaluates the economic aspects of health interventions to optimise resource allocation and maximise cost-effective health benefits.

CENTRE FOR HEALTH OUTCOMES RESEARCH (CHOR)

CHOR leads in health systems simulation and modelling to improve decision-making and predict outcomes for complex healthcare processes. Key projects include the SimuCervS Project, which developed a dynamic model to optimise Malaysia's transition from pap smear to Human Papillomavirus (HPV) testing for cervical cancer screening, supporting WHO's elimination strategy and leading to policy recommendations on screening frequency and HPV testing adoption. The ongoing MyLTC project simulates long-term care needs to enhance the well-being of older persons. CHOR is also advancing grey literature reviews using AI to improve automated tools for health policy decision-making through its AutoGrey Project. Additionally, the centre employs big data analysis in the *Exploring Avoidable Hospitalisations and Their Contributing Factors in Malaysia* study, integrating diverse datasets to enhance understanding and improve health systems.

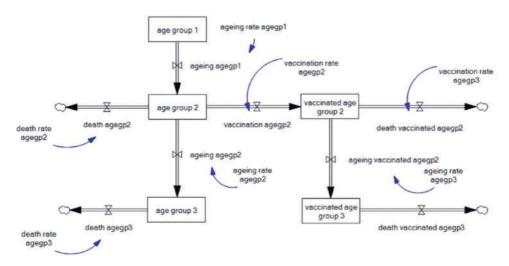


Figure 6.23 A Subsection of the Stock-Flow Diagram Representing the HPV Vaccination Programme

CENTER FOR HEALTH EQUITY RESEARCH (CHER)

CHER primarily focuses on promoting health equity through research aimed at identifying and addressing disparities in healthcare access and outcomes. Among its many research pursuits, one of CHER's most recent endeavours is harnessing GIS to examine healthcare availability and accessibility. By leveraging spatial and geospatial analysis to generate detailed maps and proximity analyses, this tool enables comprehensive assessments of health facility networks, distribution patterns and areas of vulnerability. CHER has undertaken projects such as the Situational Analysis of MOH Hospital Emergency Departments (ED) in Malaysia and Geospatial Accessibility to Surrounding Healthcare Facilities, showcasing its ability to integrate spatial data into actionable insights.

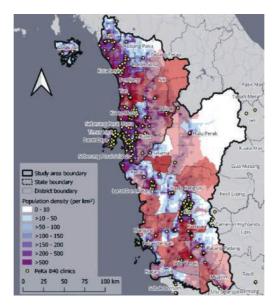


Figure 6.24 Overlay Analysis of PeKA B40 Clinic Distribution and Population Characteristics to Identify Vulnerability Areas

CENTRE FOR HEALTHCARE QUALITY RESEARCH (CHQR)

CHQR is committed to improving healthcare quality in Malaysia through research, training and consultancy in quality healthcare. In 2024, the third year of the National Policy for Quality in Healthcare (NPQH) implementation, CHQR introduced several new initiatives aligned with the policy goals. A key highlight was the development of the Q Hub, an online platform that serves as the central resource for quality improvement initiatives. The groundwork was laid for a quality healthcare professional competency framework by paving the way to standardise the job description of quality officers across different levels and programmes within the MOH. Additionally, as the Secretariat for QAP, a three (3)-day National QA Convention with 700 delegates was organised and showcased over 200 quality improvement projects.





Image 6.55 12th National QA Convention

Image 6.56 Launch of QHub by the DG of Health

CENTRE FOR HEALTH SERVICES RESEARCH (CHSR)

CHSR supports national efforts to strengthen health systems by addressing service delivery gaps and informing policies to improve population well-being. CHSR's expertise lies in translating evidence into actionable improvements, focusing on service integration, care pathways and access to essential health services. A key feature of the CHSR work is its ability to engage stakeholders across the healthcare system, from policymakers to service providers and communities, ensuring that policies and interventions are relevant and responsive. This includes facilitating collaboration to bridge gaps between national strategies and local implementation. Notable contributions include evaluating a community-based oral health promotion initiative to improve local service delivery and inform national approaches, as well as strengthening colorectal cancer screening processes within the MOH to address gaps in care pathways and service integration.



Image 6.57 Briefing Session Before Stakeholder Engagement on Colorectal Cancer Screening Services



Image 6.58 Stakeholder Dialogue Session on *Kampung Angkat* Project at Oral Health Programme

CENTRE FOR HEALTH ECONOMICS RESEARCH (CHEER)

CHeER advances the integration of health economics into effective and equitable healthcare policies through rigorous analysis, innovative methods and interdisciplinary collaborations. CHeER's key expertise includes economic evaluations such as cost-effectiveness, cost-utility, cost-benefit analyses, the burden of disease assessments, health systems financing, behavioural economics and policy simulation modelling. These specialisations enable CHeER to address critical healthcare challenges, as demonstrated in 2024 through projects like the cost-effectiveness of Automated External Defibrillator (AED) deployment, the Wolbachia Mosquitoes Programme and NCD screening initiatives. The development of Malaysian Prioritisation of Vaccine Selection (MyPRICISE), supporting Malaysia's vaccine roadmap, further showcased its impact. Additionally, CHeER conducted capacity-building workshops to enhance health economics expertise and integration into public health practice.



Image 6.59 MyPRICISE Calculator Development Workshop



Image 6.60 Distributional Cost-Effective Analysis Workshop Participants and Speakers from Health Intervention and Technology Assessment Programme (HITAP), Thailand

CENTRE FOR HEALTH POLICY RESEARCH (CHPR)

CHPR champions implementation science and research (IR), focusing on bridging the gap between evidence and practice to enhance policy effectiveness. This discipline helps policymakers and implementers understand not only the strengths and limitations of existing policies but also the contextual factors influencing their outcomes. By examining what works, for whom and under what circumstances, implementation science identifies opportunities for improvement and guides the adaptation of interventions to local contexts. This approach ensures that policies are practical, impactful, and aligned with the needs of the population, fostering sustainable improvements in health outcomes. In addition to these efforts, CHPR is conducting research projects focused on the implementation of virtual consultations and addressing healthcare in prisons, particularly regarding Tuberculosis (TB) and Hepatitis C services.



Figure 6.25 Implementation Research Handbook



Image 6.61 Stakeholder Engagement Session with Malaysian Prison Department

INSTITUTE FOR HEALTH MANAGEMENT (IHM)

THE 10TH TALENT GROOMING PROGRAMME (TGP) ANNIVERSARY

On 24 October 2024, IHM proudly commemorated the 10th Anniversary of the TGP for Technical Healthcare Professionals with a grand celebration themed *A Decade of Excellence: Inspiring Tomorrow's Leaders Today.* This milestone event was held at the Auditorium Perdana NIH, in conjunction with the 21st TGP Inspirational Leadership Podium 2024. The event was officiated by the Minister of Health and recognised TGP's impactful journey over the past decade.

Since its inception in 2014, TGP has trained 14 cohorts of 245 technical healthcare professionals, produced 135 alumni, implemented over 80 courses and 20 Inspirational Leadership Podium sessions. The 21st TGP Inspirational Leadership Podium was organised by the TGP Secretariat in collaboration with the Office of NIH Registrar and TGP Talent Cohort 13. This year's podium was themed *The Leader's Edge: Cultivating a High-Impact Leadership Mindset.*

The anniversary celebration continued with a special sharing session that brought together 76 TGP Alumni and current talents. Alumni shared their experiences within the programme and its profound impact on careers and contributions to the MOH. Participants provided constructive feedback to further evolve the programme and ensure its relevance in addressing future healthcare leadership needs.





Image 6.62 The 10th Anniversary of the TGP for Technical Healthcare Professionals

MEMORANDUM OF UNDERSTANDING (MOU) BETWEEN NIH AND UNIVERSITI TEKNOLOGI MALAYSIA (UTM)

On 7 November 2024, NIH signed an MoU with UTM in an official ceremony held at NIH. This agreement aims to strengthen mutual understanding in lean-based research collaboration between UTM and the Lean Centre of Excellence (LCOE), IHM. Lean-based research is a practical approach that focuses on doing only what's necessary to get useful results while cutting out anything that wastes time or resources. It uses small and quick changes, test changes, learns from feedback and keeps improving along the way. The goal is to create value and solve real problems without spending more time or effort than needed.





Image 6.63 MoU Signing Ceremony

HOSPITAL KLUSTER LEMBAH KLANG SATU (KKV1)

On 3-4 September 2024, IHM was invited by Cluster Unit Hospital Selayang to conduct an Action Research (AR) workshop involving all hospitals within the KKV1 cluster. KKV1 comprises Hospital Selayang as the lead hospital, while Hospital Sungai Buloh, Hospital Kuala Kubu Baru, Hospital Tanjung Karang and Hospital Tengku Ampuan Jemaah are the non-lead hospitals. On 28 November 2023, KKV1 is one of the clusters under the Klang Valley Cluster which has been established as one of the initiatives to improve the hospital cluster system. This move was intended to enhance and facilitate the services in hospitals residing in the Klang Valley area, which are mostly specialist hospitals.

The workshop aimed to introduce the AR framework and concepts and apply them in the planning and implementation of KKV1. It was attended by officers involved in the cluster hospital initiative, namely the quality unit, casemix unit, emergency department, dental department, obstetrics and gynaecology department, medical department and orthopaedic department.

STUDY UPDATE ON SUSTAINABILITY OF LEAN IMPLEMENTATIONS AT MOH HOSPITALS

The virtual workshop with the qualitative experts was conducted to further refine and enhance the rigour and depth of the findings. The preliminary findings were presented at the 8th Asia Pacific Conference on Public Health and the 10th International Public Health Conference 2024. The study has been recognised through publication in an international health management journal, contributing to the broader academic and practical discussions on lean sustainability.





Image 6.64 Activity in the Field and Virtual Workshop with Experts

BORNEO LEAN HEALTHCARE CONFERENCE 2024

The Borneo Lean Healthcare Conference was co-organised by Hospital Miri, JKN Sarawak, Sabah and JKWP Labuan with the theme *Lean Culture: Improving Quality of Care*, which was held for the first time in Borneo. The programme was held from 21-22 October 2024 at the State Library, Miri has successfully brought together 145 delegates from all over Malaysia and Brunei Darussalam.

Two (2) officers from the Centre for Organisational Excellence Development (COED), IHM, were invited to participate in the conference as judges and speakers. The Head of LCOE served as a plenary speaker, presenting on the topic *Empowering Our Future: Lean Centre of Excellence's Role in Tomorrow's Lean Practices* and also acted as a judge for the oral competition. The second officer participated as a forum panellist, discussing *Patient-centred Lean Practices: How Lean Can Improve Patient Experience and Outcomes* and also served as a judge for the e-poster competition.





Image 6.65 Borneo Lean Healthcare Conference 2024

JOURNAL OF HEALTH MANAGEMENT (JoHM) 2024

JoHM is an open-access, peer-reviewed journal established by the IHM. JoHM has operated since 2006, aligned with its goal to publish articles and research on healthcare service delivery, health policy and hospital management. Generally, JoHM provide a platform for healthcare professionals to present their research findings to healthcare administrators, academics, doctors, and scientists across the country. Manuscripts can be submitted through the journal's MySitasi website at https://mysitasi.mohe.gov.my/portal. The journal is typically published in two issues per year, with supplementary issues published as needed.

Publications

The JoHM published articles in 2024, including the compilation of research papers from the International Lean Healthcare Conference 2023. Publications for 2024 are as follows:

- i. Vol 21: No. 1/2024 (https://tinyurl.com/JoHM2024-1-21)
- ii. Vol 21: No.2/2024 (https://tinyurl.com/JoHM2024-2-21)
- iii. Supplementary for International Lean Healthcare Conference 2023 (https://myjms.mohe.gov.my/index.php/JoHM/issue/view/1843)

Workshop on Streamlining Journal Publication: Tips and Guidelines for Reviewers and Editors

The Editorial Team of JoHM and the Clinical Governance Development Centre (CCGD), IHM organised a Workshop on Streamlining Journal Publication: Tips and Guidelines for Reviewers and Editors from 28-30 May 2024, at Kuala Lumpur. The objective of this course is to equip reviewers and editors with the skills needed to manage journals at various stages of production, including the manuscript review process, handling author feedback and final publication.

Navigating Open Journal System for Publishing Excellence Course

CCGD organised a three (3) day course from 1-3 October 2024 at Putrajaya. This course aimed to strengthen participants' understanding and skills in managing the Open Journal System (OJS), which is essential in the management of academic journals. The course was attended by 30 participants from various institutions, IMR, ICR, NIH Manager's Office and the Pharmacy Services Programme. The course focused on essential components of journal management, such as OJS management, which enhances the efficiency of manuscript submission and editorial workflows.

It also covered copy editing and proofreading to ensure high-quality output at every stage of the editorial process, as well as strategies for improving publication efficiency by maximising time and resource use in manuscript handling while maintaining academic publishing standards.





Image 6.66 Navigating Open Journal System for Publishing Excellence Course 2024

INSTITUTE FOR HEALTH BEHAVIOURAL RESEARCH (IHBR)

IHBR was established in 2006. Its primary function is to conduct research, training and advisory services in health behaviour. IHBR's specific tasks can be divided into several categories: conducting health behaviour determinants studies, health risk behaviour studies, programme evaluation, instrument development and health communication.

RESEARCH

Despite facing challenges, IHBR has successfully implemented various studies in the field of health behaviour. In 2024, IHBR conducted 20 studies related to health behaviour as shown below.

Table 6.19 Research Studies Conducted in 2024 According to Research Priority Areas

Priority Areas	Total
Non-communicable diseases	1
Components of a healthy lifestyle	7
Digital technology in assessing risky behaviour	1
Preventive behaviour	2
Infectious diseases	4
Behavioural science	4
Food safety and assurance	1

PUBLICATION

Table 6.20 Articles Published in High-Impact Journals in 2024

Validating Measurement of Health Literacy among Adolescents Questionnaire (MOHLAA-Q) for Malaysian Version (MyMHLAA-Q) for Malaysian Version (
Volume 6, Issue 1, January-February 2024. DOI 10.36948/jfmr.2024.v06i01.12225 JMR Research Volume 6, Issue 2, March-April 2024. DOI 10.36948/jfmr.2024.v06i02.15849 JMR Research Volume 6, Issue 2, March-April 2024. DOI 10.36948/jfmr.2024.v06i02.15849 JMR Research Volume 6, Issue 2, March-April 2024. DOI 10.36948/jfmr.2024.v06i02.15849 JMR Volume 6, Issue 2, March-April 2024. DOI 10.36948/jfmr.2024.v06i02.15849 JMR Volume 6, Issue 2, March-April 2024. DOI 10.36948/jfmr.2024.v06i02.15849 JMR Volume 6, Issue 2, March-April 2024. DOI 10.36948/jfmr.2024.v06i02.15053 International Journal of Management Studies and Social Science Research. Volume 6, Issue 4- July -August Hong Kong (CHLSalt-HK) for Malaysian Population. Global Journal of Health Science. 16. 37. 10.5539/gibs.v16n8p37. Compliance with COVID-19 Mitigation Measures During COVID-19 Pandemic in Malaysia. Knowledge, Attitudes and Practices on Antimicrobial Use and Antimicrobial Resistance Among Shrimp Aqua Culturists in Peninsular Malaysia A cross-sectional study on health behaviour changes during COVID-19 among adults in Malaysia The role of digital health interventions in reducing obesity among primary school children: A behavioural insights perspective Jusability and Engagement of Web Application on Parental Behaviours for Child Obesity Intervention Partient Diabetes Care Patient Attitude on the Application of Artificial Intelligence in Diabetes Care Patient Attitude on the Application of Artificial Intelligence in Diabetes Care Patient Attitude on the Application of Artificial Intelligence in Diabetes Care Patient Attitude on the Application of Artificial Intelligence in Diabetes Care Patient Providers in Patient Diabetes Management Using the Information, Motivation and Behaviour Model: A Qualitative Study in Malaysian Perceived Risks of Medical Marijuana: Malaysian Malaysian Journal of Health Promotion 2024.	Articles	Journal
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Article DOI: https://doi.org/10.30574/wjarr.2024.23.3.2922 Wijarr.2024.23.3.2922 https://doi.org/10.30574/wjbphs.2024.20.1.0804 https://doi.org/10.30574/wjbphs.2024.20.1.0804 https://doi.org/10.30574/wjbphs.2024.20.1.0804 https://doi.org/10.30574/wjbphs.2024.20.1.0804 https://doi.org/10.30574/wjbphs.2024.20.1.0804 Asian J Soc Health Behav 2024 String International Conference on Artificial Intelligence and Data Sciences (AiDAS), Bangkok, Thailand, 2024, IEEE Advancing Technology for Humanity, pp. 441-445 Dengue prevention and public perception of barriers to eliminate mosquito breeding sites among Malaysians Exploring the Views and Experiences of Healthcare Providers in Patient Diabetes Management Using the Information, Motivation and Behaviour Model: A Qualitative Study in Malaysia Perceived Risks of Medical Marijuana: Malaysian Malaysia Journal of Health Promotion 2024	A cross-sectional study on health behaviour changes during COVID-19 among adults in Malaysia	
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barriers to eliminate mosquito breeding sites among Malaysians 406-418s. DOI: http://doi.org/10.20473/ljph. vl9i3.2023.406-418 Exploring the Views and Experiences of Healthcare Providers in Patient Diabetes Management Using the Information, Motivation and Behaviour Model: A Qualitative Study in Malaysia Perceived Risks of Medical Marijuana: Malaysian 406-418s. DOI: http://doi.org/10.20473/ljph. vl9i3.2023.406-418 Journal of Healthcare in Developing Countries, 4(1): 01-09. Malaysia Journal of Health Promotion 2024	Patient Attitude on the Application of Artificial Intelligence in Diabetes Care	and Data Sciences (AiDAS), Bangkok, Thailand, 2024, IEEE Advancing Technology for Humanity, pp.
Providers in Patient Diabetes Management Using the Information, Motivation and Behaviour Model: A Qualitative Study in Malaysia Perceived Risks of Medical Marijuana: Malaysian Malaysia, Journal of Health Promotion 2024	Dengue prevention and public perception of barriers to eliminate mosquito breeding sites among Malaysians	406-418s. DOI: http://doi.org/10.20473/ljph.
	Exploring the Views and Experiences of Healthcare Providers in Patient Diabetes Management Using the Information, Motivation and Behaviour Model: A Qualitative Study in Malaysia	
	Perceived Risks of Medical Marijuana: Malaysian Adults' Perspectives	Malaysia Journal of Health Promotion 2024

Articles	Journal
Escaping the screen: A conceptual exploration of gaming addiction among adolescents	Malaysia Journal of Health Promotion
Coping Strategies Among Adolescents During Home-Based Learning During COVID-19 Pandemic in Selangor, Malaysia	Malaysia Journal of Health Promotion
Knowledge about blood donation among whole- blood donors. Malaysia Journal of Health Promotion	Malaysia Journal of Health Promotion

CONSULTATIONS

In 2024, IHBR conducted 106 consultations as shown in table below.

Table 6.21 Consultations Sessions 2024

Consultation	Total
MOH	63
Non-MOH	31
International	12

CENTRE FOR HEALTH PROMOTION COMPETENCY AND ADVANCED LEARNING

Perceived Barriers and Facilitators in Accessing Mental Health Services Among Malaysian Secondary School Students Research

This study was carried out in collaboration with the MOE and aims to address the existing knowledge gap regarding the factors that promote or prevent seeking mental health help among teenagers in Malaysia. The results of the study can contribute to planning by helping teenagers get support to get treatment related to their mental health problems.





Image 6.67 Discussion session with the MOE

Town Hall Session and Workshop on Development of National Blueprint for Behavioural Insights in Health

This town hall session aimed to gather views and feedback on improving the National Blueprint for Behavioural Insights in Health. 100 participants from various government agencies, corporate entities, universities, United Nations agencies and NGOs shared their insights on the blueprint's development.

The session was also attended by the WHO Representative to Malaysia, Brunei Darussalam and Singapore, TKPK (P&ST) and the Behavioural Science Consultant from the WHO Western Pacific Regional Office (WPRO).

Following the town hall session, a Workshop on Development of National Blueprint for Behavioural Insights in Health was held and attended by 60 participants from various agencies. This workshop aimed to refine the direction and strategy outlined in the blueprint. The *WHO Resolution on Behavioural Science for Better Health* adopted the resulting strategy.





Image 6.68 Town Hall Session on Development of the National Blueprint for Behavioural Insights in Health

Scenario-Based Workshop on Behavioural Insights for Health

IHBR in collaboration with the WHO Malaysia Country Office, organised a workshop held from 13-15 November 2024 in Petaling Jaya. The workshop was inaugurated by TKPK (P&ST) and was also attended by the WHO Representative to Malaysia, Brunei Darussalam and Singapore.

A total of 33 participants took part, including representatives from various departments at the IPKKM, officials from the JKN and representatives from ProtectHealth Corporation. The workshop provided participants with hands-on exposure to conducting Behavioural Insights projects using the framework proposed by the WHO.





Image 6.69 Scenario-Based Workshop on Behavioural Insights for Health

CENTRE FOR RISK BEHAVIOUR SURVEILLANCE RESEARCH

Presentation of the Findings of the Study Assessing Teachers' Role to Support Identification of Adolescents at Risk of Mental Health Problems

The presentation of the findings of the study was held on 13-15 November 2024 with the stakeholders, National Centre of Excellence for Mental Health (NCEMH) and MOE to obtain feedback and opinions.





Image 6.70 Study Assessing Teachers' Role to Support Identification of Adolescents at Risk of Mental Health Problems Presentation

Presentation of Research Findings at the Pharmacy Services Programme

Presentation of the study by IHBR to the Pharmacy Services Programme as the stakeholder on 10 December 2024. The results of the study received feedback and opinions from the relevant parties.





Image 6.71 Presentation of research by IHBR to the Pharmacy Services Programme

CENTRE FOR HEALTH BEHAVIOUR DETERMINANT RESEARCH

Cognitive, Affective & Behaviour (CAB) Module Formation Workshop Profiling for Target Groups

The purpose of this workshop is to discuss and form a comprehensive CAB which the participants can identify and analyse the cognitive patterns and health behaviours of patients to produce an intervention package that is suitable for the patient's condition according to individual needs.





Image 6.72 CAB Module Development Workshop

Research on the Development of the Know Your Medicines Programme (KUA)

This study has been carried out in phases for the purpose of developing a research instrument that can measure knowledge, attitudes and perceptions related to the KUA programme carried out from January-December 2024. The study phases start from the pilot study, training for data collection, FGD sessions based on the target group, improvement of the instrument with a group of experts and presentation to stakeholders to ensure that the results of the instrument developed can achieve the objectives of the study.





Image 6.73 Research on the Development of the KUA

CENTRE FOR HEALTH COMMUNICATION AND INFORMATICS RESEARCH (PPKIK)

Throughout the year 2024, PPKIK has implemented three (3) main research activities as follows:

- i. **Development & Validation of Malaysia Mental Health Literacy Tools -** The study aims to develop and validate Malaysia's Mental Health Literacy Tools.
- ii. Validation of Health Literacy Pertaining to Salt Instrument & Assessment of Health Literacy related to Salt Intake among Malaysians This study aims to assess the level of salt literacy among the Malaysian population.
- iii. **Evaluation Study of the Media Campaign** *Stop the Stigma of Mental Health -* The study aims to evaluate the level of exposure, understanding and practice among Malaysians based on the Media Campaign Stop the Stigma of Mental Health.

CENTRE FOR HEALTH PROMOTION INTERVENTION RESEARCH

Workshop on Developing a Strategic Plan Behavioural Insights for Blood Donation

This workshop aims to develop a strategic plan of Behavioural Insights for blood donation, which is jointly organised by the PDN and attended by 16 MOH officials who implement policies at PDN according to their respective expertise.





Image 6.74 Workshop on Developing a Strategic Plan Behavioural Insights for Blood Donation

Bibliometric Analysis Writing Workshop for Beginners

The workshop was held from 21-22 October 2024 at the NIH. A total of 26 officers from IHBR participated in this session, received initial exposure to bibliometric analysis and hands-on training with the software biblioMagika®, VOSviewer, and Biblioshiny.





Image 6.75 Bibliometric Analysis Writing Workshop for Beginners

7 ORAL HEALTH

ORAL HEALTH PROGRAMME (OHP)

The OHP MOH is committed to improving oral health for a better quality of life for Malaysians. This is achieved through strategic initiatives and active collaboration between public and private sector agencies in promoting oral health. Led by the Deputy Director-General of Health (Oral Health) [TKPK (KP)], OHP comprises three (3) divisions: the Oral Health Policy and Strategic Planning Division, the Oral Healthcare Division as well as the Oral Health Practice and Development Division. Supported by 13 branches, these divisions work together to achieve OHP's KPIs for the well-being of the people. OHP is also actively involved in domestic and international activities to advance the oral health agenda.

A HISTORIC MILESTONE FOR GLOBAL ORAL HEALTH: THE BANGKOK DECLARATION 2024

From 26-29 November 2024, the WHO, in collaboration with the Government of Thailand, hosted the first-ever Global Oral Health Meeting in Bangkok. This event brought together health leaders, policymakers, civil society organizations and private sector representatives from over 100 countries to address critical oral health issues. The Bangkok Declaration 2024 is a call to action for the global health community. It is a collaborative effort toward a future where *No Health Without Oral Health* becomes a reality for all by 2030. Oral health is now recognised as a critical part of overall health. Key highlights from The Bangkok Declaration 2024 are:

- Adoption of the Bangkok Declaration a bold commitment to integrate oral health into Universal Health Coverage (UHC) and Non-Communicable Diseases (NCD) frameworks by 2030.
- ii. Advancing the Global Oral Health Action Plan (2023-2030) through shared global strategies.
- iii. High-level engagement with ministers, WHO Regional Directors and global organisations like International Dental Federation (FDI), International Association for Dental Research (IADR) and Global Self-Care Federation (GSCF) to tackle oral health challenges collaboratively.





Image 7.1 WHO Global Oral Health Meeting 2024

MALAYSIAN DENTAL COUNCIL (MDC)

2024 marked the conclusion of the three (3) years transitional period following the gazettement of the Dental Act 2018 [Act 804], which came into force on 1 January 2022. This milestone represented a critical step towards the full enforcement of the act, providing clarity and structure to the regulatory framework governing dental practice in Malaysia.

REGULATION OF DENTAL PRACTICE

The Dental Act 2018 requires only qualified, competent and professional practitioners to be registered and eligible to provide dental services in Malaysia. This guarantees the quality of dental services and patient safety, as well as increases people's confidence and trust in dental services. A summary of applications approved by the MDC for 2024 is shown in **Table 7.1**.

Table 7.1 Applications Approved by MDC 2024

Type of Application	Total
Registration as Dental Surgeon	788
Registration as Dental Specialist (12 specialties)	212
Annual Practising Certificate	14,113
Temporary Practising Certificate	187
Letter of Good Standings	161

KEY INITIATIVES AND ENGAGEMENTS

In 2024, the MDC undertook several key initiatives to enhance professional standards and engagement. One major focus was the preparation for the Professional Qualifying Examination (PQE). To support this, the MDC held a PQE Examiner Training Workshop on 8-9 March 2024 to prepare qualified assessors. A pilot Part II PQE was conducted on 22 March 2024 at IMU University, involving final-year dental students. Feedback from the pilot helped improve the examination framework. Comprehensive guidelines and handbooks for candidates and examiners were also developed to align the PQE with the Competencies of New Dental Graduates, Malaysia (v2 2021).



Image 7.2 Part II PQE Pilot Implementation



Image 7.3 PQE Examiner Training Workshop

The MDC also participated in the 31st Malaysian Dental Association Scientific Convention and Trade Exhibition 2024 (MDA SCATE 2024) as an opportunity to guide practitioners on the newly introduced Malaysian Healthcare Practitioners' System (MHPS) for Annual Practicing Certificate online applications as well as the myCPD system. On 9 August 2024, the MDC hosted its inaugural live webinar on Facebook on the critical topic of Professional Indemnity Cover for Practising Certificate Applications with significant traction from dental practitioners.



Image 7.4 Exhibition Booth on 31st MDA SCATE 2024



Image 7.5 Professional Indemnity Cover for Practising Certificate
Applications Webinar

MALAYSIAN DENTAL THERAPIST BOARD (LJPM)

Until 2024, a total of 3,049 dental therapists were registered with the Board. All registered dental therapists must be in possession of a current Annual Practising Certificate (APC) to legally practice. From that total, 2,974 dental therapists are still actively practicing dentistry, of which is 2,969 were issued to practitioners in the public sector while five (5) in the private sector. This includes 208 post-basic dental therapists in various disciplines, namely Oral and Maxillofacial Surgery (7), Paediatric Dentistry (65), Orthodontics (63) and Periodontics (73).

Table 7.2 **Annual Practicing Certificate of Dental Therapists 2024**

Year	Public Sector			Private	Grand
Teal	МОН	Non-MOH	Total	Sector	Total
2024	2,889	80	2,969	5	2,974

3RDNATIONALORALHEALTHRESEARCHINITIATIVE (NOHRI) CONFERENCE 2024

The NOHRI Conference is an annual event hosted on a rotation basis among dental institutions represented in the Executive Committee NOHRI. The 2024 NOHRI Conference, the third edition of the event was co-organised by the OHP and the Malaysian Association of Dental Public Health Specialists (MADPHS). Held from 5-7 September 2024 at Putrajaya, themed Precision Dentistry: Unveiling the Future Through Data-Driven Insights. The event featured a keynote address by the DG and was officially inaugurated virtually by the Minister of Health. The conference aimed to promote the exchange of ideas and advancements in oral health research, focusing on theories, approaches, perspectives and practices to further the national oral health research agenda.



3rd National Oral Health Research Initiative (NOHRI) Conference 2024 Image 7.6

33RD & 34TH ASEAN JOINT COORDINATING COMMITTEE ON DENTAL PRACTITIONERS (AJCCD)

The AJCCD plays a crucial role in strengthening regional cooperation through the development of a Mutual Recognition Arrangement (MRA) for dental practitioners. This formal agreement facilitates the mutual recognition of professional qualifications across member countries, promoting greater professional mobility within the ASEAN region. The 33rd AJCCD Meeting, held on 27 February 2024 in Bandung, Indonesia and the 34th AJCCD Meeting, convened on 22 October 2024 at the ASEAN Secretariat in Jakarta, highlight the ongoing commitment of ASEAN Member States to advancing their collaborative efforts. The OHP actively participates in these meetings to ensure that the outcomes align with Malaysia's policies and priorities, maximizing the benefits for the country's dental sector.

ACCREDITATION OF DENTAL PROGRAMME

OHP is dedicated to upholding the highest standards of professionalism in dental practice with the establishment of Code of Practice for Programme Accreditation (COPPA) documents as a reference for the standards of dental programmes. These documents aim to inform the policies and principles that guide judgments and decisions on accreditation.

On 23 May 2024, the MDC endorsed the COPPA-Postgraduate Dental Programme (PG Dental) document, which will serve as the primary reference for the Panel of Assessors and Higher Education Providers (HEPs) during the accreditation process of Dental Specialty Programmes. Following the endorsement of COPPA-PG Dental, OHP in collaboration with the Malaysian Qualifications Agency (MQA), conducted a workshop for the Panel of Assessors, comprising dental specialists from the MOH, the Ministry of Higher Education (MOHE) and the Ministry of Defence (MINDEF). Held from 7-9 October 2024, the workshop introduced and explained the new COPPA-PG Dental, focusing on meeting the standards and compliance criteria set by the MQA for recognized postgraduate dental programmes.





Image 7.7 33rd & 34th AJCCD Meetings

Image 7.8 COPPA-PG DENTAL Workshop

ADDITIONAL PERMANENT POSTS FOR DENTAL OFFICER AND DENTAL SPECIALIST

The Ministry of Finance, through Staffing Warrant S131 for the Year 2024, has approved the creation of 1,500 additional positions for Medical Officers, Dental Officers, and Pharmacy Officers to support the operational needs of existing healthcare facilities under MOH. From this total, 200 positions have been approved for the Dental Officer Scheme. Additionally, 145 more positions have been approved for newly established and upgraded dental facilities commencing operations in 2024. The addition of these new Dental Officer positions will, indirectly, enable the permanent appointment of a greater number of contract-appointed Dental Officers.

Furthermore, through Staffing Warrant S178 for the Year 2024, the Ministry of Finance has also approved the creation of 70 additional Dental Specialist positions to meet the needs and operations of existing dental facilities under the MOH. The allocation of these positions takes into consideration facilities requiring additional specialists due to service expansion, as well as specialists currently serving in general dental officer roles. Additionally, 36 more Dental Specialist positions have been approved for newly established and upgraded dental facilities that has commenced operations in 2024.

Table 7.3 Additional Permanent Posts for Dental Officer and Dental Specialist 2024

Post Facility	Hospital	Dental Specialist Centre	Dental Clinic	Oral Health District Office	Other Facilities	Total
Dental Specialist	58	7	37	3	1 a	106
Dental Officer	28	-	316	-	1 b	345

Notes:

- 1. a Institute for Medical Research
- 2. b Pusat Pergigian Kanak-Kanak and Institut Latihan Kementerian Kesihatan Malaysia

ADDITIONAL POSTS FOR THE DENTAL AUXILIARIES

The Ministry of Finance, through eight (8) establishment warrants for the year 2024, has agreed to approve the creation of new positions and the addition of various service schemes and grades to accommodate the needs and operations of new and upgraded facilities in the MOH, which are expected to be completed in 2023 and 2024. The distribution of these new positions is based on current requirements and the operational status of the involved facilities. A total of 540 new and additional dental auxiliary positions were secured in 2024 for new and upgraded facilities. The distribution of these positions based on the approved schemes is as follows:

Table 7.4 Positions According to the Accepted Scheme 2024

Post Facility	Hospital	Dental Specialist Centre	Dental Clinic	Total
Dental Therapist	18	5	45	68
Dental Technologist	14	2	32	48
Dental Surgery Assistant	93	25	155	273
Healthcare Assistant	23	5	47	75
Admin Assistant	10	4	13	37
General Assistant	0	1	9	10
X-Ray Technician	0	1	0	1
Driver	1	1	26	28

PATIENT SAFETY SYMPOSIUM 2024

OHP organised the Patient Safety Symposium 2024 on April 30, 2024, with the theme *Think Safety, Act Safely*. It was held at the RTM Perak Auditorium and broadcast via Facebook Live for online viewing. The symposium aimed to discuss issues related to incident reporting cases at MOH dental facilities. The *Guidelines for Medical Emergency Management in Primary Dental Clinics and Non-Hospital Based Dental Specialties*, published by the Perak Oral Health Division was launched during this event. A total of 170 participants involved in the symposium, consisting of members of the *Jawatankuasa Dasar dan Perancangan Kesihatan Pergigian* and oral health personnel from Perak and Pulau Pinang.





Image 7.9 Patient Safety Symposium 2024

ORAL HEALTH PAIN FREE SYMPOSIUM 2024

OHP hosted the Oral Health Pain-Free Symposium 2024 on 4 July 2024, at the National Cancer Institute Auditorium in Putrajaya with the theme *Revolutionizing the Pain Free Dentistry*. The symposium was officiated by the Director of the Dental Health Practice and Development Division representing the TKPK (KP) and was attended by 200 oral health professionals nationwide. The symposium aimed to increase knowledge about pain assessment and management as part of the delivery of oral health services and treatments provided by oral health professionals.





Image 7.10 Oral Health Pain Free Symposium 2024

ORAL HEALTH PROGRAMME QUALITY CONVENTION 2024

The Oral Health Programme Quality Convention 2024 was held on 24-25 June 2024, at Hotel H Elite in Kota Bharu, Kelantan. This convention aimed to equip participants with valuable exposure and experience as early preparation for advancing their projects to the national-level competition. A total of 37 projects were showcased during the event, comprising 15 in the Innovation category, eleven (11) in the Quality Assurance (QA) category and eleven (11) in the Kumpulan Inovasi dan Kreatif (KIK). One of the key highlights of the convention was a talk titled Inovasi vs. Kerja Hakiki: Antara Realiti dan Fantasi, presented by a pharmacist from KK Pengkalan Chepa, Kelantan.



Image 7.11 Oral Health Programme Quality Convention 2024

DEVELOPMENT PROJECTS UNDER MALAYSIA PLAN

In 2024, there were eight (8) health clinic development projects with oral health components that were completed and finished construction:



KK (Type 2) Bandaraya Miri, Sarawak



Klinik Pergigian Tanjung Karang, Selangor



Hospital Dungun, Terengganu



KK (Type 3) Kepala Batas, Kedah



KK (Type 3) Kota Putera, Terengganu



Kompleks Wanita dan Kanak-kanak di Hospital Kajang, Selangor





Hospital Tawau, Sabah

KK (Type 4) Rompin, Negeri Sembilan

Image 7.12 Health Clinic Development Projects 2024

DENTAL CLUSTER SERVICES

Two (2) series of workshops on the *Model of Good Practice and Credentialing & Privileging* for MOH Specialist Dental Cluster Services were conducted on 5-7 February 2024 and 4-5 March 2024. These workshops benefited various technical input and experience from the Medical Development Division. The *Garis Panduan Perkhidmatan Kluster Pergigian KKM* and *Garis Panduan Credentialing and Privileging Perkhidmatan Kluster Pergigian KKM* were successfully developed and presented at *Bengkel Tatacara Pelaksanaan Konsep Kluster Antara Hospital, Perkhidmatan Kesihatan Primer dan Pergigian KKM* on 7-8 August 2024 at Putrajaya International Convention Centre (PICC). By 2024, 33 dental cluster services were expanded across ten (10) states including Kedah, Pulau Pinang, Perak, Selangor, Melaka, Johor, Pahang, Terengganu, Sabah and Sarawak. Dental cluster services involved 14 Oral Maxillofacial Surgery (OMFS), 12 Pediatric Dentistry, six (6) Periodontics and one (1) Restorative Dentistry.





Image 7.13 Tatacara Pelaksanaan Konsep Kluster antara Hospital, Perkhidmatan Kesihatan Primer dan Pergigian Workshop

LEASING OF CONE BEAM COMPUTED TOMOGRAPHY (CBCT) WITH ORTHOPANTOMOGRAM (OPG) CAPABILITY

OHP had benefited 19 units CBCT with OPG Capability machine for 19 hospitals across 12 states for a period of five (5) years started on 1 December 2024. CBCT with OPG Capability machine is evolving 3D diagnostic tool that plays an integral role throughout the patient care pathway, allowing more accurate and informed diagnosis and treatment planning for patients.



Image 7.14 CBCT with OPG Capability Machine

DENTAL INFORMATION SYSTEM (DIS)

In strengthening the healthcare ecosystem through the strategy of 1 individual: 1 health record, OHP has decided to use Dental Information System (DIS) as the main system for management of oral health in all MOH dental facilities. This system consists of four (4) main subsystems:

i. Patient Management (DIS:Clinical)

A comprehensive (end-to-end) patient management system at dental clinics, which includes patient registration, clinical documentation and reporting management, in which it was developed on the existing Gi-RET 2.0 system.

ii. Facility and Human Resource Management (DIS: Resource)

It manages facilities (including dental equipment such as dental chairs and others) and human resources at dental clinics other than dental practitioners.

iii. Dental Practitioner Management (DIS:Practitioner)

A system for managing dental practitioners, including Dental Specialists, Dental Officers and Dental Therapists, all of whom are regulated by the MDC.

iv. National Dental Health Survey Management (DIS:Survey)

A system for managing dental health surveys at national level, on top of current manual reporting method.

DIS: CLINICAL PILOT PROJECT IN MELAKA

The pilot project for DIS:Clinical was conducted in 12 primary dental clinics in Melaka from July to November 2024. The scope of this project includes modules for registration, dental charting, clinical documentation, billing and access to clinical documents across facilities. A total of 42,782 patients were recorded through DIS:Clinical during the project was conducted. In summary, 87.30% of respondents consists of dental personnel agreed with the implementation of the DIS:Clinical system and 98.70% of respondents understood their roles and responsibilities in ensuring the success of the DIS:Clinical system at their respective clinics.

EXPANSION OF DIS: CLINICAL IN 2024

On 1 December 2024, DIS:Clinical system was expanded to 18 primary dental clinics in Johor and nine (9) primary dental clinics in Melaka. The expansion of DIS:Clinical to 37 primary dental clinics is expected to be implemented in 2025.

COLLABORATION WITH THE ROYAL MALAYSIA POLICE (PDRM)

From 10-13 June 2024, the OHP had organised the *Intipan, Risikan dan Serbuan bagi Pegawai Diberi Kuasa* Course under the Dental Act 2018 [Act 804] in collaboration with the Criminal Investigation Department of the PDRM at Jerai Hotel, Kedah. In addition to lectures, course participants also carried out activities on surveillance and raids at four (4) locations based on complaints suspected to violate Act 804. Participants were exposed to technical aspects, ethical codes and the importance of comprehensive cooperation among various enforcement agencies.



Image 7.15 Hands-on Training (The *Intipan, Risikan dan Serbuan bagi Pegawai Diberi Kuasa* Course)

ENGAGEMENT SESSION WITH E-COMMERCE PLATFORMS

OHP held an engagement session with Shopee and Lazada Malaysia on 3 July 2024. During this meeting both e-commerce platforms agreed to collaborate in removing advertisements for the online sale of dental products that breach Section 63(3)(c) of the Act 804. This engagement aims to clarify the Screening Procedure for Online Dental Equipment Sales, which is set to take effect on 1 January 2025. The initiative seeks to combat illegal dental practices and ensure that the dental equipment sold online is safe for use by dental professionals and supplied by registered suppliers.



Image 7.16 Engagement Session with Shopee and Lazada Malaysia

FABRICATION OF DENTURE USING 3D DIGITAL TECHNOLOGY IN PRIMARY DENTAL CLINICS

In 2024, OHP acquired ten (10) sets of 3D printing equipment to be used in selected dental clinics. This technology revolutionises denture fabrication by scanning patients' mouths and creating precise dentures. This streamlined process promises faster treatment times, improves denture quality and enhances accessibility, in which demonstrating MOH's commitment for innovation in oral healthcare delivery.

Table 7.5 Dental Clinic with 3D Printing Equipment

State	District	Dental Clinic
Selangor	Klang	Klinik Pergigian at Klinik Kesihatan Bandar Botanik
Sarawak	Kuching	Klinik Pergigian at Klinik Kesihatan Jalan Masjid
Perak	lpoh	Klinik Pergigian Ipoh
Kelantan	Kota Bharu	Klinik Pergigian Kota Bharu
Johor	Johor Bahru	Klinik Pergigian at Klinik Kesihatan Ulu Tiram
Sabah	Sandakan	Klinik Pergigian at Klinik Kesihatan Sandakan
Kedah	Kota Setar	Klinik Pergigian Sungai Petani
Terengganu	Kuala Terengganu	Klinik Pergigian at Klinik Kesihatan Chendering
FT Kuala Lumpur	Zon Titiwangsa	Klinik Pegigian at Klinik Kesihatan Kuala Lumpur
Pulau Pinang	Seberang Perai	Klinik Pergigian at Klinik Kesihatan Bukit Minyak





Image 7.17 Denture Fabrication Using 3D Printing Technology

ENHANCING REFERRAL OF TYPE 2 DIABETES MELLITUS (T2DM) PATIENTS FOR EARLY PERIODONTAL DISEASE DETECTION AND PREVENTION

The Clinical Practice Guidelines (CPG): Management of Type 2 Diabetes Mellitus (6th Edition) have reported the established relationship between diabetes and periodontal disease, recommending referrals from healthcare facilities to dental practitioners for comprehensive patient care. Initiated as a proof of concept (PoC) in eight (8) combined KK and dental clinics in 2023, this programme was expanded to 69 dental clinics nationwide in 2024 through collaboration with the respective state Public Health Division. This expanded initiative facilitates the early detection and management of periodontal disease, thereby potentially improving the quality of life for individuals with diabetes.

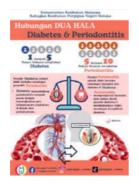




Image 7.18 A Poster and Implementation of Periodontal Screening for Diabetic Patients at KK

SCHOOL-BASED FLUORIDE MOUTH RINSING (FMR) PROGRAMME

The FMR programme implemented in schools has proven to be effective, practical and cost-efficient in preventing and reducing dental caries among primary schoolchildren. The programme launched in 2023 with the participation of 70 schools and expanded to 122 schools in 2024. It focuses on Standard 1 students in selected schools and will continue for five (5) years until these students complete their primary education.



Image 7.19 Caries Prevention Programme for Primary Schoolchildren

IMPLEMENTATION OF TRAINING FOR MEDICAL ORDERLY (DENTAL) OF THE MALAYSIAN PRISONS DEPARTMENT

OHP has initiated a collaboration with the *Jabatan Penjara Malaysia* to introduce specialised training for members of the department to serve as Medical Orderly (Dental), aimed at improving oral healthcare services in prisons nationwide. This initiative helps address the shortage of Dental Surgery Assistants, thereby streamlining the treatment process. The training implementation includes a theoretical training for Medical Orderly (Dental) course from 10-14 June 2024, involving 60 prison staffs from across the country, conducted at the Malaysian Prisons Headquarters in Kajang. A total of five (5) intensive training modules, covering 15 sub-modules, were delivered. Speakers included dental personnel from JKN Selangor, FT of Kuala Lumpur & Putrajaya and Negeri Sembilan.

JOM HEBOH TV3 CARNIVAL: COLLABORATION WITH MEDIA PRIMA BERHAD

OHP participated in the TV3 *Jom Heboh* Carnival (KJH) organised by Media Prima Berhad in six (6) states in 2024 which are FT Kuala Lumpur & Putrajaya, Melaka, Sarawak, Pulau Pinang, Terengganu and Johor. Activities conducted included dental screening and basic treatment services using the Mobile Dental Clinic, health talks, exhibitions, flash mobs, rhythmic *Latihan Memberus Gigi*, stage performances and interactive games. The programme attracted 30,584 visitors of various age groups, with 4,465 visitors receiving dental health screenings.





Image 7.20 OHP Activities at Jom Heboh TV3 Carnival

KONVENSYEN IKON GIGI (iGG) PERINGKAT KEBANGSAAN 2024

The National iGG Convention 2024 was held on 27-28 September 2024 in Ayer Keroh, Melaka, with the participation of 121 delegates, comprising 64 iGG members and 57 facilitators. The event was officiated by the Health and Human Resources Exco of Melaka. Key activities during the convention included the iGG Adventure Challenge, iGG OHSEM (*Tokoh* iGG) and the Teaching Materials Innovation Competition.





Image 7.21 National iGG Convention 2024

MOUTH CANCER AWARENESS MONTH (MCAM) 2024

The Closing Ceremony of MCAM was held in Kota Samarahan, Sarawak on 25 February 2024 and was officiated by the TKPK (KP), representing the DG. The event also featured the launch of the pilot project Mobile Mouth Screening Everywhere (MeMoSA), a mobile application for oral cancer screening which currently being implemented in Sarawak by Cancer Research Malaysia (CRMY). Exhibitions were also held by other agencies alongside dental health screenings by the Sarawak Oral Health Division.





Image 7.22 Mouth Cancer Awareness Month (MCAM) 2024

TRAINING OF TRAINERS (ToT) FOR CLINICAL PRACTICE GUIDELINES (CPG)

The Oral Health Technology Section conducted its first-ever ToT sessions in 2024 for two (2) CPGs, the Management of Anterior Crossbite in Mixed Dentition (3rd Edition) and the Management of Hypodontia (2nd Edition). These ToTs were conducted on 28 February 2024 and 2 April 2024 at the IPKKM involved specialists from all states. Participants attended lectures, case discussions and workshops focused on updates, diagnostics, treatment planning and patient management.





Image 7.23 Training of Trainers (ToT) for CPG

LAUNCHING CEREMONY FOR CLINICAL PRACTICE GUIDELINES (CPG)

The CPG for the Management of Anterior Crossbite in Mixed Dentition (3rd Edition) and Management of Hypodontia (2nd Edition) were launched on 22 October 2024 in Kuala Lumpur, officiated by the Director of the Policy and Strategic Planning Division of Oral Health, representing the TKPK (KP). These evidence-based guidelines reflect the MOH's commitment to delivering high-quality care, enhancing treatment outcomes, standardising dental practices and managing complex cases more effectively.





Image 7.24 Launching Ceremony for CPG



CHAPTER PHARMACY

INTRODUCTION

The Pharmaceutical Services Programme is a programme in the MOH which is responsible for ensuring that the public gets access to safe, efficacious and quality pharmaceutical products, protecting their interest via the enforcement of relevant legislation, and ensuring rational use of medicines by both healthcare providers and patients. Five (5) divisions are under the purview of the Deputy Director-General of Health (Pharmaceutical Services). The divisions are as follows:

- i. Pharmacy Policy and Strategic Planning Division
- ii. Pharmacy Practice and Development Division
- iii. Pharmacy Enforcement Division
- iv. National Pharmaceutical Regulatory Agency
- v. Pharmacy Board Malaysia Division

REGISTERED PHARMACIST IN MALAYSIA

There are a total of 21,796 registered pharmacists renewing their annual certificate for 2024, according to their sector of practice as follows:

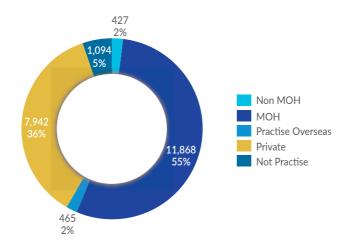


Figure 8.1 Registered Pharmacists According to Sector of Practice 2024

MEDICINES PROCUREMENT AND EXPENDITURE

The total cost of medicines procured for all MOH hospitals, institutions and health clinics was RM3,455.41 million. This expenditure is 4.44% higher compared to the expenditure in 2023. Approved Products Purchase List (APPL) medicine expenditure through the concessionaire company was RM1,330.25 million (38.50%), MOH contract at the expense of RM1,275.09 million (36.90%) and direct purchase and quotations at the expense of RM850.06 million (24.60%).

DISPENSING OF MEDICINES IN HOSPITALS AND HEALTH CLINICS

For 2024, 14.80 million inpatient prescriptions were received in hospitals. The total number of outpatient prescriptions received in the MOH healthcare facilities was 61.6 million.

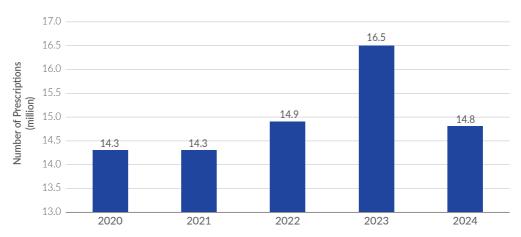


Figure 8.2 Inpatient Prescriptions Received from 2020-2024

The pharmacy department has taken the initiative by implementing Pharmacy Value Added Services (VAS) to improve the management of follow-up medication supply to patients in MOH health facilities since 2003. Various VAS are offered, including the Ubat Melalui Pos (UMP), Farmasi Pandu Lalu, Lokar Ubat and Pembekalan Ubat Susulan Melalui Pihak Ketiga (UM3). In 2024, 19.10% of partial prescriptions were dispensed to patients through VAS.

Since 2020, the MyUBAT application has been developed to facilitate patients' subscription of VAS. In addition, this application also helps pharmacy staff manage the registration process and the preparation of partial prescriptions at the pharmacy more systematically.

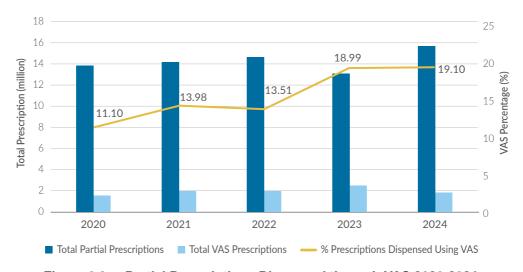


Figure 8.3 Partial Prescriptions Dispensed through VAS 2020-2024

STATUS OF TRAINING CENTRES AND PRECEPTORS

A short-term attachment training programme for pharmacy officers has been established to ensure that pharmacy officers can provide high-quality pharmaceutical care services that meet the standards set by the Pharmacy Practice and Development Division.

As of December 2024, there are 60 active facilities, with nine (9) new training centres (49 hospitals or institutes and eleven (11) health clinics) involving 199 training centres and 247 preceptors. The addition of nine (9) training centres covers specialised fields such as Emergency Pharmacy, Antimicrobial Stewardship, Ward Pharmacy, Diabetes Pharmacy, Nephrology Pharmacy, Parenteral Nutrition, Oncology Pharmacy and Clinical Pharmacokinetics.

LISTING OR AMENDMENT TO THE MOH MEDICINES FORMULARY (MOHMF)

MOHMF is a list of medicines approved for use in all MOH facilities, which guides MOH healthcare professionals in determining medicines for patient treatment. Applications to list or amend the MOHMF are tabled in the MOHMF Panel meeting, which convenes three (3) times a year. The Pharmacy Practice and Development Division is responsible for processing and evaluating the applications for listing or amendment to MOHMF.

There are 1,650 preparations comprising 864 chemical entities listed in the MOHMF as of December 2024.

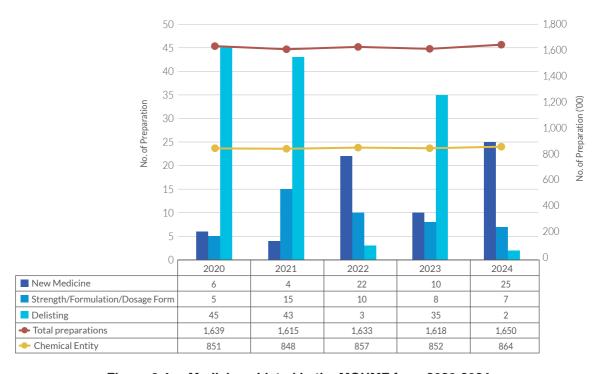


Figure 8.4 Medicines Listed in the MOHMF from 2020-2024

SPECIAL APPROVAL MEDICINES (SAM)

Special approval is required to obtain and use registered medicines (for medicines or indications not listed in the MOHMF) as well as unregistered medicines with the Drug Control Authority (DCA) in healthcare facilities under the MOH. Applications for SAM are considered as alternative treatment options, prioritising the use of registered medicines listed in the MOHMF.

In 2024, 11,479 SAM applications were received for use in MOH facilities (including APPL and MOH contract medicines), of which 10,370 (90.34%) applications were approved. The estimated cost associated with these approvals amounted to RM241.18 million. Additionally, the Formulary Management Branch processes SAM applications from non-MOH healthcare facilities, including those under the MOHE, Ministry of Defence (MINDEF), National Heart Institute (IJN) and private healthcare institutions. A total of 5,553 applications were received from non-MOH facilities, with 4,823 (86.85%) applications approved. The estimated cost for these approvals was RM269.34 million.



Figure 8.5 SAM Approvals for 2020-2024

PROPOSAL FOR THE IMPLEMENTATION OF MEDICINE PRICE DISPLAY INITIATIVES IN PRIVATE HEALTHCARE FACILITIES AND COMMUNITY PHARMACIES UNDER THE PRICE CONTROL AND ANTI-PROFITEERING ACT 2011 [ACT 723]

The Medicine Price Transparency Mechanism (MKHU) was presented at the National Action Council on Cost of Living meeting, chaired by the Prime Minister, on 3 October 2023. Following this, the Prime Minister announced the government's commitment to ensuring greater transparency in the sale of medicines through a price display mechanism. The objective is to enable the public to know the prices they need to pay, compare prices and make informed

decisions to obtain medicines at reasonable and affordable prices. In line with this, the MOH is actively conducting engagement sessions and public consultations to provide information and gather feedback from stakeholders regarding the Medicines Price Display in Private Healthcare Facilities and Community Pharmacies initiative.

PUBLIC CONSULTATION SESSION

A public consultation was held from 15 July 2024 to 20 August 2024 via the Unified Public Consultation (UPC) platform to gather broader feedback through a survey. The survey covered questions regarding participants' support for the implementation of the medicines price display initiative, its anticipated impact, and the estimated costs for stakeholders involved in its execution. The UPC received 6,999 views, and 459 respondents provided feedback. Overall, 350 (76.25%) respondents agreed with the proposed Medicine Price Display Initiative, with the majority of those in favour being consumers and public agencies.



Image 8.1 Public Consultation Session

STAKEHOLDER ENGAGEMENT SESSION

Several engagement sessions have been conducted since 2023, with the most recent session held on 13 August 2024 at the JAKIM Auditorium in Putrajaya. This session involved various stakeholders, including consumers or patients, insurance providers, the pharmaceutical industry, community pharmacies, service providers for private medical clinics, private dental clinics, private hospitals and others. The session was attended by 472 participants, both in person and online. Based on the feedback, 67 (63.81%) of 105 participants agreed with implementing the Medicine Price Display Initiative.





Image 8.2 Stakeholder Engagement Session

INITIATIVE FOR THE DISPOSAL OF UNUSED PATIENT MEDICINES FOR ENVIRONMENTAL SUSTAINABILITY (MyMedisafe)

The Pharmaceutical Services Programme has introduced MyMediSAFE, an initiative to educate the public on the proper and safe disposal of unused medicines. The purpose of implementing MyMediSAFE is to prevent health risks to humans arising from pharmaceutical waste, mitigate antimicrobial resistance issues, and ensure environmental sustainability. MyMediSAFE was officially launched by the Deputy Minister of Health on 25 September 2024 at Putrajaya.

MyMediSAFE is a public-private synergy involving various organisations. As of December 2024, 33 strategic partners have joined MyMediSAFE, including associations related to the pharmaceutical field, private hospitals, community pharmacies, university hospitals, pharmaceutical companies, medication disposal service providers and companies involved in health advertising.

As of December 2024, 854 medication collection centres have been identified nationwide, comprising 149 MOH hospitals and 705 non-MOH facilities. The locations of these medication collection centres can be checked via the website https://www.mymedisafe.org.my/.



Image 8.3 Launching of MyMediSAFE

TOLAK UBAT TIDAK SAH (TOBATS) CAMPAIGN

The issue of unregistered, fake and substandard medicines in the market is a growing concern for public health globally. In 2017, the WHO estimated that in low and middle-income countries, at least one in ten medicines are substandard or falsified. This problem can lead to serious health risks, such as treatment failure and dangerous adverse effects, which may even result in death. MOH has taken various proactive and reactive measures to address this issue and raise public awareness.

The TOBaTS campaign was officially launched by the Minister of Health on 20 November 2024. The main objectives of this campaign are to raise public awareness, particularly among consumers and stakeholders, about the dangers and risks associated with using illegal medicines, the advertising of medicines without approval and to ensure that consumers obtain their medications only from legitimate sources.

The category of illegal medicines referred to in this campaign includes five (5) main types of offences frequently detected by the Pharmacy Enforcement Division, which are:

- i. Medicines not registered with the MOH
- ii. Falsified or counterfeit medicines
- iii. Medicines mixed with prohibited substances or poisons
- iv. Medicines obtained from illegal sources
- v. Medicines imported without the approval of the MOH

As part of this campaign, 1,819 awareness activities nationwide were carried out throughout 2024 by the Pharmacy Enforcement Division. These activities included engagements, talks, exhibitions and dialogues with stakeholders, interviews on radio and television stations, as well as dissemination through digital platforms, involving the official portal of the Pharmaceutical Services Programme at https://pharmacy.moh.gov.my/tobats and official social media platforms such as Facebook, Instagram and TikTok (@sdbb_official), in line with current trends and developments.



Image 8.4 Official Launch of the TOBaTS Campaign



Image 8.5 Activities of the TOBaTS Campaign

APPRECIATION FROM REACT ORGANISATION

React is a not-for-profit global organisation with over 30 years of experience combating counterfeit goods, along with 350 business members across all industries. This organisation has two (2) main functions:

- Supporting members in their anti-counterfeiting strategies by providing online and market customs enforcement services at non-commercial fees
- ii. To support activities to protect all rights holders, consumers and governments against the negative consequences of the trade in counterfeited goods

Each year, React conducts Regional Training and Product Introduction Workshops for enforcement agencies and their members. Since 2022, the Pharmacy Enforcement Division has been invited to participate in the discussion panel for these training sessions.

This year, React recognised the Pharmacy Enforcement Division during the Regional Training Session and Product Identification Workshop held in Luang Prabang, Laos. This recognition was awarded for the division's efforts in combating illegal pharmaceutical products. These efforts include conducting investigations and enforcement activities, addressing counterfeit pharmaceutical products online through access restrictions, monitoring e-commerce platforms, tackling product diversion and conducting awareness programmes.





Image 8.6 Appreciation to the Pharmacy Enforcement Division by the React Organisation in Laos

12TH NATIONAL PHARMACY RESEARCH AND DEVELOPMENT CONFERENCE

The 12th National Pharmaceutical Research and Development Conference successfully took place on 19-21 August 2024, with the theme *Unity for Medicine Security: Collaborative Solutions for a Safer Future.* This prestigious event brought together over 400 participants, including pharmacists, representatives from the pharmaceutical industry, academics and researchers in the pharmaceutical field.

The opening ceremony was officiated by the Minister of Health. The keynote address, titled *Prescription for Progress: Charting the Path Forward for Medicine Security in Malaysia*, was delivered by the TKSU (K). The conference featured forums and several symposia addressing current issues related to medicines security. Speakers from ASEAN countries were invited to share their experiences, insights and national achievements. Additionally, 73 studies were presented orally, while another 58 were showcased as posters. All abstracts were published in the Pharmacy Research Reports Volume 7, Supplement Issue, August 2024.



Image 8.7 The 12th National Pharmacy Research and Development Conference

27^{TH} PIC/S EXPERT CIRCLE MEETING ON HUMAN BLOOD, TISSUES, CELLS AND ADVANCED THERAPY MEDICINAL PRODUCTS (ATMPs)

The 27th PIC/S Expert Circle Meeting on Human Blood, Tissues, Cells and Advanced Therapy Medicinal Products (ATMPs) took place from 20-22 August 2024 in Kuala Lumpur. This significant event brought together regulatory authorities and inspectors of Good Manufacturing Practice from various member countries of the Pharmaceutical Inspection Co-operation Scheme (PIC/S) to discuss contemporary issues and share experiences related to the inspection and regulation of blood components, tissues, cells and ATMPs. The meeting aimed to enhance collaboration among participating authorities and improve the consistency of inspections across different jurisdictions.

Key topics discussed during the meeting included the latest updates on guidelines for blood establishments and ATMP manufacturing sites. The meeting also facilitated knowledge exchange regarding modern inspection approaches, emphasising the importance of adapting regulatory practices to keep pace with advancements in medical technologies.



Image 8.8 The 27th PIC/S Expert Circle Meeting on Human Blood, Tissues, Cells and ATMPs

SIGNING CEREMONY FOR THE RENEWAL OF THE MOU BETWEEN THE GOVERNMENT OF MALAYSIA AND THE HEALTH SCIENCES AUTHORITY (HSA) OF SINGAPORE FOR COOPERATION IN THE PHARMACEUTICAL REGULATORY FIELD

The signing ceremony for the Renewal of the MoU between the Government of Malaysia, represented by the MOH, and the Health Sciences Authority (HSA) of Singapore for cooperation in the pharmaceutical regulatory field took place on 6 May 2024 at HSA, Singapore.

The MoU initially signed on 28 March 2012, was effective for five (5) years and automatically extended for another five (5) years before officially ending on 28 March 2022. The renewal of this memorandum facilitates the exchange of pharmaceutical regulatory information between the two agencies, empowering Good Regulatory Practices and enhancing the efficiency of both agencies. Among the identified areas of cooperation to be continued are regulatory control of pharmaceutical products (including issues related to registration, post-registration and enforcement) as well as clinical research activities.



Image 8.9 Signing Ceremony of the MoU between MOH and the HSA

CELEBRATION OF THE WORLD PHARMACISTS DAY 2024

The national celebration of World Pharmacists Day 2024 was held on 25 September 2024 in Putrajaya and was launched by the Deputy Minister of Health.

This celebration, themed *Pharmacists: Meeting Global Health Needs*, was attended by representatives from the MOH, the Ministry of Natural Resources and Environmental Sustainability (NRES), the pharmaceutical industry and associations, community pharmacies, private hospitals, academics and stakeholders. The purpose of the celebration is to raise public awareness about the pharmacist profession and recognise the importance of the pharmacy field in health services.

In line with the celebration theme, the Deputy Minister of Health also launched the MyMediSAFE initiative to help patients manage medicines safely and responsibly. The *Know Your Medicines*, TOBaTS and MyMediSAFE booths were set up on the celebration day to raise awareness of the MOH's initiatives in medicines management.





Image 8.10 The National Celebration of World Pharmacists Day 2024

WAY FORWARD

The Pharmaceutical Services Programme values and upholds the greatest commitment to providing ultimate pharmacy services to the public. The programme progresses in tandem with the ministerial and national directions towards enhancing the nation's health status and health awareness. The Programme is also ready to strengthen efforts to collaborate and work in hand with multiple agencies in the health sector to ensure healthcare sustainability.

CHAPTER 9 FOOD SAFETY AND QUALITY

INTRODUCTION

The Food Safety and Quality Programme (FSQP) is mandated as the competent authority for controlling national food safety and quality along the food supply chain. FSQP is responsible for protecting the public against health hazards and fraud in the storage, preparation, processing, packaging, transportation, sale and consumption of food and facilitating trade. The Food Act 1983 and its regulations form the backbone of the Food Safety Programme. The programme is headed by the TKPK (K&KM) which consists of:

- i. Policy, Strategic Planning and Codex Standard Division
- ii. Compliance and Industrial Development Division
- iii. National Centre for Food Safety
- iv. Malaysian Food Analyst Council

The main activities of FSQP include monitoring and enforcement of imported food, domestic and food premises, food export control, pre-market approval, food safety certification, food poisoning prevention, risk assessment and food surveillance, development of regulations and standards, laboratory services, labelling advisory and food safety assurance system.

28TH SESSION OF THE CODEX COMMITTEE ON FATS AND OILS MEETING (CCFO)

The meeting was held from 19-23 February 2024, during which all agendas regarding five (5) new standard proposals were approved for avocado oil, camellia seed oil, sacha inchi oil, high oleic soybean oil and calanus oil. Additionally, the meeting finalised the standards for olive oil and pomace olive oil. The success of CCFO28 was bolstered as all six (6) standards, along with two (2) new initiatives proposed by the CCFO, were approved during the 47th Session of the Codex Alimentarius Commission (CAC47). These initiatives aim to address the issues of industrial trans fatty acids and partially hydrogenated oils. The meeting was attended by 112 delegates from 36 countries and 11 international organisations.





Image 9.1 28th Session of CCFO Meeting

CELEBRATION OF WORLD FOOD SAFETY DAY 2024

The World Food Safety Day is celebrated yearly on 7 June. The celebration in 2024 was officiated by the Minister of Health via a speech video with the theme *Food Safety: Prepare For the Unexpected.*





Image 9.2 World Food Safety Day 2024

APRON WALK IN CONJUNCTION WITH WORLD FOOD SAFETY DAY 2024

The Apron Walk, in conjunction with the National World Food Safety Day 2024 celebration, was held on 19 July 2024. The Apron Walk was officiated by the DG at Anjung Floria, Putrajaya. It was also one of the activities supporting the implementation of the ANMS and was participated in by over 2,000 participants.





Image 9.3 Apron Walk 2024

CLEAN, SMOKE-FREE PREMISES PROGRAMME (BeBAs) 2024

BeBAs is a collaboration between food premises operators with government agencies, private agencies, volunteer partners, professional bodies and NGOs that emphasises the concept of community empowerment in ensuring that regulations relating to cleanliness and the ban on smoking in food premises are always complied with. BeBAs have been held in ten (10) states involving localities such as Jalan Alor, Kuala Lumpur, Port Dickson, Kuala Perlis, Pulau Perhentian, Pasar Siti Khadijah, Benteng, Kuantan and Padang Kota, Pulau Pinang. BeBAs activities include dialogue sessions with stakeholders and walkabout sessions around food premises in selected areas with the presentation of Clean and Safe (BeSS) recognition plates and no-smoking signs to food premises in the relevant areas.





Image 9.4 BeBAs 2024

THE 17TH MEETING OF THE NATIONAL FOOD SAFETY AND NUTRITION COUNCIL (NFSNC)

The NFSNC is the country's principal advisory body dealing with all matters related to food safety and nutrition. It is chaired by the Minister of Health and involves members from various Ministries and agencies, food industry associations, consumer associations, professional bodies and academia. NFSNC always works closely with various stakeholders in the country's effort to ensure that the people receive safe, wholesome and nutritious food. The 17th NFSNC Meeting was held on 2 August 2024.





Image 9.5 The 17th NFSNC Meeting

NATIONAL FOOD SAFETY CONFERENCE

With the theme *Food Safety is Everyone's Business*, this conference was organised by the International Food Safety Training Centre (IFSTC) in collaboration with the Malaysian Food Safety Association (MAFSA) as a platform for sharing knowledge on best food safety practices through policy implementation, high-level discussions, innovative solutions and impactful collaborations by local and international presenters. The conference was held on 14-15 October 2024 and was officiated by the Minister of Health.





Image 9.6 National Food Safety Conference 2024

In conjunction with this conference, *Pertandingan Anugerah Medan Selera Bersih dan Selamat Peringkat Kebangsaan* 2023/2024 was also held for the Food Court Category under local authorities and government agencies, as well as *kawasan rehat dan rawat* (R&R) and the winners are as follows:

Food Court Category under Local Authorities and Government Agencies

- i. Champion: Medan Selera Murni, Kampus Kesihatan USM, Kubang Kerian Kota Bharu, Kelantan
- ii. Runner Up: Medan Selera Melaka@Aymo, Kolej Profesional MARA Ayer Molek, Melaka
- iii. Third Place: Medan Selera Café, Kampus Bukit Besi, Terengganu

Food Court Category under R&R

- i. Champion: Medan Selera R&R Machap (Arah Utara) Kluang, Johor
- ii. Runner Up: Medan Selera R&R Paka (Arah Utara) Terengganu
- iii. Third Place: Medan Selera R&R Ayer Keroh (Arah Selatan) Melaka



Image 9.7 Anugerah Medan Selera Bersih dan Selamat Peringkat Kebangsaan 2023/2024

THE FOOD SAFETY AND NUTRITION CLUSTER MEETING

The Food Safety and Nutrition Cluster, led by the MOH and coordinated by the Secretariat of NFSNC is one of the five clusters established to support the implementation of the national food security policy, coordinated by the MAFS. A total of two (2) Consideration Papers and four (4) Information Papers were presented during the Meeting on 22 March 2024, chaired by the TKSU (P) and subsequently, two (2) papers were approved for elevation to the Executive Committee and the Cabinet Committee on National Food Security.





Image 9.8 The Food Safety and Nutrition Cluster Meeting

FOOD SAFETY INDEX DEVELOPMENT IN MALAYSIA

The development of the national food safety index is an effort to quantitatively measure and monitor food safety along the food supply chain, to identify components and controls of food safety comprehensively for continuous improvement. In 2024, a total of ten (10) engagement sessions were carried out between FSQP, the IHBR and stakeholders to form a holistic index instrument for the food safety landscape in the country.





Image 9.9 Index Development Framework Presentation Meeting 2024

RECOGNITION OF THE BEST STATE-LEVEL FOOD SAFETY AND QUALITY DIVISION (BKKM)

The recognition of the Best BKKM has been introduced since 2020 to recognise the excellence at the state-level based on the achievement in activities through the implementation of the action plans, KPIs, client charter, innovation activities and financial management in the previous year. The recognition of the Best BKKM of the Year 2023 was given to JKN Pulau Pinang, followed by JKN Kelantan in second place and JKN Perak and JKN Pahang in third place.



Image 9.10 Recognition of the Best BKKM Year 2023

FOOD ANALYSIS SERVICE

Food Safety and Quality laboratories provide food analysis services and receive samples from JKN, PKD and International Entry Points (PMA) for monitoring and enforcement activity. A total of 26,257 food samples were analysed in 2024. Of these samples, 26,187 (99.73%) achieved the prescribed Laboratory Turnaround Time (LTAT).

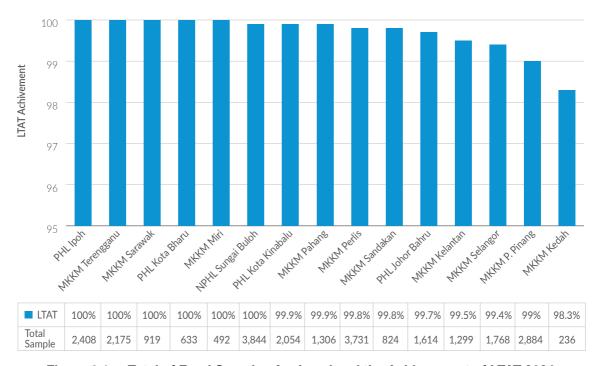


Figure 9.1 Total of Food Samples Analysed and the Achievement of LTAT 2024

FOOD SAFETY SURVEILLANCE

In 2024, surveillance activities and food safety research were conducted as follows:

1. Surveillance Planned

- i. Monitoring of total aflatoxins in dried fruits in local markets.
- ii. Monitoring of heavy metal contamination (lead and cadmium) in selected vegetables at the local market.
- iii. Monitoring of heavy metal contamination (lead and cadmium) in legumes at the local market.
- iv. Monitoring the authenticity of bee honey in the local market
- v. Monitoring of PAH (benzo (a) pyrene) contamination in margarine and spreadable fats in the local market.

2. Surveillance Active

- i. Monitoring of licensed water vending machines (MJA) for the purpose of verifying the level of compliance with the Food Regulations 1985.
- ii. Monitoring the migration of chemicals from polypropylene (PP) food packaging materials.

3. Surveillance Antimicrobial Resistance (AMR)

Monitoring the level of Salmonella and E. coli contamination as well as antimicrobial resistance (AMR) in selected food commodities in the market:

- i. meat
- ii. fish
- iii. fruits
- iv. vegetables

4. Food Safety Research

- i. Microbiological and heavy metal studies on filtered water drinks sold from private homes or premises.
- ii. Formaldehyde migration level in melamine ware sold in the market.
- iii. Ethoxyquin level status in farmed shrimp in the Penang state market.
- iv. Monitoring of microbiological status in viral ready-to-eat foods in Malacca.
- v. Unauthorised colouring (Rhodamine B) in crocodile bubble products in Kelantan.
- vi. Microbiological status in flour-coated shrimp and squid.
- vii. Pesticide content in vegetables sold in Kundasang.

EXPOSURE ASSESSMENT

A total of six (6) exposure assessments for food hazards have been conducted, namely colistin in food, lead in spices, lead and cadmium in infant formula milk, salt and white rice, lead in breakfast cereals, pesticides in fruits and vegetables and ochratoxin A in food. The findings from the exposure assessments are used as scientific evidence in setting food standards and preventive measures to ensure that actions taken are effective in safeguarding public health and facilitating food trade in the country

INTERNATIONAL FOOD SAFETY TRAINING CENTRE (IFSTC) MALAYSIA

IFSTC Malaysia plays a role in organising specialised training for stakeholders, including the food industry, legal practitioners, university lecturers and students, regulators, officials from government agencies, as well as any individuals or association members interested in deepening their knowledge in the field of food safety and quality. From 2016 to 2024, a total of 108 training sessions have been organised, with 3,760 participants, including participants from ASEAN countries.

DOMESTIC CONTROL AND COMPLIANCE

FOOD PREMISE REGISTRATION

All food premises are required to register with the MOH as stipulated under the Food Hygiene Regulations 2009. In 2024, a total of 30,005 new food premises were registered, comprising 1,817 food factories (category P1), 1,879 food catering services (category P2), 26,037 food outlet premises (category P3) and 272 vehicles selling food (category P4).

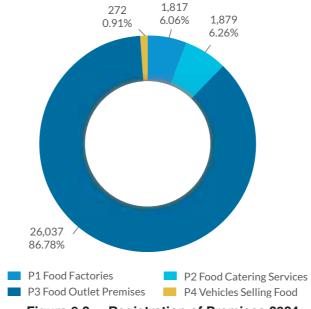


Figure 9.2 Registration of Premises 2024

FOOD PREMISES INSPECTION

The inspection of food premises is conducted to ensure that the cleanliness of the premises complies with the requirements of the Food Act 1983 and the Food Hygiene Regulations 2009. In the year 2024, a total of 94,117 food premises were inspected, with 88,821 (94%) premises deemed clean with an assessment score exceeding 75%. Additionally, 1,950 (2.07%) food premises that did not meet the established cleanliness standards were ordered to close under Section 11 of the Food Act 1983.

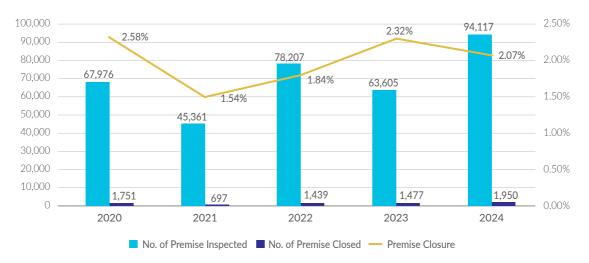


Figure 9.3 Inspection and Closure of Food Premises 2020-2024

FOOD SAMPLING

Food sampling based on risk assessment is conducted to ensure that food prepared or sold in the Malaysian market complies with the requirements of the Food Act 1983 and the Food Regulations 1985. In 2024, a total of 32,431 food samples were analysed and it was found that 1,679 samples (5.18%) violated the Food Act 1983 and the Food Regulations 1985. From 2020-2024, there has been a rising trend in the number of contravention samples.

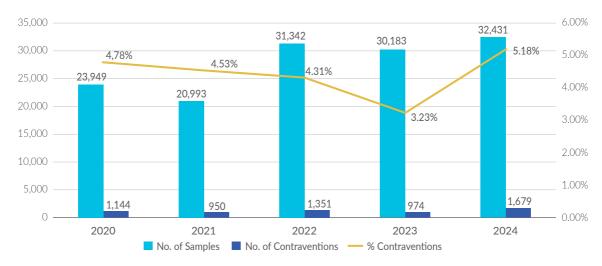


Figure 9.4 Number of Samples and Percentage of Contravention Samples for 2020-2024

FOOD SAFETY OPERATION

In 2024, FSQP coordinated food safety operations at the national level as a proactive measure to address food safety issues namely, *Operasi Tahun Baru Cina, Operasi Ramadan and Operasi Premis Bersih.*

Operasi Tahun Baru Cina Operasi Premis Bersih Operasi Ramadan No. of Premise No. of Premise No. of Premise 55,363 779 12,854 Inspected Inspected Inspected No. of Seized No. of Seized No. of Premise 487 26,478 2,387 Item Item Closed (3.79%)Value of 32B Value of 32B No. of 32B 7,532 **Notice** RM99,816.22 **Notice** RM294,071.27 **Notice** (58.60%) Compound Compound Issued

Table 9.1 Food Safety Operation 2024

FOOD ALERT AND FOOD RECALL

In 2024, a total of 145 Food Alert notifications were recorded and 41 orders to withdraw products from the market (Food Recall) were issued.



Figure 9.5 Food Alerts and Notices of Recall 2020-2024

FOOD HANDLER INSPECTION

All food handlers are required to attend Food Handler Training (LPM) at the Food Handler Training School accredited by the MOH and are required to obtain anti-typhoid vaccination.

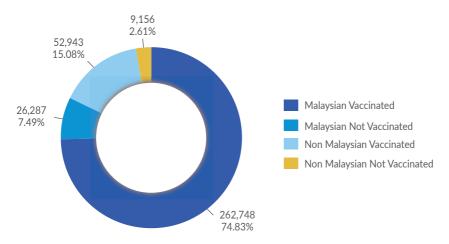


Figure 9.6 Food Handlers Anti-Typhoid Vaccination Status 2024

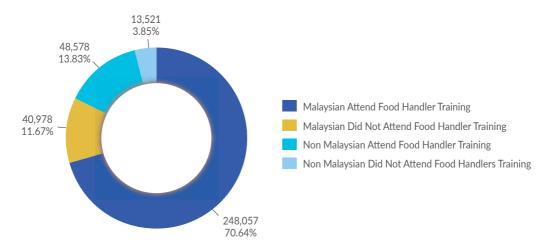


Figure 9.7 Food Handlers Training Status 2024

ENFORCEMENT OF THE FOOD ANALYST ACT 2011

Food analysts must be registered under the Food Analyst Act 2011 and hold a valid APC to conduct food analysis in Malaysia. As of 2024, the total number of registered food analysts is 1,732 from various sectors. In 2024, enforcement activities for the Food Analyst Act 2011 and the Food Analyst Regulations 2013 were carried out, including inspections of 175 laboratories and 482 food analysts, with one (1) case detected involving an unregistered food analyst.

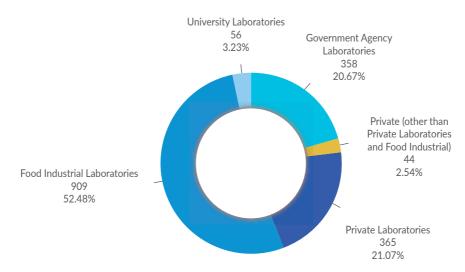


Figure 9.8 Registration of Food Analysts by Sectors

FOOD IMPORT CONTROL

Food import control activities were implemented through 70 PMAs throughout Malaysia. A total of 375,383 food consignments were imported into Malaysia in 2024 compared to 367,094 food consignments in 2023. In 2024, 375,383 (100%) consignments were document inspected and 4,642 (1.24%) were sampled based on risk assessment for analysis according to various parameters. There are six (6) levels of inspection for inspected food as depicted in **Table 9.2**.

Table 9.2 Consignment Inspection, Sampling and Sample Compliance 2023-2024

Tahun	Imported Consignment	Consignment inspected	Percentage inspected	Number of samples	Violated sample	Sample Compliance Percentage
2023	367,094	366,195	98.70%	4,019	92	98.30%
2024	375,383	375,383	100.00%	4,624	113	97.60%

FOOD EXPORT CONTROL

The export monitoring program is an official control developed according to the commodities and the requirements of the importing country. FSQP has also listed export food facilities approved by the importing countries.

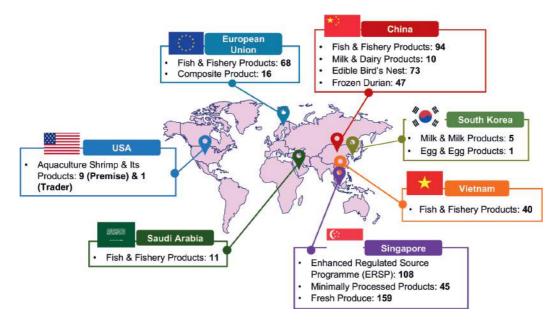


Figure 9.9 Export Food Facilities Listed under MOH until 2024

ISSUANCE OF EXPORT CERTIFICATE

Issuance of export certificates by FSQP for exporters is under the requirements imposed by the importing countries. The total of export certificate issuance in 2024 was 68,999.



Figure 9.10 Issuances of Export Certificate 2024

INDUSTRIAL DEVELOPMENT

LICENSING

The issuance of four (4) licensing categories under the Food Regulations 1985, namely the licensing of vending machines for beverages, licensing of ice, licensing of packaged drinking water and licensing of mineral water. In 2024, the total number of licenses issued consists of 3,807 licenses for vending machines, 235 licenses for ice, 101 licenses for natural mineral water and 237 licenses for packaged drinking water.

CERTIFICATION OF FOOD SAFETY ASSURANCE PROGRAMME

The implementation of the food safety assurance program certification is carried out to assist the food industry in complying with the requirements of the Food Act 1983 and its associated regulations through certifications such as Hazard Analysis Critical Control Point (HACCP), Good Manufacturing Practice (GMP) and *Makanan Selamat Tanggungjawab Industri* (MeSTI). **Figure 9.11** shows the trends and achievements for food safety system certification from 2016-2024.

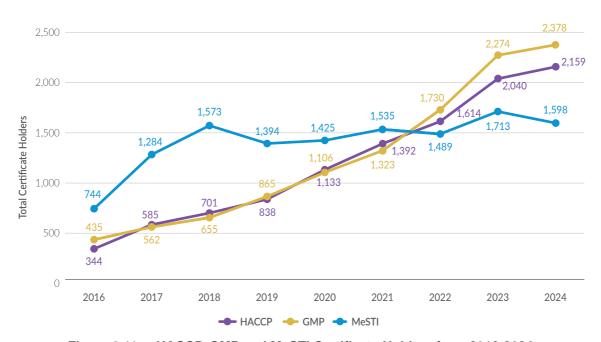


Figure 9.11 HACCP, GMP and MeSTI Certificate Holders from 2016-2024

In addition, various other certifications have been introduced under MOH. As of 2024, the total for other food safety-related certifications, recognitions and listings related to food safety is as follows:

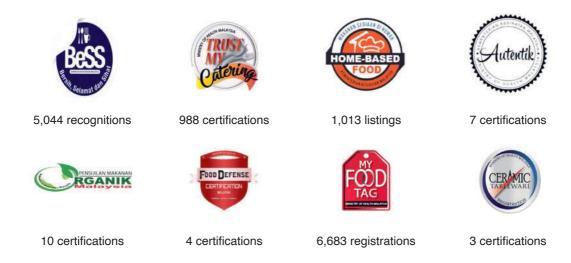


Figure 9.12 Food Safety-Related Certifications, Recognition, Registration and Listings

FOOD POISONING PREVENTION

As a preventive measure against food poisoning incidents, the FSQP continuously monitors food handler training provided through Food Handler Training Schools and Instructors accredited by MOH. Cooperation with various agencies is established to curb incidences of food poisoning, including the *Program Keselamatan Makanan* (ProKEM) in collaboration with the MOE and the Majlis Amanah Rakyat (MARA), as shown in **Figure 9.13** and **Image 9.11**.



Figure 9.13 Food Handlers Training Programme 2024



Integrated Monitoring of ProKEM Practices by FSQP with MOE Cohort 3 2024



Technical Meeting on Food Poisoning Prevention Activities with JKN Officers



Engagement Meeting on Food Poisoning Prevention in School Canteens and Dormitory Kitchens with MOE



Meeting on Improving Food Poisoning Procedures at MRSM and Mara Colleges with MARA and BKP

Image 9.11 Food Poisoning Prevention Activities 2024

NATIONAL CENTRE FOR FOOD SAFETY (NCFS)

NCFS is a scientific branch under FSQP, which functions to provide scientific data, especially to ensure that food safety is guaranteed along the food chain, in addition to strengthening control actions against risky food products. The NCFS construction project began in April 2018 and a ceremony for the Handover of the NCFS Building Completion Certificate by the JKR Selangor to MOH was held on 19 December 2024.





Image 9.12 Certificate of Completion Handover Ceremony for the NCFS Building

WAY FORWARD

FSQP will always be committed to strengthening food safety and quality control throughout the food supply chain through accountability with stakeholders to ensure that the people receive safe and quality food.

CHAPTER 10

DEVELOPMENT

DEVELOPMENT DIVISION

The Development Division is responsible for managing activities related to the administration, planning, implementation, control, monitoring, and evaluation of programmes and projects for the development of MOH health facilities under the Malaysia Plan. The Development Division carries the responsibility of fulfilling three (3) core objectives:

- i. Planning and coordinating the implementation strategy for health facility development.
- ii. Supervising, monitoring, and evaluating the outcomes and impacts of health facilities efficiently and effectively to achieve national development goals and vision.
- iii. Managing the implementation of development projects, finances, land, human resources, and health facility information according to established procedures and regulations.

PROJECT APPLICATIONS

The Development Division is responsible for managing MOH's development project applications under the Rolling Plan of the Malaysia Plan. The project application process is illustrated in **Figure 10.1**.

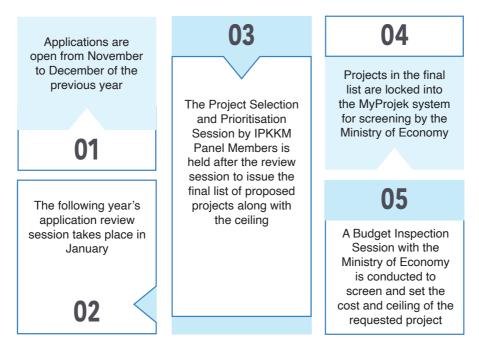


Figure 10.1 Rolling Plan Project Application Process

DEVELOPMENT ALLOCATION FOR 2024

Under the Rolling Plan 4 Twelfth Malaysia Plan (RP4 MP12) for the year 2024, MOH's development allocation was approved at RM6.067 billion to implement 566 development projects, comprising 384 new projects and 182 continuation projects. As of 31 December 2024, the performance of development project expenditure stood at RM5.796 billion, representing 95.53% of the current year's allocation.

MONITORING OF DEVELOPMENT PROJECTS

The Development Division is responsible for coordinating the implementation of the Ministry Development Action Council (MTPK) Meetings and the Ministry Development Action Committee (JTPK) Meetings at MOH level.

The MTPK Meetings were held four (4) times in 2024 and chaired by the Minister of Health. These meetings ensure that all decisions made by the National Development Action Council (MTPN) and the National Development Action Committee (JTPN) are fully implemented at the ministry level. JTPK Meetings, chaired by the KSU, were held 12 times in 2024 to address policy issues and project implementation strategies. **Figure 10.2** outlines the MTPK and JTPK meetings held in 2024.

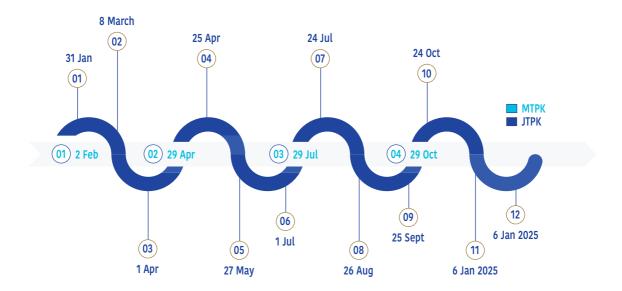


Figure 10.2 MTPK and JTPK Meeting in 2024

HANDOVER OF COMPLETED HEALTH FACILITY PROJECTS

The handover of completed health facility projects is conducted through joint inspections involving the end user, the Public Works Department (JKR) and the contractor. The project is handed over to the end user, which is the JKN or a Health Institute once the building or health facility and all related processes is completed. In 2024, 20 projects were handed over to end users as listed in **Table 10.1**.

Table 10.1 Handover of Completed Health Facility Projects 2024

Project	Handover Date
Hospital	
Upgrading and Replacement Lift System Works at Hospital Melaka, Melaka	22 January
Upgrading Building of Hemodialysis Hospital Raub, Pahang	19 January
Upgrade Existing Space to Sterile Pharmacy (Clean Room), Hospital Labuan, FT Labuan	22 January
Construction of Building Extension, Hospital Baling, Kedah	10 May
Construction of Building Extension, Hospital Miri, Sarawak	1 July
Upgrading Hospital Tawau, Sabah	21 August
Construction of Hospital Dungun, Terengganu	24 August
Upgrading Hospital Kajang, Selangor	4 October
Construction of Operation Theatre and New CSSD, Hospital Banting, Selangor	5 October
Construction of Hospital Bachok, Kelantan	11 October
Construction of Building Extension, Hospital Seri Manjung, Perak	21 November
Construction of Hospital Seri Iskandar, Perak	21 November
Health Clinic, Dental Clinic and Quarters	
Construction of a Health Clinic (Type 3) with Air Putih Quarters, Barat Daya, Pulau Pinang	5 January
Construction of Dental Clinic Tanjung Karang, Kuala Selangor	24 February
Construction of a Health Clinic (Type 3) Kepala Batas, Pulau Pinang	10 May
Construction of a Health Clinic (Type 7) with Paya Datu Quarters, Kuala Terengganu, Terengganu (Gantian)	24 August
Construction of a Health Clinic (Type 3) with Kampung Raja Quarters, Besut, Terengganu	24 August
Construction of a Health Clinic (Type 4) with Rompin Quarters, Jempol, Negeri Sembilan	9 October
Construction of National Centre for Food Safety (NCFS) in Sepang, Selangor	19 December
Hospital Pulau Pinang Quarters, Pulau Pinang	20 December





Image 10.1 Projects Handover Ceremony 2024

LAND MANAGEMENT AND MONITORING

The Development Division is responsible for managing the acquisition of land and buildings in accordance with the National Land Code 1965, the Land Acquisition Act 1960 and relevant Treasury Circulars for the development of health facilities. All land acquisitions across the country for MOH health facility development require approval from the Land Management and Monitoring Committee (JKPPT), chaired by the KSU. A total of 31 land acquisition applications were submitted by various agencies under MOH and presented at the JKPPT meetings. **Table 10.2** details the JKPPT meetings held in 2024.

Table 10.2 JKPPT Meeting 2024

Meeting	Date	Total Paper
No. 1/2024	3 May 2024	15
No. 2/2024	23 December 2024	16

TECHNICAL MANAGEMENT AND PROCUREMENT

Technical management and procurement involve requesting project cost increases within the approved budget by the Ministry of Economy (KE), coordinating and implementing Value at Entry Level (VAE) evaluations for new physical projects under RP applications, verifying building plan drawings and related documents as the representative of MOH facility ownership for Local Authorities (PBT) approval applications and updating the Industrialised Building System (IBS) score status.

TRAINING DEVELOPMENT FOR OFFICER COMPETENCY ENHANCEMENT

The Development Division also develops, plans, and implements the Operational Training Plan to enhance officers' competencies in project management and execution, as well as updating information in the MyProjek Monitoring System. The training and development activities conducted or attended throughout 2024 are listed in **Table 10.3**.

Table 10.3 Training Activities for Competency Development 2024

Activities	Date
Workshop Transfer of Knowledge in MyProjek System: Monitoring Module Year 2024	17-18 January
Workshop for Monitoring the Implementation of Development Project of the RP4 MP12 Year 2024 of the MOH	13 July
Development Allocation Management Workshop of MOH by the Development Division for the Year 2024	6-8 August
MyProjek System Information Update Hands-On Workshop: Monitoring Module Year 2024 of MOH	15 October
Outcome Evaluation Study Workshop MOH	18-20 November
Financial Management Coordination Workshop and Development Division Payment Checklist Refinement Ministry of Health	21-23 November
Preparation of the MP13 Development Project Workshop	27 November





Image 10.2 Outcome Evaluation Study Workshop MOH 2024

AWARDS AND ACHIEVEMENTS FOR 2024

MOH through the Additional Block Project at Tuanku Ampuan Najihah Hospital, Kuala Pilah, Negeri Sembilan, was awarded third place in the Best Development Performance Award for Allocations Above RM1 Billion at the 2024 National Development Awards (APN). This award recognises the ministry's excellence in ensuring that development programmes and projects are executed as planned within the approved original budget.



Image 10.3 National Development Awards Ceremony 2024

CHAPTER 11

INTERNAL AUDIT

INTERNAL AUDIT DIVISION (CAD)

CAD was established in 1980 following the Treasury Circular No. 2 Year 1979. The roles and responsibilities of the CAD were strengthened by Treasury Circular PS 3.1 (Amendment 2024) which regulates the *Pelaksanaan Audit Dalam di Kementerian atau Jabatan Persekutuan dan Kerajaan Neger*i. The CAD, led by the Head of Internal Audit, is authorised to conduct independent, fair and equitable audits and reports directly to the KSU.

ACTIVITIES

Following PS 3.1 and the auditing standards of The International Organisation of Supreme Audit Institutions (INTOSAI) and The Chartered Institute of Internal Auditors, CAD has implemented five (5) audit programmes throughout the year 2024 as follows:

- i. Financial Auditing
- ii. Performance Auditing
- iii. Verification of Initial Balance of Asset and Liabilities (Accrual Accounting)
- iv. Financial Management Risk Assessment
- v. Internal Control Statement for Items in Financial Statements

FINANCIAL AUDITING

Financial Auditing encompasses a wide range of methods including the audit of internal controls, financial or legal regulations compliance including financial records as well as the financial system established in the Responsibility Centres (RCs). In 2024, CAD has conducted four (4) types of Financial Auditing activities including Financial Management Auditing, Compliance Audit, Payment Audit and Spot Audit.

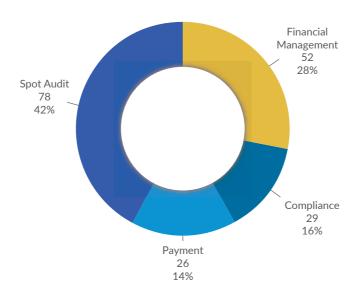


Figure 11.1 Financial Audit 2024

PERFORMANCE AUDITING

CAD conducted performance audits to evaluate whether the Federal Government's activities were carried out efficiently, economically and effectively to achieve the desired objectives. The measurement of inputs, outputs and outcomes will be examined to determine the management and achievement of the programme or activity. In 2024, a total of 12 performance audits were conducted involving procurement management, programme or activity management and ICT projects as shown in **Table 11.1**.

Table 11.1 List of Performance Audits Topics

Topics
Poor Performance Projects and Preliminary Works at Hospital Papar and Hospital Beaufort, Sabah
Activities in the Provision of Services and Treatment at Hospitals and District Health Offices
Pharmacy Enforcement Activities at Malaysia Checkpoints and Land Border
Services of Supplying, Delivering, Installing, Configuring, Testing, and Commissioning ICT Hardware and Software on a Lease Basis at MOH for the Sabah Zone, FT Labuan and Sarawak
Procurement of Cleaning, Maintenance, Landscaping, and Pest Control Services at IPKKM
Usability of Equipment in the Emergency and Trauma Department of the Hospital
Procurement of Maintenance for Buildings, Vehicles and Equipment at ILKKM
Development and Operational Support & Maintenance (O&M) Services for the Patient Management System at Negeri Sembilan hospitals
Management of Asset Disposal at MOH
Procurement of Operating Room Equipment in MOH Hospitals
Procurement and Management of MOH Uniform
Maintenance of the Malaysian Health Data Warehouse System (MyHDW)

VERIFICATION OF INITIAL BALANCE OF ASSETS AND LIABILITIES (ACCRUAL BASIS ACCOUNTING)

As agreed in the Accrual Committee Meeting, CAD is required to verify the initial balance of assets and liabilities in the ministry's financial statements, which covers the items in the Statement of Financial Position. In 2024, CAD conducted two (2) activities to verify the balance of assets and liabilities on the items of the financial statements in line with the implementation of the Federal Government Accrual Accounting. The verification audit performed includes the confirmation of the initial balance data of Immovable Assets (Land and Building), Movable Assets, Accounts Payable for Building and Investment Property for the Phase 1 and Phase 2 data migration period in 2024.

Table 11.2 Verification of Initial Balance Data of Assets and Liabilities 2024

Item	Phase 1 (RM)	Phase 2 (RM)
Immovable Asset (Land)	4,996,837,803.00	2,047,471,395.00
Immovable Asset (Building)	379,850,654.77	2,447,077,023.66
Movable Asset	95,840,398.07	37,877,371.20
Accounts Payable for Building	181,186,720.01	5,896,678.24
Investment Property	1,861,000.00	39,925,700.00

FINANCIAL MANAGEMENT RISK ASSESSMENT AND INTERNAL CONTROL STATEMENT FOR ITEMS IN FINANCIAL STATEMENTS

CAD is responsible to provide assurance and consulting services to the organisation as stipulated under PS 3.1. CAD needs to carry out a financial management risk assessment, which includes four (4) main elements namely Revenue Collection Control, Asset Management, Expense Management and Procurement Management.

In 2024, CAD has carried out two (2) risk assessment audits, namely the Management of Write-off Process for Hospital Treatment Charges Bills in four (4) RCs and the Management of Grant for *Skim Perubatan* MADANI by Protecthealth Corporation Sdn. Bhd.

CAD has issued an Internal Control Statement based on the risk assessment audit that was conducted for determining the effectiveness of the established internal controls and to make recommendations for improvements.

AUDIT COMMITTEE MEETING

The audit findings contained in the audit reports are presented in the Audit Committee Meeting in accordance with the requirements of the Treasury Circular PS 3.1 (Amendment 2024). The two (2) outcomes of the Audit Committee Meeting are the recommendations for improvement of the processes and procedures to strengthen the internal controls and the punitive actions to be taken by the Integrity Unit for certain cases. This meeting also follows up on issues in the Auditor-General's Report and is held quarterly at least four (4) times a year.

WAY FORWARD

The roles and functions of the internal audit carried out by CAD can be achieved with the support of various levels of management in MOH and the RCs. All efforts are taken by every individual in MOH to rectify and improve shortcomings in processes and procedures as well as uphold governance have helped MOH to strengthen the public service delivery system in the healthcare sector.

CHAPTER 12 CORPORATE COMMUNICATION

CORPORATE COMMUNICATION UNIT (UKK)

UKK was established to improve the image of the ministry, promote the ministry's policies and programmes through an organized and effective public relations strategy. In addition, UKK acts as the frontline in managing the ministry's customer service and public complaints. UKK has implemented promotions for all official MOH programmes throughout 2024.

INAUGURATION OF THE WOMEN, CHILDREN AND CARDIOLOGY COMPLEX OF THE RAJA PERMAISURI BAINUN HOSPITAL

His Royal Highness, the Sultan of Perak, officiated the inauguration of the Women, Children and Cardiology Complex (KWKK) at Hospital Raja Permaisuri Bainun (HRPB) on 6 February 2024. Spanning an area of 14,671 square meters, KWKK HRPB has been operational since December 2019. This 10-storey facility is equipped with 404 beds and 304 designated parking spaces for staff and visitors. The complex provides three (3) main services includes Cardiology, Paediatrics and Obstetrics & Gynecology (O&G).





Image 12.1 Inauguration of the KWKK HRPB

PREMIS BERSIH, BEBAS ASAP (BeBAS) WALKABOUT AND WAR ON SUGAR PROGRAMME

BeBAs Walkabout and War On Sugar Programme highlights the importance of community empowerment and collaboration between food premises operators, government and private agencies as well as non-governmental bodies (NGOs). The initiative aims to ensure that food hygiene regulations and smoking bans in food establishments are consistently upheld. The Minister of Health and Deputy Minister of Health participated in all walkabout programmes conducted. In 2024, a total of ten (10) locations were visited and recognised for their compliance.





Image 12.2 BeBAs Walkabout and War On Sugar Programme

MADANI AFIAT PROGRAMME

The MADANI Afiat programme is an initiative designed to engage with the public through field activities. Its primary goal is to enhance the dissemination of information on preventive health measures and to raise awareness about various health programmes and community initiatives led by the MOH, particularly among target groups. This programme has been successfully carried out in four (4) states namely Sabah, Negeri Sembilan, Pahang and Sarawak. A key component of the MADANI Afiat programme includes Touch Point activities, which involve house-to-house visits focused on health screenings. The programme also sees active participation from the MOH's top management, community leaders and medical teams, fostering closer engagement with the public and offering direct healthcare services.





Image 12.3 MADANI Afiat Programme

HEALTH AND WELLNESS PROGRAMME FOR MEMBERS OF PARLIAMENT

Parliament has implemented the Health and Wellness Programme for Members of Parliament to promote a healthy lifestyle among the representatives. This initiative encompasses programmes under the *Agenda Nasional Malaysia Sihat* (ANMS), including the Wellness on Wheels (WoW), the War On Sugar initiative and the 1,000 Days of Life, spearheaded by the MOH. This marks the first collaboration between the legislative and executive bodies in organising a significant health campaign aimed at ensuring the well-being of Members of Parliament.





Image 12.4 Health and Wellness Programme for Members of Parliament

MALAYSIA INTERNATIONAL HEALTHCARE (MIH) MEGATRENDS 2024

His Majesty Sultan Ibrahim King of Malaysia graciously officiated the MIH Megatrends 2024, held in Kuala Lumpur. Organised by the MOH in collaboration with KPJ Healthcare Berhad, MIH Megatrends 2024 serves as a premier event aimed at strengthening Malaysia's position in the global healthcare industry. This conference brings together public and private healthcare providers and pharmaceutical manufacturers.





Image 12.5 MIH Megatrends 2024

NUMBER OF FOLLOWERS ON OFFICIAL MOH'S SOCIAL MEDIA PLATFORMS

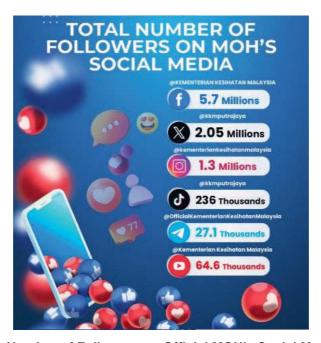


Figure 12.1 Number of Followers on Official MOH's Social Media Platforms

Table 12.1 Highest Post-Engagement 2024

Content	Reach	
Press Statement		
Press Statement of the MOH on the Latest Mpox Situation in Malaysia	972,530	
Press Statement of the MOH on the Banning the Sale of Food Products Detected to Contain Scheduled Poisons and Display False Information on Labels	470,284	
Press Statement of the MOH on the Current Situation of COVID-19 in Malaysia Epidemiology Week 20/52	351,230	
Infographic		
Say No to Sweet Drinks	953,589	
Benefits of Sea Bass	482,034	
Coconut Water	437,894	

UKK is responsible for managing the ministry's corporate affairs, including the coordination of ministry publications, external publications, and the MOH e-Bulletin. Additionally, UKK provides public relations consultancy services, manages the dissemination of announcements via the MOH postmaster and prepares speeches for the top management at official programmes. UKK is also responsible for coordinating customer satisfaction surveys, preparing inputs for various MOH initiatives and executing publicity efforts for key ministry programmes such as the Customer Engagement Day, Independence Month Programme, MADANI Rakyat Programme and *Ekosistem Kondusif Sektor Awam* (EKSA).

A total of ten (10) editions of the Sihat MADANI 2024 e-Bulletin were published by UKK to document the activities of the MOH's top management throughout the year 2024.

CUSTOMER SATISFACTION SURVEY 2024

The Customer Satisfaction Survey at IPKKM for the year 2024 was conducted from July 2024 to November 2024. UKK was responsible for coordinating, implementing and analysing this customer satisfaction survey based on the Tier 3 (Management) KPI dictionary to improve service delivery quality.

In 2024, the survey was participated in by 848 respondents, consisting of 70.4% female and 29.6% male participants. Overall, 95.3% of respondents were satisfied with the services provided at IPKKM, exceeding the target of 85%.

HARI BERTEMU PELANGGAN

MOH has held a *Hari Bertemu Pelanggan* on 3 October 2024, with the objective of enhancing public engagement with healthcare services. This programme provided an opportunity for the public to interact directly with MOH officers and share their opinions and feedback on the services offered.





Image 12.6 Hari Bertemu Pelanggan 2024

INDEPENDENCE MONTH AND MALAYSIA DAY 2024 CELEBRATION

To enliven the celebration of Malaysia's 67th Independence Day and Malaysia Day 2024, the MOH, through the UKK, organised the *Jiwa Merdeka* TikTok Video Competition with the theme *Gaya Hidup Sihat dan Merdeka*.

The *Jiwa Merdeka* TikTok video competition was a creative video contest involving participation from MOH staff across Malaysia. A total of ten (10) best videos were shortlisted for voting by TikTok users and the winners were determined based on the highest number of likes, comments and shares.





Image 12.7 Independence Month and Malaysia Day 2024 Celebration

PUBLIC RESPONSE MANAGEMENT

UKK is responsible for coordinating complaints received through various platforms. Throughout the year 2024, the MOH has received 42,435 public responses registered in the *Sistem Pengurusan Aduan Awam* (SISPAA) according to the categories.

Table 12.2 Total Acceptance of Public Response 2024

Types of Response	Category	Received	Total
Complaints	Common	12,955	14.700
	Complex	1,747	14,702
Non-Complaints	Appreciation	17,906	
	Reporting	6,272	
	Query	2,002	27,733
	Application	801	
	Proposal	752	
	To	42,435	



CHAPTER 13

POLICY AND INTERNATIONAL RELATIONS

POLICY AND INTERNATIONAL RELATIONS DIVISION (BDHA)

BDHA consists of three (3) sections which are the Policy and Strategic Planning Section, Cabinet and Secretarial Section as well as International Section. This division is responsible for managing the following tasks:

- i. Formulates and implement public health policies.
- ii. As the focal point in international relations and the development of healthcare industries.
- iii. Coordinates international trade issues.
- iv. Ensures Malaysia's health-related interests are voiced and protected diplomatically through international legal instruments.
- v. Coordinates the preparation of Cabinet Papers.
- vi. Coordinates MOH Parliamentary Questions and related Parliamentary matters.
- vii. Secretariat for MOH High Level Meetings, including the MOH Post-Cabinet Meetings.

CABINET RELATED MATTERS

BDHA has coordinated 74 Cabinet Papers for tabling at the Cabinet Meeting. This division has also coordinated and provided input for 94 Memorandums from other ministries, as well as 54 feedbacks on the Cabinet Meeting minutes.

PARLIAMENT UNIT

MOH received a total of 637 Parliamentary Questions or issues from the Senate and the House of Representatives throughout the year 2024 as shown in **Figure 13.1**.

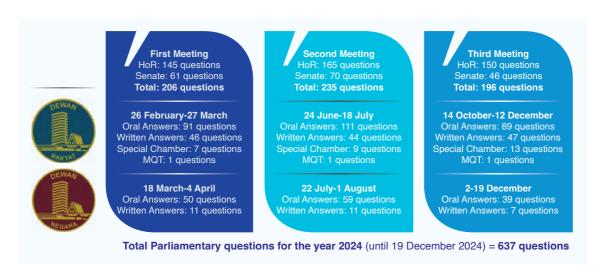


Figure 13.1 The MOH Parliamentary Record 2024

Note:

House of Representative (HoR), Ministerial Question Time (MQT)

MOH HIGH-LEVEL MEETINGS

Post Cabinet Meeting and MOH Management Meeting are among the high-level meetings coordinated by BDHA.



Figure 13.2 MOH High-Level Meetings 2024

WORKSHOP ON STRENGTHENING WRITING PROFICIENCY AND PREPARATION OF PARLIAMENTARY ANSWERS 2024

The Workshop on Strengthening Writing Proficiency and Preparation of Parliamentary Answers 2024 was held on 19-21 February 2024 in Selangor to enable the officers grasping the expectations of the newly appointed Minister of Health. Besides that, this workshop was held to enhance the skills and knowledge of the officers through continuous training.





Image 13.1 Workshop on Strengthening Writing Proficiency and Preparation of Parliamentary Answers 2024

MOH LEGISLATION REVIEW WORKSHOP

The General Circular No. 1 Year 2021 National Policy for Good Regulatory Practice (NPGRP) was introduced to implement Good Regulatory Practices (GRP) amongst ministries and agencies, particularly in the development and implementation of new laws. Two (2) workshops were held namely the Workshop of *Bengkel Reformasi Kerenah Birokrasi* on 24-25 July 2024 at Bandar Baru Bangi, Selangor and the Workshop of Preparation of Bill on 2-4 September 2024 at Seremban, Negeri Sembilan.





Image 13.2 MOH Legislation Review Workshop 2024

JAWATANKUASA TINDAKAN BERSAMA PEMBANGUNAN KESIHATAN (JTBPK) SABAH AND SARAWAK MEETING

Mesyuarat Penyelarasan Perjanjian Malaysia 1963 (MA63) Mengenai Isu Pembangunan Pendidikan & Kesihatan Sabah dan Sarawak was chaired by Deputy Prime Minister on 28 August 2024. The meeting has agreed for the engagement sessions between the MOH with Sabah and Sarawak to be held at least twice a year. Subsequently, JTBPK Sarawak Meeting No. 1/2024 was held on 12 January 2024 in Kuching, Sarawak and JTBPK Sarawak Meeting No. 2/2024 was held on 9 September 2024 in FT Putrajaya. JTBPK Sabah Meeting No. 1/2024 was held on 12 October 2024 in Kota Kinabalu, Sabah.





Image 13.3 Jawatankuasa Tindakan Bersama Pembangunan Kesihatan Sabah dan Sarawak Meeting

MALAYSIA INTERNATIONAL HEALTHCARE (MIH) MEGATRENDS 2024

MOH in collaboration with KPJ Healthcare Berhad, organised the MIH Megatrends 2024 from 25-27 October 2024, at Kuala Lumpur Convention Centre (KLCC) with the theme *Healthcare: The Next Frontier*. The event was officiated by His Majesty Sultan Ibrahim, King of Malaysia.

MIH Megatrends 2024 featured prominent local and international speakers, such as Tan Sri Dr. Jemilah Mahmood from Sunway University Malaysia, Professor Farah Magrabi from Macquarie University, Australia, Dr. Luqman Lawal from the Mayo Clinic, USA and Dr. Mohd Lutfi Fadil Lokman, Medical Data Scientist from USA. The conference covered key topics including

technology, equity, sustainability, value-based care and precision medicine. The event successfully brought together participants from diverse backgrounds, including healthcare professionals, policymakers, industry leaders, academics and the public.

In addition, this conference offered a variety of engaging activities, including exhibitions showcasing healthcare products and services, health screenings, traditional massage services, acupuncture and blood donation drives.





Image 13.4 MIH Megatrends 2024

COURTESY VISITS FROM VARIOUS ASSOCIATIONS AND ORGANISATIONS RELATED TO HEALTHCARE INDUSTRY

Throughout 2024, the MOH received courtesy visits from various associations and organisations, including:

- i. Meeting with the US-ASEAN Business Council on 15 August 2024.
- ii. Courtesy visit from the British Malaysia Chamber of Commerce on 25 November 2024.
- iii. Courtesy visit from the EU-ASEAN Business Council on 25 November 2024.

These sessions discussed topics such as investment in the healthcare sector, collaboration between the Ministry and private sector, as well as various issues like healthcare financing, the Health White Paper, non-communicable disease (NCD) management and digitalisation initiatives.





Image 13.5 The Courtesy Visit of the British Malaysia Chamber of Commerce and the EU-ASEAN Business Council 2024

MEMORANDUM OF UNDERSTANDING (MoU)

In 2024, MOH established good strategic bilateral cooperation with various countries through MoUs as follows:

- Memorandum of Understanding between the Government of Malaysia and the Health Science Authority of Singapore on Cooperation in the Field of Pharmaceutical Regulatory Affairs Medicine on 6 May 2024.
- ii. Memorandum of Understanding between the Government of Malaysia and the Republic of India on Cooperation in the Field of Traditional Systems of Medicine on 20 August 2024.

OFFICIAL WORKING VISITS

BDHA has coordinated official foreign delegation visits to Malaysia as well as organising international visits led by the Minister of Health and Deputy Minister of Health. The following is the list of the official international visits in 2024:

Table 13.1 Official Working Visits 2024

Official Visits of the Foreign Governments to MOH			
WHO Regional Director for the Western Pacific, Dr. Saia Ma'u Piukala	9-11 June 2024		
Official International Visits of MOH Delegation			
Official Working Visit of Deputy Minister of Health to Melbourne and Canberra, Australia	13-18 May 2024		
Official Working Visit of Minister of Health to attend the 36 th Commonwealth Health Ministers Meeting in Geneva, Switzerland (CHMM36)	24-25 May 2024		
Official Working Visit of Minister of Health to attend the 77 th World Health Assembly in Geneva, Switzerland (WHA77)	27 May - 1 June 2024		
Official Working Visit of Minister of Health to attend the 16th ASEAN Health Ministers Meeting in Vientiane, Lao PDR	5-9 August 2024		
Official Working Visit of Minister of Health to attend the World Cancer Congress (WCC), the National Health Service United Kingdom and Intellectual Discourse with Academicians Programme Organised by the Oxford Centre for Islamic Studies	15-21 September 2024		
Official Working Visit of Minister of Health to attend the 75 th WHO Western Pacific Regional Committee Meeting in Manila, Philippines	21-25 October 2024		





Image 13.6 Official Working Visits 2024

COURTESY CALLS

BDHA was assigned the responsibility of coordinating courtesy calls on the Minister of Health, Deputy Minister of Health and MOH top management by foreign delegates. The courtesy calls held in 2024 are as follows:

Table 13.2 Courtesy Calls 2024

Courtesy Calls on the Minister of Health	
Courtesy Call by Dato' Indera Hermono, Ambassador of The Republic of Indonesia	23 January 2024
Courtesy Call by Dr. Rabindra Abeyasinghe, WHO representative for Malaysia, Brunei Darussalam and Singapore	8 February 2024
Courtesy Call by Takahashi Katsuhiko, Ambassador of Japan	22 February 2024
Courtesy Call by Ailsa Terry, British High Commissioner to Malaysia	26 February 2024
Courtesy call by Ary Quintella, Ambassador of Brazil	6 March 2024
Courtesy Call by Orla Tunney, Ambassador of Ireland to Malaysia	15 March 2024
Courtesy Call by Abdelhafid Bounour, Ambassador of People's Democratic Republic of Algeria to Malaysia	18 March 2024
Courtesy Call by the Southeast Asia Tobacco Control Alliance (SEATCA)	18 March 2024
Courtesy Call by Emir Salim Yüksel, Ambassador Republic of Türkiye to Malaysia	25 March 2024
Courtesy Call by Ms. DY Suharya, Regional Director Asia Pacific, Alzheimer's Disease International	25 March 2024
Courtesy Call by Vanu Gopala Menon, the High Commissioner of the Republic of Singapore	4 April 2024
Courtesy Call by Hassan Abdelsalam Omer, Ambassador of the Sudan	16 May 2024
Courtesy Call by Dr. Mubarak Saeed Al Dhaheri, Ambassador of the United Arab Emirates (UAE)	23 May 2024
Courtesy Call by the delegation from the African Union Development Agency (AUDA-NEPAD)	4 June 2024
Courtesy Call by Mr. Robert Gass, Representative United Nations Children's Fund (UNICEF)	6 June 2024
Courtesy Call by Dr. Saia Ma'u Piukala, WHO Regional Director for The Western Pacific	10 June 2024
Courtesy Call by H.E. Valiollah Mohammadi Nasrabadi, Ambassador of the Islamic Republic of Iran	5 August 2024
Courtesy Call by H.E. Peter Van Acker, Ambassador of Belgium to Malaysia	13 August 2024
Courtesy Call by Edgard D. Kagan, Ambassador of the United States of America	22 August 2024
Courtesy Call by Florentino Batista Gonzalez, Ambassador of the Republic of Cuba	27 August 2024
Courtesy Call by Salah Mohammed Al-Sorour, Ambassador of Qatar	10 September 2024
Courtesy Call by Walid Abu Ali, Ambassador of Palestine	9 October 2024
Courtesy Call by Mr. Christopher Lockyear, Secretary General of Médecins Sans Frontières (MSF)	1 November 2024
Courtesy call by Dr. Elia A.A. dos Reis Amaral, Minister of Health of the Democratic Republic of Timor-Leste	2 December 2024

Courtesy Call by Dr. Julitta Onabanjo, UNFPA Country Representative for Malaysia and Country Director for Thailand	3 December 2024		
Courtesy Call by Dr. Waleed Khalifa AlManea, Ambassador of Bahrain	9 December 2024		
Courtesy Calls on the Deputy Minister of Health			
Courtesy Call by Ambassador Aftab Ahmad Khokher, Assistant Secretary- General for Science and Technology of Organisation of Islamic Cooperation (OIC)	28 November 2024		
Courtesy Calls on the Top Management			
Courtesy Call by Dr Joachim Bergström, Ambassador of Sweden to			
Malaysia on the Director General of Health	6 May 2024		
	6 May 2024 26 July 2024		
Malaysia on the Director General of Health Courtesy Call by Mr. Faisal Gilani, Director of GAVI on the Director	,		



Ministry of Health



Image 13.7 MOH Courtesy Calls 2024

CHAPTER 14 LEGAL ADVISORS

LEGAL ADVISOR'S (LA) OFFICE

As a representative of the Attorney General's Chambers (AGC) at the MOH, the LA Office is committed in carrying out its duties, in providing legal advice, both verbally or in writing, reviewing and drafting laws, vetting and approving legal documents such as agreements, memorandum of understanding (MoU), both domestic and international legal instruments as well as represents MOH for civil actions.

ACHIEVEMENT

In general, the amount and scope of work handled by the LA Office depend on the applications submitted by the MOH. In 2024, the LA Office vetted a total of 3,919 agreements and legal instruments (such as domestic and international MoUs and procurement agreements), prepared 1,432 written legal opinions and attended 934 meetings. As regards to the review and drafting of laws, a total of 94 laws (inclusive of both primary and subsidiary legislations) were vetted and approved by the AGC. Additionally, the LA Office has filed 55 civil claims in court and assisted the AGC in 63 civil claims against MOH. Throughout 2024, the total amount successfully collected in civil claim cases was RM1,416,404.21 and managed documentation for 85 road accident cases for further action by the AGC.

WORKSHOP FOR THE REVIEW AND DISPOSAL OF OUTSTANDING GOVERNMENT CONTRACTS FOR 2023-2024

The workshop was held on 11-12 August 2024 at Shah Alam and was attended by 13 officers with nine (9) staff members. The Contract Unit made a presentation on outstanding contracts and the officers were divided into several groups based on the type of contract that needed to be reviewed and approved.



Image 14.1 LA Office Management Meeting 2024

2ND WORKSHOP ON REVIEW OF KEY PERFORMANCE INDICATORS (KPI) AND KEY WORK TARGETS (SKU) OF THE MOH LA OFFICE 2024

The workshop was held on 26-28 September 2024 at Pulau Pinang and was attended by eleven (11) officers and 12 staff. The objective of the workshop was to discuss the KPIs and set the SKUs for 2024. Several briefings were delivered during the workshop such as *Introduction to Government Contract Review Techniques and Tips, Introduction to KPI and SKU, Introduction to Legislative Skills* and workshops focused on identifying problems and resetting targets to achieve the KPIs and SKUs.





Image 14.2 2nd Workshop on Review of the KPI and SKU 2024

MEDICAL (AMENDMENT) BILL 2024

On 29 July 2024, the Medical (Amendment) Bill 2024 (Medical Bill) was passed by the Dewan Negara. The Medical Bill aims to address the crisis surrounding the registration of medical specialists who obtain medical specialty qualifications through the parallel pathway and to streamline the process of recognition and registration as medical specialists. Additionally, the Bill allows the Medical Master's specialty training pathway and the parallel pathway to be implemented orderly from a legal perspective. Medical officers can be qualified as medical specialists in the National Specialist Register of Malaysia (NSR) under the Malaysian Medical Council (MMC) when completed their specialist registration coordination programme.



Image 14.3 Medical (Amendment) Bill 2024

PREVENTION AND CONTROL OF INFECTIOUS DISEASES (AMENDMENT) BILL 2024

On 2 December 2024, the Prevention and Control of Infectious Diseases (Amendment) Bill 2024 (Amendment Bill) was passed in the *Dewan Negara*. This Amendment Bill serves as a proactive measure by the Government to protect the country from the threat of infectious diseases. Additionally, the Bill ensures continuous preparedness and enforcement by the Government to safeguard the health and safety of the country.



Image 14.4 Prevention and Control of Infectious Diseases (Amendment) Bill 2024

CHAPTER 1N7

INTEGRITY

INTEGRITY UNIT

Integrity Unit was established on 10 February 2014, based on *Pekeliling Perkhidmatan Sumber Manusia, Ceraian SP.1.2.1 Penubuhan Unit Integriti di Semua Agensi Awam.* The establishment of this unit aims to integrate all management related to integrity under a specialised unit entreat initiatives for institutionalising integrity, prevention, compliance, detection of misconduct and punitive actions can be implemented in a more focused, systematic, efficient and effective manner. In general, there are six (6) sections under this unit, namely the Governance Section, Integrity Strengthening Section, Detection & Verification Section, Compliants Management Section, Compliance Section and Disciplinary Section.

ACTIVITIES AND ACHIEVEMENTS

MOH won the Gold Award for its first-ever participation in the Integrity, Governance and Anti-Corruption Award (AIGA) 2023, organised by the Malaysian Institute of Integrity (IIM). The Gold Award was presented by Director-General of Public Services (KPPA) and received by Deputy Secretary-General (Finance) in the ceremony that was held on 29 February 2024.

AIGA is an award that recognises the public and private sectors for demonstrating commitment to the culture and practice of integrity, governance and anti-corruption management initiatives within their respective organisations. A total of 154 organisations participated in this award, consisting 95 public agencies and 59 private agencies. Of these, 46 organisations received the Gold Award, 33 received the Silver Award and 48 received the Bronze Award.





Image 15.1 AIGA Gold Award 2023

MOH held the integrity seminar on 14 November 2024, with the theme *Teguh Integriti, Kukuh Pertiwi,* which was officiated by the Minister of Health as part of efforts to strengthen governance, integrity and anti-corruption among MOH staff through the delivery of services and best management practices.

Among the programme highlights were the Executive Talk MOH from the Perspective of the Malaysian Anti-Corruption Commission (MACC) and the sharing session Guarantee Money: A Story from Behind Bars by a former corruption offender. The climax of the event was the Corruption-Free Pledge (CFP) session, led by the Secretary-General along with the Top Management of IPKKM, JKN Directors and MOH Hospital Directors nationwide, witnessed by the Minister of Health and the Deputy Chief Commissioner of MACC. This was to demonstrate the openness and accountability of MOH Top Management in addressing corruption-related issues.





Image 15.2 MOH Integrity Seminar 2024

In order to promote and cultivate integrity among MOH staff, the Integrity Unit has also disseminated integrity messages to all through 12 series of message posters and short videos. This unit has organised three (3) series of Integrity Talk Programmes as follows:

- Integrity Talk Series 1/2024: Terganggu, Diganggu & Mengganggu by Nor Zabetha Muhamad Nor
- ii. Integrity Talk Series 2/2024: Hijrah; Berubah atau Rebah? by Da'i Izzhar
- iii. Integrity Talk Series 3/2024: #JanganKenaScam by Anti-scam Ambassador, Rahmat Fitri Abdullah





Image 15.3 Integrity Talk Programme 2024

Throughout 2024, Integrity Unit received a total of 425 complaints involving several categories, namely 12 criminal complaints, 191 misconduct complaints and 222 ethics violations complaints. In addition, a total of 352 misconduct reports were received from MOH facilities, 169 cases were resolved by the MOH *Pihak Berkuasa Tatatertib* (PBTT), 32 cases were referred to the *Lembaga Tatatertib Perkhidmatan Awam Kumpulan Pengurusan* (No.1) of the Public Service Department (JPA), 24 cases were submitted to the Public Service Commission of Malaysia and the remaining cases are still under the action of the secretariat.

A total of 12 series of disciplinary management audits were conducted at MOH facilities with a *Lembaga Tatatertib Kumpulan Sokongan* (No. 2), to improve the findings of the audits that have been identified and to provide a platform for the department to obtain direct advisory services. The Integrity Unit frequently receives invitations to give advisory services and share experiences on disciplinary management, complaints, investigations, gifts and other integrity-related issues from various departments, institutions, divisions at IPKKM and also professional unions.

This unit also organised training and workshops such as the Human Resource Champion Workshop (Disciplinary), Anti-Corruption Plan Development Workshop and Integrity and Governance Strengthening Course. These training and workshops were attended by MOH staff from various service schemes to enhance their knowledge and awareness regarding integrity management, governance and anti-corruption.

The Integrity Unit has implemented the monitoring of asset declarations as one of the HRMIS 2024 KPIs, involving all permanent MOH officers. By the end of 2024, MOH successfully achieved 100% asset declaration compliance. From a compliance perspective, the Integrity Unit conducted ten (10) reviews covering areas such as external employment, gift and attendance management, involving four (4) reviews at IPKKM, four (4) reviews in Sabah, one (1) review in Selangor and one (1) review in Perak. As a result, this unit identified 23 good governance practices and 30 recommendations for improvements.

In line with the directive from the KPPA on 18 April 2024, regarding the Enhancement of Quality Service Delivery with Integrity, the Integrity Unit has coordinated the preparation of surprise inspection reports by head of the departments in MOH for reporting to the JPA. Overall, all departments/agencies/divisions under MOH have fully cooperated in carrying out the inspections to ensure that the quality of service delivery is consistently maintained, as recommended by the KPPA.

16 MEDICAL DEVICE AUTHORITY (MDA)

MEDICAL DEVICE AUTHORITY (MDA)

MDA is a federal statutory body under the MOH that ensures the safety and effectiveness of medical devices marketed in Malaysia. MDA prevents the entry of medical devices that do not meet standards by enforcing the Medical Device Act 2012 [Act 737] and its regulations.

MEDICAL DEVICE REGISTRATION

Table 16.1 shows the total number of applications received for medical devices were 15,110. Out of this total, 7,763 new applications, 2,003 re-registration and 5,344 change notifications. The total number of approved applications were 17,111.

Table 16.1 Applications for Medical Device Registration Received and Approved 2024

	Applications Received			Approved Applications		
Month	New Registration	Re- Registration	Change Notification	New Registration	Re- Registration	Change Notification
January	683	250	364	902	302	477
February	729	217	362	850	345	278
March	679	203	525	892	260	371
April	676	157	342	679	190	532
May	687	187	467	679	206	555
June	642	145	404	485	162	413
July	712	201	553	638	143	380
August	438	105	301	1,000	303	829
September	653	113	474	684	153	516
October	656	154	568	657	165	573
November	609	149	454	672	122	521
December	599	122	530	567	153	457
Total	7,763	2,003	5,344	8,705	2,504	5,902
Grand Total		15,110			17,111	

ESTABLISHMENT LICENSING

In 2024, MDA received 2,980 establishment licensing applications for various activities. The number of approvals issued was 3,428. Applications related to licensing activities received are shown in **Table 16.2**.

Table 16.2 Licensing Activities Applications Received in 2024

Application Type	Applications Received	Applications Approved
New License Applications	1,086	1,156
License Renewal Applications	1,076	1,171
Major Amendments	293	348
Minor Amendments	191	228
Change Of Ownership	288	451
Surrender Applications	18	27
Withdrawal Applications	28	47
Total	2,980	3,428

ENFORCEMENT

Following the successful investigation of complaints substantiated by credible evidence, enforcement actions including license suspensions and revocations were undertaken. In 2024, a total of ten (10) license suspension notices and five (5) license revocation notices were issued by the MDA. In cases of serious violations, seven (7) raid operations were conducted and 14 show-cause notices were issued to the individuals and companies involved.

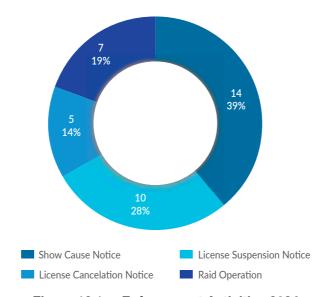


Figure 16.1 Enforcement Activities 2024

MDA also registered five (5) investigation papers (IPs) in court in 2024. Three (3) cases are still under prosecution, while two (2) cases have concluded with fines total RM220,000 as shown in **Figure 16.2**.

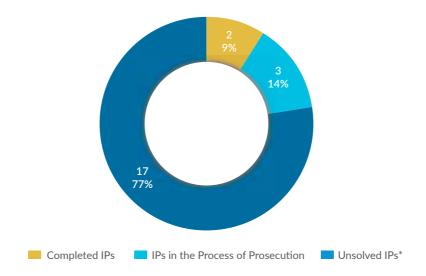


Figure 16.2 Investigation and Prosecution Status in Court 2024

Note:

*Duration of unsolved IPs is from 2021-2024

MEDICAL DEVICE EXHIBITIONS AND MEDIA OUTREACH

Exhibitions are one of the MDA's strategic initiatives to enhance understanding, collaboration and alignment between the MDA and its stakeholders. Media outreach is the main medium for MDA to convey information about MDA's activities to the public.

Medical device exhibitions featured technical briefings, panel discussions and product demonstrations. A total of 15 exhibitions were successfully conducted with 12,853 visitors as shown below:

- i. Medical Device Exhibition at Ministry of Education (MOE), Putrajaya
- ii. Pameran Peranti Perubatan at Ministry of Home Affairs (KDN), Putrajaya
- iii. Future Healthcare Asia 2024 at Hotel Royal Signature, Kuala Lumpur
- iv. SEA Healthcare & Pharma Show 2024 at Kuala Lumpur Convention Centre (KLCC)
- v. Occupational Safety & Health Week 2024 at JOM Foodcourt, Bukit Jalil
- vi. Medical Device Awareness Programme at Aman Central Mall, Alor Setar
- vii. Physical Rehabilitation Conference 2024 at Institut Sukan Negara (ISN)
- viii. Medical Device Awareness at Star Mega Mall, Sibu

- ix. Medical Device Exhibition and Conference (IMDEC 2024) at KLCC
- x. 2 Tahun MADANI at KLCC
- xi. Selangor Life Science Convention (SLC) at KLCC
- xii. Customer Day at MOH, Putrajaya
- xiii. Medical Device Awareness Programme at Malaysia Tourism Centre (MaTiC), Kuala Lumpur
- xiv. Medical Device Awareness programme at UTC Tawau, Sabah
- xv. ISPE Annual Conference & Exhibition 2024, Kuala Lumpur

In 2024, MDA has successfully secured 48 media coverages for its activities, including interviews, public awareness programmes and enforcement activities. The distribution of media coverage by platform is shown in **Figure 16.3**.

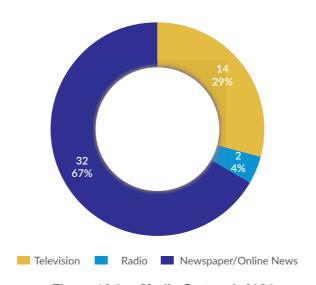


Figure 16.3 Media Outreach 2024

WAY FORWARD

As the regulatory authority, MDA will work closely with industry players to understand their needs and provide guidance to ensure compliance with international standards. It will continue supporting the medical device industry through fast, efficient and integrated registration and certification processes that are in line with industry developments, including Artificial Intelligence (AI). To achieve this, MDA will enhance its internal capabilities through regular staff training, upgrade its ICT infrastructure and improve customer service channels. Additionally, MDA will build strategic partnerships with global regulatory bodies such as WHO and the ASEAN Medical Device Committee to align with international standards and support easier access to global markets, contributing to regulatory harmonization and faster access to essential medical devices worldwide.



CHAPTER 17

MALAYSIA
HEALTHCARE
TRAVEL COUNCIL
(MHTC)

MALAYSIA HEALTHCARE TRAVEL COUNCIL (MHTC)

Throughout 2024, Malaysia's health tourism industry has achieved remarkable success, driven by strong collaboration between the MOH, other relevant ministries and various supporting agencies. As a key driver, the MHTC has implemented various strategic initiatives to attract health travellers worldwide to choose Malaysia as a premier destination for high-quality medical treatment.

Among the key initiatives that were carried out include government-to-government (G2G) meetings, business-to-consumer (B2C) activities, signing MoUs with international strategic partners and organising media familiarisation (FAM) trips. These initiatives are aimed at enhancing Malaysia's position as a leader in the health tourism industry. Active participation from MHTC's member hospitals has also been a catalyst for the success of these initiatives, in line with the industry's broader vision for advancing medical tourism in Malaysia.

These collective efforts have resulted in a significant increase in health travellers visiting Malaysia throughout the year. In 2024, Malaysia welcomed over 1.60 million health travellers seeking a wide range of treatments, from general health screenings and preventive medical procedures to curative and complex treatments. These inbound health travellers contributed RM2.70 billion in revenue to the nation's healthcare sector for 2024.

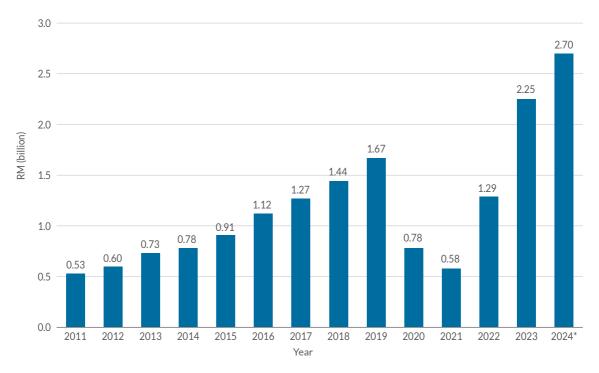


Figure 17.1 Revenue of the Healthcare Travel Industry 2024

Note:

^{*}The 2024 achievement is based on data collected as of 22 April 2025.

TOWARDS POSITIONING MALAYSIA AS A LEADING MEDICAL TOURISM DESTINATION

MHTC has outlined its 2024 vision to elevate Malaysia as a leading medical tourism destination. This strategic vision focus on four (4) key pillars which are healthcare, clinical offerings, tourism and patient experience. This to ensure a seamless and holistic international medical travel journey. By strengthening and aligning these elements, MHTC works closely with both public and private sectors to enhance Malaysia's healthcare services and integrate them with world-class tourism attractions and personalised patient experiences.

This strategy is built upon five (5) narratives that highlight the strengths of Malaysia's healthcare brand, namely doctors, hospitals, infrastructure, medical outcomes and Malaysian hospitality. These narratives emphasise Malaysia's excellence in offering world-class medical expertise, advanced healthcare facilities and proven treatment outcomes. This is further complemented by the warmth and hospitality of Malaysians, which distinguishes the healthcare experience in this country.

MARKET POSITIONING

In terms of market positioning, MHTC's activities were focused on targeting identified markets through the following initiatives:

- Conducting six (6) Malaysia Healthcare Expos (MHX) across five (5) cities in Indonesia (Jakarta, Surabaya, Bandung, Pekanbaru and Palembang), involving 50 hospitals and state tourism agencies and generating over 7,000 prospects.
- ii. Establishing collaboration with PT Bank Muamalat Indonesia and eSIM JavaMifi to strengthen market presence in Indonesia.
- iii. Entering new markets through bilateral health diplomacy missions to Oman and Kuwait, focusing on health tourism via G2G engagements, including overseas visits and medical symposiums.





Image 17.1 Market Positioning Activities 2024

BRAND AWARENESS

Various initiatives and programmes have been implemented with the aim of promoting the Malaysia healthcare brand and increasing global awareness. The activities that were carried out such as:

- i. Continuing the *Experience Malaysia Healthcare* campaign through 14 videos designed to provide an in-depth and inspiring portrayal of impactful stories within Malaysia's healthcare travel ecosystem.
- ii. Generating over 237 pieces of content, which achieved more than 240,000 reach.
- iii. Receiving more than 18,000 brand search volumes through online news and social media platforms.
- iv. Showcasing the industry's capabilities and performance through two (2) TV programmes, which are RTM ASEAN and AWANI Spotlight.
- v. Securing more than five (5) exclusive MHTC media coverages in various countries such as Indonesia and Oman.





Image 17.2 Brand Awareness Activities 2024

ACTIVE ECOSYSTEM

To ensure a robust and dynamic ecosystem, MHTC has undertaken several activities in collaboration with various stakeholders and partners:

- i. Partnering with Express Rail Link (ERL) to introduce an exclusive package for healthcare travellers, offering more convenient and efficient travels.
- ii. Announcing four (4) finalists for the Flagship Medical Tourism Hospital programme.
- iii. Organising 13 hospital benchmarking visits across four (4) countries.
- iv. Approving more than 400 eVISA applications throughout 2024.
- v. Welcoming five (5) new Ordinary Members, bringing the total number of members to 78 hospitals.
- vi. Hosting the inaugural cultural immersion activity *Jiwa Merdeka* held at Prince Court Medical Centre.





Image 17.3 Active Ecosystem Activities 2024

MARKETING ACTIVITIES

MHTC has organised various proactive initiatives targeting international markets, including Bangladesh, China, Cambodia, Indonesia and the Middle East. These efforts were carefully planned and strategically tailored to strengthen Malaysia healthcare global presence. These initiatives aim to raise awareness about Malaysia's healthcare system, expand its influence within the global healthcare landscape as the premier destination for healthcare travel.

WAY FORWARD

The year 2024 has served as a pivotal period for establishing the strategic foundations necessary for the upcoming transition to Malaysia Medical Tourism Year 2026 (MyMT2026). This phase necessitates comprehensive planning, in-depth market evaluation, and cohesive internal alignment to effectively leverage emerging opportunities while addressing prevailing challenges. MHTC remains steadfast in its commitment to fortifying its market positioning, enhancing patient engagement and advancing sustainable growth. Through a cohesive vision, innovative interventions and strategic alliances, MHTC is well-equipped to realise its long-term objectives and set a precedent for transformative progress in the years ahead.



CHAPTER 18

PROTECTHEALTH

INTRODUCTION

ProtectHealth Corporation Sdn. Bhd. (ProtectHealth) is a wholly owned subsidiary of ProtectHealth Malaysia (PHM) under the MOH that coordinate, administer and manage initiatives related to financing healthcare services. In year 2024, ProtectHealth operates based on the theme of learn, build, and growth by demonstrating commitment to fulfilling the mandates given by the Cabinet.

Learn

Learning from national health insurance administrative training in Taiwan, South Korea and Thailand, which provided valuable insights to implement national health insurance scheme in Malaysia.

Build

Building capacity and capability in health financing and strategic purchasing. This includes the development of proprietary software and websites while enhancing the infrastructure and technology.

Growth

Growing the financial strength through new revenue streams to ensure sustainable financial resources through various innovative payment mechanisms in supporting healthcare initiatives.

Figure 18.1 Theme of ProtectHealth Operations 2024

SKIM PEDULI KESIHATAN UNTUK KUMPULAN B40 (PEKA B40)

ProtectHealth has implemented the PeKa B40 scheme since 15 April 2019. This is in line with the objective of strengthening public-private partnerships. PeKa B40 initiative is aimed to address the health needs of the lower-income group on non-communicable diseases (NCDs).

Until 31 December 2024, ProtectHealth has collaborated with 4,893 healthcare providers as follows:

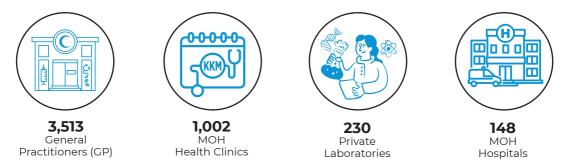


Figure 18.2 Information on the PeKa B40 Scheme

Overall, health screenings under the PeKa B40 Scheme have successfully screened 1,500,949 beneficiaries, with 335,232 screenings recorded in 2024 for beneficiaries aged 40 and above among the B40 group.

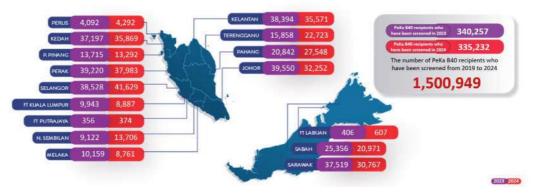


Figure 18.3 PeKa B40 Scheme Beneficiaries in the Year 2024

Several strategies contributed to this success including ongoing engagement with GP, outreach programmes, partnerships with organisations and social media promotion.



Image 18.1 PeKa B40 Scheme Outreach Programmes 2024

SKIM PERUBATAN MADANI (SPM)

Established as a pilot project on 15 June 2023, SPM aimed to reduce congestion particularly in the green zones of Emergency Departments at MOH hospitals. To maximise SPM objectives, it has undergone four (4) phases of change as follows:



Figure 18.4 SPM Transformation Phases

The refinement of SPM is not intended to restrict patient access to medical care but rather to ensure effective resource use, enhancing the project's effectiveness and sustainability. Patients with minor illnesses outside the selected districts can continue to seek care from KK and hospital green zones, where patients waiting times are typically not critical.

HOSPITAL SERVICES OUTSOURCING PROGRAMME (HSOP)

HSOP is A MOH initiative to improve healthcare accessibility and quality. Starting from 18 July 2024, HSOP had outsource patients from MOH hospitals to private healthcare facilities by provided four (4) key services including radiology, cardiology, nephrology and cardiothoracic surgery.

This programme aims to reduce patient congestion, shorten waiting times, improve healthcare quality and strengthen public-private collaboration in the national healthcare system.

Supported by the Medical Development Division, ProtectHealth serves as the strategic purchaser for HSOP by manages service requirements, pricing, payments and quality audits.

ProtectHealth invited private healthcare providers to submit proposals in response to a Request for Proposals (RFP) as part of the selection process. Out of the 210 proposals received, 106 were selected based on their adherence to pre-set standards and agreement with the MOH's terms and conditions.





Image 18.2 RFP Briefing Session for HSOP

Through HSOP, more than 35,000 service slots were allocated across 52 MOH hospitals in the outsourcing programme. 24,124 referred services have been successfully completed and have contributed to the programme objective of reducing waiting times.

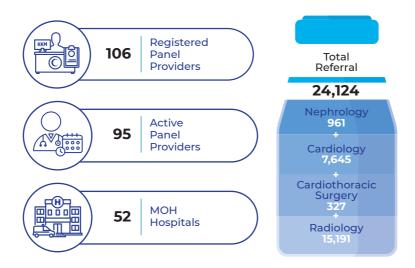


Figure 18.5 HSOP Panel Providers and Referral Cases Based on Services

HOSPITAL SERVICES OUTSOURCING SYSTEM (HSOS)

HSOP was successfully implemented in driving digital transformation through HSOS. This system improved programme management, streamlines the patient journey and enhances monitoring and evaluation which comprises of four (4) main modules as follows:

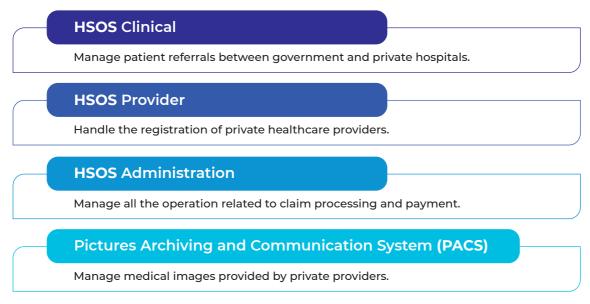


Figure 18.6 Four (4) Main Modules of HSOS

To provide real-time updates on HSOP data, ProtectHealth Digital Technology Department created HSOP dashboard. These initiatives are designed to support the government's digitalisation aspiration and the MOH efforts to improve service efficiency, enhancing user experience and promoting public transparency.

VALUE-BASED HEALTHCARE (VBHC) AND BUNDLED PAYMENT

ProtectHealth adopts the VBHC as a core operational principle to ensure the best healthcare services are delivered to patients while optimising costs, which ultimately leading to better health for Malaysians.

To support this approach, ProtectHealth introduced a new way of paying for certain services, called bundled payments mechanism under HSOP. This payment mechanism is a relatively novel approach in Malaysia that establishes a pre-determined fixed rate for specific services. This encourages hospitals to focus on providing the best care in the most efficient way, avoiding unnecessary procedures that often seen in traditional payment systems.

HEALTH INFORMATION EXCHANGE (HIE)

ProtectHealth has developed the HIE platform to empower individuals to easily access their health information from various ProtectHealth programmes like PeKa B40, SPM, National COVID-19 Immunisation Programme (PICK) and HSOP.

Individuals can view their health screening results, COVID-19 vaccination records and information about their primary care visits, all in one access. Beyond individual access, the HIE also serves as a crucial data hub for ProtectHealth, consolidating data. This integrated approach also enables data sharing with other platforms like MySejahtera.

HEALTH ADVOCACY

Health Advocacy Department is responsible for developing and disseminating health awareness materials on the importance of health screening, NCD prevention and the promotion of healthy lifestyles in line with *National Healthy Malaysia Agenda* (ANMS).

HEALTHYME TALK

HealthyMe Talk is held at ProtectHealth and broadcast live on Facebook and TikTok every Thursday. More than 50 sessions were conducted throughout 2024, covering topics such as the risks and prevention of NCDs, featuring speakers from ProtectHealth as well as external speakers. This programme aims to raise health awareness and encourage positive behavioural changes within the community through interactive discussions and the promotion of health literacy.







Image 18.3 HealthyMe Talk Session with ProtectHealth Staffs

JOM JALAN

Jom Jalan is an activity that promotes walking as a sustainable way to prevent NCDs and encourages engagement among ProtectHealth employees and the local community. Held every Friday at 5.00 pm in Cyberjaya.

Throughout 2024, more than 50 *Jom Jalan* sessions took place, with over 500 participants from both ProtectHealth and the community. The programme successfully promoted routine physical activity as an integral part of a healthy lifestyle and provided valuable opportunities for social interaction and peer support.





Image 18.4 Jom Jalan Activities around Perdana Lake Cyberjaya

ADVOCATE COMMUNITY ACTIVITY

This advocacy initiative encourages proactive healthcare through regular screenings, early detection and healthy lifestyle changes. Through health screening booths and community engagement at various locations and community events, ProtectHealth engaged over 800 individuals in more than 40 events. The initiative aims to promote preventive care and partnering with local healthcare providers to expand access to health information and screening.

KAMPUNG ANGKAT MADANI

Kampung Harmoni and Kampung Bukit Badong in Kuala Selangor have been selected as focus areas for health interventions under the MOH initiative targeting NCDs in these villages. The programme successfully engaged over 2,000 community members, fostering greater community involvement in health activities.





Image 18.5 Kampung Angkat MADANI Activities

WAY FORWARD

ProtectHealth is committed to advancing the MOH's vision for a transformed healthcare system, with a focus on addressing both immediate challenges and ensuring long-term sustainability. The principles of growth and sustainability are the core of ProtectHealth continuous development.

CHAPTER 19

MALAYSIAN
MEDICAL COUNCIL
(MMC)

MALAYSIAN MEDICAL COUNCIL (MMC)

MMC is a Federal Statutory Body established on 1st July 2017 after amendments were made to the Medical Act 1971 [Act 50] gazetted in 2012 that regulates the practice of medicine in Malaysia. The MMC is responsible for the registration of medical practitioners as mandated by the Act 50 to ensure the highest standard of medical ethics, education and practice in the interest of patients, the public and the profession through fair and effective administration. Under the provision of Section 4 of Act 50, the functions of the MMC are to register medical practitioners and regulate the practice of medicine. The objectives of MMC are to ensure the enforcement of the Medical Act 1971 and the Medical Regulations 2017, as well as to ensure the provision of safe and quality medical care to the nation through the registration of medical practitioner and the regulation of the conduct and ethics of Registered Medical Practitioners.

ACTIVITIES AND ACHIEVEMENTS

REGISTRATION OF MEDICAL PRACTITIONERS

Medical practitioners must be registered with the MMC to legally practice medicine in Malaysia. MMC ensures that registered medical practitioners possess the necessary knowledge, skills and competence to provide safe and effective treatment to the public. The types of medical practitioner registration are as follows:

- 1. Provisional Registration (sections 12 and 13) allows newly qualified practitioners to undergo clinical training (housemanship) under supervision.
- 2. Full Registration (section 14) allows a medical practitioner to practice independently. The following provisions relate to full registration under the act:
 - Section 14(1) refers to full registration granted to medical practitioner who has:
 - (a) Been provisionally registered under section 12.
 - (b) Submitted a certificate issued under subsection 13(2).
 - (c) Proven to the satisfaction of the Council, that he is fit and of good character.
 - ii. Section 14(2A) refers to full registration subject to such restrictions and conditions as may be stipulated by the Council for the following practitioners:
 - (a) Who intend to teach, do research, or pursue a post-graduate course in a specialty area under such recognized training programme in any recognized training institution.
 - (b) Who possess medical or surgical skills which the Council considers to be of international standing or to be a special value to the country.
 - (c) Who possess qualifications which in the Council's opinion are adequate, for so long as they continue to engage exclusively in teaching, research, or postgraduate studies, as the case may be.
 - iii. Section 14(3) refers to full registration subject to restrictions and conditions that permitted for practice according to the place of practice, scope of practice, and duration as determined by the Minister of Health, after consulting with the Council.

- 3. Specialist Registration (Under Sections 14A, 14B, and 14C of the Act) stipulates that a medical practitioner must be registered under these sections to practise as a specialist in that relevant specialty.
- 4. Temporary Practising Certificate (TPC) (Under section 16 of the Act) are issued to enable foreign-registered medical practitioners wishing to practice medicine in Malaysia usually for teaching, conducting research, attending post-graduate courses, to undergo clinical attachment or fellowship training for a period of less than one (1) year. The TPC cannot be used for employment purposes.
- 5. Certificate of Good Standing (COGS) is a verification certificate of the status of good standing of medical practitioner registered with the MMC for overseas purposes.
- 6. Annual Practising Certificate (APC) [section 20(1)] must be obtained by all Fully Registered Medical Practitioners to legally practice in Malaysia.

Table 19.1 Registration Application Approved by MMC 2024

Application	Total
Provisional Registration (sections 12 and 13)	3,142
Full Registration with No Condition [section 14(1)]	3,290
Full Registration with Condition [section 14(2A)]	172
Full Registration with Condition [section 14(3)]	67
Specialist Registration (section 14C)	1,506
Temporary Practising Certificate [section 16(1)]	197
Certificate of Good Standing	1,324
Annual Practising Certificate [section 20(1)]	74,333

The total number of TPC approved by country as shown in **Figure 19.1** and the total number of APC applications approved by state for the year 2024 as shown in **Figure 19.2**.



Figure 19.1 Number of TPC Application Approved by Country 2024

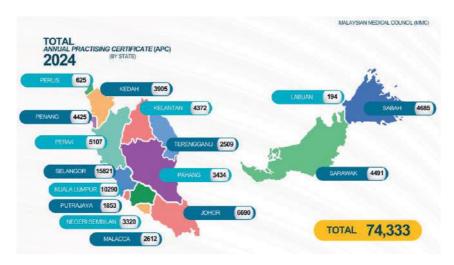


Figure 19.2 Number of APC Application Approved by State 2024

MEDICAL EDUCATION AND RECOGNITION

MMC also functions to recognise and accredit medical qualifications based upon the recommendation of the Joint Technical Committee established under the Malaysian Qualifications Agency Act 2007 [Act 679] for the purpose of registration.

The Medical Education Committee (MEC) has also been set up to establish educational standards and recognise medical qualifications. A total of one (1) standard and 15 Specialty Specific Requirements (SSR) have been approved by the MMC. Throughout the year 2024, accreditation visits were conducted according to the programmes. The list of standards and SSR qualifications, along with the total number of accreditation visits in 2024, is shown in **Figure 19.3**.



Figure 19.3 Medical Education and Recognition Activities 2024

A total of 53 panel assessors were appointed and involved in the accreditation visits. As a result, 33 qualifications have been updated in the Second Schedule of the Medical Act 1971, and eight (8) specialty programme qualifications have been granted full accreditation and recognition by the MMC.

LAW AND REGULATIONS (COMPLAINT)

MMC is responsible for receiving all complaints and information against Registered Medical Practitioners related to violations of the medical code of ethics and misconduct under the Medical Act 1971 and the Medical Act 1971 (Amendment 2012), despite being responsible for investigating and conducting case hearings involving prosecution and defence in accordance with the Standing Orders for the Conduct of Inquiries of the MMC.

MMC is also responsible to produce guidelines and to ensure that all the MMC's guidelines are updated regularly and relevant for reference by registered medical practitioners in particular and readers, generally. The main MMC's guidelines are the Code of Professional Conduct and the Good Medical Practice.

A workshop on the Disciplinary Panel 2024 organized by MMC was held to provide an updated information to all disciplinary panel members regarding the hearing processes and procedures, as well as to discuss issues and experiences gained during the handling of disciplinary hearings by the panels, as shown in **Image 19.1**.





Image 19.1 Disciplinary Panel Workshop 2024

MMC has organised workshops every three (3) months for appointed Legal Advisors on the Act, Standing Orders and Guidelines as part of efforts to strengthen case proceeding processes and ensure service quality with current knowledge. The statistic of complaints referred to the Preliminary Investigation Committee (PIC) against registered Medical Practitioners for the year 2024 are shown in **Table 19.2**.

Table 19.2 Statistic of Complaints Under the Medical Act 1971 (Amendment 2012) 2024

Act	PIC 1	PIC 2	PIC 3	PIC 4	PIC 5	Total
Medical Act 1971 (Amendment 2012)	21	21	19	20	22	103

Note:

No complaints recorded under Medical Act 1971.

FINANCIAL REPORT

The MMC financial report for the year ended 2024 as follows:



Figure 19.4 Financial Report of the MMC 2024

Note:

YA - Year Assessment

WAY FORWARD

MMC has restructured its key strategy to enhance the implementation of the Quality Management System (QMS). The MMC Audit Committee (JAMPM) will oversee both internal and external audit reports, while the governance of the QMS within MMC will be led by the Chief Executive Officer of MMC.

In compliance with Malaysian Standards ISO 9001:2015, MMC has introduced a Documentation Project, categorised into internal and external documents. Internal documentation refers to the SOP and e-Documents used by secretariat to carry out MMC's functions including administrative tasks, operational activities and secretariat duties. External documentation refers to documents produced by MMC's committees or secretariat for use by public stakeholders such as Registered Medical Practitioners, institutions and others.

This initiative aims to ensure the delivery of effective and high-quality services to all Registered Medical Practitioners in Malaysia, while also protecting patients.

CHAPTER 20

CLINICAL RESEARCH MALAYSIA (CRM)

CLINICAL RESEARCH MALAYSIA (CRM)

CRM is a Global Trusted Research Management Organisation established by MOH Malaysia in 2012. The organisation is guided by the principles of Humanity, Stability and Sustainability in providing global clinical trial solutions and enabling a thriving clinical research ecosystem in the country. At its very core, CRM aims to bring clinical research that addresses the unmet needs of patients and transforms health outcomes in Malaysia.

CRM delivers sponsored clinical trials with Speed, Reliability and Quality through operational excellence and working with stakeholders by providing end-to-end clinical research support services. Certified with both MS ISO 9001:2015 Quality Management System (QMS) and ISO 37001:2016 Anti-Bribery Management System (ABMS), and is aligned with international regulations, our core values and code of conduct are ingrained throughout CRM. The strength of this organisation lies in the people of CRM as we strive towards our vision to make Malaysia the preferred clinical research hub in Asia.

ACHIEVEMENTS

Approximately 2-3% of global sponsored research is conducted annually in Southeast Asia, with Malaysia leading the region in 2023 for new industry-sponsored studies. According to the IQVIA report, *Rethinking Clinical Trial Country Prioritization*, Malaysia ranks among the top 30 countries globally for clinical trial readiness, reflecting its strong capability in facilitating efficient research.

In 2024, 267 studies were approved by the Medical Research and Ethics Committee (MREC) of the MOH and Institutional Review Boards/Independent Ethics Committees (IRB/IECs) exceeding expected targets. The studies were conducted in MOH facilities, including public hospitals and primary healthcare centres referring to **Figure 20.1**.

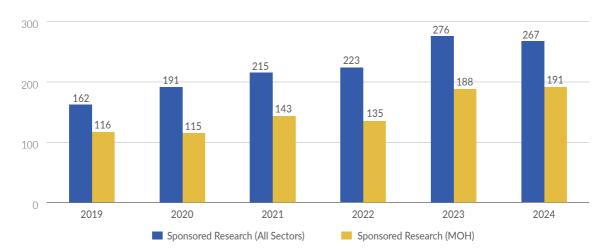


Figure 20.1 Sponsored Research 2019-2024

CRM has consistently achieved the targeted KPIs with surplus percentages as shown in **Table 20.1**. The investment valued at RM342,152,938 million was derived from the Clinical Trial Agreements (CTAs) executed in 2024.

Table 20.1 CRM KPI Achievement 2024

KPI	Target	Achievement	Rate Difference (%)
Sponsored Research (SR)	265 New Studies	267 New Studies	+0.75
SR in MOH Facilities	171 New Studies	191 New Studies	+11.7
CRM Income	RM26,900,000	RM29,892,301	+11.11
CRM Expenses	RM25,300,000	RM25,045,794	-1.01
GNI (CTA value)	RM260,000,000	RM342,152,938	+31.6

These agreements have contributed to a total Gross National Income (GNI) of RM1.505 billion for Malaysia's clinical research industry since 2012. Moreover, the nation's talent pool in the clinical research industry has expanded within the country, with several leading global biopharmaceutical companies having elevated their clinical research role and presence in Malaysia as shown in **Figure 20.2**.



Figure 20.2 Clinical Research Scorecard 2020-2024

CRM also operates as a Site Management Organisation (SMO) for sponsored research conducted at MOH sites, leveraging the expertise of its Study Coordinators (SCs). As shown in **Figure 20.3**, the number of CRM SCs has grown steadily each year to accommodate the increasing number of sponsored research projects. In 2024, CRM deployed over 200 SCs nationwide, reflecting an 8.1% growth compared to 2023. The primary role of CRM SCs is to support investigators in various study activities, with a key focus on facilitating recruitment efforts to help meet study enrolment targets. This growth highlights CRM's commitment to strengthening research capacity and supporting the success of clinical trials in Malaysia.

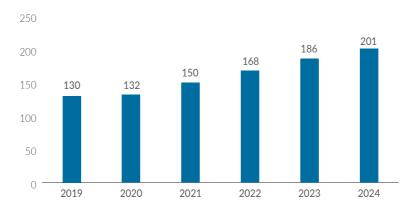


Figure 20.3 Number of CRM SCs 2019-2024

CRM is committed to increasing the number of clinical research studies conducted in Malaysia by maintaining continuous engagement with industry stakeholders. This involves working closely with established and emerging Contract Research Organisations (CROs) as well as pharmaceutical, biotechnology, and medical device companies (sponsors) to enhance the country's presence in global clinical research as shown in **Figure 20.4**. Through its online presence, CRM consistently raises awareness via social media platforms, achieving over 102 million visits and impressions in 2024, a substantial increase from the previous year.

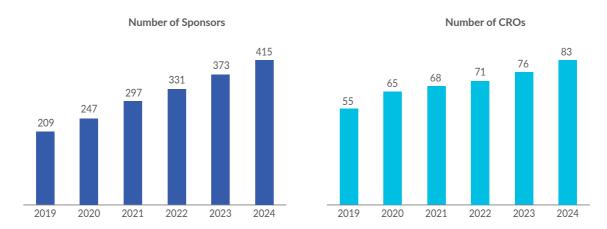


Figure 20.4 Sponsor and CRO 2019-2024

GLOBAL VISIBILITY

CRM has also conducted several impactful engagements with the top management of some of the global top biopharmaceutical companies during international meetings, which has produced key results in the expansion of studies in Malaysia, especially early phase studies.

Table 20.2 CRM Global Engagements 2024

International Speaking Engagement	
DIA China at Suzhou, China	17-19 May 2024
2024 Drug Information Association (DIA) Singapore Annual Meeting	16-17 July 2024
Singapore Clinical Research Institute (SCRI) Clinical Trials Symposium 2024	30-31 July 2024
The Regional Asian Clinical Trial Association (REACTA) Forum 2024 at Taipei Medical University Xinyi Campus, Taiwan	2-3 August 2024
BIOWEEK China 2024 at Shanghai, China	4-10 August 2024
INA-CRC Webinar	25 September 2024
ICN Annual General Meeting at Kyoto University Kyoto, Japan	30-31 October 2024
ARO Alliance for Southeast & East Asia (ARISE) Annual Meeting at the Faculty of Medicine Siriraj Hospital in Bangkok, Thailand	21-22 November 2024
Memorandum of Understanding (MoU) 20	24
CRM and Pharmaceutical Association of Malaysia (PhAMA)	4 January 2024
CRM and the Chinese University of Hong Kong (CUHK)	22 April 2024
CRM and Novo Nordisk	8 May 2024
CRM, CADENCE and Singapore Clinical Research Institute	30 July 2024
CRM and ICON Clinical Research Limited	9 October 2024
CRM and BeiGene Malaysia Sdn. Bhd.	12 December 2024

PHASE 1 REALISATION PROJECT PIRP 2.0

In 2024, CRM continued its commitment to advancing Malaysia's early-phase research capabilities. Two (2) SCs were sent on three (3) months attachments to the National University Hospital (NUH) in Singapore, and another four (4) went to a week attachment at National Taiwan University Hospital (NTUH) in Taipei, where they enhanced their expertise in Phase 1 studies. Additionally, two (2) National Pharmaceutical Regulatory Agency (NPRA) officers completed their Master's in Clinical Pharmacology with distinction at King's College London, under CRM's sponsorship.

Further growing the early phase capabilities in Malaysia, CRM flew in experts from Princess Margaret Cancer Centre who held a workshop with CRM study coordinators, sharing best practices for managing Phase 1 studies. Through case studies and group discussions, they emphasised the importance of proactive planning and effective communication within study teams, providing valuable insights to improve the management of early-phase clinical trials.

Malaysia also accomplished a significant milestone with five (5) new First-in-Human (FIH) trials received in 2024, the highest number ever recorded.

CRM ACTIVITIES

CRM successfully hosted its third annual conference, CRM Trial Connect 2024, in collaboration with the European Organisation for Research and Treatment of Cancer (EORTC) and the National Cancer Centre Japan (NCC). The conference highlighted Malaysia's achievements in sponsored clinical research and fostered global collaboration, drawing 1,000 participants from over 140 organisations across the clinical research community. Two (2) pre-conference workshops were held which is the Biostatistics in Oncology Research Workshop and the CTIL/CTX Good Submission Practice Workshop, in partnership with EORTC, NCC and NPRA.





Image 20.1 CRM Trial Connect 2024 Conference

In March 2024, CRM established the Centre of Excellence (CoE), featuring a flagship programme designed for graduates interested in clinical research careers in Malaysia. The programme offers targeted training and development opportunities to help participants build essential skills for the field. In its first year, 30 participants completed the programme across three intake cycles.

CRM also conducted various focused trainings and workshops, as shown in **Table 20.3**, to strengthen the quality of clinical research among investigator teams and industry stakeholders. These efforts have played a key role in improving research delivery and reaffirming CRM's commitment to excellence in clinical research.

Table 20.3 CRM Programmes 2024

Activities	Frequency
I AM AWARE Roadshow	7
Nurturing New Talents in Sponsored Research	5
Patient Recruitment and Retention Workshop	4
Good Clinical Practice Refresher Workshop	3
Study Coordinator Trainings during CRM Trial Connect	3
Regulatory Inspection Workshop	2
Protocol Compliance Workshop	2
NPRA Good Submission Practice Workshop	2
MREC Good Submission Practice Workshop	1
Biostatistics in Oncology Research	1

WAY FORWARD

In line with our vision to become Asia's preferred clinical research hub by 2033, CRM is guided by the values of Humanity, Stability and Sustainability. By prioritising these principles, we aim to nurture talent, foster impactful partnerships, and contribute to long-term economic growth.



Figure 20.5 CRM KPIs 2023-2033



CHAPTER

21

NATIONAL
CENTRE
OF EXCELLENCE
FOR MENTAL HEALTH
(NCEMH)

NATIONAL CENTRE OF EXCELLENCE FOR MENTAL HEALTH (NCEMH)

The establishment of the NCEMH under the Public Health Programme is an effort by the MOH towards strengthening the planning and implementation of the National Mental Health Programme in a comprehensive and holistic approach. NCEMH began operations on 21 October 2022 and functions as a coordination platform for the mental health programme, encompassing activities in promotion, prevention, intervention, training, surveillance and research on mental health covering the public, private and NGOs.

NATIONAL WORLD MENTAL HEALTH DAY 2024

The National World Mental Health Day Celebration with the theme *Prioritising Mental Health in the Workplace* was held on 10 October 2024 at the IPKKM. This annual event was officiated by Minister of Health and was attended by the top management of MOH, WHO and UNICEF, MOH staffs, representatives of ministries agencies and NGOs. The output of three (3) mental health initiatives had been launched as below:

- i. Mental Health Pocket Notes at Work
- ii. Helping Adolescent Thrive (HAT) Module: Komik Mei dan Rakan-Rakan
- iii. Mental Health Advocacy and Awareness Training Module for Community Leaders (K-MindSet)



Image 21.1 National World Mental Health Day 2024

MEETING OF THE MENTAL HEALTH PROMOTION ADVISORY COUNCIL (MPPKM)

The MPPKM Meetings No. 1/2024 and No. 2/2024, chaired by the Minister of Health, were held on 23 May 2024 and 11 November 2024 at IPKKM. The meetings were attended by MOH top management, representatives from ministries, agencies, NGOs and activists actively involved in mental health promotion and advocacy programmes. Discussions covered programme direction, implementation status and issues related to mental health. The outcomes of these discussions assisted the MOH in developing policies to enhance mental health services for the general public.





Image 21.2 MPPKM Meeting 2024

JELAJAH MINDA SIHAT

Jelajah Minda Sihat is one of the main activities under the Kempen Promosi Kesihatan Mental Milik Semua, Hentikan Stigma, which will be held in five (5) series. The first series of Jelajah Minda Sihat took place on 29 November 2024 in Cyberjaya and was attended by 2,074 visitors and ten (10) exhibitors. Four (4) more series are scheduled to be held in FT Kuala Lumpur, Kedah, Melaka and Pahang in 2025.

MALAYSIAN SUICIDE AWARENESS VOICE OF HOPE (MySAVE) PROGRAMME

MySAVE was launched on 31 July 2023 to strengthen the implementation of suicidal behaviour prevention activities at the national level. Activities under this programme in 2024 are as follows:

NATIONAL SUICIDE AND FATAL INJURY REGISTRY MALAYSIA (NSFIRM) SYSTEM DEVELOPMENT PROJECT

The development of the NSFIRM System is an effort by the MOH to strengthen the surveillance of deaths due to suicide and fatal injuries. Through digitisation, data on deaths due to suicide and fatal injuries can be collected and officially recorded. Accurate and quality data can then be used in the development of policies to prevent suicidal behaviour and fatal injuries. The project period is 30 months starting on 4 January 2024 and is expected to end on 3 July 2026. The development of this system involves various parties including the MOH Subject Matter Experts (SME) including forensic medicine specialists and psychiatrists.

BRIEFING ON SAFE AND RESPONSIBLE MEDIA REPORTING RELATED TO SUICIDAL BEHAVIOUR

The purpose of this briefing is to raise awareness among Public Relations Officers (PROs) of ministries and agencies in the public service and media practitioners about safe and responsible reporting of suicidal behaviour. The briefing was officiated by Deputy Minister of Health on 15 August 2024.



Image 21.3 Briefing on Safe and Responsible Media Reporting Related to Suicidal Behaviour

NATIONAL NEGOTIATION SUICIDE SKILLS TRAINING COURSE FOR CRISIS INTERVENTION OFFICERS

This course was held on 28-30 October 2024. The objective of this course is to increase knowledge and understanding of suicidal behaviour prevention and to improve the counselling skills of first-line responders in handling cases of suicidal behaviour. A total of 80 participants had attended the course including MOH representatives, officers from PDRM, APM, JKM and Maritim. This course was conducted by three (3) instructors who are experienced counselling experts from Hong Kong, Switzerland and Scotland.

MENTAL HEALTH AT WORK INITIATIVE

DEVELOPMENT OF MODUL OCCUPATIONAL PSYCHOLOGICAL FIRST AID (OPFA)

The OPFA Module was developed through collaboration with the Ministry of Human Resources (KESUMA) and the National Institute for Occupational Safety and Health (NIOSH). The module was used to train 10,000 workers from various sectors and industries in 2024. The training objective is to provide basic awareness and skills to employers and employees in managing workplace stress and exposure to necessary intervention and treatment. *Nota Poket Kesihatan Mental di Tempat Kerja* containing information on psyco-education to maintain mental health has also been developed as a brief guide in addressing stress at work.

DEVELOPMENT OF GUIDELINES FOR MANAGING BULLYING IN THE WORKPLACE FOR MOH STAFF

Meeting to develop the guidelines was held on 21-23 October 2024 in Port Dickson and attended by the Technical Working Group (TWG) consisting of representatives from the Medical Development Division, Dental Health Programme, Pharmacy Services Programme, Food Safety and Quality Programme, Nursing Division, psychiatrist, public health medicine specialist and Integrity Unit.

MENTAL HEALTH SERVICES TO INCREASE ACCESS TO COMPREHENSIVE AND QUALITY SERVICES

TALIAN HEAL 15555

HEAL stands for Help with Empathy and Love and *Talian* HEAL 15555 is the mental health crisis helpline that began operating on 21 October 2022 and is operated by MOH Psychology Officers (Counselling). A cumulative of 76,571 calls have been recorded as of 31 December 2024. 64% of callers have received support and emotional assistance while 36% have been given specific interventions including 367 cases of suicidal behaviour, of which 140 cases of attempted suicide were successfully saved and referred to hospital through the activation of MERS 999 and the cooperation of PDRM and the emergency department. The trend in the number of calls by month shows an increase as shown in **Figure 21.1**.

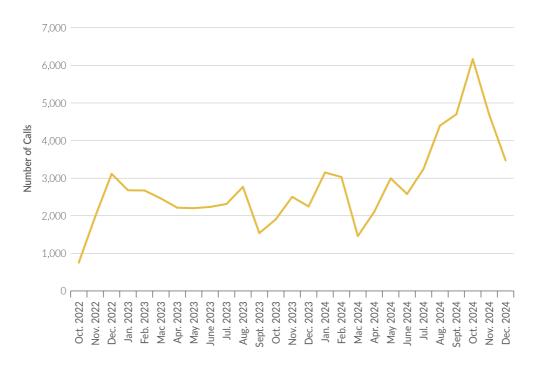


Figure 21.1 Number of Calls to the HEAL 15555 Hotline by Month

MENTAL HEALTH SCREENING SERVICES AT HEALTH CLINICS THROUGH THE MYMINDA MYSEJAHTERA APPLICATION

The implementation of the MyMinda module in the MySejahtera application is a collaboration between NCEMH and the Digital Health Division (BKD). This service was launched on 22 October 2023 involving primary healthcare facilities across the country. A total of 142,923 individuals have undergone screening through MyMinda in 2024. Efforts to promote MyMinda will be carried out in 2025 to increase the number of individuals undergoing screening and accessing mental health information through MyMinda. For this purpose, the screening targets for 2025 have been set based on the population of each state.

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT SERVICES (MHPSS)

The MOH provides at least one MHPSS team in each district which plays a role in providing screening, psychological first aid (PFA), psycho-education, psychosocial and counselling services to individuals in need including frontline workers during crises and disasters. MHPSS activities for 2024 are as shown in **Table 21.1**.

Table 21.1 Report on Psychosocial Interventions by MHPSS Teams Categorized by Disaster Type 2024

	Number of MHPSS Personel					Number of Individuals/ Groups Given Intervention			Given Intervention					
Type of Disaster	Number of Locations Visited	Psychiatrist	Family Medicine Specialist	Medical Officer	Psychology Office	Paramedic	Others	General Public	MOH Personnel	Other Agency Personnel	Group Session	Relaxation	Art Expression	Psychoeducation
Flood	760	8	10	548	249	1,003	635	25,335	406	537	1,006	7,388	4,577	14,401
Landslide	1	0	0	1	1	3	0	23	0	0	3	0	0	23
Fire	3	1	0	2	8	4	2	99	1	0	3	95	9	98
Total	764	9	10	551	258	1,010	637	25,457	407	537	1,012	7,483	4,586	14,522

KOMUNITI MINDA SEJAHTERA (K-MindSet) PROGRAMME

K-MindSet programme aims to strengthen mental health care within local communities through the concept of task shifting, involving community leaders, religious figures and influential individuals who are closely connected to the community. Melaka was selected as the pilot project site for the implementation of the K-MindSet programme, where a total of 161 community leaders from three (3) *Dewan Undangan Negeri* (DUN) were trained. The main activities of the K-MindSet programme for 2024 are as follows:

- Pembangunan Modul Latihan Advokasi Kesedaran dan Kesihatan Mental kepada Ketua Komuniti.
- ii. Kursus Training of Trainers (ToT) Advokasi dan Kesedaran Kesihatan Mental kepada Ketua Komuniti which was held on 7-9 May 2024.

COLLABORATION BETWEEN AGENCIES 2024

NCEMH has collaborated with other agencies as follows:

- i. Adaptation of the Helping Adolescent Thrive (HAT) Module: *Komik Mei dan Rakan-Rakan* in collaboration with UNICEF and WHO. This module will be used to train prospective teachers and trainees at Teacher Education Institutes (IPG) nationwide.
- ii. Development of the Mental Health Module from a Dakwah perspective in collaboration with Yayasan Dakwah Islamiyah Malaysia (YADIM).

MENTAL HEALTH RELATED RESEARCH

Mental health related research is a collaborative effort of NCEMH with the involvement of the NIH. Through this collaboration, 17 studies were successfully conducted in 2021-2023 and eight (8) research papers were approved for implementation in 2024 as per in **Table 21.2**.

Table 21.2 List of Mental Health Research Papers 2024

Research Title	Researcher
Prevalence of self-harm, its associated risk factors and profiles among young patients referred to psychiatry from emergency department of state hospitals in Peninsular Malaysia	National Institutes of Health (NIH)
The effect of psychoeducational intervention (PEI) in reducing pain, depression, anxiety, and improving quality of life among patients with endometriosis	NIH
Gut microbiome profiles among major depressive disorders (MDD) patients in selected hospital in Klang Valley, Malaysia	NIH
Prevalence of depression among antenatal and postnatal women in Klang Valley Malaysia	NIH
Keberkesanan mesej promosi minda sihat untuk pembudayaan hidup sihat - adaptasi teori nudge dalam behaviour insight (2023-2024) sub-kajian: penilaian kempen 'hentikan stigma terhadap kesihatan mental'	Institute for Health Behavioural Research (IHSR)
Excessive screentime and effect towards mental health among adolescent - nationwide (quantitative)	IHSR
Help-seeking behaviour on mental health among adolescent (IPTK mencadangkan kajian ini disatukan dengan kajian excessive screentime and effect towards mental health among adolescent - nationwide (quantitative)	IHSR
Effects of naltrexone treatment across varied patterns of drug dependence in Malaysia	NIH



GLOSSARY

GLOSSARY

ABMS	Anti-Bribery Management System		ASEAN Emergency Operations Centre
ACM	Advanced Clinic Management	Network	
ADSSR	ASEAN Drug Security and Self- Reliance		Optical Surveillance Audits Aspirasi Pemakanan Rakyat
AED	Automated External Defibrillator	ATAB	Immovable Assets Buildings Audit
	ASEAN Energy Management Scheme		Immovable Assets Land Audit
	ASEAN Framework Agreement on	ATISA	ASEAN Trade in Services Agreement
AI AO	Services	ATMPs	Advanced Therapy Medicinal Products
AFHS	Adolescent Friendly Health Services	ATT	Anti Tetanus Toxoid
AGC	Attorney General's Chambers	AUDA-	African Union Development Agency
AHC	ASEAN Health Clusters	NEPAD	Amount Development Agency
AHMM	ASEAN Health Ministers Meeting	B2C	Business-to-Consumer
AHP	Allied Health Professions	ВА	Account Division
AHSD	Allied Health Sciences Division	BAKAS	Rural Environmental Sanitation
Al	Artificial Intelligence		Programme
AIGA	Integrity, Governance and Anti-	BAP	Medical Practice Division
	Corruption Award	BDHA	Policy and International Relations Division
	All India Institute of Ayurveda	BeBAs	Premis Bersih, Bebas Asap
AIRC	Allergy & Immunology Research Centre	BEMS	Biomedical Engineering Management
AJCCD	ASEAN Joint Coordinating Committee		Services
	on Dental Practitioners	BER	Beyond Economic Repair
AJCCM	ASEAN Joint Coordinating Committee	BeSS	Premis Bersih dan Selamat
A ICCN	on Medical Practitioners	BFHI	Baby-Friendly Hospital Initiative
AJCCN	ASEAN Joint Coordinating Committee on Nursing	BKD	Digital Health Division
AMM	Academy of Medicine Malaysia	BKj	Nursing Division
AMO	Assistant Medical Officer	BKKM	Food Safety and Quality Division
AMR	Antimicrobial Resistance	ВКР	Disease Control Division
AMS	Antimicrobial Stewardship	ВКР	Management Service Department
ANMS	Agenda Nasional Malaysia Sihat	BLESS	Business Licensing Electronic Support System
APC	Annual Practising Certificate	BLS	Basic Life Support
APC	Excellent Service Award	BMSS	Bulan Malaysia Sihat Sejahtera
APEL (C)	Accreditation of Prior Experiential Learning for Credit Award	BOR	Bed Occupancy Rate
APEQ	EQA Monitoring Application	BPE	Benign Prostatic Enlargement
APN	National Development Awards	ВРК	Competency Development
APPL	Approved Products Purchase List	DDV A	Department Public Health Development Division
AR	Action Research	BPL	Training Management Department
ARISE	ARO Alliance for Southeast & East	BPM	Information Management Department
	Asia	BPP	Medical Development Division
ARV	Antiretroviral	BPPs	Procurement and Privatisation Division
ASD	Autism Spectrum Disorder	BPR	Business Process Reengineering
ASEAN	Association of Southeast Asian Nations	BSM	Human Resource Division
		DOW	Haman nesource Division

втм	Bilateral Technical Meeting	СМЕ	Continuing Medical Education
ВТР	Biomedical Technical Personnel	CNE	Continuous Nursing Education
C&P	Credentialing and Privileging	CoE	Centre of Excellence
CAB	Cognitive Affective & Behaviour	COED	Centre for Organisational Excellence
CAC47	47 th Session of theCodex Alimentarius Commission	cogs	Development Certificate of Good Standing
CACMS	Chinese Academy of Chinese Medical		Communication for Behavioural Impact
CAD	Sciences Internal Audit Division	COPPA	Code of Practice for Programme
CAD	Cancer Research Centre	СРС	Accreditation Certified Professional Coach
	Fully Paid Study Leave	CPD	Continuing Professional Development
СВС	Coloured Brain Communication	CPE	
			Clinical Practice Guidelines
CBE	Cone Beam Computed Tomography Clinical Breast Examination	CPP	
	Chemical, Biological, Radiological,		Medical Legislation Section
CBRNe	Nuclear and Explosives	CPPP	Medical Services Development Section
CCFO	Codex Committee on Fats and Oils	CPPPP	Assistant Medical Officer Services Section
	Country-Core Group	CPRC	Crisis Preparedness and Response
CCGD	Clinical Governance Development Centre	01110	Centre
CCMS	Cloud-based Clinic Management	CRC	Clinical Research Centres
	System	CRM	Clinical Research Malaysia
CCRN	Coordination of Clinical Research Network		Contract Research Organisations
ccs	Country Cooperation Strategy	CSR	' '
CCTV	Closed Circuit Camera System		Clinic Support Service
CDC	Centers for Disease Control and		Central Sterile Supply Unit
020	Prevention		Clinical Trial Agreements
CDR	Crude Death Rate	CTPR	Control of Tobacco Product Regulations
CenSSIS	Central Sterile Supply Services Information System	СИНК	Chinese University of Hong Kong
CFP	Corruption-Free Pledge	DAP&E	Postgraduate Diploma in Applied Parasitology and Entomology
CFR	Case Fatality Rate	DBM	Double Burden of Malnutrition
CHeER	Centre for Health Economics Research		Drug Control Authority
CHER	Centre for Health Equity Research	DDMS	Digital Document Management System
СНММ36	36 th Commonwealth Health Ministers Meeting	DG	Director-General of Health
CHOR		DHSKP	Differentiated HIV Services for Key
CHPR	Centre for Health Policy Research	DIA	Populations Drug Information Association
CHQR	Centre for Healthcare Quality	DIS	Drug Information Association Dental Information System
	Research	DLKK	National Health Literacy Policy
CHSR	Centre for Health Services Research	DERK	Diabetes Mellitus
CI	Clinical Instructor	DMM	Diploma in Medical Microbiology
CKAPS	Private Medical Practice Control Section	DNDi	Drugs for Neglected Diseases Initiative
СКРР	Medical Care Quality Section	DOE	Department of Environment
CLS	·		·
CLS	Cleansing Services	DOSH	Department of Occupational Safety and Health

DPA	Daftar Premis Aset	FMR	Fluoride Mouth Rinsing
DRL	Diagnostic Reference Levels	FMS	Facility Management Services
DT	Diphtheria and Tetanus	FOMEMA	9
DTS	Temporary Detention Depots		Coordination and Surveillance System
DUN	Dewan Undangan Negeri		Forensic Information System
DVS	Department of Veterinary Services		Food Safety and Quality Programme
e-LATS	Sistem Rekod Latihan Hospital		Federal Territory
	Selayang		Field Training Exercise
EH	Extended Hours	FWBD	Foof and Waterborne Diseases
EHRA	Environmental Health Risk Assessment	FWMES	Foreign Workers Medical Examination System
	Environmental Health Research Centre	G2D	Grade 2 Disabilities
	Environmental Health Risk Inventory	G2G	Government-to-Government
EI	Entomological Investigation	GAC	Global Affairs Canada
	Environmental Impact Assessment Ekosistem Kondusif Sektor Awam	GATS	Global Adult Tobacco Survey
		GDM	Gestational Diabetes Mellitus
EM HIS	Enterprise Management Hospital Information System	GDP	Gross Domestic Product
EMGS	Energy Management Gold Standard	GeCares	Integrated care for the elderly at the
EMR	Electronic Medical Records		primary health level
EMTCT	Elimination of Mother-to-Child	GIS	Geographic Information Systems
	Transmission	GLAAS	Global Analysis and Assessment of Sanitation and Drinking-Water
eNCDC	Electronic System National Centre for Disease Control	GMEC	Governance, Monitoring & Evaluation Committee
	Enhanced Primary Healthcare	GMP	Good Manufacturing Practice
EORTC	European Organisation for Research and Treatment of Cancer	GNI	Gross National Income
eР	eProcurement system	GP	General Practitioners
ePlacement	Medical, Dental and Pharmacy Officer	GRP	Good Regulatory Practices
	Placement Selection System	GSCF	Global Self-Care Federation
EPO	Erythropoietin	H.E.A.R.T.	Healthcare Equity for Affordable and
EQA	External Quality Assurance		Rapid Treatment
ERL	Express Rail Link	H.E.A.R.T.S.	House Officer Encouragement and Reassurance Through Sharing &
ESD	Engineering Services Division		Support
ESG	Environmental, Social and Governance	НА	Health Accounts
ESP	Electronic Service Provider	HACCP	Hazard Analysis Critical Control Point
eTAMS	Time Attendance Management System	HAT	Helping Adolescent Thrive
EVALI	E-Cigarette or Vaping Product Use- Associated Lung Injury	HCAP	Health Clinic Advisory Panel
EX COMSEC	National Comprehensive Security	HCD	Healthcare Demand
	Exercise	HCL	Healthier Choice Logo
FAO	Food and Agriculture Organisation	HEAL	Healthcare Excellence and Leadership
FDI	International Dental Federation		Programme
FEMS	Facility Engineering Management	HED	Health Education Division
F05	Services	HEP	Higher Education Provider
FGD	Focus Group Discussion	HIC	Health Informatics Centre
FHDD	Family Health Development Division	HIE	Health Information Exchange
FIH	First-in-Human		

	Linglib Information Funbanes Winter		Mala via lastituta of late wit.
HIE-VC	Health Information Exchange - Virtual Clinic	IIM	Malaysian Institute of Integrity
HIS	Hospital Information System	IIR IJN	Investigator-Initiated Research National Heart Institute
HLP	Hadiah Latihan Persekutuan		Holistic Well-Being Inventory
нмі	Muslim Friendly Hospital	IKH IKN	National Cancer Institute
HMRC	Herbal Medicine Research Centre	IKU	Institute for Public Health
HoR	House of Representative	ILD	Institute of Leadership and
HOs	House Officers	ILD	Development Development
HPT	Hypertension	ILKKM	Ministry of Health Training Institutes
HPV	Human Papillomavirus	IMDEC	Medical Device Exhibition and
HRH	Human Resource for Health		Conference
HRM	Human Resource Module	IMR	Infant Mortality Rate
HRMIS	Human Resource Management Information System	IMR INB	Institute for Medical Research Intergovernmental Negotiating Body
HRPB	Hospital Raja Permaisuri Bainun	INTAN	National Institute of Public
	Health Sciences Authority		Administration
HSIS	Hospital Sultan Idris Shah	INTOSAI	International Organisation of Supreme Audit Institutions
HSOP	Hospital Services Outsourcing Programme	INTRACOM	International Conference on Traditional and Complementary Medicine
HSOS	Hospital Services Outsourcing System	IP	Investigation Papers
HSS	Hospital Support Services	IPGM	Institutes of Teacher Education
HTA	Health Technology Assessment		Malaysia
HWMS	Healthcare Waste Management Services	IPKKM	Ministry of Health Malaysia Headquarters
IADR	International Association for Dental Research	IPT	Higher Education Institutions
IAEA	International Atomic Energy Agency	IPTS	Private Universities
IBS	Industrialised Building System	IR	Implementation Science and Research
ICD	International Classification of Diseases	IRB	Institutional Review Boards
ICR	Institute for Clinical Research	ISMS	Information Security Management System
ICT	Information and Communication	ISN	Institut Sukan Negara
	Technology	ISR	Industry-Sponsored Research
IDFR	Institute of Diplomacy and Foreign Relations	IT	Information Technology
IDRC	Infectious Diseases Research Centre	ITMCTR	International Traditional Medicine Clinical Trial Registry
IFitEr	I Fit Eat Right	JAKOA	Department of Orang Asli
IFSTC	International Food Safety Training Centre	JAMPM	Development MMC Audit Committee
iGFMAS	Government Financial Management	JANM	Accountant General's Department of
iGG	Accounting System IKON GIGI		Malaysia
IHBR	Institute for Health Behavioural	JBPM	Fire and Rescue Department of Malaysia
	Research	JDN	National Digital Department
IHM	Institute for Health Management	JDPKK	Ministry of Health's Policy and
IHR	International Health Regulations		Planning Committee
IHR-PVS	International Health Regulations - Performance of Veterinary Services	JEE	Joint External Evaluation
IHSR	Institute for Health Systems Research	JKAM	Food Analysis Committee

JKM	Department of Social Welfare	KDDV	Director-General of Public Services
JKMMBBM	Special Committee on Combating the	KPS	
JKININIDDINI	DBM among Children	KPWKM	Ministry of Women, Family and
JKN	State Health Department	KF W KIVI	Community Development Malaysia
JKPAK	Government Movable Asset Management Committee	KSMM	Strategic Framework of Malaysia MADANI
JKPPT	Land Management and Monitoring	KSU	Secretary-General
II/D	Committee	KUA	Know Your Medicines Programme
	Public Works Department	KWAP	Retirement Fund (Incorporated)
JKWPKL&P	Jabatan Kesihatan Wilayah Persekutuan Kuala Lumpur dan Putrajaya	KWKK	Women, Children and Cardiology Complex
JLN	Joint Learning Network	LA	Legal Advisor
JM	Community Nurses	LAJPPI	Islamic Medical Practitioners Council
JMP	Joint Monitoring Programme for Water		Lean Centre of Excellence
	Supply Sanitation and Hygiene	LCP	Letter of Credentialing and Privileging
JMSNC	Joint Malaysia-Singapore Nursing Conference	LDP	In-Service Training
JoHM	Journal of Health Management	LF	Lymphatic Filariasis
	9	LINAC	Linear Accelerator
JPICT	Public Service Department MOH ICT Stagging Committee	LJPM	Malaysian Dental Therapist Board
JPICI	MOH ICT Steering Committee Road Transport Department	LLS	
JPM	Prime Minister Department	LNTP	Annual Performance Appraisal Report
JPP-NIH	Board Review Committee at National	LPKKM	Procurement Board of the Ministry of Health
JFF-MIII	Institutes of Health	I PM	Food Handling Training
JTBPK	Jawatankuasa Tindakan bersama Pembangunan Kesihatan	LTAT	Laboratory Turnaround Time
JTC	Joint Technical Committee	MA63	Mesyuarat Penyelarasan Perjanjian
JTPK	Ministry Development Action		Malaysia 1963
	Committee	MACA	, , ,
JTWA	Jururawat Terlatih Warganegara Asing	MACC	,
KBS	Ministry of Youth and Sports Malaysia	MADPHS	Malaysian Association of Dental Public Health Specialists
KD	Rural Clinic	MAFS	Ministry of Agriculture and Food
KDN	Ministry of Home Affairs Malaysia		Security Malaysia
KE	Ministry of Economy Malaysia	MAFSA	Malaysian Food Safety Association
KESUMA	Ministry of Human Resources Malaysia	MAHPC	Malaysian Allied Health Professions
KIK	Kumpulan Inovasi dan Kreatif	MaHTAS	Council Malaysia Health Technology
KJH	Jom Heboh Carnival	WATIAS	Assessment Section
KK	Health Clinic	MARA	Majlis Amanah Rakyat
KKIA	Maternal and Child Health Clinic	MaTiC	Malaysia Tourism Centre
KKom	Community Clinic	MBS	Melbourne Business School
KKV1	Hospital Kluster Lembah Klang Satu	MCAM	Mouth Cancer Awareness Month
KLCC	Kuala Lumpur Convention Centre	МСО	Movement Control Order
KMAM	Water Quality Bill Programme	MCOs	Managed Care Organisations
KOL	Key Opinion Leader	МСР	Micro-Credential Programme
KPI	Key Performance Indicator	MDA	Medical Device Authority
KPKT	Ministry of Housing and Local Government Malaysia		

MDA SCATE	Malaysian Dental Association Scientific	МОНЕ	Ministry of Higher Education Malaysia
	Convention and Trade Exhibition	MOHEC	
MDC	Malaysian Dental Council		Engineering Convention
MDCT	Multidetector Computed Tomography	MOHMF	MOH Medicines Formulary
MDD	Medical Development Division	MONASH	Monash University Malaysia
MDS	Minimum Data Set	MOSTI	Ministry of Science, Technology and Innovation Malaysia
MEC	Medical Education Committee	MoU	Memorandum of Understanding
MEET	Medical Equipment Enhancement Tenure	MPC	Malaysia Productivity Corporation
MeMoSA	Mobile Mouth Screening Everywhere	MPIS	Medical Programme Information
MENTARI	Community Mental Health Centre		System
MeRITS	Medical Register Information and Technical System	MPPKM	Mental Health Promotion Advisory Council
MGVI		MQA	Malaysian Qualifications Agency
MHFL	Master Health Facility List Malaysia	MQT	Ministerial Question Time
MHLS	Malaysia Health Literacy Survey	MRA	Mutual Recognition Arrangement
MHPS	Malaysian Healthcare Practitioners'	MRCS	Malaysian Red Crescent Society
MHPSS	System Mental Health and Psychosocial	MREC	Medical Research and Ethics Committee
	Support Services	MRI	Magnetic Resonance Imaging
MHTC	Malaysia Healthcare Travel Council	MRSD	Medical Radiation Surveillance Division
MHX	,	MSF	
MIH	Malaysia International Healthcare	MSOHD	Malaysian Society of Occupational
MINDEF	Ministry of Defence Malaysia		Health Doctors
MIROS	Malaysian Institute of Road Safety Research	MSU	Management Science University
MITI	Ministry of Investment, Trade and	MTL	Northeast Monsoon
IVII 1 I	Industry Malaysia	MTO	Malaysian Trained Oversea
MJA	Water Vending Machines	MTPK	Ministry Development Action Council
MKHU	Medicine Price Transparency Mechanism	MTPN MyACPP	National Development Action Council Malaysia Advanced Clinical Pharmacy
MKKM	Food Safety and Quality Laboratories	y/.tor :	Programme
MLT	Medical Laboratory Technologist	MyHDW	Malaysian Health Data Warehouse
MMB	Malaysia Midwives Board	MyMediSAFE	Initiative for the Disposal of Unuse
MMC	Malaysian Medical Council		Patient Medicines for Enviromental Sustainability
MMPA	Concept of Public Service Malaysia MADANI	MyNAPHS	Malaysia National Action Plan for Health Security
MMR	Maternal Mortality Ratio	MyPRICISE	Malaysian Prioritisation of Vaccine
MNB	Malaysian Nursing Board	,.	Selection
MNHA	Malaysia National Health Accounts	MyPsyd	Digital Psychological Health Profiling
MoA	Memorandum of Agreement		for Public Service Officers
MOC	Malaysian Optical Council	MySAVE	Malaysian Suicide Awareness Voice of Hope
MOE	Ministry of Education Malaysia	MySED	Malaysia Strategy for Emerging
MOF	Ministry of Finance Malaysia	,	Diseases and Public Health
МОН	Ministry of Health Malaysia		Emergencies
MOH-AMM	Ministry of Health - Academy of Medicine Malaysia	NACBE	National Advisory Council for Biomedical Engineering

NAHRIM	National Water Research Institute of Malaysia	NOHRI	National Oral Health Research Initiative
NATCM	National Administration of Traditional	NOHSP	National Oral Health Strategic Plan
NCC	Chinese Medicine	NORNA	1 9
NCC	National Credentialing Committee	NDANM	Audit National Plan of Action for Nutrition of
NCC NCCFN	National Cancer Centre Japan National Coordinating Committee on	NPANM	Malaysia
	Food and Nutrition	NPGRP	National Policy for Good Regulatory Practice
NCDs	Noncommunicable Diseases	NPHL	National Public Health Laboratories
NCEMH	National Centre of Excellence for Mental Health	NPQH	National Policy for Quality in
NCFS	National Centre for Food Safety	NDDA	Healthcare
NCORT	National Committee on Resuscitation Training		National Pharmaceutical Regulatory Agency
NCS	National Circumcision Symposium	NRES	Ministry of Natural Resources and Environmental Sustainability Malaysia
NCSM	National Cancer Society Malaysia	NSFIRM	National Suicide and Fatal Injury
NEHAP	National Environmental Health Action Plan		Registry Malaysia
NEOCX	National Emergency Operations		National Strategic Plan
	Centre Simulation Exercise	NSP-NCD	National Strategic Plan for Non- Communicable Diseases
NERCIM	Network of Ethics Committees in Malaysia	NSR	National Specialist Register
NFP	National Focal Point	NTUH	National Taiwan University Hospital
NFSNC	National Food Safety and Nutrition	NUH	National University Hospital
	Council	NVI	Non-Intervention Arm
NGO	Non-Governmental Organisation	O&G	Obstetrics & Gynecology
NHA	National Health Accounts	O&M	Operational Support & Maintenance
NHDS	National Health Demand & Supply Survey	OAHS	Orang Asli Health Survey
NHF	National Health Financing	OASS	Orang Asli Health and Well-being Agenda
NHMS	National Health and Morbidity Survey	ODL	Open and Distance Learning
NHSA	National Healthcare Security Administration	OECD	Organisation for Economic Co- operation and Development
NHSI	National Health Screening Initiative	OGA	Ops Gempur Aedes
NIA	National Indicator Approaches	OHD	Occupational Health Doctor
NIES	National Institute for Environmental	OHP	Oral Health Programme
	Studies	OHS	Online Health Services
NIH	National Institutes of Health	OIC	Organisation of Islamic Cooperation
NIOSH	National Institute for Occupational Safety and Health	OJS	Open Journal System
NIP	National Immunisation Programme	OMFS	Oral Maxillofacial Surgery
NIP	Nutrition Information Panel	OOP	Out-of-Pocket
NLSP	National Laboratory Strategic Plan	OPFA	Occupational Psychological First Aid
NMCRC	Nutrition, Metabolism & Cardiovascular	OPG	Orthopantomogram
	Research Centre	OPMDs	Oral Potentially Malignant Disorders
NMR	Neonatal Mortality Rate	OSA	Obstructive Sleep Apnea
NNA	National Nursing Audit	OSH	Occupational Safety and Health
NNIA	National Nursing Indicator Approach	P1RP	Phase 1 Realisation Project

PACS	Picture Archiving and Communication System		Day Care Centres
PACU	Performance Acceleration	PKD	District Health Offices
	Coordination Unit		Ministry's Financial Statements Pakeliling Kemajuan Parkhidmatan
PAOM	Pertubuhan Akademi Optometri Malaysia		Pekeliling Kemajuan Perkhidmatan Awam
PBOA	Pasukan Bergerak Orang Asli		People Living with HIV
PBT	Local Authority		International Entry Points
PBTT	Pihak Berkuasa Tatatertib	PMR	Programme MADANI Rakyat
PD	Protocol Deviation		Proof of Concept
PDK	Authorised Officers		Post Occupancy Evaluation
PDK	Community-Based Rehabilitation		Polypropylene
PDN	National Blood Centre	PPD	Domiciliary Care Service
PDPK	Health Plan and Policy Planning	PPH	Postpartum Haemorrhage
PDRM	Royal Malaysia Police	PPKIK	Centre for Health Communication and Informatics Research
PDU	Flying Doctor Service	PPP	Public-Private Partnership
PEFLK	National Lymphatic Filariasis		Penolong Pegawai Sains
	Elimination Programme		University Teaching Hospital Network
	Psychoeducational Intervention		Penjawat Pengurusan Tertinggi
	Environmental Health Protection Unit		Perkhidmatan Awam
PeKa B40	Skim Peduli Kesihatan untuk Kumpulan B40	PPW	Compulsory Placement Programme
PFA	Psychological First Aid	PQA	Professional Qualifying Assessment
PFI	Private Financing Initiatives	PQE	Professional Qualifying Examination
PFK	Health Facility Planning	PrEP	Pre-Exposure Prophylaxis
PG Dental	Postgraduate Dental Programme	PRISMA	Pharmacist Registration Management System
PGA	General Operations Force Base	ProKEM	Program Keselamatan Makanan
PhAMA	Pharmaceutical Association of Malaysia		Public Relations Officers
PHC	Primary Healthcare	PROSIS	Siswa Sihat Programme
	ProtectHealth Corporation Sdn. Bhd.	PSS	Putrajaya Sihat Sejahtera
PHEOC	Public Health Emergency Operations	PTPKWE	Elderly Health Services Action Plan
	Centre	PWD	Persons with Disabilities
PHFS	Private Healthcare Facilities and Services	QA	Quality Assurance
рш	Public Health Laboratories	QAP	Quality Assurance Programme
	ProtectHealth Malaysia	QMS	Quality Management System
	Penyajian Hidangan Sihat Semasa	R&D	Research and Development
FIIOSW	Mesyuarat	R&R	Kawasan Rehat dan Rawat
PIBG	Parent-Teacher Association	RAT	Rapid Assessment Team
PIC	Preliminary Investigation Committee	RBAR	Rumah Bebas Asap Rokok
PIC/S	Pharmaceutical Inspection Co- operation Scheme	RCs REACTA	Responsibility Centres Regional Asian Clinical Trial
PICC	Putrajaya International Convention	Don't sh	Association
PICK	Centre	_	OHS Regulatory Lab
	National COVID-19 Immunisation Programme	RFP	Request for Proposals
		RIA	Regulatory Impact Analysis

RIS	Regulatory Impact Statement	SPIKPA	Skim Perlindungan Insurans Kesihatan
RIS@KKM	Radiology Information System	SPIRPA	Pekerja Asing
RNKL	Rakan Nasihat Komuniti Lapangan	SPM	Skim Perubatan MADANI
RP3	Rolling Plan 3	SR	Sponsored Research
RP4	Rolling Plan 4	SRC	Special Resource Centre
RPHL	Regional Public Health Laboratory	SRH	Sexual and Reproductive Health
RPPC	Registered Practitioner's Practising	SSE	Sepanggar Simulation Exercise
11110	Certificate	SSM	Malaysian Remuneration System
RRT	Rapid Response Team	SSMP	Research Information Resources
SAE	Serious Adverse Events	0004	Sector
SAM	Special Approval Medicines		Public Service Remuneration System
SBDR	Sector for Biostatistics and Data	SSR	
sc	Repository Study Coordinator	SWCorp	Solid Waste Management and Public Cleansing Corporation
SCRI	Singapore Clinical Research Institute	T&C	Testing and Commissioning
SDC	Specialised Diagnostic Centre	T&CM	Traditional and Complementary
SDGs	Sustainable Development Goals		Medicine
SDH	Social Determinants of Health	T&CMD	Traditional and Complementary Medicine Division
SEAMEO	Southeast Asia Ministers of Education	T2DM	Type 2 Diabetes Mellitus
	Organisation	TAC	Technical Advisory Committee
SEATCA	Southeast Asia Tobacco Control Alliance	TAMO	Terengganu Assistant Medical Officers Association
	State Environmental Health Action Plan	ТВ	Tuberculosis
SEP	Entomology and Pest Sector	ТВР	Medical Aid Fund
SEPP	Sector for Ethics and Research Surveillance	TCM	Traditional Chinese Medicine
SHHARP	Self-Harm Hospital-Acquired	Tdap	Tetanus-Diphtheria-Pertussis
	Reporting Project	TDP	Talent Development Programme
SIGMA	Governance and Management Unit	TEH	Total Expenditure on Health
SIP	Inspectorate & Legislation Sector	TGP	Talent Grooming Programme
SIS	Sharps Injury Surveillance	Thirteenth Plan	Thirteenth Malaysia Plan 2026-2030
SISPAA	Sistem Pengurusan Aduan Awam	THSTI	Translational Health Science and
SJAM	St. John Ambulance of Malaysia	іпоп	Technology Institute
SKPPI	Environmental Health and Climate Change Sector	TIM	Traditional Indian Medicine
SKU	Key Word Targets	TKPK	Deputy Director-General of Health
SLC	Selangor Life Science Convention	(K&KM)	(Food Safety and Quality)
SME	Subject Matter Experts	TKPK (KA)	Deputy Director-General of Health (Public Health)
SMO	Site Management Organisation	TKPK (KP)	Deputy Director-General of Health
SMRP	Sistem Maklumat Rawatan Pelanggan		(Oral Health)
SOP	Standard Operating Procedure	TKPK (P)	Deputy Director-General of Health (Medical)
SP	Sustainability Programme	TKPK (P&ST)	Deputy Director-General of Health
SPA	Public Service Commission		(Research and Technical Support)
SPFP	Personnel Files Management System	TKSU (K)	Deputy Secretary-General (Finance)

TKSU (P)	Deputy Secretary-General (Management)	UNEP	United Nations Environment Programme
TOBaTS	Tolak Ubat Tidak Sah	UNICEF	United Nations Children's Fund
TOR	Terms of Reference	UPA	Water Pollution Unit
ТоТ	Training of Trainers	UPC	Unified Public Consultation
TPC	Temporary Practicing Certificate	USABC	US-Asean Business Council
TPC-OHCIS	Teleprimary Care-Oral Health Clinical	UTAR	Universiti Tunku Abdul Rahman
	Information System	VAE	Value at Entry
TPT	Tuberculosis Preventive Treatment	VAS	Value Added Services
TSA	Technical Specification Adherence	VBHC	Value Based Healthcare
TTT	Train the Trainer	VI	Verterinary Intervention
Twelfth Plan	Twelfth Malaysia Plan 2021-2025	VLDS	Virtual Library Services
TWG	Technical Working Group	VMS	Visitor Management System
U5MR	Under-5 Mortality Rate	WAAW	World Antimicrobial Resistance
UA	Public University		Awareness Week
UAE	United Arab Emirates	WASH	Water, Sanitation and Hygiene
UFMG	Universidade Federal De Minas Gerais	wcc	World Cancer Congress
UHC	Universal Health Coverage	WH	Wellness Hub
UiTM	Universiti Teknologi MARA	WHA	World Health Assembly
UKI	Collaboration and Innovation Unit	WHO	World Health Organisation
UKK	Corporate Communication Unit	WHO-WPRO	World Health Organization - Western
UKM	Universiti Kebangsaan Malaysia		Pacific Region Office
UKU	Air Quality Unit	WOAH	World Organisation for Animal Health
UM3	Pembekalan Ubat Susulan Melalui Pihak Ketiga	WoPAD	World Physical Activity Day
		WoW	Wellness on Wheels
UMMC	University Malaya Medical Centre	YA	Year Assessment
UMP	Ubat Melalui Pos	YADIM	Yayasan Dakwah Islamiyah Malaysia

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