

AKHBAR : BERITA HARIAN
MUKA SURAT : 1
RUANGAN : MUKA HADAPAN



RUU Perubatan (Pindaan) 2024 dibentang di Dewan Rakyat

• Beri kuasa Majlis Perubatan Malaysia (MMC) iktiraf kelayakan, latihan kepakaran pengamal perubatan sebagai doktor pakar	• Persatuan Perubatan Malaysia (MMA) rayu Ahli Parlimen sokong pindaan bagi selesaikan isu 'parallel pathway', selain isu kekurangan kritikal pakar perubatan
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Nasional 6

AKHBAR : BERITA HARIAN
MUKA SURAT : 6
RUANGAN : NASIONAL

Pindaan Akta 50 beri MMC kuasa iktiraf kelayakan, latihan kepakaran

RUU tambah baik peruntukan pendaftaran pengamal perubatan sebagai pakar

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Kuala Lumpur: Rang Undang-Undang (RUU) Perubatan (Pindaan) 2024 yang dibentangkan untuk bacaan kali pertama di Dewan Rakyat semalam antara lain bertujuan memberikan kuasa kepada Majlis Perubatan Malaysia (MMC) untuk mengiktiraf kelayakan serta latihan kepakaran bagi tujuan pendaftaran pengamal perubatan dan pakar.

Pindaan untuk itu membabitkan perenggan 4a(2)(h) adalah sebahagian daripada Fasal 4 dalam RUU yang dibentangkan Menteri Kesihatan, Datuk Seri Dr Dzulkefly Ahmad.

RUU Perubatan (Pindaan) 2024 bertujuan meminda Akta Perubatan 1971 (Akta 50) untuk menambah baik peruntukan mengenai pendaftaran pengamal perubatan sebagai pakar serta bagi

melaksanakan proses pengiktirafan kelulusan dan latihan kepakaran.

Dr Dzulkefly turut membentangkan RUU Pencegahan dan Pengawalan Penyakit Berjangkit (Pindaan) 2024 untuk bacaan kali pertama, dengan bacaan kali kedua dan ketiga untuk kedua-dua RUU terbabit akan dibuat pada sesi persidangan kali ini.

Berdasarkan naskhah biru yang dikongsi menerusi laman web Parlimen semalam, Fasal 4 dalam RUU Perubatan (Pindaan) 2024 juga bertujuan memberikan kuasa kepada MMC untuk melantik mana-mana pengamal perubatan berdaftar untuk mewakili majlis dalam apa-apa jawatankuasa, panel atau institusi yang mana orang itu kemudian membuat syor kepada majlis mengenai semua perkara berhubungan dengan kelayakan pegawai perubatan atau pengawalseliaan amalan perubatan.

Fasal 5 pula bertujuan meminda perenggan 14(2a)(a) yang memperuntukkan mana-mana orang boleh berdaftar penuh di bawah di bawah Seksyen 14 berkaitan orang yang berhak didaftarkan penuh, sekiranya berhasrat untuk mengajar, melakukan penyelidikan atau mengikuti kursus lepasan ijazah dalam bidang kepakaran di bawah apa-apa program latihan di mana-mana institusi seperti ditentukan majlis.

Fasal 6 pula bertujuan menggantikan Seksyen 14b bagi me-



Dr Dzulkefly ketika membentangkan RUU Perubatan (Pindaan) 2024 untuk bacaan kali pertama di Dewan Rakyat, semalam. (Foto ihsan Penerangan)

ngadakan syarat untuk pengamal perubatan berdaftar sebagai pakar, selain memperuntukkan latihan kepakaran sebagai suatu kebendak untuk berhak didaftarkan sebagai pakar.

Fasal 10 pula bertujuan untuk

memasukkan Jadual baharu Keempat dan Kelima di dalam Akta 50 yang menyenaraikan kelulusan kepakaran yang boleh didaftarkan dan untuk mengadakan senarai subkepakaran.

Isu parallel pathway

Program Latihan Ijazah Kepakaran atau parallel pathway mencuri tumpuan apabila kemelut tercetus mengenai pengiktirafan latihan kepakaran yang dilaksanakan Kementerian Kesihatan (KKM).

Isu ini timbul selepas MMC menolak permohonan empat pakar bedah kardiotoraksik untuk disenarai dalam Daftar Pakar Kebangsaan kerana Fellowship of Royal College of Surgeons of Edinburgh (FRCS Ed) yang diperoleh mereka tidak diiktiraf susulan penguatkuasaan pindaan Akta Perubatan mulai 2017.

Antara penyelesaian dicadangkan sesetengah pihak adalah empat pakar itu diterima untuk melalui latihan khusus di Universiti Teknologi MARA (UiTM) sebagai universiti pertama menawarkan program kepakaran perubatan dengan kerjasama Institut Jantung Negara dalam bidang pembedahan kardiotoraksik.

Isu ini sudah dibawa dalam mesyuarat bersama KKM dan Kementerian Pendidikan Tinggi (KPT) pada April lalu bagi mencari penyelesaian, dengan Dr Dzulkefly mengumumkan Akta Perubatan 1971 akan dipinda bagi membolehkan beberapa masalah berbangkit dapat diselesaikan, termasuklah mendaftarkan pegawai perubatan yang sudah menamatkan latihan kepakaran parallel pathway.

MMA rayu semua Ahli Parlimen sokong syor

Putrajaya: Persatuan Perubatan Malaysia (MMA) merayu semua Ahli Parlimen menyokong cadangan pindaan Akta Perubatan 1971 (Akta 50) yang dibentangkan di Dewan Rakyat, semalam.

Presiden MMA, Dr Aziz Abdul Aziz, berkata pindaan itu penting bagi menyelesaikan isu 'parallel pathway' yang berterusan, selain menangani masalah kekurangan kritikal pakar perubatan di negara ini.

Beliau berkata, pindaan bertujuan membolehkan parallel pathway dan program sarjana dijalankan serentak untuk menangani jurang antara dua laluan kekhususan dalam menyediakan lebih banyak peluang kepada pegawai perubatan mengikuti latihan kepakaran.

"Pindaan juga bertujuan mempermudah proses

pengiktirafan dan pendaftaran pakar perubatan yang memperoleh kelayakan melalui pelbagai laluan termasuk kelayakan antarabangsa seperti Fellowship of the Royal College of Surgeons of Edinburgh (FRCS Ed).

"Pengiktirafan dan pendaftaran semua kelayakan pakar tetap berada di bawah bidang kuasa profesion menerusi Majlis Perubatan Malaysia (MMC) bagi memastikan standard tinggi pendidikan dan amalan dikekalkan," katanya dalam satu kenyataan di sini, semalam.

Pindaan dicadangkan MMA itu mewakili langkah penting ke arah menyelesaikan isu haluan selari dan menangani kekurangan pakar di Malaysia.

Dengan menyelaras proses dan mengekalkan pemantauan profesional, ia dapat mewujudkan sistem yang lebih kukuh

dan fleksibel untuk latihan serta mengiktiraf pakar.

Penuhi standard akreditasi

Mengulas lanjut, Dr Aziz berkata, pindaan berkenaan juga bertujuan menyelesaikan konflik antara pelbagai badan pengawal seliaan dalam memas-

ukkan semua program latihan pakar memenuhi standard akreditasi nasional.

Menurutnya, pengiktirafan pelbagai kelayakan juga dapat meningkatkan bilangan pakar berkelayakan berkhidmat di kemudahan kesihatan awam, selain menyediakan pelbagai la-

Pengiktirafan dan pendaftaran semua kelayakan pakar tetap berada di bawah bidang kuasa profesion melalui Majlis Perubatan Malaysia (MMC) bagi pastikan standard tinggi pendidikan dan amalan dikekalkan

Aziz Abdul Aziz,
Presiden MMA



Juan latihan untuk pegawai perubatan berpotensi bagi mengurangkan penghijrahan tenaga perubatan.

Katanya, dengan jumlah lebih ramai pakar, MMA menjangkakan perkhidmatan kesihatan akan menjadi lebih baik, selain masa menunggu dapat dikurangkan dan rawatan pula dapat dilaksanakan lebih cepat ke atas pesakit.

"MMA mengakui kebimbangan mengenai mengekalkan kualiti latihan pakar dan menekankan pindaan ini bertujuan untuk mengekalkan standard tinggi di dalam menangani keperluan mendesak penjagaan kesihatan serta menyokong komitmen Kementerian Kesihatan (KKM) bagi memastikan kualiti latihan, kecekapan pengamal dan keselamatan pesakit terpelihara," katanya.

AKHBAR : BERITA HARIAN
MUKA SURAT : 16
RUANGAN : NASIONAL

Data, bukti saintifik mantapkan perubatan tradisional Cina

Kuala Lumpur: Pengumpulan data dan bukti kajian saintifik berkaitan perubatan tradisional Cina (TCM), boleh memantapkan lagi pengaplikasian kaedah rawatan itu yang semakin berkembang di negara ini.

Ketua Pengarah Kesihatan, Datuk Dr Muhammad Radzi Abu Hassan, berkata hingga kini, sebanyak 15 hospital kerajaan telah mengamalkan TCM sejak 2009.

"Namun, sekarang perubatan tradisional ini ada data dan bukti (kajian saintifik), jadi kita hendak memasukkannya ke dalam satu daripada (kaedah) rawatan sebagai pelengkap kepada rawatan konvensional," katanya kepada pemberita selepas merasmikan Seminar Mengenai Amalan Perubatan Tradisional Cina Berdasarkan Bukti, di sini, semalam.

Yang turut hadir ialah Ketua Pengarah Pentadbiran Perubatan Tradisional Cina Kebangsaan (NATCM), Jabatan Kerjasama Antarabangsa Cina,

Dr Wu Zhen Dou, serta Kaunselor Sains dan Teknologi, Kedutaan China di Malaysia, Dr Zhao Xiang Dong.

Pada majlis itu, Dr Muhammad Radzi turut melancarkan 'Guideline on TCM Nursing Procedures in Private Healthcare Facilities in Malaysia' dalam usaha KKM untuk mempromosikan pengamalan rawatan tradisional itu.

Seterusnya, beliau berkata, antara rawatan yang diaplikasikan Kementerian Kesihatan (KKM) ialah akupunktur dan urutan bagi menangani pesakit unik seperti penghidap sakit sendi.

Dalam pada itu, katanya, seminar selama dua hari yang dianjurkan dengan kerjasama China Academy of Chinese Medical Sciences, mengumpulkan 70 pengamal perubatan tempatan dan akademik untuk menambah baik kualiti serta keselamatan TCM berdasarkan garis panduan dengan perkongsian beberapa pakar dari China.

Seminar itu juga membuka ruang bagi pakar perubatan TCM dari Malaysia dan China bertukar-tukar pandangan serta pengalaman berkaitan kaedah perubatan berkenaan.

"Melalui seminar ini, kita hendak jadikan ia (TCM) lebih mantap dengan mengumpulkan data-data mengenai perubatan tradisional Cina. Jadi bila ada data, akan beri keyakinan lagi untuk rawatan berkenaan," katanya.

Terdahulu dalam ucapannya, Dr Muhammad Radzi berkata, pengesahan rawatan melalui penyelidikan saintifik yang rapi akan meningkatkan kredibiliti dan penerimaan TCM, termasuk dalam kalangan pengamal, pesakit dan badan kawal selia di seluruh negara.

"Pengesahan saintifik menyediakan asas untuk membangunkan peraturan dan piawaian, selain membolehkan penyeragaman protokol rawatan

• Sekarang perubatan tradisional ini ada data dan bukti (kajian saintifik), jadi kita hendak memasukkannya ke dalam satu daripada (kaedah) rawatan sebagai pelengkap rawatan konvensional

Dr Muhammad Radzi Abu Hassan,
Ketua Pengarah
Kesihatan



bagi memastikan konsistensi dalam amalan TCM," katanya.

Mengulas mengenai garis paduan prosedur kejururawatan TCM di fasiliti swasta yang dilancarkan semalam, Dr Muhammad Radzi berkata, ia menekankan komitmen kementerian untuk mengintegrasikan TCM ke dalam sistem penjagaan kesihatan Malaysia. **BERNAMA**

AKHBAR : KOSMO
MUKA SURAT : 2
RUANGAN : NEGARA

Lagi kes makan biskut campur racun

DARI MUKA 1

Dalam kejadian kira-kira pukul 1.45 tengah hari itu, Mohd. Daynail Haikal Alias ditemui dalam keadaan tidak sedarkan diri selain mulut berbuih sebelum dia dikejarkan ke Hospital Kemaman.

Bapa mangsa, Alias Saras, 57, berkata, anaknya ada memaklumkan yang dia tidak sempat menelan kepingan biskut tersebut, sebaliknya hanya mengunyah sebelum meludah untuk mengeluarkan makanan itu.

Katanya, kesan racun tersebut bagaimanapun didakwa sangat kuat sehingga menyebabkan anaknya menggelupur seperti ayam yang disembelih.

"Ketika Haikal gigit biskut itu, rakannya yang ternampak perbuatan itu terus melarangnya daripada memakan makanan tersebut.

"Sebab itu Haikal tidak sempat menelan, sebaliknya meludah kembali makanan itu selepas lidahnya terasa masam.

"Lima minit kemudian, dia tiba-tiba terjatuh dan menggelupur seperti ayam yang baru disembelih dengan mulutnya berbuih. Selepas itu, anak tidak sedarkan diri," katanya ketika ditemui *Kosmo!* di kediamannya di Kampung Air Putih di sini semalam.

Alias berkata, dia tidak dapat membayangkan keadaan anaknya sekiranya termakan kepingan biskut tersebut.

Katanya, kejadian tersebut berlaku ketika Haikal yang merupakan anak keempat daripada lima beradik baru sahaja selesai



MANGSA dimasukkan ke Hospital Kemaman dan dilaporkan dalam keadaan stabil.

menjalani latihan memanah di Sekolah Menengah Kebangsaan (SMK) Dadong sebelum pergi memancing di parit berdekatan kebun pisang bersama rakan-rakannya.

Sebelum itu, katanya, Haikal sempat makan tengah hari di rumah rakannya.

"Sewaktu melalui kebun berkenaan, anak saya melihat ada biskut yang digantung di pagar kebun.

"Tanpa mengetahui makanan itu sudah dicampur racun, dia terus mengambilnya.

"Bukan hanya satu biskut yang



KERATAN *Kosmo!* 9 Julai 2024.

digantung, tetapi banyak. Biskut itu dimasukkan dalam plastik putih dan memang mudah jadi tarikan untuk budak-budak," katanya.

Alias berkata, biskut itu dipercayai digantung di pagar kebun bagi tujuan menghalau kera dan haiwan liar yang lain.

"Susulan kejadian itu, anak saya dimasukkan ke Unit Rawatan Rapi (ICU) selama sehari sebelum keadaannya stabil. Alham-



ALIAS menunjukkan antara biskut disyaki dicampur racun yang diletakkan di pagar kebun untuk menghalau hidupan liar.

dulillah dia kini semakin pulih," katanya.

Alias berharap, kejadian yang berlaku itu dijadikan pengajaran dan meminta pekebun untuk tidak meletakkan makanan bercampur racun yang boleh menarik perhatian kanak-kanak semata-mata untuk menghalau haiwan liar di kebun.

Sebelum ini, negara digemparkan dengan kejadian dua beradik masing-masing berusia dua dan tiga tahun yang meninggal dunia akibat termakan jajan beracun yang diletakkan pekebun untuk menghalau monyet di Kampung Padang Ubi, Kulim, Kedah.

Muhammad Luth Syauqi, 2, meninggal dunia pada Jumaat

lalu selepas 120 jam bertarung nyawa di Unit Rawatan Rapi Pediatrik Hospital Pulau Pinang, iaitu dua hari selepas abangnya, Muhammad Akil, 3, menghembus nafas terakhir di hospital sama.

Terdahulu, dua beradik itu ditemui dalam keadaan menggelupur kesakitan selain mulut berbuih selepas dipercayai termakan keropok yang telah dicampur racun tikus.

Jajan berkenaan didakwa dipasang oleh pekebun untuk memerangkap monyet yang sering mengganggu tanaman dan kediaman penduduk.

Susulan itu, polis telah menahan reman seorang individu bagi membantu siasatan.

AKHBAR : SINAR HARIAN
MUKA SURAT : 15
RUANGAN : NASIONAL

Remaja termakan biskut beracun dipantau 72 jam

KEMAMAN - Remaja lelaki yang nyaris maut selepas termakan biskut yang dicampur racun di sebuah kebun pada Jumaat lalu kini stabil dan diantau selama 72 jam sebelum dibenarkan pulang.

Menurut bapa mangsa, Alias Saras, 57, anaknya, Mohd Daynail Haikal Alias, 13, semakin pulih selepas menerima rawatan di Hospital Kemaman sejak empat hari lalu dan mungkin dibenarkan pulang tidak lama lagi.

"Doktor beritahu anak saya perlu dipantau selama 72 jam bagi memastikan tiada saki baki racun di dalam badan," katanya ketika dihubungi *Sinar Harian*, pada Isnin.

Sementara itu, Ketua



Mohd Daynail yang kini dirawat di Hospital Kemaman semakin stabil dan mungkin dibenarkan pulang tidak lama lagi.

Polis Daerah Kemaman, Superintenden Hanyan Ramlan berkata, polis akan memanggil seorang lelaki berusia 70 tahun yang juga pekebun untuk membantu siasatan kes tersebut.

"Polis masih belum mengenali pasti jenis racun yang digunakan dan sampel

biskut tersebut telah dihantar ke Jabatan Kimia untuk proses analisis," kata beliau di sini pada Isnin.

Jelasnya, kes itu disiasat mengikut Seksyen 31(1) Akta Kanak-Kanak 2001 dan Seksyen 284 Kanun Keseksaan kerana cuai berkenaan benda beracun.

AKHBAR : UTUSAN MALAYSIA
MUKA SURAT : 4
RUANGAN : DALAM NEGERI

4

Utusan Malaysia
SELASA • 16 JULAI 2024

Dalam Negeri

SIDANG DEWAN RAKYAT



MMC diberi kuasa iktiraf kelayakan latihan kepakaran perubatan

Oleh **ASLINDA NASIR**
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KUALA LUMPUR: Majlis Perubatan Malaysia (MMC) diberi kuasa untuk mengiktiraf kelayakan serta latihan kepakaran bagi tujuan pendaftaran pengamal perubatan dan pakar.

Perkara itu terkandung dalam Rang Undang-Undang (RUU) Perubatan (Pindaan) 2024 di mana bacaan kali kedua dan ketiga juga akan dibuat pada sesi persidangan Dewan Rakyat kali ini.

Perkara itu merupakan sebahagian daripada Fasal 4 dalam RUU berkenaan yang secara umum bertujuan meminda Akta Perubatan 1971 (Akta 50).

Peruntukan itu adalah penambahan berhubung pendaftaran pengamal perubatan sebagai pakar serta bagi melaksanakan proses pengiktirafan

**DZULKEFLY AHMAD**

kelulusan dan latihan kepakaran.

Fasal 4 juga bertujuan memberi kuasa kepada MMC untuk melantik mana-mana pengamal perubatan berdaftar untuk

mewakili majlis dalam apa-apa jawatankuasa, panel atau institusi yang orang itu kemudiannya membuat syor kepada majlis mengenai semua perkara berhubung dengan kelayakan pegawai perubatan atau pengawasan amalan perubatan.

RUU itu dibentangkan Menteri Kesihatan, Datuk Seri Dr. Dzulkefly Ahmad untuk bacaan kali pertama semalam, di mana satu lagi perkara yang dibentangkan adalah membabitkan RUU Pencegahan dan Pengawasan Penyakit Berjangkit (Pindaan) 2024 untuk bacaan kali pertama.

Selain Fasal 4, RUU Perubatan (Pindaan) 2004 turut membabitkan Fasal 5 yang bertujuan meminda perenggan 14(2a)(a) yang memperuntukkan mana-mana orang boleh berdaftar penuh di bawah Seksyen 14 berkaitan orang yang berhak didaftarkan

penuh, sekiranya berhasrat untuk mengajar, melakukan penyelidikan atau mengikuti kursus lepasan ijazah dalam bidang kepakaran di bawah apa-apa program latihan di mana-mana institusi seperti ditentukan majlis.

Fasal 6 pula bertujuan menggantikan Seksyen 14b bagi mengadakan syarat untuk pengamal perubatan berdaftar sebagai pakar, selain memperuntukkan latihan kepakaran sebagai suatu kehendak untuk berhak didaftarkan sebagai pakar.

Fasal 10 bertujuan memasukkan Jadual baharu Keempat dan Kelima dalam Akta 50 yang menyenaraikan kelulusan kepakaran yang boleh didaftarkan dan untuk mengadakan senarai subkepakaran.

Isu Program Latihan Ijazah Kepakaran atau parallel pathway mencuri tumpuan dengan

pokok timbul berkaitan kemelut itu mengenai pengiktirafan latihan kepakaran yang dilaksanakan Kementerian Kesihatan (KKM).

Ia juga berkaitan isu pendaftaran pegawai perubatan yang menamatkan latihan kepakaran dalam Daftar Pakar (NSR) di bawah MMC, yang mana kedua-dua isu ini telah dibawa dalam mesyuarat bersama Kementerian Kesihatan (KKM) dan Kementerian Pendidikan Tinggi (KPT) pada April lalu bagi mencari penyelesaian.

Dzulkefly turut mengumumkan bahawa Akta Perubatan 1971 akan dipinda bagi membolehkan beberapa masalah berbangkit dapat diselesaikan termasuklah mendaftarkan pegawai perubatan yang telah menamatkan latihan kepakaran *parallel pathway*.

AKHBAR : UTUSAN MALAYSIA
MUKA SURAT : 8
RUANGAN : DALAM NEGERI

Tawar 3,000 jawatan tetap atasi kekurangan doktor

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PETALING JAYA: Kerajaan disaran menawarkan 3,000 kekosongan perjawatan pegawai perubatan menerusi pengambilan khas yang dijangka dilaksanakan Suruhanjaya Perkhidmatan Awam (SPA) bulan ini.

Langkah itu penting bagi mengatasi isu kekurangan doktor ketika ini susulan seramai 422 pegawai perubatan lantikan kontrak akan melengkapkan tempoh maksimum kontrak tujuh tahun pada bulan ini hingga November tahun ini.

Sehubungan itu Jurucakap Hartal Doktor Kontrak juga meminta kerajaan mempertimbangkan untuk menawar gred lebih tinggi dalam pengambilan khas tersebut.

"Kekurangan doktor sekarang amat kritikal. Paling kurang

3,000 kekosongan jawatan perlu ditawarkan," katanya kepada *Utusan Malaysia*, semalam.

Beliau berkata demikian ketika diminta mengulas mengenai jumlah perjawatan difikirkan sesuai untuk mengisi kekurangan pegawai perubatan di hospital kerajaan.

Ia susulan seramai 422 pegawai perubatan lantikan kontrak yang dijangka melengkapkan tempoh maksimum kontrak tujuh tahun mereka dan berpeluang memohon dalam urusan pengambilan khas yang dilaksanakan SPA itu.

Menerusi jawapan bertulis Parlimen bertarikh 11 Julai lalu, pegawai perubatan lantikan kontrak yang telah menamatkan tempoh dan yang telah meletakkan jawatan dengan kementerian serta yang menolak pelantikan tetap boleh memohon pengambilan khas itu.

Setakat berita ini ditulis, se-

makan menerusi laman web rasmi SPA mendapati, suruhanjaya itu belum mengeluarkan iklan berhubung pengambilan khas terbabit.

Mengulas lanjut, jurucakap hartal itu berkata, hampir 500 doktor yang bakal tamat tempoh kontrak tersebut sepatutnya terus diserap ke perjawatan tetap dan pada masa sama tetap membuka pengambilan urusan itu.

"Namun itu keputusan yang bagus daripada SPA dan Kementerian Kesihatan memandangkan ramai doktor yang dilepaskan begitu sahaja selepas habis kontrak.

"Malah ramai doktor yang sudah tinggalkan Kementerian Kesihatan tetapi sekarang ingin kembali untuk menabur bakti kepada rakyat.

"Kami bersyukur sebab akhirnya kerajaan bersetuju untuk melaksanakan langkah ini," katanya.

AKHBAR : UTUSAN MALAYSIA
MUKA SURAT : 29
RUANGAN : DALAM NEGERI

Pilih gaji besar punca hospital swasta kurang jururawat

KUALA LUMPUR: Tindakan jururawat tempatan menerima tawaran bekerja di luar negara yang menawarkan gaji lebih tinggi, menjadi antara faktor fasiliti kesihatan perubatan swasta berhadapan masalah kekurangan tenaga kerja.

Pertubuhan Keselamatan Sosial (Perkeso) berkata, kerjasama dengan pelbagai agensi dilakukan bagi menangani polemik tersebut dan memastikan keperluan penjagaan kesihatan dapat dipenuhi.

Menurutnya, Kementerian Sumber Manusia (Kesuma) melalui Perkeso memainkan peranan signifikan dengan memastikan keutamaan kepada bakat tempatan untuk mengisi kekosongan jawatan.

Perkeso berkerjasama dengan semua hospital swasta dalam usaha memastikan jururawat tempatan mengisi jawatan sebagai jururawat di fasiliti perubatan berkenaan dengan mengiklankan jawatan yang diperlukan oleh setiap hospital terlibat.

"Perkeso turut bersama membantu menyenarai pendek calon-calon yang memiliki latar belakang sebagai jururawat berdaftar di Portal MYFutureJobs selain melaksanakan karnival kerjaya dan temu duga terbuka," katanya dalam satu kenyataan, semalam.

Utusan Malaysia sebelum ini melaporkan, sebanyak 220

hospital swasta di seluruh negara terus berdepan masalah kekurangan jururawat yang boleh menjejaskan operasi mereka dan industri pelancungan kesihatan di negara ini.

Perkara itu diburukkan lagi apabila Kesuma belum meluluskan kemasukan 9,200 jururawat dari Filipina dan India.

Langkah itu bertentangan dengan keputusan Kementerian Kesihatan (KKM) yang sudah meluluskan kemasukan jururawat tersebut dengan memberi pengecualian termasuk membuka kelayakan pasca asas jururawat luar negara untuk bekerja di hospital-hospital swasta.

Perkeso memaklumkan, antara majikan industri kesihatan yang bekerjasama dengan pihaknya adalah IHH Healthcare Malaysia selepas menyahut saranan kerajaan untuk menggunakan khidmat jururawat tempatan.

Katanya, usaha itu serampang dua mata dalam membuka peluang pekerjaan kepada bakat tempatan, sekali gus mengurangkan pengangguran dalam kalangan graduan.

"IHH Healthcare Malaysia juga dilihat membuat perancangan yang rapi dari segi pengambilan bagi jawatan jururawat tempatan dan asing secara berperingkat dengan Kesuma menerusi Perkeso memastikan keutamaan diberikan kepada bakat tempatan," katanya.

AKHBAR : THE STAR
MUKA SURAT : 1
RUANGAN : MUKA HADAPAN



Snuff out the vape

The discovery of vending machines and online platforms selling vapes and ecigarettes without any age limit on users has led to growing calls for the government to urgently regulate these products, with one consumer advocate saying, 'they're killing the next generation!' > See page 4 for story by KHOO GEK SAN

AKHBAR : THE STAR
MUKA SURAT : 4
RUANGAN : NATION

4 Nation

THE STAR, TUESDAY 16 JULY 2024

Health DG: Let data and science light the way for TCM

KUALA LUMPUR: Data collection and evidence of scientific studies on traditional Chinese medicine (TCM) can further enhance its application and growing acceptance in the country, says Datuk Dr Muhammad Radzi Abu Hassan (pic).

The Health director-general said that currently, 15 government hospitals have been practising TCM since 2009.

"Now that traditional medicine

has scientific data and evidence, we aim to integrate it into our treatment (method) to complement conventional ones," he said after launching the "Evidence-Based Practice of Traditional Chinese Medicine" seminar here yesterday, Bernama reported.



He said that the two-day seminar, held in collaboration with the China Academy of Chinese Medical Sciences, brought together 70 local medical practitioners and academics to enhance the quality and safety of TCM based on established guidelines, with input from experts

from China.

The seminar also serves as a platform for TCM experts from Malaysia and China to exchange views and experiences.

"Through this seminar, we aim to strengthen TCM by gathering robust data.

"With solid data, we can enhance confidence in its effectiveness," he said.

He also launched the "Guidelines on TCM Nursing

Procedures in Private Healthcare Facilities in Malaysia" as part of the ministry's efforts to promote traditional treatments.

Also present were China's Department of International Cooperation, National Administration of Traditional Chinese Medicine director-general Dr Wu Zhen Dou, and Counsellor for Science and Technology, Embassy of China in Malaysia, Dr Zhao Xiang Dong.

Regulate vapes, protect youth

Calls grow for vape laws after vending machines found dispensing such products

By KHOO GEK SAN
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PETALING JAYA: The recent discovery of a vending machine selling electronic cigarettes in Malaysia has sparked significant public worry about how easily youth can access vape products, which has in turn led to urgent calls for the Health Ministry to address the issue.

Consumers Association of Penang (CAP) education officer NV Subbarow (pic) said he has met with 1,000 pupils in Penang and Kedah secondary schools over the past month, and there was evidence that a considerable number of them are addicted to vape (products) and cigarettes due to their easy availability.

"Many shops are located near schools and housing areas, making it convenient for teens and youth to purchase these products," he said. Subbarow added that during discussions in schools, many of the 300 children in a survey also admitted to buying vape products through online platforms.

He said pupils would save their lunch money to buy vape products since online sellers cannot verify the buyer's age.

"We're asking for a ban on all



online vape sales now; they should be stopped because they're killing the next generation," he said.

Subbarow said even without vending machines, kids as young as eight years old are purchasing vape and cigarette products online without restrictions.

"Stalls on five-foot ways, mini-markets, and cash-and-carry shops are also selling these products, with nicotine-containing juices being sold to teens without any questions asked. Anyone selling nicotine-containing products through vending machines should be charged in court," he added.

Ikram Health Malaysia president Dr Mohd Afiq Mohd Nor

proposed several measures the Health Ministry could take to better control the sale and use of ecigarettes.

He recommended that all cigarette retailers and shops be registered and required to obtain a licence, similar to current regulations for tobacco cigarette sales.

This would create accountability and ensure that only authorised vendors are permitted to sell these products.

He said there is a need for a robust system of regular inspections and monitoring of registered vape retailers to ensure compliance with regulations and prompt identification of any violations. To prevent unauthorised sales, he suggested implementing technology-based solutions such as the digital tracking of vape product sales.

"This would help detect and prevent illegal sales, including those through vending machines," he added.

Dr Mohd Afiq also recommended increasing public awareness campaigns to educate the public on the dangers of smoking and vaping and to highlight new regulations to foster compliance and discourage attempts to bypass the rules.

Additionally, he called for empowering local authorities, including state governments and the police, to enforce regulations, adding that they should have the authority to impose fines and penalties.

Regarding penalties for those who break the rules, he suggested imposing significant fines to reflect the seriousness of the offence and to act as a deterrent.

Dr Mohd Afiq also recommended that the government revoke the licences of repeat offenders to ensure stricter adherence to the regulations.

Malaysian Organisation of Vape Entity (MOVE) president Samsul Kamal Ariffin said that while his group opposes vending machines for vape products, the key issue is the government's removal of nicotine from the Poisons Act 1952, leaving it unregulated.

"I can sell this product to a minor, and it's not against the law. Vape operators are exploiting the lack of regulation. We want clear-cut laws stating that under-18s cannot vape. Even a five-year-old can vape right now. There are no laws controlling this issue," he added.

He suggested that the regulatory framework include manufac-

turing, retail, and consumer levels, each with clear guidelines.

"Currently, I can vape in an air-conditioned space without restriction. We welcome regulation. It's long overdue. If the government wants to implement regulations, the punishment should be severe for sellers, not users," he added.

Health Minister Datuk Seri Dr Dzulkefly Ahmad recently announced that regulations and orders to ban the sale of electronic cigarettes and vape products, including through vending machines, are expected soon, with the Attorney General's Chambers currently reviewing them.

The Control of Smoking Products for Public Health Act 2024 (Act 852), which will regulate these products, is still in the drafting phase. Until Act 852 is enforced, nicotine vapes can legally be sold to anyone, including minors under 18, due to a March 31, 2023, order by then-health minister Dr Zaliha Mustafa.

The order removed liquid nicotine from the Poisons Act.

On July 13, a shopping centre in Kuala Lumpur was ordered to stop selling cigarettes via a vending machine following a Health Ministry complaint.

AKHBAR : THE STAR
MUKA SURAT : 5
RUANGAN : NATION

Flexible registration for graduates

MMC can now bring in those who meet required standards and competency

By HO JIA WEN
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PETALING JAYA: Amendments to the Medical Act 1971 (Act 50) will address specialist shortages while maintaining standards, safety and quality of care, say medical groups.

Malaysian Association for Thoracic and Cardiovascular Surgery honorary secretary Dr John Chan Kok Meng said the amendment is a progressive move.

"This will give flexibility to the Malaysian Medical Council (MMC) to register specialists who meet the required standards and competency," he said when contacted yesterday.

He added that the amendments address technicalities that have prevented MMC from registering parallel pathway graduates.

"It formalises the role of the Health Ministry as a specialist training provider and gives MMC full authority to recognise specialist qualifications if they meet the required standards without the need to refer to any other bodies," he said.

While Malaysian universities have done well in providing specialist training, they have weaknesses in some specialties, for example: Cardiothoracic Surgery, Cardiology, Urology and Family Medicine, he said.

Take the power back

In a bid to cut through the parallel pathway knot choking the healthcare sector, there is a proposal to give more teeth to the Health Ministry to decide on specialist training, and even veto power over the MMC. Meanwhile, advocates say a solution must be found soon, while a former health minister recounts how we got here. > See stories by RAGANANTHINI VETHASALAM on page 5

The Star
EXCLUSIVE

Flashback: On June 1, it was reported that there is a proposal to give more teeth to the Health Ministry to decide on specialist training and even veto power over the MMC.

"These are also fields with a critical shortage of specialists," he added.

Parallel pathway training, he said, has been very successful in producing specialists of the highest standards, which are equal to those in the United Kingdom.

The Malaysian Medical Association (MMA) also agrees that the amendments are crucial for resolving the ongoing parallel pathway.

"It enables both parallel pathways and Master's programmes to run concurrently, addressing the gap between these two routes to specialisation," said its president Dr Azizan Abdul Aziz in a statement on Sunday.

This way, graduates from both routes would have a clear path to

specialist registration.

She also said that recognising a wider range of qualifications would allow more qualified specialists to serve in public healthcare facilities.

"We acknowledge concerns about maintaining the quality of specialist training. MMA emphasises that these amendments aim to uphold high standards while addressing urgent healthcare needs," she said.

Meanwhile, public health expert and retired Health Ministry official Datuk Dr Zainal Ariffin Omar noted that clarifying Section 14, which details registration as a medical practitioner and specialist, is laudable.

However, he said more clarity about the accreditation system

and process is needed as it is currently not clear in this amendment.

On the other hand, Group of Professors of Health and Medicine head Prof Dr Noor Hassim Ismail said the amendments were made too hastily. He pointed to the double standard, where the parallel pathway does not comply with the accreditation by the Malaysian Qualifications Agency (MQA), while local programmes must comply.

He said there should be a standard agency for specialist accreditation, much like the Malaysian Accreditation Organisation for Healthcare Facilities and Services for hospitals.

"If MQA is decoupled from the Health Ministry's specialist pro-

"MMA emphasises that these amendments aim to uphold high standards while addressing urgent healthcare needs."

Dr Azizan Abdul Aziz

gramme, it will result in uncertainty about the programme's quality," he said.

MQA had clarified in June that the accreditation and recognition activities of medical institutions within the country lie with MMC.

Moreover, Noor Hassim said the Health Ministry is given too much clout under the new amendments, especially with the changes to the composition of MMC.

"Most of the specialist programmes come from universities; we need universities' understanding of postgraduate programmes in MMC to make wise decisions," he said.

Working towards harmonising regulations

By RAGANANTHINI VETHASALAM,
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KUALA LUMPUR: Following significant contention from the medical community, the Health Ministry has tabled amendments to the Medical Act (Act 50) for the first reading in the Dewan Rakyat.

The Medical (Amendment) Bill 2024, tabled by Health Minister Datuk Seri Dr Dzulkefly Ahmad yesterday, aims to resolve the issues related to the parallel pathway specialist training programme.

The Bill is set for its second reading in the current Dewan Rakyat meeting, slated to conclude on Thursday.

The proposed amendments arose after the Malaysian Medical Council (MMC) refused to recognise certain cardiothoracic training programmes, despite a shortage of specialists, leaving graduates in the lurch.

The Bill seeks to improve provisions related to the registration of specialists as well as the recognition of qualifications and specialised training.

It also proposes changes in the composition of MMC members.

One of the significant amendments to Section 14 (Medical Act) involves the registration of specialists. The proposed change replaces "recognised training programme in any recognised training institution" with "training programmes in any institution determined by the MMC".

To become a specialist under



Question time: Dzulkefly speaking on the amendments being made to the Medical Act 1971 (Act 50) and the Infectious Disease Prevention and Control Act 1988 (Act 342) in Parliament. — Bernama

Section 14 of the Act, a doctor must be fully registered as a medical practitioner, hold a qualification listed as registrable for specialists and have completed specialised training.

The doctor must also have undergone supervised work experience determined by the MMC and demonstrated acceptable work experience to the council. Additionally, the medical practitioner must prove competency and possess good character.

"Notwithstanding paragraph (1)(b) or (c), any person may be entitled to be registered as a specialist under Section 14c where

the minister, upon the recommendation of the council, is satisfied that he has any other comparable qualification or comparable specialised training as the case may be, which is of special value to this country, subject to such restrictions and conditions as the minister thinks fit," the Bill reads.

The specialised training programmes under the Act include those approved by the MMC as listed in the Fourth Schedule, such as qualifications provided by the Health Ministry, local higher educational institutions, or other approved institutions within Malaysia.

Additionally, the MMC accepts training provided outside Malaysia related to specified specialties or sub-specialties listed in the Fourth and Fifth Schedules.

Upon consulting the MMC, the minister can, from time to time, add, delete or amend the Fourth or Fifth Schedule by issuing an order in the Gazette.

Under Section 14C(1), the MMC can require an applicant to furnish further information or documents to support their application, and their name will be included in the Malaysian Medical Register if approved.

A new Subsection 14D has also been proposed, related to sub-specialties.

The composition of MMC council members will also be altered through a proposed amendment to Section 3A.

The number of registered medical practitioners representing local universities and university colleges in the MMC will be reduced to five from nine, through a proposed amendment to Subsection 3A(1).

The number of representatives in the council who are from the public service will be increased from three to seven — they will be nominated by the director-general and appointed by the minister.

At yesterday's press conference, Dzulkefly said Act 50 is being amended to "harmonise" the regulations for the two specialist training programmes — the Master's and the parallel pathway programme.

Dzulkefly said despite the per-

ception that the ministry favours overseas fellowships, the allocation of funds shows equal importance given to Masters and the parallel pathway programme.

Between 2019 and 2023, the Health Ministry allocated RM365.4mil to specialist training for medical officers. Of this, approximately RM352.3mil (96%) funded the Master's programme at public universities, and RM13mil was designated for the parallel pathway programme.

Regarding the change in MMC representation from universities and public service, Datuk Dr Mohd Azman Yacob, director of the ministry's Medical Development Division, said the proposed ratio was deemed "appropriate."

He added that over 60% of registered doctors in government service are from the Health Ministry, with the remainder from teaching hospitals.

His deputy Dr Hirman Ismail justified the proposed changes, citing the ministry's status as the largest provider of public healthcare, overseeing 159 hospitals.

In contrast, the Higher Education Ministry manages only nine teaching hospitals.

The Star reported that the Health Ministry might gain greater authority to oversee and recognise specialist training programmes, addressing the parallel pathway issue through amendments.

The shortage of cardiothoracic surgeons has left around 1,500 heart and lung disease patients in government hospitals in dire straits.

AKHBAR : THE STAR
MUKA SURAT : 7
RUANGAN : NATION

Farmer quizzed over biscuit poisoning case

CHUKAI: Police have recorded the statement of a farmer after a teenage boy fell ill after eating biscuits believed to be laced with poison at the man's orchard here.

Kemaman police chief Supt Hanyan Ramlan said the farmer, in his 70s, gave his statement at the Kemaman police headquarters at 2pm yesterday.

"We called him to give a statement. On whether he will be arrested, the matter is still under consideration," he told Bernama.

Supt Hanyan said a biscuit sample had been sent to the Chemistry Department for analysis.

In the incident at about 2pm on Friday, the teenager who lives in Kampung Air Putih here, was on his way to a nearby river for fishing before eating the plastic-wrapped biscuits at the farm.

Following that, Mohd Daynail Haikal Alias, 13, is said to have collapsed and was taken to the Air Putih Health Clinic by his friend's father, before being referred to Hospital Kemaman.

Alias Saras, 57, said his son is expected to be released from hospital.

"He is getting better and has an appetite," Alias said while expressing gratitude that his son is safe.

However, he said Mohd Daynail Haikal is still traumatised by the episode.

Recently in Kulim, Kedah, two brothers, aged two and three, died after consuming keropok (crackers) believed to be laced with rat poison.

The snack, which was hung on a wire fence at a garden, was intended to ward off wild monkeys.

AKHBAR : THE STAR
MUKA SURAT : 8
RUANGAN : NATION

Health Dept: No increase in rotavirus cases

KUALA TERENGGANU: The Terengganu Health Department has denied claims that there was an increase in rotavirus cases at Hospital Sultanah Nur Zahirah (HSNZ). Its director Datuk Dr Kasemani Embong said checks by the Kuala Terengganu district health office found only two cases, both involving children, reported on July 7 and 13. The patients were in stable condition and allowed to go home after being given the relevant treatment, she said in a statement yesterday.

**"... wash hands
after using the
toilet, changing
children's diapers,
and when
preparing food"**

Datuk Dr Kasemani Embong

The statement was issued in response to a Facebook post on July 13 claiming an increase in rotavirus cases at HSNZ, Bernama reported.

Dr Kasemani said rotavirus is a type of virus that causes an infection in the digestive system.

She said the symptoms could be mild among adults but may cause fever, diarrhoea and vomiting among children.

"Therefore, the public is advised to wash their hands after using the toilet, changing their children's diapers, and when preparing food," she said.

AKHBAR : THE STAR
MUKA SURAT : 9
RUANGAN : NATION

Out to identify public health facilities that need fixing

BATU PAHAT: The Federal and Johor governments will collaborate to identify dilapidated public health facilities that need upgrades to enhance public health services and improve patient comfort.

State health and environmental committee chairman Ling Tian Soon said several health and rural clinics have already been short-listed.

"We have received many requests for upgrades. Last year, we upgraded 43 health facilities, including the Ayer Hitam health clinic with an allocation of RM1mil.

"And this year, 55 health facilities have been upgraded to date," he said after visiting the new site of the Parit Raja health clinic here yesterday, Bernama reported.

Ling said the new Parit Raja clinic was crucial because the current facility could not accommodate the number of patients.

He added that the clinic, which has been in operation since 1967, serves over 400 patients daily.

AKHBAR : THE STAR
MUKA SURAT : 15
RUANGAN : VIEWS

Breaking the stigma against male nurses

NURSES serve as primary-care practitioners, assuming responsibility for the treatment, safety, and recovery of patients. For ages, the nursing profession has been traditionally associated with women. Early accounts of nurses exclusively mention women, even though men and women both assisted in patient care back then.

Florence Nightingale regarded nursing as a viable occupation for women because of its alignment with their traditional domestic responsibilities. She had a significant role in solidifying nursing as a predominantly female profession.

Subsequently, the family-based institutional model surfaced, in which the prevailing role of the father figure was assumed by male physicians, while women nurses were assigned the role of mothers, with patients metaphori-

cally likened to children. Consequently, the notion of male nurses was incompatible with the ideology of the time.

Today, there are many factors that deter men from becoming nurses, including public perception, how nursing is valued (or not valued) in society, and patient preferences. There is a pervasive societal bias against male nurses, including the stereotype that they are gay or less compassionate than their female counterparts.

In some instances, inequalities exist in specialty fields such as obstetrics and gynaecology, and these can place substantial pressure on male nurses. The notion is strengthened by the mainstream media that persistently perpetuates the perception of nursing as a feminine occupation.

The current scarcity of nursing personnel necessitates an

increased need for male nurses, as their inclusion can effectively enhance the diversity of healthcare teams and thus contribute to the improvement of healthcare results. The lack of male nurses can inadvertently lead to patients not only being underrepresented but misunderstood as well.

Similar to how women may prefer a female nurse, men frequently exhibit a preference for male nurses. A male nurse also can offer a conducive environment for the discussion of intimate matters. Medical procedures, like catheter insertion, may be less embarrassing for male patients if they are performed by male healthcare workers.

Male nurses currently constitute a minority within the nursing profession in Malaysia – but this situation has the potential to be altered readily. Augmenting the

presence of men within the nursing profession will have outcomes that extend beyond the mere fulfilment of escalating societal needs. It will allow, for instance, male nurses to stop worrying about potential discrimination and focus on honing their nursing abilities. Demonstrating empathy towards patients, together with the application of robust evidence-based nursing competencies, can significantly contribute to the mitigation of misconceptions about male nurses among fellow healthcare professionals.

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IN 2001, the medical community in Malaysia embarked on the path of community-based treatment for opioid addiction. By 2006, evidence showed that treating opioid addicts as patients rather than as criminals brought about immense change in the situation.

For more than 40 years, addicts were criminalised and incarcerated using Act 283 – the Drug Dependents (Treatment and Rehabilitation) Act 1983. Hundreds of thousands would have gone through this system. Evidence has shown that this

It is not right to criminalise this disease

does not work. With virtually no funding, driven only by the conviction that addiction is indeed a brain disease, medical doctors have proven that there is now an alternative solution.

Policymakers and legislators should now enact and enable appropriate specific regulations in the proposed amendments to Act 283 to legally enable patients and doctors to opt for medication-assisted treatment (MAT).

The evidence is compelling. Since 2002 we have taken more than 24,000 patients into community-based MAT through a network of more than 300 doctors across Malaysia. HIV-related death rates and drug-related arrests have fallen significantly since 2014.

This trend must be allowed to continue to save future generations of Malaysians from the direct and collateral damage of the previous policy of “the war

on drugs”. The Addiction Medicine Association of Malaysia strongly urges the government not to repeat the mistakes of the past. Criminalising and mandatory incarceration of addicts is wrong and should be discontinued.

DR STEVEN KW CHOW
President
Addiction Medicine
Association of Malaysia
(Amam)

AKHBAR : THE SUN
MUKA SURAT : 3
RUANGAN : NATIONAL

Amended medical Bill tabled for first reading

KUALA LUMPUR: The Medical (Amendment) Bill 2024, which aims to improve provisions related to the registration of specialists and the recognition of qualifications and specialised training, was tabled for its first reading in Parliament yesterday.

The Bill, which seeks to amend the Medical Act 1971 (Act 50), was presented by Health Minister Datuk Seri Dr Dzulkelly Ahmad.

According to the Parliament's website, the amendments, which contain 13 clauses, aim to empower the Malaysian Medical Council (MMC) to recognise qualifications and specialist training for the registration of medical practitioners. It also aims to empower the MMC to appoint any registered practitioner to represent the council in any committee, panel, or institution. – Bernama