

JOINT STATEMENT

ON CRITICAL ALLOWANCE FOR HEALTHCARE STAFF

30 DECEMBER 2019



AMSA MALAYSIA
Asian Medical Students' Association



Joint Statement on Critical Allowance for Healthcare Staff

It has come to our attention that there have been discussions about removing the Critical Service Incentive Payment (Bayaran Insentif Perkhidmatan Kritikal) for newly appointed doctors, nurses, pharmacists and dentists.

Reducing the investment into the Malaysian healthcare system can precipitate detrimental effects to Malaysian public health. In order to serve the population, health workers undergo training that is long, expensive and requires much sacrifice. Removal of the critical allowance will cause a delay in the payment to the National Higher Education Fund Corporation (PTPTN) and other student loans, which will eventually result in delayed specialist training that we are already severely lacking.

The public healthcare sector is understaffed and overworked. Many government servants under the public healthcare sector are already suffering from burnout. Additionally, young medical doctors, dentists and pharmacists still face uncertainties such as the shortage of permanent positions. This reduction in salary may further exacerbate the brain drain and eventual migration of Malaysian-trained healthcare professionals, aggravating the understaffing of the public healthcare sector and putting all efforts of talent retention into waste. Universal health coverage is only achievable with adequate investment in the health workforce. Health workforce shortages are increasing the inequities in access to health services, causing preventable illness, disability and death.

With the ageing population and changes in lifestyle, there will be an increase in non-communicable and chronic conditions. This may also lead to an increased burden of oral diseases which has to be addressed as oral health is an integral part of general health and well-being. Additionally, non-compliance and non-adherence to medication and treatment regimens will rise, which will contribute to therapeutic failures, particularly in non-communicable diseases and conditions. Hence, there is an increasingly greater demand in complex and long-term services, which is often labour-intensive for healthcare workers. Chronic underinvestment in healthcare will reduce our health system's preparedness in handling acute public health crisis such as disasters, outbreaks

and global health threats. It threatens health security and can potentially lead to serious economic and social setbacks.

Economic growth and development depends on a healthy population. According to the commission report of the United Nations High Level Commission of Health Employment and Economic Growth, the returns on investment in health are estimated to be 9 to 1. Therefore, good financing into a good healthcare system, coupled with healthcare staff that are properly taken care of can save lives and reduce disabilities. Recovery time of patients can be reduced, patients can go back to society with better functionality and generate more financial output.

Therefore, as future healthcare professionals of the country, we call upon:

The Public Service Department (JPA) to:

- Reconsider the decision to remove the Critical Service Incentive Payment (Bayaran Insentif Perkhidmatan Kritikal) from government healthcare workers.

Elected Members of Parliament and Cabinet Ministers to:

- Represent the voice of healthcare workers to bring up their concern regarding the removal of Critical Allowance.
- Actively participate and engage in discussions at all levels, to reinstate the Critical Service Incentive Payment (Bayaran Insentif Perkhidmatan Kritikal) for healthcare workers.
- Acknowledge that investment into healthcare is necessary and should be prioritised for the country to achieve better productivity and economic outcomes.
- Support and improve the Malaysian public healthcare system by advocating for increased investment into healthcare.

Jointly signed by:

1. Society of Malaysian Medical Association Medical Students (SMMAMS)
2. Asian Medical Students Association Malaysia (AMSA Malaysia)
3. Malaysian Dental Students' Association (MDSA)
4. Malaysian Pharmacy Students' Association (MyPSA)
5. Malaysian Medics International (MMI)
6. Malaysian Students' Surgical Society (MSSS)
7. International Student Surgical Network Malaysia (InciSioN Malaysia)
8. Kesatuan Mahasiswa Universiti Malaya Fakulti Perubatan
9. Kesatuan Mahasiswa Universiti Kebangsaan Malaysia Fakulti Perubatan
10. University of Malaya Medical Society (UM MedSoc)
11. Putra Medical Club
12. International Medical University Student Representative Council
13. Universiti Pertahanan Nasional Malaysia Military Medicine Society (Milimeds)
14. AIMST Student Nurse Association
15. MAHSA University Medical Society (MAHSA MEDSOC)
16. UCSI Medical Students' Association (UCSI MedicSA)

References

“Penerima BIPK Sedia Ada Tidak Terjejas Dengan Penamsuhan BIPK Pada 1 Januari 2020, JPA 100-9/1/2(75), Maklum Balas Media Jabatan Perkhidmatan Awam, 25 December 2019 , Facebook Jabatan Perkhidmatan Awam

Mansuh BIPK kerana tidak lagi tepati kriteria tertentu pemberian elaun. (2019). Retrieved 27 December 2019, from <http://www.bernama.com/bm/am/news.php?id=1802675>

WHO Global strategy on human resources for health: Workforce 2030

High-Level Commission on Health Employment and Economic Growth retrieved from <https://apps.who.int/iris/bitstream/handle/10665/250047/9789241511308-eng.pdf?sequence=1>

Jaafar, N., Hakim, H., Mohd Nor, N., Mohamed, A., Saub, R., & Esa, R. et al. (2014). Is the burden of oral diseases higher in urban disadvantaged community compared to the national prevalence?. *BMC Public Health*, 14(S3). doi: 10.1186/1471-2458-14-s3-s2

Dzulkefly: Health Ministry to discuss critical service allowance cut with JPA soon | Malay Mail. (2019). Retrieved 27 December 2019, from <https://www.malaymail.com/news/malaysia/2019/12/26/dzulkefly-health-ministry-to-discuss-critical-service-allowance-cut-with-pu/1822381>

Ngoh, L.N. (2009). *Health literacy: a barrier to pharmacist-patient communication and medication adherence*. Journal of the American Pharmacists Association : JAPhA, 49 5, e132-46; quiz e147-9 .

World Health Organization (2003). *Adherence to long-term therapies: evidence for action*. Geneva: World Health Organisation. ISBN 978-92-4-154599-0.