MINISTRY OF HEALTH MALAYSIA

2024 ANNUAL REPORT

ASSISTANT MEDICAL OFFICER SECTION
MEDICAL PRACTICE DIVISION

https://hq.moh.gov.my/medicalprac/CPPPP/Portal/main.html

MINISTRY OF HEALTH MALAYSIA
Assistant Medical Officer Section,
Medical Practice Division,
Level 6, Block E1, Complex E,
Federal Government Administration Centre,
62590 Putrajaya,
Wilayah Persekutuan Putrajaya.

Contents

No.	Title	Page
1.	Foreword	**2**
2.	Annual Report Committee	**3**
3.	Introduction	**4**
4.	Scope and Functions of Assistant Medical Officer Service Section - Secretariat of Medical Assistant Board - Registration & Annual Renewal Certificate Unit - Gazettement Unit - Regulatory Unit and Secretariat of The Medical Assistant Board	**4**
	- Profession Development Sector - Medical Assistant Training Unit - Accreditation and Examination Unit - Profession Development & Health Care Assistant Unit - Mandatory Placement Program (PPW) Unit	**5**
	- Policy & Strategic Planning Sector - Human Capital & Staffing Management Unit - Research, Quality & Innovation Unit	**6**
	- Organization Chart	**8**
5.	Secretariat of Medical Assistant Board Performance Report	**9**
6.	Sector of Professional Development	**20**
7.	Sector of Policy and Strategic Planning Activities and Data	**34**
8.	Financial Report	**77**
9.	Professional Development Plan Assistant Medical Officer (6P) Report	**80**

Foreword

Assalamualaikum and greetings to all,

I express my deepest gratitude to Allah S.W.T. and congratulations to the Assistant Medical Officer Section for their hard work in implementing the 2024 agenda as stated in the annual report for 2024.

I would like to state that the Assistant Medical Officer Section has successfully implemented various planned programs, despite facing various challenges, in addition to efforts to maintain quality health services for the community. Various efforts have been planned, including the Service Implementation Transformation Plan, to empower and ensure the delivery of quality health services to the community in addition to optimising human resource management efficiently and effectively.

As a stakeholder of Assistant Medical Officers, Estate Hospital Assistants and Healthcare Assistants, there is great hope and enthusiasm for the Assistant Medical Officer Section to elevate these three professions to a high mark along with other professions in the Ministry of Health Malaysia. To achieve this goal, various efforts have been made by the Assistant Medical Officer Section in providing a comprehensive database for all activities carried out to meet the needs of this information source, in line with the transformation of services.

I sincerely hope that the data and information in this annual report will meet the reference needs of any entity, NGO, individual, and others.

Finally, I would like to take this opportunity to congratulate and thank all parties involved in preparing this comprehensive report. May this ongoing effort be sustainable, Insha-Allah.

Thank you.



Zulhelmi bin Abdullah
Head of Assistant Medical Officer Malaysia
Ministry of Health Malaysia

ANNUAL REPORT COMMITEES

Chairman - Encik Zulhelmi bin Abdullah

Secretary - Encik Alias bin Abu Hassan

Ass. Secretary - Encik Muhammad Azuwan bin Ali, P.P.N.

Members

- Tuan. Hj. Mahadir bin Yunos
- Encik Wan Asrulnizan bin Wan Mustaffa
- Encik Zulfikar bin Mohamed Khawari
- Encik Khairul Hafiz bin Abd Manan
- Encik Mohd Faris bin Abdul Rashid
- Encik Zulkifli bin Muhammad
- Encik Mohd Najib bin Ramli
- Encik Mohammad Fauzi bin Shamsuddin
- Encik Sadri bin Saidi
- Encik Saiful Bahari bin Mohamad Shah
- Tuan. Hj. Nik Abdul Afiq bin Abd Aziz
- Encik Ahmad Sharif bin Abdul Talib
- Encik Asmawi bin Abdullah
- Encik Fadhli Iznan bin Ja'afar
- Tuan. Hj. Mat Shariff bin Hj. Budin
- Encik Zulkeply bin Ghazali
- Tuan. Hj. Muhamma Romzi bin Husain
- Encik Shahrol bin Md. Nor
- Y.M Engku Mohd Nazri bin Engku Mansor
- Encik Mohd Suhaidi bin Mohd Ariffin
- Encik Muhammad Falah bin Abu Bakar
- Pn Azmazura Binti Abdul Aziz
- Pn. Emeria binti Ismail

ASSISTANT MEDICAL OFFICER SERVICE SECTION ANNUAL REPORT 2024

1.0 INTRODUCTION

The Assistant Medical Officer Section (AMOS) is the governing body for Assistant Medical Officers (AMO) in Malaysia, mandated under Act 180 (registration) of Medical Assistant, 1977 and Estate Hospital Assistants under Act 435 Estate Hospital Assistant Registration, 1965. Additionally, since 2015, the Health Care Assistant (HCA) in the Ministry of Health Malaysia has been placed under the responsibility of the AMOS.

2.0 SCOPES AND ROLES OF MEDICAL ASSISTANT BOARD

2.1 THE SECRETARIAT OF MEDICAL ASSISTANT BOARD

The Secretariat is responsible for enforcement of Act 180 (Medical Assistants Registration) The Secretariat comprises of three main units, namely the Registration & Annual Renewal Unit, Gazettement / Competence Assessment Unit, Practice Control Unit, Complaints & Secretariat and the Secretariat of The Medical Assistant Board.

2.1.1 Registration and Annual Renewal Unit

The role of the Registration and Annual Renewal Certificate (ARC) Unit is to ensure that anyone who satisfies the requirements under Act 180 is registered as a Medical Assistant. The Unit is also responsible for maintaining a registry Medical Assistants, ensuring that all Medical Assistants possess a valid Annual Renewal Certificate (ARC) to practice, monitoring and removal of names from the Medical Assistants Register when needed. In addition, the unit acts as secretariat for Medical Assistants Board meetings.

2.1.2 Gazettement / Competence Assessment Unit

The Gazettement / Competence Assessment Unit is responsible for publishing the names of all newly registered Assistant Medical Officers in the Gazette for public reference. The unit also publish the removal and restoration of Assistant Medical Officer's names in the gazette.

2.1.3 Practice Control Unit, Complaints & Secretariat

Practice Control Unit, Complaints & Secretariat is responsible for monitoring and regulating Medical Assistants practice in accordance with Act 180. The AMOs section

is currently drafting a new, more comprehensive bill to replace the existing legislation, aiming to better address the evolving needs and responsibilities of AMOs.

2.2 THE BOARD OF ESTATE HOSPITAL ASSISTANT UNIT

Secretariat of The Board of Estate Hospital Assistant Unit is responsible for the registration of Estate Hospital Assistants who have passed their respective grading examinations. The LPHE also conducts annual examinations for Estate Hospital Assistants of Grades I, II, and III, and ensures that health facilities and services in Estate Clinics comply with the minimum standards set by the Ministry of Health.

2.3 PROFESSIONAL DEVELOPMENT SECTOR

Professional Development Sector are responsible on planning, developing, and assessing educational programme activities pertaining to Assistant Medical Officers is under the purview of the Professional Development Sector. The Unit plans and supervises the development of the Medical Assistant Education Programme Guidelines and monitors Assistant Medical Officers training, which is provided by both public and private institutions.

2.3.1 Educational Unit

The Education Unit are coordinated in alignment with the strategic plan of the Medical Assistant Board (MAB). Regular implementation ensures that the direction of the MAB is synchronized and in accordance with current policies and developments.
Education Guidelines for Assistant Medical Officers play a crucial role in the process of planning and implementing updates. These guidelines undergo review and updating every five years. In the context of the management of end-of-semester examinations (IPTS), the Education Units undertake the implementation of four key activities.
These activities are carried out under the umbrella of the end-of-semester examination management meetings for private higher education institutions (IPTS), in collaboration with the MAB. This unit also responsible for management of applications for the use of MOH facilities as a member of the committee/ secretariat of the MOH facility, meeting for the medical assistant diploma program/ medical and Medical & Health Science or programs that have been recognized by the Medical Assistant Board.

2.3.2 Examination Unit

The core task of Examination Units is to enforce compliance on the Guidelines for the Medical Assistant Education Program by both public and private institutions and coordinate Medical Assistant Board Examination Committee Meeting.
Additionally, the unit is responsible for overseeing the Medical Assistant Board Examination by developing exam questions, administering examinations and disseminating the exam results.

2.3.3 Compulsory Placement Program Unit

The Compulsory Placement Program Unit coordinates the implementation of the compulsory placement program for newly appointed Assistant Medical Officers. It monitors the implementation of CPP in all dedicated CPP training centres. The unit also involves in the development and revision of CPP training modules, organizes training for CPP local preceptors at dedicated training centres and endorses new applications for CPP training centres.

2.3.4 Emergency Medical Rescue Services (EMRS) Training unit.

The Emergency Medical Rescue Services (EMRS) Training unit develops training modules for the Emergency Medical Rescue Services First responders. The unit also coordinates the practical placement of EMRS First Responder in dedicated hospitals and prepares EMRS First Responder training reports for the purpose of certification of qualified participants. Furthermore, the unit is responsible in training the EMRS Trainers (TOT) to facilitate EMRS training sessions.

2.3.5 Fire Safety Officer (FSO) Training Unit.

In conjunction with the Malaysian Fire and Rescue Department, the Fire Safety Officer Training Unit arranges Fire Safety Officer training for Chief Supervisors and Assistant Medical Officers of hospitals, district health offices, and MOH institutes.

2.4 POLICY & STRATEGIC PLANNING SECTOR

Policy & Strategic Planning Sector oversees adherence to established policies and carries out short, long, and strategic action plans for the provision of Assistant Medical Officer and Health Care Assistant services. The sector periodically, reviews the impact of effectiveness of strategic plans and prepares report.

2.4.1 Policy, Human Resource and Human Capital Development Unit

The Policy, Human Resource and Human Capital Development Unit is responsible in enhancing skills, knowledge and experience of Assistant Medical Officers and Health Care Assistants. The unit also advises the Human Resource Division, Ministry of Health in the postings of Assistant Medical Officers and Health Care Assistants. Furthermore, the unit develops personnel projection for these two categories based on the demands of Malaysia's health industry.

2.4.2 Quality and Research Unit

Quality and Research Unit focuses on research activities, clinical audit, Assistant Medical Officers Accreditation Standards (Hospital accreditation programme), Key

Performance Indicators (KPI), and Credentialing & Privileging (C&P) of Assistant Medical Officers.

2.4.3 Professional Development and Health Care Assistant Unit

The Professional Development and Health Care Assistant Unit plans career development based on the direction of Assistant Medical Officers and Health Care Assistant service development plans. For the purpose of enhancing and strengthening knowledge and abilities, the unit offers a training and learning roadmap for Assistant Medical Officers and Health Care Assistants.

2.5 ORGANISATIONAL CHART OF THE ASSISTANT MEDICAL OFFICER SECTION (AMO'S)

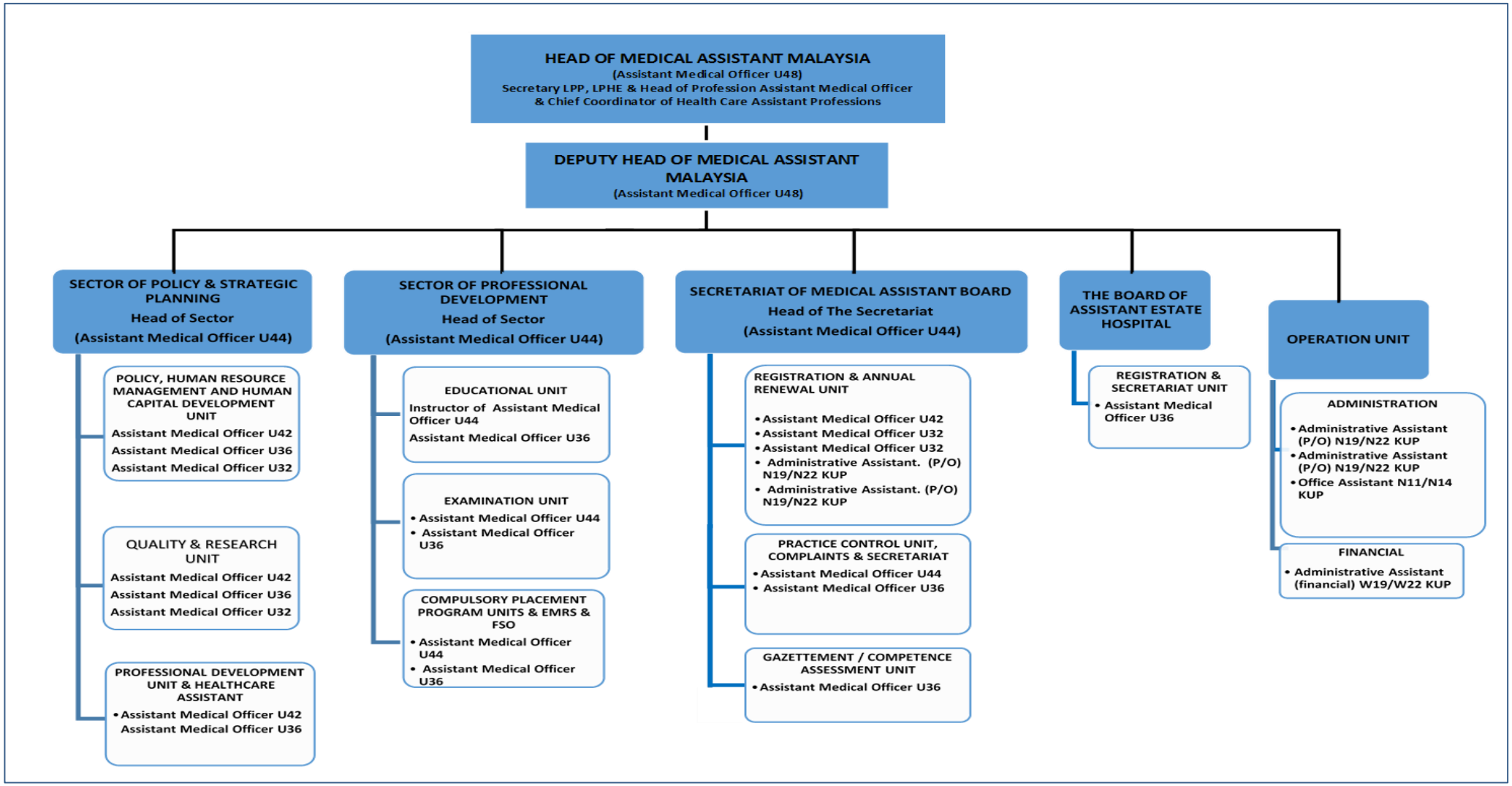


Figure 2.1: Table of contents for the Assistant Medical Officer Section's organisational chart.

3.0 PERFORMANCE REPORT FOR SECRETARIAT OF MEDICAL ASSISTANT BOARD

3.1 REGISTRATION & ANNUAL RENEWAL CERTIFICATE (ARC) UNIT

3.1.1 Quality Objectives

A pragmatic objective has been established to guarantee the swift processing of applications for the Certificate of Registration as a Registered Medical Assistant (Form 3 (Regulation 16(1))) filed via the Medical Assistant Board. The goal is to have a processing efficiency of 85%, with applications processed within 45 working days of the board's date of receipt. This objective represents a dedication to optimising and accelerating the registration process, recognising the significance of prompt answers to applicants pursuing registration as Registered Medical Assistants. The 85% target underscores the board's commitment to a prompt and effective assessment of applications, therefore promoting a more agile and applicant-centric registration procedure. The stipulated period of 45 working days highlights the board's dedication to an open, responsible, and efficient registration process, hence improving the regulatory framework for the registration of Medical Assistants in Malaysia. Effective 1 March 2024, the Board has completely executed the digitalisation of the Medical Assistant Registration Certificate via the Business Licensing Electronic Support System (BLESS).

Table 3.1.1 (i): Statistics of Registration of Assistant Medical Officer, 2024

Month	Total of Registration	Total of Compliance	Percentage Rate (%)
January	12	12	100.0%
February	0	0	100.0%
March	112	112	100.0%
April	23	23	100.0%
May	0	0	100.0%
June	244	244	100.0%
July	10	10	100.0%
August	107	107	100.0%
September	41	41	100.0%
October	49	49	100.0%
November	99	99	100.0%
December	0	0	100.0%
Total	**697**	**697**	**100.0%**

Table 3.1.1 (ii): Number of Registered Assistant Medical Officer (AMOs) from Year 2021 to 2024 Cumulatively

Items	Year(Number of AMOs)			
	2021	2022	2023	2024
Registered AMOs under Medical Assistant Board	28,130	29,104	29,953	30,650
Registered AMOs after the implementation of Section14, Act 180. (Removal of Name)	22	65	8	880
Registered AMOs in government sector	22,652	23,401	23,888	24,143
Registered AMOs in private sector	5,478	5,703	6,065	6,507
Male Registered AMOs	22,724	23,366	23,789	24,105
Female Registered AMOs	5,406	5,738	6,164	6,545

In the year 2024, the record indicates a total of 30,650 registered Assistant Medical Officers, demonstrating a noteworthy increase of 697 individuals, equivalent to a percentage growth of 2.27%, in comparison to the figures reported in 2023. This growth reflects a positive trend in the registration of Assistant Medical Officers, signifying an expanding and dynamic healthcare workforce.

Pertaining to the provisions outlined in the Medical Assistant (Registration) Act 1977 [Act 180], specifically in Section 14, a total of 880 removals of names from the register were executed. This underscores the regulatory responsibilities exercised by the Act in ensuring the integrity and compliance of the registered Assistant Medical Officers.

Furthermore, the data reveals substantial increases in registrations from both the government and private sectors compared to the preceding year, 2023. Notably, there was an augmentation of 255 registrations (equivalent to 1.05%) from the government sector and an additional 442 registrations (representing a growth of 6.79%) from the private sector. These increments signify a positive response to the demand for Assistant Medical Officers in both public and private healthcare settings.

A gender-specific analysis of the registered Assistant Medical Officers in 2024 reveals an increase of 316 (1.31%) in male Assistant Medical Officers and a significant rise of 381 (5.82%) in female Assistant Medical Officers compared to the figures reported in the previous year. This gender-wise growth highlights a balanced and diversified representation within the registered Assistant Medical Officers community.

In summary, the data underscores a positive trend in the registration of Assistant Medical Officers, with notable increases in total registrations, removals in accordance with statutory provisions, and a significant rise in registrations from both the government and private sectors. Additionally, the gender-wise analysis reflects a diversified and growing Assistant Medical Officers workforce in 2024.

Table 3.1.1 (iii): Registration of New Medical Assistants in Training Institute, Ministry of Health, Malaysia *(ILKKM)* and Private Higher Educational Institutions *(IPTS)* from 2022 to 2024

COLLAGE	GENDER	YEAR		
		2022	2023	2024
Training Institute, Ministry of Health Malaysia	Male	573	315	185
	Female	176	173	70
Armed Forces Health Training Institute (INSAN) Terendak Camp, Malacca	Male	2	10	0
	Female	4	3	0
I-Systems College, Kuching, Sarawak	Male	0	0	10
	Female	0	0	15
Management & Science University (MSU), Shah Alam, Selangor	Male	3	1	7
	Female	12	2	36
Murni International College, Nilai, Negeri Sembilan	Male	11	20	19
	Female	23	47	22
Widad University College, Kuantan, Pahang	Male	2	4	1
	Female	2	6	2
University College MAIWP International (UCMI), Kuala Lumpur.	Male	98	25	43
	Female	28	47	77
UOW Malaysia KDU University College, Glenmarie, Selangor	Male	2	0	1
	Female	2	6	6
Lincoln University College, Petaling Jaya, Selangor	Male	1	1	0
	Female	2	1	0
University of Cyberjaya, Cyberjaya, Selangor	Male	10	18	5
	Female	22	37	24
Institute of Medical Science Technology (UniKL MESTECH), Kajang, Selangor	Male	0	8	17
	Female	1	24	35
Geomatika University College (GUC), Kuala Lumpur	Male	0	4	4
	Female	0	20	13
DSH Institute of Technology, Setapak, Kuala Lumpur	Male	0	17	24
	Female	0	59	81
Islamic College of Science & Technology, Bachok, Kelantan	Male	0	1	0
	Female	0	0	0
TOTAL		**974**	**849**	**697**

3.1.2 Issue of Annual Renewal Certificate (ARC) in 2024

In the year 2024, the Board experienced a significant influx of applications for the Application for Certificate (ARC), receiving a total of 24,435 forms. Impressively, 24,343 of these applications were submitted with complete documentation, highlighting the applicants' diligence and adherence to submission requirements.

Within the stipulated timeframe of 60 working days, the Board efficiently processed and approved 24,226 applications. This commendable accomplishment resulted in an approval rate of 99.5%, surpassing the predetermined target of 90%. This achievement underscores the Board's commitment to timely and effective processing, ensuring that the majority of applicants receive their Certificate within the specified timeframe.

The success in exceeding the target reflects positively on the Board's operational efficiency, responsiveness, and commitment to facilitating a streamlined application process for the Certificate. It also signifies a robust and well-managed system in place to handle the substantial volume of applications received in 2024.

Table 3.1.2 (i): Certification of Renewal (ARC) for the Year 2024

Items	Total
Total Applications of ARC	24,435
Complete Documents	24,343
Approved Applications within 60 working days	24,226
Incomplete Documents	117
Percentage Rate of Approved Applications with Complete Documents within 60 working days	99.5%

For information, starting 1 April 2023, the digitalization of the Assistant Medical Officer Annual Renewal Certificate (ARC) through the BLESS system has been implemented.

Table 3.1.2 (ii): Medical Assistants Annual Renewal Certificate (ARC) from year 2021 to 2024

Items	Year			
	2021	2022	2023	2024
Total Applications of ARC	21,337	23,288	23,956	24,435

Starting 1 April 2023, the digitalization of the Assistant Medical Officer Annual Renewal Certificate (ARC) through the BLESS system has been implemented.

3.1.3 Competency Assessment for Annual Renewal Certificate (ARC)

In accordance with the decisions made during the 65th Medical Assistants Board Meeting (MAB) in 2017, the implementation of competency test has been mandated for Assistant Medical Officers (PPP) with expired Annual Renewal Certificates (ARC). This proactive measure is designed to ensure ongoing competency and compliance with the requirements of Act 180, the Medical Assistants Act (Registration) of 1977.

Here are the appeal application statistics for the test for the annual renewal certificate (ARC):

Table 3.1.3 (i): Total of Application for ARC.

Year	Public Sector	Private Sector	Total	Difference
2019	662	5236	898	-83
2020	891	996	1,887	989
2021	1,351	1,570	2,921	1,034
2022	1,505	1,264	2,769	-152
2023	692	787	1,479	-1,290
2024	237	463	700	-779

Based on the provided information, it is observed that the number of appeals for the Annual Renewal Certificate (ARC) assessment test in 2024 has decreased compared to the figures recorded in 2023. The decline is quantified at -52.6%, equivalent to a reduction of 779 applications. Despite the overall decrease, there is a noteworthy shift in the distribution of appeals between the public and private sectors.

In the public sector, there was a substantial decrease in appeals, with 237 (33.9%) applications, representing a decreased of 455 (65.0%) from the 2023 figure of 692 (46.8%). Conversely, appeals from the private sector experienced a significant decline of 463 (66.1%), reflecting a decrease of 324 (46.2%) from the 2023 count.

This shift in appeal patterns suggests that there may be varying levels of awareness among Assistant Medical Officers (AMOs) regarding the significance of obtaining the Annual Renewal Certificate (ARC). The decrease in public sector and private sector appeals could be indicative of a potential lack of awareness or understanding among individuals in this sector regarding the importance of participating in the ARC assessment test.

Addressing this awareness gap and providing comprehensive information to AMOs about the importance and benefits of holding a valid ARC may contribute to increased participation in the assessment test, ensuring that medical assistants across both public and private sectors maintain the necessary standards and competencies outlined in the regulatory framework.

Table 3.1.3 (ii): Assessment test for 2024

Year	Number of Candidates	Application for Assessment test	Number of exams	Absence and fail
2024	700	700	579	121

The table above shows that out of the 700 individuals that registered for the competition assessment, 579 (82.7%) met the requirements and were required to take the evaluation exam. The remaining 121 applicants were excluded from the evaluation exam, and their appeals were allowed without having to go through the assessment. Of those who took the assessment exam, 579 applicants (100%) scored below the criteria. The most common causes for this conclusion were inadequate Continuing Professional Development (CPD) points in 2023, which accounted for 364 applicants (52.0%), and skipped applications, which accounted for 336 candidates (48%).

Consequently, there were 121 candidates (17.2%) failed the competition assessment, leading to the classification of their assessments as unsuccessful. These candidates are required to submit an appeal for reconsideration.

3.2 ASSISTANT MEDICAL OFFICER TECHNICAL EXPERT (AMOTeX) REGISTRATION

The 67th meeting of the Medical Assistant Board (MAB) dated 5th November 2018 agreed to implement the registration of Assistant Medical Officer Technical Specialists (AMOTeX). This implementation initiative was initiated in 2022. In 2024, a total of 389 applications were received, of which 319 applications met the criteria and were successfully registered.

Table 3.2.1: Registration as an Assistant Medical Officer Technical Expert (AMOTeX)

Items	Year			Total
	2022	2023	2024	
Total of Applications	530	155	389	1074
Total of Approval	375	124	319	818

3.3 GAZETTEMENT / COMPETENCE ASSESSMENT UNIT

3.3.1 Gazettement

As per the stipulations outlined in the Medical Assistants Act (Registration) [Act 180], the Medical Assistants Board is mandated to publish announcements in the Gazette for the following specific purposes:

i. Section 13, Subsection (1):

The Board is required to publish in the Gazette announcements regarding the registration of new medical assistants. This serves as a formal and public acknowledgment of individuals who have successfully completed the registration process and are officially recognized as medical assistants. The announcement in the Gazette ensures transparency and public awareness of these new registrations.

ii. Section 15, Subsection (1):

For matters related to name removal of the registration certificate, the Board is obligated to publish announcements in the Gazette. This public disclosure is crucial in communicating the removal of names from the register, thereby maintaining transparency and informing stakeholders of actions taken in response to violations or non-compliance with regulatory standards.

iii. Section 16, Subsection (1):

Announcements regarding the re-entry of names in the register, as specified in Section 16, Subsection (1), are also to be published in the Gazette. This ensures that any reinstatement or re-entry into the register is formally documented and communicated to the public through this official channel.

In summary, the publication of these announcements in the Gazette aligns with the legal requirements outlined in the Medical Assistants Act (Registration) [Act 180], contributing to transparency, accountability, and public awareness in matters related to the registration and status of medical assistants.

Table 3.3.1 (i): The Year 2024 Report on The Financial Registration of New Medical Assistants

Section / Subsection	Medical Assistant Id Number	Total	Amount of financial allocation fee(RM)
13 (1)	29954-30555	602	6706.80

In accordance with Section 13, Subsection (1) of the Medical Assistants Act (Registration) [Act 180], it is reported that a total of 602 Medical Assistant trainees, who underwent training in 2024 from both the Ministry of Health Training Institutes (ILMOH) and private colleges, have successfully registered as medical assistants. This registration signifies their official recognition and authorization to practice as medical assistants.

The cost associated with this grant of registration amounts to RM 6706.80 This financial detail is pertinent information, indicating the resource allocation for the registration process. The disclosure of such costs adds transparency to the regulatory procedures and ensures that stakeholders are informed about the financial aspects associated with the registration of newly graduated medical assistants.

Whereas, in Section 15, subsection (1), the publication in the Gazette refers to the removal of names from the list of Medical Assistants:

Table 3.3.1 (ii): The Table Above Represents the Removal Of Names From The List Of Medical Assistants

Section / Subsection	Medical Assistants Board Meeting	Number of Name removal	Amount of financial allocation (RM)
15 (1)	77th until 79th	171	1652.40

In the recent period, a total of 171 medical assistants were removed from the registry. This removal, executed under Section 14(1)(a), was executed based on the Board's satisfaction that a medical assistant has deceased.

Table 3.3.1 (iii): The Amount Of Money That Was Used For A Financial Transfer.

Section/ Subsection	Medical Assistant Board Meeting	Total	Amount Of Financial Allocation (RM)
16 (1)	77th	1	97.20
TOTAL (RM)			**8456.40**

In summary, the Medical Assistants Board has effectively utilized a financial allocation of RM 8456.40, for the purpose of broadcasting announcements in the Gazette under the provisions of the Medical Assistants Act (Registration) 1977 [Act 180].

3.4 PRACTICE CONTROL, COMPLAINTS & SECRETARIAT UNIT

3.4.1. Complaints in year 2024

In 2024, ten (10) complaints and inquiries were documented, addressed, and resolved within the designated timeframe. To investigate these complaints, the Chief Assistant Medical Officer of the State Health Department conducted preliminary investigations. This step aids in problem-solving and gathering information for comprehensive investigations.

Simultaneously, the Medical Assistant Board Secretariat directly responded to the complainants by sending emails and letters to the individuals involved in the reported cases.

Table 3.4.1 (i): The Compilation of Complaints and Inquiries In The Year 2024.

Date	Method of Complaints	Complaint Status
8 Jan 2024	Screenshots WhatsApp	Completed
12 Jan 2024	Telephone	Completed
23 Jan 2024	SiSPAA	Completed
22 Jan 2024	Email	Completed
23 Feb 2024	Email	Completed
7 Mar 2024	Email	Completed
26 Mar 2024	Email	Completed
26 Mar 2024	Email	Completed
23 Mei 2024	Memo BAP	Completed
30 Sep 2024	SiSPAA	Completed

Table 3.4.2 (ii): Medical Assistant Board Meeting 2024

No.	Matter	Date
1	77th Medical Assistant Board Meeting	16 Jan 2024
2	78th Medical Assistant Board Meeting	24 Jun 2024
3	79th Medical Assistant Board Meeting	21 Oct 2024

3.5. ESTATE HOSPITAL ASSISTANTS (LPHE)

Table 3.5.1: Number of Estate Hospital Assistants and Assistant Medical Officers by States

States	Total Hospitals/ Clinic Estates	Number of Estate Hospital Assistants (EHA)	Number of Assistant Medical Officers (AMO)
Perlis	0	0	0
Kedah	27	5	22
Pulau Pinang	1	0	1
Perak	46	28	18
Selangor	37	4	33
Negeri Sembilan	27	11	16
Melaka	13	3	10
Johor	112	29	83
Pahang	30	11	19
Terengganu	21	13	8
Kelantan	13	2	11
Sarawak	15	1	14
Sabah	377	354	23
TOTAL	**719**	**461**	**258**

Table 3.5.2: Total Registration of Estate Hospital Assistants within 5 Years

Years	Probation	Grade I, II, III	Total
2020	26	52	78
2021	1	10	11
2022	54	1	55
2023	69	116	185
2024	17	37	54

Table 3.5.3: Examination Report of Estate Hospital Assistants 2024.

Examination Centre	Number of Candidates			Total
	Grade 3	Grade 2	Grade 1	
Ministry of Health Training Institute Seremban, Negeri Sembilan.	-	-	8	**8**
Ministry of Health Training Institute Tawau, Sabah.	32	15	2	**49**
TOTAL	**32**	**15**	**10**	**57**

The Estate Hospital Assistants (EHA) examination was successfully conducted from 23 to 26 September 2024 at the Ministry of Health Training Institute in Seremban, Negeri Sembilan, and Tawau, Sabah.

Table 3.5.4: Report on the Activities of the Estate Hospital Assistants Board 2024.

Activity	Notes
Estate Hospital Assistant Registration	January - December
Estate Hospital Assistant Examination Advertisement	April 01 - June 01
111th Estate Hospital Assistant Board Members Meeting	July 11
Estate Hospital Assistant Examination (ILMOH Seremban and ILMOH Tawau)	September 23 - 26
112th Estate Hospital Assistant Board Members Meeting	December 03, 2024 (The meeting was postponed and concluded on March 6, 2025)

4. PROFESSIONAL DEVELOPMENT SECTOR

4.1 TRAINING, ACCREDITATION & FACILITY UNIT

In 2024, Professional Development Sector, conducted three accreditation evaluation visits in collaboration with the Malaysian Qualifications Agency (MQA) to public (IPTA) and private (IPTS) higher learning institutions. As a result of these visits, six IPTA and fourteen IPTS received Full Accreditation Certificates for the Medical Assistant Diploma Program. In the same year, fourteen IPTS signed Memorandums of Agreement (MoA) for various academic programs, including the Medical Assistant Diploma Program, Bachelor of Science in Emergency Medicine, and Bachelor of Medical and Health Sciences, further strengthening the collaboration and commitment to academic excellence in the field of medical and health sciences. The following are the tables related to facilities that have received accreditation and MQA recognition.

Table 4.1.1: Number of Accreditation Evaluation Visits with The Malaysian Qualifications Agency (MQA) To IPTA and IPTS In 2024.

Date	Activity
16-18/01/ 2024	Full Accreditation Assessment Visit with MQA at UOW Malaysia College
15-17/05/ 2024	Full Accreditation Assessment Visit with MQA at University College of MAIWP International (UCMI)
26-28/06/ 2024	Full Accreditation Assessment Visit with MQA at DSH Institute of Technology (DIT)

Table 4.1.2: List of Public and Private Higher Learning Institution with Full Accreditation Certificates for the Medical Assistant Diploma Program in 2024

Higher Education Provider Name	Programme Code	Full Accreditation Period	Full Accreditation Renewal Application Status
ILKKM Sultan Azlan Shah, Perak	MQA/FA 13053	11/10/2019 – 12/10/2024	Accreditation extended from 13 October 2024 to 12 April 2025.
ILKKM Kuching, Sarawak	MQA/FA 13056	11/10/2019 – 10/10/2024	Accreditation extended from 11 October 2024 to 10 April 2025.

ILKKM Johor Bahru, Johor	MQA/FA 13054	11/10/2019 – 10/10/2024	Accreditation extended from 11 October 2024 to 10 April 2025.
ILKKM Kota Kinabalu, Sabah	MQA/FA 13055	11/10/2019 – 10/10/2024	Accreditation extended from 11 October 2024 to 10 April 2025.
ILKKM Seremban, Negeri Sembilan	MQA/FA 13052	11/10/2019 – 10/10/2024	Accreditation extended from 11 October 2024 to 10 April 2025.
ILKKM Alor Setar, Kedah	MQA/FA 13450	28/11/2019 – 27/11/2024	Accreditation extended from 28 Nov 2024 to 27 May 2025.
Management & Science University (MSU)	MQA/FA 5704	29/03/2022 – 28/03/2025	Full Accreditation Assessment Visit by MQA on 12 -14 March 2025
Murni International College	MQA/FA 8746	01/04/2022 – 31/03/2025	Full Accreditation Assessment Visit by MQA on 26 - 28 Feb 2025
WIDAD University College	MQA/FA 8834	29/03/2022 – 28/03/2025	Full Accreditation Assessment Visit by MQA on 4- 6 February 2025
UOW Malaysia College	MQA/FA 0966	26/06/2024 – 25/06/2025	-
Lincoln University College (LUC)	MQA/FA 9108	28/11/2023 – 27/11/2026	-
Maiwp International College University	MQA/FA 0391	16/04/2024 – 15/04/2027	-
University of Cyberjaya (Uoc)	MQA/FA 1947	09/02/2023 – 08/02/2026	-
Unikl – Mestech	MQA/FA 4941	15/08/2023 – 14/08/2026	-
Geomatika Malaysia University	MQA/FA 2797	30/10/2023 – 29/10/2026	-
DSH Institute of Technology (D.I.T)	MQA/FA 4551	23/04/2023 – 22/04/2026	-
Armed Forces Health Training Institute (INSAN)	MQA/FA 3504	09/07/2021 - 08/07/2026	-

IJN College, Kuala Lumpur	MQA/PA 12882	15/02/2023 – 14/02/2028	-
Cyberjaya College Kota Kinabalu, Sabah.	MQA/PA 16781	13/02/2024-12/02/2029	-
Cyberjaya College, Kuching, Sarawak	MQA/PA 17109	13/02/2024-12/02/2029	-

Table 4.1.3: Memorandum of Agreement (MOA) For The Medical Assistant Diploma Program, Bachelor Of Science In Emergency Medicine & Bachelor Of Medical And Health Sciences In 2024.

Higher Education Providers	Duration of MOA Agreement
I-Systems College, Kuching (Diploma Medical and Health Sciences)	16/12/2020 – 15/12/2025
Management & Science University (MSU) (Diploma Medical and Health Sciences)	30/09/2017 – 29/09/2022
Murni International College (Diploma Medical and Health Sciences)	26/05/2021 – 25/05/2026
WIDAD University College (Diploma Medical and Health Sciences)	24/10/2020 – 23/10/2025
UOW Malaysia College (Diploma Medical and Health Sciences)	27/10/2016 – 26/10/2021
Lincoln University College (LUC) (Diploma Medical and Health Sciences)	05/05/2019 – 04/05/2024
MAIWP International College University (Diploma Medical and Health Sciences)	21/01/2018 – 20/01/2023
University of Cyberjaya (UOC) (Diploma Medical and Health Sciences)	01/06/2020 – 31/05/2025
UniKL – MESTECH (Diploma Medical and Health Sciences)	31/01/2017 – 30/01/2022
Geomatika Malaysia University (Diploma Medical and Health Sciences)	28/04/2017 – 27/04/2022
DSH Institute of Technology (D.I.T) (Diploma Medical and Health Sciences)	04/04/2021 – 03/04/2026
Open Universiti Malaysia (OUM) (Bachelor in Medicine and Health Sciences)	21/10/2020 - 20/10/2025

Universiti Kebangsaan Malaysia (UKM) (Bachelor of Science in Emergency Medicine with Honours)	24/06/2020 - 23/06/2025
Universiti Sultan Zainal Abidin (UniSZA) (Bachelor of Medical and Health Sciences with Honours)	29/10/2022 – 28/10/2027

4.2. MEDICAL ASSISTANT BOARD EXAMINATION UNIT

The Medical Assistant Board Examination (MABE) for the year 2024 was strategically conducted to evaluate the core competencies and professional readiness of candidates entering the service. Throughout the year, the examination process was strictly governed by the Medical Assistant Board to ensure high standards of clinical knowledge and ethical practice. The successful administration of these sessions resulted in the certification of qualified practitioners, thereby strengthening the healthcare workforce and ensuring the delivery of quality patient care nationwide.

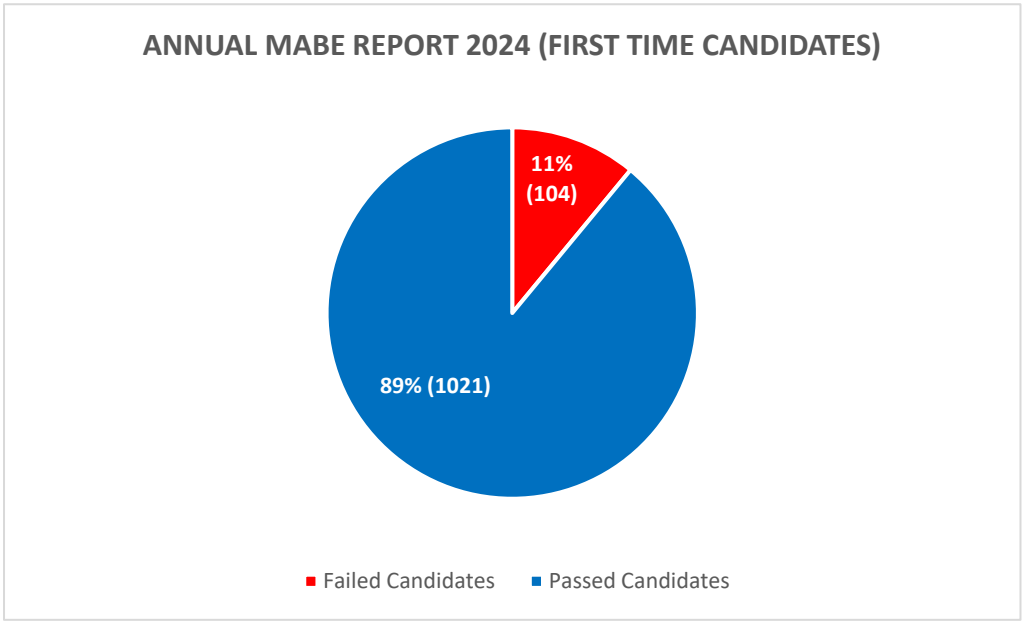


Figure 4.2.1: The Pie Chart on The Outcomes of The 2024 Annual Medical Assistant Board Examination.

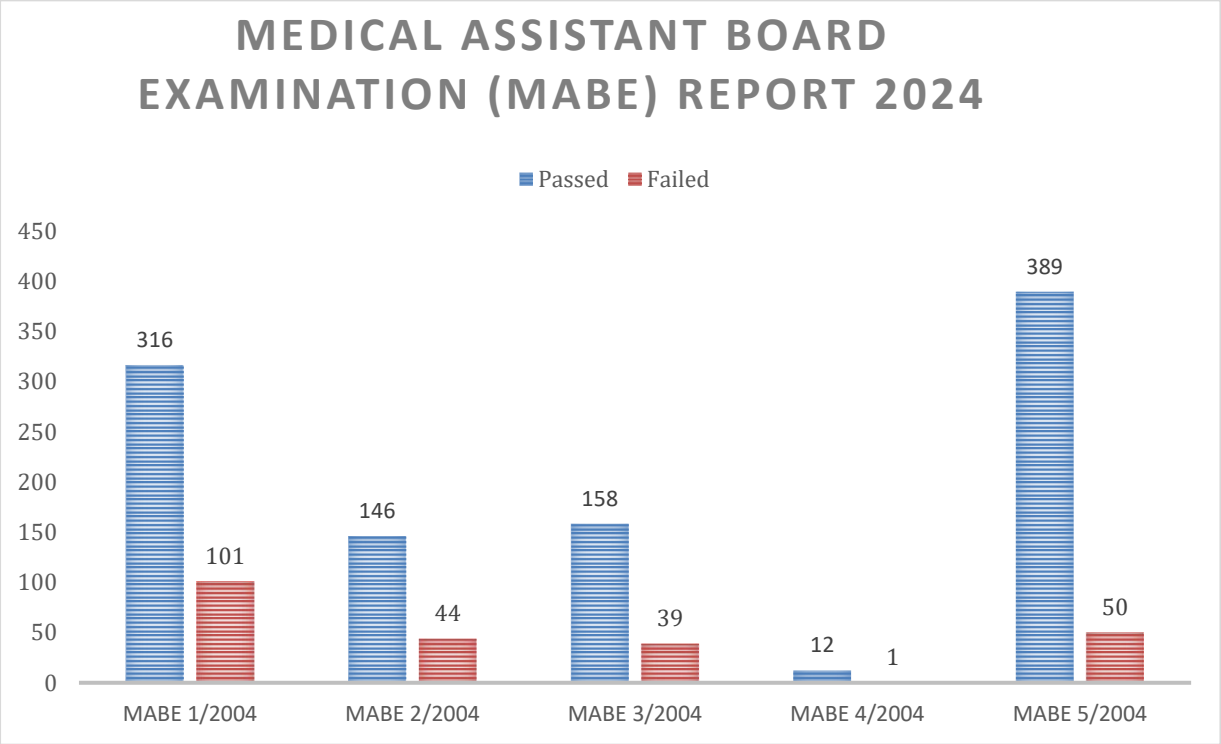


Figure 4.2.2: Annual Report MABE in Year 2024

The Medical Assistant Board Examination (MABE) activities for 2024 were meticulously planned to ensure a high standard of professional assessment for all candidates. These activities included the comprehensive coordination of written and practical evaluations, along with the systematic moderation of results to maintain academic integrity. This structured approach reflects the Board's ongoing commitment to certifying competent medical assistants who are ready to meet the demands of the national healthcare system.

Table 4.2.1: Activities of the Medical Assistant Board Examination (MABE) 2024

Date	Activities
24 – 25 July 2024	Technical Meeting PMAB No.2/2024 & Medical Assistant Board Exam Item Development and Refinement Workshop at the Engineering Division Meeting Room, MOH.".
9 - 11 October 2024	Technical Meeting PMAB No.3/2024 & Medical Assistant Board Exam Item Development and Refinement Workshop at Klana Beach Resort, PD, Negeri Sembilan

Table 4.2.2: List of Exam Centre's Involved in MABE year 2024

MABE Date	Exam Centre
January 30, 2024	ILKKM Kota Kinabalu, ILKKM Kuching, ILKKM JB, ILKKM Seremban, ILKKM SAS & University of Cyberjaya.
April 23, 2024 [SPECIAL MABE]	University of Geomatika.

June 25, 2024	ILKKM Kota Kinabalu, ILKKM Kuching & University of Cyberjaya.
September 24, 2024	ILKKM Kuching & Management & Science University [MSU].
December 17, 2024	ILKKM Kota Kinabalu, ILKKM Kuching, ILKKM JB, ILKKM SAS & University of Cyberjaya.

Table 4.2.3: Total Revenue Collection [Medical Assistant Board Examination Fees] Year 2024

Date	Medical Assistant Board Examination Fees
30 January 2024	417 Candidates x RM 30.00 = RM 12,510.00
23 April 2024 [SPECIAL MABE]	13 Candidates x RM 30.00 = RM 390.00
25 June 2024	190 Candidates x RM 30.00 = RM 5,700.00
24 September 2024	197 Candidates x RM 30.00 = RM 5,910.00
17 December 2024	436 Candidates x RM 30.00 = RM 13,080.00
TOTAL	**RM 37,580.00**

Table 4.2.4: Number Assistant Medical Officers Applied for Post Basic/ Advanced Diploma (2024)

		TOTAL CANDIDATES		
No	**Courses**	**Apply**	**Success**	**Attended**
1.	Advanced Diploma in Diabetes Care	62	51	50
2.	Advanced Diploma in Primary Health Care	49	48	43
3.	Advanced Diploma in Emergency Care	189	154	149
4.	Advanced Diploma in Intensive Care Technology	2	1	1
5.	Advanced Diploma in Mental Health Care	67	21	21
6.	Advanced Diploma in Perioperative Management	6	5	5
7.	Advanced Diploma in Respiratory Management	-	-	-
8.	Advanced Diploma in Cardiovascular Health Care	28	26	26
9.	Advanced Diploma in Prevention & Infection Control	16	15	15
10.	Advanced Diploma in Neurosciences (Neurophysiology Diagnostic & Monitoring)	7	7	7
11.	Advanced Diploma in Gerontology Nursing	7	7	7

12.	Advanced Diploma in Orthopaedic Care	27	26	25
13.	Advanced Diploma in Otorhinolaryngology Care	8	8	8
14.	Advanced Diploma in Ophthalmic Care	9	6	6
15.	Post Basic in Wound Care	79	35	33
16.	Post Basic in Counselling HIV/Aids	64	64	62
17.	Post Basic in Gastrointestinal Endoscopy	13	12	12
18.	Post Basic Dermatology Care	-	-	-
19.	Post Basic Nephrology Care	94	77	75
20.	Post Basic Peri Anaesthesia Care	41	33	33
21.	Post Basic Anaesthesia (Sabah & Sarawak)	20	15	14
22.	Post Basic Stoma and Continence Care	4	4	4
23.	Post Basic Forensic Medicine	15	14	14
24.	Post Basic Sports Medicine	12	12	12
25.	Post Basic Rehabilitation Nursing	2	1	1
	TOTAL	**821**	**642**	**623**

Table 4.2.5: The total number of Assistant Medical Officer applied for Post Basic/ Advanced Diploma 2024)

Total Candidates			Total of Candidates Rejected the Offer					
Application	**Success**	**Attended**	**Health issues**	**Resign**	**Gestations**	**Others**	**No. Approval by Hod**	**Register**
821	642	623	2	0	1	16	0	0

5.3 COMPULSORY PLACEMENT PROGRAMME (PPW) ACTIVITY REPORTS

Table 5.3.1: Total number of participants by state in year 2024.

NO.	STATE	GROUP 30	GROUP 31A	GROUP 31B	GROUP 32	GROUP 33	TOTAL
1	Perlis	0	2	0	4	2	**8**
2	Kedah	4	12	10	14	0	**40**
3	Pulau Pinang	8	20	18	7	0	**53**
4	Perak	8	18	6	8	2	**42**
5	Selangor	0	46	46	36	2	**130**
6	HKL	3	1	0	14	3	**21**

7	Federal Territory of Kuala Lumpur & Putrajaya	5	7	7	1	0	**20**
8	Negeri Sembilan	2	9	10	4	0	**25**
9	Melaka	5	9	8	8	0	**30**
10	Johor	10	0	18	7	0	**35**
11	Kelantan	6	13	15	16	2	**52**
12	Terengganu	8	3	7	17	3	**38**
13	Pahang	7	3	7	24	3	**44**
14	Sabah	15	15	30	12	24	**96**
15	Sarawak	15	24	23	9	26	**97**
16	Federal Territory of Labuan	0	2	2	0	1	**5**
	TOTAL	**96**	**184**	**207**	**181**	**68**	**736**

Table 5.3.2: Summarized of Result Compulsory Placement Program 2024.

NO.	GROUP OF PPW	PASSED	RESIGNED	EXTENDED	REPLACEMENT	SPECIAL CASE	TOTAL
1	Group 30/2024	87	0	4	0	5	**96**
2	Group 31A/2024	156	9	9	9	1	**184**
	Grand Total	**243**	**9**	**13**	**9**	**6**	**280**

Table 5.3.3: Supervisory Visit of Compulsory Placement Program.

NO.	DATE	HOSPITAL	STATE
1	23 January 2024	Hospital Kajang	Selangor
2	05 February 2024	Hospital Putrajaya	Federal Territory of Kuala Lumpur & Putrajaya
3	27 February 2024	Hospital Sultanah Nur Zahirah	Terengganu
4	28 February 2024	Hospital Kemaman	Terengganu
5	05 March 2024	Hospital Sibu	Sarawak
6	06 March 2024	Hospital Sarikei	Sarawak

5.4 EMERGENCY MEDICAL RESCUE SERVICES (EMRS) ACTIVITY REPORTS

Table 5.4.1: First Responder Emergency Medical Rescue Services (FR-EMRS) Activities

No	Date	Activity	Total Participants	Total Passed
1.	17 – 28 September 2024	First Responder Emergency Medical Rescue Services (FR-EMRS) Course No.1/2024	45	32
2.	15 October 2024 – 15 January 2025	Practical Placement 120 Hours at MOH Hospitals	32	32

Table 5.4.2: Practical Placement 120 Hours for FR-EMRS at Ministry of Health (MoH) Hospitals

NO.	State	Number of Participants
1.	Federal Territory of Kuala Lumpur & Putrajaya	2
2.	Perlis	1
3.	Perak	2
4.	Selangor	4
5.	Hospital Kuala Lumpur	1
6.	Kedah	3
7.	Pulau Pinang	3
8.	Negeri Sembilan	1
9.	Johor	2
10.	Melaka	1
11.	Pahang	2
12.	Terengganu	3
13.	Kelantan	2
14.	Sabah	1
15.	Sarawak	2
16.	Federal Territory of Labuan	2
Total		32

Table 5.4.3: Emergency Medical Rescue Services (EMRS) Meetings

No.	Date	Activity	Venue
1.	December 23, 2024	Coordination Meeting Between the Ministry of Health Malaysia and the Malaysian Fire and Rescue Department (JBPM) on Pre-Hospital and Ambulance Services	Fire and Rescue Department of Malaysia

5.5 FIRE SAFETY OFFICER (FSO) TRAINING REPORT

Table 5.5.1: Fire Safety Officer (FSO) Meeting

NO.	DATE	MEETING	VENUE
1	July 21, 2024	Presentation of Fire Safety Officer Training at Courtesy Visit of Johor State Health Department to the Johor State Fire and Rescue Department	Kangkar Fire and Rescue Department, Tebrau, Johor Bharu
2.	August 2, 2024	Preparatory Meeting for Fire Safety Officer (FSO) Assistant Medical Officer Course	Fire and Rescue Academy Central Region, Kuala Kubu Bharu, Selangor
3.	December 12, 2024	Technical Meeting of Fire Safety Officers for Assistant Medical Officers of the Ministry of Health Malaysia	Hospital Tengku Ampuan Rahimah, Klang, Selangor

Table 5.5.2: Fire Safety Officer (FSO) Training

NO.	DATE	MEETING	VENUE
1.	16 – 20 December 2024	Level 1 Certificate In Fire Risk Inspection Course for Assistant Medical Officer	Bangi Resort Hotel, Bandar Baru Bangi, Selangor

Table 5.5.3: Activity Table Top Exercise

NO	Type of Facility	Total Facility	Numerator	Denominator	Percentage
1.	**Medical Facility**	148 Hospital	226	296	76.35%
2.	**Health Facility**	153 District Health Office	75	306	24.50%

Table 5.5.4: Fire Drill Exercise

NO	Type of Facility	Total Facility	Numerator	Denominator	Percentage
1.	**Medical Facility**	148 Hospital	148	148	100%
2.	**Health Facility**	153 District Health Office	88	153	57.51%

Table 5.5.5: Summary of Conducted Fire Drill & Table Top Exercise (Medical and Health Facilities)

NO.	STATE	NUMERATOR	DENOMINATOR	PERCENTAGE
1	Perlis	4	6	66.67%
2	Kedah	31	66	46.97%
3	Pulau Pinang	32	33	96.97%
4	Perak	58	81	71.60%
5	Selangor	36	66	54.55%
6	HKL	5	6	83.33%
7	Federal Territory of Kuala Lumpur & Putrajaya	16	21	76.19%
8	Negeri Sembilan	27	42	64.29%
9	Melaka	12	12	100.00%
10	Johor	42	69	60.87%
11	Kelantan	30	57	52.63%
12	Terengganu	24	42	57.14%
13	Pahang	43	69	62.32%
14	Sabah	99	150	66.00%
15	Sarawak	64	168	38.10%
16	Federal Territory of Labuan	3	3	100.00%
17	National Institute of Health (IKN)	3	3	100.00%
18	Institute of Respiratory Medicine (IPR)	2	3	66.67%
TOTAL				59.47%

5.6 EMERGENCY MEDICINE AND TRAUMA SERVICES (EMTS) ACTIVITIES REPORT

Table 5.6.1: Klang Valley Ambulance Services (KVAS)

NO.	DATE	ACTIVITY	VENUE
1	January 3, 2024	Supervisory Visit of KVAS under the Management of the Health Department of the Federal Territory of Kuala Lumpur & Putrajaya	JKWPKL 1. Klinik Kesihatan Tangling 2. Klinik Kesihatan Jinjang 3. Hospital Kuala Lumpur 4. Klinik Kesihatan Putrajaya Presint 18 5. Hospital Putrajaya
2	January 8, 2024	Supervisory Visit of KVAS under the Management of the Selangor State Health Department	SELANGOR STATE HEALTH DEPARTMENT 1. Hospital Shah Alam 2. MBSA Hall Shah Alam 3. Kelana Jaya 4. Hospital Sungai Buloh

3	January 22, 2024	Assistant Medical Officer Meeting for Klang Valley Ambulance Service (KVAS)	NCD Main Meeting Room, Ministry of Health Malaysia
4	January 29, 2024	Supervision Meeting of Assistant Medical Officers for Klang Valley Ambulance Service (KVAS)	Meeting room 4 (Ibnu Al-Razi), Ministry of Health Malaysia

Table 5.6.2: National EMTS Triage Services Technical Committee

NO.	DATE	ACTIVITY	VENUE
1	March 20, 2024	Terms of Reference Development for the National EMTS Triage Services Technical Committee	Online Meeting
2	May 29, 2024	Meeting of the National EMTS Triage Service Technical Committee No.2/2024	Online Meeting
3	4 – 6 June 2024	Meeting of the National EMTS Triage Service Technical Committee No.3/2024	National Centre of Excellence Mental Health (NCEMH)
4	12 June 2024	Briefing of Baseline Study Triage Module and Triage Process	Online Meeting
5	26 August 2024	Presentation Meeting of Current Developments for the National EMTS Triage Services Technical Committee	Online meeting

5.7 PRE-HOSPITAL CARE AND EMERGENCY MEDICAL SERVICES– RELATED ACTIVITIES

Table 5.7.1: Proposal for Pre-Hospital Care and Ambulance Personnel Uniforms

NO.	DATE	ACTIVITY	VENUE
1	29 April 2024	Meeting on the Development of PHC Uniform for Assistant Medical Officers of the Ministry of Health No. 1/2024	Online Meeting
2	25 – 28 November 2024	Workshop on the Development of PHC Uniform for Assistant Medical Officers of the Ministry of Health No. 1/2024	Swan Garden Hotel Resort Melaka

Table 5.7.2: Pre-Hospital Care and Ambulance Services (PHCAS)

NO.	DATE	ACTIVITIES	VENUE
1.	June 12, 2024	Pre-Hospital Care and Ambulance Services (PHCAS) Assistant Medical Officer Meeting No.1/2024	Hospital Tengku Ampuan Rahimah, Klang
2.	13-14 June 2024	Pre-Hospital and Ambulance Services Guidelines and Policies Review Workshop – 2nd Series Selangor State	Hospital Sultan Idris Shah, Serdang
3.	June 14, 2024	Pre-Hospital Care and Ambulance Services (PHCAS) Continuity Planning Meeting	CPPPP Meeting Room, Ministry of Health Malaysia

4.	June 24, 2024	Technical Authority Meeting on Strengthening Cooperation Between Ministry of Health Malaysia with St. John Ambulance Malaysia and The Malaysian Red Crescent Society No.2/2024	CPRCPH Room, Level 7, Block E1, Ministry of Health Malaysia
5.	July 10, 2024	Preparation Draft Meeting of Information and Communication Technology (ICT) System Requirements for Assistant Medical Officers in the Pre-Hospital Care and Ambulance Services (PHCAS)	Meeting Room 2 (Ibnu Al-Zahrawi), Ministry of Health Malaysia
6.	August 1, 2024	Pre-Hospital Care and Ambulance Services (PHCAS) Meeting for Assistant Medical Officer in Klang Valley	BPKK Main Meeting Room, Ministry of Health Malaysia
7.	August 2, 2024	Courtesy Visit Assistant Medical Officers Service Branch to The Malaysian Red Crescent Society Head Quarters	DMC Room, The Malaysian Red Crescent Society Headquarters
8.	August 7, 2024	Technical Meeting of Pre-Hospital Care and Ambulance Services (PHCAS) – **Putrajaya and Serdang Operational Zones**	Hospital Cyberjaya
9.	August 12, 2024	Technical Meeting of Pre-Hospital Care and Ambulance Services (PHCAS) – **MECC Hospital Tengku Ampuan Rahimah, Klang Operational Zone**	Hospital Tengku Ampuan Rahimah, Klang
10.	August 20, 2024	Technical Meeting of Pre-Hospital Care and Ambulance Services (PHCAS) – **MECC Hospital Kuala Lumpur, Operational Zone**	Hospital Kuala Lumpur
11.	August 21, 2024	Technical Meeting of Pre-Hospital Care and Ambulance Services (PHCAS) – **MECC Hospital Sungai Buloh, Operational Zone**	Klinik Kesihatan Rawang Perdana, Rawang
12.	28-30 August 2024	Emergency Medical & Trauma (EMTS) Policies Refining Workshop	Grand Swiss Belhotel
13.	6 – 8 Sept 2024	Pre-Hospital Care and Ambulance Services (PHCAS) Assistant Medical Officer Meeting No.2/2024	Hospital Sungai Buloh
14.	September 12, 2024	Pre-Hospital Care and Ambulance Services (PHCAS) Assistant Medical Officer Meeting No.3/2024	Hospital Kuala Lumpur
15.	September 13, 2024	Government Integrated Radio Network (GIRN) Concession New Terminal Verification Testing GIRN User Agency	Security Development Division, Putrajaya

Table 5.7.3: Pre-Hospital Care Advanced Life Support (PHCALS) Training Module (Development)

NO.	DATE	ACTIVITIES	VENUE
1.	14 – 16 August 2024	PHCALS Training Module Development Meeting No.1/2024 (Video Preparation)	Pulau Pinang State Health Department
2.	23 – 25 October 2024	PHCALS Training Module Development Meeting No.2/2024 (Video Preparation)	Crown Garden Hotel, Kota Bharu Kelantan
3.	November 7, 2024	PHCALS Training Module Development Meeting No.3/2024 (Video Preparation)	Infra Minda Sdn. Bhd
4.	13 – 17 November 2024	PHCALS Training Module Development Meeting No.4/2024 (Video Preparation)	Infra Minda Sdn. Bhd & Keypark Management Cooperation
5.	20 – 30 Nov 2024	Video Editing for PHCALS Training Module	Infra Minda Sdn. Bhd
6.	3, 6 & 7 Dec 2024	Preparing Montage Video for PHCALS Training Module	Infra Minda Sdn. Bhd
7.	December 9, 2024	Final Reviewing in Video Editing of PHCALS Training Module	Infra Minda Sdn. Bhd

Table 5.7.4: Next Generation Emergency Services 999 (NG999)

NO.	DATE	ACTIVITIES	VENUE
1.	6-8 May 2024	Meeting on Reviewing the Work Process of the Ministry of Health Malaysia (MoH) for the Development Of Next Generation Emergency Services 999 (NG999)	Swiss Garden Hotel Melaka
2.	15-19 May 2024	Standard Operating Procedure (SOP) Strengthening Workshop for Next Generation Emergency Services System Development 999 (NG999)	Hotel Bayview, Langkawi
3.	August 9, 2024	Presentation of the MyResQ Application to Assess Suitability for Integration into the NG999 System	Tm Annexe 2, Jalan Pantai Jaya, Kuala Lumpur
4.	September 4, 2024	Discussion on the NG999 Reporting System	Kopi Surat Cinta, Galeria PjH Presint 4 Putrajaya
5.	September 13, 2024	Operation Planning Meeting for Next Generation Emergency Services 999 (NG999) in Pre-Hospital Care and Ambulance Services (PHCAS) Assistant Medical Officer	CPPPP Meeting room, Ministry of Health Malaysia
6.	23 – 25 September 2024	Workshop on Validation of Technical Requirements of The Ministry of Health Malaysia (MoH) for the Development of the Next Generation Emergency Services 999 (NG999) System	AC Hotel By Marriot Kuantan

7.	October 21, 2024	Emergency Medical Dispatch Implementation Plan Meeting with Telekom Malaysia Berhad for Next Generation Emergency Services 999 (NG999) System	TM Annexe 2, Jalan Pantai Jaya, Kuala Lumpur
8.	11 – 12 Nov 2024	Next Generation Emergency Services 999 (NG999) System Technical Requirements Validation Workshop	Telekom Malaysia TM Cyberjaya

Table 5.7.5: PHCAS Training

DATE	ACTIVITY	VENUE	NUMBER OF PERTICIPANTS
5 – 9 August 2024	Ambulance Driving Course (Assistant Medical Officers) Ministry of Health Malaysia 2024 in Collaboration with Competency Development Divisions & Kelantan State Health Department	Kem Batallion Pasukan Gerakan Am (PGA), Kota Bharu Kelantan	10 (HSGB & HKL)
9 – 18 November 2024	In-training Service (Overseas) in Pre-Hospital Care Field	St John Ambulance Western, Australia	1

6. SECTOR OF POLICY AND STRATEGIC PLANNING ACTIVITIES AND DATA

6.1 The Human Capital and Human Resource Development Unit

Table 6.1.1: Number of Assistant Medical Officers and their credentials

NO.	DETAIL	TOTAL
1.	Total of registered Assistant Medical Officer	30,650
2.	Assistant Medical Officer in MOH	20,763[1]
3.	Total Assistant Medical Officer in Cadre Agencies	376
4.	Assistant Medical Officer in Private Sector	6,507
5.	Assistant Medical Officer Contract	3105
6.	Assistant Medical Officer with Post Basics / Advance Diploma	7520
7.	Assistant Medical Officer with Bachelor Degree	862
8.	Assistant Medical Officer with Master Degree	38
9.	Assistant Medical Officer with PhD	3
10.	Total Assistant Medical Officer without Post Basic	18,569
11.	Annual **average output** for Assistant Medical Officers with Post Basics	600

Note:
1 https://www.moh.gov.my/moh/resources/Penerbitan/Penerbitan%20Utama/HEALTH%20FACTS/HEALTH_FACTS_2025.pdf for report 2024.

Table 6.1.2: AMO'S with Post Basics and Advanced Diploma

NO.	POST BASIC	GRADUATE 2024	CUMULATIVE 2024
1.	Advanced Diploma in Emergency Care	154	2341
2.	Advanced Diploma in Mental Health Care	21	250
3.	Advanced Diploma in Orthopaedic Care	26	576
4.	Advanced Diploma in Ophthalmic Care	6	199
5.	Advanced Diploma in Primary Health Care	48	677
6.	Advanced Diploma in Diabetes Care	51	472
7.	Advanced Diploma in Otorhinolaryngology Care	8	81
8.	Advanced Diploma in Neurosciences (Neurophysiology Diagnostic & Monitoring)	7	94
9.	Advanced Diploma in Prevention & Infection Control	15	152
10.	Advanced Diploma of Mental health care	21	107
11.	Advanced Diploma in Gerontology Nursing	7	42
12.	Advanced Diploma in Cardiovascular Care	26	152
13.	Advanced Diploma in Perioperative Care	5	114
14.	Advanced Diploma in Intensive Care Technology	1	76
15.	Certificate of Nephrology Care	77	907
16.	Certificate of Rehabilitation Nursing	1	22
17.	Certificate of Forensics	14	203
18.	Certificate of Health Personnel Management	-	82
19.	Certificate of Sports Medicine	12	260
20.	Certificate of Gastrointestinal Endoscopy	12	97
21.	Certificate of HIV/AIDS Counselling	64	200
22.	Certificate of Anaesthesia (Sabah & Sarawak)	15	136
23.	Certificate of Occupational Safety & Health	-	3
24.	Certificate of Peri-Anaesthesia Care	33	238
25.	Certificate Stoma and Continence Care	-	4
26.	Certificate Wound Care	-	35
	TOTAL	**624**	**7520**

Table 6.1.3 Assistant Medical Officer staffing in relation to population and health facility

No.	State	Total Population	Total AMO'S	Health Facility	Total Facility	Total
1.	Johor	4,100,900	1477	**State Hospital**	**1**	132
				Major Specialist Hospital	4	
				Minor Specialist Hospital	1	
				Hospital Without Specialists	5	
				Permai Hospital (Psychiatric Inst)	1	
				KKOM	20	
				Type 1 Health Clinic	11	
				Type 2 Health Clinic	13	
				Type 3 Health Clinic	24	
				Type 4 Health Clinic	42	
				Type 5 Health Clinic	6	
				Type 6 Health Clinic	1	
				Type 7 Health Clinic	3	

No.	State	Total Population	Total AMO'S	Health Facility	Total Facility	Total
2.	Kedah	2,187,500	1108	State Hospital	1	82
				Major Specialist Hospital	2	
				Minor Specialist Hospital	3	
				Hospital Without Specialists	4	
				KKOM	4	
				Type 1 Health Clinic	4	
				Type 2 Health Clinic	11	
				Type 3 Health Clinic	15	
				Type 4 Health Clinic	22	
				Type 5 Health Clinic	10	
				Type 6 Health Clinic	5	
				Type 7 Health Clinic	1	

No.	State	Total Population	Total AMO'S	Health Facility	Total Facility	Total
3.	Kelantan	1,857,600	978	State Hospital	1	124
				Major Specialist Hospital	2	
				Minor Specialist Hospital	1	
				Hospital Without Specialists	6	
				KKOM	1	
				Type 1 Health Clinic	2	
				Type 2 Health Clinic	9	
				Type 3 Health Clinic	18	
				Type 4 Health Clinic	28	
				Type 5 Health Clinic	15	
				Type 6 Health Clinic	24	
				Type 7 Health Clinic	17	

No.	State	Total Population	Total AMO'S	Health Facility	Total Facility	Total
4.	**Melaka**	**1,027,500**	**565**	State Hospital	1	53
				Major Specialist Hospital	1	
				Minor Specialist Hospital	0	
				Hospital Without Specialists	2	
				KKOM	12	
				Type 1 Health Clinic	5	
				Type 2 Health Clinic	9	
				Type 3 Health Clinic	5	
				Type 4 Health Clinic	6	
				Type 5 Health Clinic	3	
				Type 6 Health Clinic	8	
				Type 7 Health Clinic	1	

No.	State	Total Population	Total AMO'S	Health Facility	Total Facility	Total
5.	**Negeri Sembilan**	**1,224,300**	**776**	State Hospital	1	69
				Major Specialist Hospital	1	
				Minor Specialist Hospital	1	
				Hospital Without Specialists	4	
				KKOM	11	
				Type 1 Health Clinic	4	
				Type 2 Health Clinic	6	
				Type 3 Health Clinic	9	
				Type 4 Health Clinic	13	
				Type 5 Health Clinic	7	
				Type 6 Health Clinic	9	
				Type 7 Health Clinic	3	

No.	State	Total Population	Total AMO'S	Health Facility	Total Facility	Total
6.	**Pahang**	**1,642,700**	**1021**	State Hospital	1	114
				Major Specialist Hospital	1	
				Minor Specialist Hospital	4	
				Hospital Without Specialists	6	
				KKOM	9	
				Type 1 Health Clinic	3	
				Type 2 Health Clinic	6	
				Type 3 Health Clinic	11	
				Type 4 Health Clinic	22	
				Type 5 Health Clinic	17	
				Type 6 Health Clinic	24	
				Type 7 Health Clinic	10	

No.	State	Total Population	Total AMO'S	Health Facility	Total Facility	Total
7.	**Pulau Pinang**	**1,800,400**	**865**	State Hospital	1	52
				Major Specialist Hospital	1	
				Minor Specialist Hospital	2	
				Hospital Without Specialists	2	
				KKOM	8	
				Type 1 Health Clinic	11	
				Type 2 Health Clinic	6	
				Type 3 Health Clinic	7	
				Type 4 Health Clinic	5	
				Type 5 Health Clinic	5	
				Type 6 Health Clinic	2	
				Type 7 Health Clinic	2	

No.	State	Total Population	Total AMO'S	Health Facility	Total Facility	Total
8.	**Perak**	**2,573,600**	**1522**	State Hospital	1	120
				Major Specialist Hospital	2	
				Minor Specialist Hospital	2	
				Hospital Without Specialists	9	
				Bahagia Hospital Ulu Kinta	1	
				KKOM	16	
				Type 1 Health Clinic	8	
				Type 2 Health Clinic	9	
				Type 3 Health Clinic	17	
				Type 4 Health Clinic	29	
				Type 5 Health Clinic	10	
				Type 6 Health Clinic	9	
				Type 7 Health Clinic	7	

No.	State	Total Population	Total AMO'S	Health Facility	Total Facility	Total
9.	**Perlis**	**283,700**	**282**	State Hospital	1	22
				KKOM	0	
				Type 1 Health Clinic	0	
				Type 2 Health Clinic	1	
				Type 3 Health Clinic	2	
				Type 4 Health Clinic	8	
				Type 5 Health Clinic	1	
				Type 6 Health Clinic	0	
				Type 7 Health Clinic	1	

No.	State	Total Population	Total AMO'S	Health Facility	Total Facility	Total

10.	**Selangor**	**7,205,300**	**1907**	State Hospital	1	159
				Major Specialist Hospital	7	
				Minor Specialist Hospital	2	
				Hospital Without Specialists	3	
				KKOM	21	
				Type 1 Health Clinic	23	
				Type 2 Health Clinic	12	
				Type 3 Health Clinic	18	
				Type 4 Health Clinic	21	
				Type 5 Health Clinic	4	
				Type 6 Health Clinic	6	
				Type 7 Health Clinic	2	
				Type Bettle Health Clinic	39	

No.	State	Total Population	Total AMO'S	Health Facility	Total Facility	Total
11.	**Terengganu**	**1,193,304**	834	State Hospital	1	58
				Major Specialist Hospital	1	
				Minor Specialist Hospital	2	
				Hospital Without Specialists	2	
				KKOM	0	
				Type 1 Health Clinic	0	
				Type 2 Health Clinic	7	
				Type 3 Health Clinic	11	
				Type 4 Health Clinic	19	
				Type 5 Health Clinic	4	
				Type 6 Health Clinic	6	
				Type 7 Health Clinic	5	

No.	State	Total Population	Total AMO'S	Health Facility	Total Facility	Total
12.	**WP Kuala Lumpur / Putrajaya**	**2,117,800**	1325	State Hospital (HKL)	1	46
				Major Specialist Hospital	1	
				Minor Specialist Hospital	1	
				Rehab Hospital	1	
				National Cancer Institute (IKN)	1	
				Inst of Respiratory Medicine (IPR)	1	
				KKOM	18	
				MOHHQ	1	
				Type 1 Health Clinic	8	
				Type 2 Health Clinic	4	
				Type 3 Health Clinic	3	
				Type 4 Health Clinic	5	
				Type 5 Health Clinic	1	
				Type 6 Health Clinic	0	
				Type 7 Health Clinic	1	

No.	State	Total Population	Total AMO'S	Health Facility	Total Facility	Total
13.	**Sabah**	**3,740,000**	1735	State Hospital	1	163
				Major Specialist Hospital	6	
				Minor Specialist Hospital	4	
				Hospital Without Specialists	12	
				Permai Hospital (Psychiatric Inst.)	1	
				KKOM	26	
				Type 1 Health Clinic	4	
				Type 2 Health Clinic	6	
				Type 3 Health Clinic	8	
				Type 4 Health Clinic	18	
				Type 5 Health Clinic	23	
				Type 6 Health Clinic	25	
				Type 7 Health Clinic	29	

No.	State	Total Population	Total AMO'S	Health Facility	Total Facility	Total
14	**Sarawak**	**2,509,500**	1823	State Hospital	1	268
				Major Specialist Hospital	3	
				Minor Specialist Hospital	4	
				Hospital Without Specialists	13	
				Sentosa Hospital (Psychiatric Inst.)	1	
				Sarawak Heart Center	1	
				KKOM	25	
				Type 1 Health Clinic	5	
				Type 2 Health Clinic	9	
				Type 3 Health Clinic	3	
				Type 4 Health Clinic	13	
				Type 5 Health Clinic	32	
				Type 6 Health Clinic	37	
				Type 7 Health Clinic	121	

No.	State	Total Population	Total AMO'S	Health Facility	Total Facility	Total
15.	**WP Labuan**	**99,500**	**72**	State Hospital	1	5
				KKOM	2	
				Type 1 Health Clinic	0	
				Type 2 Health Clinic	1	
				Type 3 Health Clinic	0	
				Type 4 Health Clinic	1	
				Type 5 Health Clinic	0	
				Type 6 Health Clinic	0	
				Type 7 Health Clinic	0	

Table 6.1.4: Table of Assistant Medical Officer's Areas of Practice

NO.	AREA OF PRACTICE	TOTAL AMO's	PERCENTAGE (%)
1	Headquarters and State Management	82	0.58
2	Hospital Management	297	2.10
3	District Public Health Management	435	3.07
4	Emergency & Outpatient Treatment	4370	30.87
5	General Medicine	250	1.77
6	General Surgery	209	1.48
7	Obstetrics and Gynaecology	24	0.17
8	Paediatrics	105	0.74
9	Orthopaedics	383	2.71
10	Anaesthesiology	409	2.89
11	Ophthalmology	192	1.36
12	Otorhinolaryngology	127	0.90
13	Dermatology	55	0.39
14	Neurology Medical	57	0.40
15	Nephrology	539	3.81
16	Neurosurgery	42	0.30
17	Urology	32	0.23
18	Plastic surgery	32	0.23
19	Radiotherapy and Oncology	16	0.11
20	Cardio Services (Cardiothoracic/ Cardiology/ Cardio Perfusion)	199	1.41
21	Nuclear Medicine	19	0.13
22	Respiratory Medicine	81	0.57
23	Psychiatry and Mental Health	743	5.25
24	Rehabilitation	30	0.21
25	Transfusion Medicine	5	0.04
26	Forensic Medicine	148	1.05
27	Family Health Development	5069	35.81
28	Infection Control	205	1.45
	TOTAL	**14,155**	**100**

6.1.4 (i) Percentage (%) of Assistant Medical Officer's Distribution

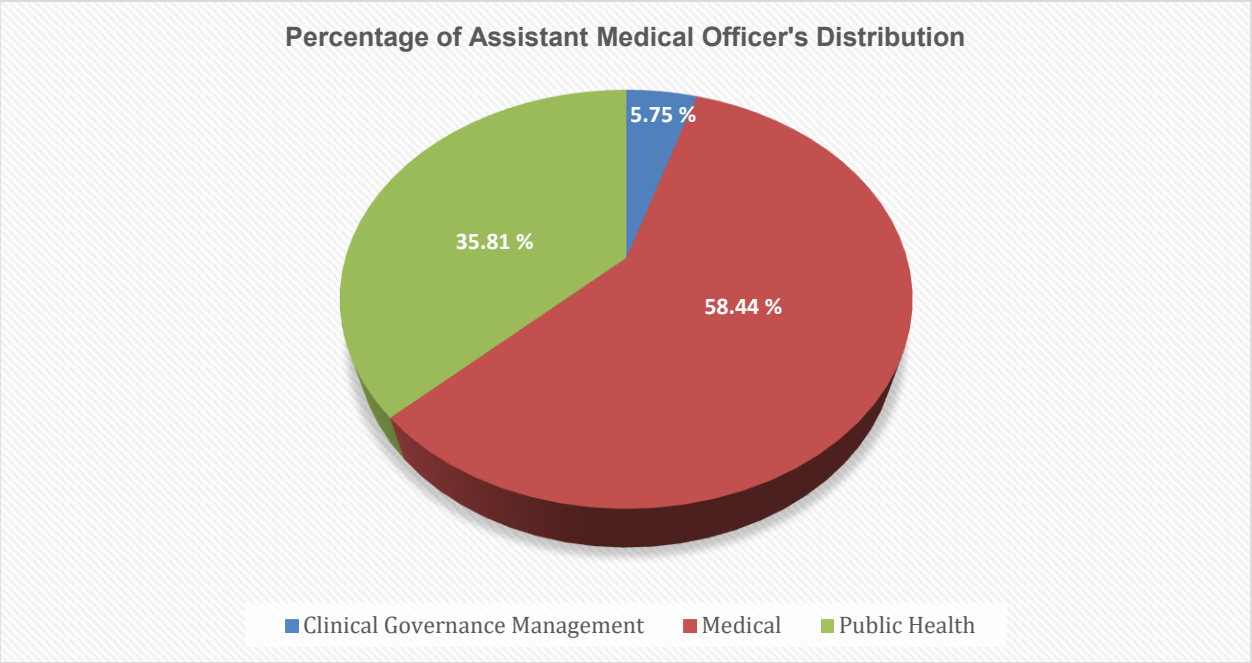


Chart 6.1: Distribution of Assistant Medical Officers (AMOs) in the Ministry of Health by Service Sector, 2024.

6.1.5 Transformation Workshop

a) Workshop on Transformation of Assistant Medical Officer

i) This workshop aims to develop a comprehensive plan to improve the services provided by Assistant Medical Officers (AMOs). The AMO Service Transformation Plan is very important because it will act as the main reference in planning and implementing the necessary transformation steps.

ii) The main purpose of this workshop is to ensure that the actions taken are in line with the objectives that have been set, and that the planned transformation plan will be able to achieve the specified targets. This includes improving various aspects of medical services, such as efficiency, quality of service, and the welfare of PPP professionals.

iii) The transformation plan developed at this workshop is based on three main strategies that are important to strengthen the efficiency and expand the role of AMOs in more detailed clinical aspects and ensure that AMOs are in a more strategic position in the health service.

b) The Transformation plan has been developed based on 3 main strategies, namely:

i. Optimizing the Assistant Medical Officer workforce.

ii. Empowering the role of Assistant Medical Officers.

iii. Governance of the operation of the Malaysian Pre-Hospital and Ambulance Services under the Assistant Medical Officer Services Branch of the Ministry of Health.

Table 6.1.5: Organising Training and Workshop for Assistant Medical Officer 2024

DATE	ACTIVITY	VENUE
07-09 Mei 2024	Clinical Governance Course for Assistant Medical Officers of various grades in other agencies besides the Ministry of Health Malaysia (Kader)	Pusat Latihan Guru Dalam Perkhidmatan (PLGDP) Zone Timur, Temerloh
23-25 July 2024	Clinical Governance Course for Assistant Medical Officers Grade U41/ U42/ U44	New York Hotel, Johor Bahru
11-13 September 2024	Clinical Governance Course for Assistant Medical Officers Grade U32/ U36 for the States of Sabah, Sarawak and W.P Labuan	The Paramount Hotel, Sibu Sarawak
04 - 06 Nov 2024	Workshop on Transformation of Assistant Medical Officer Services at the Ministry of Health	Hotel Lexis Port Dickson

Table 6.1.6: The total number of PPP contracts from phase 6 to phase 14 for each state/ institution

No.	STATE/ INSTUTION	TOTAL CONTRACTS
1	Perlis	49
2	Kedah	87
3	P. Pinang	109
4	Perak	125
5	Selangor	578
6	Hospital Kuala Lumpur	245
7	Hospital Tuanku Azizah	49
8	JKWP KL & Putrajaya	108
9	Negeri Sembilan	128
10	Melaka	83
11	Johor	119

12	Pahang	119
13	Terengganu	106
14	Kelantan	114
15	Sabah	305
16	Sarawak	284
17	WP Labuan	22
18	National Cancer Institute	3
19	Institute of Respiratory	1
	TOTAL	**2,634**

Table 6.1.7: List of PPP Various Grades Involved to Clinical Area from MOH HQ (Mobilization)

GREDE	TOTAL PPP	ACTIVITI DETAILS	PLACEMENT
U9(U42)	1	3.2.1	Hospital Seberang Jaya
U9(U42)	1	3.2.1	PKD Manjung
U9(U42)	1	2.2.1	Hospital Raja Perempuan Bainun
U10(U44) U6(U32)	1 1	2.2.1 3.2.1	JKWP KL & Putrajaya
U6(U32)	3	2.15.1 2.8.1 2.15.1	Hospital Putrajaya
U6(U32)	1	2.3.1	Hospital Kuala Lumpur
U6(U32)	1	2.3.1	Hospital Sultanah Aminah
U6(U32)	1	2.24.2.1	Hospital Sultan Idris Shah

Table 6.1.8: AMOs Permanent/ Contract Appointments by Phase 2024

No.	AMOs Permanent / Contract Appointments	Total
1.	Permanent	1365
2.	Contract	1867

Table: 6.1.9 Total Assistant Medical Officer Grade Promoted for the Year 2024

No.	Grade	Total
1.	U14/U54	1
2.	U13/U52	1
3.	U12/U48	14

4.	U10/U44	0
5.	U9/U10 (U41/U42/U44)	30
6.	U7/U36	144
7.	U6/U32	199
8.	U5/U6 (U29/U32)	1365

Table 6.1.10: Total Retirements, Resignations, Expelled & Deaths of Assistant Medical Officers in The Ministry of Health Malaysia from 2020 to 2024

State	Retirement (Compulsory)	Retirement (Elective)	Resign	Expelled	Death	Total
Perlis	4	2	1	0	0	**7**
Kedah	9	8	10	1	9	**37**
P. Pinang	7	7	8	3	1	**26**
Perak	53	9	8	3	10	**83**
Selangor	11	9	14	5	4	**43**
N. Sembilan	13	5	2	2	8	**30**
Melaka	7	2	11	2	2	**24**
Johor	19	8	8	1	9	**45**
Pahang	15	3	12	3	3	**36**
Terengganu	14	6	0	5	4	**29**
Kelantan	18	12	2	3	6	**41**
Sabah	59	1	15	1	15	**91**
Sarawak	113	7	9	3	5	**137**
WP. Labuan	2	0	5	1	0	**8**
WP. Putrajaya& Kuala Lumpur	3	0	1	1	1	**6**
Hospital Kuala Lumpur	4	1	14	3	5	**27**
National Cancer Institute	2	0	0	0	0	**2**
Institute of Respiratory	0	0	0	0	0	**0**
Total	**353**	**80**	**120**	**37**	**82**	**672**

Table 6.1.11: Number of Resignations, Expelled & Deaths of Assistant Medical Officers (Contract) in The Ministry of Health Malaysia from 2020 to 2024

State	Resign	Expelled	Death	Total
Perlis	4	0	0	4
Kedah	7	0	2	9
P. Pinang	15	0	0	15
Perak	0	1	0	1

Selangor	0	0	0	0
N. Sembilan	15	0	0	15
Melaka	0	0	0	0
Johor	12	2	1	15
Pahang	10	0	3	13
Terengganu	14	2	1	17
Kelantan	17	0	0	17
Sabah	13	0	1	14
Sarawak	21	0	2	23
WP. Labuan	5	0	0	5
WP. Putrajaya & Kuala Lumpur	4	0	0	4
Hospital Kuala Lumpur	12	0	1	13
National Cancer Institute	0	1	0	1
Institute of Respiratory	0	0	0	0
Total	**149**	**6**	**11**	**166**

Table 6.1.12: Total numbers of Assistant Medical Officer's in Various Sectors in Malaysia for the Year Until December of 2024

No	Grade	Total Post	Total AMOs (Fill)	Empty
1.	U14/U54	1	1	0
2.	U13/U52	1	1	0
3.	U12/U48	14	10	4
4.	U10/U44	45	41	4
5.	U9/U10 (U41/U42/U44)	631	433	198
6.	U7/U36	684	506	178
7.	U6/U32	2,886	2,061	825
8.	U5/U6 (U29/U32)	13,514	11,102	2,412
	TOTAL	**17,776**	**14,155**	**3621**

Table 6.1.13: University

No	University	Total AMOs
1.	HUKM	118
2.	HKKUKM	5
3.	PPUPM	91
4.	PPUM	85
5.	HPUSM	123
6.	PPUITM	116
7.	PPUNISZA	67
8.	HIIUM	65
9.	UPNM	5
10.	UTHM	4
11.	USIM	2
12.	UIA	4
TOTAL		**685**

Table 6.1.14: Others Agencies (Cadres)

No.	Agencies	Total AMOs	Fill	Empty
1.	National Anti-Drug Agency	56	0	0
2.	Royal Malaysian Police	8	0	0
3.	National Youth Skills Institute	4	0	0
4.	Malaysian Prison Department	119	1	1
5.	Social Welfare Department	8	0	0
6.	Ministry of Education	5	0	0
7.	Ministry of Higher Education	17	0	0
8.	Immigration Department	33	0	0
9.	Ministry of Defence	124	3	3
10.	JAKIM (Jawi)	2	0	0
TOTAL		**376**	**372**	4

6.2 TOTAL EMPLOYMENT AND VACANCY OF HEALTH CARE ASSISTANT'S (PPK) 2024.

Table 6.2.1: Ministry of Health Malaysia

No.	Grade	Total Post	Filled	Empty
1.	Health Care Assistant U16	111	97	14
2.	Health Care AssistantU14	1,220	979	241
3.	Health Care Assistant U11/U14	29,649	26,740	2,909
4.	Health Care Assistant U12	3	1	2
5.	Health Care Assistant U3/U12	996	894	102
TOTAL		**31,979**	**28,711**	**3,268**

Table 6.2.2: Others Agencies (Cadre)

No.	Grade	Total Post	Filled	Empty
1.	Health Care Assistant U16	1	1	0
2.	Health Care Assistant U14	67	50	17
3.	Health Care Assistant U11/U14	1,246	1,062	184
4.	Health Care Assistant U12	0	0	0
5.	Health Care Assistant U3/U12	0	0	0
TOTAL		**1,314**	**1,062**	**201**

6.2.3 The total number of PPK who have attended Level 1 and 2 Courses for each state/institution

No.	State/ Institution	Total Level 1	Total Level 2
1.	Perlis	398	311
2.	Kedah	1,529	1,198
3.	P. Pinang	1,280	1,125
4.	Perak	2,835	2,137
5.	Selangor	1,694	1,431
6.	Hospital Kuala Lumpur	1,514	1,031
7.	JKWP KL & Putrajaya	603	565
8.	Negeri Sembilan	1,250	1,030
9.	Melaka	846	764
10.	Johor Baharu	2,741	2,103
11.	Pahang	1,592	1,439
12.	Terengganu	963	831
13.	Kelantan	1,239	155
14.	Sabah	1,749	1,208
15.	Sarawak	2,313	1,844
16.	WP. Labuan	61	50
17.	National Cancer Institute	86	77
18.	Institute of Respiratory	90	63
	TOTAL	**22,783**	**17,400**

6.3 RESEARCH, QUALITY & INNOVATION UNIT

The "Research, Quality & Innovation Unit" plays a crucial role in planning and coordinating quality and innovation programs for Assistant Medical Officer services. The unit focuses on meeting the requirements of MS ISO 9001:2001 and Malaysia Society for Quality in Health (MSQH) – Service Standard 25: Medical Assistant Services Standards – 1st Edition. The main tasks of this unit include:

6.3.1 Professional Development

a) Ensure that the advancement of Assistant Medical Officer profession accordance with the Assistant Medical Officer Profession Development Plan 2016-2030.
b) Expand the knowledge and skills of assistant medical officers in the field of medicine.

6.3.2 Quality Systems Implementation

a) Coordinate the implementation of the MS ISO 9001:2001 quality system.
b) Organize training, seminars, and workshops to foster a culture of quality.
c) Coordinate programs under the Public Administration Development Circular (PKPA), including Customer Satisfaction Survey, Customer Charter, and Customer Complaints.

6.3.3 Innovation Programs

a) Coordinate innovation programs to encourage creative and innovative practices.
b) Establish and monitor Performance Measurement (KPI) related to innovation.

6.3.4 Quality Audit

a) Coordinate and monitor Assistant Medical Officer's National clinical audits.
b) Manage and conduct internal audits to ensure compliance with quality standards.

This unit's responsibilities encompass a comprehensive approach to quality assurance, professional development, innovation, and ongoing assessment through audits and performance measurements. These efforts contribute to maintaining high standards in Assistant Medical Officer services within the Ministry of Health Malaysia.

6.4 KEY PERFORMANCE INDICATORS (KPI) 2024

6.4.1 Deputy Director General (MEDICAL) TKPK KPI's

1	**AMO with sub- speciality** 1. Percentage of Assistant Medical Officers with Basic Post Qualification or Advanced Training assigned to relevant specialization unit/department. (Target> 80%).

6.4.2 Medical Practice Director BAP KPI's

1	**Annual Renewal Certificate Application** 2. Renewal of Annual Renew Certificate (ARC) which is completed within 60 days. (Target >85%)
2	**Medical Assistant Board Examination** 3. The announcement of the examination results by the Medical Assistant Agency is issued within a period of 30 working days following the examination. (Target > 80%)

6.4.3 Head of Assistant Medical Officer KPPPM KPI's

1	**Asthma Care** 4. PEFR implementation for Asthma Patients in Asthma Bay by Assistant Medical Officer (AMO) (Target > 80%)
2	**Compulsory Placement Program** 5. A complete Compulsory Placement Program Report provided within 14days after Compulsory Placement Program completed (Target > 80%)
3	**Credentialing** 6. The documents must be delivered to JPN within 30 working days after being reviewed by the National Credentialing Committee (NCC). (Target > 80%)
4	**Fire Safety Training** 7. Implementation of Fire Drill 1 time per year and Table Top 2 times per year by Hospital/ Institute Chief Assistant Medical Officer (Target 100%)
5	**Pre- Hospital Care & Ambulance Services** 8. Dispatch and ambulance preparedness for Primary Response of less than 5 minutes (Target > 90%)
6	**Public Health Care** 9. Percentage of interventions performed by trained Assistant Medical Officer through health status screening using BSSK/R for adolescent category (Target 100%)
7	**Triage Care** 10. Inappropriate triage (under triage) percentage of category Green Patient who should have been triaged as category Red (Target < 0.5%)

6.4.1 Deputy Director General (MEDICAL) KPI's

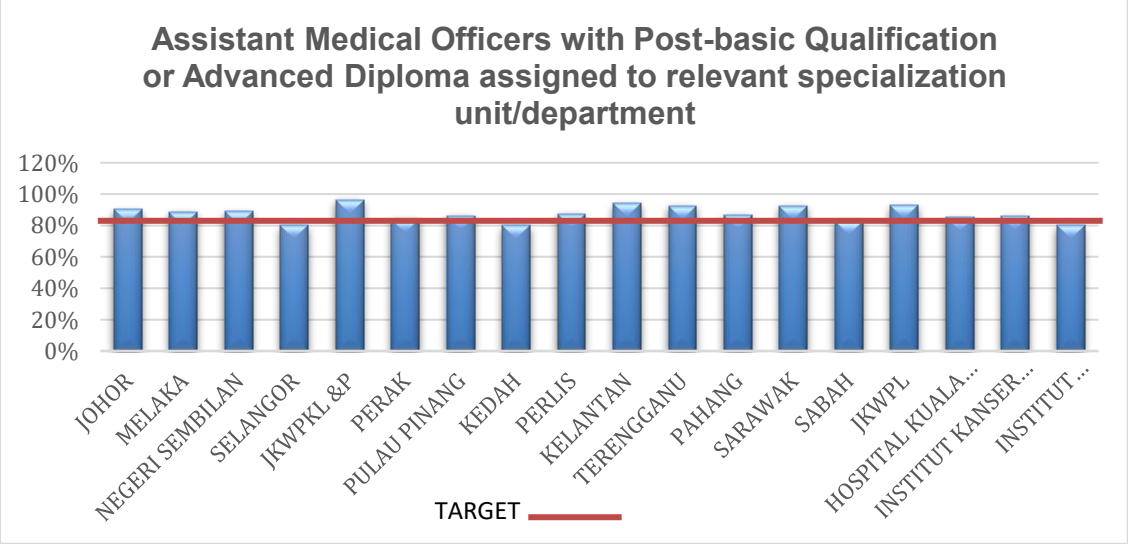


Chart 6.4.1: Bar chart showed TKPK (P) KPI's Percentage of Assistant Medical Officers with Post-Basic Qualification or Advanced Diploma assigned to relevant specialization unit/ department.

Table 6.4.1: Post-Basic Qualification or Advanced Diploma assigned to relevant specialization unit/ department by state.

State	Jan - Dec		
	Num	Deno	%
Johor	436	483	90.27%
Melaka	176	199	88.44%
Negeri Sembilan	255	287	88.85%
Selangor	553	691	80.03%
JKWP KL & Putrajaya	180	187	96.26%
Perak	643	765	84.05%
Pulau Pinang	245	285	85.96%
Kedah	397	496	80.04%
Perlis	118	135	87.41%
Kelantan	515	548	93.98%
Terengganu	365	395	92.41%
Pahang	420	484	86.78%
Sarawak	797	860	92.67%
Sabah	663	799	82.98%
JKWP Labuan	26	28	92.86%
Hospital Kuala Lumpur	103	121	85.12%
National Cancer Institute	6	7	85.71%
Institute of Respiratory	4	5	80.00%
TOTAL	**5,902**	**6,775**	**86.98%**

6.4.2 Medical Practice Director KPI's

6.4.2.1 Medical Assistant Board Examination Announcement

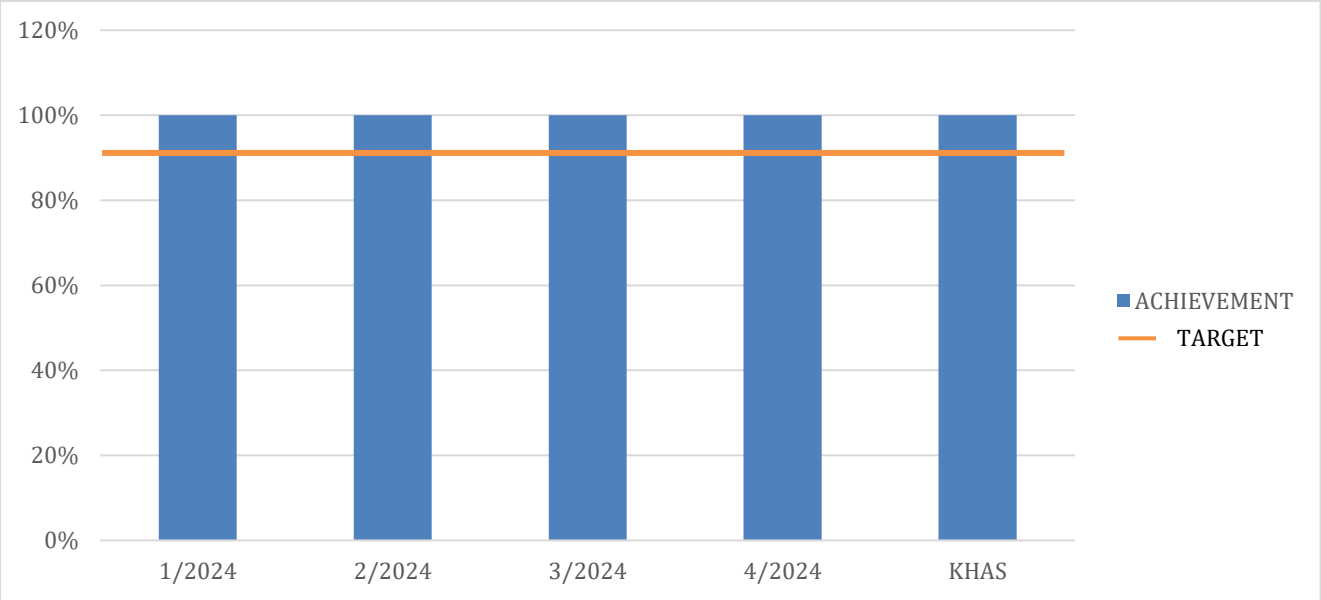


Chart 6.2: The bar chart showed the announcement of the examination results by the Medical Assistant Agency is issued within a period of 30 working days following the examination during the year 2024 was achieved.

Table 6.4.2: Percentage, numerator and denomerator of the examination results by the Medical Assistant Agency is issued within a period of 30 working days following the examination during the year 2024.

No.	Series	Numbers of Candidates Sitting Examination (Num)	Total Notifications Within 30 Working Days (Deno)	Achievement % (Num/Deno)
1.	1/2024	417	417	100.00%
2.	2/2024	190	190	100.00%
3.	3/2024	198	198	100.00%
4.	4/2024	436	436	100.00%
5.	KHAS	13	13	100.00%
TOTAL		**1,254**	**1,254**	**100.00%**

6.4.2.2 Achievement for Annual Renewal Certificate Application

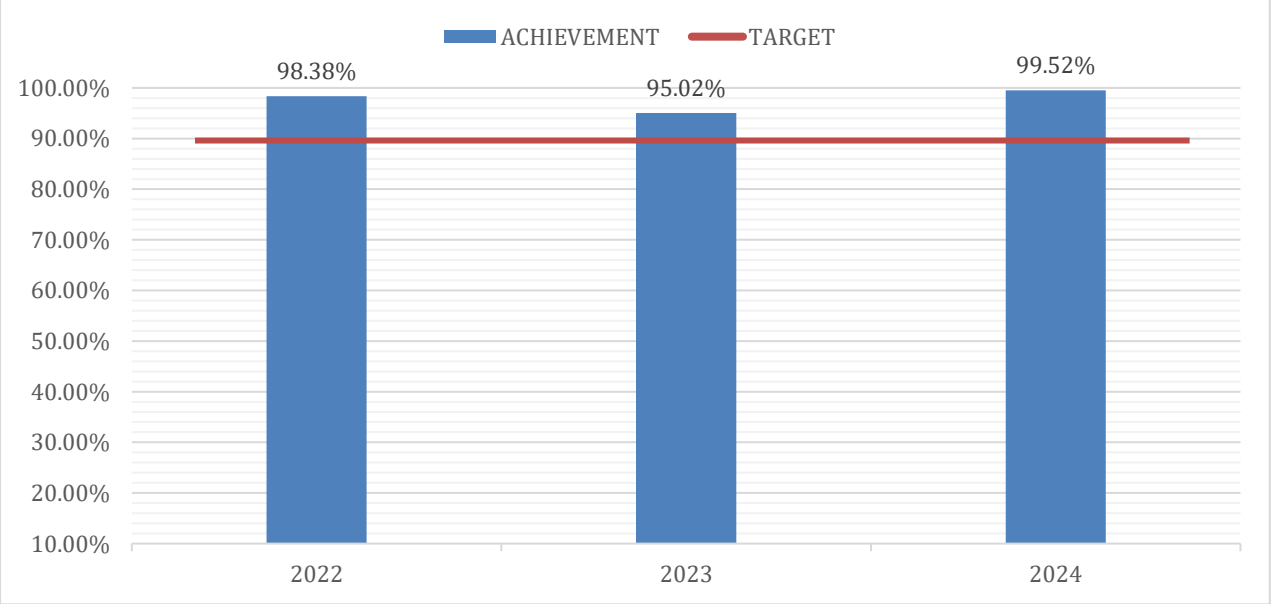


Chart 6.3: The bar chart showed the Achievement for Annual Renewal Certificate Application by our AMOs in the year 2024 was achieved.

Table 6.4.3: Percentage, numerator and denominator of the Achievement for Annual Renewal Certificate Application by our AMOs in the year 2024.

No.	Year	Target	Applications (Num)	Completed Applications Approved (Deno)	Achievement % (Num/Deno)
1.	2022	90%	21,735	22,094	98.38%
2.	2023	90%	22,355	23,527	95.02%
3.	2024	90%	23,230	23,343	99.52%

6.4.3 Head of Assistant Medical Officer KPI's

6.4.3.1 Credentialing

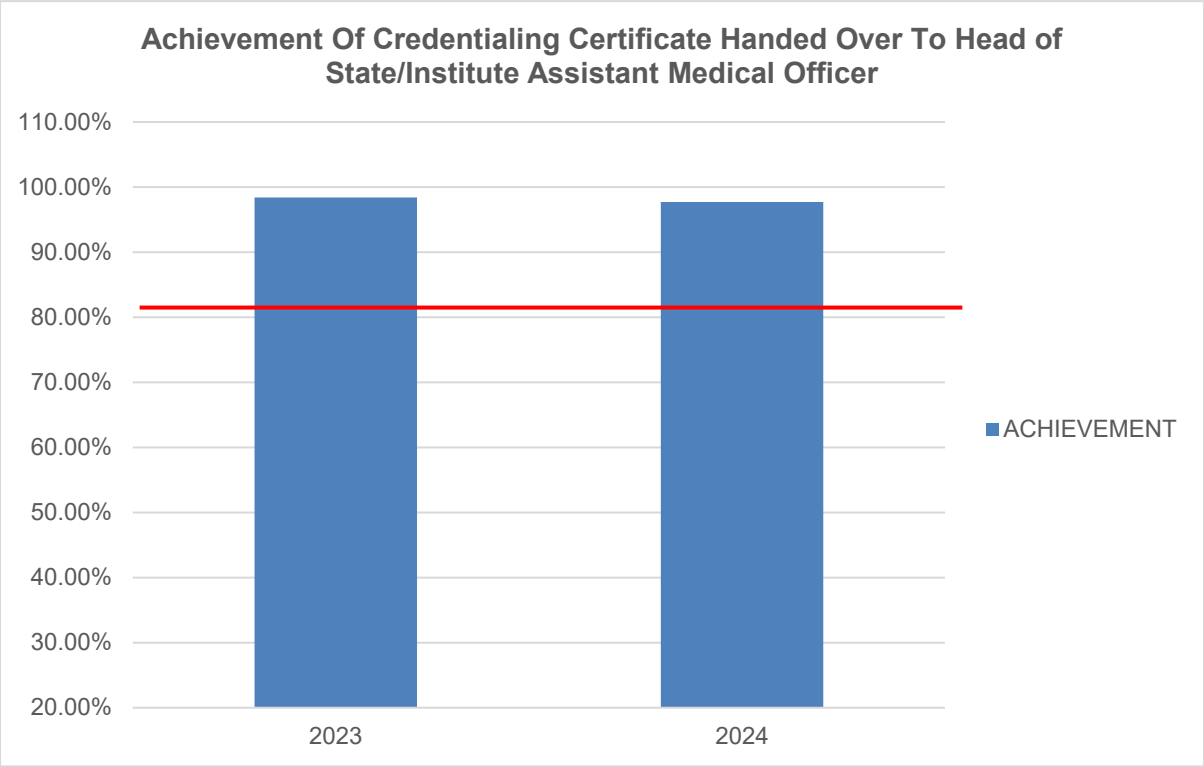


Chart 6.4: The bar chart showed Achievement of Credentialing Certificate Handed Over to Head of State/Institute Assistant Medical Officer in the year 2024 was achieved.

Table 6.4.5: Percentage, numerator and denominator of the Achievement of Credentialing Certificate Handed Over to Head of State/Institute Assistant Medical Officer in the year 2024.

Year	Total Certificate (N)	Total New Application Approved in NCC (D)	Target	Achievement (%)
2023	305	310	≧ 80%	**98.39%**
2024	759	777	≧ 80%	**97.68%**

Table 6.4.6: Total of Approved Credentialing Applications for Assistant Medical Officers (Medical) in 2024

STATE	EMTS	PERI OPERATIVE	HAEMO DIALYSIS	PHC SERVICES	ANAES THESIA	PERI-ANAES THESIA	INTENSIVE CARE	ORTHO PAEDICS SERVICES	CARDIO VASCULAR PERFUSION	ENDOSCOPY SERVICES	PERI-ANAESTHESIA CARE (P.A.C)	CIRCUMCISION (DORSAL SLIT TECHNIQUE)	TOTAL
PERLIS	10	0	0	5	0	1	5	5	0	0	0	1	**29**
KEDAH	23	0	10	3	0	2	3	4	0	8	0	1	**55**
PULAU PINANG	18	0	3	6	0	2	1	2	3	1	0	6	**44**
PERAK	33	1	9	4	0	3	1	10	0	3	0	14	**84**
HOSPITAL KUALA LUMPUR	0	0	5	2	0	8	5	4	0	0	0	9	**41**
JKWPKL & PUTRAJAYA	7	0	0	3	0	4	3	0	0	0	0	1	**18**
SELANGOR	26	0	5	10	0	12	1	10	2	3	0	5	**81**
NEGERI SEMBILAN	17	0	4	1	0	1	1	6	0	0	0	0	**34**
MELAKA	3	0	4	0	0	4	7	0	0	1	0	0	**24**
JOHOR	6	4	4	2	0	2	1	0	3	1	0	9	**34**
PAHANG	22	0	13	1	0	0	0	6	1	4	0	0	**47**
TERENGGANU	11	0	6	1	0	8	2	1	0	1	0	2	**32**
KELANTAN	18	0	4	3	0	6	2	0	0	1	0	15	**50**
SARAWAK	27	0	9	7	34	0	1	11	2	0	0	17	**114**
SABAH	19	0	28	7	23	0	1	1	0	0	0	5	**84**
JKWP LABUAN	6	0	0	0	0	0	0	0	0	0	0	0	**6**

Table 6.4.6: Credentialing & Privileging activities of Assistant Medical Officers in Public Health in 2024

NO	LIST OF PROCEDURES	STATES															TOTAL
		PLS	KDH	PNG	PRK	JKWPKL & PJY	SGR	NSN	MLK	JHR	PHG	TRG	KTN	SWK	SBH	JKWP LBN	
1	Airway Management and Intubation Procedure for Assistant Medical Officer	0	0	0	0	0	0	0	12	0	0	0	0	0	3	0	**15**
2	Circumcision (Non -medical related)	0	0	5	49	0	0	0	72	8	25	8	9	38	11	0	**225**
3	Spirometry Test Procedure and Basic Interpretation for Assistant Medical Officer and Trained Nurses in Health Clinics	0	0	0	0	1	0	0	0	0	0	0	1	0	2	0	**4**
4	Audiometry Test for Adult Patients for Paramedics in Primary Healthcare Facilities	0	0	0	2	1	0	0	0	2	11	10	0	0	0	2	**28**
5	Eye Examination Using Fundus Camera, Fundus Photo Interpretation, and Diabetic Retinopathy Grading	11	30	6	38	16	79	24	42	51	0	3	36	69	4	0	**409**
6	Integrated Management of Childhood Illness (IMCI)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**0**
7	Initiation of Treatment for New Sputum-Positive Tuberculosis Cases (Sabah & Sarawak Only)	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0	**3**
8	Skin Slit Smear Procedure for Leprosy Patients	0	0	0	0	0	0	0	0	0	0	0	0	2	1	0	**3**
9	Nasopharyngeal and Oropharyngeal Swab Procedures for Assistant Medical Officer and Nurses in Primary Healthcare Facilities	0	17	0	6	0	9	0	0	4	0	0	0	0	0	0	**36**
10	Wound Care Management Procedure for Medical Assistants and Trained Nurses	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0	**3**
TOTAL		**11**	**47**	**11**	**95**	**18**	**88**	**24**	**126**	**65**	**36**	**21**	**46**	**115**	**21**	**2**	**726**

ii) Compulsory Placement Program

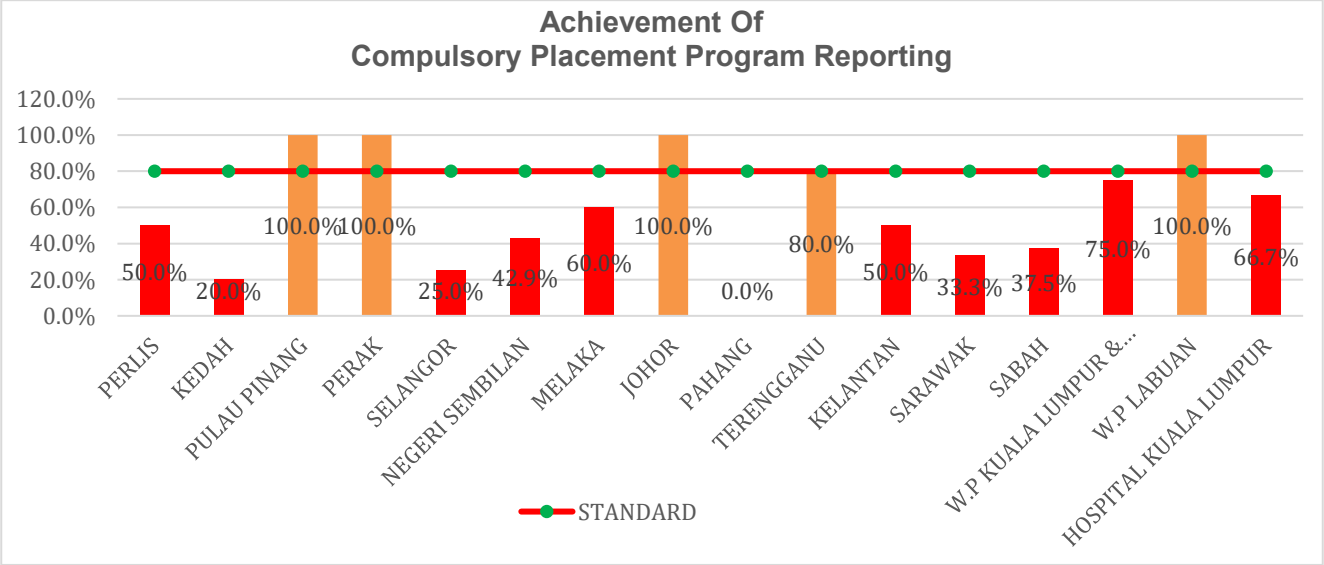


Chart 6.5: The bar chart showed the achievement of Compulsory Placement Program Reporting in the year 2024.

Table 6.4.7: Table of Achievement PPW's by State

NO.	STATES	STANDARD	NUMERATOR (N)	DENOMINATOR (D)	RATE (%)
1.	**Perlis**	**80%**	**1**	**2**	**50.0%**
2.	**Kedah**	**80%**	**1**	**5**	**20.0%**
3.	Pulau Pinang	80%	2	2	100.0%
4.	Perak	80%	4	4	100.0%
5.	**Selangor**	**80%**	**3**	**12**	**25.0%**
6.	**Negeri Sembilan**	**80%**	**3**	**7**	**42.9%**
7.	**Melaka**	**80%**	**3**	**5**	**60.0%**
8.	Johor	80%	4	4	100.0%
9.	**Pahang**	**80%**	**0**	**5**	**0.0%**
10.	**Terengganu**	**80%**	**4**	**5**	**80.0%**
11.	**Kelantan**	**80%**	**3**	**6**	**50.0%**
12.	**Sarawak**	**80%**	**1**	**3**	**33.3%**
13.	**Sabah**	**80%**	**3**	**8**	**37.5%**
14.	**W.P Kuala Lumpur & Putrajaya**	**80%**	**3**	**4**	**75.0%**
15.	W.P Labuan	80%	1	1	100.0%
16.	**Hospital Kuala Lumpur**	**80%**	**2**	**3**	**66.7%**
TOTAL			**38**	**76**	**50.00%**

iii) PEFR Implementation

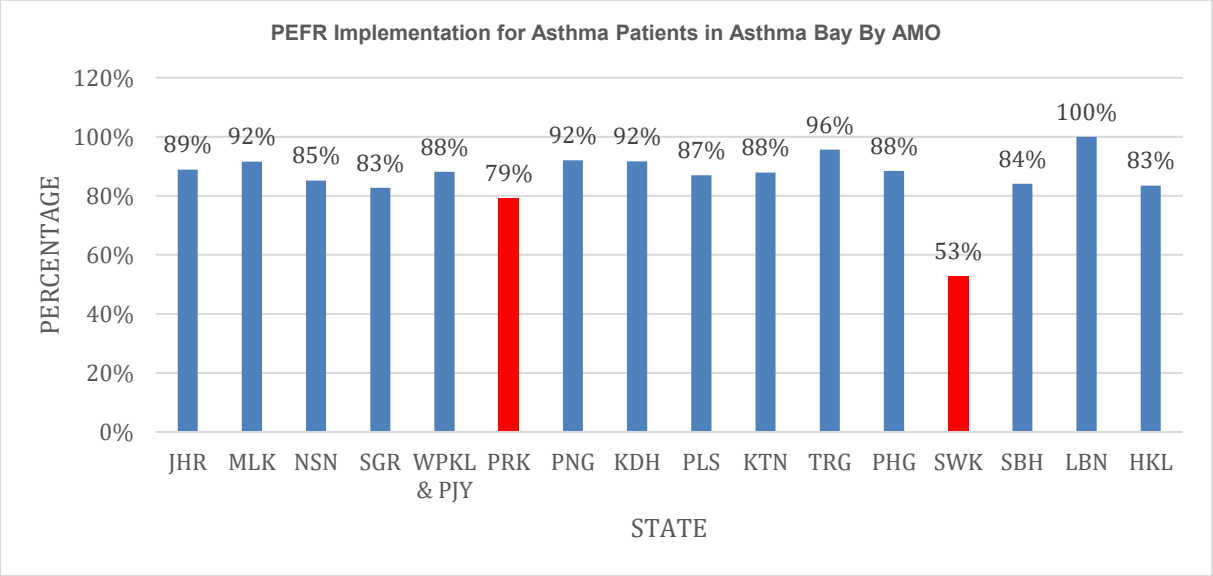


Chart 6.6: The bar chart above is about percentage of PEFR implementation by AMOs for mild asthma patients.

Table 6.4.8: Numerator and Denominator of PEFR Implementation by AMOs for Mild Asthma Patients (2024).

NO	STATE	STANDARD	NUMERATOR (N)	DENOMINATOR (D)	PERCENTAGE (%)
1	JOHOR	80%	23,032	25,919	
2	MELAKA	80%	6,754	7,376	
3	NEGERI SEMBILAN	80%	5,906	6,936	
4	SELANGOR	80%	13,359	16,153	
5	WILAYAH PERSEKUTUAN KUALA LUMPUR & PUTRAJAYA	80%	1,142	1,296	
6	PERAK	80%	14,161	20,276	
7	PULAU PINANG	80%	13,901	15,101	
8	KEDAH	80%	13,997	15,271	
9	PERLIS	80%	3,526	4,056	
10	KELANTAN	80%	14,198	16,156	
11	TERENGGANU	80%	3,803	3,978	
12	PAHANG	80%	17,258	19,519	
13	SARAWAK	80%	6,444	12,229	
14	SABAH	80%	14,525	17,284	
15	WILAYAH PERSEKUTUAN LABUAN	80%	1,153	1,153	
16	HOSPITAL KUALA LUMPUR	80%	4,563	5,466	
17	INSTITUT PERUBATAN RESPIRATORI	80%	0	0	
18	INSTITUT KANSER NEGARA	80%	0	0	
	TOTAL		**157,722**	**188,169**	

iv) Triage Care

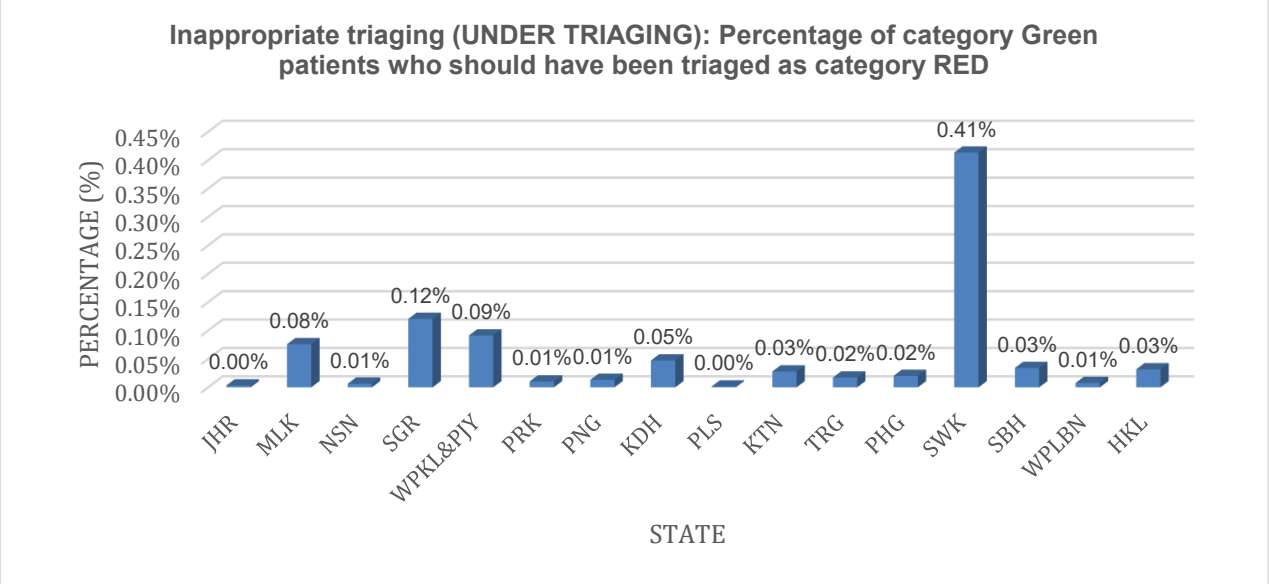


Chart 6.7: The bar chart above showed percentage of red zone patients who have been triaged to the green zone (under triage).

Table 6.4.9: Numerator and Denominator of Under Triage Cases by State (2024).

NO	STATE	STANDARD	NUMERATOR (N)	DENOMINATOR (D)	PERCENTAGE (%)
1	PERLIS	≤0.5%	0	67795	0.00%
2	KEDAH	≤0.5%	234	311360	0.08%
3	PULAU PINANG	≤0.5%	41	268908	0.02%
4	PERAK	≤0.5%	75	369301	0.02%
5	JKWPKL & PUTRAJAYA	≤0.5%	41	42542	0.10%
6	SELANGOR	≤0.5%	417	564713	0.07%
7	NEGERI SEMBILAN	≤0.5%	10	133210	0.01%
8	MELAKA	≤0.5%	57	114574	0.05%
9	JOHOR	≤0.5%	7	499281	0.00%
10	PAHANG	≤0.5%	61	269638	0.02%
11	TERENGGANU	≤0.5%	35	163260	0.02%
12	KELANTAN	≤0.5%	68	219807	0.03%
13	SARAWAK	≤0.5%	232	373516	0.06%
14	SABAH	≤0.5%	221	514467	0.04%
15	JKWP LABUAN	≤0.5%	1	26189	0.00%
16	HOSP. KUALA LUMPUR	≤0.5%	78	93573	0.08%
17	IKN (INSTITUT KANSER NEGARA)	≤0.5%	0	0	0
18	IPR (INSTITUT PERUBATAN RESPIRATORI)	≤0.5%	0	0	0
	TOTAL		**2,231**	**339,8405**	

v) Pre- Hospital Care & Ambulance Services

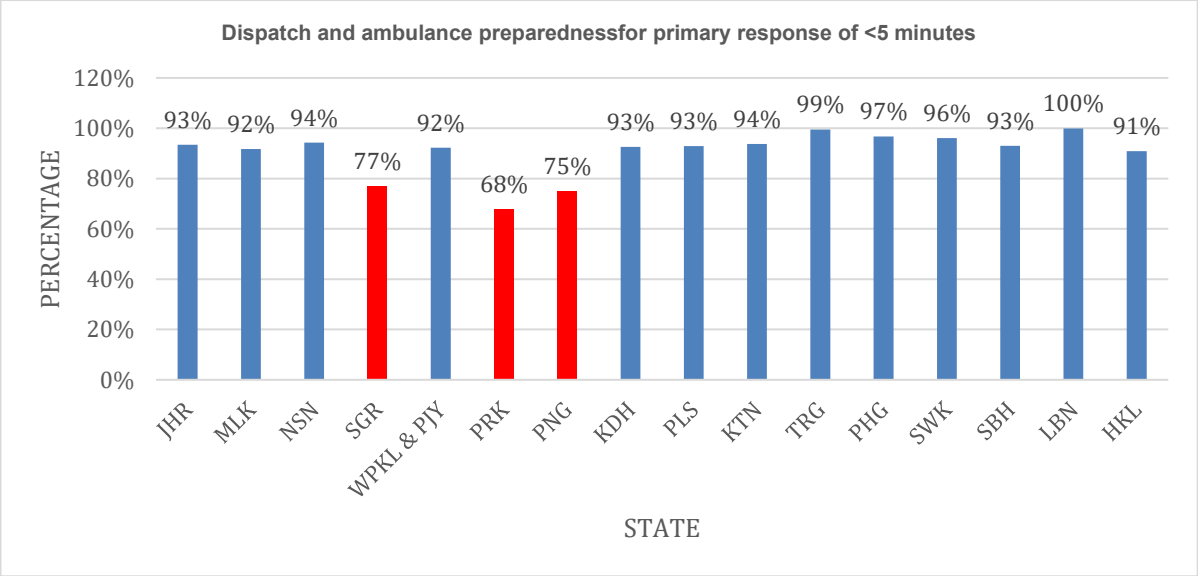


Chart 6.8: The bar chart above showed percentage of dispatch and ambulance preparedness for primary response of less than 5 minutes.

Table 6.4.10: Response Cases More <5 minutes by State (2024).

NO	STATE	STANDARD	NUMERATOR (N)	DENOMINATOR (D)	PERCENTAGE (%)
1	JOHOR	90%	26,674	28,519	93.53%
2	MELAKA	90%	8,623	9,045	95.33%
3	NEGERI SEMBILAN	90%	10,268	10,849	94.64%
4	SELANGOR	90%	16,172	23,504	68.81%
5	WILAYAH PERSEKUTUAN KUALA LUMPUR & PUTRAJAYA	90%	2,429	2,611	93.03%
6	PERAK	90%	18,398	27,819	66.13%
7	PULAU PINANG	90%	20,935	24,625	85.02%
8	KEDAH	90%	16,260	17,252	94.25%
9	PERLIS	90%	4,148	4,477	92.65%
10	KELANTAN	90%	5,199	5,626	92.41%
11	TERENGGANU	90%	4,290	4,329	99.10%
12	PAHANG	90%	10,169	10,570	96.21%
13	SARAWAK	90%	12,419	13,045	95.20%
14	SABAH	90%	11,905	12,260	97.10%
15	WILAYAH PERSEKUTUAN LABUAN	90%	1,348	1,348	100.00%
16	HOSPITAL KUALA LUMPUR	90%	21,607	23,868	90.53%
17	INSTITUT PERUBATAN RESPIRATORI	90%	0	0	0.00%
18	INSTITUT KANSER NEGARA	90%	0	0	0.00%
	TOTAL		**190,844**	**219,747**	86.85%

vi) Fire Safety Training

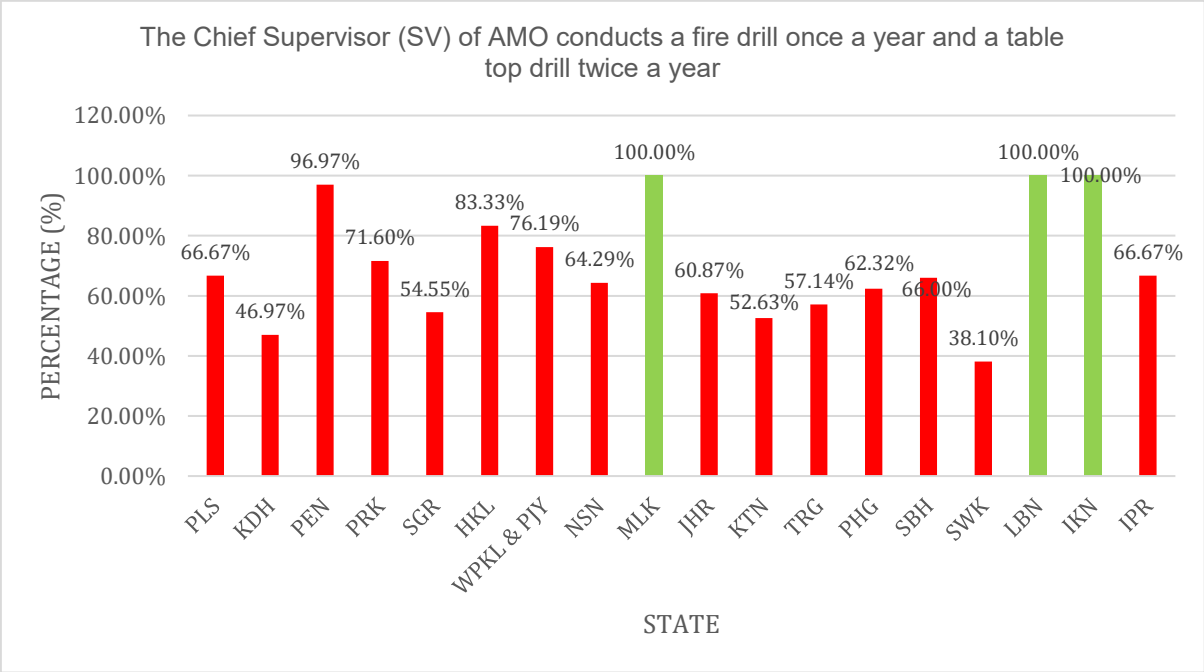


Chart 6.9: The bar chart above showed percentage of SV AMO conducts fire drill and table top in the 2024.

Table 6.4.11: Implementation of Fire Drill &Table Top (Medical) (2024)

BIL	STATE	NO. OF HOSPITAL	IMPLEMENTATION OF FIRE DRILL	IMPLEMENTATION OF TABLE TOP		NUMERATOR (N)	DENOMINATOR (D)	%
				FIRST	SECOND			
1	Perlis	**1**	1	1	0	**2**	**3**	**66.67**
2	Kedah	**10**	10	9	4	**23**	**30**	**76.67**
3	Pulau Pinang	**6**	6	6	6	**18**	**18**	**100.00**
4	Perak	**15**	15	14	12	**41**	**45**	**91.11**
5	Selangor	**13**	13	9	7	**31**	**39**	**79.49**
6	Kuala Lumpur	**2**	2	2	1	**5**	**6**	**83.33**
7	Federal Territory of Kuala Lumpur & Putrajaya	**2**	2	2	2	**6**	**6**	**100.00**
8	Negeri Sembilan	**7**	7	7	6	**20**	**21**	**95.24**
9	Melaka	**3**	3	3	3	**3**	**3**	**100.00**
10	Johor	**12**	12	11	2	**25**	**36**	**69.44**
11	Kelantan	**9**	9	9	6	**24**	**27**	**88.89**
12	Terengganu	**6**	6	6	4	**16**	**18**	**88.89**
13	Pahang	**12**	12	11	7	**30**	**36**	**83.33**
14	Sabah	**24**	24	23	17	**64**	**72**	**88.89**
15	Sarawak	**23**	23	18	9	**52**	**69**	**75.36**
16	Federal Territory of Labuan	**1**	1	1	1	**3**	**3**	**100.00**
17	National Institute of Health (IKN)	**1**	1	1	1	**3**	**3**	**100.00**
18	Institute of Respiratory Medicine (IPR)	**1**	1	1	0	**2**	**3**	**66.67**
TOTAL		**148**	148	136	90	**374**	**444**	**84.23**

.

Table 6.4.12: Implementation of Fire Drill &Table Top Primary (Public Health) (2024)

BIL	STATE	NO. OF HOSPITAL	IMPLEMENTATION OF FIRE DRILL	IMPLEMENTATION OF TABLE TOP		NUMERATOR (N)	DENOMINATOR (D)	%
				FIRST	SECOND			
1	Perlis	**1**	1	1	0	**2**	**3**	**66.67**
2	Kedah	**12**	7	1	0	**8**	**36**	**22.22**
3	Pulau Pinang	**5**	5	5	4	**14**	**15**	**93.33**
4	Perak	**12**	11	5	1	**17**	**36**	**47.22**
5	Selangor	**9**	4	1	0	**5**	**27**	**18.52**
7	Federal Territory of Kuala Lumpur & Putrajaya	**5**	4	3	3	**10**	**15**	**66.67**
8	Negeri Sembilan	**7**	3	2	2	**7**	**21**	**33.33**
9	Melaka	**3**	3	3	3	**9**	**9**	**100.00**
10	Johor	**11**	11	5	1	**17**	**33**	**51.52**
11	Kelantan	**10**	3	2	1	**6**	**30**	**20.00**
12	Terengganu	**8**	5	3	0	**8**	**24**	**33.33**
13	Pahang	**11**	7	6	0	**13**	**33**	**39.39**
14	Sabah	**26**	16	13	6	**35**	**78**	**44.87**
15	Sarawak	**33**	8	4	0	**12**	**99**	**12.12**
TOTAL		**148**	88	54	21	163	459	**84.23**

vii) Primary Health Care

Table 6.4.13: Achievement of Key Performance Indicators (KPI) For Assistant Medical Officer Services: Screening of Adolescent Health Status by Assistant Medical Officers for Health Clinics Recognized as Best Practice Adolescent-Friendly Health Services (PKMR) For The Year 2024

STATE	ACHIEVEMENT						
	The total population of adolescents in all areas covered by health clinics - best practice PKMR	The annual target for adolescent screenings in all areas covered by the best practice PKMR health clinics is based on the target for integrated screening services at health clinics (5%)	The annual target for adolescent screenings in all areas covered by the PKMR best practice health clinics based on the PPP Service KPI (>2.5%)	The overall achievement of adolescent screening involves the best practice health clinic PKMR		The overall achievement of adolescent interventions involves the best practice health clinic PKMR	
				a. The number of screened teenagers	b. Percentage of adolescent screening achievement (%)	a. The number of teenagers underwent intervention	b. Percentage of adolescent intervention achievement (%)
Perlis	6,466	323	162	331	100%	331	100%
Kedah	19,654	983	491	893	100%	137	15.34%
Pulau Pinang	71,619	3,581	1,790	3,474	100%	3,474	100%
Perak	49,922	2,496	1,205	3,316	100%	2,495	75.24%
Selangor	69,078	3,454	1,727	2,152	100%	2,152	100%
Kuala Lumpur & Putrajaya	177,095	8,854	4,427	4,537	100%	2,326	100%

Negeri Sembilan	83,653	4,183	2,091	3,323	100%	3,323	100%
Melaka	28,359	1,417	708	1,639	100%	1,639	100%
Johor	8,409	420	210	376	100%	376	100%
Kelantan	24,361	1,218	609	1,221	100%	1,221	100%
Terengganu	21,014	1,051	526	1,240	100%	1,240	100%
Pahang	39,076	1,934	977	1,477	100%	1,477	100%
Sabah	92,853	4,643	2,321	5,060	100%	5,060	100%
Sarawak	42,976	2,149	1,074	5,986	100%	5,970	99.73%
Labuan	17,800	890	445	801	100%	801	100%
TOTAL	**752,335**	**37,596**	**18,763**	**35,826**	**100%**	**32,022**	**89.38%**

Reasons the intervention did not meet its target (SIQ):

● Shortage of trained PPP in the involved health facilities because some have not undergone Basic Health and Adolescent Counseling Training (refer to the Guidelines for Implementing Adolescent Health Services at the Primary Health Level, Third Edition 2011) or the HEADSS Course (refer to Engaging the Adolescent Module Using HEADSS Framework, 2009), and some are undergoing the Advanced Diploma Course at ILMOH for one year.

● The client does not want to continue the intervention process.

Table 6.4.14: The Workload of Assistant Medical Officer in Primary Healthcare Facilities for The Year 2024

HEALTH FACILITIES	NUMBER OF PPP AT JPL (ACCORDING TO JIK 2024)	NUMBER OF CASES EXAMINED AT JPL	OFFICE HOURS	UTSIDE OFFICE HOURS	NUMBER OF CASES SEEN BY PPP OUTSIDE THE CLINIC	PROCEDURE PERFORMED BY PPP				
						SURGICAL PROCEDURE	DIAGNOSTIC TESTS	PROCEDURES TREATMENT	INJECTION AND PHLEBOTOMY	TOTAL
Perlis	101	450,171	50,213	5,368	8,626	7,716	57,713	42,261	50,303	157,993
Kedah	265	294,394	46,336	2,025	4,698	6,262	75,557	38,078	43,544	163,441
Perak	402	4,229,187	878,480	121,366	87,712	89,291	1,622,584	836,896	1,017,078	3,565,849
Pulau Pinang	193	4,171,457	795,721	20,674	42,189	63,4 39	899,178	513,273	965,062	2,440,951
Kuala Lumpur & Putrajaya	193	204,491	52,508	3,543	512	1,180	115,785	12,369	29,883	159,217
Selangor	408	5,832,742	932,382	35,920	147,399	152,823	2,814,612	991,407	2,058,901	6,017,743
Negeri 9	252	2,219,876	219,498	32,490	28,981	64,907	491,857	280,117	534,321	1,371,202
Melaka	188	2,124,211	510,488	29,949	10,453	26,268	1,466,963	275,547	471,059	2,239,837
Johor	435	3,907,751	241,207	66,961	73,595	140,751	1,339,661	731,174	885,748	3,097,334
Pahang	374	5,705,076	993,024	192,528	187,680	240,612	2,534,352	959,796	1,243,044	4,977,804
Kelantan	365	3,723,732	470,627	101,466	53,810	81,652	753,067	505,335	801,464	2,141,518
Terengganu	321	2,054,420	599,137	69,801	32,852	42,874	569,288	260,448	498,408	1,371,018
Sarawak	715	3,960,229	1,421,131	121,354	43,888	76,568	1,545,587	448,154	862,913	2,933,222
Labuan	17	26,492	7,944	0	108	48	2,628	456	144	3,276
Sabah	423	2,463,429	603,995	67,097	41,693	58,320	467,868	281,352	457,476	1,265,016
Total	**4,652**	**41,367,658**	**7,822,691**	**870,542**	**764,196**	**1,052,711**	**14,756,700**	**6,176,663**	**9,919,348**	**31,905,421**

Health Status Screening Adolescent Category by Assistant Medical Officer

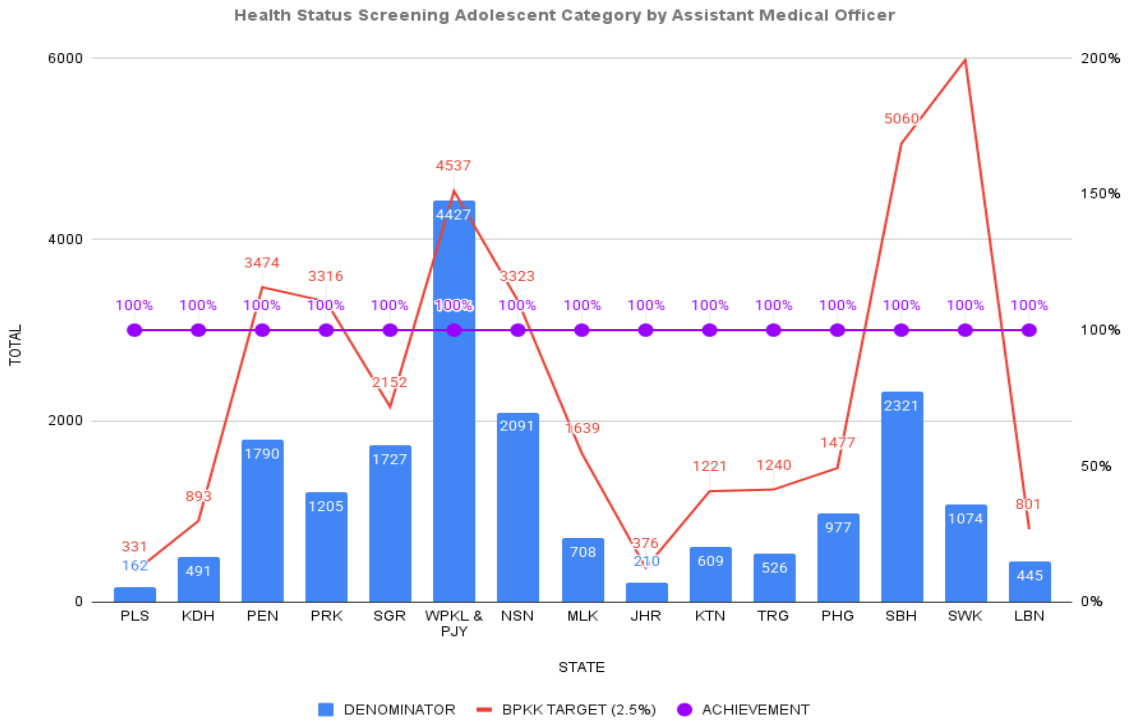


Chart 6.10: The bar chart above showed health status screening adolescent category by Assistant Medical Officer.

Intervention Performed by Assistant Medical Officer using BSSK/R P

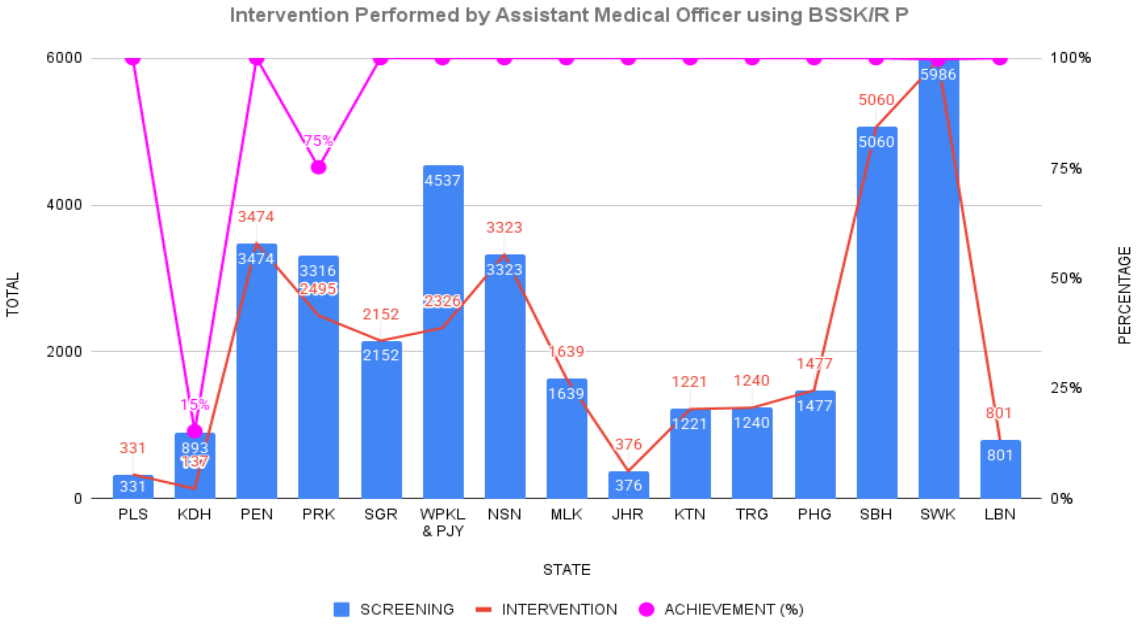


Chart 6.11: The bar chart above showed intervention performed by Assistant Medical Officer using BSSK/R P.

6.5 CLINICAL AUDIT REPORT

INTRODUCTION

6.5.1 There are 117 hospitals and 14 health clinics involved in the national clinical audit of Assistant Medical Officers for the year 2024, which was conducted from August 19, 2024, to September 19, 2024. The clinical audit consists of seven (7) activities, two (2) new activities: pre-hospital care & ambulance services and management of deceased bodies in the Forensic Department. These activities are subject to the existing Standard Operating Procedures (SOP) or Clinical Practice Guidelines (CPG) as a reference and guideline.

6.5.2 The activities audited are as follows:

i. Triage in the Emergency & Trauma Department.
ii. Asthma care in the Emergency & Trauma Department.
iii. Haemodialysis treatment via permanent vascular access in the Haemodialysis Unit.
iv. Plaster of Paris (POP) application in the Orthopaedic Department.
v. Infection control (hand hygiene and environmental) in the Emergency & Trauma Department and Haemodialysis Unit.
vi. Pre-hospital care and ambulance services.
vii. Management of deceased bodies in the Forensic Department.

Table 6.5.1: The total audit sample is based on the specialized services

ACTIVITIES	STATE HOSPITAL	MAJOR SPECIALIST HOSPITAL	MINOR / NON SPECIALIST HOSPITAL
Triage	50 Sample	30 Sample	20 Sample
Asthma care	20 Sample	10 Sample	10 Sample
Haemodialysis treatment	30 Sample	20 Sample	10 Sample
POP application	30 Sample	20 Sample	10 Sample
Infection control	30 Sample	20 Sample	10 Sample
Pre-hospital care and ambulance services	6 Sample	4 Sample	3 Sample
Management of deceased bodies	10 Sample	10 Sample	5 Sample

Table 6.5.2: Audit Schedule 2024 (Three-way Cross Audit among hospitals)

No.	Auditee	Auditors
1.	Tuanku Fauziah Hospital, Perlis	Sultanah Bahiyah Hospital, Kedah
2.	Hospitals in the state of Kedah	Three-way cross-audit among hospitals in the state of Kedah except for Sultan Abdul Halim Hospital, which will be audited by the Auditor team from Tuanku Fauziah Hospital, Perlis
3.	Kuala Lumpur Hospital	Tuanku Ja'afar Hospital, Seremban
4.	Putrajaya Hospital	Kuala Lumpur Hospital
5.	Hospitals in the state of Negeri Sembilan	Three-way cross-audit among hospitals in the state of Negeri Sembilan except for Tuanku Ja'afar Hospital, which will be audited by the Auditor team from Putrajaya Hospital
6.	Labuan Hospital	Sipitang Hospital, Sabah
7.	Hospitals in the state of Sabah	Three-way cross-audit among hospitals in the state of Sabah except for Beaufort Hospital, which will be audited by the Auditor team from Labuan Hospital
8.	Other hospitals in all states	Three-way cross-audit among hospitals within their respective states

Table 6.5.3: Work Process for Clinical Audit of Assistant Medical Officers, Ministry of Health Malaysia (MOH)

NO.	RESPONSIBLE OFFICER	WORK PROCESS	DURATION
i.	State Health Director	Issuing an appointment letter as State Chief Auditor to Assistant Medical Officers	1 day
ii.	State Coordinator & Chief Auditor	Conducting a meeting of the State Chief Auditor with the State Coordinators	1 day
iii.	State Chief Auditor & Auditors	Implementation of a state-wide cross-audit involving three different hospitals on an ad-hoc basis.	1-2 days
iv.	State Chief Auditor	Collecting audit findings and submitting them to the State Coordinator.	1-3 days
v.	State Coordinator for Clinical Audit Assistant Medical Officers	Preparation of state audit report	1-7 days
vi.	State Advisor for Clinical Audit Assistant Medical Officers	Review and verify the clinical audit report and send it to the Assistant Medical Officer Section, MOH.	1-2 days

vii.	National Chief Auditor	Receive and compile state audit reports and prepare for national reports	1-14 days
viii.	National Coordinator for Clinical Audit Assistant Medical Officers	Analyse and review the clinical audit report.	1-7 days
ix.	National Coordinator for Clinical Audit Assistant Medical Officers	Review the complete clinical audit report before bringing it to the annual achievement meeting.	1-2 days
x.	National Advisor for Clinical Audit Assistant Medical Officers	Approval of the National Annual Audit Report	1-2 days
xi.	National Chief Auditor	Publish in Annual Report of the Assistant Medical Officer Section, MOH	1-2 days

6.6 COMPARATIVE GRAPH AND PERFORMANCE OF THE NATIONAL-LEVEL CLINICAL AUDIT OF ASSISTANT MEDICAL OFFICERS IN THE MINISTRY OF HEALTH MALAYSIA BASED ON ACTIVITIES IN EACH STATE AND FEDERAL TERRITORY (2023 & 2024)

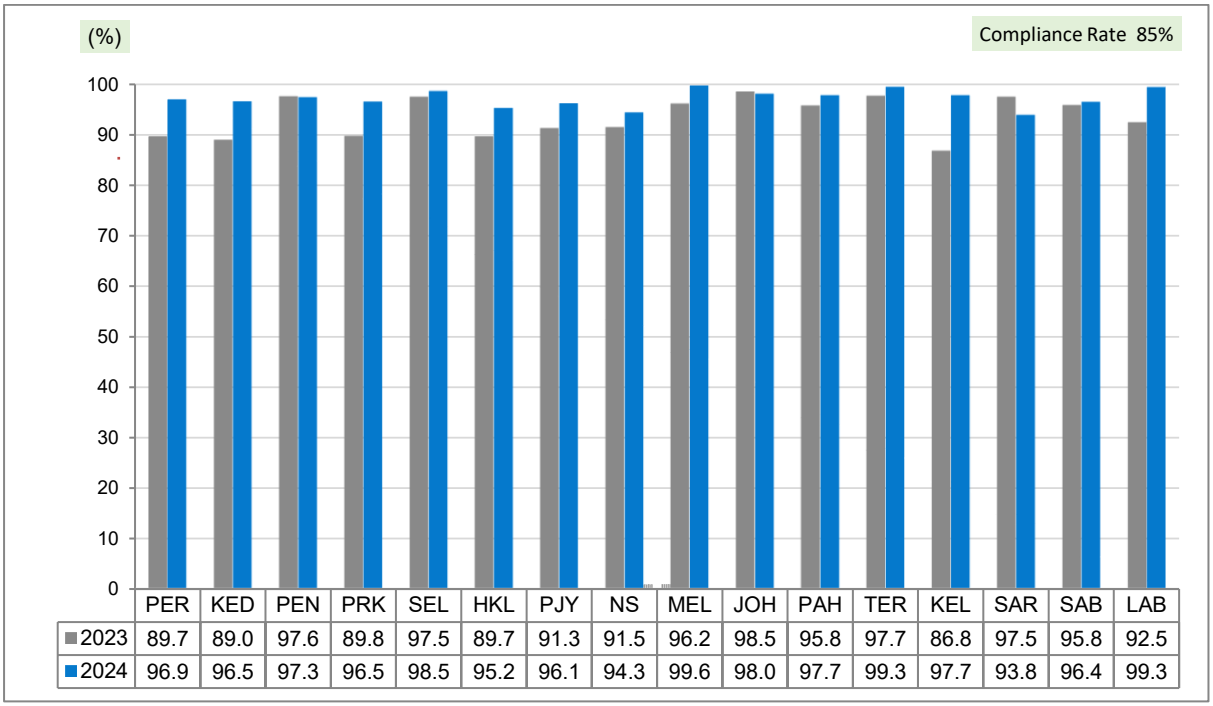
6.6.1 Triage in the Emergency & Trauma Department.



	PER	KED	PEN	PRK	SEL	HKL	PJY	NS	MEL	JOH	PAH	TER	KEL	SAR	SAB	LAB
2023	99.1	98.0	97.4	93.9	97.3	93.8	95.0	97.0	98.3	99.1	93.3	93.9	90.8	94.6	93.6	92.6
2024	95.0	98.0	99.4	94.1	91.5	99.1	99.0	97.2	99.6	99.0	95.3	99.0	97.7	93.4	96.1	92.6

Chart 6.6.1: National Clinical Audit of triage activity by state in Malaysia.

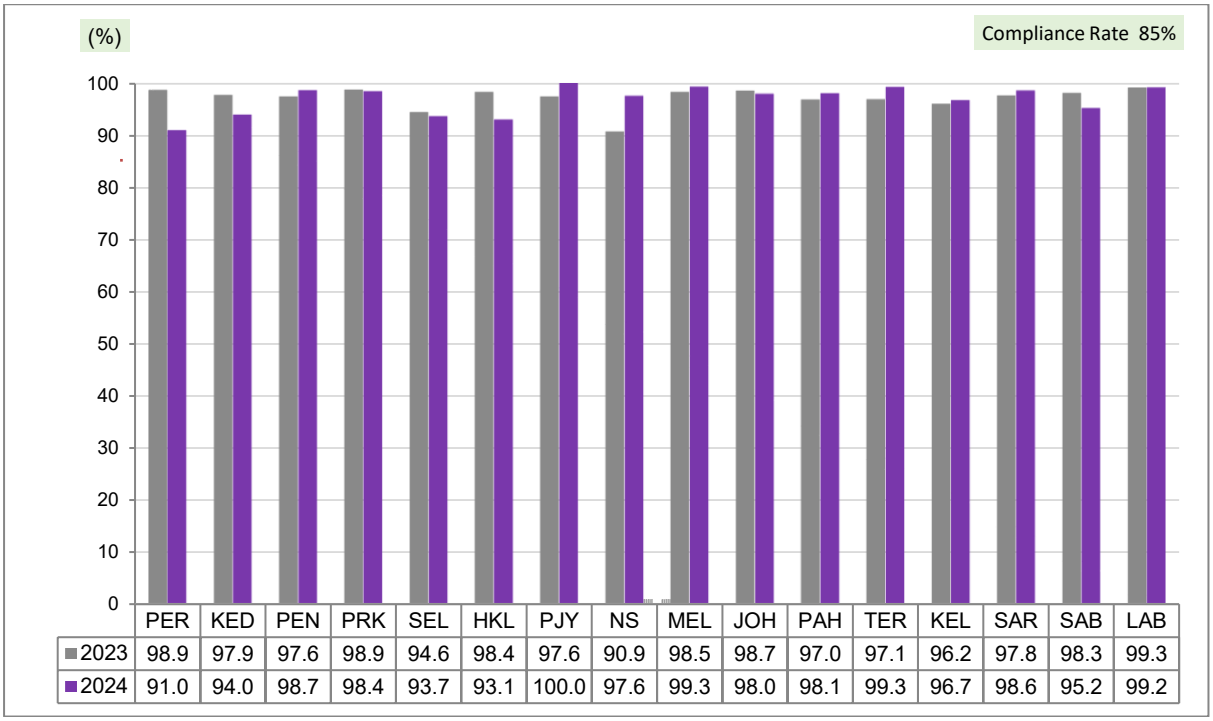
6.6.2 Asthma Care in the Emergency & Trauma Department.



	PER	KED	PEN	PRK	SEL	HKL	PJY	NS	MEL	JOH	PAH	TER	KEL	SAR	SAB	LAB
2023	89.7	89.0	97.6	89.8	97.5	89.7	91.3	91.5	96.2	98.5	95.8	97.7	86.8	97.5	95.8	92.5
2024	96.9	96.5	97.3	96.5	98.5	95.2	96.1	94.3	99.6	98.0	97.7	99.3	97.7	93.8	96.4	99.3

Chart 6.6.2: National Clinical Audit of asthma care activity by state in Malaysia.

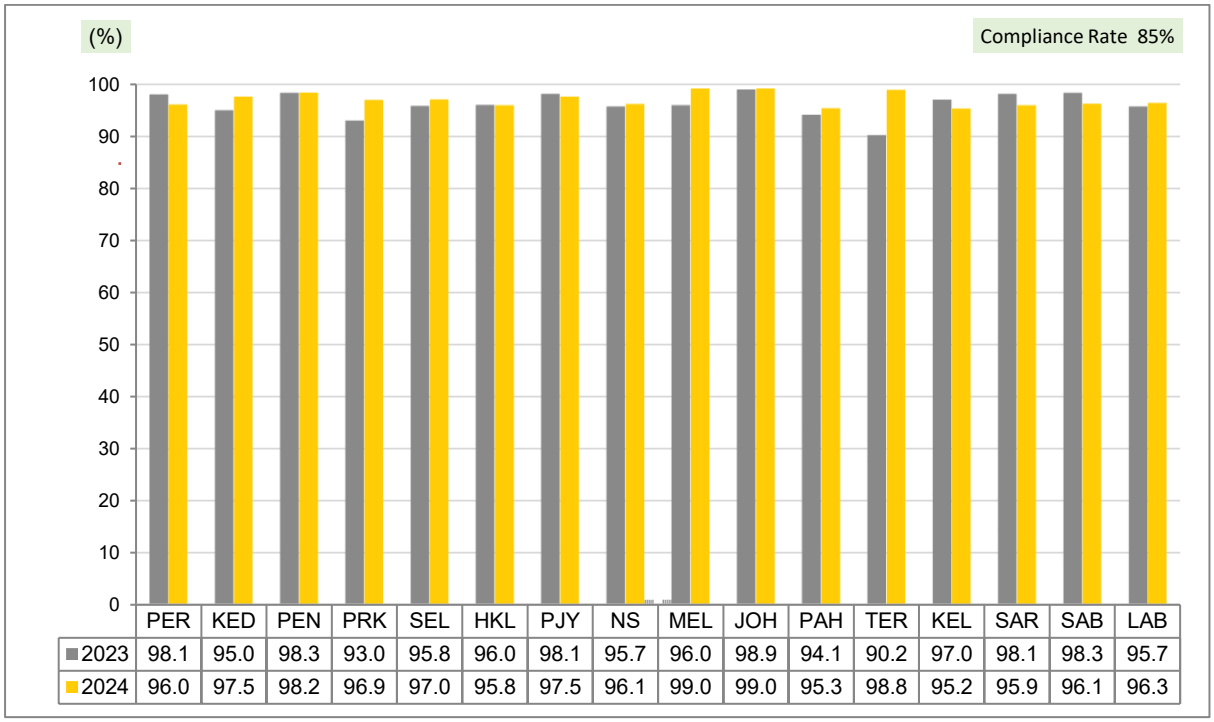
6.6.3 Haemodialysis treatment via permanent vascular access in the Haemodialysis Unit.



	PER	KED	PEN	PRK	SEL	HKL	PJY	NS	MEL	JOH	PAH	TER	KEL	SAR	SAB	LAB
2023	98.9	97.9	97.6	98.9	94.6	98.4	97.6	90.9	98.5	98.7	97.0	97.1	96.2	97.8	98.3	99.3
2024	91.0	94.0	98.7	98.4	93.7	93.1	100.0	97.6	99.3	98.0	98.1	99.3	96.7	98.6	95.2	99.2

Chart 6.6.3: National Clinical Audit of haemodialysis unit activity by state in Malaysia.

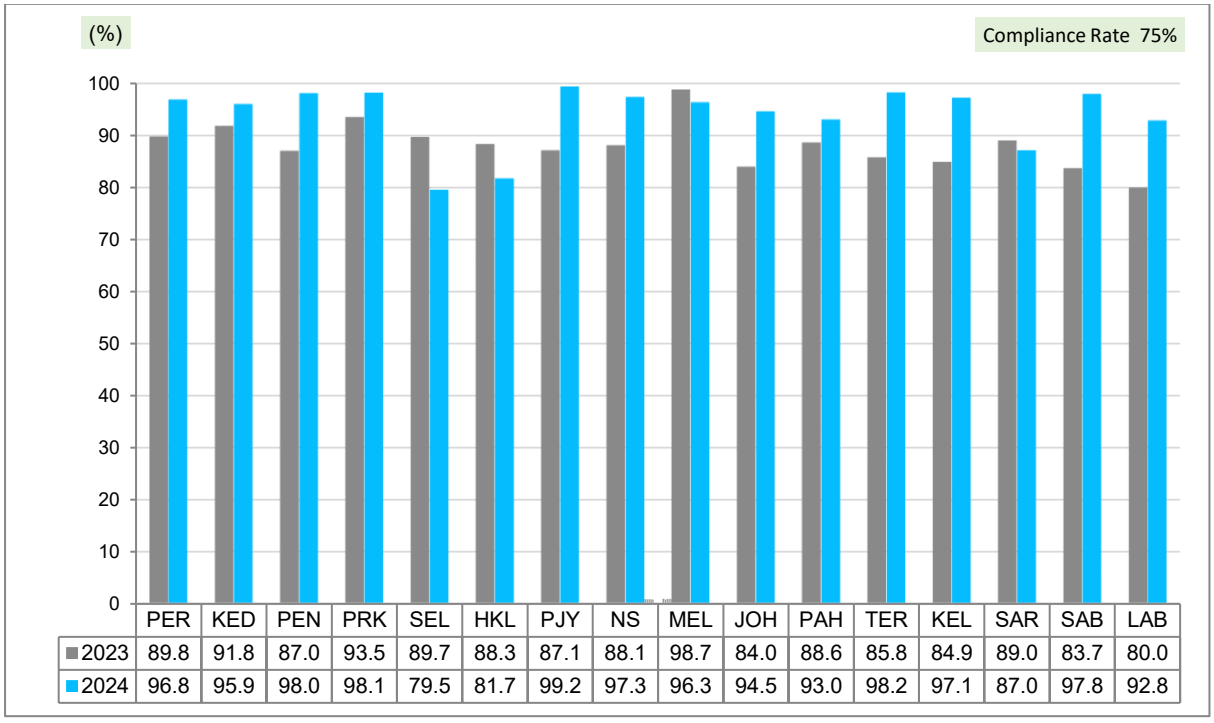
6.6.4 Plaster of Paris (POP) application in the Orthopaedic Department.



	PER	KED	PEN	PRK	SEL	HKL	PJY	NS	MEL	JOH	PAH	TER	KEL	SAR	SAB	LAB
2023	98.1	95.0	98.3	93.0	95.8	96.0	98.1	95.7	96.0	98.9	94.1	90.2	97.0	98.1	98.3	95.7
2024	96.0	97.5	98.2	96.9	97.0	95.8	97.5	96.1	99.0	99.0	95.3	98.8	95.2	95.9	96.1	96.3

Chart 6.6.4: National Clinical Audit of POP activity by state in Malaysia.

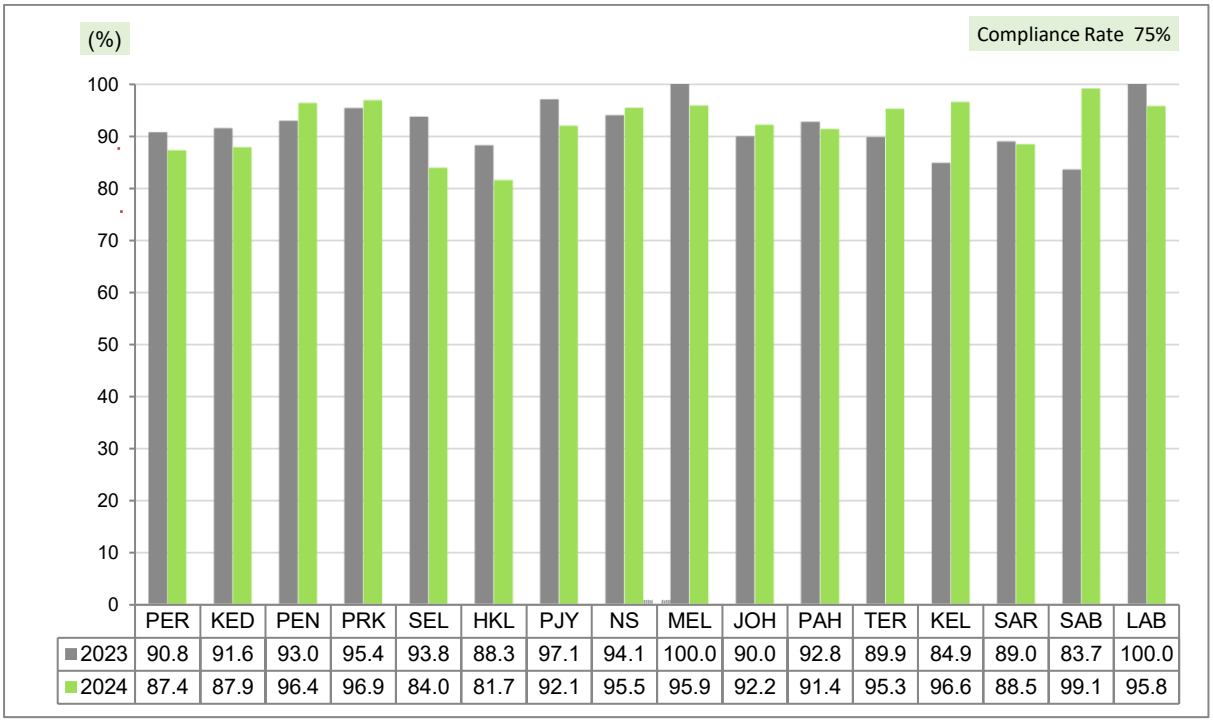
6.6.5 Infection Control (Hand Hygiene and Environmental) in ETD.



	PER	KED	PEN	PRK	SEL	HKL	PJY	NS	MEL	JOH	PAH	TER	KEL	SAR	SAB	LAB
2023	89.8	91.8	87.0	93.5	89.7	88.3	87.1	88.1	98.7	84.0	88.6	85.8	84.9	89.0	83.7	80.0
2024	96.8	95.9	98.0	98.1	79.5	81.7	99.2	97.3	96.3	94.5	93.0	98.2	97.1	87.0	97.8	92.8

Chart 6.6.5: National Clinical Audit of infection control activity in ETD by state in Malaysia.

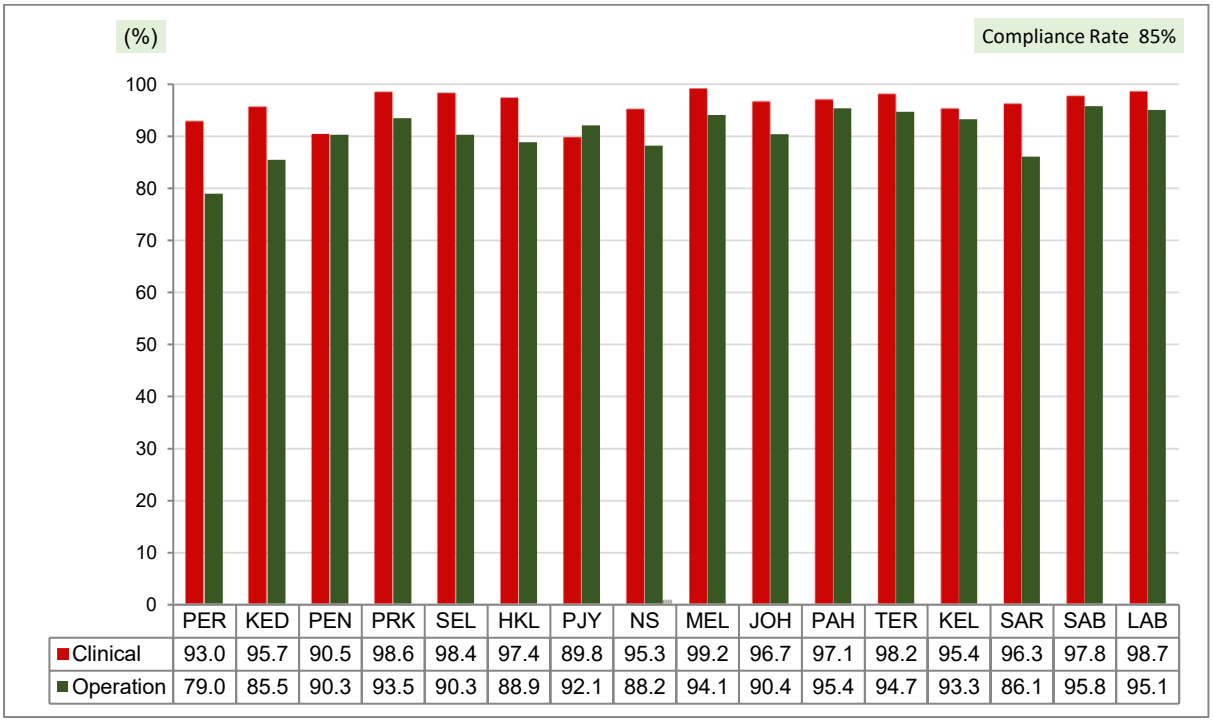
6.6.6 Infection Control (Hand Hygiene and Environmental) in HDU.



	PER	KED	PEN	PRK	SEL	HKL	PJY	NS	MEL	JOH	PAH	TER	KEL	SAR	SAB	LAB
2023	90.8	91.6	93.0	95.4	93.8	88.3	97.1	94.1	100.0	90.0	92.8	89.9	84.9	89.0	83.7	100.0
2024	87.4	87.9	96.4	96.9	84.0	81.7	92.1	95.5	95.9	92.2	91.4	95.3	96.6	88.5	99.1	95.8

Chart 6.6.6: National Clinical Audit of infection control activity in HDU by state in Malaysia.

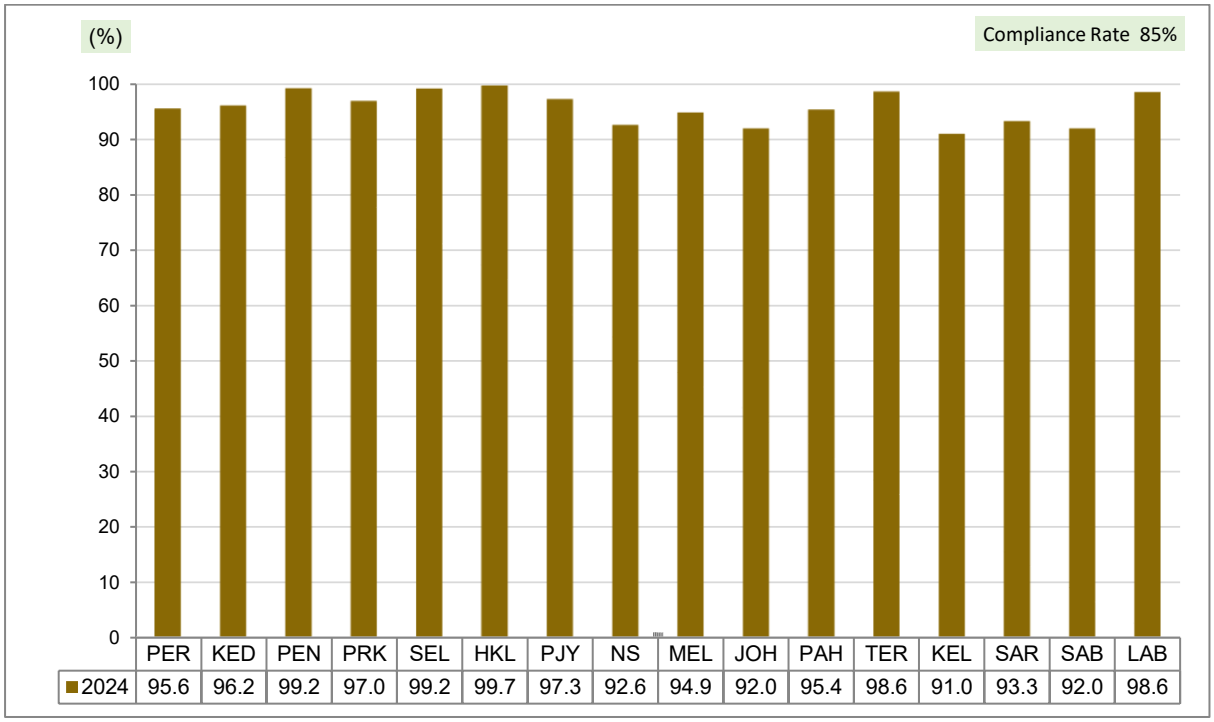
6.6.7 Pre Hospital care and ambulance services (PHC).



	PER	KED	PEN	PRK	SEL	HKL	PJY	NS	MEL	JOH	PAH	TER	KEL	SAR	SAB	LAB
Clinical	93.0	95.7	90.5	98.6	98.4	97.4	89.8	95.3	99.2	96.7	97.1	98.2	95.4	96.3	97.8	98.7
Operation	79.0	85.5	90.3	93.5	90.3	88.9	92.1	88.2	94.1	90.4	95.4	94.7	93.3	86.1	95.8	95.1

Chart 6.6.7: National Clinical Audit of PHC activity by state in Malaysia.

6.6.8 Management of deceased bodies in the Forensic Department.

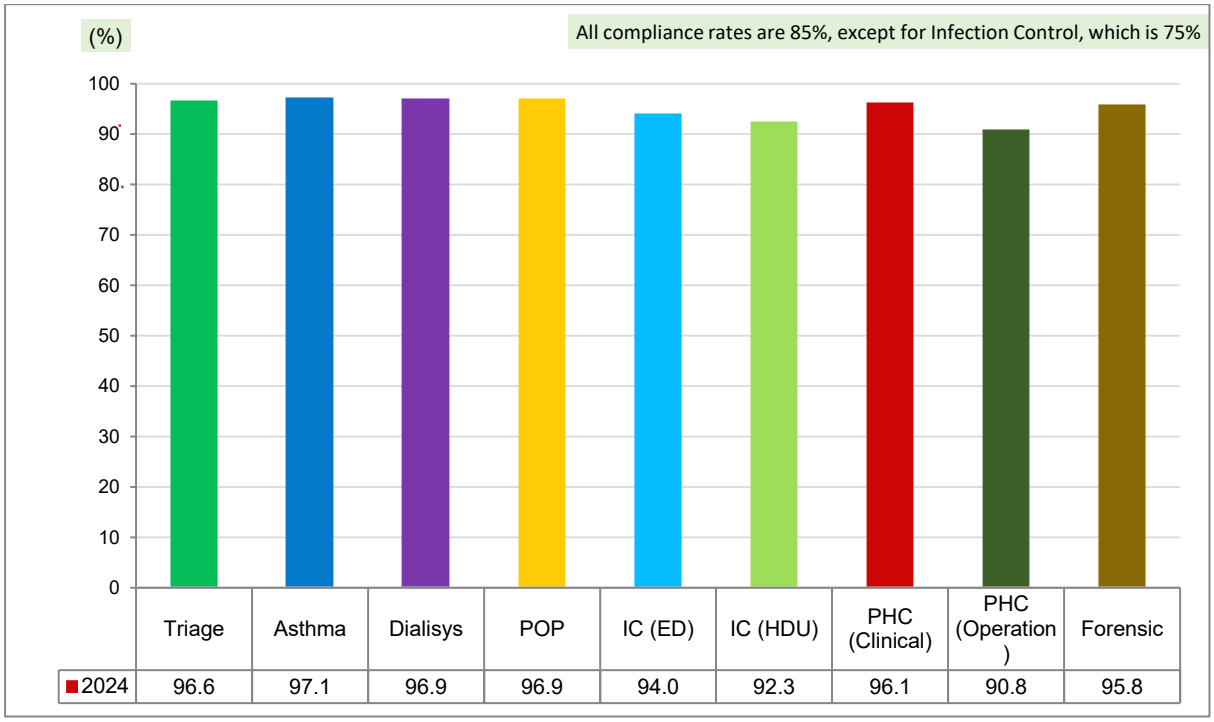


	PER	KED	PEN	PRK	SEL	HKL	PJY	NS	MEL	JOH	PAH	TER	KEL	SAR	SAB	LAB
2024	95.6	96.2	99.2	97.0	99.2	99.7	97.3	92.6	94.9	92.0	95.4	98.6	91.0	93.3	92.0	98.6

Chart 6.6.8: National Clinical Audit of forensic activity by state in Malaysia.

6.6.9 Overall Achievements for 2024.

The compliance rate for all disciplines is 85%, except for Infection Control, which is 75%.



	Triage	Asthma	Dialisys	POP	IC (ED)	IC (HDU)	PHC (Clinical)	PHC (Operation)	Forensic
2024	96.6	97.1	96.9	96.9	94.0	92.3	96.1	90.8	95.8

Chart 6.6.9: National Clinical Audit for overall activities achievement for 2024.

6.6.8 SUMMARY OF NATIONAL CLINICAL AUDIT 2024

Overall, all hospitals and clinics involved in the 2024 National Clinical Audit for Assistant Medical Officers across Malaysia have achieved the prescribed compliance rates, except for the ambulance service operations in Perlis, which recorded a compliance rate below the threshold at 79%. However, based on the graphical representation of the audit performance across various activities, the national-level compliance rate has been summarized as meeting the set benchmark, with all activities recording compliance rates exceeding 85%.

Additionally, weaknesses were identified among auditors who failed to fully understand the correct structure and methodology of the audit as required. Therefore, it is recommended that specific criteria and specialized training be implemented at both state and national levels.

Nonetheless, continuous improvements can be made at the state level through the proposed recommendations, necessitating the cooperation of all stakeholders to achieve the desired compliance rates in the future. The commitment of Assistant Medical Officers is crucial to ensuring that all procedures are adhered to and consistently practiced, rather than only being followed during audit periods.

7. FINANCIAL REPORT

Table 7.1: Receipts Report According to Receipts Classification Code Year 2024

No.	Receipt Type	Code Types	Total (RM)
1.	Registration As A Medical Assistant	71399A-LPP	41.600.00
2.	Duplicate Copy Of Registration Certificate	71399B- LPP	2,340.00
3.	Name Re-Entry Fee	71399C- LPP	100.00
4.	Medical Assistant Badge Replacement	71399D- LPP	135.00
5.	Registration Of Probationary Estate Hospital Assistant	71399E- LPP	2,000.00
6.	Registration Of Estate Assistant Grade I, II & III	71399F- LPP	250.00
7.	Renewing Annual Registration Certificate (Private)	71399G- LPP	50,620.00
8.	Second Copy ARC	71399H- LPP	0.00
9.	Estate Hospital Assistant Examination Grade I	72199A- LPP	1,350.00
10.	Estate Hospital Assistant Examination Grade II	72199B- LPP	1,500.00
11.	Estate Hospital Assistant Examination Grade III	72199C- LPP	1,800.00
12.	Late Fee – Renewing Certificate Of Registration	76111- LPP	44,400.00
13.	Medical Assistant Examination Board	72199- LPP	32,220.00
14.	Practical Training Fees for Private Colleges		180,800.00
	TOTAL		**359,115.00**

Table 7.2: Revenue Collection Year 2022, 2023 and 2024

YEAR	COLLECTION (RM)
2024	178,315.00
2023	118,744.40
2022	159,475.50

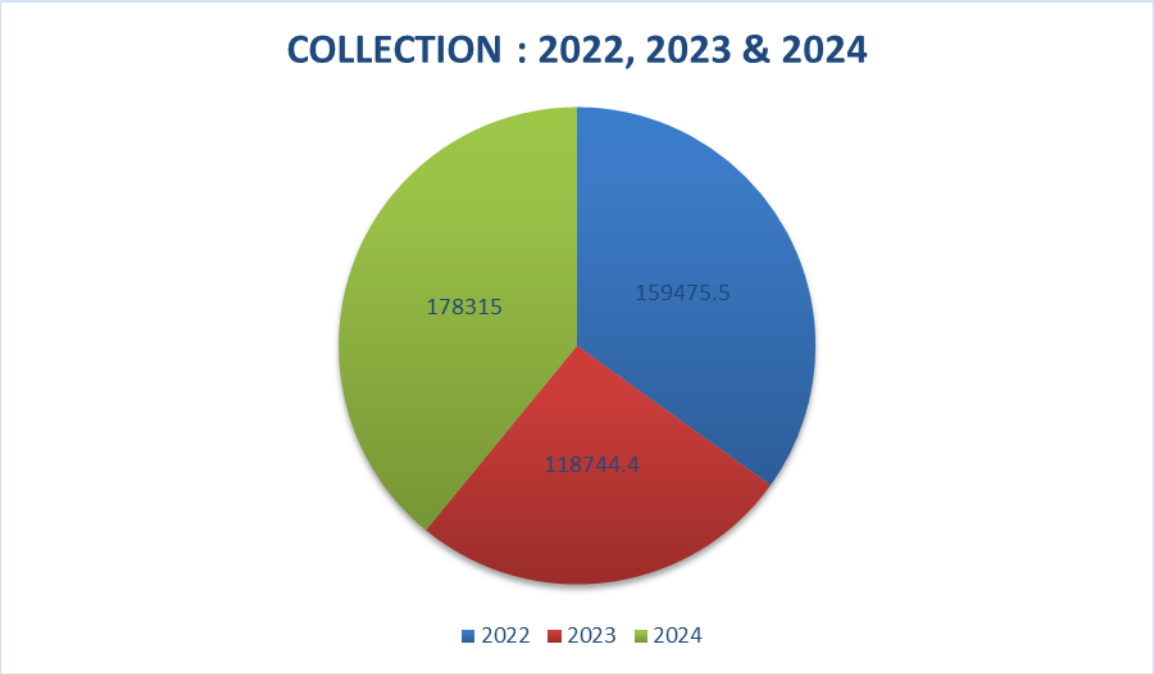


Figure 7.1: Revenue collection year 2022, 2023 and 2024.

Table 7.3: Expenditure Performance of In-Service Training (LDP) Year 2022, 2023 And 2024

Content	2022 (RM)	2023 (RM)	2024 (RM)
Total Allocation	143,165.00	139,906.50	313,822.60
Total Expenditure	134,419.75	138,865.26	313,822.60
Expenditure Performance	93.89%	99.26%	100.00%

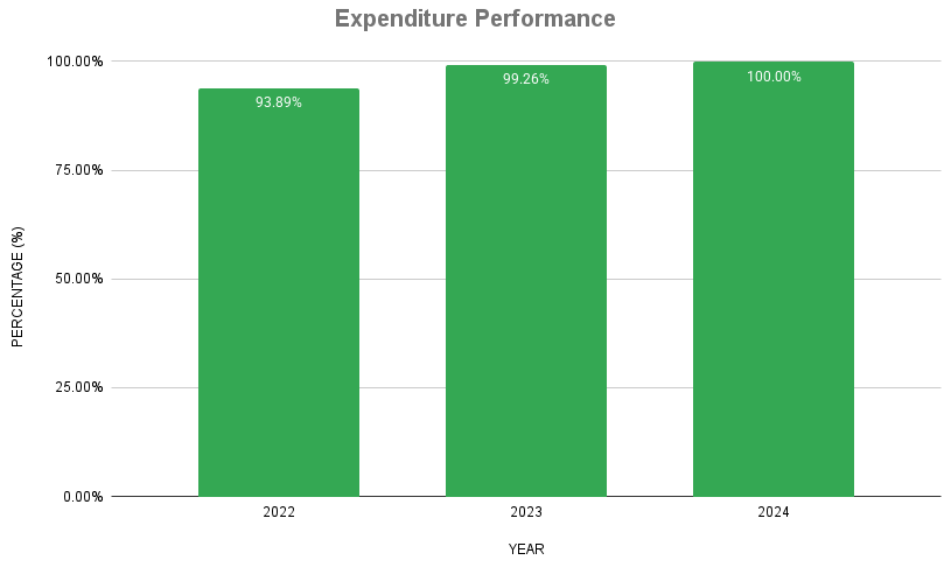


Figure 7.2: Expenditure Performance of In-Service Training (LDP) Year 2022, 2023 And 2024.

PROFESSIONAL DEVELOPMENT PLAN ASSISTANT MEDICAL OFFICER

6P

REPORT

REPORT OF THE STRATEGIC PLAN OF ASSISTANT MEDICAL OFFICER SERVICES, YEAR 2024)

SECTOR OF POLICY & STRATEGIC PLANNING

NO	INITIATIVE	ACHIEVEMENT
1.	Pillar 1, Strategy 1 and Initiative 1: Developing the proposal for the establishment of AMO Division at the Ministry of Health Malaysia	● Paper has been submitted to JPA by Human Resources Division MOH
2.	Pillar 3, Strategy 1 and Initiative 1: Establishing Flexible Post for AMO with specialized skills.	● An allocation of 2297 flexi post has been proposed to be Human Resources Division MOH
3.	Pillar 3, Strategy 4 and Initiative 1: Establishing a registration system for AMO research with a target of 10 research projects per year	The year 2024 was dedicated to the collection of research articles from Assistant Medical Officers (AMOs). To date, a total of 94 submissions have been received; however, these will undergo a rigorous review and evaluation process prior to publication. Future strategic plans involve the formal establishment of the Professional Journal and the inaugural publication of the selected articles.
4.	Pillar 3, Strategy 3 and Initiative 2: To establish the standard of AMO services under The Malaysia Society for Quality in Healthcare (MSQH)	● Standard has been develop known as Service Standard 25: Medical Assistant Services under The Malaysia Society for Quality in Healthcare (MSQH)

5.	Pillar 5, Strategy 1 and Initiative 1: Striving to achieve an ideal workforce that is highly skilled, Competent and meets the current service requirements (by 2020 target is 1:1150)	● Based on discussion with Health Planning Division MOH, the target ratio for the need of AMO in Malaysia by 2030 is 1:804 compared to Malaysian population
6.	Pillar 6, Strategy 1 and Initiative 1: Enhancing the international collaboration	● Accepting the responsibility as the Join secretariat with the Malaysia Medical Assistants Association for organizing the 3rd Global Association of Clinical Officers and Physician Associates (GACOPA) Conference in Malaysia.
7.	Strategy 3 and Initiative 2: Developing clinical auditing activities of AMO services in Public Health	● Public Health Assistant Medical Officers supervisory team has held preliminary discussions with representative Family Medicine Experts to identify the scope and methods of implementing the Clinical Audit. In principle the Family Health Specialist welcomes and agrees with this effort and hopes it can be implemented 2026.

SECTOR OF PROFESSIONAL DEVELOPMENT

NO	INITIATIVE	ACHIEVEMENT
1.	Pillar 1, Strategy 1, and Initiative 1: Revision of diploma curriculum with a focus on pre-hospital care, emergency and primary health care.	• The implementation of a new diploma curriculum, namely the Diploma in Medical and Health Sciences, was introduced in 2020, based on Outcome-Based Education (OBE) principles. In addition, the Bachelor in Medical and Health Sciences undergraduate programme has been made available at both public and private universities, including Open University Malaysia (OUM), Universiti Sultan Zainal Abidin (UniSZA), and Universiti Malaysia Sabah (UMS).
2.	Pillar 1, Strategy 1 and Initiative 2: Develop program guidelines for bachelor's and master's degree levels in public and private institutions.	• The Standards and Guidelines for Medical Assistant Education Program 3rd Edition 2018 are under review and are expected to be fully completed and will be release in early 2024.
3.	Pillar 1, Strategy 1 and Initiative 3: Increasing the number of Degree, Master and PhD holder 2019 – (10%/2%/0.5%) 2020 – (15%/3%/1%)	• Out of the 21,139 Assistant Medical Officers (AMOs) serving in the government sector in 2024, the proportion of Assistant Medical Officers (AMOs) holding higher academic qualifications remained specialized, with 4.07% (862) holding Degrees, 0.18% (38) with Master's degrees, and 0.01% (3) at the PhD level.
4.	Strategy 1 and Initiative 3: Increasing the number of Post Basic and Advanced Diploma 2019 – (35%) 2020 – (40%) 2021 - (45%) 2022 – (50%) 2023- 2024-	An analysis of recruitment and training data from 2019 to 2024 demonstrates the continuous commitment of Assistant Medical Officers (AMOs) toward Advanced Courses (Advanced Diploma/Post Basic), with the volume of applications consistently exceeding the available training capacity. • **2019:** A total of 974 applications were received, resulting in 668 successful offers and 618 candidates reporting for duty.

		• **2020:** For the March/May session, 470 applications were recorded with 300 candidates reporting for duty. • **2021:** The Ministry of Health (MOH) projected a training requirement for 592 AMOs to meet service demands. • **2022:** Post-pandemic demand saw a resurgence with 897 applications and 442 candidates reporting for duty. • **2023:** The upward trend remained steady with 898 applications and 702 candidates reporting for duty. • **2024:** A total of 830 applications were received, with 632 candidates successfully offered places for training. SOURCE: Training Management Division, MOH
5.	Pillar 5, Strategy 7 and Initiative 1: Application for new specialisation courses (Advanced Diploma program)	**High-Impact Specialisation Areas (Niche Areas), 2024** In 2024, application trends indicate an increasingly competitive landscape, particularly in critical clinical specialisation areas. Several programmes recorded high application volumes, reflecting strategic priorities in strengthening national healthcare services. **1. Advanced Diploma in Emergency Care** **Achievement:** Remained the most in-demand programme, with 189 applications received. Of these, 159 candidates were offered places, representing an offer rate of 84.1%. This reflects MOH's continued commitment to strengthening emergency and pre-hospital care services. **2. Post-Basic Certificate in Nephrology Care** **Achievement:** Emerging as one of the preferred programmes, with 92 applications received. A total of 79 candidates were offered places (85.8%), in line with the growing demand for haemodialysis services and the expansion of related facilities nationwide.

		3. Post-Basic Certificate in Wound Care **Achievement:** Recorded strong demand with 79 applications; however, only 35 candidates were offered places (44.3%). This significant gap highlights the high level of competition and existing capacity constraints in this increasingly critical field. **4. Post-Basic Certificate in Peri-Anaesthesia Care** **Achievement:** Remained relevant in line with the expanding scope of Peri-Anaesthesia roles, with 41 applications received. Of these, 19 candidates were offered places (46.3%), indicating the need to review training capacity to support service expansion. **5. Post-Basic Certificate in HIV/AIDS Counselling** **Achievement:** Recorded 64 applications and achieved a 100% offer rate, with all applicants successfully offered places. This reflects a strong commitment to strengthening prevention, treatment, and continuous support in communicable disease management.

SECRETARIAT BOARD OF MEDICAL ASSISTANT

Performance Report: Medical Assistant Service Strategic Plan

1.0	**Strategy 4 and Initiative 3:** Registration for Technical Expert (AMOTeX)	**1)** The total number of registration applications for Assistant Medical Officer Technical Expert (AMOTeX) in the year 2024 is 389. And 319 AMOTeX applications have been approved. **2)** The Assistant Medical Officer Service Division has established a registration process for AMOs who are highly skilled in particular areas and are referred to as Assistant Medical Officer Technical Experts (AMOTeX). The purpose of registration is to ensure that those knowledgeable AMOs in their respective disciplines continue to assist and remain so they can provide clients with the finest health care possible. **3)** In accordance with Director - General of Health's letter dated 22 August 2022, reference number: MOH 600-13/8/6(40) regarding Notification of Implementation on (Assistant Medical Officer Technical Expert) AMOTeX Registration Phase 1 for assistant medical officers under Ministry of Health Malaysia. 8 clinical areas have been identified for Phase 1 are as below: **PHASE 1** **Medical Program** 1 Emergency Medicine and Trauma Services 2 Orthopaedics 3 Nephrology 4 Neurophysiology 5 Cardiology, Cardiovascular Perfusion and Cardiothoracic Surgery **Public Health Program** 1 HIV/AID Counselling 2 Wound Care Management 3 Diabetes Management **4)** Director General of Health letter MOH 600-13/8/6 (56) dated 15 February 2024 regarding the implementation notice of the next phase of registration for Assistant Medical Officer Technical Expert (AMOTeX) for Medical Assistants at Ministry of Health Malaysia facilities. The implementation of the next phase, effective from 15 February 2024, has been identified as follows:

NEXT PHASE

NO	CLINICAL
1	Anesthesiology & Intensive Care
2	Endoscopy
3	Forensic Medicine
4	Nuclear Medicine
5	Hand & Microsurgery
6	Infection Control
7	Intensive Care
8	Neurosurgery
9	Obstetrics & Gynecology
10	Oncology
11	Otorhinolaryngology
12	Ophthalmology
13	Plastic & Reconstructive Surgery
14	Sports Medicine
15	Psychiatry & Mental Health
16	Radiotherapy & Oncology
17	Respiratory
18	Urology
19	Adolescent Health Programs
20	Gerontology
21	Epidemiology
22	Men's Health Programs
23	Primary Health Care
24	TB/Leprosy

2.0	Strategy 5 and Initiative 1: Act 180 (Amendment)	**1) 20 – 21 May 2024** Meeting on the Development of the Code of Professional Conduct (CPC) for the Assistant Medical Officer Profession 1/2024 **2) 23 – 25 September 2024** Workshop on the Development of the Code of Professional Conduct (CPC) Book for Paramedical Practitioners 2/2024 **3) 22 November 2024** Meeting to Review the Draft Paramedic Practitioners **4) 23 December 2024** Coordination Meeting Related to Prescription by Assistant Medical Officers
	Strategy 5 and Initiative 1: Re-amendment of Act 180	• The Paramedical Practitioner Bill Committee held a meeting on 22 November 2024 to review the draft Paramedic Practitioner Bill in order to refine several key policy provisions in the new legislation, and following the change of the Minister of Health in December 2023, the Assistant Medical Officer Section was required to re-present the Bill to the newly appointed Minister of Health.