

# DANGERS IN HEALTHCARE: THE MALAYSIAN EXPERIENCE

Malaysian Medical Association



# Definition of Danger

- Danger is the general word for liability to all kinds of injury or evil consequences, either near at hand and certain, or remote and doubtful



# Definition of Healthcare

- Healthcare is involved, directly or indirectly, with the provision of health services to individuals.
- These services can occur in a variety of work settings, including hospitals, clinics, dental offices, out-patient surgery centres, birthing centres, emergency medical care, home healthcare and nursing home

# The dangers and hazards faced by workforce in health care

## Safety and health issues

- Bloodborne pathogens and biological hazards
- Potential chemical and drug exposures
- Waste anaesthetic gas exposures
- Respiratory hazards
- Ergonomic hazards from lifting and repetitive tasks
- Laser hazards
- Workplace violence
- Hazards associated with laboratories
- Radioactive materials and X-ray hazards

**HEALTH CARE IN DANGER** **IT'S A MATTER OF LIFE & DEATH**



Over **4,200** people were victims of violence against health care.

# Cyber Threat to Health care

- Many Malaysians get their health information from media and internet.
- Instant doctors
- Very often articles flawed overplaying benefits and underplaying the harms of various treatments, exaggerating the prevalence of diseases, and leaving out discussion of alternative options
- Learn about home remedies
- Breach of confidentiality - patient records

**804** breaches of protected health information since 2009

**29,276,385** patient health records affected by breach since 2009

**7,095,145** patient health records breached in 2013

**137.7%** increase in the number of patient records breached in 2012-2013

**85.4%** percent of the total records breached in 2013 resulted from the 5 largest incidents

**4,029,530** records breached in the single largest incident

**83.2%** of 2013 of patient records breached in 2013 resulted from theft

**22.1%** of breach incidents in 2013 resulted from unauthorized access

**35%** of 2013 incidents were due to the loss or theft of an unencrypted laptop or other portable electronic device

**~ 20%** of PHI breaches have involved a business associate each year from 2009-2013

# The Internet of Things (IoT)

- A network of devices that connect to the Internet and exchange data amongst themselves - has far reaching consequences
- From recent study - 70 % of IoT devices contain serious vulnerabilities.
- Weak or non-existent access controls allowing accounts to be hacked, placing healthcare records at risk.
- Non-existent encryption. Encryption scrambles data but some healthcare providers fail to install encryption on their systems.
- Inadequate software protection - vulnerability to viruses.
- No guidance for new technologies. Although healthcare organizations have strict regulations regarding how electronic health records can be created, stored, accessed, and shared. Still improper cybersecurity

# Dangers of Cosmetic surgery

- No direct laws to prevent an unqualified person to perform cosmetic surgery or non-surgical procedures or to make them face criminal charges even if the patient dies or is disfigured as a result of a botched job.
- A billion dollar industry growing annually
- Not under the purview of the private healthcare and services Act



# Malaysia

- Sustainability to our healthcare
- High pride in our national HC system
- High quality and equitable PHC delivery at rock-bottom prices
- Increased life expectancy to 74 years
- Govt subsidies covered 55% of total healthcare spending in 2011 (WHO)
- Funds most entirely into public hospitals and clinics

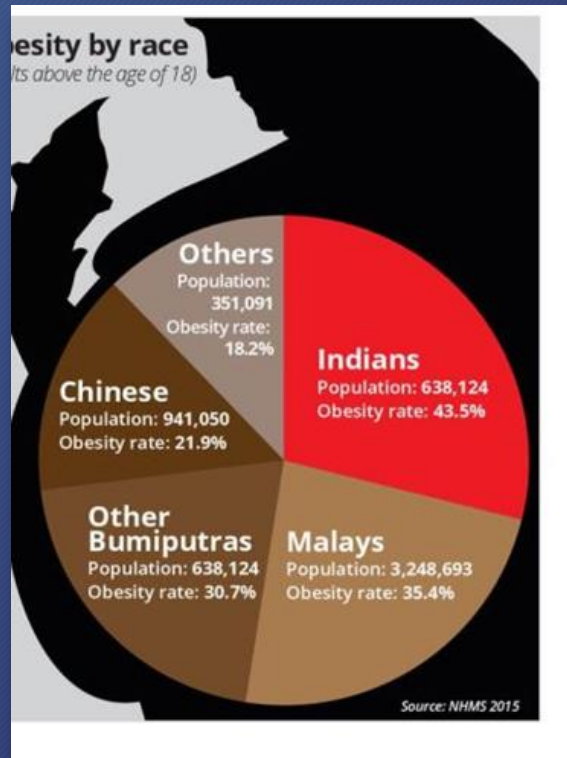


- In 2014, RM22 billion in HC spending: >10% of Govt spending
- In private: 79% of treatment received in hospitals and clinics paid directly by consumer
  - Only 18% towards insurance coverage
- Discrepancy leaves consumer vulnerable to increased costs esp since burden of chronic disease increasing

# Problems in Malaysian Healthcare

- Public health services - queues are long
- In recent years patients had to pay for own surgical implants and essential medicines due to hospital budgetary constraints
- Our universally available PHS is funded from Central taxation
- Private health care - primarily funded directly from out-of-pocket payments of individuals or employers
- Govt also responsible for provision and financing of public health services, such as disease control, environmental health etc.

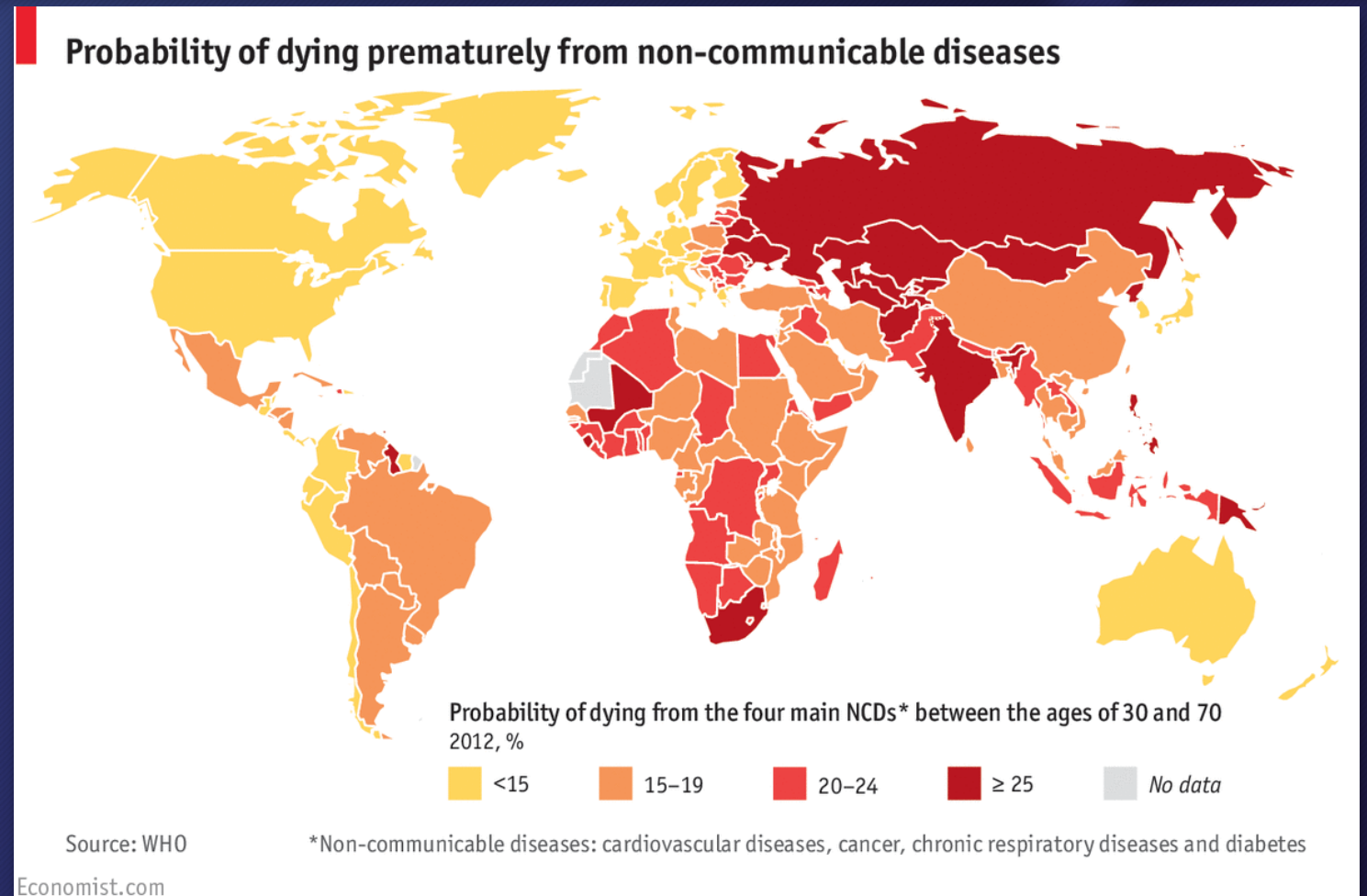
# Health care challengers



- Faster growth of healthcare spending compared to wealth per capita
- The high number of Malaysians ageing with ill health
- Increasing proportion of public hospital spending, compared to primary healthcare, esp in light of the growing number of chronic NCD patients in the country

## Dismal forecast

A lot of avoidable premature deaths - the adult population not attaining the life expectancy that we expect that Malaysian could achieve if we tackle the NCD burden



# Vulnerable People

- Average Malaysian can depend on reasonable health at minimal cost
- Migrant workers, TG communities, mental health patient
- According to MTUC, 40% of Malaysian workers migrant workers
  - Impact in Malaysian health and HC system significant
- Some unable or unwilling to seek out adequate health care when necessary
  - Fear of being caught and deported



# Infectious Disease Time Bomb

- Many migrant workers from countries with high rates of ID: HC time bomb
- Legal migrants make up 8% of Malaysian population, but comprise 14% of TB patients ((Data from Inst Resp Medicine)
- Increased number of multi-drug resistant TB
- Introduction of full fess for foreigners -
  - Act as deterrent to illegal and legal (discouraged by employers to utilize their Foreign workers Health Insurance Protection Scheme)



# What we need to do

- Need to transform health care system in preparation for
  - Very real hurdle of ageing population
  - High prevalence of NCD
  - Increasing and expensive medical technology
  - Unexpected environmental and communicable threats to health



# So the dangers to health care in Malaysia?

- Many issues
- In addition to the violence, safety, other chemical, drug hazards.
- An ageing population
- Obsession to beauty
- Increased health care costs
- Vulnerable population
- Internet
- Unhealthy Malaysian



**100% MALAYSIA FAMILY Care**

“ A growing and ageing population.

We will become an aged nation in 15 years, when our elderly population aged 60 years and above will contribute to 15% of our total population.



# In Conclusion

- In Malaysia, preventive healthcare is the basic principles of future health care delivery which may enhance a healthy population
- Hence reduction in cost for curative care

