

STRATEGIC IMPROVEMENT FOR THE SUSTAINABILITY OF OCCUPATIONAL HEALTH DOCTORS IN MALAYSIA

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INTRODUCTION

- Inventions in work tasks and procedures may expose workers to unventured health risks.
- Historically, rapid industrialization during IR1 were associated with:
 - Explosive growth of manufacturing, mining, transportation and commerce.
 - Introducing hazardous workplace.
 - Many forms of industrial poisoning were not easy to recognize since it often took years for the most toxic effects to occur.
 - Both employees and employers were ignorant of the dangers from chemicals in the workplace.

(Ginsberg, J 2002)

- Thus, future work inventions need trained doctors who can recognize current and emerging occupational diseases to protect workers from hazardous exposures at their workplace.



JUSTIFICATION OF THE STUDY

- Poor number of OHD registration renewal.
 - Monitoring and diagnosis of workers' health fall mainly on the adequacy and competency of OHDs.
 - In Malaysia, OHDs was first introduced in 2000 as an OYK to conduct medical surveillance of workers exposed to CHTH (USECHH 2000).
 - By April 2021, 1,850 OHDs has been trained and registered with DOSH (DOSHS 2021).
 - Nevertheless, out of this number, 801 (43%) OHDs had not continued with their registration renewal
- Increase functions of OHD with the introduction of OHS in the OSHA (Amendment) 2022.
 - Globally, OHS commonly led by OHD. Their functions are vast. Thus, adequate competent OHD are needed to provide OHS in the country.



- OHD face major challenges that need to be tackled.
 - Two studies to understand the challenges faced by OHD in Malaysia has been initiated and funded by NIOSH in 2019.
 - OHD challenges could be grouped into:-
 - low control to function as OHD -lack of competence and relying on other parties to function
 - lack of reward to remain active as OHD e.g lack of recognition and other additional profits
 - high financial, physical and mental demands such as the needs of extra clinical and administrative resource, competition for business and high customer demand.
- Based on these justifications, the strategic improvements of the current situation pertaining to OHD and the provisions of their services were proposed



OBJECTIVES OF THE STUDY

- *This study is a part of a research project funded by NIOSH entitled The Study on The Competency Sustainability Of Occupational Health Doctors in Malaysia*
- *It started with qualitative study to identify the issues and challenges faced by OHDs in Malaysia and followed by a quantitative study to identify the factors associated with the active status of OHD.*
- General
 - To propose strategic improvements of the current situation for the sustainability of OHD in Malaysia
- Specific
 - To review the issues and challenges in the OHD provisions of services
 - To provide strategies that may improve these issues and challenges.



METHODOLOGY

- Review and summarize the previous qualitative and quantitative study findings
- The draft for the strategic improvements were identified and discussed by the research team based on literature review and the expertise and experience of the research team.
- Discussion sessions on the draft were carried out with stakeholders from government agencies (6 participants), universities (2 participants) and professional associations of OHDs (3 participants) for finalization.
- A suitable and practical strategic plan is proposed by providing the :-
 - objectives
 - strategies
 - and actionsto be taken to resolve current issues in order to ensure the sustainability of OHD in Malaysia.



RESULT



IMPROVEMENT AND STRENGTHENING OF OHD FUNCTIONS

Issues & Challenges addressed

- Functions of OHD in OHS are more comprehensive than the functions outlined in the registration renewal criteria.
- Currently, only medical surveillance (MS) is legislated as a function of OHD.
- MS must be conducted in order to renew the registration.
- Some OHDs face considerable constraints to conduct MS as their roles in their organization do not include this function.
- A more comprehensive functions as listed in ILO documents are performed by OHD on demands from industry.
- These functions nevertheless are not formally recognized in the renewal of registration.



Proposed comprehensive functions of OHD

Based on the ILO Occupational Health Services Recommendation 1985 & The Principles of Disease Prevention.

Primary Prevention Function

- Provide occupational health education such as a healthy working environment.
- Provide general information on occupational health risks to employers and employees.
- Doing promotion on health in the workplace such as giving a talk on how to live healthy lifestyle.
- Recommend an assessment of workplace health risks.
- Assess workplace health risks based on available health risk assessment reports such as CHRA reports.
- Advising employers on job/workplace improvements to protect employees' health.
- Take care of /provide vaccinations to prevent work-related infectious diseases.
- Provide consultation on PPE
- Evaluate the findings of environmental surveillance such as noise exposure monitoring.
- Advise employers on organizational policies/procedures that facilitate compliance with the law and business objectives related to occupational health.
- Advising employers on management such as record keeping

Secondary Prevention Function

- Perform medical surveillance.
- Perform pre-employment and pre-placement checks.
- Investigate the cause of suspected occupational diseases.
- Diagnose occupational diseases.
- To notify occupational injury /illness in accordance with the law.
- Propose occupational disease prevention and control measures to employers and employees.

Tertiary Prevention Function

- Conduct medical impairment evaluation.
- Arrange and monitor the necessary clinical rehabilitation.
- Plan and recommend workplace adjustments for sick/diseased/disabled workers.
- Advising employers on RTW content and management for workers with prolonged sickness absence.
- Recommend specific employment exemptions or early retirement for eligible employees.

Strategies and actions for the improvement and strengthening of OHD functions in Malaysia.

Objective	Strategy	Action
Ensure that a more comprehensive OHD function is recognized by all parties.	Recognize the comprehensive functions of OHD in specific legislation related to OHS	<ul style="list-style-type: none"> Refer to the proposed the functions of OHD in OHS when developing the OHS Regulations for Malaysia.
Ensure OHD are aware of their more comprehensive functions in OHS	Hold activities to promote to OHD the comprehensive OHD roles and functions.	<ul style="list-style-type: none"> Publish the comprehensive OHD roles and functions in websites of OH-related organisations e.g OHD training institutions and OHD professional associations. Include the topic of the OHD functions based on OHS in at least one training/year conducted by OHD training institutions and OHD professional associations. Identify the functions of OHD covered in OHD training (e.g courses, seminar etc) and place the information in each poster/promotion of such courses/ training especially for those with CEP points.

Strategies and actions for the improvement and strengthening of OHD functions in Malaysia.

Objective	Strategy	Action
<p>Ensure that OHD has the option of selecting the services provided to represent the functions that can be played according to their service model.</p>	<p>Recognize two types of service for OHD based on their functions in the provision of occupational health services.</p>	<ul style="list-style-type: none"> ▪ Present the proposal of two types of OHD services in Malaysia ▪ Obtain the consent of all parties in principle to recognize the two types of OHD together with their respective functions and competencies. ▪ Identify the OHD functions that need to be available as a registration renewal criterion for each type of service for the assurance of competency. ▪ Identify the evidence required for the OHD functions which is the registration renewal criteria for each type of OHD service.



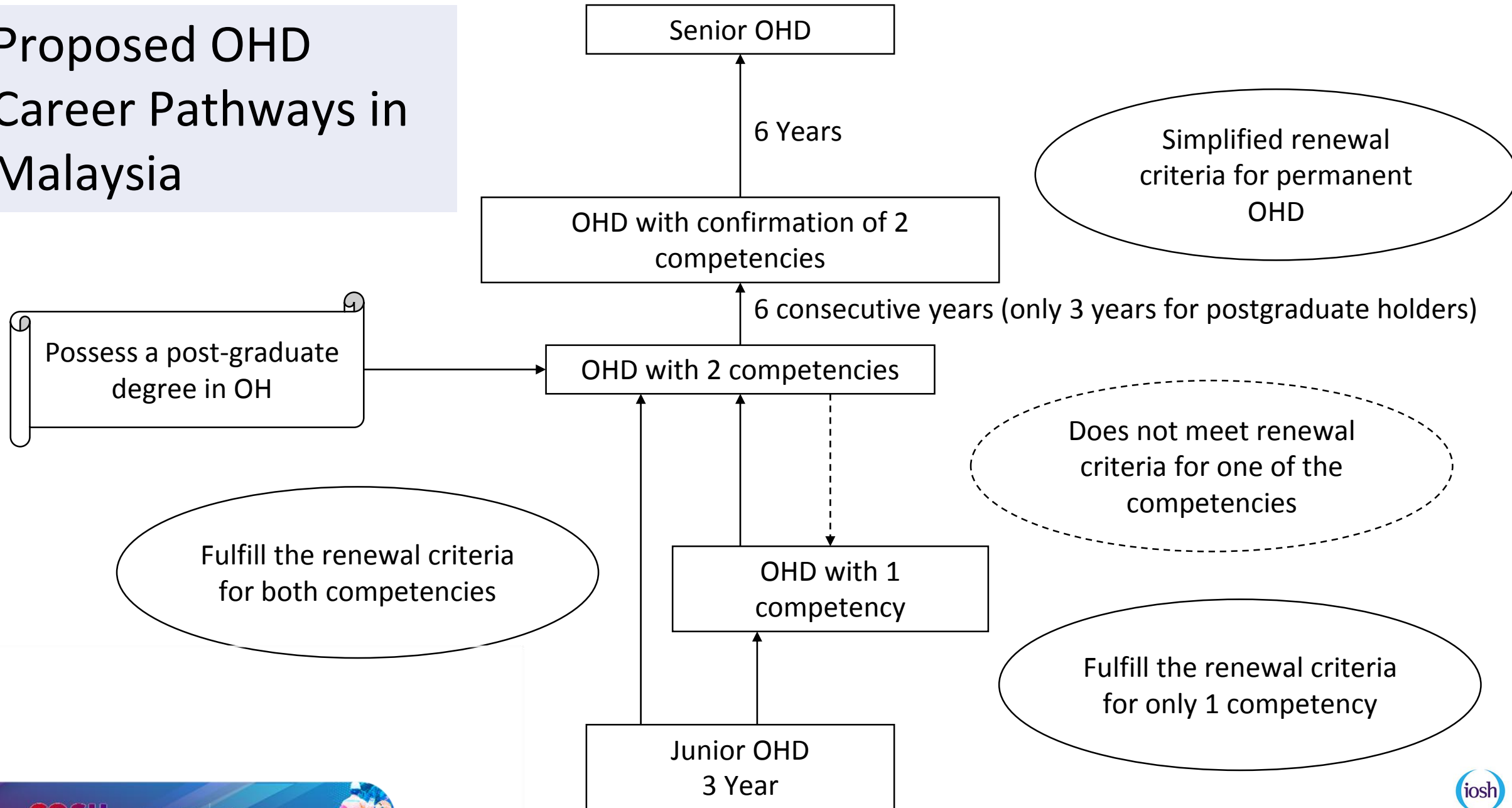
STRENGTHENING THE OHD CAREER PATHWAYS

Issues & Challenges addressed

- Lack of policy or criteria for the recognition of OHD with post-graduate certification.
- OHD who possess graduate degree qualifications do not receive recognition in any aspect, whether it is career promotion opportunities, renewal registration criteria or business opportunities.
- Most of the doctors trained in occupational health at the level of specialist are registered in the National Specialist Registry as Public Health Physician.
- It was found that OHD who had given services for 6 years or more had a significant higher odds to remain active as compared to those who served less than 6 years.



Proposed OHD Career Pathways in Malaysia



Strategies and actions to strengthen the OHD career pathways

Objective	Strategy	Action
<p>Ensure that there is an appropriate, clear, and recognised OHD career pathways in Malaysia</p>	<p>Develop a career pathway that is acceptable to OHD and all stakeholders</p>	<ul style="list-style-type: none"> ▪ To finalise the proposed career pathways by obtaining the feedback from the stakeholders ▪ Identify specifically the functions of the OHD and the registration renewal criteria for each position in the career pathway. ▪ Obtain the endorsement of the final OHD career pathways by all parties.



IMPROVEMENT IN THE TRAINING OF OHD

Issues & Challenges addressed

- OHD lack knowledge, skills and confidence in carrying out:-
 - the functions of OHD stated in the legislation
 - the general clinical functions related to occupational medicine
 - other OHD functions in OHS.
- OHD training:-
 - Lack in depth
 - Lack practical exposure.
- The absence of opportunity for OHD to gain hands-on training experience under supervision once they are registered as OHD reduce the confidence and motivation.
- OHD are hesitant to validate occupational diseases without the support from clinical specialists.
- They also perceived high dependency on other services such as laboratories and industrial hygienist services.
- OHD highly depend on employers to provide service.
- Courses with CEP points that were usually offered were not cost-effective in providing added value to their existing knowledge.



Strategies and actions to improve OHD training

Objective	Strategy	Action
<p>Ensure any OHD course modules focus on OHD competencies based on the proposed functions.</p>	<p>Improve the existing OHD course modules by OHD training institutions to cover the proposed OHD functions.</p>	<ul style="list-style-type: none"> ▪ Include the topic of Roles and functions of OHD at the beginning of the curriculum. ▪ Review or create modules according to the competencies needed in the 2 types OHD services. ▪ Add skills-related topics that OHD need to ensure their business continuity such as communication skills and business management. ▪ Use Malaysian Qualifications Agency (MQA) approach as a guide to improving the lesson plan for each module (eg. Usage of PLO and CLO).
<p>Allow opportunity to develop hands-on experience under supervision for OHD.</p>	<p>Create mentorship programmes for OHD by OHD professional associations and OHD training institution.</p>	<ul style="list-style-type: none"> ▪ Develop, conduct and supervise mentorship programmes by identifying their content, mentor criteria and benefits as well as methods of implementation and evaluation. ▪ Obtain recognition from stakeholders such as NIOSH and DOSH for this program along with mentor and mentee.



Strategies and actions to improve OHD training

Objective	Strategy	Action
<p>Improve OHD competency in diagnosing occupational diseases without much dependence on other clinical experts.</p>	<p>Establish guidelines for occupational disease diagnosis that focus on both the clinical diagnosis and the work-relatedness by universities and OHD professional associations.</p>	<ul style="list-style-type: none"> ▪ Develop practical guidelines (such as clinical practice guidelines) that can be used hands-on by OHD. ▪ Conduct courses to train the application of the guidelines ▪ Promote fellowship support programs through existing platforms for hands-on training on such guidelines at the university.
<p>Provide opportunities for OHD to gain communication skills and soft skills for service continuity.</p>	<p>Organize communication skills and other soft skills courses for OHD to facilitate their interactions with employers and business continuity. This can be done by all training institutions and associations.</p>	<ul style="list-style-type: none"> ▪ Identify communication skills and soft skills required based on the proposed functions. ▪ Add communication skills to existing OHD training topics and assess them in te formal training. ▪ Organize courses related to communication skills and soft skills for OHD

RAISING THE AWARENESS OF EMPLOYERS AND EMPLOYEES ON OH PROGRAMMES AND THE FUNCTIONS OF OHD.

Issues & Challenges addressed

- OHD services are highly dependent on employers in terms of consent or payment.
- This creates a sense of OHD dependency on employers.
- OHD become stressful when perceived less ethical and professional requests are forwarded by employers especially those involving documents relating to employee confidentiality issues.
- OHD that provide panel primary services commonly deal with third parties such as insurance parties and do not have the opportunity to communicate directly with employers.
- Issues with employees:-
 - reluctance to allow OHD to continue the investigation for confirmation of disease diagnosis. Commonly due to their concerns over job security issues.
 - need to identify the party who will be responsible for making the payment before they further investigate suspected cases seen in clinics.

Strategies and actions to raise the awareness of employers and employees on OH programmes and the functions of OHD.

Objective	Strategy	Action
<p>Ensure employers and employees cooperate well with OHD when providing services to them.</p>	<p>Promote OHD services as a valuable and beneficial service to employers and employees</p>	<ul style="list-style-type: none"> ▪ Promote OHS and OHD functions in OSH-related websites and in mass media/social media ▪ Study the needs and constraints of employers in procuring OHD services. ▪ Conduct willingness to pay studies for OHS among employers. ▪ Promote OHD services to employers' and employees' groups, taking into account the findings of employer requirements and constraints in relation to this service



CONCLUSION

- These strategic improvements have been proposed to improve OHD's ability to provide their services in Malaysia.
- Further discussion and feedback from all stakeholders are needed for their endorsement and implementation in Malaysia.
- Malaysia will have its own policy and practices related to OHD services that are based on its own scenario and background.
- This will increase the chance of OHD sustainability in Malaysia.
- These recommendations are also proposed with the consideration of the future legislation on OHS provisions in Malaysia that are based on the ILO OHS Convention and Recommendation 1985. Thus, they may still be relevant with the endorsement of the future OHS legislation.



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