

**AKHBAR : THE STAR**  
**MUKA SURAT : 6**  
**RUANGAN : NATION**

THE STAR M/S 6 NATION 15/12/2024 (AHAD)

# M'sia mulls Good Samaritan Law

Act will allow people to save others without fear of legal repercussion

**GEORGE TOWN:** The Health Ministry is looking to introduce the Good Samaritan Law, a legal protection that encourages people to assist others in emergencies without fear of legal consequences, such as being sued for unintentional harm caused during the act of assistance.

Minister Datuk Seri Dr Dzulkefly Ahmad said the Act must be put in place, thus he would raise the matter at the post-Cabinet meeting next week.

"How this is going to come and when this is going to come about, we will have to wait but more importantly, we will make a decision that it will be implemented (like) what other countries have done."

"This Good Samaritan Law must be put in place at least within in this 15th Parliament Session. We have three years more," he told reporters after launching the inaugural Malaysia Community First Responder Conference here yesterday, Bernama reported.

He said many countries, including the United States, United Kingdom, Australia and certain Asian nations, have implemented the law and Malaysia would benchmark with them.

In Malaysia, there is currently no specific Good Samaritan Law at the national level, however, the concept has been discussed and



debated as part of the broader conversation around public health and emergency response.

The introduction of such a law will align with Malaysia's broader goals of enhancing emergency response systems and improving survival rates for incidents like sudden cardiac arrest (SCA).

Dzulkefly also said Malaysia's survival rate for SCA is tragically low, with less than 1% of victims surviving if no action is taken.

"For every minute that passes without intervention, the chances

of survival drop by 10%. The need for trained Community First Responders has never been more pressing and our goal is simple, to empower every citizen with the knowledge and confidence to act in an emergency," he said.

The minister said the automated external defibrillators (AED) are life-saving devices that can significantly increase survival rates for SCA victims because 70% of SCAs happen outside of hospitals, where the time between collapse and defibrillation is crucial.

He said every AED installed in public spaces provides victims a second chance at survival, adding that Penang has demonstrated remarkable progress in becoming a "heartsafe state" due to its strategic placement of AEDs across the state.

Dzulkefly noted that to date, about 80,000 to 100,000 lay rescuers have been trained in Penang and over 1,000 units of AEDs installed in the state, of which about 300 are public access AEDs.

He said the ministry would dis-

cuss with the Education Ministry to expand the existing cardiopulmonary resuscitation (CPR) training modules in schools to ensure Malaysia produces a whole generation of people capable of providing CPR during emergencies.

Meanwhile, the Health Ministry is awaiting reports from all relevant parties, both within and outside the MOH, of a probe regarding allegations that a private hospital withheld the remains of a baby due to the parents' failure to pay the hospital bill.

Dzulkefly said the report from the Private Medical Practice Control Section is expected to be completed next week.

"This case is quite unique in terms of its background and circumstances, so let us wait for the proper findings and investigation to ensure fairness."

"We certainly sympathise with the family," he said.

The incident went viral on social media when a private hospital in Selangor was accused of holding the remains of a baby boy for 16 days in the morgue because the father had not paid the hospital bill.

In response, the private hospital denied the allegations last Wednesday, saying that it had allowed the baby's remains to be buried before the settlement of the hospital bill.

**Leadership by example:**  
Dzulkefly performing a CPR after the inauguration of the Malaysia Community First Responder Conference in George Town.  
— Bernama

**AKHBAR : NEW STRAITS TIMES**  
**MUKA SURAT : 9**  
**RUANGAN : NATION**

NEW STRAITS TIMES M/S 9 NATION 15/12/2024 (AHAD)  
 'LEFT BEHIND'

# MALAYSIA TO INTRODUCE GOOD SAMARITAN ACT

Health minister says law will be benchmarked against those in other countries

AUDREY DERMAWAN  
GEORGE TOWN  
audreymd@nst.com.my

PLANS are afoot to introduce the Good Samaritan Act. The law encourages people to assist victims in emergencies by offering them legal protection against adverse outcomes.

This includes providing cardiopulmonary resuscitation (CPR) to those who need it.

Currently, there is no such law in Malaysia, and Health Minister

Datuk Seri Dr Dzulkefly Ahmad said the Act must be put in place. "How and when this is going to come about, we will work out the details."

"What is important is for us to have the law, just like those implemented in the United States, United Kingdom, Australia and some Asian countries."

"We will benchmark with these countries. For now, we are kind of left behind," he said after the launch of the 1st Malaysia Community First Responder conference here yesterday.

Dr Dzulkefly added that he would raise the matter at the post-cabinet meeting next week. It would then be opened for discussion and a relevant person be put in charge.

"I am certain we can do this... hopefully within this 15th parliamentary session."

"I cannot promise you when but I want it done as soon as pos-

sible," he said.

"But with many countries already having such a law in place, it is important for us to make comparisons and benchmarking to expedite the process."

"If we want to put in place a law without any reference, it may be difficult. But now we know that there are others doing that," he added.

State Health Committee chairman Daniel Gooi welcomed the proposed Act.

"It will be a good move for us to have more protection," Gooi added.

Persatuan Sukarelawan Bantuan Kecemasan Pulau Pinang senior adviser Datuk Seri Phee Boon Poh said the government's commitment to introduce the Act was a move in the right direction and that it was long overdue.

"We have been lobbying for the Good Samaritan law for many

years now. In fact, it was even raised during the Penang state legislative assembly sitting by Sungai Pulu assemblyman Phee Syn Tze.

"This is a much-needed piece of legislation as it protects our first responders in the field on duty. I want to thank the health minister (Datuk Seri Dzulkefly Ahmad) for the good news," he told the *New Sunday Times*.

Persatuan Sukarelawan Bantuan Kecemasan Pulau Pinang is a grouping of 16 associations in Penang, Province Wellesley, Sungai Petani, and Parit Buntar, involved in providing first responder services, including cardiopulmonary resuscitation (CPR), to those who need it. It was set up in 2022 after the Covid-19 pandemic.

At the height of the pandemic, some of these associations provided help to those affected by

the virus.

Phee said they did not want a situation where the first responders were blamed if anything went wrong.

"They are providing such services on a goodwill basis. We don't want family or friends to turn around and pin the blame if anything happens to the victims."

"That is why there is also an urgent need to protect the first responders, too," he said, adding that he hoped the new Act would come to fruition soon.

On other matters, Dr Dzulkefly said he would have discussions with the Education Ministry to include CPR training skills in schools to ensure that the younger generation knew how to perform the procedure in case of any emergencies.

He cited Norway, where 98 per cent of their people were trained in providing CPR.



Health Minister Datuk Seri Dr Dzulkefly Ahmad (second from right) speaking to the press after the launch of the 1st Malaysia Community First Responder conference in George Town yesterday. NSTP  
PIC BY MIKAIL ONG

**AKHBAR : NEW STRAITS TIMES**  
**MUKA SURAT : 9**  
**RUANGAN : NATION**

# Public healthcare reform already underway, says Dzulkefly

**GEORGE TOWN:** Public healthcare reform is already in progress, Health Minister Datuk Seri Dr Dzulkefly Ahmad said yesterday.

Responding to the Association of Private Hospitals of Malaysia (APHM) president Datuk Dr Kuljit Singh's call for prioritising public healthcare reform over changes in the private healthcare sector, Dr Dzulkefly voiced his agreement on the need to enhance public health facilities.

"I am already on that (reform agenda on public healthcare).

"The prime minister has mentioned it, as well as the second finance minister and Bank Negara Malaysia, about things related to (health) insurance and so on.

"We agree that we all must be in it together to reform our healthcare system and its delivery."

He said this after the launch of

the 1st Malaysia Community First Responder conference here yesterday.

Dr Kuljit told the *New Straits Times* podcast 'Beyond the Headlines' that reforms in the private healthcare sector primarily benefited the Middle 40 and Top 20 income groups by capping, reducing and controlling private healthcare, leaving the Bottom 40 (B40) group — people in the lowest income category — largely unserved.

He questioned the current state of healthcare access for B40 individuals, who predominantly relied on public hospitals, and called for their needs

to be addressed promptly as they await treatment.

Dr Dzulkefly said he was in contact with APHM and it had provided him with good responses.

"For me, there is no problem with us balancing each other to get the best."

He said people who sought treatment at public healthcare facilities were typically from the B40 group and public servants.

He added that people with health insurance also deserved protection and value for money, as well as receiving the best care.

On a letter written by a medical officer (MO) from Sri Manjung

Hospital, on the lack of MOs, Dr Dzulkefly said he was awaiting the report.

"I'm waiting for my deputy director-general (medical) and the parties involved to give me the report.

"For now, let us wait until I get a better picture of the situation."

Dr Dzulkefly also said the ministry was waiting the outcome of the Private Medical Practice Control Section (CKAPS) investigation into the baby-in-freezer case.

"I hope to get an update on the outcome of the probe before presenting it at the next post-cabinet meeting."

Dr Dzulkefly gave his assurance that investigation into the case would be carried out in a fair manner.

The issue came to light after the

founder of a non-governmental organisation claimed the baby's remains were prevented from leaving the hospital after the father couldn't afford to pay the bill.

The hospital in question, Hospital Bersalin Razif (HBR), had said it did not prevent the baby from being released for burial.

It said its doctors had informed the baby's father to make burial arrangements the following day. The hospital also said the mother was told she could bury the baby before settling the bill.

On a separate issue, the ministry said 1,342 dengue fever cases and two deaths due to dengue complications were reported during the Epidemiological Week 49, compared to 1,249 cases and no deaths in the previous week.



Datuk Dr Kuljit Singh

**AKHBAR : BERITA HARIAN**  
**MUKA SURAT : 14**  
**RUANGAN : NASIONAL**

BERITA HARIAN M/S 14 NASIONAL 15/12/2024 (AHAD)

# Bentang RUU lindungi individu berikan bantuan kecemasan

Rancangan KKM perkenal Akta Good Samaritan galak orang ramai bantu dalam situasi kritikal

Oleh Siti Aninah Mohd Yusof  
bhnews@bh.com.my

**Georgetown:** Kementerian Kesihatan (KKM) merancang memperkenalkan Rang Undang-Undang (RUU) berkoncepcian *Good Samaritan Law* bagi melindungi individu yang bertindak memberikan bantuan kecemasan seperti resusitasi kardiopulmonari (CPR) dalam situasi jantung terhenti mengejut atau *sudden cardiac arrest* (SCA).

Menteri Kesihatan, Datuk Seri Dr Dzulkefly Ahmad, berkata akta itu juga bertujuan menyediakan perlindungan undang-undang kepada mereka yang bertindak menghulurkan bantuan atas dasar kepercayaan baik dalam usaha menyelamatkan nyawa orang awam.

Setakat ini, katanya, akta berkaitan perkara itu belum diperkenalkan di negara ini dan Malaysia dilihat agak ke belakang berbanding negara lain seperti Australia, Amerika Syarikat dan United Kingdom (UK) yang mempunyai peruntukan undang-undang



Dr Dzulkefly melakukan CPR ketika melawat pameran selepas merasmikan program 1st Malaysia Community First Responder Conference di Georgetown, semalam.

(Foto Mikail Ong/BH)

dang berkaitan akta itu.

"Akta *Good Samaritan Law* ini penting untuk kita gubal dalam tempoh Parlimen ke-15 ini dengan matlamat menjadikannya setaraf dengan amalan di negara lain. Saya tidak dapat memberi jaminan bila, tetapi saya mahu ia dilaksanakan secepat mungkin.

"Kita ada tempoh tiga tahun lagi untuk memastikan *Good Samaritan Law* ini menjadi kenyataan," katanya selepas merasmikan

program 1st Malaysia Community First Responder Conference di sebuah hotel di Persiaran Gurney, semalam.

Yang turut hadir, EXCO Kesihatan, Belia dan Sukan Pulau Pinang, Daniel Gooi Zi Sen; Penggarah Jabatan Kesihatan Negeri (JKN) Pulau Pinang, Datuk Dr Fazilah Shaik Allaudin dan Pakar Perunding Kanan Perubatan Kecemasan dan Ketua Perkhidmatan Kecemasan Kebangsaan,

Dr Fatahul Laham Mohamed.

Akta *Good Samaritan* ialah perlindungan undang-undang menggalakkan individu untuk membantu orang lain dalam situasi kecemasan tanpa rasa takut mengenai tindakan undang-undang sekiranya disaman kerana menyebabkan kecederaan yang tidak disengajakan semasa memberi bantuan.

Penyokong akta itu berhujah undang-undang sedemikian me-

wujudkan budaya lebih proaktif dalam menangani situasi kecemasan menerusi cara memberi perlindungan undang-undang kepada orang awam berniat baik. Akta itu menggalakkan lebih ramai individu tampil membantu dalam situasi kritisik seperti melakukan CPR dan menggunakan peralatan seperti defibrillator luaran automatik (AED).

#### Bawa hasil ke Kabinet

Dr Dzulkefly berkata, beliau juga akan membawa hasil daripada persidangan 1st Malaysia Community First Responder Conference yang berkaitan dengan akta berkonsep *Good Samaritan* itu untuk dibincangkan dalam mesyuarat pasca Kabinet minggu hadapan.

Beliau optimis Akta *Good Samaritan* dapat direalisasikan di negara ini dan KKM akan merujuk kepada amalan terbaik dari negara lain sebagai penanda aras dalam menggubal RUU akta itu.

"Walaupun undang-undang ini belum lagi digubal, kita melihat betapa pentingnya perlindungan undang-undang bagi mereka yang memberi bantuan kecemasan seperti CPR dan setiap orang, mempunyai potensi menjadi penyelamat nyawa."

"Ini adalah langkah penting untuk melindungi mereka yang bertindak atas dasar niat baik, dan kita harus pastikan mereka dilatih dengan baik untuk memberikan bantuan yang berkualiti," katanya.

AKHBAR : KOSMO  
MUKA SURAT : 7  
RUANGAN : NEGARA

KOSMO M/S 7 NEGARA 15/12/2024 (AHAD)

## Laporan penuh kes 'baby Adham' diperoleh minggu depan

**GEORGE TOWN** — Laporan penuh kes 'baby Adham' yang jenazahnya didakwa disimpan selama dua minggu di dalam peti sejuk beku sebuah hospital swasta di Klang dijangka diperoleh selewat-lewatnya minggu depan.

Menteri Kesihatan, Datuk Seri Dr. Dzulkefly Ahmad berkata, Cawangan Kawalan Amalan Pe-

rubatan Swasta (CKAPS) telah menjalankan siasatan mengenai kes berkenaan dan pihaknya masih menunggu dapatan penuh sejuk beku sebuah hospital swasta di Klang dijangka diperoleh selewat-lewatnya minggu depan.

"Jangka masa bagi saya sentiasa merujuk kepada mesyuarat pasca Kabinet yang seterusnya. Kami mengadakan mesyuarat mingguan, dengan mesyuarat

terbaru diadakan semalam (kelmarin), pada hari Jumaat.

"Jadi, pada waktu itu, saya ingin melihat kemas kini atau dapatan yang akan dipersembahkan semasa mesyuarat pasca Kabinet, harapnya, saya akan ada mesyuarat terakhir sebelum akhir tahun, iaitu minggu depan," katanya semalam.

Menurut Dzulkefly, KKM memberi perhatian sepenuhnya kes berkenaan, namun pada masa yang sama pihaknya perlu menunggu dapatan dan hasil siasatan untuk berlaku adil.

"Kita tentunya bersimpati dan berempati dengan keluarga yang terlibat dalam tragedi ini. Saya mengharapkan laporan dapat

disegerakan kerana saya tahu siasatan telah dijalankan.

"Saya percaya semua pihak, ingin mendengar hasilnya secepat mungkin," katanya.

Katanya, kesemua perkhidmatan hospital swasta terikat dengan tertakluk di bawah Akta 586, yang juga dikenali sebagai Akta Perkhidmatan Hospital Swasta.

**AKHBAR : THE STAR**  
**MUKA SURAT : 4**  
**RUANGAN : NATION**

THE STAR M/S 4 NATION 15/12/2024 (AHAD)

# ADHD impacts adults, not only kids

Untreated, the struggle may lead to anxiety, low self-esteem, say experts

By NELSON BENJAMIN  
 and VENESA DEVI  
 newsdesk@thestar.com.my

**JOHOR BARU:** Attention deficit hyperactivity disorder (ADHD) is no longer just a childhood condition, as some also carry it into their adult lives without realising it, says the Malaysian Mental Health Association.

Its president Prof Datuk Dr Andrew Mohanraj said adult ADHD manifests differently, including having trouble with organisations, procrastination, forgetfulness or emotional dysregulation or outbreaks.

He said studies in Malaysia emphasise underdiagnosis, likely due to stigma, lack of awareness, and limited diagnostic resources.

"This situation underscores the need for improved data collection and awareness campaigns to address ADHD comprehensively," he said, adding that if left untreated, ADHD could lead to a cascade of challenges.

Dr Mohanraj said children might struggle academically, socially and emotionally and often feel misunderstood, while adults might face difficulties at work, strained relationships, and even higher risks of accidents.

"Over time, untreated ADHD can contribute to anxiety, depression and low self-esteem as individuals grapple with the feeling of 'falling short'."

"ADHD is not about laziness or bad behaviour but is a neurodevelopmental condition that affects how people focus, control impulses and manage energy levels."

"Think of it as the brain working differently, making everyday tasks like paying attention in class, sitting still during meetings, or remembering details extra challenging," he said in an interview.

Dr Mohanraj also said ADHD rarely exists alone, as other common co-occurring conditions include anxiety disorders, depression, learning disorders and oppositional defiant disorder (ODD).

"Recognising and treating these co-morbidities is important for holistic care," he said, adding that while medication remains a cornerstone of ADHD management, other strategies could complement it, including behavioural therapy, dietary interventions, mindfulness and meditation, and



**Holistic healing:** (Left) Dr Mohanraj and Dr Amar-Singh say therapy, diet, exercise and family support play a vital role for adults diagnosed with ADHD.

physical activity such as regular exercise.

Datuk Dr Amar-Singh HSS, consultant paediatrician and child disability activist, said although there is no comprehensive local data, international data suggest that between 5% and 15% of children have ADHD.

He said a healthcare professional trained in child development could help make the diagnosis as well as rule out other issues like behaviour problems, hearing impairment, intellectual impairment or even autism.

"For adults, a psychologist and a psychiatrist can help diagnose ADHD using a combination of psychological tools and clinical interviews," he said, adding that ADHD could last into adulthood with some adults with ADHD not being aware at all about their condition.

He said it is also important for family members, especially parents and spouses, to be aware and educated about ADHD.

"This goes a long way to improving the outcomes. Meeting other parents and joining a family support group is very useful."

"Listening to the life experiences of adults with ADHD, how they deal with the condition, and useful strategies to cope with ADHD will be very helpful," he added.

He said that getting adequate sleep daily, helping to manage daily routines, structuring information in small chunks, and daily physical activity are useful for the child and adult with ADHD.

The government needs to amend policies and systems to create an environment that supports ADHD needs, including schools, hospitals and government offices.

"Healthcare professionals, social workers, police and frontline public service staff should also receive training to better understand and support persons with ADHD," he added.

A group of adults with ADHD have come together to form a non-governmental organisation (NGO) in an effort to raise awareness about the condition and provide support.

Its president Zulhafiy Zolkipli said members of the NGO, dubbed the Adult ADHD Malaysia Society, met through a Facebook page created during the Covid-19 pandemic.

"During the pandemic, we held regular online meetings for people with ADHD where their experiences and knowledge were shared. We also organised talks with medical professionals and other activities, including working with companies to come up with plans to improve inclusivity."

"Later, we decided to register as an NGO, as this will make it easier for us to cooperate with other bodies and have more legitimacy," said the 34-year-old property agent.

Zulhafiy added that the NGO wants to advocate for people with ADHD, especially adults who are trying to cope with their jobs and other responsibilities.

"In the past, many people thought of ADHD as something that only affected children, but this is not the case."

"The condition could last until adulthood. There are now more adults diagnosed with ADHD."

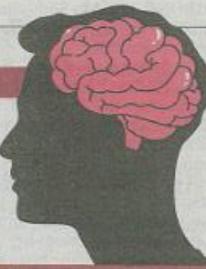
"However, due to misunderstandings about the condition, a lot of adults with ADHD find it difficult to get support from their surroundings, especially in the

## Quick facts about ADHD

### What is ADHD?

■ Attention deficit hyperactivity disorder (ADHD) is a neurodevelopmental condition that affects how people focus, control impulses, and manage energy levels

■ ADHD is not just a childhood condition. Many adults carry it into their lives without realising it



### What happens if ADHD is left untreated?

■ Children may struggle academically, socially, and emotionally, often feeling misunderstood

■ Adults may face difficulties at work, strained relationships, and even higher risks of accidents

### Why have more adults been diagnosed with ADHD recently?



Rise in awareness



Reduced stigma



Better diagnostic tools

### What are the common comorbidities of ADHD?



**Anxiety Disorders:**  
 Excessive worry or restlessness



**Depression:**  
 Persistent sadness or hopelessness



**Learning Disorders:**  
 Challenges with reading, writing, or math



**Oppositional Defiant Disorder (ODD):**  
 Difficulty with authority or rules

### What are the symptoms of ADHD?

#### Inattentive symptoms:

- Forgetfulness
- Carelessness
- Easily distracted
- Poor organisation and time management skills
- Task avoidance or procrastination
- Frequently losing things
- Difficulty following through with task

#### Hyperactive/ Impulsive symptoms:

- Interrupting conversations
- Acting without thinking
- Excessive talking
- Constant fidgeting or restlessness
- Inability to sit still
- Emotional dysregulation
- Difficulty waiting

Source: Malaysia Mental Health Association, Children and Adults with ADHD (CHAAD), ADHD Malaysia

The Star graphics

workplace," he said.

Zulhafiy said with greater awareness, some companies are stepping up and are finding ways to be more inclusive.

"Some companies want to be more accommodating but are unsure of what they could do to help their workers, as there is not much information on this."

"We hope to be able to work closely with them on this as we also have mental health professionals, including psychiatrists."

"The idea is not to get special treatments but to look for ways to make the workplace more ADHD-friendly, allowing people with the condition to strive without feeling overwhelmed," he said.

**AKHBAR : SINAR HARIAN**  
**MUKA SURAT : 7**  
**RUANGAN : NASIONAL**

SINAR HARIAN M/S 7 NASIONAL | 15/12/2024 (AHAD)

## Konsep NHS perlu dimodifikasi ikut sistem perubatan Malaysia

**SHAH ALAM** - Cadangan untuk Malaysia mempelajari pendekatan digunakan United Kingdom (UK) iaitu sistem Perkhidmatan Kesihatan Nasional (NHS) bagi mengawal kenaikan caj hospital swasta perlu dimodifikasi mengikut acuan Malaysia.

Bekas Timbalan Ketua Pengarah Kesihatan (Perubatan), Profesor Datuk Dr Rohaizat Yon berkata, inisiatif berkenaan tidak boleh dilakukan sepenuhnya mengikut sistem negara berkenaan.

"Maksudnya kita mungkin boleh wujudkan konsep insurans kesihatan nasional de-

ngan 'memisahkan' sistem penyediaan penjagaan kesihatan kerajaan, begitu juga dengan sistem pembiayaan kesihatan.

"Selain itu, hospital dan klinik kerajaan mungkin boleh diberikan beberapa autonomi tertentu melalui penstrukturkan ala pengkorporatan entiti kerajaan.

"Kaedah ini dilihat akan memberi beberapa aspek autonomi misalnya perolehan peralatan, ubat-ubatan, pelantikan dan pemecatan anggota serta menjana pendapatan yang boleh dikembalikan semula kepada hospital," katanya kepada *Sinar Ahad*.

Sebelum ini media melapor-

kan, ada pihak yang berpendangan supaya Malaysia mempelajari pendekatan UK dengan sistem NHS.

NHS dibayai melalui cukai dan Sumbangan Insurans Kebangsaan (NICs) yang dibayar oleh pekerja, majikan dan individu bekerja sendiri.

Dalam pada itu, Dr Rohaizat berkata, cadangan mengkorporatkan organisasi kesihatan negara bukan tindakan untuk menswastakan hospital atau klinik milik kerajaan tetapi bagi mengaplikasikan konsep 'pasaran dalam' terhadap sistem berkenaan.

"Pengkorporatan dan penswastaan adalah dua konsep yang berbeza. Modifikasi terhadap sistem NHS bagi aplikasi di Malaysia perlu penelitian jitu sebab NHS pun ada beberapa masalah dan mereka

juga buat beberapa reformasi serta perbaikan terhadap sistem sedia ada.

"Begitulah kalau di Malaysia, bagi kerajaan majoriti perkhidmatan kesihatan disediakan oleh Kementerian Kesihatan dan akan ada segelintir agensi kerajaan lain yang menyediakan produk kesihatan juga.

"Contohnya tentera dan hospital universiti awam yang turut menyediakan perkhidmatan sama tetapi kecil, manakala pihak swasta pula menyediakan perkhidmatan kesihatan seperti hospital dan klinik swasta bagi golongan yang berkemampuan. Itu dari segi penyediaan perkhidmatan kesihatan.

"Tapi buat masa ini pembia-yan penjagaan kesihatan yang membiayai pembelian adalah kerajaan sendiri. Bagi swasta pula, ada insurans swasta, pembiayaan

majikan atau wang persendirian (wang saku).

"Jadi, kalau kita wujudkan insurans kesihatan nasional, ia bakal menjadi satu entiti yang boleh membantu rakyat seperti di Australia dan Korea dalam bentuk Insurans Kesihatan Nasional yang bakal membiayai perkhidmatan perubatan," jelasnya.

Tambah beliau, secara amnya, cadangan untuk Malaysia mempelajari kaedah NHS ada baiknya tetapi perubahan perlu dilakukan mengikut sistem berseusai dengan pentadbiran negara.

Ujarnya, tindakan itu perlu kerana perundungan, budaya dan sejarah penubuhan Malaysia berbeza serta memerlukan beberapa penelitian daripada kerajaan.

"Konsep itu baik dan boleh diteliti, saya pasti Menteri Kesihatan, Datuk Seri Dr Dzulkefly Ahmad bersama pasukan akan melakukan yang terbaik untuk negara kita," ulasnya.



DR ROHAIZAT



Laporan  
Sinar Harian  
pada Sabtu.

AKHBAR : SINAR HARIAN  
MUKA SURAT : 7  
RUANGAN : NASIONAL

SINAR HARIAN MIS 7 NASIONAL 15/12/2024 (AHAD)

# Tiba masa libatkan peranan farmasi

Pastikan rakyat dapat pembayaran alternatif bekalan ubat dengan kadar berpatutan

Oleh KHAIRIL ANWAR MOHD AMIN SHAH ALAM

**S**udah tiba masanya pengendali insurans dan takaful (ITO) turut mempertimbangkan peranan farmasi dalam memastikan rakyat Malaysia mendapat pembayaran alternatif bagi bekalan ubat-ubatan dengan kadar lebih berpatutan.

Presiden Persatuan Farmasi Malaysia (MPS), Profesor Amrahi Buang berkata, kadar pembayaran itu bagaimanapun masih perlu bergantung kepada jenis ubat-ubatan dipreskripsi oleh doktor-doktor ber-tauliah, sama ada dari fasiliti kesihatan awam maupun swasta sahaja.

Menurutnya, inisiatif berkenaan akan lebih realistik dilaksanakan sekiranya kerajaan dan Kementerian Kesihatan (KKM) bersetuju dengan cadangan pem-

bangunan Sistem Kesihatan Nasional (NHF) yang menyaksikan sistem pengurusan fasiliti kesihatan awam dan swasta diintegrasikan dalam satu bentuk model penjagaan kesihatan mampar.

"Kalau berdasarkan skim insurans kesihatan sedia ada, orang awam tiada hak untuk mendapatkan preskripsi ubat-ubatan daripada doktor yang merawat mereka.

"Ini disebabkan kebiasaannya klinik dan hospital awam mahu pun swasta sudah menyediakan farmasi sendiri untuk pembenaran ubat-ubatan.

"Melalui sistem NHF, bagi mewujudkan model penjagaan kesihatan mampar untuk semua rakyat, kerajaan boleh mengoptimumkan peranan farmasi-farmasi bagi dijadikan farmasi komuniti," katanya kepada *Sinar Premium*.

Mengulas lanjut, Amrahi berkata, melalui langkah mewujudkan farmasi komuniti, fasiliti kesihatan kerajaan dan swasta boleh menawarkan preskripsi sebagai opsyen alternatif kepada pesakit bagi memberi pilihan kepada mereka untuk mendapatkan bekalan ubat-ubatan.

Jelasnya, penyertaan perkhidmatan farmasi di bawah NHF bukan sahaja dapat mengurangkan isu kesesakan di hospital, bahkan dapat memperkuuhkan

Melalui sistem NHF, kerajaan boleh mengoptimumkan peranan farmasi bagi dijadikan farmasi komuniti.



aspek pematuhan ubat dan meningkatkan hasil penjagaan pesakit secara keseluruhan.

Selain itu, Amrahi menekankan peranan insurans kesihatan boleh membantu mengurangkan beban kos pembayaran kesihatan pencarum di mana cadangan pengenalan mekanisme pembayaran bersama (*co-payment*) dipraktikkan akan mengelakkan kebimbangan caj pembelian ubat-ubatan yang tidak jelas.

"Sejurusnya MPS bimbang dengan kenaikan kos penjagaan kesihatan yang semakin membebankan rakyat.

"Walaupun sebagai profesional kesihatan, kami memahami bahawa kos penjagaan kesihatan meningkat, MPS membantah tindakan untuk memindahkan

beban kos ini kepada rakyat tanpa menyelesaikan masalah pembayaran kesihatan secara menyeluruh.

"Laporan terkini mengenai jangkaan kenaikan premium sehingga 50 peratus disebabkan kos perubatan meningkat, sementara hospital swasta melaporkan pertumbuhan margin keuntungan besar, menimbulkan persoalan tentang pengagihan dana kesihatan tidak seimbang.

"Justeru, MPS menyeru kepada KKM dan ITO menjemput kami dalam sebuah program libat urus menangani istu kenaikan kos perubatan semakin mendadak dan kami bersedia memainkan peranan dalam membantu rakyat membendung kos peningkatan premium insurans kesihatan," ulasnya.



**PREMIUM**  
*Sinar*  
Eksklusif dan Kritis