

AKHBAR : BERITA HARIAN
MUKA SURAT : 19
RUANGAN : NASIONAL

Murid meninggal keracunan makanan di rumah

Kota Kinabalu: Murid Tahun Empat yang meninggal dunia akibat keracunan makanan di Sandakan semalam dilaporkan mengalami masalah berkenaan berpunca daripada makanan di rumah bukannya di sekolah.

Pengarah Jabatan Pendidikan Negeri Sabah (JPNS), Datuk Raisin Saidin, berkata berdasarkan keterangan pihak sekolah, murid terbabat keracunan makanan ketika di rumah, bersama ibunya.

"Murid dan ibunya dimasukkan ke wad. Keracunan makanan bukan disebabkan makanan di kantin sekolah dan hanya memabitkan seorang murid sahaja bersama ibunya yang mengalami keracunan makanan pada hari yang sama di rumah.

"Murid lain tidak mengalami sebarang simptom keracunan makanan pada hari yang sama sehingga ke hari ini," katanya dalam kenyataan, semalam.

Dilaporkan murid itu, Mohd Mizal Anaqi Muhammad Rizal, 10, tidak dapat datang ke sekolah pada 23 Julai lalu kerana keracunan makanan.

Perkara itu dimaklumkan oleh keluarga murid terbabat kepada guru kelasnya melalui aplikasi 'WhatsApp' selepas diberi cuti sakit sehingga kelmarin oleh doktor di klinik yang merawatnya.

Raisin berkata, guru kelas kemudian dimaklumkan bahawa murid terbabat pengsan dan dimasukkan ke unit rawatan rapi (ICU) pada malam kelmarin.

"Pada jam 7 pagi semalam, guru kelas dimaklumkan oleh waris murid bahawa anak mereka sudah meninggal dunia.

"Kejadian pada jam 12 tengah hari, guru besar bersama beberapa orang guru melawat jenazah di rumah nenek murid terbabat di Kampung Tinusa, Sandakan," katanya.

Raisin berkata, kes itu masih dalam siasatan Pejabat Kesihatan Daerah Sandakan.

Katanya, maklumat kes yang menimpa murid terbabat setakat ini adalah melalui sumber guru kelas dan bapa mangsa.

Beliau berkata, pihaknya melalui Pejabat Pendidikan Daerah (PPD) Sandakan akan membantu keluarga mangsa untuk tuntutan takaful.

"Jabatan akan membuat laporan lengkap kes apabila semua siasatan sudah selesai oleh Pejabat Kesihatan Daerah Sandakan," katanya.

Sebelum ini, lebih 100 murid Sekolah Kebangsaan (SK) Pulau Gaya, di sini, disahkan mengalami keracunan makanan dipercayai akibat memakan nasi lemak.

Bagaimanapun, tiada kes kematian atau gejala teruk dilaporkan.

AKHBAR : BERITA HARIAN
MUKA SURAT : 21
RUANGAN : NASIONAL

RM140j kos naik taraf HSA

Projek babit pelbagai kemudahan termasuk parkir bertingkat, sistem bekalan elektrik

Oleh Izz Laily Hussein
bhnews@bh.com.my

Johor Bahru: Kerja menaik taraf kemudahan di Hospital Sultanah Aminah (HSA), di sini sedang giat dijalankan membabitkan kos RM140 juta, termasuk membina parkir bertingkat.

Selain itu, kerja menaik taraf itu turut membabitkan sistem bekalan elektrik, sistem penghawa dingin dan sistem saluran paip utama hospital.

Pengerusi Jawatankuasa Kesihatan dan Alam Sekitar Johor, Ling Tian Soon, berkata dalam tempoh dua tahun kebelakangan ini, peralatan perubatan di Johor menjadi topik perbincangan yang hangat.

"Kerajaan Johor melalui pelbagai usaha telah meminta pe-

runtukan daripada kerajaan Pusat untuk meningkatkan dan menambah perkhidmatan.

"Kini, HSA sedang menjalankan kerja naik taraf sistem bekalan elektrik, penghawa dingin dan saluran paip utama bangunan hospital yang menelan belanja lebih RM140 juta," katanya menerusi hantaran di Facebook, semalam.

Sebelum itu, beliau melawat HSA untuk meninjau situasi di hospital berkenaan secara langsung.

Tian Soon berkata, HSA juga akan membina bangunan serba guna di dalam kawasan hospital bagi menggantikan perkhidmatan klinik pakar sedia ada, selain menyediakan perkhidmatan tempat letak kereta bertingkat.

"HSA sudah mendapat kelu-

lusan untuk membina sebuah bangunan serba guna di kawasan hospital bagi menggantikan perkhidmatan klinik pakar sedia ada dan menyediakan perkhidmatan tempat letak kereta bertingkat.

"Cadangan ini telah diluluskan dan Kementerian Kesihatan (KKM) serta Jabatan Kerja Raya (JKR) sedang menjalankan kajian dan penyediaan laporan penilaian awal untuk projek ini.

"Kami berharap semua persiapan berjalan lancar dan mendapat kelulusan serta peruntukan daripada pihak berkuasa untuk memulakan kerja-kerja pembinaan," katanya.

Pelbagai isu klinik kesihatan

Sebelum itu, Tian Soon turut mengadakan pemeriksaan

mengejut di Klinik Kesihatan Tebrau semalam.

Beliau berkata, dalam pemeriksaan itu, pelbagai isu dikenal pasti dan pihaknya akan mengambil tindakan bagi menguruskan isu yang diutarakan.

"Klinik ini masih menghadapi masalah kekurangan kemudahan dan ruang walaupun projek naik taraf pernah dilaksanakan.

"Selepas pandemik COVID-19, semua klinik dikehendaki mempunyai Klinik Demam, iaitu tempat untuk merawat pesakit yang berkemungkinan mempunyai penyakit berjangkit secara beraisingan daripada pesakit lain, namun pada masa ini, rawatan itu hanya dilakukan dalam khemah, yang jelas tidak kondusif.

"Bangunan klinik ini juga adalah reka bentuk lama dan tidak mempunyai penghawa dingin, jadi pada waktu petang atau ketika ramai pesakit, keadaan menjadi sangat panas," katanya.

Beliau menjelaskan, pegawai farmasi di bahagian farmasi juga memberitahu bahawa mereka bekerja dalam ruang yang sangat sempit dan memerlukan lebih banyak ruang.

"Selepas memahami keadaan mereka, saya akan mencari jalan untuk tindakan menguruskan isu-isu ini," katanya.

HSA sedang menjalankan kerja naik taraf sistem bekalan elektrik, penghawa dingin dan saluran paip utama bangunan hospital yang menelan belanja lebih RM140 juta

Ling Tian Soon,
Pengerusi Jawatankuasa Kesihatan dan Alam Sekitar Johor



AKHBAR : UTUSAN MALAYSIA
MUKA SURAT : 7
RUANGAN : DALAM NEGERI

Dalam Negeri

Utusan Malaysia
SABTU • 27 JULAI 2024

7

Tawaran 3,950 pegawai perubatan, pergigian, farmasi

PUTRAJAYA: Kementerian Kesihatan Malaysia (KKM) akan membuat pengambilan sebanyak 3,950 pegawai perubatan, pergigian dan farmasi menerusi lantikan kontrak (interim).

KKM dalam kenyataan memaklumkan, mana-mana calon berkecualan boleh memohon pelantikan menerusi iklan yang dikeluarkan Suruhanjaya Perkhidmatan Awam (SPA) pada 18 hingga 31 Julai ini.

Menurutnya, jumlah ambilan itu meliputi 3,200 pegawai

perubatan, 350 pegawai pergigian dan 400 pegawai farmasi serta baki calon yang memenuhi syarat lantikan mengikut skim perkhidmatan akan dijadikan sebagai calon simpanan.

"Tawaran ini terbuka kepada calon yang dilantik kontrak mengikut Surat Pekeliling Ketua Setiausaha KKM Bilangan 4 Tahun 2016 sama ada sedang berkhidmat atau tidak lagi berkhidmat di Kementerian Kesihatan.

"Iklan pengambilan SPA ini se-

lari dengan keputusan kerajaan berhubung pelantikan secara kontrak (interim) mulai 1 Februari lalu hingga suatu kaedah lantikan tetap baharu diperkenalkan," katanya semalam.

KKM berkata, kategori calon yang layak memohon adalah seperti calon sedang berkhidmat di KKM atau telah berkhidmat hingga tempoh maksimum kontrak tujuh tahun bagi pegawai perubatan dan maksimum lima tahun bagi pegawai pergigian dan pegawai farmasi.

Kategori lain ialah calon yang ditamatkan perkhidmatan bukan disebabkan kesalahan tatatertib atau calon menolak tawaran penyambungan kontrak baharu.

"(Ini termasuk) calon menolak tawaran pelantikan tetap atau calon yang meletak jawatan," katanya.

"Selain itu, calon yang memohon hendaklah telah menamatkan latihan siswazah atau khidmat wajib serta mempunyai perakuan pendaftaran penuh," katanya.

Calon yang berminat dan layak disarankan untuk membuat permohonan menerusi portal SPA9 iaitu <https://spa9.spa.gov.my> dan mengisi kesemua maklumat yang diperlukan dengan lengkap dan betul sebelum atau pada tarikh tutup iklan.

Katanya, pegawai perubatan, pergigian dan farmasi yang dilantik secara kontrak (interim) ini berpeluang untuk dilantik secara tetap tertakluk kepada prestasi dan perakuan Ketua Jabatan.

AKHBAR : UTUSAN MALAYSIA
MUKA SURAT : 33
RUANGAN : DALAM NEGERI

Jangan makan udang, ikan Sungai Tanjung Air Hitam

PONTIAN: Penduduk dinasihatkan tidak memakan udang galah atau ikan yang timbul di Sungai Tanjung Air Hitam di sini berikutan pencemaran air sungai itu pada 21 Julai lalu.

Ahli Dewan Undangan Negeri (ADUN) Pekan Nanas, Tan Eng Meng berkata, memandang belum ada keputusan mengenai punca pencemaran daripada Jabatan Alam Sekitar (JAS), sebarang aktiviti seperti memancing perlu dielakkan.

Menurutnya, beliau akan merujuk Bahagian Keselamatan Makanan, Kementerian Kesihatan (KKM) bagi mengesahkan sama ada udang galah dan ikan di situ, selamat untuk dimakan.

“Buat sementara waktu,

segala aktiviti di Sungai Tanjung Air Hitam perlu ditangguhkan sementara sehingga punca berlakunya pencemaran dapat dikenal pasti sama ada unsur khianat atau ada sebab-sebab lain.

“Saya akan bawa isu kehilangan pendapatan dalam kalangan pemancing dan pengusaha bot kepada kerajaan negeri bagi menimbangkan sedikit pampasan yang sesuai bagi mereka ini,” katanya kepada *Utusan Malaysia* di Kampung Tanjung Air Hitam di sini.

Sebelum ini *Utusan Malaysia* melaporkan pencemaran Sungai Tanjung Air Hitam menyebabkan kira-kira satu tan udang selain ikan mati.

AKHBAR : UTUSAN MALAYSIA
MUKA SURAT : 36
RUANGAN : DALAM NEGERI

Pembedahan ganti sendi dengan bantuan robotik

Oleh **NUR SHARIEZA ISMAIL**
utusannews@mediamulia.com.my

SEREMBAN: Pusat Perubatan Mawar di sini berjaya melaksanakan pembedahan penggantian sendi dengan bantuan robotik, semalam.

Pakar Bedah Ortopedik Perunding Residen di Pusat Perubatan Mawar, Dr. Chee Wai Hong berkata, pencapaian berkenaan menandakan kemajuan ketara dalam teknologi perubatan yang bertujuan meningkatkan ketepatan pembedahan dan pemulihan pesakit.

Kata beliau, pembedahan

penggantian lutut menyeluruh diiktiraf secara meluas sebagai salah satu rawatan paling berkesan untuk keadaan seperti osteoarthritis, sakit sendi, ketidakstabilan dan kecacatan.

Menurut Wai Hong, pesakit biasanya mengalami peningkatan yang luar biasa dalam aktiviti harian dan pengurangan ketara dalam ketidakselesaan lutut selepas pembedahan.

"Pembedahan dibantu robotik menawarkan beberapa kelebihan berbanding kaedah tradisional termasuklah ketepatan peletakan implan yang dipertingkatkan, pemeliharaan tisu lembut di

sekeliling, mengurangkan parut dan mengurangkan kesakitan selepas pembedahan.

"Selain itu kehilangan darah juga diminimumkan, masa pemulihan yang lebih cepat, dan perasaan selepas pembedahan yang lebih semula jadi sekali gus menyumbang kepada kepuasan pesakit yang lebih baik dan kembali ke aktiviti biasa yang lebih cepat," katanya di sini.

Wai Hong berkata, walaupun kos awal untuk memperoleh peralatan robotik dan bahan pakai buang adalah besar, potensi manfaat jangka panjang mewajarkan pelaburan dibuat.



PEMBEDAHAN penggantian sendi dengan bantuan robotik yang berjaya dilakukan Dr. Chee Wai Hong di Pusat Perubatan Mawar, semalam.

AKHBAR : THE STAR
MUKA SURAT : 18
RUANGAN : VIEWS

New chapter for nursing

THE recent decision to lift the moratorium on new diploma-level nursing courses in Malaysia's private higher education institutions on Aug 1, 2024 marks a pivotal moment for the nation's healthcare sector.

While hailed as a potential solution for the looming nurse shortage, the move also raises critical questions about its impact on the profession, the education system and the nation's healthcare landscape.

The prospect of a larger pool of qualified nurses is undoubtedly enticing. With a projected 62% deficit of nurses by 2030, increasing the number of training slots seems like a logical step.

Moreover, elevating nursing from its current vocational status to a higher education level could enhance the profession's image and attract more talented individuals. This, in turn, could lead to improved patient care and overall healthcare quality.

However, the path to realising these aspirations is fraught with obstacles. Developing comprehensive nursing curricula, upgrading infrastructure and ensuring a robust faculty are just some of the hurdles that must be overcome.

Moreover, the increased duration and complexity of nursing education are likely to drive up costs, potentially deterring prospective students.

Furthermore, there are concerns that private institutions may prioritise profit over educational quality, leading to a dilution of nursing standards.

Another pressing concern is the potential impact on the country's already alarming "brain drain". Malaysia has long been a net exporter of healthcare professionals, including nurses, with a significant portion seeking greener pastures.

The Human Resources Ministry reported that 1.8 million Malaysians now work abroad, with over one million in Singapore alone. This "brain drain" has reached alarming proportions, and experts are warning that the country is fast losing talent. At the rate of 5.5% now, it is almost twice the global average.

There is a real risk that lifting the moratorium could exacerbate this issue if the government fails to address the root causes of nurse migration, such as low wages and poor working conditions.

Strategic workforce planning is

also crucial to match the supply of nurses with the evolving healthcare needs of the population.

The classification of nursing training as technical and vocational education and training (TVET) has also been a subject of debate. While it reflects the practical nature of the profession, the increasing complexity of healthcare demands a higher level of education and training.

Integrating nursing programmes into the higher education ecosystem could enhance the profession's credibility, expand career prospects and better equip nurses for the challenges of modern healthcare.

However, this shift presents its own set of challenges. Developing comprehensive nursing curricula, upgrading infrastructure and ensuring a sufficient pool of qualified faculty are essential and demand the collaborative efforts of the Higher Education, Human Resources and Health ministries.

The implications of this decision extend beyond Malaysia's borders as well.

As the chair of Asean in 2025, Malaysia has an opportunity to take a leadership role in setting regional nursing education stand-

ards, in particular the Asean Joint Coordinating Committee on Nursing (AJCCN).

Possibilities include a review to update the 2006 Asean Mutual Recognition Agreement on Nursing Services (which facilitates the mobility of nursing services professionals within Asean), enhances exchange of information and expertise on standards and qualifications, promotes adoption of best practices for professional nursing services and provides opportunities for capacity building and training of nurses) to reflect the evolving landscape of healthcare and allow greater mobility of nursing professionals within the region.

Ultimately, the success of this policy hinges on careful planning and execution. A collaborative effort involving the government, healthcare providers and educational institutions is crucial to ensure that the increased supply of nurses translates into improved healthcare outcomes for the Malaysian population.

DR SYED ALWEE ALSAGOFF
Fellow, National Council of Professors
Kajang

Making Malaysia a global leader in biopharma industry

THE Science, Technology and Innovation Ministry (Mosti) recently announced ambitious plans to generate RM400mil within the next three years through sales of locally-produced biotechnology products from natural resources in Malaysia.

While this highlights the growth potential of the sector, we must think even bigger and beyond agro-based biotechnology products. The global biopharmaceutical market is booming, and Malaysia, with its existing strengths in pharmaceutical manufacturing, is well positioned to become a leader in biopharmaceutical products – if we are willing to make the necessary investments.

Attracting significant investments is crucial as biopharmaceutical manufacturing demands substantial capital investment. For example, Biocin Sdn Bhd, Asia's largest integrated insulin manufacturer, invested over US\$350mil in its Malaysian facility.

To attract similar investments and encourage local companies to move up the value chain, a comprehensive incentive package involving multiple government agencies and ministries is needed. This could include tax breaks, grants, subsidised land and streamlined regulatory processes specifically designed for biopharmaceutical manufacturing.

Government procurement can be a powerful tool to support this essential and growing industry. By prioritising locally manufactured biopharmaceuticals in government tenders and healthcare programmes, we can create a stable and substantial market for these products. This guaranteed demand provides a safety net for investors, de-risks large capital outlays and allows companies to achieve faster returns on investment. It also creates a ripple effect throughout the economy, driving high knowledge job creation, technology transfer and increased tax revenue.

We must also address the need for a highly skilled workforce. Beyond simply nurturing local talent, we need to attract and retain top-tier scientists, engineers and regulatory experts. This requires competitive salaries, world-class research facilities, and a supportive environment that encourages innovation and collaboration.

By combining strategic investment, smart procurement policies and focusing on developing a world-class workforce, we can elevate our local pharmaceutical manufacturing industry from "Malaysian-made" to "Made in Malaysia, for the World."

SHARVIN A. SUBRAMANIAM
Malaysian Organisation of
Pharmaceutical Industries

AKHBAR : NEW STRAITS TIMES
MUKA SURAT : 2
RUANGAN : NEWS / NATION

A strain on healthcare

Overcrowding, chronic staff shortages continue to plague our public hospitals

HERE lies the paradox: the government spends billions annually on public healthcare, providing quality treatment for the masses, but struggles with overcrowding, long waits, low doctors' salaries and high turnover of key medical staff. No problem with state-of-the-art equipment and medical expertise as our public hospitals are deservedly highly rated, even by foreigners. The problem is when public hospitals and clinics become too popular. Back in 2019, some 77 million people thronged public hospitals, a gigantic surge from 2008 of only 17 million. Five years on, with healthcare a major concern and private treatment beyond affordability, patient numbers have surged beyond the annual 77 million as public hospitals continue to battle with capacity.

Case in point: Johor Menteri Besar Datuk Onn Hafiz Ghazi, during a spot check, found the Kulai Health Clinic to be troubled by insufficient equipment, worn-out facilities at the waiting lounge and a lack of X-ray and ultrasound machines, while having to treat 1,000 patients daily — surely beyond its capacity. Onn Hafiz was spot on in one assessment: the Johor government will collaborate with the Health Ministry for solutions to extend — this is the operative phrase — “excellent healthcare services”. His pledge is underappreciated. On some days, the 146 public hospitals are populated by people on a tight budget looking for quality healthcare. It's conceivable that of all the government-endowed perks the populace enjoy, universal healthcare is paramount. Unless you have a high-premium medical insurance plan that pays for everything, a public hospital, even a semi-private facility, charges a nominal or tiny fraction compared with private hospitals. This is a true reflection of public hospitals' competence and reliability. The only difference? Government doctors, especially the younger generation, are lopsidedly remunerated, aggravated by cyclical shortages of specialists, nursing staff and beds, seen as an emblematic, generational and economic problem.

...of all the government-endowed perks the populace enjoy, universal healthcare is paramount.

Obviously, improved salaries, allowances and benefits will appease key medical staff, but the government cannot keep replenishing inevitable departures with new doctors serving their bonds or hire contractual, more expensive specialists. It didn't help that pleas for higher on-call allowances were rejected: technically, doctors can't be getting more than their other service brethren. This means a steady attrition with the irresistible lure from the private sector. Ironic then that the government skimps on other expenditures, but spares no expenses on healthcare maintenance and on new hospitals and clinics. And yet, it won't make exceptions for key medical staff's salaries. With overcrowding and shortage of beds remaining bothersome, aggravated by an uptick in migrant workers, this obviously translates into more and bigger facilities and boosting the number of medical staff. Still, Malaysians trust and rate their healthcare higher than some of the more advanced facilities of the United States and Britain. Foreigners agree. In 2019, Malaysia attracted 1.3 million international healthcare tourists splurging US\$380 million on hospital expenses. That's high confidence. Now, if only the bread-and-butter and infrastructure issues are satisfactorily resolved.