

Standard of Personnel in Private Aged Care Facility: Is MOH Ready?

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ABSTRACT:

Introduction An ageing population is a global phenomenon. Currently, the elderly population in Malaysia of 60 years and above is estimated to be 28.3 million in 2010 and will increase by 15% in 2030. Malaysia at present has 90 government aged facilities, 350 registered and more than 1000 unregistered in various states. Due to the restricted admission criteria and limited capacity of the government centre, many opted for private. Most of these private were unlicensed, which pose health threats and risks to the undiscerning public. To make it worse, they are also run by non-trained workers with a high rate of turnover, thus compromise the quality of care. Evidently, in 2018, a case of 31 residents in a privately senior centre was abandoned and five required hospital admission. The incident proves the need to revisit the standard of personnel in this centre hence of this study. Presently, those facilities are governed under Act 586 of the Ministry of Health (MOH) or Act 506 under the Ministry of Women Family and Community Development (MWFCD). **Methods** This qualitative approach was carried out using a questionnaire. It was categorized into three sections (education qualification of the personnel, problem faced by the operator and personnel ratio to care recipient) and distributed among 42 Person in Charge (PIC) in aged care facilities during a visit done by the Medical Legislation Section between 2018 and 2019. No stipulated criterias of the selected aged care facility were established before the visit. **Result** All PICs responded to the survey. Out of 42, only 4 (9.5%) registered under Act 586 and 29 (69.1%) registered under Act 506. The rest, 9 (21.4%), remains unregistered. Among the PICs, only 5 (11.9%) registered under the regulatory body but none of them specialized in geriatric care. Three major problems faced by the operators had been identified whereby 41 (97%) of the centres agreed to a lack of trained staff, and 34 (81%) also faced an administrative problem (registration, approval and license) due to the high standard set and 32 (76%) had financial constraints. Only 32 responded for the personnel ratio to care recipient, of which 31% were unable to fulfil the standard requirement. **Discussion** Keeping in view the rise of concern, the government established Majlis Perunding dan Penasihat Warga Emas Negara, whereby MOH is one committee member focusing on health and social services. Subsequently launched Pelan Tindakan Kementerian Kesihatan Malaysia, which advocates and promotes a comprehensive healthcare system and lifestyle catering aged population. Besides that, the establishment of care manager volunteers for surveillance and health management of the elderly as well as service integration in the community. The MOH also plans to broaden the role of community nurses in improving aged healthcare and in institutional settings. The Act 802, which gazetted in 2018, aims to provide a more holistic regulatory environment for elderly care by ensuring all private healthcare is licensed and regulated.

KEYWORDS: