

16th MEDICAL ASSOCIATION OF SOUTH EAST ASIAN NATIONS (MASEAN) MID-TERM MEETING 2015

Position Statement on

“Challenges in Training Our Future Healthcare Workforce”

The meeting by the Medical Association of South East Asian Nations (MASEAN) on 2 May 2015 at Badi'ah Hotel, Bandar Seri Begawan, Brunei Darussalam noted that:

1. There is a discrepancy in the supply and demand of junior doctors between member countries; while the majority of the member countries are facing shortage of junior doctors, one member country has an oversupply of interns leading to overloading of the internship programme;
2. Movement of doctors from rural to urban areas, lower to higher level facilities, public to private sectors and preventive to curative healthcare are current issues facing some member countries;
3. Member countries all recognized that the development of doctors' skills and abilities is vital in providing quality patient care and modernization of healthcare structure;
4. Member countries recognized that there are different training pathways for doctors (such as Government service doctors, private practice as GPs), each requiring its own structure of training;
5. The modern medical curriculum is outcome- and competence-based, structured and requires workplace-based assessments. Member countries have also introduced the seamless training, which has seen its own challenges;
6. The issues related to Electronic Health Records need to be further addressed, including training of doctors on EHR.
7. There is also a discrepancy in the supply and demand of other healthcare professionals such as nurses and pharmacists between member countries; while majority of the member countries are facing shortage of these professionals, one member country has an oversupply of these professionals.

SUMMARY

1. MASEAN acknowledges the discrepancy in the demand and supply of junior doctor manpower within its member countries; however, there is still a shortage of specialist manpower across all member countries.
2. Member countries are facing different challenges in the training of doctors, each member has introduced its own training guidelines and programme according to the needs of the country, with the ultimate aim of ensuring quality medical education.
3. Member countries acknowledge that medical curriculum has become outcome- and competence-based, more structured and requires workplace-based assessments.
4. Member countries recognize the need to harness new technology in teaching healthcare workforce.

5. Member countries recognize the challenges to the introduction of Electronic Health Records; including the need for training doctors in EHR.
6. Increased political and leadership in member countries are required to support long-term human resource development.
7. Member countries recognize that the retention of healthcare workers in areas where the deficits are most acute and greater balancing of the distribution of healthcare workers geographically within the member countries.