

Achieving Zero Unidentified Assets in the Medical Division of the Perlis State Health Department

QLL127

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KEMENTERIAN KESIHATAN MALAYSIA
JABATAN KESIHATAN NEGERI PERLIS

1. Selection of Opportunities for Improvement

Project Charter

Quality Problem :
Assets not identified during inspection despite the system and policies all in place that affected the service

Introduction :
1) Asset Inspection is the physical work process of assessing the condition of the asset to make sure the governance of that asset over its life cycle¹
2) 90 out of 186 assets (48.39%) in Medical Division were **unidentified** during inspection
3) JKPAK KKM Meeting (1/2022) showed Perlis performance only **38.78%** of assets updated in the SPPA system

What are we trying to accomplish?

General Objective :
To achieve zero unidentified asset during inspection

Specific Objective :
1) To verify the incidence of asset that cannot be identified during inspection.
2) To identify the contributing factors of the unidentified asset.
3) To formulate and implement the proper remedial measures.
4) To evaluate the effectiveness and the sustainability of the remedial measures.

Problem Prioritization – 'SMART' Criteria

No	Problems	S	M	A	R	T	Total
1	Inefficient booking system for department vehicles	19	18	16	20	15	88
2	Disruption of work processes due to a high staff turnover rate	19	21	19	14	17	90
3	Assets not identified during inspection despite the system and policies all in place that affected the service	24	22	23	24	20	113
4	Delayed action following complaints of any infrastructure damages within facilities	23	18	19	20	17	97
5	An inefficient booking system for IT equipment and technical support	22	20	19	16	17	94

Rating scale : 1 = Low 2 = Medium 3 = High 8 Group Members

Reasons for Selection

Seriousness

- 90 out of 186 assets (48.39%) in Medical Division were unidentified during inspection
- JKPAK KKM Meeting (1/2022) showed Perlis performance only 38.78% of assets updated in the Sistem Pemantauan Pengurusan Aset (SPPA)
- Failure in assets identified can cause :
 - financial loss to the government
 - disrupting the services
 - disgracing the image of the organization

Measurable

Assets can be identified physically and updated during asset inspection session using the SPPA and KEW.PA-11

Appropriateness

An efficient asset management is important. This will eventually lead to the optimum use of resources, time-saving, and reducing financial loss

Remediable

Remedial action could be implemented to improve the work process across all division

Timeliness

This study will be completed within intended time frame

2. Key Measures for Improvement

Problem Statement

Problem	Verification study (January to February 2023) : • 48.39% of assets in Medical Division can not be identified during inspection
Effect	Unidentified assets during inspection may cause bad impact to the organization, which may include financial loss, disruption of certain work processes as well as disgracing the image of organization.
Possible Cause	Multiple factors such as improper asset handling, knowledge of asset management among staff and limitation of SPPA system.
Aim of Study	This study is focused to achieve zero unidentified asset during inspection

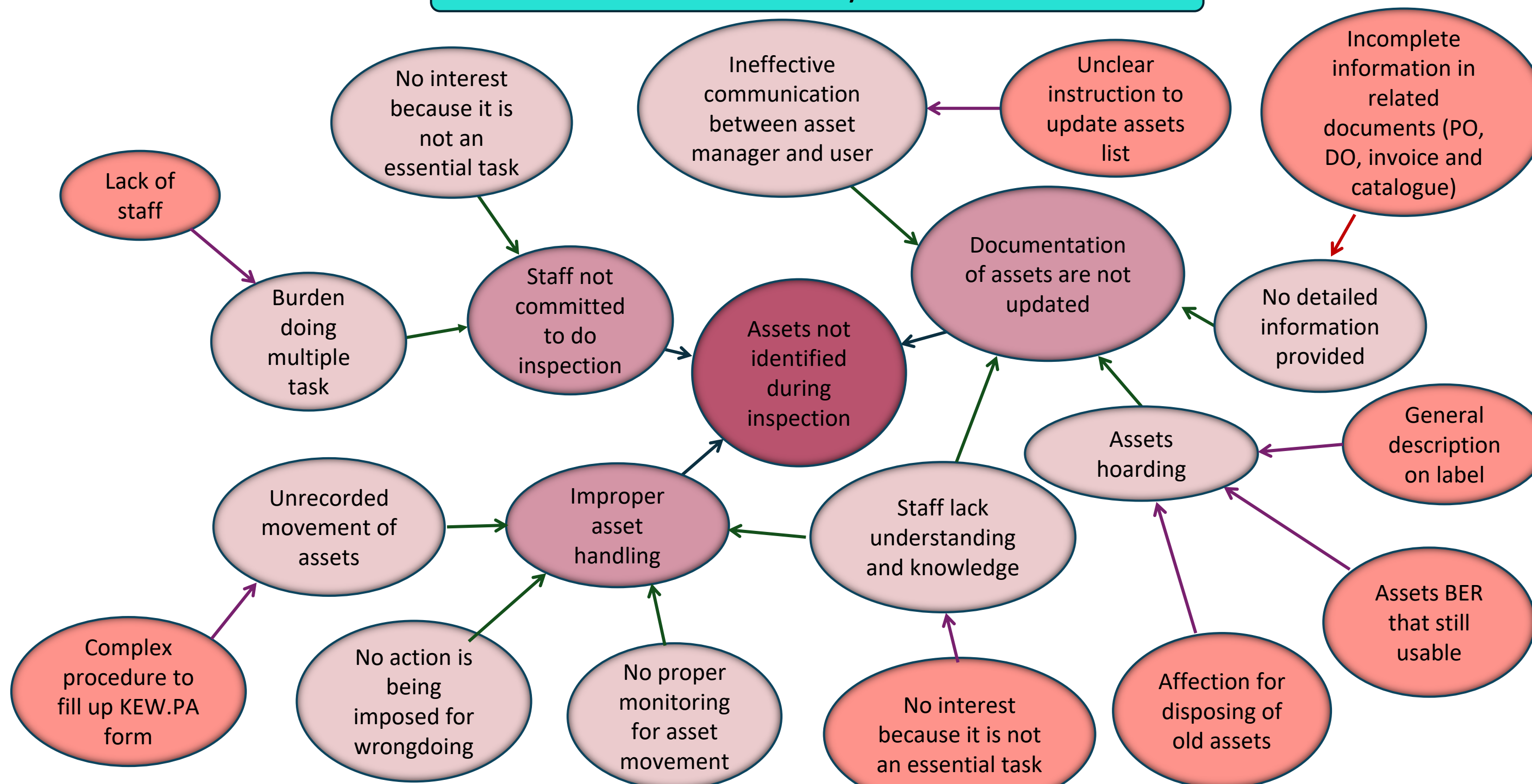
Indicator

Percentage of unidentified assets during inspection

$$\frac{\text{Total number of unidentified assets during inspection}}{\text{Total number of assets}} \times 100\%$$

Standard : 0%

Problem Analysis Chart

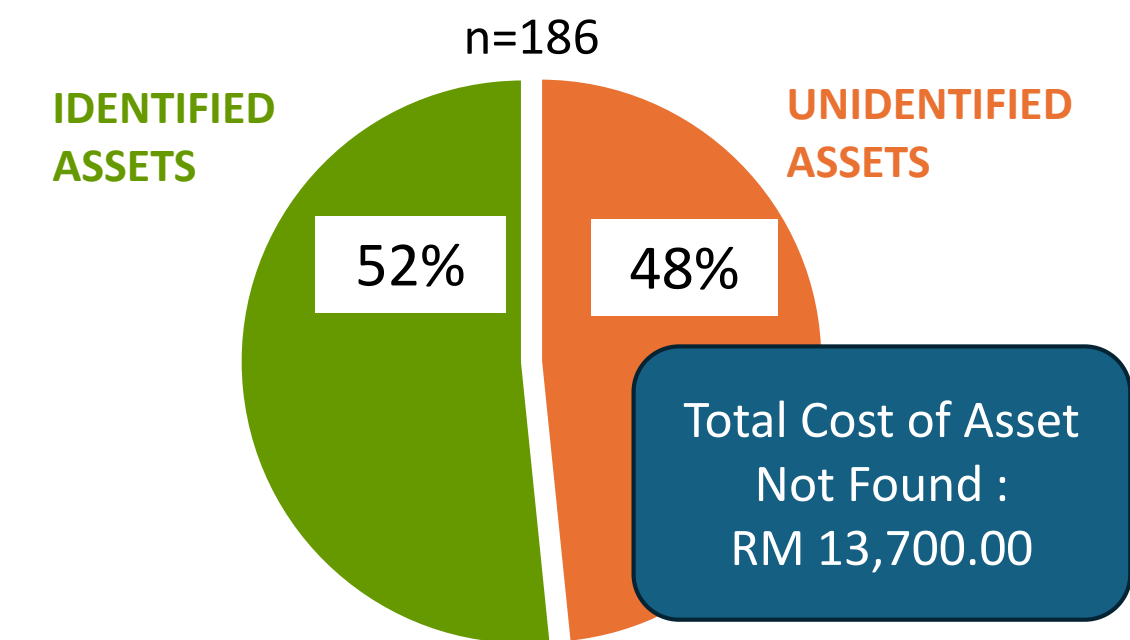


3. Process of Gathering Information

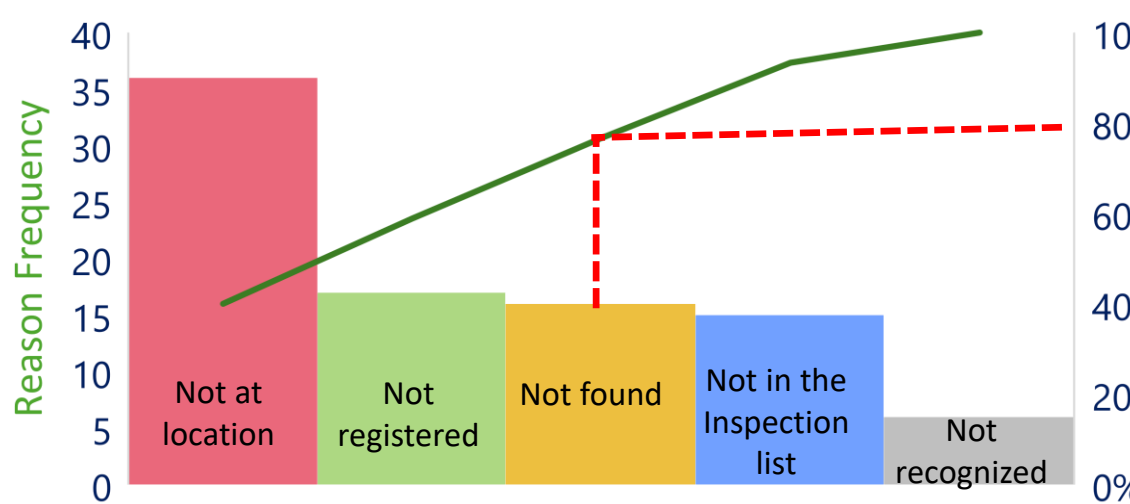
Study Design	Cross-sectional Study
Duration	Pre-intervention: 01 st January 2023 – 20 th February 2023 Post-intervention: Phase 1: 10 th March 2023 – 29 th August 2023 Phase 2: 15 th September 2023 – 25 th December 2023
Data Collection Tools	• Soal Selidik Sistem Pengurusan Aset JKN Perlis • Master Checklist of Asset Management in MS Excel
Inclusion Criteria	All registered movable assets (186)
Exclusion Criteria	Stocks and permanent assets

4. Analysis & Interpretation

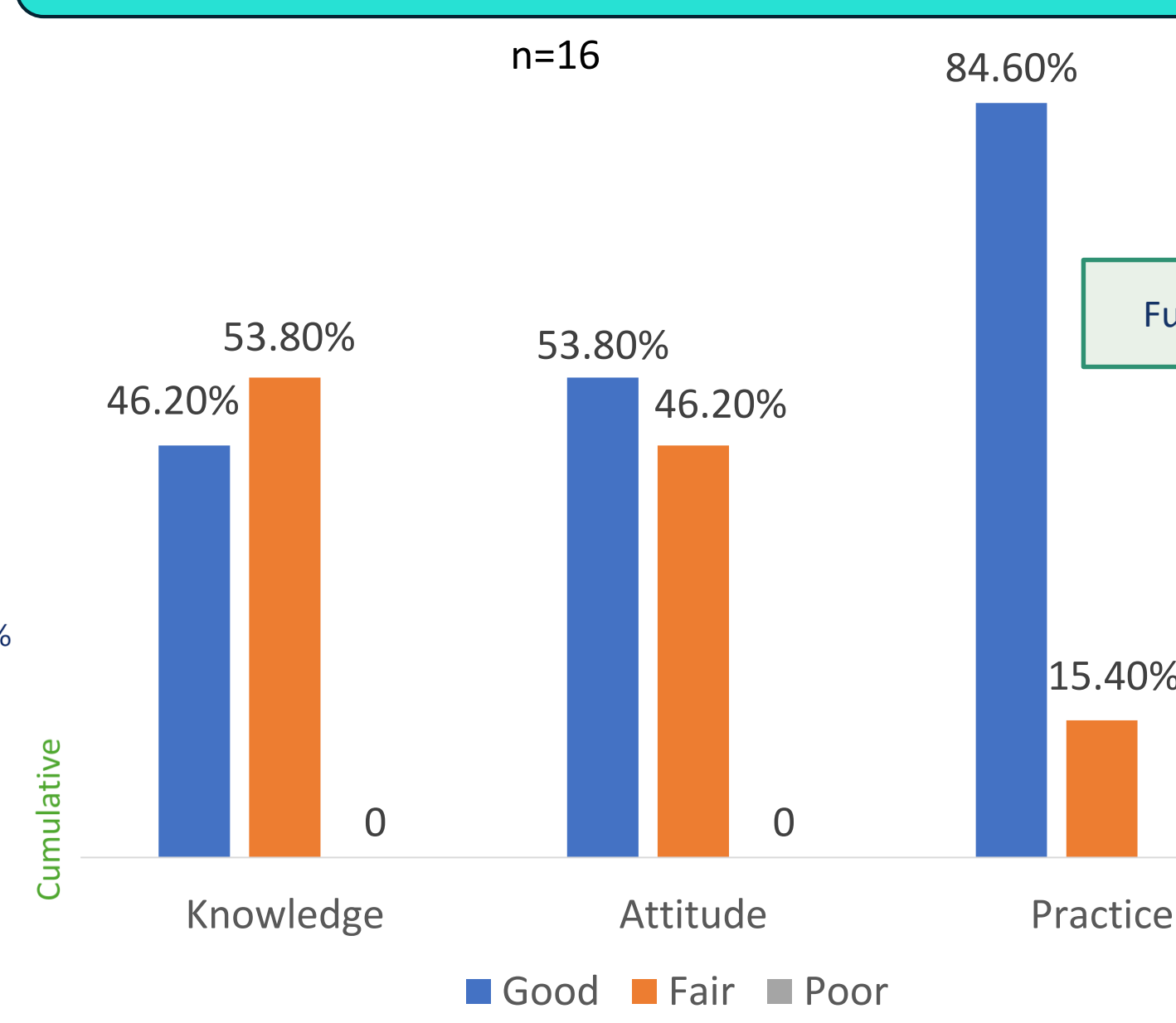
Pre-intervention Study Results



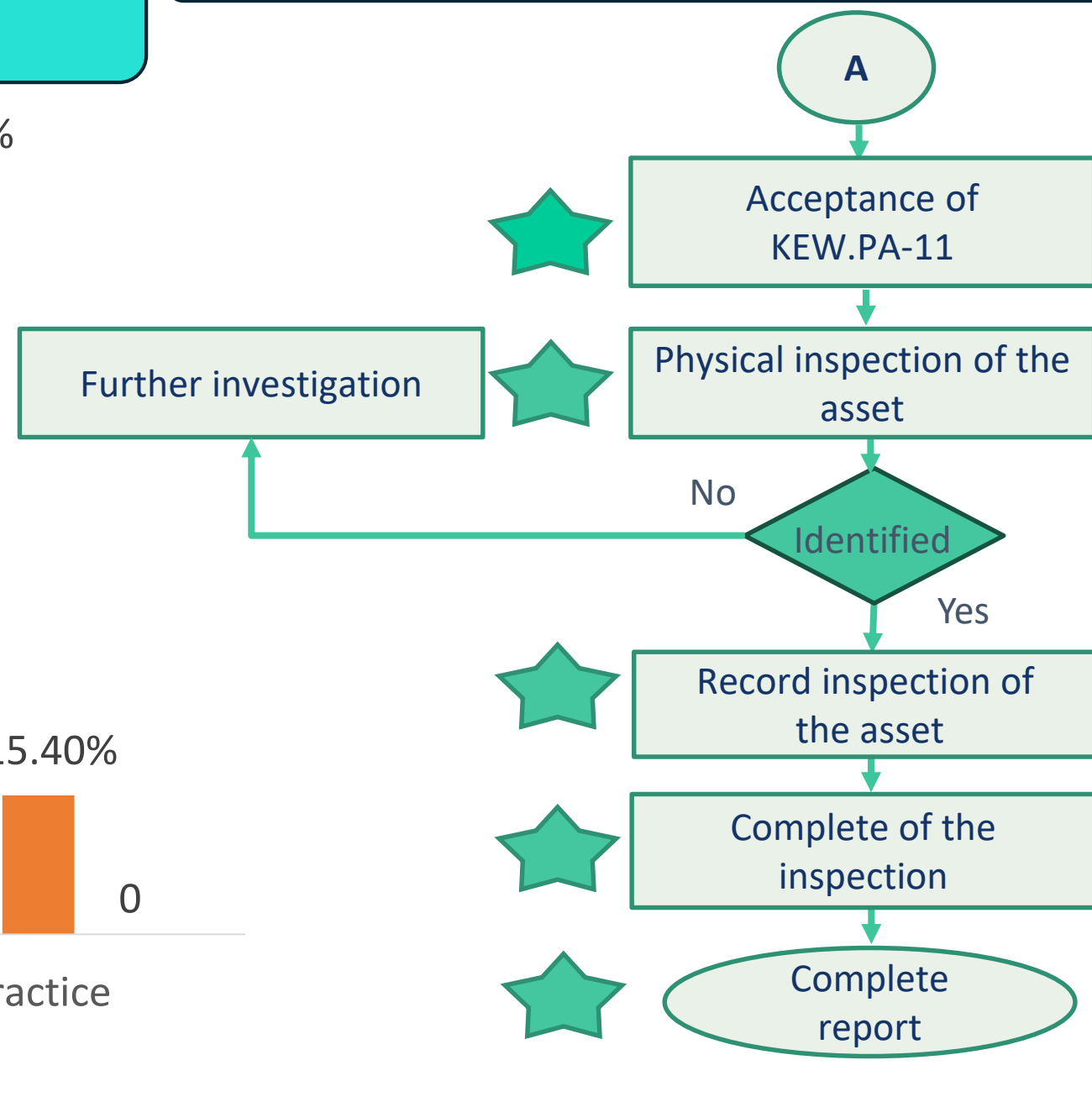
Pareto Chart



Knowledge, Attitude & Practice Level among All Staff in Medical Division



Process of Care



5. Strategies for Change

Strategy 1 : Introduction of Responsibility Matrix

Process	Deputy Director of Medical Division	Head of Unit	Asset Officer	User	Asset Manager of Asset Unit	Asset Inspection Officer
Acceptance of KEW.PA-11	I	I	RC	R	A	R
Physical inspection of the asset	IC	R	C	R	A	R
Record inspection of the asset	I	R	RC	R	RA	R
Complete of the inspection	AI	AI	RC	I	I	R
Complete report	I	I	R	I	A	I

R = Responsible; A = Accountable; C = Consulted; I = Informed

Strategy 2 : Introduction of Illustrated KEW.PA-7



Strategy 4 : Conduct Program Pemutihan Aset Alih Kerajaan



Strategy 6 : Asset Performance Indicator for All Asset Users

100% assets were at the location as listed in KEW.PA-7 form

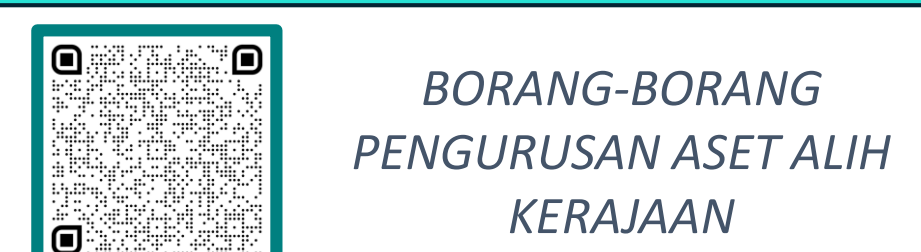
Strategy 3 : Establishment of Self Audit Checklist



Strategy 5 : Asset Management Training



Strategy 7 : Asset Management Innovation for User



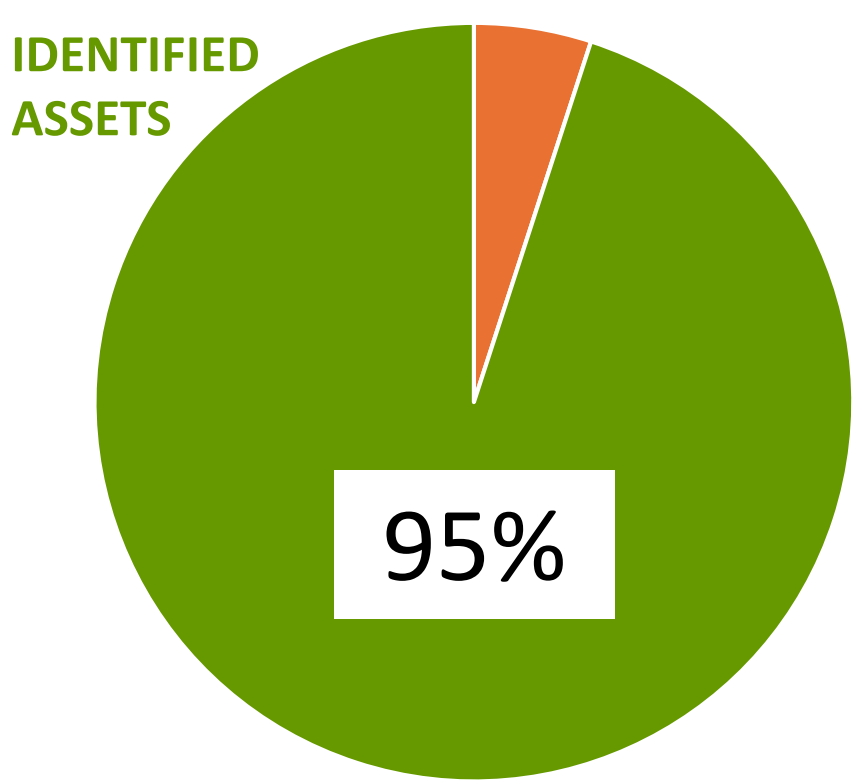
Overall Strategy : Empowerment of Technical Staff

Government Owned, Asset Department Manage, User Operate

Government Owned, Technical Department Manage, User Operate

6. Effect of Change

Post-intervention (Phase 1)



Post-intervention (Phase 2)



Model of Good Care

Process	Criteria	Standard	POST-INTERVENTION			
			Pre-intervention	Phase 1	Phase 2	
1. Acceptance of KEW.PA-11	The Asset Officer generates a latest KEW.PA-11 to be submitted to the Asset Inspection Officer.	100 %	100 %	100 %	100 %	
2. Physical inspection of the asset	Details of asset from KEW.PA-11 matched with KEW.PA-3 or KEW.PA-4, current KEW.PA-7 and physical asset at the location	100 %	60.22 %	92.47 %	100 %	
		Physically inspect all assets according to the KEW.PA-11 & KEW.PA-7 list based on 6R criteria:				
		- Right asset	100 %	81.18 %	94.62 %	100 %
		- Right user	100 %	82.26 %	95.20 %	100 %
		- Right quantity as per record	100 %	83.33 %	89.78 %	100 %
		- Right location	100 %	75.27 %	96.24 %	100 %
- Right function	100 %	93.55 %	97.31 %	100 %		
- Right record concordance with KEW.PA-3 & KEW.PA-4	100 %	0 %	75.27 %	100 %		
3. Record inspection of the asset	The Inspection Officer make sure details on KEW.PA-3 or KEW.PA-4 forms are completed	100 %	77.08 %	86.02 %	100 %	
4. Complete of the inspection	The Asset Inspection Officer fill out all the information in KEW.PA-11	100 %	100 %	100 %	100 %	
5. Complete report	KEW.PA-11 forms received from Inspection Officer were transcribed into SPPA system	100 %	100 %	100 %	100 %	

7. Conclusion

- Verification study found that 90 out of 186 assets (48.39%) in Medical Division were **unidentified** during inspection. (Answer the first objective)
- Multiple factors including improper work practice as well as knowledge of asset management among staff & limitation of SPPA system. (Answer the second objective)
- Strategies formulated include introduction of illustrated KEW.PA-7, create responsibility matrix, establishment of self audit checklist, conduct 'Program Pemutihan Aset Alih Kerajaan' & asset management training. (Answer the third objective)
- Post-intervention, the percentage of unidentified asset significantly fall to 0% after innovation & user performance indicator was implemented. (Answer the fourth objective)

8. The Next Step

- To extend this study to all divisions and facilities under the Perlis State Health Department
- To conduct frequent audit at every level
- To enhance collaboration between asset officers and multidisciplinary technical personnel
- To conduct regular education and monitoring until becomes a good culture within the working environment

9. References

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