

Awareness on Ex-Gratia Compensation Scheme Among Medical Department Staff in a Tertiary Government Hospital in Kuala Lumpur

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SUMMARY

The Ex-Gratia Compensation Scheme was introduced by the Government of Malaysia in 1994 to provide compensation, which is not covered by any prior legislation, for all its workers suffering from injuries and illnesses due to work. Despite more than ten years of implementation, the submission for claims is still minimal and there is an impression that awareness on the provision of Ex-Gratia benefit among government employees, especially health care staff, is poor. A cross sectional survey was conducted at a medical department of a government hospital in Kuala Lumpur to assess the knowledge and awareness level on Ex-Gratia among a representative group of front line health care workers. The results show that the respondents' knowledge on Ex-Gratia is generally poor as compared to knowledge on the Social Security (SOCSO) Schemes. Majority of the respondents are unsure whether they will be compensated in case of occupational illness and injuries. They also do not know what kind of compensation scheme they are currently eligible. There is an urgent need for the Treasury and health care managers to expand the knowledge and awareness on Ex-Gratia among health care workers.

KEY WORDS:

Ex-Gratia, Worker's compensation scheme, Health care worker, Awareness and knowledge

INTRODUCTION

The term "Ex-Gratia" in Latin means "compensation payments by government or organisation when compensating victims of an event such as an accident or similar, but not to admit liability to pay compensation, or for causing the event"¹. In Malaysia, the Treasury circulars' definition means "as compensation, not bounded by legislation"²⁻³.

The Ex-Gratia Compensation Scheme (Ex-Gratia) was introduced in 1994 following the government's consideration to provide compensation which is not covered by any prior legislation to all its workers suffering from accidents and injuries including oppression by bad social elements while carrying out official duties²⁻³. The scheme was revised and improved in 2001 to increase the coverage with better benefits³. The scheme is administered by the Treasury and the two circulars, Treasury Circular No. 13, 1994² and Treasury Circular No. 7, 2001³ are the reference documents for its implementation.

The scheme covers all government servants except those in the military, police and fire services; those engaged under services with government Trustee Fund (Tabung Amanah); attached officers and daily paid workers who have been covered under different schemes accordingly. It is applicable to all state and local governments as well as statutory bodies subject to acceptability and applicability at local settings respectively²⁻⁴.

Awareness among the government officers on the provision of Ex-Gratia is still poor. Only a total of 349 Ex-Gratia applications have been received by the Ex-Gratia Secretariat since 1995. The average annual number of cases submitted for compensation claims from 2000 to 2007 is only 30. These applications were received from among the average total of about one million government employees⁵. Among those, 320 cases have been processed and 29 cases are still pending for further action. Majority of the applications were for compensation on death due to road traffic accidents. The average allocation per year is about RM1.5 million.

This paper is intended to present the result of a brief survey on Ex-Gratia knowledge among a group of health care workers in one of the government hospitals in Kuala Lumpur. The objective of this study is to assess the knowledge of Ex-Gratia and worker's compensation benefits among a representative group of front line medical personnel who are consistently at risk of contracting occupational related injuries and diseases.

MATERIALS AND METHODS

The medical department of a government hospital in Kuala Lumpur was selected for this study. The reason for selecting the medical department is because front line health care workers, working in such a department are exposed to higher risk of contracting occupational injuries and diseases. Their knowledge of worker's compensation benefits is expected to be higher than the average. Seven out of 14 medical wards were selected randomly and all front line medical personnel working on the day of study in the selected wards ranging from consultant specialist to attendant were recruited into the study.

A self administered survey questionnaire was created in two languages (Malay and English) for the purpose of this study. The original questionnaire was created by the author and

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phrased in English, and was submitted to iterative forward-backward procedures by another person with similar education background, knowledge and language proficiency to get its Malay translation. The questionnaire was pretested on ten medical personnel ranging from specialist to attendant, in another hospital. It was found to be easily understood and straight forward. Validity of the questionnaire was not performed because there is no "gold standard" to be compared against in the survey regarding awareness and knowledge.

The questionnaire was made anonymous and consists of two parts – questions on sociodemographic and questions on compensation schemes. The sociodemographic component consists of gender, employment status, job title and duration of employment, with the intention to link their knowledge to their nature of work. There are seven questions assessing the awareness on government worker's compensation scheme, knowledge on Social Security Schemes (SOCSO)⁶, Ex-Gratia and awareness on types of compensation they are currently entitled.

The self administered questionnaire was distributed to all medical staff in the randomly selected seven medical wards. Verbal consent was obtained from all subjects before administration of the questionnaire. All subjects were given ten minutes to complete the questionnaire and the completed questionnaires were collected on the spot.

The data were entered, processed and analysed using Statistical Package for Social Science (SPSS) version 15.0. Data entry validation was performed using double entry method using Epi Info version 6.0. McNemar test was utilised to compare the proportion of correct answers for Ex-Gratia and SOCSO where indicated. The correct answer score was calculated as percentage of correct response to total items under each question related to Ex-Gratia and SOCSO. Paired t-test was used to assess the difference in the correct answer scores obtained for questions related to Ex-Gratia and SOCSO knowledge respectively. The significant level was set at 0.05 for all statistical tests.

RESULTS

The total sample recruited was 77 and response rate was 100%. The characteristics of the respondents are shown in Table I. Duration of service ranges from five months to 30 years with the median of three years.

When asked whether they will be compensated by the government if they suffer from occupational injury, accident or disease while at work, 32.5 – 39.0% answered that they will be compensated, 16.9 – 19.5% answered the opposite, whereas the majority of them (42.9 – 50.6%) were unsure of the answer. Among those who answered yes, only 5.7% know that they will be compensated under Ex-Gratia. Majority of them (62.9%) were unsure of the kind of compensation scheme they will be eligible. There are 22.9% of them who thought that they will be compensated by SOCSO. Table II shows the responses to the question related to awareness on compensation by government in case of contracting occupational injury, accident or disease.

All respondents had heard about SOCSO but only 8% had heard about Ex-Gratia. Seventy-six out of 77 participants (98.7%) responded to at least one item for questions related to SOCSO whereas only 27.3% responded on Ex-Gratia. The knowledge of Ex-Gratia as compared to SOCSO among the respondents is shown in Table III. The correct answer score for knowledge on SOCSO is significantly higher than Ex-Gratia, with the mean (standard deviation) values of 66.2% (15.5%) and 52.4% (10.3%) respectively ($p < 0.001$, 95% confidence interval of difference = 10.5 – 17.1%).

Table IV shows the respondents' knowledge on their eligibility to different types of compensation schemes in case of occupational injury and disease. The response rate to the items on occupational injury and disease are 98.7% and 88.3% respectively. Among these, 45.5% bought their own insurance to cover for occupational injury or accident and 54.5% for disease.

DISCUSSION

The knowledge on Ex-Gratia is seriously lacking among health care workers. Only 11.7% know that Ex-Gratia is a compensation scheme for occupational accident and injury. Even less (5.2%) know that Ex-Gratia also covers occupational diseases. Only 9.1% know that Ex-Gratia is for government employees and 7.8% know that they do not need to contribute in order to get benefit under Ex-Gratia. Majority of the subjects, 72.7%, did not know anything about Ex-Gratia in terms of what it is, coverage and need for contribution. In general, the knowledge for SOCSO is significantly higher than that of Ex-Gratia.

Although 96.1% of the respondents did not select the answer that Ex-Gratia is meant for private employees only, only 9.1% knew exactly that the scheme is meant for government employees. Likewise, although none of them said contribution is needed to enjoy the benefit of Ex-Gratia, only 7.8% knew exactly that Ex-Gratia does not require any contribution from government employees. Hence, although there is high proportion of respondents who correctly did not select item 3 and 8 (refer Table III) as their knowledge on Ex-Gratia, it can also mean that they did not know whether Ex-Gratia is a future saving scheme and includes invalidity benefits or not.

Table I: Characteristics of respondents

Characteristics	Frequency, n (%)
Gender	
Male	16 (20.8)
Female	61 (79.2)
Employment status	
Permanent	74 (96.1)
Contract	1 (1.3)
Daily paid	1 (1.3)
Unsure	1 (1.3)
Post	
Specialist	7 (9.1)
Medical officer	21 (27.3)
Sister	21 (27.3)
Staff nurse	34 (44.2)
Attendant	11 (14.3)

Table II: Awareness on compensation by government in case of contracting occupational injury, accident or disease

Type of occupational illness	Response to whether or not getting compensation from government, n (%)		
	Yes	No	Unsure
Occupational injury	25 (32.5)	13 (16.9)	39 (50.6)
Occupational accident	30 (39.0)	14 (18.2)	33 (42.9)
Occupational diseases	26 (33.8)	15 (19.5)	36 (46.8)

Table III: Knowledge on Ex-Gratia as compare to SOCSO

Knowledge	Answer correctly for, n (%)		p value*
	Ex-Gratia	SOCSO	
1. The compensation scheme is for occupational accident and injury	9 (11.7)	70 (90.9)	< 0.001
2. The compensation scheme is for occupational disease	4 (5.2)	40 (51.9)	< 0.001
3. The scheme is for future saving	74 (96.1)	63 (81.8)	0.007
4. The scheme is meant for private employee only	74 (96.1)	34 (44.2)	< 0.001
5. The scheme is meant for government employee only	7 (9.1)	63 (81.8)	< 0.001
6. Contribution is needed to enjoy the benefit of the scheme	77 (100.0)	27 (35.1)	γ
7. No contribution is need to enjoy the benefit of the scheme	6 (7.8)	71 (92.2)	< 0.001
8. The compensation includes invalidity	72 (93.5)	40 (51.9)	< 0.001

*McNemar test with cumulative binomial distribution is used when discordant pairs is less than or equal to 25
 γ P-value cannot be calculated because answer for Ex-Gratia is constant among the respondents

Table IV: Respondents' knowledge on their eligibility to different types of compensation schemes in case of occupational injury and disease

Type of worker's compensation scheme which is eligible to respondents	Answer correctly for, n (%)		p value*
	Occupational injury and accident	Occupational disease	
SOCSO	47 (61.0)	50 (64.9)	0.581
Ex-Gratia	5 (6.5)	5 (6.5)	1.000
EPF	54 (70.1)	58 (75.3)	0.219

The knowledge of the respondents in terms of their rights for correct compensation was poor. Only 32.5 – 39.0% of the respondents felt that they will be compensated by government if they suffered from occupational injury, accident or disease. Among those who answered yes, only 5.7% know correctly that they will be compensated under Ex-Gratia, whereas 22.9% of the respondents thought they will be compensated under the SOCSO scheme.

The respondents had poor knowledge on the type of compensation scheme they are eligible as a government servant. Thirty-nine percent and 35.1% of the respondents thought that they are eligible for SOCSO scheme in case of occupational injury or accident and occupational disease respectively. Only 6.5% knew that they are eligible to be compensated under Ex-Gratia. Although large number of respondents did not select Employee Provident Fund (EPF) as their eligible compensation scheme, they might not know exactly that EPF is not meant for compensation. Due to poor knowledge on their rights and eligibility to available worker's compensation scheme, 54.5% of the subjects bought their own insurance to cover for occupational injury or accident and 45.5% for occupational disease. This shows that they are concerned about compensation towards accidents and injuries at work and not merely ignorance.

The findings of this study cannot be generalised to the findings to all health care workers in Malaysia because the samples were only selected from a medical department of one hospital. However, the findings do provide an idea on the estimated level of knowledge on Ex-Gratia among health care workers in government hospitals. The current group of respondents are expected to have a better knowledge on

occupational injuries compensation benefits than other health care workers because they are highly susceptible to contracting occupational injuries and diseases. It is felt that the knowledge on Ex-Gratia among these other groups of health care workers is either worse or the same as the current group of respondents.

Literature related to the assessment of the awareness level among workers on workers' compensation schemes is limited. In Australia, Quinlan and Mayhew⁹ reviewed the literature and reported that workers in "precarious" employment (unskilled workers, occupationally mobile, self-employed, or geographically isolated workers) were typically less aware of workers' compensation and the benefits provided. The authors also referred to an Australian Bureau of Statistics study of 8,800 employed people in New South Wales and found that although 82% of employed persons knew they were covered by workers' compensation, 47% were not sure as to which system (state, federal, or other specified scheme) covered them. In United States, the Social Security Administration has conducted a national survey among the general public on their knowledge on Social Security programs through a Public Understanding Measurement System, involving 12,000 respondents from 1993 till 2000 and found that 56.6% of the public is knowledgeable about Social Security programs¹⁰. From the studies mentioned above, it is noted that the average percentage of workers knowledgeable on their entitlement to specific workers' compensation benefits should be about 50%. Hence, it is felt that the level of awareness on Ex-Gratia compensation scheme among the subjects in current study was too low given the education level of the respondents.

Underreporting of workers' compensation claims is common in other countries. The reasons for underreporting are very diverse, including sociodemographic (age, gender, marital status, education level)^{11,12} employment (length of service, types of industry, current income)¹³ and health related factors (treating physician, current health status, severity of illness)^{13,14}. Very few literature actually report lack of awareness as a reason for underreporting. Besides, there is no available published literature on the awareness level of workers' compensation benefits specific to the government sector. Hence, it is very difficult to compare the result from other studies to derive any solid conclusion.

A possible reason for lack of comparable literature is the differences in workers' compensation system between Malaysia and other countries especially the developed nations. For example, developed countries such as United Kingdom, Sweden, Ireland, Australia and New Zealand do not have two separate compensation system for public and private sectors^{15,16}. These countries have either social insurance and/or social assistance programs which cover all residents regardless of employment sectors. Singapore has a single workers' compensation system provided under Work Injury Compensation Act 2008 which covers everyone including government servants, except self-employed persons, independent contractors, domestic workers, members of the Singapore Armed Forces, officers of the Singapore Police Force, the Central Narcotics Bureau and the Singapore Prisons Service¹⁷. On the other hand, although workers compensation system of most Asian countries¹⁵ such as Indonesia, India, Thailand, Japan and Philippines are almost similar to Malaysia in the sense that they also have special compensation system for civil servants which is separated from social security provision in private sectors, the provision of special workers compensation benefits for civil servants is again very different from Malaysia. For instance, in Japan, the civil servants form a nation wide Government Employees' Mutual Aid Association which provides occupation-based health insurance to all the members^{18,19}. In Indonesia, both public and private servants contribute to different insurance schemes (Askes program, Taspen program, Jamsostek program) in order to enjoy health care services and employment injury compensation^{20,21}. However, public servants have an opportunity of having integrated package of conditions of service and social benefits, while private sector workers receive only very limited protection. In general, it is noted that most of the workers' compensation schemes in other countries requires some form of contribution by the beneficiaries. In Malaysia, Ex-Gratia is given to the civil servants without contribution and this could be a reason for low awareness level among them.

CONCLUSION

This study gives an idea on the level of knowledge on Ex-Gratia compensation scheme among health care workers in Malaysia. It is considered the right of an employee to be made aware and know about the type of worker's compensation scheme they are entitled in case of any occupational injuries and illnesses⁷⁻⁸. In general, the awareness level and knowledge of Ex-Gratia among health care personnel is poor. The Treasury together with respective health care managers should work together to improve the

awareness on Ex-Gratia scheme for all government health care workers. There is no benefit for further large scale survey on knowledge of Ex-Gratia, as the emphasis should be on conducting as many awareness campaigns as possible. Ex-Gratia is considered an acceptable worker's compensation scheme for the government sector for the time being with the urgent need for awareness expansion.

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