



KEMENTERIAN EKONOMI
JABATAN PERANGKAAN MALAYSIA

ISSN 2637-1421



9 772637 142002



STATISTIK EKONOMI TAHUNAN

Annual Economic Statistics

2022

Perkhidmatan Kesihatan Swasta dan Kerja Sosial
Private Health and Social Work Services

JABATAN PERANGKAAN MALAYSIA
DEPARTMENT OF STATISTICS MALAYSIA

Muka surat ini sengaja dibiarkan kosong.
This page is deliberately left blank.



**KEMENTERIAN EKONOMI
JABATAN PERANGKAAN MALAYSIA**

STATISTIK EKONOMI TAHUNAN *ANNUAL ECONOMIC STATISTICS* **2022**

PERKHIDMATAN KESIHATAN SWASTA DAN KERJA SOSIAL
PRIVATE HEALTH AND SOCIAL WORK SERVICES

Pemakluman

Jabatan Perangkaan Malaysia (DOSM) akan menjalankan Banci Ekonomi pada tahun 2023. DOSM amat menghargai kerjasama daripada responden untuk memberikan maklumat kepada DOSM serta menjayakan banci ini. Sila layari www.dosm.gov.my untuk maklumat lanjut.

DOSM telah melancarkan OpenDOSM NextGen sebagai platform yang menyediakan katalog data dan visualisasi bagi memudahkan pengguna menganalisis pelbagai jenis data. OpenDOSM NextGen ialah medium perkongsian data sumber terbuka dan boleh diakses melalui portal <https://open.dosm.gov.my>.

Dimaklumkan bahawa Kerajaan Malaysia telah mengisytiharkan Hari Statistik Negara (MyStats Day) pada 20 Oktober setiap tahun. Tema sambutan MyStats Day adalah “*Connecting the World with Data We Can Trust*”.

Announcement

The Department of Statistics Malaysia (DOSM) will conduct the Economic Census in 2023. DOSM greatly appreciates the cooperation from respondents to provide information with DOSM and make this census a success. Please visit www.dosm.gov.my for more information.

DOSM has launched OpenDOSM NextGen as a platform that provides a catalogue of data and visualisation that facilitates users in analysing various types of data. OpenDOSM NextGen is an open source data sharing medium and accessible through <https://open.dosm.gov.my> portal.

*Please be informed that the Government of Malaysia has declared National Statistics Day (MyStats Day) on October 20 each year. MyStats Day theme is “*Connecting the World with Data We Can Trust*”.*

Diterbitkan dan dicetak oleh / *Published and printed by:*

Jabatan Perangkaan Malaysia

Department of Statistics Malaysia

Blok C6, Kompleks C,

Pusat Pentadbiran Kerajaan Persekutuan,

62514 Putrajaya,

MALAYSIA

Tel. : 03-8885 7000

Faks : 03-8888 9248

Portal : <https://www.dosm.gov.my>

Facebook / Twitter / Instagram / Youtube : StatsMalaysia

Emel / Email : info@dosm.gov.my (pertanyaan umum / general enquiries)
data@dosm.gov.my (pertanyaan & permintaan data / data request & enquiries)

Harga / Price : RM25.00

Diterbitkan pada Mac 2023 / *Published in March 2023*

Hakcipta terpelihara. All rights reserved.

Tiada bahagian daripada terbitan ini boleh diterbitkan semula, disimpan untuk pengeluaran atau ditukar dalam apa-apa bentuk atau alat apa jua pun kecuali setelah mendapat kebenaran daripada Jabatan Perangkaan Malaysia. Pengguna yang mengeluarkan sebarang maklumat dari terbitan ini sama ada yang asal atau diolah semula hendaklah meletakkan kenyataan berikut:

“Sumber: Jabatan Perangkaan Malaysia”

No part of this publication may be reproduced or distributed in any form or by any means or stored in database without the prior written permission from Department of Statistics Malaysia.

Users reproducing content of this publication with or without adaptation should quote the following:

“Source: Department of Statistics Malaysia”

ISSN 2637 - 1421

KATA PENGANTAR

Penerbitan Statistik Ekonomi Tahunan 2022, Kesihatan Swasta dan Kerja Sosial memaparkan statistik utama yang diperolehi daripada Survei Ekonomi Tahunan 2022 bagi tahun rujukan 2021. Liputan industri yang digunakan adalah berdasarkan Seksyen Q; aktiviti kesihatan kemanusiaan dan kerja sosial, Klasifikasi Industri Malaysia (MSIC) 2008 Ver. 1.0, selaras dengan *International Standard Industrial Classification of All Economic Activities (ISIC), Revision 4*.

Statistik yang dilaporkan dalam penerbitan ini adalah nilai output kasar, nilai input perantaraan, nilai ditambah, bilangan pekerja, gaji & upah dan nilai harta tetap. Statistik ini juga boleh digunakan sebagai sumber rujukan oleh kerajaan, ahli ekonomi, ahli akademik, pihak swasta serta individu.

Penerbitan ini mengandungi tiga bahagian utama. Bahagian pertama membentangkan infografik dan ringkasan penemuan. Bahagian kedua memuatkan jadual terperinci manakala di bahagian ketiga menerangkan aspek teknikal bagi skop & liputan, konsep & definisi untuk memudahkan pengguna memahami statistik yang diterbitkan.

Jabatan Perangkaan Malaysia merakamkan setinggi-tinggi penghargaan atas kerjasama dan sumbangan yang diberikan oleh semua pihak dalam menjayakan survei ini. Setiap maklum balas dan cadangan untuk penambahbaikan penerbitan ini pada masa akan datang amatlah dihargai.

DATO' SRI DR. MOHD UZIR MAHIDIN

Ketua Perangkawan Malaysia

Mac 2023

PREFACE

The Annual Economic Statistics 2022, Private Health and Social Work, presents main statistics on private health and social work services of Annual Economic Survey, 2022 for reference year 2021. The statistics represent industry as classified in Section Q; human health and social work services, Malaysia Standard Industrial Classification (MSIC) 2008 Ver. 1.0, in accordance with the International Standard Industrial Classification of All Economic Activities (ISIC), Revision 4.

Statistics reported in this publication are value of gross output, intermediate input, value added, numbers of persons engaged, salaries & wages and value of fixed assets. These statistics are also useful as a source of reference by government agencies, economists, academicians, private sectors and individuals.

This publication is divided into three main parts. The first part displays the infographic and summary of findings. The second part shows the detailed statistical table, meanwhile the third part describes technical aspects on scope & coverage and concepts & definitions to assist users in understanding the published statistics.

Department of Statistics Malaysia (DOSM) gratefully acknowledges the co-operation and contribution rendered by all parties in making this publication a success. Every feedback and suggestion towards improving future publications is highly appreciated.

DATO' SRI DR. MOHD UZIR MAHIDIN

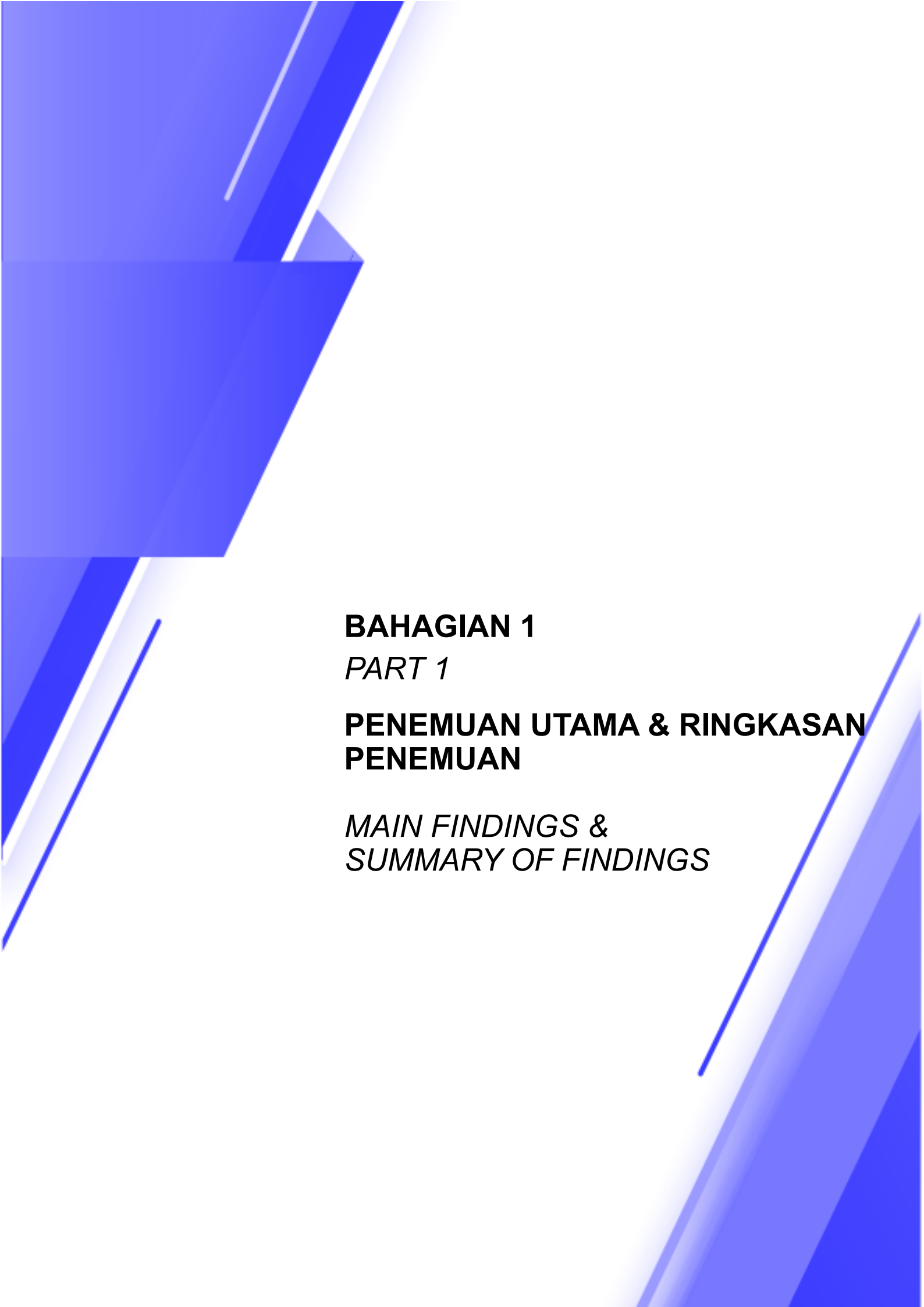
Chief Statistician Malaysia

March 2023

KANDUNGAN / CONTENTS

	Muka surat Page
Kata pengantar <i>Preface</i>	i
Kandungan <i>Contents</i>	iii
BAHAGIAN 1: Penemuan Utama dan Ringkasan Penemuan <i>PART 1 : Main Findings and Summary of Findings</i>	7
BAHAGIAN 2: Jadual <i>PART 2 : Tables</i>	
1 Statistik Utama Perkhidmatan Kesihatan Swasta dan Kerja Sosial, 2015, 2017- 2021 <i>Principal Statistics of Private Health and Social Work Services, 2015, 2017-2021</i>	23
1.1 Statistik Utama Perkhidmatan Kesihatan Swasta dan Kerja Sosial mengikut Aktiviti, 2021 <i>Principal Statistics of Private Health and Social Work Services by Activities, 2021</i>	24
2 Statistik Utama Perkhidmatan Kesihatan Swasta dan Kerja Sosial mengikut Negeri, 2021 <i>Principal Statistics of Private Health and Social Work Services by State, 2021</i>	26
3 Bilangan Pekerja dan Gaji & Upah Perkhidmatan Kesihatan Swasta dan Kerja Sosial mengikut Kategori Pekerja, 2021 <i>Number of Persons Engaged and Salaries & Wages of Private Health and Social Work Services by Category of Workers, 2021</i>	27
4 Bilangan Pekerja dan Gaji & Upah Perkhidmatan Kesihatan Swasta dan Kerja Sosial mengikut Kategori Kemahiran dan Jantina, 2021 <i>Number of Persons Engaged and Salaries & Wages of Private Health and Social Work Services by Category of Skills and Sex, 2021</i>	28
5 Perbelanjaan Modal dan Nilai Harta Tetap Perkhidmatan Kesihatan Swasta dan Kerja Sosial , 2021 <i>Capital Expenditure and Value of Fixed Asset of Private Health and Social Work Services, 2021</i>	29
BAHAGIAN 3 : Nota Teknikal <i>PART 3 : Technical Notes</i>	33
Lampiran <i>Appendix</i>	55

Muka surat ini sengaja dibiarkan kosong.
This page is deliberately left blank.



BAHAGIAN 1

PART 1

PENEMUAN UTAMA & RINGKASAN PENEMUAN

MAIN FINDINGS & SUMMARY OF FINDINGS

Muka surat ini sengaja dibiarkan kosong.
This page is deliberately left blank.



KEMENTERIAN EKONOMI
JABATAN PERANGKAAN MALAYSIA



MALAYSIA
MADANI

AS 2022

STATISTIK EKONOMI TAHUNAN, 2022 KESIHATAN SWASTA DAN KERJA SOSIAL

PENEMUAN UTAMA

Nilai Output Kasar



2021: RM25.4 bilion
2020: RM23.3 bilion
▲ 8.7%

Nilai Input Perantaraan



2021: RM13.4 bilion
2020: RM12.3 bilion
▲ 9.4%

Nilai Ditambah



2021: RM12.0 bilion
2020: RM11.1 bilion
▲ 7.9%

Bilangan Pekerja



2021: 155,543 orang
2020: 155,150 orang
▲ 0.3%

Gaji & Upah Dibayar



2021: RM5.6 bilion
2020: RM5.3 bilion
▲ 5.5%

Nilai Harta Tetap



2021: RM12.2 bilion
2020: RM11.7 bilion
▲ 4.9%

Perubahan Peratusan (%): Tahun ke Tahun





MINISTRY OF ECONOMY
DEPARTMENT OF STATISTICS MALAYSIA

BK23
BANKI EKONOMI 2023
DATA PEMANGKIN EKONOMI



**MALAYSIA
MADANI**

AS 2022

ANNUAL ECONOMIC STATISTICS, 2022 PRIVATE HEALTH AND SOCIAL WORK

MAIN FINDINGS

Value of Gross Output



2021: RM25.4 billion
2020: RM23.3 billion
▲ 8.7%

Value of Intermediate Input



2021: RM13.4 billion
2020: RM12.3 billion
▲ 9.4%

Value Added



2021: RM12.0 billion
2020: RM11.1 billion
▲ 7.9%

Number of Persons Engaged



2021: 155,543 persons
2020: 155,150 persons
▲ 0.3%

Salaries & Wages Paid



2021: RM5.6 billion
2020: RM5.3 billion
▲ 5.5%

Value of Fixed Assets



2021: RM12.2 billion
2020: RM11.7 billion
▲ 4.9%

Percentage change (%): Year-on-Year



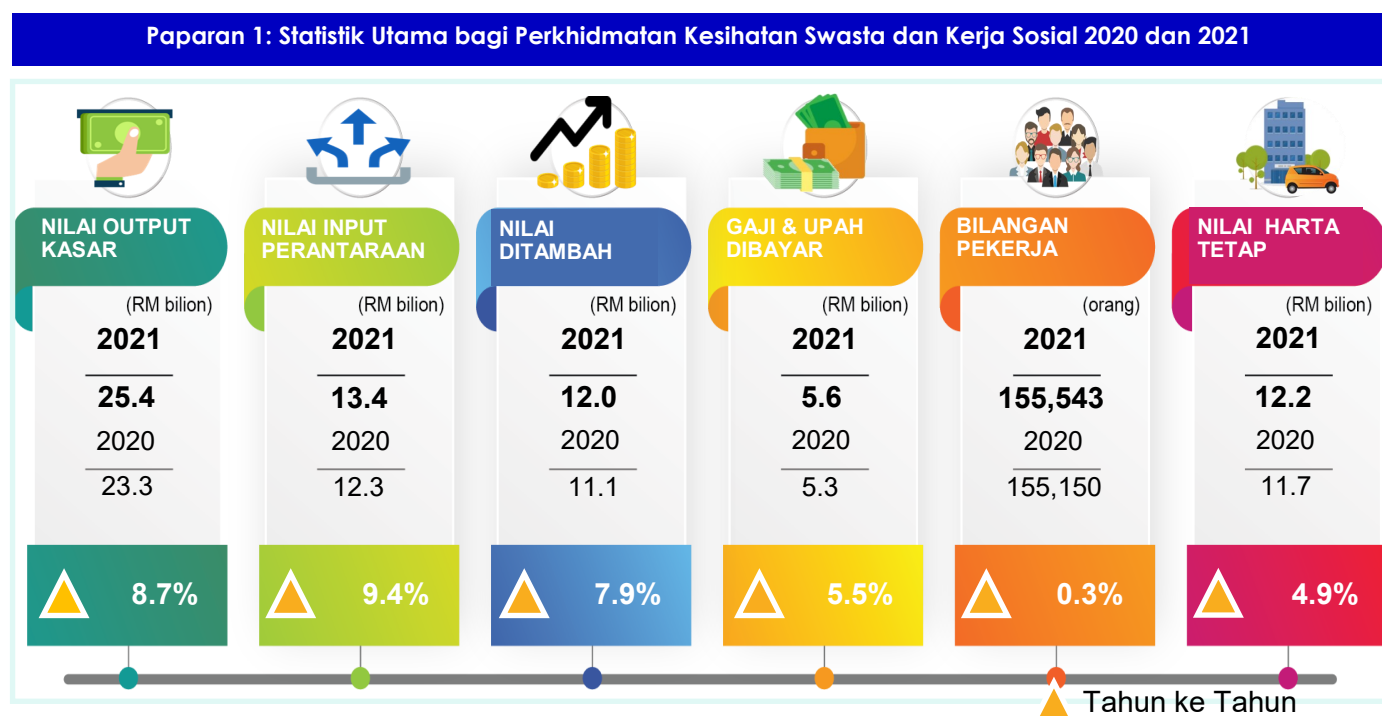
Source: Annual Economic Statistics, Private Health and Social Work Services, 2022
Department of Statistics Malaysia (DOSM)

RINGKASAN PENEMUAN

1. PENGENALAN

Penerbitan ini memaparkan statistik bagi perkhidmatan kesihatan swasta dan kerja sosial yang diperoleh daripada Survei Ekonomi Tahunan 2022 bagi tahun rujukan 2021. Perkhidmatan kesihatan swasta dan kerja sosial merangkumi aktiviti hospital; aktiviti amalan perubatan dan pergigian; aktiviti kesihatan kemanusiaan lain; aktiviti rumah penjagaan; dan aktiviti kerja sosial tanpa penginapan. Statistik utama seperti nilai output kasar, nilai input perantaraan, nilai ditambah, bilangan pekerja, gaji & upah dibayar, dan nilai harta tetap yang dimiliki turut dipaparkan dalam penerbitan ini.

2. PRESTASI PERKHIDMATAN KESIHATAN SWASTA DAN KERJA SOSIAL



Perkhidmatan kesihatan swasta dan kerja sosial mencatatkan nilai output kasar sebanyak RM25.4 bilion pada tahun 2021 berbanding RM23.3 bilion pada tahun sebelumnya dengan perubahan peratusan sebanyak 8.7 peratus. Selaras dengan pertumbuhan nilai output kasar, nilai input perantaraan turut meningkat sebanyak RM1.2 bilion untuk mencatatkan RM13.4 bilion dengan perubahan peratusan 9.4 peratus, seterusnya menghasilkan nilai ditambah sebanyak RM12.0 bilion pada tahun 2021. Bilangan pekerja di sektor ini juga melaporkan peningkatan sebanyak 0.3 peratus kepada 155,543 orang berbanding 155,150 orang pada tahun 2020. Sementara itu, jumlah gaji & upah yang dibayar pada tahun 2021 adalah RM5.6 bilion berbanding RM5.3 bilion pada tahun 2020. Nilai harta tetap pula merekodkan RM12.2 bilion berbanding pada tahun 2020 (RM11.7 bilion) seperti yang ditunjukkan di **Paparan 1**.

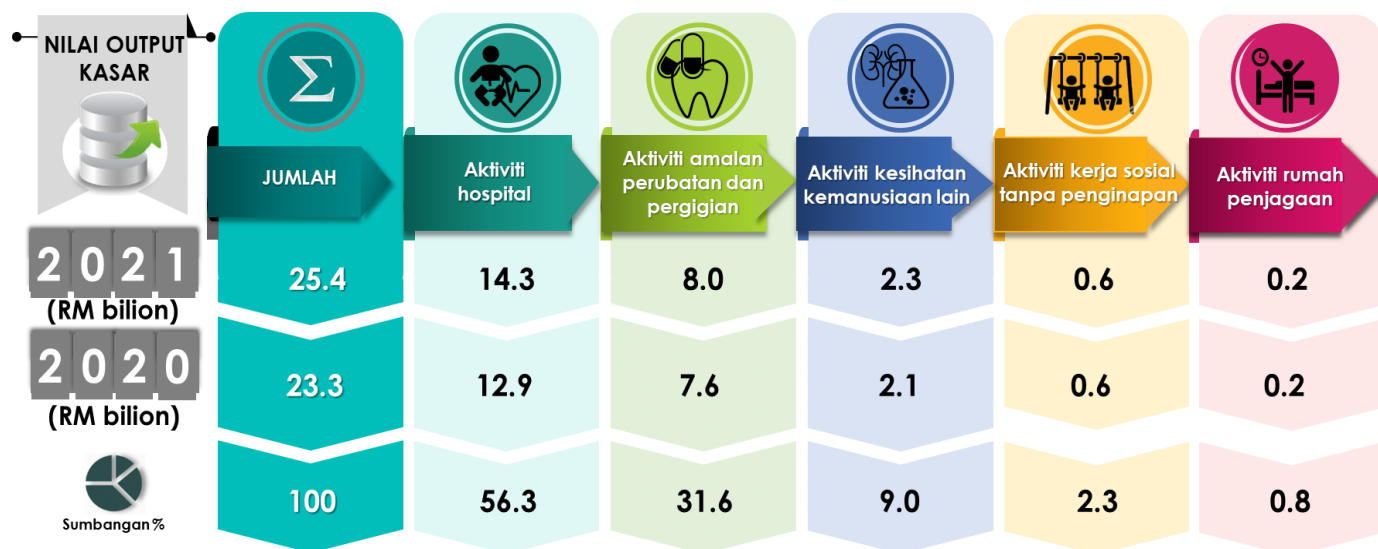
RINGKASAN PENEMUAN

3. NILAI OUTPUT KASAR

Dalam tempoh 2020 hingga 2021, nilai output kasar perkhidmatan kesihatan swasta dan kerja sosial meningkat sebanyak 8.7 peratus. Aktiviti hospital merupakan penyumbang terbesar merekodkan nilai output kasar sebanyak RM14.3 bilion (56.3%) pada 2021. Penyumbang kedua terbesar adalah aktiviti amalan perubatan dan pergigian sebanyak RM8.0 bilion (31.5%) diikuti dengan aktiviti kesihatan kemanusiaan lain sebanyak RM2.3 bilion (9.0%) seperti yang ditunjukkan dalam **Paparan 2**. Ketiga-tiga aktiviti ini menyumbang sebanyak 96.9 peratus kepada nilai output kasar perkhidmatan kesihatan swasta dan kerja sosial. Nilai output kasar aktiviti lain bagi aktiviti kerja sosial tanpa penginapan dan aktiviti rumah penjagaan masing-masing adalah RM0.6 bilion dan RM0.2 bilion.

3.1 NILAI OUTPUT KASAR MENGIKUT NEGERI

Paparan 2: Nilai Output Kasar bagi Perkhidmatan Kesihatan Swasta dan Kerja Sosial mengikut Aktiviti, 2020 dan 2021



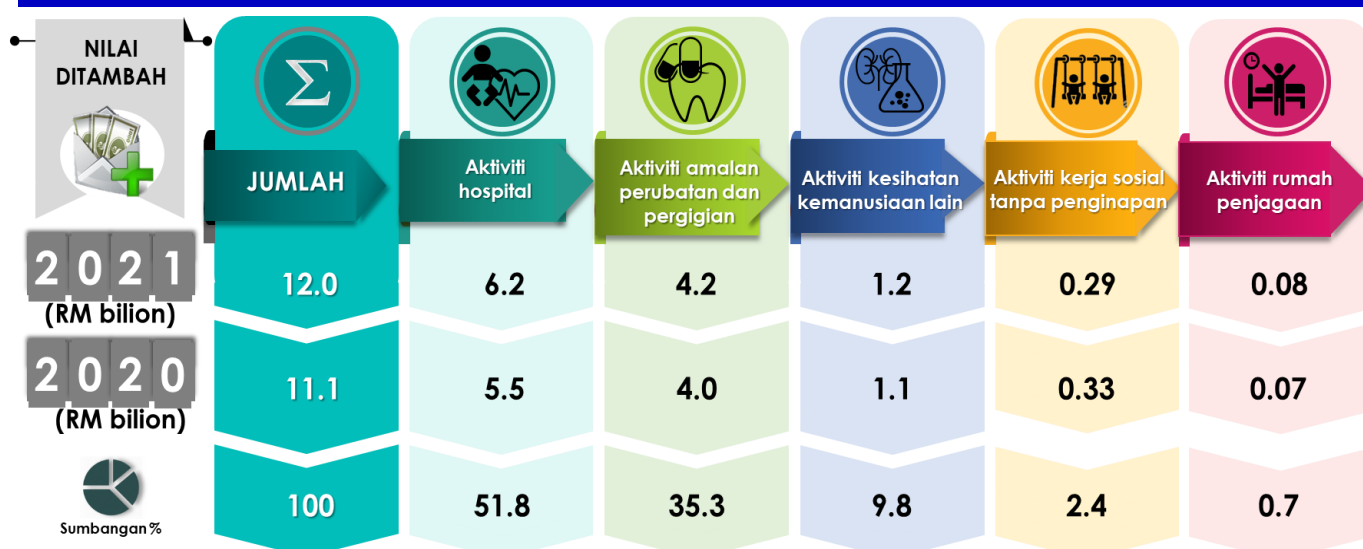
Selangor merupakan penyumbang utama nilai output kasar bagi perkhidmatan kesihatan swasta dan kerja sosial pada tahun 2021 dengan peratus sumbangan sebanyak 28.6 peratus (RM7.3 bilion). Ini diikuti oleh W.P. Kuala Lumpur dan Pulau Pinang dengan nilai output kasar masing-masing sebanyak RM5.8 bilion (22.8%) dan RM3.0 bilion (11.8%). Nilai sumbangan bagi ketiga-tiga negeri ini adalah RM16.0 bilion (63.2%).

RINGKASAN PENEMUAN

4. NILAI DITAMBAH

Nilai ditambah perkhidmatan kesihatan swasta dan kerja sosial pada tahun 2021 yang dicatatkan adalah sebanyak RM12.0 bilion dengan kadar pertumbuhan sebanyak 7.9 peratus. **Paparan 3** menunjukkan aktiviti hospital merekodkan nilai ditambah tertinggi pada tahun 2021 sebanyak RM6.2 bilion. Ini diikuti aktiviti amalan perubatan dan pergigian (RM4.2 bilion) dan aktiviti kesihatan kemanusiaan lain (RM1.2 bilion). Secara perbandingan, aktiviti hospital mencatatkan peningkatan nilai ditambah paling tinggi sebanyak RM6.2 bilion dengan kadar pertumbuhan 12.3 peratus berbanding tahun 2020.

Paparan 3: Nilai Ditambah bagi Perkhidmatan Kesihatan Swasta dan Kerja Sosial mengikut Aktiviti, 2020 dan 2021



4.1 NILAI DITAMBAH MENGIKUT NEGERI

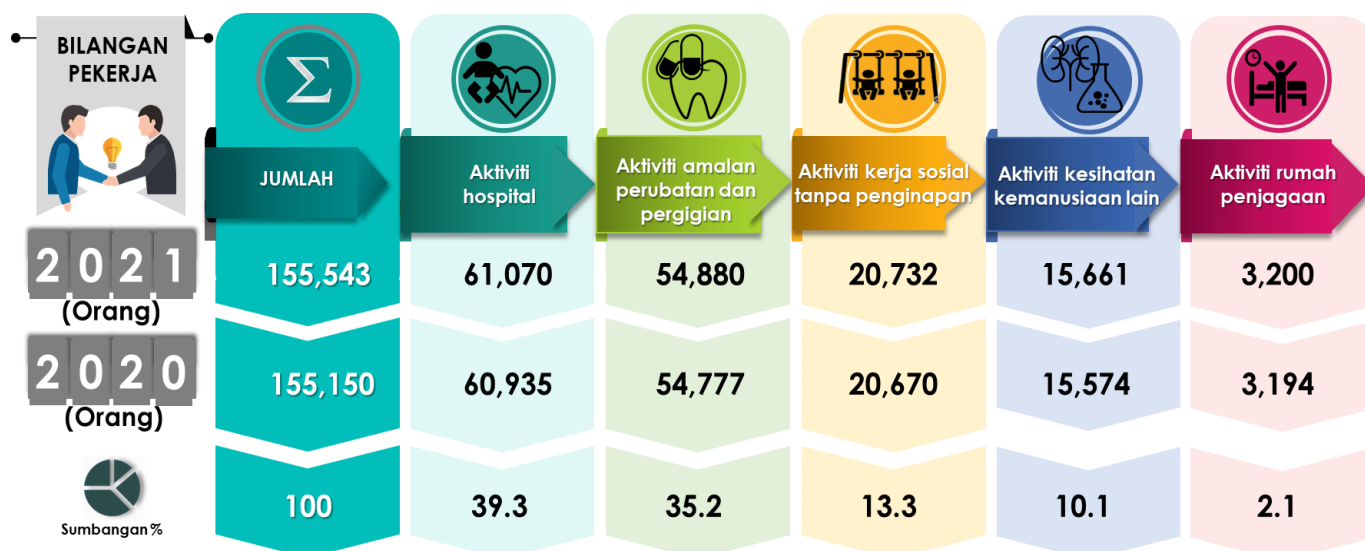
Dari segi prestasi nilai ditambah mengikut negeri pada tahun 2021, Selangor mencatatkan nilai ditambah tertinggi iaitu RM3.6 bilion dengan peratus sumbangan sebanyak 29.8 peratus. Ini diikuti oleh W.P. Kuala Lumpur sebanyak RM2.8 bilion (23.1%) dan Pulau Pinang sebanyak RM1.4 bilion (11.3%). Sumbangan nilai ditambah bagi ketiga-tiga negeri ini kepada perkhidmatan kesihatan swasta dan kerja sosial adalah RM7.7 bilion (64.2%).

RINGKASAN PENEMUAN

5. BILANGAN PEKERJA DAN KATEGORI PEKERJA

Aktiviti hospital merekodkan bilangan pekerja tertinggi iaitu seramai 61,070 orang (39.3%). Penyumbang kedua tertinggi adalah aktiviti amalan perubatan dan pergigian dengan 54,880 orang (35.3%), diikuti aktiviti kerja sosial tanpa penginapan 20,732 (13.3%) seperti yang ditunjukkan di **Paparan 4**. Ketiga-tiga aktiviti ini menyumbang 87.9 peratus kepada jumlah bilangan pekerja dalam perkhidmatan kesihatan swasta dan kerja sosial pada tahun 2021.

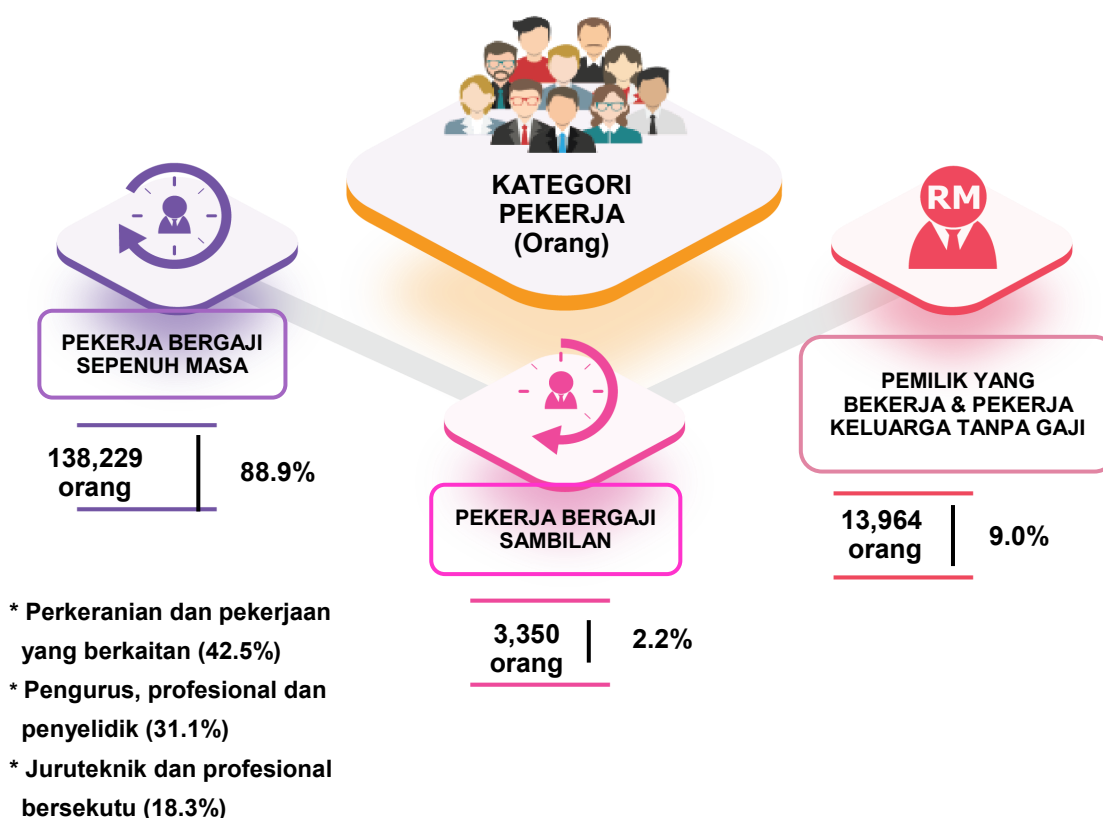
Paparan 4: Bilangan Pekerja bagi Perkhidmatan Kesihatan Swasta dan Kerja Sosial mengikut Aktiviti, 2020 dan 2021



RINGKASAN PENEMUAN

Pekerja bergaji sepenuh masa merekodkan sejumlah 138,229 orang dengan peratus sumbangan sebanyak 88.9 peratus berbanding pekerja bergaji sambilan (3,350 orang; 2.2%) dan pemilik yang bekerja dan pekerja keluarga tanpa gaji (13,964 orang; 9.0%) seperti yang ditunjukkan di **Paparan 5**. Berdasarkan kategori pekerja bergaji sepenuh masa, perkeranian dan pekerjaan yang berkaitan merekodkan bilangan pekerja tertinggi (58,800 orang; 42.5%), diikuti oleh pengurus, profesional dan penyelidik (43,000 orang; 31.1%) dan juruteknik dan profesional bersekutu (25,229 orang; 18.3%).

Paparan 5: Bilangan Pekerja bagi Perkhidmatan Kesihatan Swasta dan Kerja Sosial mengikut Kategori Pekerja, 2021

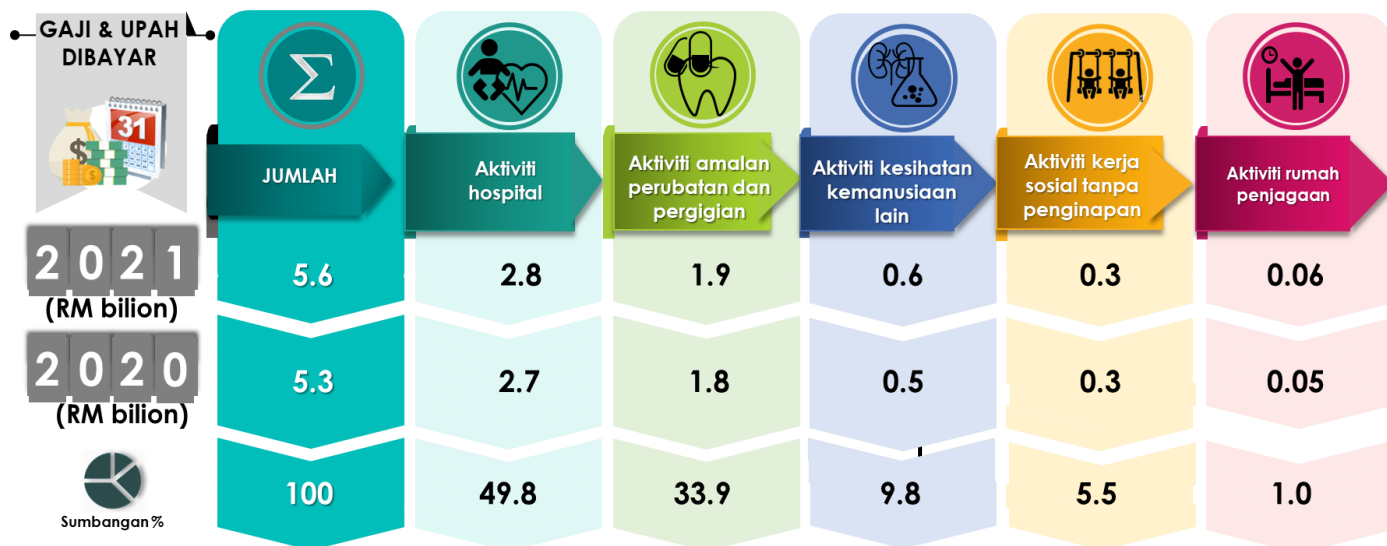


RINGKASAN PENEMUAN

6. GAJI & UPAH

Jumlah gaji & upah dibayar dalam perkhidmatan kesihatan swasta dan kerja sosial pada tahun 2021 adalah sebanyak RM5.6 bilion. Aktiviti hospital merekodkan gaji & upah tertinggi iaitu RM2.8 bilion atau 49.8 peratus daripada keseluruhan gaji & upah yang dibayar. Penyumbang kedua tertinggi adalah aktiviti amalan perubatan dan pergigian (RM1.9 bilion; 33.9%) diikuti dengan aktiviti kesihatan kemanusiaan lain (RM0.6 bilion; 9.8%) seperti yang ditunjukkan dalam **Paparan 6**. Sumbangan gaji & upah bagi ketiga-tiga aktiviti ini adalah RM5.2 bilion (93.5%). Secara purata, gaji & upah yang diterima oleh pekerja dalam perkhidmatan kesihatan swasta dan kerja sosial adalah sebanyak RM3,296 sebulan.

Paparan 6: Gaji & Upah bagi Perkhidmatan Kesihatan Swasta dan Kerja Sosial mengikut Aktiviti, 2020 dan 2021



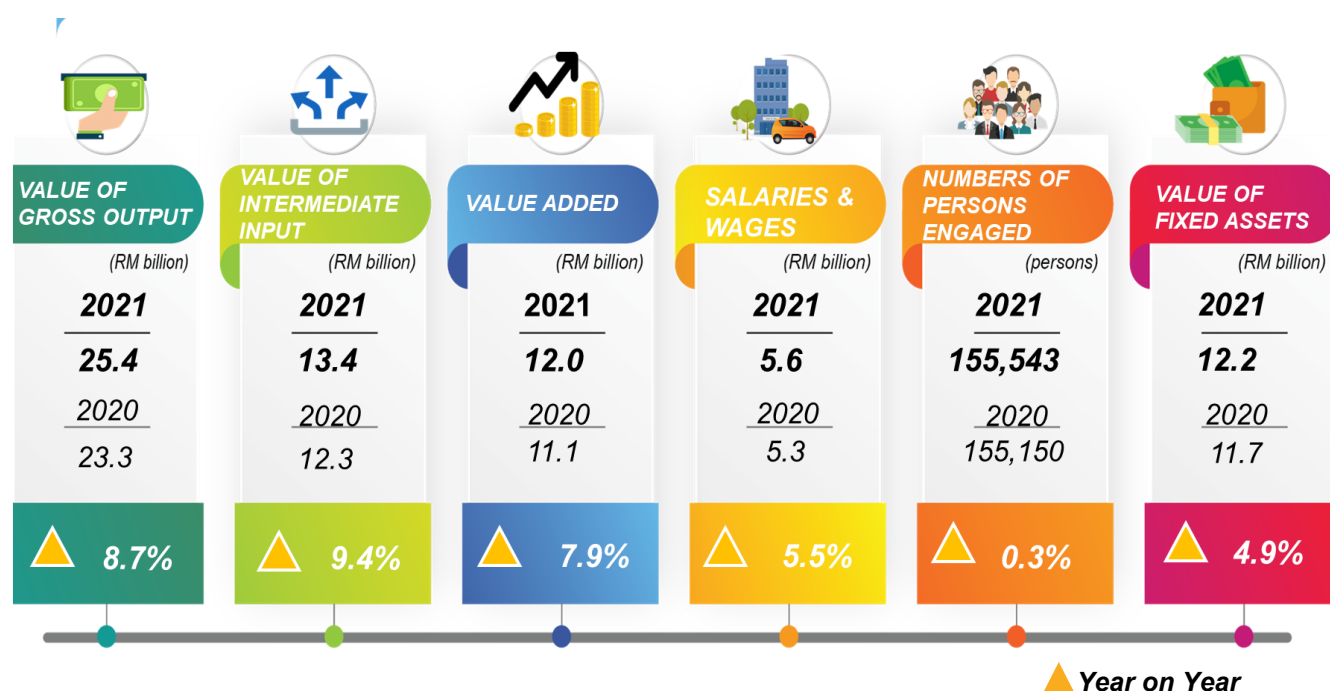
SUMMARY FINDINGS

1. INTRODUCTION

This publication presents statistics on the private health and social work services which obtained from the Annual Economic Survey 2022 for reference year 2021. Private health and social work services comprises hospital activities; medical and dental practice activities; other human health activities; social work activities without accommodation; and residential care activities. The main statistics such as the value of gross output, value of intermediate input, value added, number of persons engaged, salaries & wages paid as well as value of fixed assets owned is also depicted in this publication.

2. PERFORMANCE OF PRIVATE HEALTH AND SOCIAL WORK SERVICES

Exhibit 1: Principle Statistics of Private Health and Social Work Services 2020 and 2021



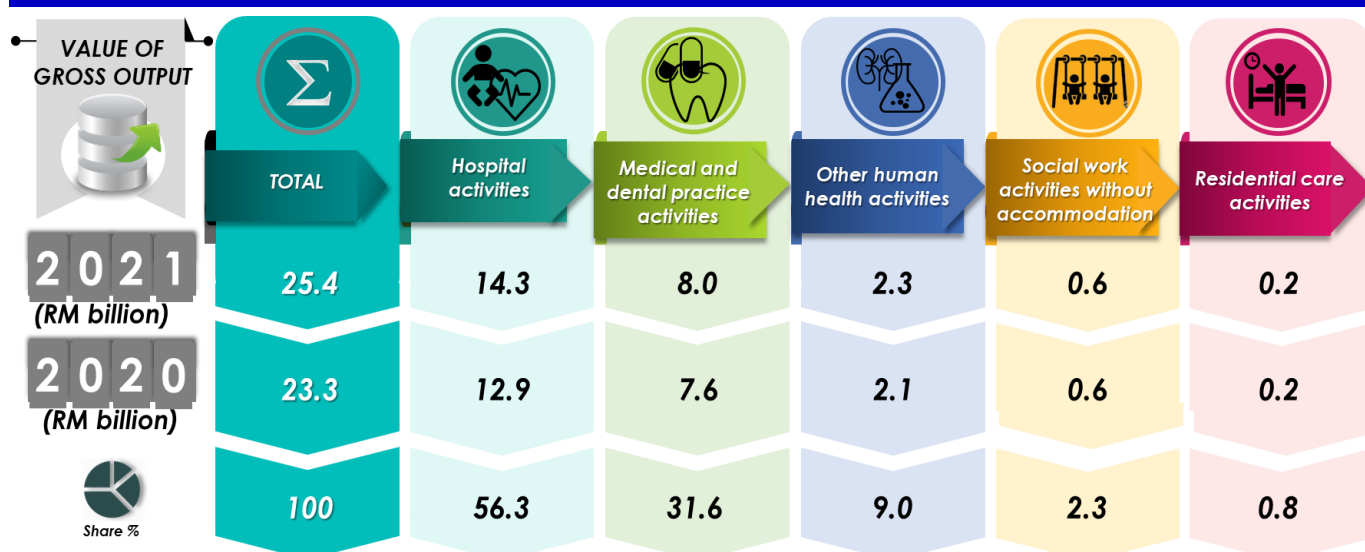
The private health and social work services recorded a gross output value of RM25.4 billion in 2021 as compared to RM23.3 billion in the previous year, an increase of 8.7 percent. In line with the increase in gross output, the value of intermediate input increased by RM1.2 billion to RM13.4 billion with a 9.4 percent increase, resulting in a value added of RM12.0 billion for 2021. The number of persons engaged in this sector also reported an increase of 0.3 percent to 155,543 as compared to 155,150 in 2020. Meanwhile, salaries and wages paid in 2021 amounted to RM5.6 billion, compared to RM5.3 billion in 2020. The value of fixed assets is RM12.2 billion compared to 2020 (RM11.7 billion), as shown in **Exhibit 1**.

SUMMARY FINDINGS

3. VALUE OF GROSS OUTPUT

In the period of 2020 to 2021, the gross output value of private health and social work services increased 8.7 per cent per annum. Hospital activities was the largest contributor of gross output value with RM14.3 billion (56.3%) in Annual Economic Survey 2022. The second largest contributor was medical and dental practice activities with RM8.0 billion (31.5%) followed by other human health activities with RM2.3 billion (9.0%) as shown in **Exhibit 2**. These three activities contributed 96.9 per cent to the value of gross output in private health and social work services. The value of gross output for social work activities without accommodation and residential care activities were RM0.6 billion and RM0.2 billion respectively.

Exhibit 2: Value of Gross Output for Private Health and Social Work Services by Activity, 2020 and 2021



3.1 VALUE OF GROSS OUTPUT BY STATE

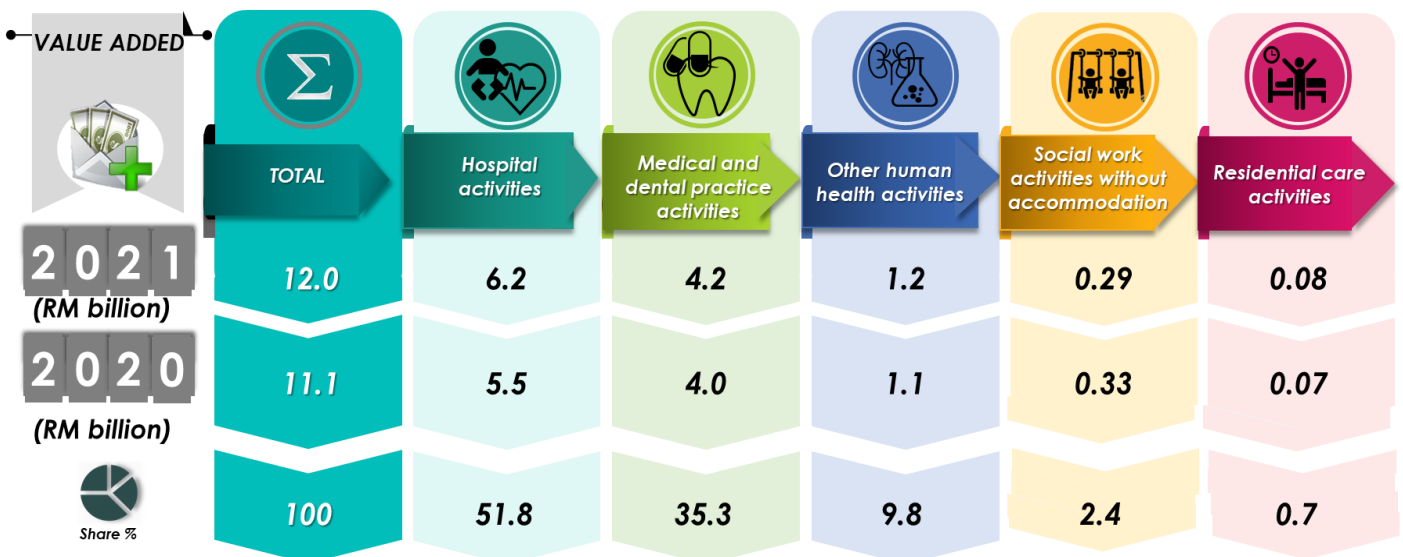
Selangor was the main contributor to the gross output value for private health and social work services in 2021, with a share of 28.6 per cent (RM7.3 billion). This was followed by W.P. Kuala Lumpur and Pulau Pinang with the gross output value of RM5.8 billion (22.8%) and RM3.0 billion (11.8%) respectively. The total value of gross output for these three states amounted to RM16.0 billion (63.2%).

SUMMARY FINDINGS

4. VALUE ADDED

The total value added recorded in private health and social work services for 2021 was RM12.0 billion with growth rate of 7.9 per cent per annum. **Exhibit 3** shows that the hospital activities recorded the highest value added in 2021 which amounted to RM6.2 billion. This was followed by the medical and dental practice activities (RM4.2 billion) and other human health activities (RM1.2 billion). In comparison, the hospital activities posted the highest value added increment of RM6.2 billion with a growth rate of 12.3 per cent as compared to 2020.

Exhibit 3: Value Added for Private Health and Social Work Services by Activity, 2020 and 2021



4.1 VALUE ADDED BY STATE

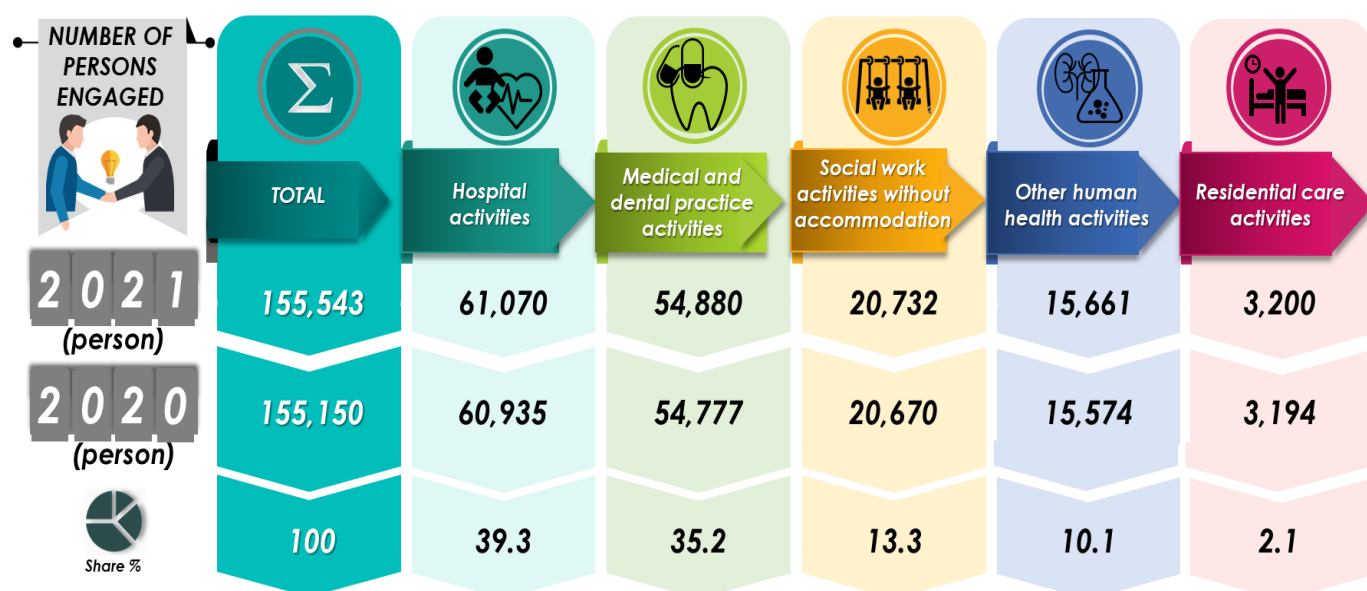
In term of performance of value added by state in 2021, Selangor registered the highest contribution with RM3.6 billion with a share of 29.8 per cent. This was followed by W.P. Kuala Lumpur and Pulau Pinang with the value added of RM2.8 billion (23.1%) and RM1.4 billion (11.3%) respectively. The total value added for these three states amounted to RM7.7 billion (64.2%).

SUMMARY FINDINGS

5. NUMBER OF PERSONS ENGAGED AND CATEGORY OF WORKERS

Hospital activities registered the highest number of persons engaged of 61,070 persons (39.3%). The second highest contributor was medical and dental practice activities services with 54,880 persons or 35.3 per cent followed by social work activities without accommodation with 20,732 persons (13.3%) as shown in **Exhibit 4**. These three activities contributed 87.9 per cent of the total number of persons engaged in the private health and social work services in 2021.

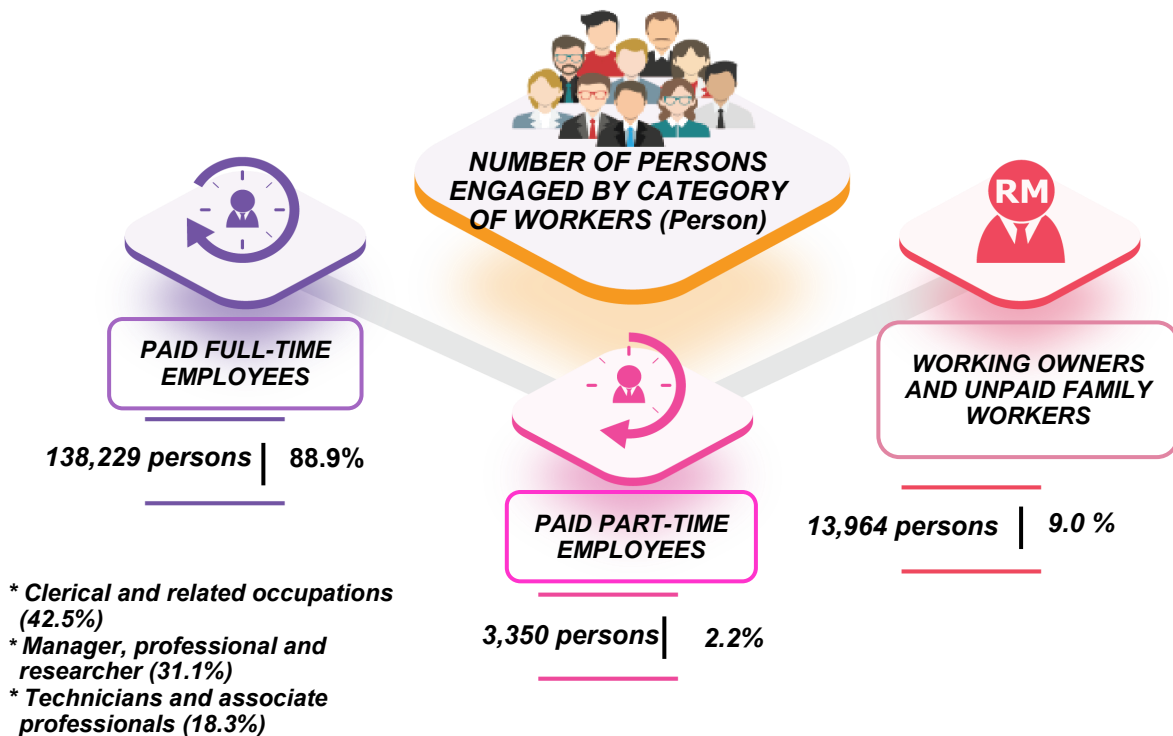
Exhibit 4: Number of Persons Engaged for Private Health and Social Work Services by Activity, 2020 and 2021



SUMMARY FINDINGS

Paid full-time employees recorded a total of 138,229 persons with percentage share of 88.9 per cent, as against to paid part-time employees (3,350 persons; 2.2%), and working owners & unpaid family workers (13,964 persons; 9.0%) as shown in **Exhibit 5**. Based on category of workers for full-time employees, clerical and related occupations recorded the highest number of persons engaged (58,800 persons; 42.5%), followed by manager, professional and researcher (43,000 persons; 31.1%) and technicians and associate professionals (25,229 persons; 18.3%).

Exhibit 5: Number of Persons Engaged for Private Health and Social Work Services by Category of Workers, 2021



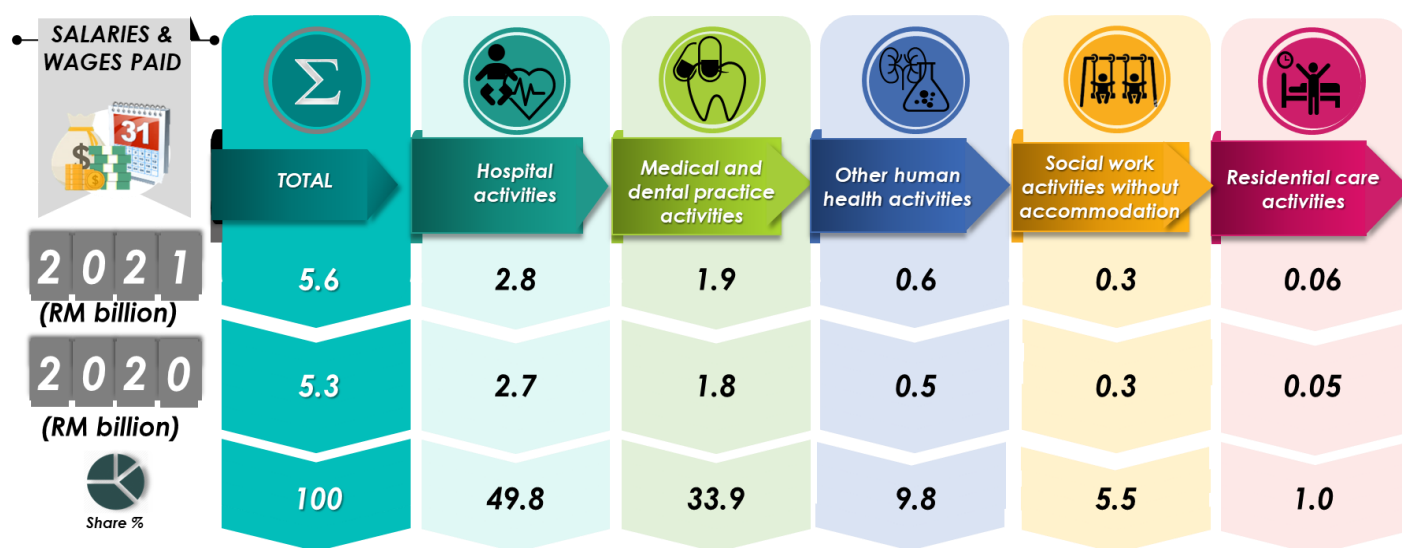


SUMMARY FINDINGS

6. SALARIES & WAGES

The total salaries & wages paid in private health and social work services for the year 2021 amounting to RM5.6 billion. Hospital activities recorded the highest salaries & wages of RM2.8 billion or 49.8 per cent of the total salaries & wages paid. The second highest contributor was medical and dental practice activities services (RM1.9 billion; 33.9%) followed by other human health activities (RM0.6 billion; 9.8%) as shown in **Exhibit 6**. The share of salaries & wages for these three activities were RM5.2 billion (93.5%). On average, salaries & wages received by employees in the private health and social work services amounted to RM3,296 per month.

Exhibit 6: Salaries & Wages Private Health and Social Work Services by Activity, 2020 and 2021



BAHAGIAN 2
PART 2

JADUAL
TABLES

Muka surat ini sengaja dibiarkan kosong.
This page is deliberately left blank.

Jadual 1: Statistik Utama Perkhidmatan Kesihatan Swasta dan Kerja Sosial, 2015, 2017 - 2021*Table 1: Principal Statistics of Private Health and Social Work Services, 2010, 2015, 2017 - 2021*

Tahun <i>Year</i>	Nilai output kasar <i>Value of gross output</i>	Nilai input perantaraan <i>Value of intermediate input</i>	Nilai ditambah <i>Value added</i>	Jumlah pekerja <i>Total number of persons engaged</i>	Gaji & upah yang dibayar <i>Salaries & wages paid</i>	Nilai harta tetap <i>Value of fixed assets</i>
	(RM'000)	(RM'000)	(RM'000)		(RM'000)	(RM'000)
2021	25,378,983	13,417,942	11,961,041	155,543	5,599,316	12,241,652
2020	23,347,538	12,262,949	11,084,588	155,150	5,309,461	11,668,797
2019	24,058,486	12,586,999	11,471,487	154,914	5,288,953	11,621,230
2018	22,084,952	11,572,794	10,512,158	145,972	4,845,943	10,722,744
2017	20,218,274	10,608,573	9,609,701	137,350	4,432,875	9,886,328
2015	16,848,024	8,852,455	7,995,569	121,088	3,683,892	8,419,472

Jadual 1.1: Statistik Utama Perkhidmatan Kesihatan Swasta dan Kerja Sosial mengikut Aktiviti, 2021

Table 1.1: Principal Statistics of Private Health and Social Work Services by Activity, 2021

Aktiviti <i>Activities</i>	Nilai output kasar <i>Value of gross output</i>	Nilai input perantaraan <i>Value of intermediate input</i>	Nilai ditambah <i>Value added</i>	Jumlah pekerja <i>Total number of persons engaged</i>	Gaji & upah yang dibayar <i>Salaries & wages paid</i>	Nilai harta tetap <i>Value of fixed assets</i>
	(RM'000)	(RM'000)	(RM'000)		(RM'000)	(RM'000)
Jumlah <i>Total</i>	25,378,983	13,417,942	11,961,041	155,543	5,599,316	12,241,652
Aktiviti hospital <i>Hospital activities</i>	14,295,126	8,098,171	6,196,955	61,070	2,807,604	8,078,793
Aktiviti amalan perubatan dan pergigian <i>Medical and dental practice activities</i>	8,005,533	3,781,867	4,223,666	54,880	1,896,856	2,726,911
Aktiviti kesihatan kemanusiaan lain <i>Other human health activities</i>	2,293,230	1,127,426	1,165,805	15,661	550,796	979,580
Aktiviti rumah penjagaan <i>Residential care activities</i>	197,133	113,090	84,043	3,200	57,824	135,999
Aktiviti kerja sosial tanpa penginapan <i>Social work activities without accommodation</i>	587,960	297,389	290,571	20,732	286,236	320,369

Jadual 2: Statistik Utama Perkhidmatan Kesihatan Swasta dan Kerja Sosial mengikut Negeri, 2021

Table 2: Principal Statistics of Private Health and Social Work Services by States, 2021

Negeri <i>States</i>	Nilai output kasar <i>Value of gross output</i>	Nilai input perantaraan <i>Value of intermediate input</i>	Nilai ditambah <i>Value added</i>	Jumlah pekerja <i>Total number of persons engaged</i>	Gaji & upah yang dibayar <i>Salaries & wages paid</i>	Nilai harta tetap <i>Value of fixed assets</i>
	(RM'000)	(RM'000)	(RM'000)		(RM'000)	(RM'000)
Jumlah <i>Total</i>	25,378,983	13,417,942	11,961,041	155,543	5,599,316	12,241,652
Johor	2,293,810	1,260,445	1,033,365	15,780	562,015	1,147,443
Kedah	710,355	392,515	317,840	6,879	181,844	359,260
Kelantan	344,561	219,128	125,433	3,242	78,182	128,656
Melaka	1,041,441	533,390	508,051	6,395	226,192	468,992
Negeri Sembilan	789,084	452,399	336,685	6,114	214,284	328,307
Pahang	633,959	340,639	293,320	4,050	107,686	353,831
Pulau Pinang	3,006,639	1,649,952	1,356,687	16,160	616,812	1,478,940
Perak	1,592,701	832,149	760,552	11,407	349,016	654,260
Perlis	64,907	36,231	28,676	536	13,072	48,811
Selangor	7,257,645	3,697,736	3,559,909	39,259	1,545,014	3,577,912
Terengganu	213,675	115,171	98,504	2,281	50,425	110,225
Sabah	695,636	385,063	310,573	5,894	159,866	350,992
Sarawak	895,960	464,231	431,729	6,702	214,641	417,529
W.P Kuala Lumpur	5,778,290	3,015,492	2,762,798	29,935	1,262,350	2,793,447
W.P Labuan	24,342	11,676	12,666	222	5,334	8,561
W.P Putrajaya	35,979	11,726	24,252	687	12,582	14,487

Jadual 3: Bilangan Pekerja dan Gaji & Upah Perkhidmatan Kesihatan Swasta dan Kerja Sosial mengikut Kategori Pekerja, 2021

Table 3: Number of Persons Engaged and Salaries & Wages of Private Health and Social Work Services by Category of Workers, 2021

Kategori pekerja <i>Category of workers</i>	Bilangan pekerja <i>Number of persons engaged</i>			Gaji & upah yang dibayar <i>Salaries & wages paid</i> (RM '000)
	Jumlah <i>Total</i>	Lelaki <i>Male</i>	Perempuan <i>Female</i>	
Jumlah <i>Total</i>	155,543	48,445	107,098	5,599,316
Jumlah pemilik yang bekerja dan pekerja keluarga tidak bergaji <i>Total working proprietors and unpaid family workers</i>	13,964	7,400	6,564	-
Jumlah pekerja bergaji (sepenuh masa) <i>Total paid employees (full-time)</i>	138,229	40,079	98,150	5,537,316
Pengurus, profesional dan penyelidik <i>Manager, professional and researcher</i>	43,000	19,000	24,000	2,870,200
Juruteknik dan profesional bersekutu <i>Technicians and associate professionals</i>	25,229	6,579	18,650	983,203
Perkeranian dan pekerjaan yang berkaitan <i>Clerical and related occupations</i>	58,800	9,800	49,000	1,462,913
Pekerja asas <i>Elementary occupation</i>	11,200	4,700	6,500	221,000
Pekerja bergaji (sambilan) <i>Paid employees (part-time)</i>	3,350	966	2,384	62,000

Jadual 4: Bilangan Pekerja dan Gaji & Upah Perkhidmatan Kesihatan Swasta dan Kerja Sosial mengikut Kategori Kemahiran dan Jantina, 2021

Table 4: Number of Persons Engaged and Salaries & Wages of Private Health and Social Work Services by Category of Skilled and Sex, 2021

Kategori kemahiran <i>Category of skilled</i>	Bilangan pekerja <i>Number of persons engaged</i>			Gaji & upah yang dibayar <i>Salaries & wages paid</i> (RM '000)
	Jumlah <i>Total</i>	Lelaki <i>Male</i>	Perempuan <i>Female</i>	
Jumlah <i>Total</i>	138,229	40,079	98,150	5,537,316
* Mahir <i>Skilled</i>	68,229	25,579	42,650	3,853,403
** Separuh mahir <i>Semi-skilled</i>	58,800	9,800	49,000	1,462,913
*** Berkemahiran rendah <i>Low-skilled</i>	11,200	4,700	6,500	221,000

*** Termasuk pengurusan & profesional dan juruteknik & profesional bersekutu**

Includes managers & professionals and technicians & associate professionals

**** Termasuk pekerja sokongan perkeranian, pekerja perkhidmatan & jualan, pekerja kemahiran & pekerja pertukangan yang berkaitan dan operator mesin & loji pemasangan**

Includes clerical support workers, service & sales workers, craft & related trades workers and plant & machine operators & assemblers

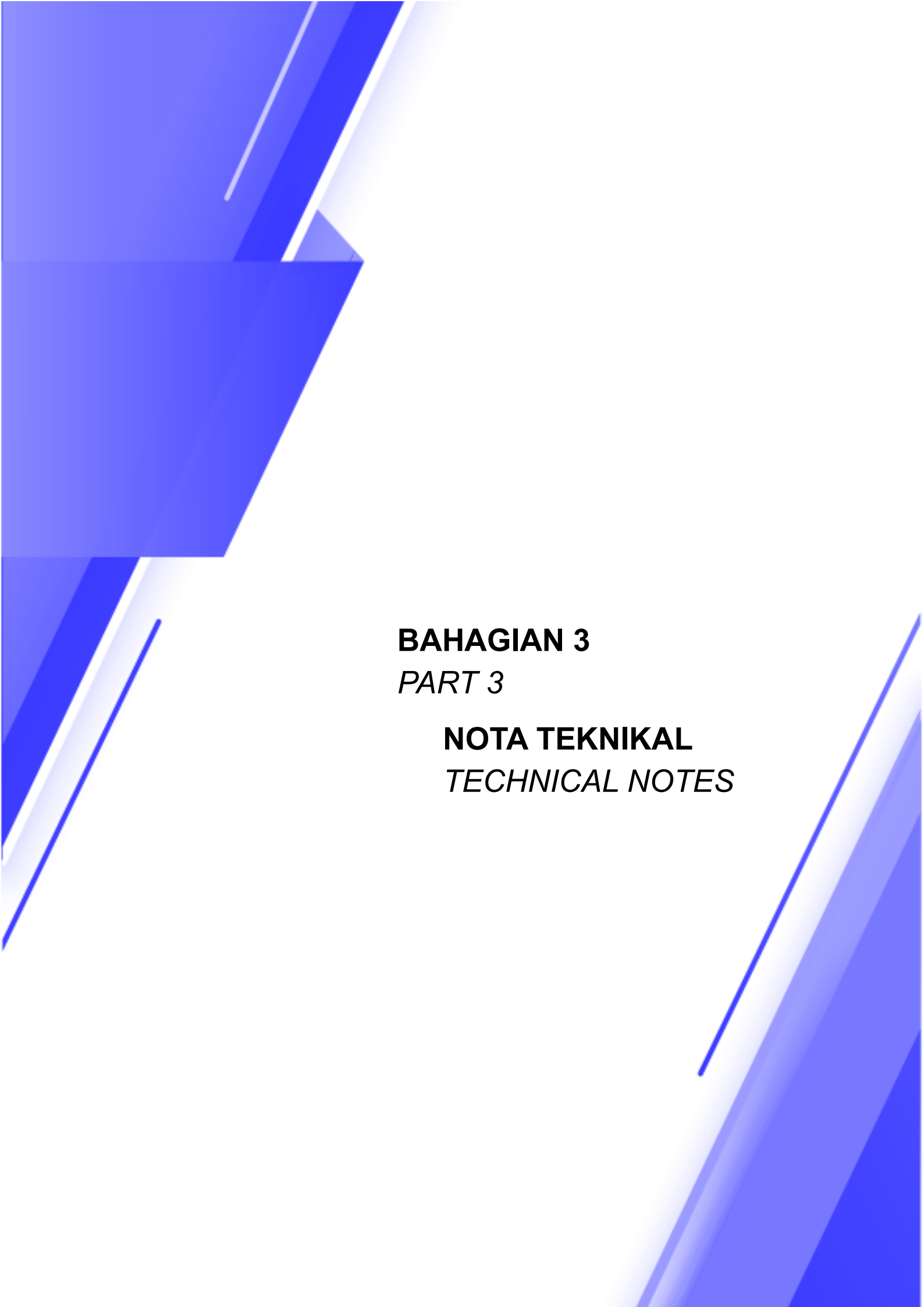
***** Termasuk pekerjaan asas**

Includes elementary occupations

Jadual 5: Perbelanjaan Modal dan Nilai Harta Tetap Perkhidmatan Kesihatan Swasta dan Kerja Sosial, 2021

Table 5: Capital Expenditure and Value of Fixed Assets of Private Health and Social Work Services, 2021

Aktiviti <i>Activities</i>	Perbelanjaan modal <i>Capital expenditure</i>	Pelupusan <i>Disposal</i>	Susut nilai semasa <i>Current depreciation</i>	Nilai harta tetap <i>Value of fixed assets</i>
	(RM '000)	(RM '000)	(RM '000)	(RM '000)
Jumlah <i>Total</i>	6,282,317	169,652,014	7,881,652	12,241,652
Aktiviti hospital <i>Hospital activities</i>	5,049,046	109,045,684	7,049,046	8,078,793
Aktiviti amalan perubatan dan pergigian <i>Medical and dental practice activities</i>	536,332	36,332,081	636,332	2,726,911
Aktiviti kesihatan kemanusiaan lain <i>Other human health activities</i>	687,451	18,450,949	107,451	979,580
Aktiviti rumah penjagaan <i>Residential care activities</i>	1,853	5,282,281	25,282	135,999
Aktiviti kerja sosial tanpa penginapan <i>Social work activities without accommodation</i>	7,635	541,019	63,541	320,369



BAHAGIAN 3

PART 3

NOTA TEKNIKAL

TECHNICAL NOTES

Muka surat ini sengaja dibiarkan kosong.
This page is deliberately left blank.



NOTA TEKNIKAL

1. Skop dan liputan

Survei ini meliputi pertubuhan berdaftar yang terlibat dalam **perkhidmatan kesihatan swasta dan kerja sosial** yang merangkumi aktiviti utama berikut:

- i. Hospital;
- ii. Amalan perubatan dan pergigian;
- iii. Kesihatan kemanusiaan lain;
- iv. Rumah penjagaan; dan
- v. Kerja sosial tanpa penginapan.

Keseluruhan liputan survei bagi perkhidmatan kesihatan dan kerja sosial terdiri daripada 26 industri di peringkat 5-digit mengikut Piawaian Klasifikasi Industri Malaysia (MSIC), 2008 Ver. 1.0. Senarai lengkap industri yang diliputi ditunjukkan di **Lampiran**.

2. Sumber rangka pertubuhan

Sumber utama rangka statistik perniagaan adalah daripada Malaysia Statistical Business Register (MSBR). MSBR adalah senarai pertubuhan/perusahaan yang beroperasi di Malaysia yang merangkumi Daftar syarikat (ROC), Daftar Perniagaan (ROB) dan Perkongsian Liabiliti Terhad (LLP) yang berdaftar dengan Suruhanjaya Syarikat Malaysia (CCM) serta pertubuhan yang berdaftar dengan pihak berkuasa tempatan dan badan profesional. Senarai di MSBR dikemas kini secara berkala berdasarkan tinjauan dan bancian yang dijalankan oleh Jabatan Perangkaan Malaysia dan sumber data pentadbiran daripada agensi lain. Sumber utama data pentadbiran adalah daripada Suruhanjaya Syarikat Malaysia (CCM). Selain itu, DOSM juga bekerjasama untuk mendapatkan maklumat terkini daripada agensi lain seperti Kumpulan Wang Simpanan Pekerja (KWSP), Jabatan Kastam Diraja Malaysia, Lembaga Hasil Dalam Negeri (LHDN), pihak berkuasa tempatan dan badan profesional.



NOTA TEKNIKAL

2. Sumber rangka pertubuhan (sambungan)

Rangka dikemaskini untuk mengambil kira pertubuhan baru dan sebarang perubahan yang berlaku kepada pertubuhan tersebut seperti tutup, tidak beroperasi, perubahan jenis aktiviti dan lokasi/ alamat pos untuk memastikan maklumat yang terdapat dalam rangka adalah yang paling terkini.

3. Jenis aktiviti perniagaan

Jenis aktiviti perniagaan merujuk kepada aktiviti utama dan sekunder. Aktiviti utama merujuk kepada aktiviti yang mana pertubuhan menumpukan sebahagian besar sumbernya atau memberi sumbangan besar dari segi pendapatan. Aktiviti sekunder didefinisikan sebagai aktiviti sampingan kepada aktiviti utama. Klasifikasi industri bagi pertubuhan adalah berasaskan kepada aktiviti utama dan Piawaian Klasifikasi Industri Malaysia (MSIC), 2008 Versi 1.0. MSIC 2008 yang diselaraskan dengan *International Standard Industrial Classification of All Economic Activities (ISIC), Rev. 4, United Nations* dan pengubahsuaian mengikut keperluan tempatan.

4. Konsep dan definisi

Definisi perkhidmatan kesihatan dan kerja sosial yang diguna pakai dalam penerbitan ini berasaskan kepada MSIC 2008 Ver 1.0:

i. Perkhidmatan hospital

Merujuk kepada pusat penjagaan kesihatan yang merangkumi warga kerja perubatan dan jururawat dengan kemudahan kekal yang menyediakan perkhidmatan perubatan yang lengkap untuk pesakit yang memerlukan rawatan atau pemerhatian, termasuk penjagaan pesakit dalam wad, jika perlu. Pertubuhan ini perlu mempunyai lesen yang dikeluarkan oleh Kementerian Kesihatan Malaysia untuk menjalankan operasi sebagai sebuah hospital.



NOTA TEKNIKAL

4. Konsep dan definisi (sambungan)

ii. Perkhidmatan rumah bersalin

Merujuk kepada mana-mana premis selain rumah bersalin kerajaan yang menerima dan menyediakan jagaan kejururawatan dan jagaan perbidanan bagi wanita yang hendak bersalin atau sebaik selepas melahirkan anak.

iii. Perkhidmatan perubatan am dan pakar

Merujuk kepada perkhidmatan yang diberi oleh pakar perubatan dan pembedahan, ahli fizik, ahli fisioterapi, pakar radiologi dan para pengamal perubatan profesional yang lain atas akaun sendiri. Ia juga termasuk pertubuhan yang dikendalikan oleh doktor (yang diberi sijil pengamal tahunan) yang berdaftar dengan Majlis Perubatan Malaysia dan diselenggarakan di bawah Akta Perubatan 1971 (Pindaan) 1993.

iv. Perkhidmatan pergigian

Merujuk kepada perkhidmatan pergigian dan pembedahan termasuk penyediaan gigi palsu oleh doktor gigi yang bekerja atas akaun sendiri. Termasuk dalam kumpulan ini ialah perkhidmatan yang disediakan oleh doktor gigi (yang diberi sijil pengamal tahunan) yang berdaftar dengan Majlis Pergigian Malaysia yang diselenggarakan di bawah Akta Pergigian 1971.

V. Perkhidmatan kesihatan kemanusiaan lain

Merujuk kepada perkhidmatan yang tidak dilaksanakan oleh hospital atau oleh doktor perubatan atau pergigian seperti jururawat, bidan, urutan tradisional, perkhidmatan ambulans, fisioterapi dan terapi pekerjaan, ayurveda dan perubatan alternatif lain atau paramedik lain.



NOTA TEKNIKAL

4. Konsep dan definisi (sambungan)

vi. Aktiviti rumah penjagaan

Merujuk kepada pertubuhan yang menyediakan pekhidmatan rumah penjagaan meliputi kemudahan perawatan, penyeliaan atau penjagaan lain seperti aktiviti rumah penjagaan untuk orang tua dan orang kurang upaya, rumah penjagaan anak yatim, rumah kebajikan, pusat pemulihan dadah, penjagaan paliatif atau hospis dan aktiviti rumah penjagaan lain. Pertubuhan ini mestilah di bawah kawalan dan seliaan Jabatan Kebajikan Masyarakat dan agensi yang berkaitan.

vii. Aktiviti kerja sosial tanpa penginapan

Merujuk kepada perkhidmatan aktiviti kerja sosial tanpa penginapan untuk orang tua dan orang kurang upaya dan aktiviti kerja sosial lain tanpa penginapan termasuk perkhidmatan kaunseling.

5. Tahun survei

Tahun survei adalah merujuk kepada tahun pelaksanaan survei.

6. Tahun rujukan

Tahun rujukan bagi penyiasatan ini adalah tahun takwim 2021.

7. Kaedah pengumpulan data

Survei ini secara umumnya dijalankan melalui tiga (3) kaedah iaitu:

- i. Kaedah atas talian melalui portal e-Aes: Kaedah ini mensasarkan responden yang telah menggunakan kaedah ini bagi survei rutin terdahulu.
- ii. Kaedah kutipan data melalui e-mel/pos/faks/telefon: Kaedah ini mensasarkan responden yang pernah terlibat dengan survei rutin terdahulu. Responden diberi tempoh satu bulan untuk melengkapkan dan mengembalikan borang soal selidik tersebut kepada Jabatan.
- iii. Kaedah kutipan data secara bersemuka : Kerja luar operasi di lapangan dijalankan untuk mendapatkan maklum balas daripada pertubuhan yang belum memberi jawapan dari kedua-dua kaedah di atas dan kaedah ini mensasarkan pertubuhan yang tidak pernah terlibat dengan survei rutin DOSM.

NOTA TEKNIKAL

8. Reka bentuk pensampelan

Reka bentuk pensampelan bagi survei ini adalah pensampelan rawak strata satu peringkat. Kategori industri dua (2), tiga (3), empat (4) dan lima (5) digit MSIC di peringkat negeri telah diklasifikasikan sebagai strata manakala pertubuhan sebagai unit pensampelan.

Setiap strata (industri) telah dibentuk kepada empat substrata untuk memastikan sampel yang diagihkan mengambil kira ciri-ciri ekonomi industri tersebut. Substrata utama bersifat heterogen diliputi secara liputan penuh. Manakala, substrata selainnya bersifat homogen disampelkan.

Substrata utama meliputi pertubuhan kategori besar yang mempunyai jumlah hasil yang signifikan dalam industri liputan manakala bagi substrata kedua hingga keempat berdasarkan kategori perusahaan mikro, kecil dan sederhana (PMKS).

9. Saiz sampel dan prosedur penganggaran

Statistik utama yang digunakan untuk penganggaran saiz sampel adalah jumlah hasil. Formula yang digunakan dalam penganggaran saiz sampel bagi strata adalah seperti berikut:

$$n = \frac{(\sum N_i S_i)^2}{V + \sum N_i S_i^2}$$

di mana,

n	=	Saiz sampel
N_i	=	Saiz populasi bagi strata
S_i^2	=	Varian bagi strata
V	=	Varian sasaran

$$V = RSE^2 \left(\frac{\hat{Y}_i}{Z} \right)^2$$

di mana,

	=	Jumlah hasil bagi strata
$\hat{Y}_i$	=	Ralat piawai relatif
RSE	=	Nilai aras keyakinan
Z		



NOTA TEKNIKAL

9. Saiz sampel dan prosedur penganggaran (sambungan)

Sampel akan diagihkan kepada substrata dalam industri liputan dengan menggunakan kaedah *Neyman Allocation* seperti berikut:

$$n_{hi} = \left(\frac{N_h S_h}{\sum N_h S_h} \right) n'_i$$

$$h = 2, 3 \text{ dan } 4$$

$$i = 1, 2, \dots, k$$

di mana,

n_{hi}	=	Saiz sampel bagi substrata i dalam strata h
N_h	=	Saiz populasi bagi substrata h
S_h	=	Sisihan piawaian bagi substrata h
n_i	=	Saiz sampel bagi strata i
h	=	Substrata
i	=	Strata

Saiz sampel optimum bagi survei ini adalah 79,481 pertubuhan. Pertubuhan kategori besar diliputi sepenuhnya, manakala pertubuhan bagi substrata kedua hingga keempat dipilih secara rawak mengikut kaedah pensampelan bersistematik.

10. Wajaran

Analisis berwajaran disediakan menggunakan wajaran bagi memastikan sampel yang dipilih dapat menggambarkan populasi survei. Wajaran yang diperlukan adalah wajaran di peringkat reka bentuk pensampelan dan wajaran tiada respons.

Wajaran reka bentuk pensampelan pada substrata h adalah seperti berikut:

$$W_h = \frac{N_h}{n_h}, n = 1, \dots, 4$$

NOTA TEKNIKAL

10. Wajaran (sambungan)

di mana,

$$\begin{aligned} N_h &= \text{Bilangan populasi bagi substrata} \\ n_h &= \text{Bilangan sampel bagi substrata} \end{aligned}$$

Wajaran tiada respons pada substrata h adalah seperti berikut:

$$NRW_h = \frac{1}{n'_h/n_h}, h = 1, \dots, 4$$

di mana,

$$\begin{aligned} n'_h &= \text{Bilangan sampel respons bagi substrata} \\ n_h &= \text{Bilangan sampel bagi substrata} \end{aligned}$$

Kaedah pengiraan wajaran reka bentuk pensampelan selepas survei (*adjusted weight*) pada substrata h seperti berikut:

$$W'_h = W_h \times NRW_h, h = 1, \dots, 4$$

di mana,

$$\begin{aligned} W_h &= \text{Wajaran reka bentuk persampelan pada substrata} \\ NRW_h &= \text{Wajaran tiada respons pada substrata } h \end{aligned}$$

11. Unit pelapor

Unit pelapor bagi survei ini ialah pertubuhan. Sesebuah pertubuhan secara ideal ditakrifkan sebagai “satu unit ekonomi yang bergiat di bawah satu hak milik atau penguasaan tunggal, iaitu di bawah satu entiti yang sah. Ia menjalankan satu jenis subsektor ekonomi utama di satu tempat/ lokasi fizikal”. Setiap pertubuhan diberikan klasifikasi industri berdasarkan aktiviti utamanya dan bukannya mengikut aktiviti syarikat induk.



NOTA TEKNIKAL

11. Unit pelapor (sambungan)

Setiap cawangan daripada organisasi yang mempunyai beberapa cawangan di lokasi yang berbeza dari segi konsep dianggap sebagai pertubuhan yang berlainan. Pertubuhan berkenaan diminta memberikan penyata yang berasingan bagi setiap kegiatannya dari segi nilai. Walau bagaimanapun, dari segi praktis akaun biasanya disediakan secara berpusat kerana kesukaran untuk memperoleh data yang berasingan bagi setiap unit atau cawangan. Entiti atau 'enterprise' ini akan dianggap sebagai satu unit pelapor dan dibenarkan mengemukakan soal selidik yang menggabungkan semua unit atau cawangannya.

12. Nilai output kasar

Nilai output kasar ditakrifkan dengan memasukkan perkara berikut:

Bayaran perkhidmatan kesihatan yang diberikan

- + Perbelanjaan modal ke atas pembinaan sendiri
- + Nilai barangan yang dijual dalam keadaan yang sama seperti dibeli
- Kos barang yang dijual dalam keadaan yang sama seperti dibeli
- + Pendapatan daripada perkhidmatan perindustrian lain yang diberikan kepada orang lain
- + Pendapatan daripada perkhidmatan pengurusan
- + Pendapatan daripada sewa
- + Perbelanjaan penyelidikan dan pembangunan (dalaman)
- Stok awal barangan
- + Stok akhir barangan
- + Semua output lain (seperti pendapatan yang diterima kerana memperbaiki dan menyelenggara peralatan dan mesin pertubuhan lain dll.)



NOTA TEKNIKAL

13. Nilai input perantaraan

Nilai input perantaraan ditakrifkan dengan memasukkan perkara berikut:

- Nilai bahan dan bekalan yang digunakan (termasuk bayaran pengangkutan, cukai dan duti yang dibayar)
- + Kos kerja perindustrian yang dibuat oleh orang lain
- + Kuasa elektrik dan air yang dibeli
- + Nilai bahan pembakar dan pelincir yang digunakan
- + Semua kos input lain yang digunakan (seperti percetakan, pembelian perkhidmatan pengangkutan, perbelanjaan perjalanan, hiburan, pengiklanan, bayaran guaman, bayaran pos, bayaran pengurusan, bayaran sewaan dll.)
- + Bayaran kepada pengarah tidak bekerja kerana kehadiran mereka dalam mesyuarat Lembaga Pengarah
- + Nilai pakaian percuma yang disediakan
- + Kos latihan kepada pekerja
- + Bayaran kepada pertubuhan lain yang membekalkan pekerja

14. Nilai ditambah

Nilai ditambah adalah tambahan kepada nilai barangan dan perkhidmatan yang dikeluarkan oleh sesebuah pertubuhan. Nilai ditambah diperoleh daripada perbezaan antara nilai output kasar dengan nilai input perantaraan.

15. Bilangan pekerja

Bilangan pekerja merujuk kepada bilangan orang yang bekerja pada bulan Disember atau pada tempoh pembayaran gaji terakhir bagi tahun rujukan. Bilangan orang yang bekerja dikategorikan seperti berikut:

a. Pemilik yang bekerja dan rakan niaga yang aktif

Kategori ini merujuk kepada semua pemilik perseorangan dan rakan niaga, sambilan atau sepenuh masa, yang bekerja dengan aktif dalam sesebuah pertubuhan itu. Justeru, ia tidak termasuk rakan niaga yang tidak aktif.



NOTA TEKNIKAL

15. Bilangan pekerja (sambungan)

b. Pekerja keluarga tidak bergaji

Kategori ini meliputi semua ahli isi rumah kepada pemilik pertubuhan yang melaksanakan kerja tertentu (sepanjang masa atau sambilan) dan bekerja sekurang-kurangnya satu pertiga daripada waktu bekerja biasa yang diamalkan oleh pertubuhan berkenaan tanpa mendapat bayaran secara tetap, sama ada dalam bentuk wang tunai atau harta benda bagi kerja yang dilakukan.

Biasanya pekerja berkenaan mendapat makanan, tempat tinggal dan bantuan lain sebagai sebahagian daripada ahli isi rumah pemilik tersebut dan terus mendapatnya sama ada ia bekerja atau tidak dalam pertubuhan itu.

c. Pekerja bergaji (sepanjang masa)

Ia merujuk kepada semua pekerja bergaji yang bekerja sekurang-kurangnya 6 jam sehari dan sekurang-kurangnya 20 hari sebulan.

d. Pekerja bergaji (sambilan)

Ia merujuk kepada semua pekerja bergaji yang bekerja kurang daripada enam jam sehari dan/atau kurang daripada 20 hari sebulan.

16. Kategori kemahiran

Kategori pekerjaan telah dikelaskan berdasarkan Piawaian Pengkelasan Pekerjaan Malaysia (MASCO) 2020 adalah seperti berikut:

i. Pekerja mahir

Pengurus dan profesional, penyelidik, juruteknik dan profesional bersekutu;



NOTA TEKNIKAL

16. Kategori kemahiran (sambungan)

ii. Pekerja separuh mahir

Pekerja sokongan perkeranian, perkhidmatan & jualan, kemahiran & pertukangan yang berkaitan serta operator mesin, loji dan pemasang; dan

iii. Pekerja berkemahiran rendah

Pekerja asas.

17. Nilai harta tetap

Harta tetap meliputi semua barangan, baru atau terpakai, aset ketara atau aset tidak ketara yang digunakan secara berulang atau berterusan yang mempunyai hayat produktif lebih daripada setahun. Ia termasuk tanah, bangunan dan struktur, alat pengangkutan, komputer dan '*peripheral equipment*', mesin, peralatan serta perabot dan pemasangan lain. Perbelanjaan penyelidikan dan pembangunan turut diambil kira sebagai perbelanjaan harta selaras dengan *System of National Accounts (SNA) 2008*. Nilai harta tetap awal dan akhir bagi tahun rujukan 2021 adalah berasaskan nilai buku bersih. Pembelian, pindaan dan pembaikan besar atau perbelanjaan modal pada tahun berkenaan dikira pada nilai kos sebenar yang dibayar. Nilai harta tetap yang dijual dalam tahun semasa juga dikira pada nilai sebenar.

18. Pembundaran

Penjumlahan komponen mungkin berbeza dengan angka jumlah kecil atau jumlah besar disebabkan pembundaran.

19. Perubahan peratusan tahun ke tahun

Pengiraan adalah berdasarkan formula berikut:

$$y_t = y_0 (1 + r)^t$$

$$\text{di mana, } r = \left[e^{\frac{1}{t} \ln \left(\frac{y_t}{y_0} \right)} - 1 \right] \times 100$$

di mana, y_t = Nilai pada tahun semasa

y_0 = Nilai pada tahun sebelum

t = Bilangan tahun, $y_t - y_0$

r = Kadar pertumbuhan tahunan



NOTA TEKNIKAL

20. Simbol dan singkatan

-	:	tiada
%	:	peratus
&	:	dan
RM	:	Ringgit Malaysia
dll.	:	dan lain-lain
spt.	:	seperti
t.t.t.l.	:	tidak terkelas di tempat lain
W.P.	:	Wilayah Persekutuan



TECHNICAL NOTES

1. Scope and coverage

The survey covered all registered establishments engaged in **private health and social work services** which included main activities as follows:

- i. Hospital;
- ii. Medical and dental practice;
- iii. Other human health;
- iv. Residential care; and
- v. Social work activities without accommodation.

Overall, coverage of the survey for health and social work services was 26 industries at 5-digit level under the Malaysia Standard Industrial Classification (MSIC), 2008 Version 1.0. The complete lists of industries are shown in **Appendix**.

2. Source of establishments

The main source of updating statistical business frame namely Malaysia Statistical Business Register (MSBR). MSBR is a list of establishments operating in Malaysia which includes the Register of Companies (ROC), Register of Business (ROB) and Limited Liability Partnership (LLP) registered with the Companies Commission of Malaysia (CCM) as well as establishments registered with local authorities and professional bodies. The list in the MSBR is updated regularly based on surveys and censuses conducted by the Department of Statistics Malaysia and administrative data sources from other agencies. The main source of administrative data is from the Companies Commission of Malaysia (CCM). In addition DOSM also works together to obtain the latest information from other agencies such as the Employees' Provident Fund (EPF), the Royal Malaysian Customs Department, the Inland Revenue Board (IRB), local authorities and professional bodies.

The frame is updated to take into account new establishments and to record any changes in the status of the establishments such as closed down, not in operation, change in activity and location/ correspondence address so as to ensure that the frame is at the most current status.



TECHNICAL NOTES

3. Type of business activity

Type of business activity refers to both principal and secondary activities. The principal activity refers to the activity to which the establishment devoted most of its resources or activity which derived most of its income. Secondary activities are defined as those incidental or ancillary to the principal activity. The classification of the industry of the establishment is based on the principal activity and is in accordance with the Malaysia Standard Industrial Classification (MSIC), 2008 Ver 1.0. The MSIC 2008 conforms to the International Standard Industrial Classification of All Economic Activities (ISIC), Rev. 4, United Nations, with modifications to suit local conditions.

4. Concepts and definitions

The definition adopted in this publication based on the recommendations of the Malaysia Standard Industrial Classification 2008 (MSIC 2008) Version 1.0. The definitions include the following activities:

i. Hospital services

Refers to a healthcare establishment with an organised medical and nursing staff and with permanent facilities that provide a full range of medical services for people requiring treatment or observation, including, if required, in-patient care. The establishment needs to obtain a licence issued by the Ministry of Health to operate as a hospital.

ii. Maternity home services

Refers to any location other than government maternity homes that receives and provides nursing and midwifery care to women who have given birth or have recently given birth;



TECHNICAL NOTES

4. Concepts and definitions (cont.)

iii. General and specialised medical services

Refer to the services given by medical doctors and surgical specialists, physicians, physiotherapists, radiologists, and other professionals and pre-medical practitioners on their own account. Included are services provided only by establishments operated by doctors (issued with annual practising certificates) registered with the Malaysian Medical Council, maintained under the Medical Act 1971 (Amendment) 1993.

iv. Dental services

Refer to the provision of dental and surgical services, including the fabrication of dentures, by a dentist on his or her own account. Included are services provided only by establishments operated by dentists (issued with annual practising certificates) registered with the Malaysian Dental Council, maintained under the Dental Act 1971.

v. Other human health services

Refer to the services of nurses, midwives, cryotherapy, traditional massage, ambulance service, physiotherapy and occupational therapy services, ayurveda, and other alternative medical providers or other paramedics.

vi. Residential care activities

Refer to establishments that provide home care services, including nursing, supervision, and other types of care such as residential care activities for the elderly and disabled, orphanages, welfare homes, drug rehabilitation centres, palliative care hospices, and other residential care activities. This establishment must be under the supervision and control of the Department of Social Welfare and related agencies.

xi. Social work activities without accommodation

Refer to social work activities without accommodation for the elderly and disabled and other social work activities without accommodation, including counselling services.



TECHNICAL NOTES

5. Survey year

Survey year refers to the year in which a survey was conducted.

6. Reference year

The reference year of the survey was the calendar year 2021.

7. Method of data collection

This survey is generally conducted through three (3) methods, namely:

- i. Data collection method via Online method through the e-Aes portal: This method targets respondents who have used this method for previous routine surveys.*
- ii. Respondents were given a period of one month to complete and return the questionnaire to the Department.*
- iii. Face-to-face data collection method: Field work operation is carried out to get feedback from organizations that have not yet given answers from the two methods above and this method also targets organizations that have never been involved in a routine DOSM survey.*

8. Sampling design

Sampling design of the survey is a one-stage stratified random sampling. Categories of industries at two (2), three (3), four (4) and five (5) digit MSIC at state level have been classified as stratum and the establishment as the sampling unit.

Each stratum (industry) has been set up into four substrata to ensure the distributed sample takes into account the economic characteristics of the industry. The main substratum is heterogeneous and was fully covered. Whereas, other substratum that is homogeneous were sampled.

Main substratum includes large establishments that have significant total revenue in the industry while for the second to fourth substratum are based on micro, small and medium enterprise (MSME) categories.

TECHNICAL NOTES

9. Sample size and estimation procedure

The main statistics used to estimate the sample size is the total revenue. The formula used in the estimation of the sample size for a stratum is as follows:

$$n = \frac{(\sum N_i S_i)^2}{V + \sum N_i S_i^2}$$

where,

- n = Sample size
- N_i = Population size for stratum
- S_i^2 = Variance for stratum
- V = Desired variance

$$V = RSE^2 \cdot \left(\frac{\hat{Y}_i}{Z} \right)^2$$

where,

- $\hat{Y}_i$ = Total revenues for stratum i
- RSE = Relative standard error
- Z = Value of confidence level

Sample is distributed to substratum of the industry using Neyman Allocation Method as follows:

$$n_{hi} = \left(\frac{N_h S_h}{\sum N_h S_h} \right) n_i'$$

$h = 2, 3 \text{ and } 4$

where, $i = 1, 2, \dots, k$

- n_{hi} = Sample size for substratum h of stratum i
- N_h = Population size for substratum h
- S_h = Standard deviation for substratum h
- n_i = Sample size for stratum i
- h = Substratum
- i = Stratum



TECHNICAL NOTES

9. Sample size and estimation procedure (cont.)

The optimum sample size for this survey is 79,481 establishments. Establishments of the large categories were fully covered while establishments of the second to fourth substratum were randomly selected using systematic random sampling.

10. Weights

Weighted analysis is done using sampling weight to ensure that the selected sample can reflect population survey. The weights required are the sampling design weight and non-response weight.

The sampling design weight for the establishment at stratum h is as follows:

$$W_h = \frac{N_h}{n_h}, n = 1, \dots, 4$$

where,

$$\begin{aligned} N_h &= \text{Total population of substratum } h \\ n_h &= \text{Total sample of substratum } h \end{aligned}$$

Non response weight at substratum h as below:

$$NRW_h = \frac{1}{n'_h/n_h}, h = 1, \dots, 4$$

where,

$$\begin{aligned} n'_h &= \text{Numbers of respond sample size for substratum } h \\ n_h &= \text{Number of sample size for substratum } h \end{aligned}$$

The method of calculating the sampling design weight after the survey (adjusted weight) on substratum h as below:

$$W'_h = W_h \times NRW_h, h = 1, \dots, 4$$

where,

$$\begin{aligned} W_h &= \text{Sampling design weight at substratum } h \\ NRW_h &= \text{Non response weight at substratum } h \end{aligned}$$



TECHNICAL NOTES

11. Reporting unit

*The reporting unit used in the survey was **establishment**. An establishment is defined as "an economic unit that engaged in one activity, under a single legal entity and operating in a single physical location". Each establishment was assigned to an industry classification based on its principal activity.*

Each branch of a multi-branch organisation at a different location was conceptually treated as a different establishment. The establishment was requested to give separate returns for each activity in terms of value. However, if in practice, the accounts were centrally kept such that it was not possible to obtain separate data for each individual unit or branch. That entity or enterprise was treated as a single reporting unit and allowed to submit a consolidated questionnaire covering all units or branches.

12. Value of gross output

The value of gross output is defined to include the following items:

- Fees for health services rendered*
- + Capital expenditure on own construction*
- + Value of goods sold in same condition as purchased*
- Cost of goods sold in same condition as purchased*
- + Income from industrial services rendered to others*
- + Income from management services*
- + Rental income*
- + Research and development expenditure (in-house)*
- Opening stock of goods*
- + Closing stock of goods*
- + All other output (such as amount received for repairs and maintenance carried out on other establishments' machinery and equipment etc.)*



TECHNICAL NOTES

13. Value of intermediate input

The value of intermediate input is defined to include the following elements:

- Value of materials and supplies consumed (including transport charges incurred and taxes and duties paid)*
- +* *Cost of industrial work done by others*
- +* *Electricity and water purchased*
- +* *Value of fuel and lubricants consumed*
- +* *All other input costs (such as printing, purchase of transport services, travelling expenses, entertainment, advertising, legal fees, postage, management fees, rental etc.)*
- +* *Fees paid to non-working directors for their attendance at Board of Directors' meeting*
- +* *Value of free wearing apparel provided*
- +* *Staff training cost*
- +* *Payment to other establishment for providing workers*

14. Value added

Value added is the increment to the value of commodities and services contributed by the establishment. This value added is derived as the difference between the value of gross output and intermediate input.

15. Number of persons engaged

Employment covers all persons engaged during December or the last pay period of the reference year. The number of persons engaged was classified under the following categories:

a. Working proprietors and active business partners

This category refers to all individual proprietors and partners, part-time or full time, who are actively engaged in the work of the establishment. Therefore, it excludes silent and inactive partners.



TECHNICAL NOTES

15. Number of persons engaged (cont.)

b. Unpaid family workers

This is defined as all persons (full-time or part-time) in the household of any of the owners of the establishment who perform a specified job and work for a minimum of one third of the normal working time for the establishment, but do not receive regular payment either in cash or in kind for the work done. Such workers generally receive food, shelter and other support as part of the household of an owner but this would continue whether they worked in the establishment or not.

c. Paid employees (full-time)

This is defined as all paid workers who work for at least 6 hours a day and at least 20 days a month.

d. Paid employees (part-time)

This is defined as all paid workers who work for less than 6 hours a day and/or less than 20 days a month.

16. Category of skills

Category of skills has been categorized according to Malaysia Standard Classification of Occupations 2020 (MASCO) as follow:

i. High-skilled workers

Managers and professionals, researcher, technician and associate professionals;

ii. Semi-skilled workers

Clerical support, service and sales, craft and related trades workers and plant and machine operators and assemblers; and

iii. Low-skilled workers

Elementary occupations.



TECHNICAL NOTES

17. Value of fixed assets

Fixed assets covers all goods, new or used, tangible or intangible and repeated & continuously that have a normal economic life span of more than one year. Included are land, buildings and structure, transport equipment, other machinery equipment, computer software and furniture and fittings. The research and development expenditure is also treated as capital asset in line with the recommendation of System of National Accounts (SNA) 2008. Value of assets as at the beginning and end of 2021 were based on net book value. Purchases, alterations and major repairs or capital expenditure during the year valued at actual cost incurred. Value of assets sold during the year refers to the realized value.

18. Rounding

The sum of the component figures may not tally with the sub-total or total figures due to rounding.

19. Percentage change year-on-year

The annual growth rate used refers to the difference between two reference periods and can be calculated based on the following formula:

$$y_t = y_0 (1 + r)^t$$

where,

$$r = \left[e^{\frac{1}{t} \ln \left(\frac{y_t}{y_0} \right)} - 1 \right] \times 100$$

where,

y_t = Value at current year

y_0 = Value at previous year

t = Number of years, $y_t - y_0$

r = Compound annual growth rate



TECHNICAL NOTES

20. Symbols and abbreviations

-	: nil
%	: per cent
&	: and
RM	: Ringgit Malaysia
etc.	: et cetera
i.e	: that is
n.e.c	: not elsewhere classified
W.P.	: Federal Territory

The background features abstract, overlapping geometric shapes in various shades of blue. These shapes include triangles, polygons, and lines that create a dynamic, modern aesthetic. The colors range from a deep, saturated blue to a lighter, almost white blue, with some areas showing a gradient effect.

Lampiran *Appendix*

Muka surat ini sengaja dibiarkan kosong.
This page is deliberately left blank.

**LAMPIRAN
APPENDIX**

PIAWAIAAN KLASIFIKASI INDUSTRI MALAYSIA (MSIC) 2008 Ver. 1.0
MALAYSIA STANDARD INDUSTRIAL CLASSIFICATION (MSIC) 2008 Ver.1.0

PERKHIDMATAN KESIHATAN SWASTA DAN KERJA SOSIAL
PRIVATE HEALTH AND SOCIAL WORK SERVICES

MSIC 2008	Keterangan Description
86	Aktiviti kesihatan kemanusiaan <i>Human health activities</i>
861	Aktiviti hospital <i>Hospital activities</i>
86101	Aktiviti hospital <i>Hospital activities</i>
86102	Perkhidmatan rumah bersalin <i>Maternity home services</i>
862	Aktiviti amalan perubatan dan pergigian <i>Medical and dental practice activities</i>
86201	Perkhidmatan perubatan am <i>General medical services</i>
86202	Perkhidmatan perubatan pakar <i>Specialised medical services</i>
86203	Perkhidmatan pergigian <i>Dental services</i>
869	Aktiviti kesihatan kemanusiaan lain <i>Other human health activities</i>
86901	Pusat dialisis <i>Dialysis centers</i>
86902	Makmal perubatan <i>Medical laboratories</i>
86903	Perkhidmatan fisioterapi dan terapi pekerjaan <i>Physiotherapy and occupational therapy service</i>
86904	Pusat akupunktur <i>Acupuncture centres</i>
86905	Perkhidmatan ahli herba dan homeopati <i>Herbalist and homeopathy services</i>
86906	Perkhidmatan ambulan <i>Ambulance services</i>
86909	Perkhidmatan kesihatan kemanusiaan lain t.t.t.l <i>Other human health services n.e.c.</i>



**LAMPIRAN
APPENDIX**

PIAWAIAAN KLASIFIKASI INDUSTRI MALAYSIA (MSIC) 2008 Ver. 1.0
MALAYSIA STANDARD INDUSTRIAL CLASSIFICATION (MSIC) 2008 Ver.1.0

PERKHIDMATAN KESIHATAN SWASTA DAN KERJA SOSIAL
PRIVATE HEALTH AND SOCIAL WORK SERVICES

MSIC 2008	Keterangan Description
87	Aktiviti rumah penjagaan <i>Residential care activities</i>
871	Kemudahan rumah perawatan <i>Residential nursing care facilities</i>
87101	Rumah untuk orang tua dengan perawatan <i>Homes for the elderly with nursing care</i>
87102	Rumah penjagaan <i>Nursing homes</i>
87103	Paliatif atau hospis <i>Paliative or hospices</i>
872	Aktiviti rumah penjagaan untuk orang terencat akal, kesihatan mental dan penyalahgunaan bahan kimia <i>Residential care activities for mental retardation, mental health and substance abuse</i>
87201	Pusat pemulihan dadah <i>Drug rehabilitation centres</i>
87209	Aktiviti rumah penjagaan lain untuk orang terencat akal t.t.t.l. <i>Others residential care activities for mental retardation n.e.c.</i>
873	Aktiviti rumah penjagaan untuk orang tua dan orang kurang upaya <i>Residential care activities for the elderly and disabled</i>
87300	Aktiviti rumah penjagaan untuk orang tua dan orang kurang upaya <i>Residential care activities for the elderly and disabled</i>
879	Aktiviti rumah penjagaan lain <i>Silviculture and other forestry activities</i>
87901	Rumah anak yatim <i>Orphanages</i>
87902	Perkhidmatan rumah kebajikan <i>Welfare homes services</i>
87909	Aktiviti rumah penjagaan lain t.t.t.l. <i>Others residential care activities n.e.c</i>

**LAMPIRAN
APPENDIX**

PIAWAIAN KLASIFIKASI INDUSTRI MALAYSIA (MSIC) 2008 Ver. 1.0
MALAYSIA STANDARD INDUSTRIAL CLASSIFICATION (MSIC) 2008 Ver.1.0

PERKHIDMATAN KESIHATAN SWASTA DAN KERJA SOSIAL
PRIVATE HEALTH AND SOCIAL WORK SERVICES

MSIC 2008	Keterangan Description
88	Aktiviti kerja sosial tanpa penginapan <i>Social work activities without accommodation</i>
881	Aktiviti kerja sosial tanpa penginapan untuk orang tua dan orang kurang upaya <i>Social work activities without accommodation for the elderly and disabled</i>
88101	Aktiviti penjagaan harian untuk orang tua atau orang dewasa yang cacat <i>Day-care activities for the elderly or for handicapped adults</i>
88109	Aktiviti kerja sosial lain tanpa penginapan untuk orang tua dan orang kurang upaya <i>Others social work activities without accommodation for the elderly and disabled</i>
889	Aktiviti kerja sosial lain tanpa penginapan t.t.t.l. <i>Other social work activities without accommodation n.e.c.</i>
88901	Perkhidmatan kaunseling <i>Counselling services</i>
88902	Aktiviti penjagaan harian kanak-kanak <i>Child day-care activities</i>
88909	Aktiviti kerja sosial lain tanpa penginapan t.t.t.t. <i>Other social work activities without accommodation n.e.c.</i>

MAKLUMAT LANJUT BERKAITAN PENERBITAN INI BOLEH DIRUJUK DI JABATAN PERANGKAAN NEGERI SEPerti BERIKUT:
FURTHER INFORMATION RELATED TO THIS PUBLICATION CAN BE REFERRED TO STATE OFFICES AS FOLLOWS:

Pengarah,
Jabatan Perangkaan Malaysia Negeri Johor,
Tingkat 14, Menara Tabung Haji,
Jalan Air Molek,
80000 Johor Bahru, Johor.
Tel : 07 - 225 3700
Faks : 07 - 224 9972
E-mel : jpjohor@dosm.gov.my

Pengarah,
Jabatan Perangkaan Malaysia Negeri Perak,
Tingkat 3, Blok A, Bangunan Persekutuan Ipoh,
Jalan Dato' Seri Ahmad Said (Greentown)
30450 Ipoh, Perak
Tel : 05 - 243 6107
Faks : 05 - 255 1073
E-mel : jpperak@dosm.gov.my

Pengarah,
Jabatan Perangkaan Malaysia Negeri Kedah,
Aras 1, Zon C, Wisma Persekutuan,
Pusat Pentadbiran Kerajaan Persekutuan,
Bandar Muadzam Shah,
06550 Anak Bukit, Alor Setar, Kedah
Tel : 04 - 700 1240
Faks : 04 - 733 8412
E-mel : jpkedah@dosm.gov.my

Pengarah,
Jabatan Perangkaan Malaysia Negeri Perlis,
Tingkat 1, Bangunan Perodua Kangar,
No. 2C, Persiaran Jubli Perak,
01000 Kangar,
Perlis
Tel : 04 - 976 7381/9025
Faks : 04 - 976 8950
E-mel : jpperlis@dosm.gov.my

Pengarah,
Jabatan Perangkaan Malaysia Negeri Kelantan,
Tingkat 8, Bangunan Persekutuan,
Jalan Bayam,
15514 Kota Bharu, Kelantan.
Tel : 09 - 7419449
Faks : 09 - 7482142
E-mel : jpkelantan@dosm.gov.my

Pengarah,
Jabatan Perangkaan Malaysia Negeri Selangor,
Tingkat 9, Bangunan Darul Ehsan,
Jalan Indah, Seksyen 14,
40000 Shah Alam, Selangor
Tel : 03 - 5515 0200
Faks : 03 - 5518 0408
E-mel : jp Selangor@dosm.gov.my

Pengarah,
Jabatan Perangkaan Malaysia Negeri Melaka,
Aras 7 & 8, Wisma Persekutuan,
Jalan MITC, Hang Tuah Jaya,
75450 Ayer Keroh, Melaka.
Tel : 06 - 252 2725
Faks : 06 - 252 2711
E-mel : jpmelaka@dosm.gov.my

Pengarah,
Jabatan Perangkaan Malaysia Negeri Terengganu,
Tingkat 9, Wisma Persekutuan,
Jalan Sultan Ismail,
20200 Kuala Terengganu, Terengganu.
Tel : 09 - 622 3062
Faks : 09 - 622 9659
E-mel : admin_jptrg@dosm.gov.my

Pengarah,
Jabatan Perangkaan Malaysia Negeri Sembilan,
Tingkat 12, Wisma Persekutuan,
Jalan Dato' Abdul Kadir,
70000 Seremban, Negeri Sembilan.
Tel : 06 - 765 5000
Faks : 06 - 765 5002
E-mel : jpnsembilan@dosm.gov.my

Pengarah,
Jabatan Perangkaan Malaysia Negeri Sabah,
Tingkat 1-3, Blok C, Kompleks Pentadbiran
Kerajaan Persekutuan Sabah, Jalan UMS,
Beg Berkunci No. 2046, 88999 Kota Kinabalu, Sabah.
Tel : 088 - 484 602
Faks : 088 - 484 659
E-mel : jpsabah@dosm.gov.my

Pengarah,
Jabatan Perangkaan Malaysia Negeri Pahang,
Tingkat 7, Bangunan Persekutuan,
Jalan Gambut,
25000 Kuantan, Pahang.
Tel : 09 - 516 3931/7
Faks : 09 - 514 4636
E-mel : jppahang@dosm.gov.my

Pengarah,
Jabatan Perangkaan Malaysia Negeri Sarawak,
Tingkat 7 & 8, Bangunan Tun Datuk Patinggi
Tuanku Haji Bujang, Jalan Simpang 3,
93514 Kuching, Sarawak.
Tel : 082 - 240 287
Faks : 082 - 242 609
E-mel : sarawak@dosm.gov.my

Pengarah,
Jabatan Perangkaan Malaysia Negeri Pulau
Pinang,
Tingkat 6, Bangunan Persekutuan,
10400, Jalan Anson, Pulau Pinang.
Tel : 04 - 226 6244
Faks : 04 - 229 9499
E-mel : jppulaupinang@dosm.gov.my

Pengarah,
Jabatan Perangkaan Malaysia
Wilayah Persekutuan,
Tingkat 14 & 15, Wisma FGV, Jalan Raja Laut,
50350 Kuala Lumpur.
Tel : 03 - 2267 2400
Faks : 03 - 2691 0639
E-mel : dosmwp@dosm.gov.my

Muka surat ini sengaja dibiarkan kosong.
This page is deliberately left blank.



**MALAYSIA
MADANI**

www.dosm.gov.my



@StatsMalaysia