

Proceedings of

12th World Congress on

INDUSTRIAL HEALTH, HEALTHCARE AND MEDICAL TOURISM

October 16-17, 2017 Dubai, UAE



Conference Series

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12th World Congress on

Industrial Health, Healthcare and Medical Tourism

October 16-17, 2017 Dubai, UAE

Keynote Forum (Day 1)



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INDUSTRIAL HEALTH, HEALTHCARE AND MEDICAL TOURISM

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Ahmed Husain Ebrahim

Ministry of Health, Bahrain

A qualitative analysis of Singapore's medical tourism competitiveness

Medical tourism, a rapidly growing market, has been recognized by many countries as a potential sector for economic diversification. Although Singapore stands out as one of the top destinations of medical tourism, investigation regarding its competitiveness has been limited and narrow in scope. This case study takes a qualitative approach to identify and analyze the factors that keeps Singapore, as a competitive medical tourism destination. Based on a holistic approach, this study has shown that integrating diverse strategies for medical tourism development with sound government policies and proactive management practices have led to significant positive outcomes towards mutual success of tourism, healthcare and other economic sectors of Singapore. Additionally, the study provides strategic insights to drive lasting improvements in both public and private sectors of aspiring countries through efficient management and intelligent utilization of resources within and outside the medical tourism sector. Based on this study, medical tourism competitiveness can be defined as the ability to strategically plan, set viable policy goals, establish effective multi-stakeholder partnerships, maintain an attractive environment and ensure that all of these capabilities are harmonized to optimize the delivery of medical services that rank high on parameters of quality, innovativeness, affordability and safety. The content of this definition is relevant to Singapore's medical tourism experience analyzed in this study. Policy makers, interested in medical tourism development, need to put into account not only a synchronized pattern of actions needed between government agencies and relevant private stakeholders to improve the performance of the sector, but to ensure that long-term measures undertaken by the public sector are viable and can diversify the tourism sector. Additionally, there must exist a robust public interest to create an environment that empowers private enterprise. This absolutely necessitates integrated strategic planning, a successful execution strategy and continuous improvement and development solutions.

Recent Publications

- 1.Ebrahim A and Ganguli S (2017) Strategic priorities for exploiting Bahrain's medical tourism potential. *Journal of Place Management and Development*; 10(1): 45-60.
- 2.Ganguli S and Ebrahim A (2017) A qualitative analysis of Singapore's medical tourism competitiveness. *Tourism Management Perspectives*; 21: 74-84.

Biography

Ahmed Husain Ebrahim is currently working as the Head of Rehabilitation in Bahrain's Ministry of Health. His areas of interest and professional expertise encompass quality of life, strategic management in healthcare and medical tourism development.

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October 16-17, 2017 Dubai, UAE

**Rebecca Samson**

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Integrated model of nursing education, practice and management for quality patient care

Statement of the Problem: Testing of an integrated model of nursing education, clinical practice and management through nursing research. Despite education and practice being viewed as inseparable concepts, an education-practice gap still exists in nursing. Bridging the nursing education, practice and management through nursing research will build a positive work culture among educators and practitioners which would lift up the standard of patient care. The purpose of this study is to strengthen the quality of patient care through integration of nursing education, service, management and enhancing evidence based nursing practice (EBP).

Methodology & Theoretical Orientation: The objectives of the study were to assess the existing nursing service in the hospital, to develop a model with integrated approach, to test the integrated model for its effectiveness and to stabilize the pattern of integrated practice based on the results of the study. An integrated framework was utilized to focus on the interaction between the administrators and the nursing personnel to understand the relationship and the context in which the integrated model works for better quality patient care.

Findings: Implementation of integrated model in nursing brought out the following important outcomes. Improved patient care, emotional safety for nursing personnel, earlier identification of changes in patient's condition, reduced workload for clinicians as they care for the same patients, better communication among disciplines and with physicians.

Conclusion & Significance: The organization felt a need for continuing this integrated model to implement evidence based practice through nursing research. The institution has become a role model for many other medical college attached hospitals in South India and in particular Puducherry and Tamil Nadu.

References

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- 2.Sharma (2013) Textbook of Nursing Education. Jaypee: 12-15.
- 3.Polit (2013) Essentials of Nursing Research, Lippincott, 8th edition; 265-78.
- 4.Jogindra Vati (2013) Nursing management and Administration, Jaypee: 93-97.

Biography

Rebecca Samson is a peer team member for the National Assessment and Accreditation Council and on the board of faculty selection for various institutions/ universities. She has also presented numerous papers and given keynote addresses and has organized workshops and conferences at state, national and international level. She has authored three books besides being Editor of two journals, developed four manuals in clinical nursing and has received seven awards from various organizations including the prestigious-National Florence Nightingale award from President of India in 2016 and the recent one as Best Educationist in 2017.

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Kadhim Alabady

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Dubai Health Authority, UAE

Stress in the workplace? Results from workplace stress survey, 2016

Background & Aim: The workplace stress survey was conducted online between March 1 to April 30, 2016 among adults aged 18+ years who work for Dubai Health Authority are either employed full-time or part-time employed. The survey conducted by Public Health and Safety Department as part of DHA 2016-21 Strategy Initiative (3.2 develop and implement a strategy for Occupational Health and Therapy/under Public Health and Safety program).

Method: The design of the survey is cross-sectional studies that provides a snapshot of the frequency of a work stress and related characteristics without retrospectively or prospectively follow up investigations. Participation in the workplace stress survey was completely voluntary. Individuals have the right to participate and freedom to refuse. The survey questionnaire based on a questionnaire developed by The American Institute of stress (AIS) Workplace Stress Survey. Respondents for this survey are given the opportunity to complete the survey in English and Arabic version. The two versions were identical. The results from the two datasets were combined into one database for the analysis. Results were calculated as needed by age band, sex, occupation, sectors, etc.

Results: The response rate based on DHA employee's registry for 2014 estimated to be around 10.9%. Around 389 employees who work as clerks or in similar jobs that might have on access to computer and therefore cannot participate in the survey. The workplace stress survey responders were more likely to be female. Over 70% of the respondents were females (881, 73.3%) compared to 321 (26.7%) were males. Overall, majority of responders can handle stress at work. 76.9% of respondents can handle stress in work, 15.9% of them can handle stress well and 61% moderately well. Only 22.8% of participants have some difficulties by encountering problems that need to be resolved. Males have slightly higher rate than females for encountering problems that need to be resolved but not statistically significantly difference. A relatively large percentage of people working in administrative jobs who were encountering problems that need to be resolved but the results show that nurses are the best in dealing with stress then physicians. Employees aged 25-49 years have the highest rate of encountering problems that need to be resolved. Further analysis shows that people aged 45-49 have the highest rate than other age categories of this group or to the overall group, all survey respondents.

Conclusion & Recommendations: The next step is to review program and policy options that might be applied within Dubai Health authority (DHA) to identify effective prevention approaches and programs to target high risk employees. Implementing measures to prevent work-related stress can benefit employees and the workplace by creating a safe and healthy working environment. Create a work environment that promotes employees well-being.

Biography

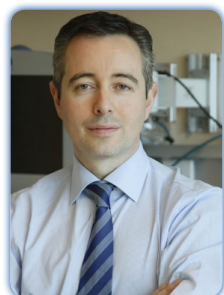
Kadhim Alabady is a Fellow of the Royal College of Physicians and Surgeons of Glasgow. He has completed his Doctorate degree in Public Health and Epidemiology, Master's degree in Clinical Epidemiology (MSc), Master's degree in Public Health (MPH), all from The Netherlands universities with broad experience driving research and development (R&D) strategies and operations. He has been registered as an Epidemiologist Grade A with The Netherlands Epidemiological Society. He has numerous publications in the UK in mental illnesses, cancer, cardiovascular diseases, diabetes, dementia, autism, COPD, population health, road casualties and others.

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Sweeney John Sweeney Y

Health Care Informed, Ireland

Patient safety: Assurance through accreditation?

Fundamentally the process of accreditation has not changed since its emergence in the 1960's in the US, that being a 'Stop-Start' process where organizations pour enormous resources into on-site surveys, only to tread water between these visits and allow the implementation requirements to build up. Monitoring compliance via on site snap shots is supported by some accreditors by required reporting and submissions but is this enough to ensuring continual assurance of patient safety? The research shows several difficulties in this approach not least of which is the lack of sustained improvement in patient safety. This presentation identifies that the cost of the current models are often unsustainable due to the significant costs experienced by both the accreditor and as a result, the accredited organization because of the need for so much onsite surveys. Change the concept of accreditation, from snap shot review, to continuous access monitoring by the accreditors and the model opens up huge potential to have a more effective and efficient, impact on patient safety. This paper presents a proposal to make this a possibility by allowing the accrediting body access to the organizations own internal systems to externally view big data in real time. Access provides the accreditor with a window into the soul of the organization, allowing for continual monitoring as deemed required. Continuous organizational access by accrediting bodies and similar external regulators is the next major step forward for patient safety evaluation. It is recognized that to achieve this, a change is required in the relationship between the accreditor and the accredited—with organizations required to show an open hand with evaluators working towards a more supportive role to assist organizations to get it right in real time.

Recent Publications

- 1.Sweeney J, Brooks AM, Leahy A (2003) Development of the Irish National Patient Perception of Quality of Care Survey. *International Journal for Quality in Health Care*; 15(2): 163-168.
- 2.Sweeney J, Heaton C (2000) Interpretations and variations of ISO 9000 in acute health care. *International Organization for Standardization. Int J Qual Health Care*; 12(3): 203-9.

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- 1.Walshe K and Boyd A (2007) Designing regulation: A review. A review for the Healthcare Commission of the systems for regulation and their impact on the performance in seven sectors and a synthesis of the lessons and implications for regulatory design in healthcare, Manchester: Centre for Public Policy and Management.
- 2.Braithwaite J, Greenfield D, Westbrook J, Pawsey M et al (2010) Health service accreditation as a predictor of clinical and organizational performance: a blinded, random, stratified study. *Quality and Safety in Health Care*; 19: 14-21.
- 3.Hafner J, et al. (2011) The perceived impact of public reporting hospital performance data: interviews with hospital staff. *International Journal for Quality in Health Care*; 23(6): 697-704.

Biography

Sweeney John Sweeney Y is the Director of Research and Development with the Irish Health Services Accreditation Board. He is Lecturer of the Royal College of Surgeons in Ireland. He has acted as the Technical Advisor to the International Society for Quality in Healthcare (ISQua) on external evaluation. In 2012, he was appointed as an International Society for Quality in Healthcare (ISQua) Expert and in 2013 he was elected to the Board of ISQua.

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**Yassen Alfoteih**

Canadian University Dubai, UAE

Shisha: The silent killer

Smoking tobacco is known to increase morbidity and mortality worldwide. Water pipe tobacco smoking is becoming a remarkable phenomenon in the GCC countries. Moreover, this habit shows a continual proliferation pattern related to the fact that the number of smokers and the number of shisha places are increased sharply. While teens have become more addicted to shisha due their new lifestyle, some adult use shisha during their business meetings and negotiations. The clinical data has apparently addressed the drastic impact of smoking on human health, while the impact of pathogens of shisha (itself) is not properly studied. This study aims at examining the risk of bacterial and fungal transmission through frequent or/and repeated usage of same water pipe by different smokers in public cafes. Furthermore, this study will recommend the best practices to eliminate pathogenic infection. 110 samples were collected from different cafes in Dubai and Ajman cities in the time period between Nov. 2016 and Feb. 2017. Bacterial and fungal strains were examined using standard protocol of culturing, isolating and identifying microorganism. In addition, the resistance of isolated bacteria to common antibiotics was determined by the mean of antibiotic susceptibility test of each isolate. Six bacterial strains have been detected which are *Pseudomonas putida*, *Staphylococcus saprophyticus*, *Pantoea agglomerans*, *Bacillus cereus* and *Providencia alcalifaciens*. One of the most important finding of the current study is the isolated bacteria *Staphylococcus saprophyticus* which showed methicillin resistance. This makes the current study of clinical importance for health promotion and awareness.

Biography

Y Alfoteih has obtained his PhD in Environmental Biology from the University of Hohenheim, Germany and did his Post-Doctoral Research in Epidemiology at Newcastle University, Institute of Cellular and Medical Sciences. He has worked across many universities in Syria and UAE as an Assistant Professor and has also worked as a Consultant in industry. He has published in many international journals and has presented and chaired sessions at national and international conferences. He is presently serving as the Chair of the School of Public Health and Health Sciences at Canadian University Dubai, UAE.

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Seow Ta Wee

Universiti Tun Hussein Onn Malaysia, Malaysia

Safety and health issues of solid waste management in developing countries

All activities in solid waste management involve risk, either to the worker directly involved, or to the nearby resident. Risks occur at every step in the process, from the point where residents handle wastes in the home for collection or recycling, to the point of ultimate disposal. This paper discusses both occupational health risks to workers and environmental health risks to residents and workers. In developing countries, workers and waste pickers handling solid waste throughout the world are exposed to occupational health and accident risks related to the content of the materials they are handling, emissions from those materials, and the equipment being used. People living and working in the vicinity of solid waste processing and disposal facilities also are exposed to environmental health and accident risks. These risks relate to the emissions from the solid wastes, the pollution control measures used to manage these emissions, and the overall safety of the facility. As with occupational risks, these risks are being substantially managed in high-income countries, but are still largely unmanaged in most developing countries. In developing countries, the health-related underpinnings of solid waste management still need to be addressed. In developing countries, while the per capita quantities of wastes and labor costs are low, the costs of providing solid waste management (even at their current lower standard of operation) are not proportionately low. Equipment capital costs and fuel costs in low-income countries are comparable to those in high-income countries, and sometimes are higher because of importation costs and currency exchange variations. To overcome safety and health issues of solid waste management in developing countries, governance needed to have efficient planning for short term, long term and special program for waste picker toward sustainable development in solid waste management at national level.

Recent Publications

Seow Ta Wee and Muhamad Azahar Abas (2016) A Review of The Public Policy for Solid Waste Management in Malaysia: An Insight Towards Sustainable Solid Waste Management. *Aust. J. Basic & Appl.Sci.*; 10(1): 58-64.

Ta Wee Seow and Chi Kim Lim (2015) A Mini Review On Landfill Leachate Treatment Technologies. *International Journal of Applied Environmental Sciences*; 10(6): 1967-1979.

Biography

Seow Ta Wee has his expertise in environmental management, he has 16 years teaching, research and consultation experience. He has completed his PhD in Environmental Management from Universiti Kebangsaan Malaysia (UKM). His research interest is in field of environmental management, solid waste management, safety and health management, community Development, regional transformation development, urban and rural development & environment, housing, social science, construction sociology and construction waste management. He supervise more than 30 post graduate students included post-doctoral.

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