



24th Global

Nursing & Healthcare

March 01-02, 2017 Amsterdam, Netherlands

Scientific Tracks & Abstracts
Day I



Nursing Education | Healthcare and Management | Women Health Nursing

Session Chair

Lisa Quinones

Suffolk County Community College, USA

Session Co-Chair

Ben Appleby

Birmingham City University, UK

Session Introduction

Title: Student impact on health: Fresno state university mobile health program

Kathleen Rindahl, Fresno State University, USA

Title: A phenomenological exploration of the effects of human patient simulation on undergraduate student nurses confidence to practice in the clinical environment

Harjinder Sandhu, Kwantlen Polytechnic University, Canada

Title: Integrating sustainability into nurse education: A survey among European nurse educators and professionals

Maud Huynen, Maastricht University, Netherlands

Title: The awareness of human milk bank in Korean mothers: Web-based survey

Nam Mi Kang, Konkuk University, South Korea

Title: Transcultural adaptation and psychometric evaluation of an Arabic version of patient satisfaction with nursing care quality questionnaire

Alaa AlBashayreh, Sultan Qaboos University, Muscat-Oman

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Student impact on health: Fresno State University mobile health program

Kathleen Rindahl

Fresno State University, USA

Statement of the Problem: Research has shown health disparities exist in rural populations that differ from inner cities. These disparities include limited access to health care due to a shortage of primary providers, limited clinic facilities as well as transportation issues getting to existing clinics. Rural populations also have a higher rate of poverty, lower educational levels as well as multicultural ethnic groups, which limits access to health information and information on preventative health care.

Aim: The purpose of the mobile health program has three goals; provide preventative health screenings, education and screening services to underserved populations; provide clinical training sites for nursing students; and to provide an opportunity for inter-professional collaboration among students.

Methodology & Theoretical Orientation: The program is guided by the essential curriculum elements developed by the American Association of Colleges of Nursing as well as the core competencies for inter-professional collaborative practice set for by the inter-professional education collaborative (2011). Curriculum elements include research, policy, organization and financing of health care, ethics, professional role development and theoretical foundations of nursing practice, human diversity and social issues, as well as health promotion and disease prevention. Competencies for inter-professional collaboration include values and ethics for collaboration, roles and responsibilities, communication and teamwork.

Findings: Despite health care reform in the United States, many still do not have access to health care due to an impacted system and adequate resources. Additionally, the burden of disease and access to care is significant in both rural and urban areas of Fresno.

Conclusion & Significance: The program's success is due to the engagement and collaborative efforts of students to provide services in rural and urban areas throughout central California. Evaluation of data continues however, statistics for the last three semesters reveal 25 site visits, 1,516 patients seen and 3,321 student service learning hours.

Biography

Kathleen Rindahl is an Assistant Professor and Lead Faculty of Community Health course at School of Nursing, Fresno State University, California. She is a Nurse Practitioner with passion for community health and wellbeing of underserved populations. She has 10 years of Clinical experience as a Migrant Health Nurse working on a Mobile Health Unit. In addition to teaching, she also continues to practice as a Nurse Practitioner in an urgent care clinic in underserved area of Fresno.

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A phenomenological exploration of the effects of human patient simulation on undergraduate student nurses confidence to practice in the clinical environment

Harjinder Sandhu

Kwantlen Polytechnic University, Canada

There is a growing need for undergraduate students to acquire quality placements for clinical practice. However, with the current state in healthcare, quality placements have been very hard to attain. Therefore, HPS have become the latest trend in many nursing schools in attempt to address this issue. In this study, HPS has been seen to help with confidence levels for clinical practice. However, the benefits that students' take away from the simulation based learning activities is very dependent on how the simulation is organized, structured and conducted. This notion is supported by the findings of this study. A qualitative phenomenological study design using two focus groups was used. A convenience sample of students from one educational institution; University of British Columbia (UBC) in the term three, of their undergraduate nursing degree was emailed an invitation to attend a focus group session. There were six major themes and multiple sub-themes that came about during this study that impacted how students perceived their experience with HPS in relation to clinical confidence. The major themes that were evident from the participants' experiences were classified as: Realism, building on knowledge, safe environment, critical thinking and confidence and anxiety. From this study, several conclusions can be drawn about how HPS affects undergraduate student nurses' confidence for clinical practice. Findings indicate, it is crucial to feel that the whole simulation experience depicts reality. Realism was the major theme related to clinical confidence. If the scenario was not simulating enough participants felt, they did not learn much from them. However, during times when simulations were at the optimal level, participants felt that they acquired many things, such as confidence, clinical techniques, linking theory to practice, identifying their own knowledge gaps, critical thinking, and background knowledge to help in similar cases in the actual clinical environment. It is very important that HPS is well integrated into the nursing programs so students achieve great results from the simulations, which can be done if the simulations being conducted and organized at the right times in the programs.

Biography

Harjinder Sandhu has been working at Kwantlen Polytechnic University (KPU) since 2013. Over the years, she has taught in a variety of settings including laboratory, class and clinical. She has worked within the lab setting and enjoyed teaching with the high-fidelity simulators. In Jan 2017, she will be joining her lab team and taking on a new role as Simulation Facilitator. Her research project during Graduation at University of British Columbia was related to "Simulation education and how it affects the competence and confidence of nursing students in the clinical environment". She completed her Master's Degree in June 2012.

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Integrating sustainability into nurse education: A survey among European nurse educators and professionals

Maud Huynen

Maastricht University, Netherlands

Statement of the Problem: Based on the moral obligation to apply a health-in-all-policies approach, it is time that health systems become more environmentally responsible and sustainable. The involvement of well-informed nurses is crucial in facilitating this transition. Insights regarding nursing experts' view on 'sustainability in health care' and the integration of this topic in nurse education, however, are limited.

Methodology & Theoretical Orientation: We explored the perspectives on sustainability in health care among 52 European nurse educators and senior professionals, using a two-staged Delphi survey study. We assessed the most important reasons and barriers for integrating sustainability in nursing programmes. This survey also allowed for the assessment of the experts' opinion about the most important sustainability knowledge topics and skills to be included in nurse education.

Findings: Participants associated 'sustainability in health care' with both sustaining health care itself and environmental sustainability. Moreover, they believed a sound definition of sustainability in health care should combine both these aspect. The participating experts clearly believed that it is important to integrate sustainability-related education throughout nursing curricula. They considered this importance in order to educate future-fit nurses; to increase environmental awareness and decrease environmental impact; to promote healthy sustainable communities; to respond to changing CSR, professional and/or educational guidelines; and to recognize our moral responsibility. Important barriers included competing curriculum demands, lack of relevant knowledge among teachers, and the current limited inclusion in nursing standards. Survey outcomes provided the top 10 sustainability related knowledge topics and the top 10 sustainability related skills, based on expert ranking.

Conclusion & Significance: With proper sustainability-related training, nurses will be able to practice to the full extent of their skills and to take significant leadership roles in sustainable health care policy, planning, and provision. Hence, efforts to develop sustainability-related education for nursing programmes need to be urgently moving forward.

Biography

Maud Huynen is a Research Fellow at International Centre for Integrated Assessment and Sustainable Development, Maastricht University. She holds Masters Degrees in Environmental Health Science (2001) and Epidemiology (2003), and a PhD in Global Health (2008). She has been involved in several European and Dutch projects exploring the health impacts of climate change. She is currently working on the NurSus TOOLKIT project. The aim of this project is to "Enhance the availability/relevance of a sound learning offer in Sustainability Literacy and Competency (SLC) in nurse education by developing innovative teaching and learning approaches and materials".

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The awareness of human milk bank in Korean mothers: Web-based surveyNam Mi Kang¹, Won-Ho Hahn², Jia Jung³, Seunghyun Song⁴ and Hyun-Jun Kim¹¹Konkuk University, South Korea²Soon Chun Hyang University, South Korea³Asia Human Milk Research Center, South Korea⁴University of Antwerp, Belgium

Aim: Human milk bank is known as one of the best alternative options for sick infants including premature infants. However, only two human milk banks (HMBs) are working in Korea. In the present study, we evaluated the awareness on the HMB in Korean mothers who had infants younger than 18 months old to find out the issues that would help establishment of HMB in Korea.

Methods: The survey questionnaire was developed by a team composed with neonatologists, obstetricians, nurses, nutritionists and health care specialists. The internet survey was performed by sending emails to mothers who were registered to Maeil family members have children younger than 18 months for 864 Korean women. Totally 864 questionnaire were received among 114,469 answers and the results were analyzed.

Results: However, only 49% of subjects had awareness of the presence of HMB. Unfortunately, less than half of them could get information about HMB by official way including mass media. In addition, 76% of subjects were found not to want to use HMB. Most important reason was found as a concern on the safety of donor milk including lifestyle of donors, infection controls and possible nutritional loss of banked milk.

Conclusion: The purpose and function of HMB is not widely educated and it seems to be most important for women who has negative concept about HMB in Korea. Thus, further study is warranted with more numbers of subjects after active public education about the HMB.

This work was supported by the National Research Foundation of Korea(NRF) grant funded by the Korea government(MSIP) (No. 2015R1A2A1A15056046). This work was supported by the National Research Foundation of Korea(NRF) grant funded by the Korea government(MSIP) (No. 2015R1A2A1A15056046) and Korea-EU exchange program.

Biography

Nam Mi Kang has completed her PhD at Seoul National University and Post-doctoral studies at Texas Austin University School of Nursing. She is a Professor of Nursing department at Konkuk University, South Korea. She has published many papers in reputed journals and has been serving as a society Director and review member of *Korean Journal of Women Health Nursing*.

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Transcultural adaptation and psychometric evaluation of an Arabic version of patient satisfaction with nursing care quality questionnaire

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Sultan Qaboos University, Oman

Quality measures are central to the concept of quality improvement in healthcare and patient satisfaction with nursing care quality (PSNCQ) is considered a reliable measure for assessing and improving the overall quality of healthcare. In Oman and the Middle East, there is a lack of useful scales which can be utilized in measuring and reporting PSNCQ in an Arabic context. This absence of valid and reliable quality measures limits research and publication in this particular area. The purpose of this study is to perform transcultural adaptation and psychometric evaluation of an Arabic version of the PSNCQ questionnaire. A cross-sectional, methodological design was employed and a sample of 292 adult patients admitted in a tertiary hospital in Oman was utilized. Data were collected from January through March, 2016, using a secure online survey method. The mean score of PSNCQ was 72.3 (standard deviation 12.9). Internal consistency of the scale was satisfactory with a Cronbach's α of .96. The item-level content validity index ranged from .83 to 1, and the scale-level content validity index was .98. Evidence of construct validity was obtained (convergent and divergent validity). Exploratory factor analysis revealed a single factor solution, explaining 63.3% of the variance. Overall, this study provided a 17-item, Likert-scaled self-reporting instrument which is psychometrically sound for its content, comprehension, readability and practicality, to measure PSNCQ in an Arabic context.

Biography

Alaa AlBashayreh is a Lecturer of Nursing at Sultan Qaboos University, Muscat-Oman. He completed his MSc in Nursing Administration at Jordan University of Science and Technology, Irbid-Jordan, in 2010. His research interests include "Nursing education and mixed-method research on nursing leadership, management, preparedness, transition to practice, nurse working conditions, job outcomes, nursing sensitive indicators, healthcare quality and safety outcomes".

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*Workshop
Day I*



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Inderdeep Kaur

Sri Guru Tegh Bahadur Khalsa College, India

Awakening 'Ajna chakra' for soul, body and mind

The chakra system, an ancient Indian way of viewing body divides human system into seven energy centers or chakras along the spine. To possess a healthy mind and body, energy must flow freely in these chakras. When the chakras are balanced, the whole body works in harmony and we feel elevated, energized and fit. It is essential that seven chakras which run from the base of the spine to the head in the human body stay open, aligned and fluid. In case of any blockage in this path, energy cannot flow and the body starts losing its vitality. Emotional balancing, physical well-being, and mental clarity affect how well each chakra can filter energy and the degree of this infusion will in return determine our state of mental and physical health. The simplest way to strike the balance is through chanting meditation. As each of the chakras is associated with a specific mantra in form of sound, syllable, word or group of words chanting these 'Bija' mantras or seed mantras is considered capable of creating transformation within one's body and mind. In Indian traditional system, seven cleansing 'Bija' mantras associated with the chakras are: "LAM"-chakra 1 (root), "VAM"-chakra 2 (sacral/navel), "RAM"-chakra 3 (solar plexus), "YAM"-chakra 4 (heart), "HAM"-chakra 5 (throat), "OM"-chakra 6 (third eye/brow) and "OM"-chakra 7 (crown). The ancient Indian healing system also believes that the physical body is made up of five elements namely - earth (matter in solid form), water (matter in liquid form), fire (radiant matter, such as electricity), air (matter in gaseous form) and aakash (ether- the tiny intercellular spaces in the human body). Imbalance of these elements disrupts the immune system leading to a disease. To stay fit we need to not only keep our mind and body free of toxins but also our soul tranquil. We can achieve this by connecting one part of the body with another in a particular manner through mudras. If a communication is established between chakras and mudras, a sustainable and harmonious flow of energy in the body is maintained. According to hashta yoga, each of our fingers relates to the energy of one of five elements of which our physical body is made, and also to the chakra associated with that element. The joining of fingers in a specific manner creates positive effect on the human body. When a finger representing an element is brought into contact with the thumb, that element is brought into balance and body makes an attempt to fight the disease. Mudras start electromagnetic currents within the body which balance various constituting elements and restore health.

Biography

Inderdeep Kaur is presently working as an Associate Professor in Botany at SGTB Khalsa College, University of Delhi, India. She has travelled widely and participated in several International conferences. During personal interactions with undergrads over several years, she found them stressed due to various reasons. In a bid to help them distress, she has picked up Stress Management and Traditional Meditation Practices. She was invited to organize a workshop on stress management in Philadelphia Stress Management Summit 2015.

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Nursing Management | Telemedicine and e health | Nursing Practice

Session Chair

Lisa Quinones

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Session Co-Chair

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Session Introduction

Title: Relationship between nurse's professional behavior and organizational culture and commitment in hospitals affiliated to Iran

Alice Khachian, Iran University of Medical Sciences, Nursing & Midwifery Schools, Iran

Title: Utilizing a mobile health (mHealth) application to improve hypertension monitoring and self-management in an underserved community: A pilot study

Peijia Zha, Rutgers University, USA

Title: Thinking inside the Box: Using telehealth to expand clinical education and training resources in the developing world

Elke S. Zschaebitz, Georgetown University School of Nursing, USA

Title: Experince of cancer nursing in Tanzania

Haule Mary Baltasary, Ocean Road Cancer Institute, Tanzania

Title: What are health professionals' intentions toward using products of research in clinical practice? A systematic review and narrative synthesis

Ben Appleby, Birmingham City University, UK

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Relationship between nurse's professional behavior and organizational culture and commitment in hospitals affiliated to Iran University of Medical Sciences

Alice Khachian

Iran University of Medical Sciences, Iran

Background & Aim: Nurses are the largest and most important human resource for health care organizations, community health promotion is important. The healthcare system, especially the members of the nurses who are active in completely different culture conditions is of utmost importance. Professional nursing is one of the factors involved in the professional, cultural and organizational commitment. Strong and positive culture in the organization can accept nurses to better interact with colleagues and ultimately provide satisfaction in completing tasks and organizational objectives to be followed. The success of the organization depends on the members and staff. Recently, researchers believe that professional commitment and organizational structures necessarily are contradictory and are not incompatible, but can significantly correlate with each other. The purpose of this study was to determine the relationship between nurse's professional behavior and organizational culture and commitment in hospitals affiliated to Iran University of Medical Sciences.

Method: This study was a cross-sectional descriptive correlation that aims to give community nurses in the hospitals affiliated to Iran University of Medical Sciences. In this study, after obtaining the necessary and ethical permits, stratified samplings with proportional allocation of qualified nurses (200 nurses) were selected. For the study of four self-constructed questionnaire on demographic data, Goz professional behavior, organizational culture and organizational commitment of Allen and Meyer were used. The questionnaire was completed by nurses to self-report method and duration of response to the questionnaires was about 20-30 minutes, the nurses were empowered to complete the questionnaire within 48 hours and returned to the researcher. After collecting the data and data entry into SPSS version 21 were analyzed. In order to achieve specific objectives and answer the research questions, descriptive statistics such as mean and standard tables and the central indices of dispersion such as standard deviation and Pearson correlation test was used.

Results: Professional nurses' mean score $108/98 \pm 17/41$, organizational culture mean' score $42/56 \pm 17/32$ and organizational commitment $97/94 \pm 8/66$ was obtained. Between professional behavior and organizational culture, there was no significant relationship (p -value= $0/706$) and only subscale attention to detail and professional behavior was obtained as there was a direct relationship between statistical significance (p -value= $0/032$). There was no significant relationship between professional behavior and organizational commitment (p -value= $0/152$) and statistically significant relationship was directly observed only between the normative and professional behavior (p -value= $0/007$).

Conclusion: As a conclusion, nurses working in hospitals affiliated to Iran University of Medical Sciences did not show statistically significant relationship between professional behavior, organizational culture and commitment .

Biography

Alice Khachian is an Assistant Professor and Faculty Member at Iran University of Medical Sciences, Iran. She completed her Under-graduate and Master studies in Nursing at Esfahan University of Medical Sciences as Medical Surgical Nursing Instructor. She has been involved in nursing education since 1997 at Iran University of Medical Sciences as Faculty Member and she completed her PhD Nursing Education in 2012. Her professional activities are based on Clinical Education, Orthopedic Nursing, Nursing Education and Management. She is also a member of Academic Consultant Committee, member of Nursing Organization of Iran as Scientific Consultant.

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Thinking inside the box: Using telehealth to expand clinical education and training resources in the developing world

Elke Zschaebitz

Georgetown University School of Nursing, USA

Twenty years ago, The University of Virginia became one of the first medical centers in the United States to see the potential of using video communications to improve access to needed healthcare, especially for rural communities. To that end, the University formed a Center for Telehealth to mobilize physicians, nurses, community health professionals and technologists to harness broadband and wireless technologies to deliver critical medical services to patients regardless of location. This UVA Network has created access to care for thousands in rural communities throughout Virginia but also has extended the reach of health education, training and specialty care to Latin America, Africa and Southeast Asia. And with emerging globalization, the health of people in distant communities can affect the health of people everywhere.

The focus of this presentation will be the current state of telehealth capabilities in providing both broadband and wireless connectivity into hard to reach communities. With the decrease cost of video-technology, the rapid expansion of cellular service and the near ubiquitous presence of cell phones, the environment for care is expanding. The speakers, with 20 years of nursing, public health and telehealth experience, will provide a primer on how to establish a telehealth program, a review of costs and technologies as well as an exploration of various clinical use cases.

In particular, the speakers will review the outcomes from four successful projects that include a surgical and nurse training program with the University of Rwanda, a specialty clinic in Liberia, a mid-wife training in the DRC (PROSAMI) as well as educational and research support for projects in Uganda, Myanmar and Bangladesh.

Participants will leave with a broader understanding of telehealth, program design and ideas for expanding the reach of clinical services.

Biography

Elke Jones Zschaebitz, DNP, APRN, FNP-BC, has served as adjunct faculty in the FNP program at Georgetown since 2013. She has been an NP since 1998, initially working in Germany for nine years with the Department of Defense. During that time, she discovered her love of teaching, working with programs such as Student2Student (S2S) for which she received a national award for innovation and excellence in mentoring high school students within the Department of Defense educational network. Elke returned to the states in 2007 and was appointed as an assistant professor at the University of Virginia (UVA) School of Nursing. She continued her academic work in 2010 serving as faculty at the Virginia Commonwealth University School of Nursing to help improve their preceptorship program. While at UVA, she received an innovative teaching award in 2010 for her program promoting cultural competence and ensuring preceptorship immersion in the coalfield region in Southern Appalachia. She also served as faculty for the Healthy Appalachia Institute, a public health institute at UVA's College at Wise. Elke's clinical practice experience includes work with the Wilkinson Pediatric Clinic at Ft. Lee, Planned Parenthood of the Blue Ridge in Charlottesville, the Minute Clinics of Richmond, the High Risk Breast and Ovarian Clinic at UVA and in an integrated clinic called Thrive Health Care serving the LGBT community as well as those with complex physical and mental health conditions. She currently practices as a family nurse practitioner at the UVA Elson Student Health Center in Charlottesville, VA. In addition she serves as a volunteer at the Charlottesville Free Clinic precepting FNP and medical students in a community-based interdisciplinary program.

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Experience of cancer nursing in Tanzania

Mary B Haule

Ocean Road Cancer Institute, Tanzania

Oncology nursing has not given priority in Tanzania. This has led to inadequate care to cancer patients admitted in the hospitals from primary level. Lack of knowledge and skills can results misunderstanding between nurses and relative who need more information on patient progress. Currently, there is no nurse who has specialization in oncology nursing; there is no undergraduate and postgraduate course in oncology in East Africa; and moreover, there is limited fund for sponsorship. Nurses need to have basic knowledge of cancer disease, treatment and supportive care so as to improve quality of care. Oncology nursing is crucial in cancer centers or any hospital which provide cancer treatment, so as to improve care to patients. Nurses spent most of the time with patients; therefore, we need to equip them with knowledge and skills in oncology nursing. International collaboration of nurses is vital to build capacity in cancer care.

Conclusion and Recommendation

Oncology nursing is crucial in Cancer centers or any hospital which provide cancer treatment, so as to improve care to patients. Nurses spent most of the time with patients; therefore we need to equip them with knowledge and skills in oncology nursing. International collaboration of nurses is vital so to build capacity in cancer care.

Biography

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What are health professionals' intentions toward using products of research in clinical practice? A systematic review and narrative synthesis

Ben Appleby

Birmingham City University, UK

Background: Trying to get research and products of research into clinical practice is an enduring problem. A clearer picture is emerging as to how individual practitioners respond toward practical problems of changing clinical practice, but this does not include health professionals' intentions to use products of research and what influences their intentions.

Aim: Aim of this study is to explore health professionals' intentional behavior and what determines their intention to use products of research in clinical practice.

Design: Systematic review and narrative synthesis. Data sources: Five databases were searched systematically. This included BNI, HMIC, Psych INFO, CINHALL and MEDLINE; articles published in only English language were included.

Review Methods: PRISMA guidelines were used as a framework for structuring the review and methods of narrative synthesis to analyze study outcomes.

Results: 18 studies matched the final inclusion criteria. All studies used questionnaires to measure intention. Most studies involved nurses or physicians. Nurses' intentions were mostly influenced by their perceived ability to use guidelines in their practice. Physicians' intentions were often influenced by their perceptions of the usefulness and relevance of the guideline and peer pressure among the professional group. Practice habits, when added to intentional models were also predictive of intentional behavior. In studies that compared intentions with behavior, the level of intention often did not match self-report or actual behavior.

Biography

Ben Appleby is a NMC registered Nurse Tutor and Senior Lecturer at Birmingham City University and qualified from City University London and St Bartholomew's School of Nursing and Midwifery in September 1998, with a degree in Nursing and Human Science. He has gone on to practice in Cardiology, Coronary Care and Cardiac Rehabilitation and completed a Master's degree in Nursing Research in 2003 from Kings College London, and a PhD this year from University Birmingham. My main research interest is understanding intentional behaviour when implementing guidelines in clinical practice. Teaching practice focuses on evidence based practice, research methodology and acute nursing practice.

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Scientific Tracks & Abstracts
Day 2



Cardiovascular Nursing | Mental Health Nursing | Pediatric Nursing

Session Chair

Heather Mc. Donald

NewBrunswick University, Canada

Session Co-Chair

Saifone Moungkum

Burapha University, Thailand

Session Introduction

Title: Factors influencing microvascular complications among people with type 2 diabetes in eastern region, Thailand

Saifone Moungkum, Burapha University, Thailand

Title: Getting back in the game: Returning to work after a depression

Heather Mc. Donald, NewBrunswick University, Canada

Title: Predictors of early initiation of first sex among youth: Comparison study among Cameroonian and Gabonese youth aged 15-24 years

Minet Tesfai, Tongji Medical College of Huazhong University of Science and Technology, China

Title: Nursing in modern and traditional medicine for population health

Sylvain Haba, Center of Medical Care, Guinea

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Factors influencing microvascular complications among people with type 2 diabetes in eastern region, Thailand

Saifone Mounkkum, Muang Chonburi and Wanlapa Kunsongkeit
Burapha University, Thailand

The purpose of this cross-sectional study was to examine the prevalence of the complications for microvascular and determining factors influencing microvascular complications. Data were collected from 350 patients with type 2 diabetes, who received the cares at the diabetes clinics from eleven governmental hospitals located in the Eastern region of Thailand. The data were analyzed by means of descriptive statistics, and binary logistic regression analysis.

The results revealed that there were 239 cases having the complications for microvascular, calculated as 68.3% (95%CI: 63% – 73%). Among diabetic patients with microvascular complications, diabetic kidney disease accounted for the majority of them (35.98%), followed by diabetic retinopathy (24.68%) and peripheral neuropathy (5.44%). There were relationships between the following variables: age, HbA1C, triglycerides level, duration of diabetes, and the complications as such with statistical significance ($p < .01$). Participants, who had age over sixty years, had higher risk of having microvascular complications about 13.48 times (OR = 13.48, 95%CI: 2.18 – 83.48). Those with the diabetes who had HbA1C level more than 8% showed a higher chance of microvascular complications than those with HbA1C level less than 7% .46 times (OR = .46, 95%CI: .23 – .90). Participants, who had high triglycerides level showed a higher chance of microvascular complications about 2.15 times (OR = 2.15, 95%CI: 1.20 – 3.85). Moreover, those with the diabetes for over 20 years showed a higher chance of microvascular complications about 4.76 times than those with diabetes for shorter time (OR = 4.76, 95%CI: 1.28 – 17.67).

Conclusion: Such findings can be used for health care provider in order to develop the intervention focused on micro vascular complications in early diagnosed diabetes mellitus patients. Early identification of diabetic kidney disease, diabetic retinopathy and diabetic neuropathy early care management lead to prevent micro vascular complications

Biography

She was a registered nurse from 1996 – 2004 in the surgical department, Banpong Hospital, Thailand 2004-2005 Diabetic foot care clinic, Banpong Hospital, Thailand. She started her education as RN, 1995, Boromarajonani Collage of Nursing, Thailand MS, 2004, faculty of Nursing, Burapha University Ph.D., 2011, Faculty of Nursing, Burapha University. She is a lecturer at Burapha University, Chonburi province, Thailand. The area of interest is self-management, case management especially, type 2 diabetes patients. I would like to conduct effective program to delay complications and improve self – management for patients.

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Getting back in the game: Returning to work after a depression

Heather MacDonald

University of New Brunswick, Canada

In this grounded theory study 40 English speaking women from a rural province of Canada were interviewed to learn about their experiences of returning to work after a depression. Women described getting back in the game as being difficult and challenging as they had not completely recovered by the time they returned to work. However, they felt compelled to return to work in order to keep their jobs, in order to resume health and social benefits, and to reinstate their wages. A number of themes emerged from the interview data. These included the presence of stigma, the active pursuit of silence, and battling adversity. Each of these core themes serves to describe the women's experiences of returning to work. The women described wearing a mask or "putting on a face" to combat the stigma associated with their illness. In this presentation the three themes will be discussed along with a thorough description of wearing a mask. Strategies that employers can employ to ease the transition back to work will be discussed.

Biography

Dr. MacDonald completed a Master's degree in Nursing at the University of Toronto, Canada and a PhD at the University of Manchester in the UK. Currently she is a Professor in the Faculty of Nursing at the University of New Brunswick (Canada). Dr. MacDonald's doctoral work examined respite for parents who were caring for children who required complex care. This paper comes from that work. Dr. MacDonald has three children of her own.

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Predictors of early initiation of first sex among youth: Comparison study among Cameroonian and Gabonese youth aged 15-24 years**Minet Tesfai Hadish, BSN, MSN**

Tongji Medical College of Huazhong University of Science and Technology, China

Statement of the Problem: In Cameroon and Gabon the most highly HIV prevalent West African countries, adolescents are sexually active before age 15. The main complications of early and unsafe sexual intercourse are unwanted pregnancy, sexually transmitted infections, death, abnormal sexual behaviors, and long-lasting or even lifelong mental and physical health consequences. Therefore, the aim of this study was to determine the predicting factors of early initiation of sex among 15-24 aged Cameroonian and Gabonese youth.

Methods: This study used nationally representative datasets from Demographic and Health Surveys (DHS) of Cameroon (2011) and Gabon (2012). A total of 14,880 youth were participated. SPSS version 22 was used to run a binary multivariate logistic regression.

Result: Their first sex was early, ranged from their 5th to 24th years old with a mean age of 10.69 ± 7.69 in Cameroon and 12.36 ± 6.32 in Gabon. Most of Cameroonian (51.5%) and Gabonese (78.4%) youth had sex before their first marriage or cohabitation. First marriage before age 15 was high among Cameroonian (36.1%) and Gabonese (25.6%) youth. On multivariate analysis, age, place of residence, educational level, religion, marital status, wealth index, occupation, comprehensive HIV/AIDS knowledge and attitude towards people living with HIV of respondents were found to be significant predictors sex before age 15, premarital sex and marriage before 15 variables. Comparing by gender, Cameroonian and Gabonese males were more likely to have higher premarital sex and sex before age 15. However, Cameroonian males (AOR=0.23, $p < 0.001$) and Gabonese males (AOR=0.20, $p < 0.001$) were less likely to be married before age 15 than their female counterparts.

Conclusion: In this study, the predicting factors of early initiation of sex among youth were contextually related to the demographic and sociocultural background of the participants, and therefore, designing sexual health education based on their different needs is crucial. Besides, parents and school collaboration can be a fundamental tool to prevent the early initiation of sex among youth.

Biography

Mr. Minet Tesfai Hadish has graduated his Bachelor of Science in Nursing (BSN) from School of Nursing, Asmara College of Health Sciences, Asmara, Eritrea with a very great distinction and awarded Gold Medal in 2010. He has worked in the same college for six years as an assistant lecturer; nurse practitioner, class room instructor, researcher, clinical teacher and course coordinator, as well as member of the executive committee for research coordination of the school of nursing and the college. He is active member of the Eritrean Nurses Association (ERINA) and in close association with BDHO; the Eritrean National HIV/AIDS Association as Trainer and Consultant. Currently, he is studying Master's of Nursing Science at School of Nursing, Tongji Medical College of Huazhong University of Science and Technology, Wuhan, China.

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24th Global

NURSING & HEALTHCARE

March 01-02, 2017 Amsterdam, Netherlands

Nursing in modern and traditional medicine for population health

Sylvain Haba

Center of Medical Care, Guinea

In Guinea, the health system was unreliable, its fragility rapidly favored the spread of EBOLA, but prevention by vaccinations was essential, health education was not respected because of tradition and certain practices Religious and traditional (insufficient vaccination coverage for fear of AIDS, excision, tattooing, polygamy, illiteracy, lack of communication, lack of hygiene, no information for health, Alcohol and smoking). Many unhealed patients in hospitals are sometimes abandoned to themselves either because of high fees for care or lack of appropriate proper treatment on everything in mental patients or HIV and congenital diseases. The lack of the educational system generally worsens the improvement of certain critical areas. The Talitha-koumi center of which I am the leader uses his means to help some using modern medicine, traditional medicine using plants, and animal substances by asking God's grace for the healing of those who turn to This center. These patients are chained because of their agitation, their violence, the attempts to flee. The elderly generally suffer from complications of high blood pressure, diabetes, syphilis, meningitis, HIV, eclampsia. Children, sativa cannabis, alcohol, tobacco, cocaine, HIV.

Biography

Sylvain Haba was born on July 10/1963 in Kpoulo (Region of N'Zérékoré). He is the father of three children. He took admission to the baccalaureate in 1984, guidance for school nurses during 1985-88. He has done internships during 1989- 1997 in a medical post in Sebete Prefecture of Gaoual and during 1992-1993 distance education on medical semiology. In 1998 he was admitted for service to the public service and during 2004-2005 Traditional medicine training in DR Congo. He returned to Guinea in 2006 creation of the Center of medical care, traditional spiritual Talithakoumi in (Labe) Guinea. In 2008 he got transferred from the center to Conakry

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*Workshop
Day 2*



24th Global

NURSING & HEALTHCARE

March 01-02, 2017 Amsterdam, Netherlands



Laureen Turner

University of San Francisco, USA

Active learning strategies in nursing education moving away from the traditional lecture

This presentation consists of informing participants about best practices in active learning to be used in the typical lecture classroom. Content will focus on the use of strategies that include audience response systems, case studies, gaming, classroom assessment techniques (CATS) and collaborative learning. A focus will be on the effective use of technology in the classroom that includes smart phones, tablets and computers.

Biography

Laureen Turner is a dedicated professional with a passion for interactive, evidence-based teaching pedagogy to enhance student learning. In the classroom, she utilizes several interactive opportunities to enhance student learning. In the clinical setting, she works toward finding unique learning opportunities to augment classroom instruction and promote critical thinking. Her areas of clinical expertise include: Pediatrics, Maternal Child, Home Care, Hospice Care, Nursery and Informatics. Her Teaching expertise includes Professional Nursing, Pediatrics, Maternal Child, Evidence-Based Practice and Nursing Informatics. Additionally, she lectures on topics of active learning strategies, critical thinking in clinical education and preparation for clinical education, self-efficacy and faculty mentorship.

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Critical Nursing | Community Nursing

Session Chair

Heather Mc. Donald

NewBrunswick University, Canada

Session Co-Chair

Saifone Moungkum

Burapha University, Thailand

Session Introduction

Title: Nurses' perception toward using a new eight vital signs chart at ICUs

Magda Bayoumi, Beni-Suef University, Egypt

Title: Global nursing and women health

Brittany Faitao, Suffolk County Community College, USA

Title: Inter-professional team collaboration and the care and maintenance of persons with type 2 diabetes in the Middle East

Rianne Carragher, Jessie Johnson, University of Calgary, Qatar

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NURSING & HEALTHCARE

March 01-02, 2017 Amsterdam, Netherlands

Nurses' perception toward using a new eight vital signs chart at ICUs

Bayoumi Magda, Al-morshed B, Sayed A, and Mosa A
Beni-Suef University, Egypt

Background: Assessment of the traditional vital signs at ICUs as temperature, pulse, respiration, blood pressure and oxygen saturation are inadequate to determine patients' clinical condition deteriorating; however assessment of eight vital signs should be included in a routine nursing assessment to improve patients' outcomes for appropriate nursing diagnosis on proper time.

Aim: To assess nurses' perception toward using a new eight vital signs chart at ICUs

Methods: Descriptive cross-sectional study design was used in this study composed of 45 nurses from all ICUs at the Beni-Suef University Hospital from November 2015 to January 2017., data were collected using structured interview to assess nurses' perception toward using a new eight vital signs chart at ICUs.

Results: The study findings demonstrate the distribution of all nurses' perception items and found more than two third of the study sample (68.9%) were agreed to use eight vital signs, and almost all nurses had fantastic perception to eight vital signs, moreover about (84.4%) had adequate knowledge regarding assessment of pain, level of consciousness, urine output, as well as more than half of study sample reported the degree of importance is extremely important to assess additional three vital signs with basic vital signs (55.6%). However barrier may face nurses to assess pain, level of consciousness and urine output were reported high percentage (91.1%), and (97.8%) agreed to use the new eight vital signs chart at ICUs and defiantly it will help for better design of Nursing Diagnosis.

Conclusion: ICU nurses strongly agreed to apply new 8 vital signs chart at ICUs for meticulous designing of nursing diagnosis of patients' clinically unstable.

Recommendation: The study is recommended to consider the importance of application a new eight vital signs chart instead of traditional five vital signs and generalized it in the hospital documentation system.

Keywords: Eight vital signs, ICUs, Nurses' Perception, Egypt.

Biography

Magda Bayoumi is currently working as an assistant professor in Beni -Suef University and the specialization is on Critical Nursing. DR. Magda Bayoumi is RN,MSN,DSN Lecturerin the Medical-Surgical Nursing Department of Beni- Suef University, Egypt.

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Inter-professional team collaboration and the care and maintenance of persons with type 2 diabetes in the Middle East: A systematic review

Rianne Carragher and Jessie Johnson
University of Calgary, Qatar

Statement of the Problem: The World Health Organization has ranked the Middle East as the second most prevalent region globally for Type 2 diabetes. Effective provision and maintenance of care for patients with type 2 diabetes requires an interdisciplinary approach in order to negate further financial burden on the healthcare system. Currently, treatment options initiated by physicians focus mainly on pharmaceuticals however, lifestyle factors also have a tremendous impact on a patient's wellness or illness. Unhealthy behaviours remain the primary cause of co-morbidities related to type 2 diabetes. A potential solution to this issue is to use an inter-professional team approach when caring for this patient population. Continued support from multiple healthcare disciplines, involving pharmacists, dieticians, physicians and nurses promotes holistic and patient centred health care leading to decreased type 2 diabetes complications and hospital admissions. The purpose of this narrative review is to look at the present literature involving the use of an inter-professional team approach to the care and maintenance of type 2 diabetic persons in the Middle East. The aim is to construct meaning surrounding the use and effectiveness of this collaborative approach with this patient population. **Methodology & Theoretical Orientation:** This research commenced with a systematic review that utilizes a constructionist theory as the theoretical framework. **Conclusion & Significance:** Type 2 diabetic patients need to be involved in a collaborative approach to care in order to prevent potential related health problems. It is imperative that all individuals working with the inter-professional team demonstrate working collaboratively and holistically with the type 2 diabetic population.

Biography

Jessie Johnson is RN, PhD and her research expertise involves looking at inter-professional teamwork and care and management of persons with chronic disease and inter-professional teamwork and the care and maintenance of palliative persons.

Rianne Carragher is MSN, RN, NP-C and her clinical area of expertise is with the adult and gerontology population with an additional focus in renal and heart health working toward wellness promotion and illness prevention.

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