





9th Annual Congress on

Nursing & Healthcare

December 03-04, 2018 | Amsterdam, Netherlands



Sessions

Primary Healthcare | Nursing Education & Research | Nursing Diagnosis | Quality in Healthcare

Session Chair

Ernst-Wilhelm Radue University of Basel, Switzerland

Session Introduction

Title: Ethical dilemmas in selecting health care technologies

Miriam I Siebzehner, Ministry of Health, Israel

Title: Evaluation of the nursing diagnosis risk for falls in the elderly in primary healthcare

Paulo Henrique Fernandes dos Santos, University of Brasilia, Brazil

Title: Performance measurement of the quality healthcare: Standpoint perspectives the staff practicing

in the primary health care establishments in Morocco Zaadoud Brahim, University Ibn Tofail, Morocco

Title: Nursing and medical technology: Knowledge and practical skills

Miriam I Siebzehner, Ministry of Health, Israel





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Miriam I Siebzehner, J Nurs Health Stud 2018, Volume: 3 DOI: 10.21767/2574-2825-C5-014

ETHICAL DILEMMAS IN SELECTING HEALTH CARE TECHNOLOGIES

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Background & Context: The Israel National Health Insurance Law, enacted in 1995, determines a National List of Health Services (NLHS) to which all citizens are entitled. In order to maintain the high standard of medical care provided by the Israel healthcare system, the NLHS should be updated periodically. The NLHS can be updated only by allocation of funds from the Government. The rapid development of medical technologies together with the limited resources available in the healthcare system makes priority setting inevitable. In 1998, a systematic process to adopt new medical technologies within the NLHS was initiated. The decision making process for inclusion of health technologies into the NLHS is based on the recommendations of a National Public Advisory Committee which integrates not only the clinical and economical aspects, but social and ethical values. Members of the committee include representatives of government officials, health professional, economists, and of the public amongst others and ethicist and a rabbi.

Content & Findings: Decision makers strive to improve quality of life and welfare of the population, but at the same time they confront the dilemma of balancing health benefits with a shortage of resources, therefore, rationing is required. The prioritization of health technologies provoke many ethical dilemmas that the decision makers and the society in Israel are facing throughout the years, such as: what should be given priority? Is it costly medications for relatively few people or inexpensive ones for many?

Conclusion: Israel offers a unique example of implementing a methodology of health technology assessment (HTA), combined with a priority setting process debated within a National Public Advisory Committee forum which takes into account cultural and moral values. After years of experience, this process is considered by many health policy analysts in Israel and abroad, to be a breakthrough on an international scale.

Biography

Miriam I Siebzehner is a Deputy Director and Senior Researcher Israeli Center for Technology Assessment in Health Care (ICTAHC). She holds two MA's in Nursing from Tel Aviv University and in Public Administration from Harvard's John F Kennedy School of Government. She received her PhD in Health Management from Ben-Gurion University. She is the Chief Nurse Officer of the Central Health District, Ministry of Health. She has published more than 30 articles in professional Israeli and international journals. She has lectured in professional educational programs in Tel-Aviv University. During 20 years, she is a Consultant to the Israeli Foreign Ministry, Division for International Cooperation on Health Issues for Latin America and selected African countries. She has received professional awards: The International Council of Nurses and 3M, Israel Award for outstanding professional achievements, the Ministry of Health Outstanding Employee Award in recognition of highest level of excellence, The Prime Minister Office Civil Service Commission Outstanding Governmental Employee Award.

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EVALUATION OF THE NURSING DIAGNOSIS RISK FOR FALLS IN THE ELDERLY IN PRIMARY HEALTHCARE

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Objective: The objective is to evaluate the nursing diagnosis risk for falls of NANDA-I in the elderly in primary healthcare in the Federal District/Brazil.

Methodology: Descriptive, quantitative, cross-sectional study performed in two basic health units, with a sample of 156 elderly patients with chronic diseases. The data collection consisted in blood collection, nursing consultation and assessment of the risk of falls. The data were analysed in statistical software SPSS 21.0.

Results: The majority of the sample was female (79.5%), mean age of 67.9 ± 5.8 years, with hypertension (80.8%), diabetes mellitus (59.6%), or both (48.1%). The elderly presented a high prevalence of history of falls (71.2%). The intrinsic risk factors of NANDA-I most prevalent were visual impairment (73.7%), impaired mobility (70.5%) and history of falls (69.9%), and the extrinsic factors were insufficient anti-slip material in the bathroom (60.3%) and use of throw rugs (58.3%). The intrinsic factors that increased the risk of falls were the use of assistive device $(0dds \ Ratio-OR \ 3.50; \ p=0.030)$, difficulty with gait $(0R \ 2.84; \ p=0.019)$ and alteration in cognitive functioning $(0R \ 1.26; \ p=0.019)$; the extrinsic factor was throw rugs $(0R \ 1.59; \ p=0.041)$.

Conclusion: This diagnosis has proved to be an effective tool that helps nurses in the screening of vulnerability to falls. The study contributed to remedy a gap of studies prepared to evaluate this nursing diagnosis in the elderly in the context of primary healthcare, in addition to demonstrating the importance of its use in conjunction with other tools for assessment the risk of falls, aiming at the planning of preventive actions of risk factors for these accidents.

Biography

Paulo Henrique Fernandes dos Santos has completed his Masters' from Health Sciences and Technologies Program of the University of Brasilia, Brazil. Currently, he is Professor of Nursing Department, University of Brasilia, and conducts research about Human Aging, Nursing Process and Primary Healthcare.

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Zaadoud B et al., J Nurs Health Stud 2018, Volume: 3 DOI: 10.21767/2574-2825-C5-014

PERFORMANCE MEASUREMENT OF THE QUALITY HEALTH CARE: STANDPOINT PERSPECTIVES THE STAFF PRACTICING IN THE PRIMARY HEALTH CARE ESTABLISHMENTS IN MOROCCO

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Objective: The subject of our research concerns the measurement of the performance in Primary Health Care Establishments (PHCE) and how to evaluate the impact of qualitative approaches on the perception of the actors of the PHCE and the level of performance in these establishments.

Method: The data collection was made through a questionnaire for the staff who exercises in the ESSP. This questionnaire contains three parts adapted according to the model of Donabedian (structure, processes and results), understanding seven domains. The first part concerns the structure dedicated to the quality planning, the leadership and the human resources management. The second part concerns the processes dedicated to the process management, the monitoring and the analysis. The third part handles the results of the quality and the user's satisfaction. Every domain contains 4 to 9 questions handling an aspect with 46 questions. The questionnaire was sent to the concerned in an individual way either directly, or through emails, assuring the guarantors

Result: We note significant differences in the perception of the quality of the care of the health workers general. The steps of ACQ remain a good tool to improve the quality of the care. The satisfaction of the population remains high with a performance of (74%), the steps of ACQ are effective tools of the organizational change, the impact on the change of professional practices for our case (68%) have this image, which varies, enters average and low on the CQ. Continuity and integration of the care are assured only in 34% of the cases. The fragmentation of the services, the ineffective use of the suppliers of care, the bad quality of the collection and the management of the information, the lack of coordination, the lack of importance given to the prevention, as well as the deficits in the access to healthcare stand out as the main problems.

Conclusion: Even if the links are not established within the framework of a scientific research, quality approaches are generally recognized as an essential tool to help establishments to improve the quality and the safety of the patients. Tools proposed in quality approaches remain an essential lever for the promotion of quality approaches. They demonstrated positive effects on the quality of the care, but some constraints slow down their evolution. It is not still common to make evaluations of the quality of the care in the ESSP to obtain the relevant information on the benefit. The necessity of having measurement tools for performance which puts in coherence the piloting of the operational level with the strategy, to integrate the organizational objectives into the measures of operational performances and make estimate its structures towards a real management by the quality

Biography

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NURSING AND MEDICAL TECHNOLOGY: KNOWLEDGE AND PRACTICAL SKILLS

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Introduction: Many medical technologies are used by the nursing staff and help provide the patients with better treatment. The nursing staff makes use of medical equipment during the course of their work, most of the time without having proper and adequate qualification. As a result, nurses learn how to use the equipment through working with it, as on the job training. This method of learning is inadequate therefore nurses feel threatened and decline from using the technologies.

Aim: To improve the nurses' skills for using medical equipment in the hospital by providing an organized training program.

Methodology: The project was carried out according to the model of Shyuhart (Carr & Lietmann, 1995) and includes the following stages: planning, implementing, estimating and concluding. The planning stage consisted of selecting departments, and using pretest questionnaires. In the implementation stage the teams were divided in smaller groups, training and practicing skills away from patients. The training was on the use of existing and new equipment. The project was evaluated by filling of questionnaires.

Results: The results showed a rise in the level of knowledge on existing equipment and a high beginning level of knowledge for the new equipment. Levels of anxiety and feelings of security while using the equipment were tested, and a significant improvement was found in both cases.

Conclusions: It is possible to improve the introduction of medical equipment to be used by nurses into hospital wards throughout training programs.

Biography

Miriam I Siebzehner Deputy Director and Senior Researcher Israeli Center for Technology Assessment in Health Care (ICTAHC). She holds two MA's in Nursing from Tel Aviv University and in Public Administration from Harvard's John F Kennedy School of Government. She received her PhD in Health Management from Ben-Gurion University. She is the Chief Nurse Officer of the Central Health District, Ministry of Health. She has published more than 30 articles in professional Israeli and international journals. She has lectured in professional educational programs in Tel-Aviv University. During 20 years, she is a Consultant to the Israeli Foreign Ministry, Division for International Cooperation on Health Issues for Latin America and selected African countries. She has received professional awards: The International Council of Nurses and 3M, Israel Award for outstanding professional achievements, the Ministry of Health Outstanding Employee Award in recognition of highest level of excellence, The Prime Minister Office Civil Service Commission Outstanding Governmental Employee Award.

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