

percent of more than 800 workplace investigated failed to adhere fully to regulations (Abdul Rahman, 2007). Mass medias are also continuously reporting various accidents at the workplace which results in deaths. As a developing nation, improvements to its workers safety and health issues should go hand in hand with Malaysia economic booming. With the increased number of its small and medium enterprise (SME), Malaysia is facing greater challenge to monitor that OSH requirements are adhered to in spite of trying to stay competitive and survive with its limited capital or financial resources. Limited capital would result in limited number of workforce on their payroll and efforts toward preparing an effective occupational health and safety code of practice. The United Kingdom recently had proposed Occupational Safety and Health implementation system scheme designed specifically to assist the small and medium enterprise to implement and fulfill the existing acts requirements effectively (Anonymous, 2007). United Kingdom Safety and Health Executive which has the enforcement authority of occupational health and safety in the country has identified the needs for leadership in the management of occupational health and safety matters. After making a comparison of implementation models of occupational health and safety of two developed nations namely United States and the United Kingdom, it is concluded that the involvement of various parties including the public in policy making, the development of appropriate infrastructure and human resources, enforcement autonomy, focused job scope within department, appropriate language usage, training inclusive of all forms of diversity at work and appropriate penalty are key success factors at reducing death rates, accidents and lost work days at the workplace for these two countries (Khoo, Kh'ng, Chee et al., 2007). Through questionnaire distributed to SME in the northern part of Malaysia, results were analysed and findings with regard to the implementation of OSH in workplace is discussed.

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Aircraft Noise Pollution Study and Community Annoyance: A Case Study of One International Airport in Thailand

Sillaparassamee Ratthapol¹, Kraichat Tantrakarnapa²

1. Nakhonratchasima College, Thailand

2. Mahidol University, Thailand

Aircraft noise exposure on the community surrounding the international airport in Thailand depends on the operation of airport. These may cause negative effects to residential area and workers in the airport. This research aimed to study noise pollution level generated from the airport and the annoyance in the communities nearby. The monitoring of equivalent continuous noise levels in 1 second (Leq. 1 s.) were carried out in 4 various positions at both sides of runway end and residential areas during aircraft landing and take-off. Noise exposures were measured consecutively in two days in

order to assess the relationship between aircraft noise levels and number of flight (landing and take-off) in the various time of the day. The level of aircraft noise exposure expressed by WECPNL (Weighted Equivalent Continuous Perceived Noise Level) so called aircraft noisiness index was investigated. Social surveys were also carried out to people living in the communities nearby. The results showed that the aircraft noise levels at measured locations were strongly associated with number of flight for each time of the day. Noise pollution problem was raised as one important problem generated from airport operation (84%). The noise exposure levels were higher than the WHO recommended limit that may cause annoyance and health risk to the workers who stay in the airside and people living in the community nearby.

SP-132

Prevalence and Patterns of Burnout among Nursing Officers Working in Government Teaching Hospitals in Colombo

Dulani L. Samaranayake, Rohini Seneviratne

University of Colombo, Sri Lanka

Introduction: Burnout, an important negative outcome of chronic occupational stress, is characterized by a syndrome of emotional exhaustion (EE), depersonalization (DP) and a sense of low personal accomplishment (PA). There is minimal information on burnout among Sri Lankan nursing officers.

Objectives: To determine the prevalence of burnout among nursing officers working in teaching hospitals in Colombo using the Maslach Burnout Inventory-Human Services Survey (MBI-HSS) validated to Sri Lankan context.

Methodology: A descriptive cross sectional study was conducted in six teaching hospitals in Colombo among a stratified cluster sample of 1356 nurses. The MBI-HSS validated to Sri Lankan context was used as a self-administered questionnaire and prevalence of burnout and its three dimensions were determined.

Results: The response rate was 90.4% (n=1356). Mean scores for EE, DP, PA subscales and total MBI were 14.5, 3.8, 34.7 and 24.6 respectively. Overall prevalence of burnout was 27.9% (25.51-30.29) with prevalence for subscales being: EE 26.4% (24.05-28.75); DP 17.8% (15.76-19.84) and PA 32.7% (30.2-35.2). Burnout was commoner among younger (OR=5.7, 3.6-8.9), unmarried (OR=2.1, 1.6-2.6) nursing officers and those working in paediatric wards (OR=7.3, 3.4-15.8) and ICUs (OR=7.4, 3.6-15.2) compared to OPDs/other units.

Conclusions: A considerably high proportion of Sri Lankan nursing officers in government teaching hospitals are having burnout.