Medical Tourism Development Strategy
PS_401

Final Report

Prepared for:

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Table of contents

Acronyms

ADCCI	Abu Dhabi Chamber of Commerce and Industry
ALS	Advanced Life Support
ASTAR	Agency for Science, Technology and Research
BAER	Brainstorm Auditory Evoked Response
CCC	Command and Communication Centre
CIEB	CIGNA International Expatriate Benefits
CT	Computerized Tomography Scan
DHCC	Dubai Healthcare City
EEG	Electroen Cephalography
EDB	Economic Development Board
ESQua	Egyptian Society for Quality in Healthcare
ETA	Egyptian Tourism Authority
EU	European Union
FAI	Flight Ambulance International
FDI	Foreign Direct Investments
FITs	Free Independent Travellers
GCC	Gulf Cooperation Council
HCFs	Healthcare facilitators
HIMSS	Healthcare information & Management Systems Society
HMI	Harvard Medical International
HQS	Health Quality Systems
ICU	Intensive Care Unit
ISQua	International Society for Quality in Healthcare
IMC	Industrial Modernization Centre
IMC	International Medical Centre
IMTA	International Medical Travel Association
ISO	International Organisation for Standardisation
JCI	Joint Commission International Accreditation Standards for Hospitals
JTB	Jordanian Tourist Board
MICE	Meetings, Incentives, Conventions and Exhibitions
MIR	Monastir International Airport – Tunisia
MOHP	Ministry of Health and Population

MOI	Ministry of Investment
MOT	Ministry of Tourism
MOTESZ	Ministry of Welfare & Federation of Hungarian Medical Societies
MRA	Magnetic Resonance Angiography
MRI	Magnetic Resonance Imaging
MRV	Magnetic Resonance Venography
MSQH	Malaysian Society for Quality in Healthcare
MTI	Ministry of Trade and Industry
NCS	Nerve Conduction Studies
ENT	Ear, Nose and Throat
NUS	National University of Singapore
PMT	Premium Medical Tourism
QCI	Quality Council of India
SCDF	Singapore Civil Defence Force
STB	Singapore Tourism Board
TDA	Tourism Development Authority
ToR	Terms of Reference
TUN	Carthage International Airport – Tunisia
USA	United States of America
UAE	United Arab Emirates
UK	United Kingdom
USAID	United States Agency for International Development
VGHE	Virtual Global Healthcare Ecosystem
WHO	World Health Organisation

Executive summary

This final draft report is divided into two parts. The first part deals with strategic analysis of the medical tourism industry and, essentially provides a summary of the previous three reports covering global and local sector assessments, benchmarking, SWOT analysis and an outline of a proposed sector development strategy.

The second part of this report deals with a comprehensive sector development strategy and a detailed action plan for the implementation of the strategy. The report also includes a substantial set of annexes giving details of all the activities carried out by the assignment team and specified under six tasks described in the ToR, including previous work carried out on medical wellness and wellness tourism.

Based on the significant findings discussed in the previous three reports, Egypt's competitive advantage stems for its position as an attractive and popular tourist destination, the trend towards increased investments in wellness tourism development in touristic destination and its strong assets for accommodation, meetings and conferences. Furthermore, Egypt has a long respected tradition of medicine and medical practioners. The country is also witnessing a growing number of healthcare investments in the development of medical centres. Other advantages include relatively reasonable cost of living, proximity to the European market and an ideal weather for recuperating and health restoration.

As a result, it is suggested that global strategic positioning of products such as thalassotherapy, plastic surgery, dentistry, eye treatment, oncology, recuperation and health restoration; and medical conferences to be considered. Related to this, three growth scenarios are discussed. These include "do nothing", "high growth – high risk" and "achievable" scenarios. Growth targets for medium and long terms (2012 and 2020 respectively) have been proposed.

The strategy to be adopted for the development of the sector is discussed in detail under four development pillars, namely; an enabling environment (creation of inter-ministerial sub-committee, a federation for medical tourism providers and an international patients services bureau), a product development pillar (including targets, locations, accreditations, investments, support services and alliances), a human resources pillar (which includes targets and development areas), and a marketing pillar (which covers targets, detailed product strategic positioning in terms of location, target market segments, projects and investments, and selling and distribution). Implementation of the strategy pillars is discusses in detail. This covers target, performance indicators, cost, implementation timeline and responsibility.

A general budget has also been developed giving a total development cost of approximately USD 20 million over the next 10 years.

With regards to the medical wellness and wellness, product marketed in Egypt and other Arab states are already taking their share in this rapidly growing global tourism product. Two sub-categories of healthcare tourism are examined in this study: medical wellness tourism (hotel and resort-based) and wellness tourism (hotel and resort-based).

The potential of medical wellness and wellness tourism is promising, it is estimated that medical wellness hotel stock can be boosted significantly over five years, from 240 rooms at present to about 1,800 rooms. This will increase the number of medical wellness sold rooms from approximately 50,000 at present to more than 446.000 per year, attracting over 700,000 medical wellness clients.

The multiplier effect of the strategy being effectively implemented will boost numerous other businesses, such as: Topic-related aqua parks and the manufacturing of wellness cosmetic and beauty products, as well as related food products

Measurable and controlled tourism quality with regard to the *complete service quality chain* and especially the implementation of *service quality systems* including rigorous observance of the food safety and environmental improvements will be key issues to be addressed, so that Egypt can succeed as a prosperous and sustainable wellness tourism destination.

As a result of this study, IMC will be better equipped to undertake the following key activities:

1. Assist local actors to lobby at the policy level through government and civil society.
2. Support other governmental agencies with technical assistance, so they are able to offer a demand-oriented and efficient service to entrepreneurs, reducing bureaucracy which is widely recognized as a significant business killer in Egypt.
3. Specific initiatives appropriate to its role and encourage the umbrella representative association for the interests of the medical tourism industry.

PART I: STRATEGIC ANALYSIS

1 Introduction

1.1 Background

This seminal study regarding Medical Tourism in Egypt has been carried out by the consortium on behalf of the Industrial Modernisation Centre (IMC). It provides sector-specific data and information obtained from numerous meetings and discussions held with a variety of stakeholders and industry experts in Egypt and Europe. It summarizes key findings to date and charts the way forward for the development of a strong niche medical tourism sector in Egypt.

1.2 The role of IMC

The IMC's mission is to provide business development support to Egyptian industrial enterprises to position them competitively in Egypt's global markets in order to increase job creation and prosperity. The agency's mandate focuses on companies employing more than 10 workers.

IMC decided to examine this sector in the light of its awareness of the global growth in medical tourism, and the opportunity to modernise elements of healthcare in Egypt to meet this perceived demand. IMC was guided in this process by a steering group of key executives and industry experts as follows:

- Dr. Bishr Qenawy – Head of Chamber of Medical Health Care
- Ms. Aml Hassan – Chamber of Medical Health Care Director
- Dr. Emad Shenouda – Radiology Section Head (Al Salam Hospital)
- Ambassador Abdel Rahman Moussa – Ministry of International Cooperation
- Mr. Moustafa El Asmar – Gama Knife Centre CEO
- Mr. Amr Saafan – Egyptian Medical Services Company Project Manager
- Dr. Bahaa El Din Abou Zeid – Naser Institute General Manager
- Mr. Mostafa Hunter – Lecturer of Ophthalmology, Cairo University
- Dr. Ola Mohamed Ahmed – Ministry of Health and Population

The inputs of the Steering Group have assisted in developing consensus as to the way forward.

1.3 Terms of references

The Terms of Reference for this study are attached at Annex A. Details of consultations undertaken are attached at Annex B.

Based on the ToR of this study the consortium approach, as agreed with IMC, involved the following research methodology:

- Global desk research;

- Benchmarking;
- Interviews with key chain actors
- Mystery shopping;
- Governmental consultations;
- Tourism associations; and
- Review of previous Egyptian studies.

2 The health tourism product

2.1 Product description

Health tourism comprises all travel activities for a wide range of health and wellbeing purposes such as healthcare, health assessment, surgery and operation, plastic surgeries, beauty, healing, cure, rehabilitation, convalescence, combined with leisure, recreational and cultural activities at the visited destination.

Three types of health tourism have been identified as follows:

2.1.1 Medical tourism

Here the focus is on medicine and treatments as well as surgery and treatments to be offered in hospitals and medical centres.

The tourism side is needed in three different ways:

- To facilitate all travel arrangements, along with all relevant services to and from destinations;
- To offer certain recreational, cultural or entertaining activities to be permitted or practiced as part of the medical programme; and
- To assist in marketing and distribution.

Medical tourism is best examined under standard medical terminology. These define medical interventions as follows:

1- *Curative treatment:* curing, tending to cure, or having the power to cure.

2- Elective surgery: Surgery that is subject to choice (election). The choice may be made by the patient or doctor.

3- Palliative treatment: To palliate a disease is to treat it partially and insofar as possible, but not cure it completely. Palliation cloaks a disease. This is also sometimes called *symptomatic treatment*.

These services are offered by hospitals, medical centres, clinics, diagnostic centres and specialised medical centres.
Hospital specialities in Egypt at present are as follows:

- Cardiology;
- Dental services;
- Dermatology;
- Diet and nutrition (endocrinology and obesity);
- Hepatology;
- Nephrology;
- Oncology (cancer treatment);
- Ophthalmology;
- Plastic surgery; and
- Rheumatology

2.1.2 Medical wellness tourism

Here the focus is balanced between medical treatment and tourism, resulting in a harmonized mix offering healing and curative programmes using natural resources or environmental assets to cure certain physical or psychological ailments.

All such activities are practiced under medical supervision, tailored by therapists and nutritionists. Customers receive the medical wellness programmes in health resorts often with independent medically-based spas;

Medical wellness projects attract customers *seeking curative and rehabilitation programmes* such as thalassotherapy and aromatherapy or to combine both out door activities such as hiking activities in the natural surroundings with nutritious and massage programme for health purposes for example weight loss, detoxification , stress therapy, etc. *practiced under medical supervision*.

The literature review has shown a tendency of specialization in the field of medically-based spas as each destination spa has managed to position itself in the international market as exceptional or outstanding in curing certain ailments such as rheumatic, alcohol addiction, sport injuries etc. or for preventative medicine.

All marketing and promotional strategies of each facility increasingly emphasize what we address as “Spa Concept” based on its outstanding standards in offering special therapeutic products according to the accreditation and certification obtained from internationally recognized organisations.

2.1.3 Wellness tourism

Here the focus is on physical, body and spirit rejuvenation employing the “feel good’ approach such as body pampering (for example herbal bath/mud bath), beauty and facial treatments, fitness programmes such as massage, water exercise, sauna or thallasso.

The above activities are offered by a department at a hotel or resort as an amenity (also named resort spa or hotel spa or cruise ship spa) or at a day spa in a metropolitan area. All such activities are practiced as part of the resort programme.

The customer of wellness tourism is not necessarily under a medical/health programme and uses the wellness facilities of the resorts freely while his main purpose of travel might primarily be other than health such as business, or specifically for the wellness experience.

There is a rapidly growing demand for wellness activities along with the willingness of the hospitality industry to better satisfy and attract customers of distinctive market segments. This has resulted in an evolution in the

performance of amenity spas in many hotels and resorts. Further more International spa brands have emerged, such as 'Six Senses Spas'.

Many of the international resort spas have succeeded in building up their own concept and offer distinctive spa products carrying their own labels, either to be used inside the spa such as for a certain massage therapy or to be taken outside the property such as oils and body lotions. Accreditation and certification have become prerequisites to gain credibility and to monitor quality standards.

Egypt has lagged behind international spa developments both worldwide and especially in the Middle East. In an attempt to address this issue the European Union has assisted the Egyptian Tourism Authority (ETA) to develop a detailed strategy for the development of medical wellness (2.1.2) and wellness tourism (2.1.3) (Thelen and Travers 2007).

2.2 Report Focus

Following a review of literature and the steering committee's desire that 'this study should start where other studies have left off', it was agreed with at inception phase that this study would focus on hospital-based medical tourism as the recent EU-funded study for the ETA focused extensively on recommendations for Medical Wellness and Wellness.

A summary of the study on medical wellness tourism and wellness tourism conducted by Mr. Robert Travers and Dr. Stefan Thelen is attached in Annex C.

3 Global sector review

3.1 Overview of findings

The key findings of the detailed global sector review (annex D) are attached are as follows:

- The global review indicates growing markets for medical tourism, particularly from Europe and the USA. It also indicates rapidly increasing international product supply in an increasingly globalise marketplace. This means that Egypt, as a new entrant, will face severe competition, including competition on price.
- Global standards for medical tourism are high with Joint Commission International (JCI) accreditation being increasingly used as the international benchmark. The United Arab Emirates (UAE) for example now has fourteen JCI accredited hospitals.
- The review also indicates that the highest international demand is for the following products:
    - Organ transplant;
    - Plastic surgery;
    - Dentistry;
    - Eye care;
    - Orthopaedic surgery;
    - Fertility treatments;
    - Heart surgery; and
    - Dialysis (support service)
- Market leaders for medical tourism are Thailand, India, Singapore and South Africa with the United Arab Emirates and other countries including Malaysia, Tunisia and Jordan aiming for strong growth.
- Successful medical tourism combines medicine with tourism to offer a combined holistic service. Destinations offer not just medical excellence, but a high standard of comfort and a seamless packaged service from point of departure, through recuperation to after-sales service. The increasing use of specialist medical tourism agents, either as part of hospital marketing or through the travel trade or simply online, are a notable trend.

4 Egypt sector assessment: main findings

4.1 Overview of findings

Key findings of the sector assessment (annex E of detailed report) are as follows:

- There is very limited data available on health tourism as a result of the very limited activities of this sector. In some cases when data was available perceived confidentiality prevented the release of the information
- A survey of some 22 healthcare providers (predominantly hospitals) and interviews with healthcare experts has shown that the key existing players with the potential to lead the development of medical tourism in Egypt include Dar Al Fouad, the Children's Cancer Hospital, IMC and the El Gouna Hospital. However efforts will still need to be expanded to ensure these key players can provide a competitive world class service.
- Many of the other hospitals surveyed will require very significant changes to improve the effectiveness and efficiency of their operations. The major challenges facing these organisations will be to achieve international accreditation, upgrade their nursing systems and accredit their physicians.
- Also as important, all these organisations will need to acquire the marketing expertise needed to develop competitive products and identify target markets
- The investment climate in Egypt, judging by the significant increase in FDI inflows, is very attractive. Several regional investments in hospitals and clinics, some specifically for medical tourism, suggest confidence of the investor in this country, such investments will to pose significant threats to the local burgeoning industry.
- New hospital developments by private sector investors are planned and will be focussed more specifically on medical tourism. These should significantly improve Egypt's medical tourism product offer, but will also introduce an element of competition to existing players. This should have a positive effect in raising standards, and lead to more clarity in the pricing of Egyptian medical tourism products for international clients.

5 Benchmarking medical tourism in Egypt

5.1 Comparison and benchmarking

5.1.1 Introduction

Benchmarking activities have been based on the process benchmarking technique. This implies comparison with best practices, procedures and performance levels with specific benchmarking partners in medical tourism destinations. This enables the fundamental questions “what is the best practice in medical tourism?’, ‘where are the best practitioners?’, and ‘what does Egypt need to learn and do to match its practices with those of the benchmark countries?’.

5.1.2 Benchmarking activities

The first task was to identify a number of medical tourism countries as benchmarking destinations. The selection was partly based on the recommended list given in the ToR and on the findings of investigative research carried out by the project team. The following destinations were agreed with the steering committee as benchmark comparators: Germany, Hungary, India, Jordan, Lebanon, Malaysia, Singapore, Thailand, Tunisia, Turkey, South Africa; and the UAE.

The final selection of such destinations was based on the following considerations:

- Identifying the *best practices* leading the international medical tourism sector such as India, Thailand, Singapore and Malaysia.
- Although competition might come from any destinations in the world, *Egypt’s direct competitors* in the region have been identified as Jordan, UAE, Lebanon and Tunisia.
- The well positioned tourist destinations *promoting tourist packages to the international tourist market (similarly to Egypt)* and integrating the healthcare product into tourist packages. Hence, Turkey, South Africa and Tunisia have been selected.
- The number of destinations offering *medical wellness products* (mainly thermal treatments and thalassotherapy) such as Hungary, Tunisia, Jordan, Turkey and Germany.
- The destinations offering specialised but very successful and well positioned *medical tourism products* (dentistry in Hungary and plastic surgery in South Africa). Such countries have been used as good examples of destinations offering specialised and high quality products.
- Although most of the destinations leading the international medical tourism sector are developing countries, as explained in the second progress report, Germany and Singapore have been used as two

different examples of *developed countries* successfully offering medical tourism products. While Germany is a long established destination in the field, Singapore represents a modern country employing an array of modern healthcare providers, technology, medical research centres and is a distinctive destination hosting international *medical tourism events* in addition to its superb infrastructure and tourism facilities.

In order to deliver the process benchmarking, a number of benchmark parameters were developed to measure, qualitatively and quantitatively, the performance, practice and profile of each country. These country benchmark parameters have been grouped under four main headings as follows:

1) Profile benchmarks:

* Policies and scale of investments
* Business structure and management
* Healthcare providers
* Product specialization
* Product quality and price
* Labour/personnel (doctors, nurses, tourist staff)
* Technology/research
* Main product strength and weaknesses

2) Service chain benchmark:

* Ambulance service
* Support service standards:
  Infrastructure, airports, accessing roads …etc
* Hotels and resorts
* Main location standards
* Leisure and tourism
  Urban cities, entertainment, shopping …etc
* Medical tourism visas

3) Performance benchmarks:

* Medical tourism visitors
* Estimated revenues
* International /national accreditation

4) Marketing benchmarks

* Medical tourism marketing strategies
* Medical tourism websites
* Special travel agents
* Distribution through tour operators/airlines
* Attendance by healthcare providers at trade shows, exhibitions …etc
* Links with major health insurance companies
* Image

Annex F gives details of the country benchmark findings for all selected destinations.

Annex G shows the results of the process benchmarking by way of comparing the best practices identified in the country benchmarks with the *status quo* in Egypt. This step, therefore, identifies the gaps in the performance of the Egyptian medical tourism sector across the sector value chain and the possible implications for the sector.

5.1.3 Key findings

The benchmarking process revealed a set of significant findings which can be synthesized as follows:

- All leading medical tourism destinations have developed a clear vision and strategic objectives for their medical tourism sectors and set specified goals to be accomplished within specific timeframes. Accordingly, relevant strategies, plans and programmes to reach such objectives have been clearly identified and executed with effective techniques.

  This finding urges Egyptian government to start crafting its own vision and strategic objectives for the sector.

- Articulation and cooperation among relevant authorities is a must for any medical tourism destination to coordinate efforts for the development of the sector. Countries such as Singapore, UAE and Lebanon have formed medical tourism councils or boards bringing together all formal and informal parties which have a say or can play a role in the development of the sector.

  This finding implies the importance of forming an official body representing different stakeholders to foster the development of the sector and to sort out existing obstacles. In addition a trade lobby such as "Medical Tourism Association" will also be needed to represent interests and views of the different entrepreneurs such as healthcare providers, managed healthcare companies, travel agencies and airline companies.

- All destinations are working to attract foreign and national investments to the sector by way of providing different privileges such as tax incentives for the development of the sector. A destination like Jordan has managed to attract Kuwaiti investors to build a competitive medical city in Amman. UAE also started the establishment of a huge healthcare city in Dubai which will be a landmark in the Middle East for medical tourism. Investment in the field has also been extended to the support services such as ambulance equipments, airport facilities and human resource development.

  This finding reflects the importance of reviewing the current investment policies and privileges offered to healthcare enterprises and also implies considering more enabling policies for the development of <u>all components</u> of the medical tourism product (this includes healthcare elements as well as support service components).

- Medical tourism destinations such as India, Singapore, Thailand and Turkey have a well established “hospital management” concept which enabled them to have effective and efficient healthcare providers offering competitive medical tourism products and achieving international accreditation. They also have managed to form bigger entities such hospital groups offering state-of-the-art medical services to the international patients at very competitive prices.

  As the “hospital management” concept implies administrative, operational, financial as well as marketing tasks, Egypt needs a paradigm shift of thinking in the way hospitals are managed and run. Consideration should be given to using professional managers, hospital management companies and marketing experts.

- All medical tourist destinations offer published prices of their service which can easily be obtained from the internet or from the International Patient Centres which belong to the providers. Also database systems have been developed to monitor the number of international patients and revenues gained from the sector.

  This finding implies the transparency and reliability of data offered by formal authorities with regard to the sector statistics; and by healthcare providers and medical tourism suppliers with regard to service prices and products. The creation of Egyptian Medical Tourism Board should be able to support in the creation of reliable database system for the sector.

- Destinations such as Singapore, India, Turkey and UAE have coined their growth in the medical tourism field with their advancement in technology and research, and invested in establishing up-to-date research centres and empowering their hospitals with the latest technology in treatment and equipment.

  While a number of Egyptian healthcare providers have been able to bring up-to-date technology to their hospitals and medical centres, there is still a need to establish credible research centres.

- Healthcare providers at destinations such UAE and Thailand are keen to have strong ties with international medical educational institutions for training, technology transfer and for marketing as well as image building.

  A few healthcare providers have identified programmes with international educational institutions for human resource development, research, technology application…etc.

- Each country has managed to position itself in the international medical tourism market as destination of excellence in certain treatments or specific medical products.

  As Egypt does not currently have specific features for its medical tourism products, it is crucial for its strategy formulation to identify potential products and work on the development of such products. This strategy should also take into account the capability of its healthcare service providers; and the

opportunities of future investments, which should be evaluated against the requirement of each product or specialty.

- Findings also show that international accreditations have become a prerequisite for any healthcare provider to position itself in the international market.

  As healthcare providers with international accreditations are very few in Egypt, the national medical tourism strategy and programmes, should help more hospitals to up-grade their performance and operation to meet the requirements of the international accrediting bodies.

- Besides international accreditation, India has managed to develop its own national accreditation system while countries with limited internationally accredited providers such as Malaysia, Thailand and Jordan have managed to control quality through their national accreditation systems. Malaysian and Thai national accreditation is very much trusted due to strict verification procedures.

  This finding shows the potential benefits the national accreditation system can offer to Egypt for healthcare quality assessment and assurance. Quality assurance systems should also be extended to clinics and the support service suppliers.

- International medical tourism destinations such as India, Turkey, UAE and Jordan have attracted international affiliations and partnerships for quality assurance and marketing.

  It is imperative that the Egyptian medical tourism strategy take into consideration the vital importance of these forms of strategic collaboration.

- A great number of physicians working in the field of medical tourism at the leading destinations such as India, Singapore and Thailand or at promising destinations such as Lebanon and UAE, have international credentials or holding US or UK professional qualifications. In addition, many are fluent in English and other languages.

  Although Egypt has a number of physicians with international credentials, healthcare providers wishing to enter the field should realise the importance of having predominantly internationally certified doctors and should also organise personal skills development training such as communication skills, time management, stress management, public relations and language proficiency skills.

- While countries such as Hungary, Turkey and Tunisia have managed to develop a good base of skilled therapists working at spas and health resorts such as thalassotherapy, Egypt still lacks professional specialised human resources to work in such centres.

  As also reflected in the ETA study (Thelen and Travers 2007), this finding reflects the urgent need to qualify and develop human capacities to serve the special needs of the medical wellness tourism.

- The quality of nursing staff has been key element in the success of medical tourism destinations such as India, Thailand and Malaysia.

  As Egypt currently suffers serious problems in the performance of its nursing staff which will negatively affect the satisfaction of the international patients, the human resource development strategy of the sector should be able to identify educational and training programmes to up-grade nursing staff skills. This should include professional programmes as well as personal skill development programmes such as communication skills, time management, stress management, public relations, and language proficiency skills.

- Germany has been benchmarked as a destination having a well established ambulance system while UAE was used as an emerging destination employing technology to support advanced ambulance service.

  Improvement of the current ambulance services in Egypt is an absolute necessity and the provision of air ambulance facilities (at airports and healthcare providers) especially in Cairo, will need to be seriously considered

- Airports of Singapore and Dubai are considered the best practices offering specialised medical services and facilities.

  The provision of such efficient services in Egypt will also be necessary

- Countries such as India issue a special visa for medical tourism while Malaysia and UAE as well as many other destinations facilitate visa application for medical tourism.

  Although tourist visa can be obtained by many nationalities at Egyptian airports, proper provision for a collective medical tourism visa to include accompanying persons are still needed.

- Specialised travel agencies are essential, as evidenced by Tunisia, Singapore and South Africa.

  Such specialised agents will be needed in Egypt to arrange and provide all support services and in some cases to act as intermediaries between providers and patients, as well as to participate in marketing the destination.

- Airlines such as Lufthansa, Malaysian Airways and Etihad are models of best practices offering medical tourism packages and special services to the international patients which have helped in the promotion of their countries as destinations for medical tourism.

  This finding reflects the important role EgyptAir needs to play in serving and promoting for the medical tourism sector.

- Hotels and resorts used by international patients in the medical tourist destinations such as in Germany, Singapore, Malaysia and Jordan are well equipped and prepared to respond to the special needs of patients.

Not all of the hotels or resorts have facilities for customers with special needs. In addition, dietary and nutritious food is still a new trend at many hotels while this is highly needed by the medical tourism sector.

- Best practices have identified marketing strategy either on a national level as in Malaysia or on a trade and industry levels such as in Thailand, where collaborative and joint marketing is in use, or on project level such as in India and Singapore where healthcare providers are using fierce marketing campaigns using competitive prices, effective promotional tools and direct marketing to impress the decision of international patients.

  This finding reflects the critical role of marketing at its different levels in positioning Egypt as a medical tourism destination.

- All destinations are using websites as an important tool to promote the medical tourism products. Some of the websites are developed by medical tourism associations, such as in Singapore, representing the whole sector and offering information on all its members. However, healthcare providers, travel agencies and hotels working in the field have their own websites which can be used not only for promotion but also for e-marketing.

  This finding demonstrates the importance of developing competitive websites for the sector key players (mainly the Medical Tourism Association, healthcare providers and travel agencies). All information on the medical as well as support services should be clearly available on such websites.

- Many medical tourism providers such as in Singapore, India and Turkey have their on International Patient Service Bureaus which use direct and relationship marketing to reach international patients and offer them all relevant services.

  Egyptian healthcare providers willing to enter the field should consider direct and relationship marketing as an important tool to compete internationally and should plan to have a department or bureau to serve international patients.

- Countries such as Turkey, Jordan and Thailand have managed to build strong ties with international health insurance companies which in turn influence the flow and trust of international patients.

  Egypt needs to firstly verify the quality of its health tourism products (medical tourism as well as medical wellness tourism) through accreditation and affiliation and then approach the international health insurance companies.

- Best practitioners are keen to attend the international medical tourism events whether they are mega events such as International Health Tourism Congress or smaller events such as conference and exhibitions. Also, Asian countries as well as Dubai have shown a growing interest in hosting such events at their destinations.

  This finding shows the importance of Egypt's presence at international medical tourism events while working on hosting one of such events, when it can offer attractive products.

- Although India has similar problems as in Egypt, such as overpopulation, poverty and environmental degradation, it has managed to be in the forefront as a leading medical tourism destination. Also, Jordan shares some constraints as Egypt with regard to human resource development and technology deployment and suffers marketing deficiencies; however it has managed to develop itself as a pioneering destination for health tourism in the Middle East. The use of competitive advantage approach which implies the optimum use of the points of strength while minimizing the negative impacts of the points of weaknesses has helped developing nations to possess a good image in the international medical tourism market backed with a well organised sector.

  This finding emphasizes the importance of identifying Egypt's points of strength, realising its points of weaknesses and then crafting a medical tourism strategy with clear competitive advantage pillars. The Egyptian medical tourism strategy should be able to help Egypt reach such competitive position and begin to trade successfully in this global product area..

All of these issues are taken up in the sector strategy and action plan in Section II of this report.

6 SWOT analysis

Based on findings of the benchmarking process and the global review, along with the local assessment of the medical tourism sector, the following are the points of strength, weakness, opportunities and threats with regard to Egypt:

Strength

Tourism and hospitality:

S1 Well positioned tourist destinations offering a potential for developing medical tourism as an integrated part of the existing Egyptian tourist product

S2 A wide range of means of tourist accommodation and lodging capacity at major tourist destinations

S3 Distinctive ecological and cultural resources adding to the competitiveness of its medical tourism packages and programmes

S4 Pleasant weather for recuperation and medical wellness programmes

S5 Increase tourism investments and a growing interest in medical wellness, wellness and medical tourism ventures (Marassi and Porto Ghalib are two good examples)

S6 A good base of tourist personnel

S7 Existing tour operation system/services

S8 Existing formal and informal tourism organisations

S9 Medical wellness and wellness strategy in place (ETA)

Healthcare:

S10 Rooted healthcare system and tradition of medicine

S11 A good base of skilled and professional physicians

S12 A growing number of private sector healthcare providers

S13 Emergence of new healthcare providers with international accreditation and affiliation, albeit still a few

S14 Emergence of “healthcare centre group practices”, but still at small and medium sized enterprises (labs and eye centres)

Infrastructure and support services:

S15 Existence of international airports at major tourist destinations

S16 Plans for support services improvement can be executed on the short-run (ambulance, airport facilities, specialised travel agencies …etc)

Weaknesses

Policy/strategy:

W1 Absence of a clear development strategy for the sector

W2 Absence of collaborative work and effective communication between the Ministry of Health and the Ministry of Tourism

W3 Unidentified role of Egyptian ministries in the process of medical tourism development

W4 Absence of specialised trade organisation for medical tourism

W5 Bureaucracy that can hinder the establishment of potential projects

Tourism and hospitality:

W6 Problems of food safety at some hotels/resorts

W7 Nutritious and dietary food is still new trend at many hotels

W8 Limited facilities/services for guests with illness and disabilities at many hotels

W9 Lack of Specialised travel agencies and tour operators working in the sector

W10 Lack of specialised personnel in medical tourism

W11 Poor marketing and promotional activities for the sector in tourism campaigns

W12 Insignificant role of EgyptAir in serving and promoting the sector

W13 Unclear image of the sector in the international market

W14 General lack of hygiene awareness

W15 Problems of environmental degradation that might occur at tourist destinations

Healthcare:

W16 The concept of “hospital management” has not become matured yet due to the current lack of experience resulting in an overlap between hospital management, ownership and administration

W17 Low nursing staff performance with regard to certain services such as customer care and personal communication skills

W18 Limited organised training programmes between healthcare providers and international medical institutions for upgrading physicians’ skills and performances

W19 A national accreditation system has not yet been established

W20 Unpublished criteria verifying healthcare quality assurance conducted by formal authority

W21 Limited number of providers with international accreditation and affiliation

W22 Ineffective and unprofessional marketing performance by eligible medical tourism providers

W23 Inadequate direct and relationship marketing efforts with international patients

W24 Inadequate ambulance facilities to serve the sector

W25 Inability to adopt proper quality assurance systems to medical tourism products

W26 Unpublished prices of medical products offered by providers

W27 Unavailability of a comprehensive malpractice insurance (professional indemnities) in medical centres

Infrastructure:

W28 Inadequate services for the international patients at airports (fast immigration track, lounges, helicopter pad ...etc)

W29 Traffic congestions and problems in Cairo

W30 Poor access roads at many tourist destinations (many of them are unsafe)

Opportunities

External:

O1 Growth in the number of international tourists travelling for medical tourism

O2 Unlimited positive impacts of globalisation on the sector causing further growth of the global healthcare sector

O3 Increased FDI to the less developed countries including Egypt

Internal:

O4 Low labour cost along with reasonable operational costs offering opportunities for price competitiveness

O5 Integration of up-to-date medical equipments and technological devices into the medical products offered by Egyptian healthcare providers

Threats

T1	Strong international competition implying competitive marketing and positioning strategies
T2	Likely increase in the number of entrants to the sector in the next few years
T3	Direct competition coming form UAE, Jordan, Lebanon, Tunisia as well as the other neighbouring countries in the Mediterranean Sea
T4	Global alliances representing stronger marketing and distribution identities
T5	Increase concerns for hygiene and food safety
T6	Changes in the market trends of healthcare policies of generating countries to keep their citizens treated inside the country
T7	Political instability in the Middle East

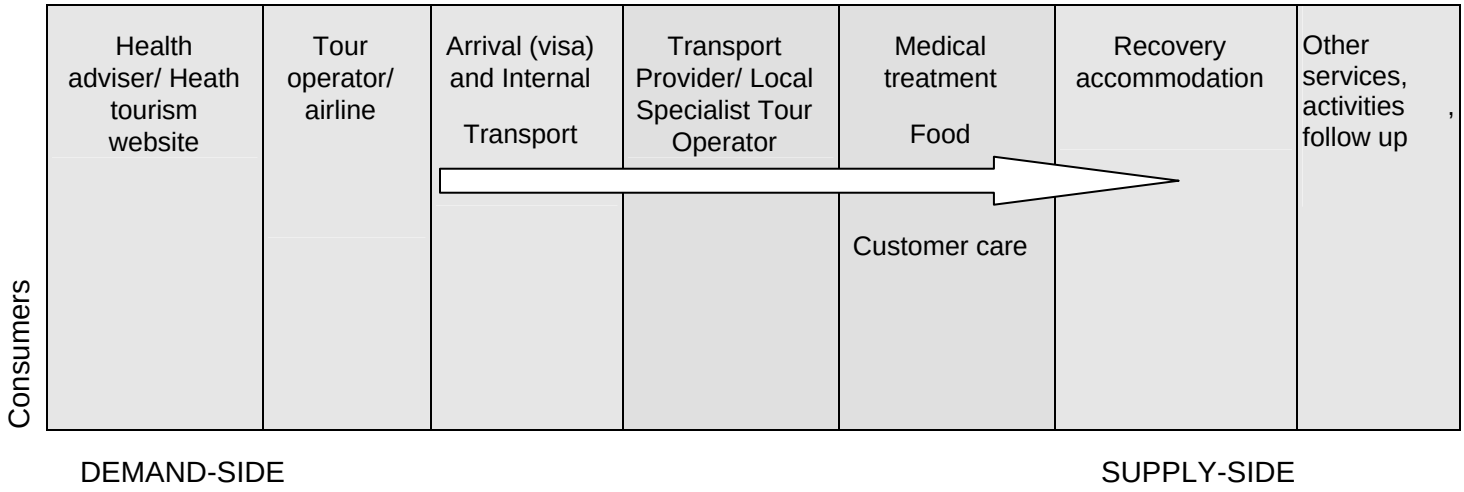
PART II: SECTOR DEVELOPMENT STRATEGY

7 Strategic framework

7.1 A medical tourism value chain approach

With so many issues to be addressed across so many players, the strategic approach recommended is based on value chain development. Medical tourism is unusual in that, unlike a manufactured commodity, it is consumed at its place of production but usually sold elsewhere. The elements of a medical tourism package are combined and packaged through marketing and then sold to the final consumer. The consumer travels to the place of production to consume his purchase. In this process the raw materials (treatment, transport, recuperation, etc.) are owned by various different actors who are linked by trade and services, and each add value to the holiday product of Egypt. Figure 1 illustrates this.

Figure 1: Medical tourism value chain



Various types of public and private services, like business development services, transport, financial services, etc., are as important as favourable framework conditions, i.e. laws, regulations and their enforcement. The value chain model helps to create an understanding of these multiple interactions, so that private and public agencies (including intervention organisations like IMC) can identify key points of intervention that are desirable. Thus the value chain analysis point to ways to do the following:

- Increase efficiency and thereby increase total generated value; and
- Improve the competence of local actors to increase their share of the total generated value.

In order to bring about the significant changes needed in medical tourism issues in Egypt, it is necessary to engage all the following issues:

- Costs along the chain;
- Points where most value is added;

- Importance of different actors;
- Governance structure (who decides on what, how and when has to be done);
- How strong are the different actors and what "drives" the different actors;
- Institutional framework;
- Political framework; and
- Identification and analysis of bottlenecks

7.2 Identifying competitive advantage

7.2.1 Introduction

A key issue in the development of a medical tourism strategy is the identification of competitive advantage. The strategy deals with two stages creating a competitive edge with regard to the Egyptian medical tourism sector as follows:

- Current competitive advantage elements offering potential for relatively limited medical tourism products to be developed at specific locations and attracting narrow market segments (to be applied in the short and medium terms).
- Strategic competitive advantages positioning a wider range of specific medical tourism products at targeted markets with potentials of growth and profitability (to be applied in the longer term).

7.2.2 Egypt's competitive advantage

Given the significant findings of part one of this study, the current competitive advantages of Egypt are as follows:

(a) Tourism advantages

Egypt is a well established and much loved tourist destination in the international market having a wide array of natural and cultural resources. Over 11 million international visitors are attracted and adequate superstructure for hospitality and entertainment exists in many coastal regions, in addition to the traditional tourism regions of Cairo, Alexandria and Upper Egypt. There are significant plans for wellness tourism developments in tourism locations.

Egyptian travel agents handling the holiday arrangements can help in the distribution of the medical tourism products and in offering all relevant services (specialization and enhanced services will .be required)

Egypt has strong assets for meetings, incentives, conference and events (MICE), including MICE activity related to medicine, although this sector is presently under-performing.

(b) Medical advantages

Egypt currently attracts an estimated 50,000 medical tourism clients, almost exclusively from nearby Arab and African countries which have strong cultural and geographic ties. It also has a long and respected tradition of medicine, and a strong asset in respected Egyptian doctors at home and abroad.

Egypt currently is witnessing investment in the development of medical centres at tourist resorts such Porto Ghalib in Marsa Alam and the Marassi project in the North West Coast. There are also a growing number of healthcare investments more likely to appeal to international medical tourism markets such as EL-Gouna hospital in Hurghada, the Tajmeel clinics in Cairo, Sharm EL-Sheikh and Hurghada, Andalusia hospitals in Alexandria. In addition, Dar El-Fouad and Wadi EL-Nil are two good examples of healthcare providers eligible to work in the filed of medical tourism.

(c) Other advantages

Costs of living are relatively reasonable in Egypt compared to other medical destinations such as Dubai. This will help attracting specific segments of the Arab and African markets.

Egypt is relatively near to the European market; a major generating market of medical tourism. However, this will need an elaborated positioning strategy.

Related to the above point, Egyptian weather at the coastal regions is ideal for recuperation and for health restoration and also for retired or older Europeans or Middle Eastern residents.

7.3 Global strategic positioning

7.3.1 Egypt's unique selling point for medical tourism

The competitive advantage elements identified in section 7.2, if properly used, imply that the product at present must be centred on Egypt's very successful leisure and tourism traffic as a core determinant of the tourism decision to visit Egypt for medical purposes. Egyptian medical tourism products able to capitalise on this competitive advantage are at present the following eight designated products:

1 **Recuperation and health restoration holidays** enjoying the benefits of all year round good weather.
2 **Thalassotherapy** for medical wellness purposes for the Western European, Arab and Russian markets;

3 **Plastic surgery** centres integrated into holiday packages targeting niches of Arab markets with possibilities of Russian and other markets in the longer term (international accreditation essential);
4 **Dentistry and eye centres** offering medical products to be distributed as an added value to the Egyptian tourist packages and promoted by Egyptian travel agents as a new brand of a package offering, for example, a coastal holiday and dental care or laser vision correction. Such centres can also use relationship and collaborative marketing with the region's hotels and resorts to sell their products to their guests.
5 **Rehabilitation centres** for anti-alcoholism, anti-smoking, dietary and weight loss to be located at the natural and coastal areas. Dialysis centres can also be included in this category.
6 **Oncology centres** at hospitals and private clinics mainly in Cairo will remain the main target of specific segments of Arab and African markets such as Libya, Sudan and Yemen.
7 **Existing general medical products** currently being sold to patients in these neighbouring countries
8 **Medical conferences**: Egypt can be marketed immediately as a very suitable venue for international, medical conferences and events.

The development of a wider range of medical tourism products strongly positioned in targeted markets will need to be undertaken over time as part of sector-wide long term development.

The long term vision is that Egypt should follow India's lead and develop centres of excellence where the private sector's initiatives are supported by the public sector and international partnerships. Annex H outlines the key elements of India's success, despite challenges of poor infrastructure and image. India's medical tourism industry is estimated to be at least 80 per cent private sector driven, and success is strongly based around education, generous fiscal advantages, quality and accreditation. Generally these new developments will be located close to developing tourism centres with good air travel access.

The positioning of Egypt as a medical tourism destination is thus seen as one of special interest marketing in the short term. Specialist quality product will be developed and sold to Egypt's existing tourism customer base and to specialist markets in the short to medium term.

The future competitive advantage edge for the Egyptian medical tourism sector will be dependent the following tasks:

- having a medical tourism vision;
- sharing such vision among stakeholders;
- understanding sector's strengths as well as its weaknesses
- utilizing the different resources (people, natural assets, existing eligible healthcare projects, etc.) effectively over the long term;
- securing inward investment;
- ensuring a favourable financial operating climate;
- addressing weaknesses in the entire medical tourism value chain;
- a continuous emphasis on quality, education and accreditation;
- continuous analysis of competitors' performances with a focus on their points of strengths and weaknesses
- developing an appropriate marketing strategy; and
- implementing such marketing strategy successfully

Egypt currently has a number of advantages in some attributes but is severely disadvantaged in others; as a result the Egyptian medical tourism sector currently appeals only to a narrow range of tourism market segments (i.e. specific segments of the Arab and African markets).

Addressing the key issues identified in the benchmarking process (5.1.3), and SWOT analysis (section 6) will make the Egyptian medical tourism proposition more attractive. The country will then able to offer a broader range of comparative and competitive advantages enabling it to access new markets.

The Egyptian medical tourism strategy targets such competitiveness through four pillars and an action plan suggesting tasks to be conducted on the short, medium and longer terms. These four pillars are discussed in detail in (section 8) and are as follows: an enabling environment; development initiatives; human resources; and marketing.

Needless to say, Egypt will need to review its competitive advantage elements at the end of each action plan phase based on an updated SWOT analysis of the sector and market research into competitor activities.

7.4 Growth scenarios for medical tourism

7.4.1 Scenario 1: Do nothing (the worst option)

This scenario represents the current situation and presumes that unorganised changes will occur to the healthcare sector through the new entrance of a number of healthcare providers with international standards. Such healthcare facilities adequately fit into the requirements of the niche/upper segments of the Egyptian society and convince some to take their treatments inside Egypt instead of travelling abroad. However, this cannot be guaranteed in future as the fierce competition in the global medical tourism sector and the very competitive prices offered by leading destinations in the field, will also have an influence on the decision of this segment of patients.

Additionally, as the service value chain will remain incomplete with regard to this option, so individual healthcare providers will lack the effective tools to position their products internationally. Furthermore, the product, in this case, is merely medical, lacking many other support services needed to market a comprehensive medical tourism product competitive to what is offered internationally.

This scenario might remain able to attract a number of individual international patients coming from specific segment of the Arab and African market; mainly Libya, Sudan and Yemen. However, this number will probably decrease in future due to the direct competition from neighbouring countries such as Jordan and Tunisia. Attempts by new investors to attract new segments will be undermined by the failure to address such issues as airport facilities, visas, ambulances, nursing ethos, food safety and so on.

Only those investors who can control the entire value chain from arrival to departure will survive.

Advantages:

1. The main advantage of this scenario is that it involves little or no additional expenditure or reallocation of resources.
2. It might offer opportunities to a number of distinctive healthcare providers to capitalise on their dominant position in the market and secure affiliations and partnerships with international institutions which will impact positively on the quality and standard of healthcare service offered by the facility.
3. It might involve some import substitution if more wealthy Egyptians stay in Egypt for treatment.

Disadvantages:

1. This scenario does not realise the international competition in general and the regional competition in particular, which might result in a decline in the current modest number of international patients from neighbouring countries. The Egyptian Statistical book "Tourism in Figures" for the year 2005, shows that the number of inbound tourists coming for the purpose of "health treatment" decreased from 80193 in 2004 to 69053 with a decline estimated at (-13.9%). Further decreases took place in recent years according to anecdotal evidence.
2. In the long term, the Egyptian healthcare providers will be in danger losing a significant percentage of the Egyptian upper class segments. Patients of this segment will be attracted to other well-established destinations offering state-of-the-art services at very competitive prices.
3. This scenario will never help Egypt positioning a comprehensive medical tourism product due to the lack of cooperation among authorities and stakeholders.
4. It will keep Egypt away from the international medical tourism competition and thus losing many of the positive impacts on the national economy and on the healthcare sector.
5. It will negatively impact the country's all-important tourism image, because ageing European markets are increasingly seeking the reassurance of quality medical facilities in the countries they visit. The lack of good medical facilities for tourists on the North coast West of Alexandria, for example, has led to larger resort developments setting up their own emergency medical clinics with doctors on site.

7.4.2 Scenario 2: High growth, high risk option

This scenario targets parallel development of a wide range of medical tourism products (the eight designated products), the establishment of mega healthcare projects such as international healthcare city or hospital complexes and aims to attract international patients from different generating markets all over the world.

This scenario has been adopted by UAE and to a lesser extent Jordan for the development of their medical tourism sectors. For Egypt, this scenario requires rapid development of the medical tourism sector . It fails to take account of the extent of weakness affecting much of the medical tourism value chain.

Requirements and instruments:

1. All pillars of the strategy must be addressed and all actions delivered on time .
2. Strong liaison among all relevant authorities.
3. Huge foreign and local investment secured on medical tourism infrastructure.
4. International accreditations achieved.
5. Professional human resources and accredited staff available.
6. Massive marketing investment.
7. Compatible state-of-the-art health care providers with international standard appeal and performance.
8. A strong and improved network among all stakeholders and support services of the medical tourism sector working together, especially healthcare providers, travel agencies, lodging facilities, airline companies and Ambulance service
9. Competitive medical products with regard to quality and price.
10. Market research being undertaken regularly,
11. An elaborated assessment system to monitor the implementation of the strategy and to offer prompt amendments to its action plans.

Advantages:

If the strategy is conducted and its action plan carefully implemented the following can be achieved:

1. A significant contribution of the medical tourism sector to the national economy.
2. A shift of the some Egyptian healthcare operators from the local standard to the international practices.
3. High quality of a wide range of medical products at competitive prices to be offered to both global and local markets in shorter time.
4. More professional and accredited medical staff in different health treatments.
5. More advanced technology and research application benefiting the Egyptian healthcare sector.
6. A strong and impressive image of Egypt as a medical tourism destination in shorter time.

Disadvantages:

Failure of strategic implementation will have the following consequences:

1. Inability to attract the needed investments for the huge healthcare projects given Egypt's current weak product.
2. Even if the capital investment is met, inability to reach the desired demand (both number of tourists and quality of market segments) due to inefficient marketing strategy and lack of operational experience calls into question the investment returns. Also, severe competition will be a huge challenge.
3. The main obstacles facing the healthcare sector (such as gaps in the environment of care infrastructure, facility management, proper accreditation of staff, qualified nursing staff, infection control, use and

management of healthcare data, appropriate assessments and care of patients as well as the quality of care and the response to patient safety issues) imply a staged and more prudent development timeframe, especially when more sophisticated and critical medical products are involved (such as heart surgeries and orthopaedic procedures).

4. There is also a concern that high speed development might give an access to a number of amateurs entering the field without adequate professional qualifications to serve the sector not only in healthcare but also in tourism and hospitality.
5. A fiercely competitive marketing strategy would need be conducted which will need financial and human resources, which Egypt can not easily provide at the current stage, and which would have no guarantee of success..

Due to a lack of experience in managing global healthcare facilities and in operating procedures to international standards, this scenario will rely mainly, at least initially, on foreign labour till the local market develops the required local human resources.

7.4.3 Scenario 3: Achievable Scenario

This scenario adopts a staged two -phase medical tourism development. The first phase targets the positioning of a number of medical products which can be smoothly integrated into the tourism products appealing to specific segments of the markets. Such medical tourism products can be offered by medium-sized healthcare investments or integrated into larger tourism investment projects. Table 1 shows the first phase products and their feed markets

Table 1: Short term product development scenario

First phase products 2007-2012	
Medical Tourism Product:	**Markets:**
Recuperation and rehabilitation	Europeans
Thalassotherapy	Western Markets
Package includes holiday and dental care	Europeans and Arabs
Package includes holiday and eye treatment	Europeans and Arabs
Package includes holiday and dialysis (support service)	All tourist markets
Package includes holiday and plastic surgery	Niche Arabs
Medical conferences	All tourist markets

See table 3 for estimated numbers

The second phase will start as soon as the execution of the four pillars has been assured, which will seek the promotion of bigger investment projects to position more complicated products such as heart surgery and orthopaedic procedures, positioned to attract wider segments of the global health market.

Table 2 shows the gradual expansion the second phase reaches in product range and market segments.

Table 2: Long term development scenario

Second phase (long term) product development 2012-2020	
Medical Tourism Product:	**Markets:**
Recuperation and rehabilitation holidays	Europeans
Thalassotherapy	Western Markets
Package includes holiday and dental care	Europeans, Arabs as well as other markets
Package includes holiday and eye treatment	Europeans, Arabs as well as other markets
Package includes holiday and dialysis (support service)	All tourist markets
Package includes holiday and plastic surgery	Niche segments of the Arab and European markets
Package includes oncology and relevant travel & lodging services	Different segments from the Arab and African markets
Package includes heart surgery and a holiday for recuperation	Arab and African markets
Package includes orthopaedic and a holiday for recuperation	Arab and African markets
General medical services	Arab and African markets
New purpose-built medical tourism hospitals	Europeans, Arabs as well as other markets
Medical conferences	All tourist markets

See table 3 for estimated numbers

Requirements and Instruments:

1. Full harmonization and cooperation between stakeholders of the two service industries (tourism and healthcare).
2. Efficient integration of the medical products into the tourism offerings especially at the first phase
3. Implementation of the strategy four pillars and execution of its action plan with regard to tasks to be conducted at each phase.
4. Investment marketing strategy with different instruments at each phase (volume and scale of investments will vary from one stage to another).
5. Following the two stages of Egypt's competitive advantage (current competitive advantage for the first phase; and strategic competitive advantage for the second phase) will help to ensure a planned, phased approach.
6. A product positioning strategy will be needed. The first phase will employ the combination of the medical and tourism as a main competitive advantage, while the second phase will need a strategic competitive advantage based on the new product evolving.
7. The second phase should be complementing the execution of the four pillars of the strategy and result in a well developed medical tourism sector.
8. Competitive products regarding quality and price at each phase.
9. Continuous evaluation of the effectiveness of the strategy instruments at each phase and corrective monitoring to adjust the implementation process to reach the strategy goals.

Advantages:

1. This scenario fully recognizes the current deficiencies in resources and performance and respects time needed to develop such resources adequately.
2. It suggests a gradual expansion of the sector investments and relies on a realistic strategy for attracting such investments.
3. It realises the financial resources and time needed by the government to improve relevant medical tourism infrastructure especially at the airports.
4. It starts with the development of medical products easier to integrate into tourism and lesser in their investment, operational, marketing and preparedness requirements.
5. It matches the coherent procedures of solving the major Egyptian healthcare sector problems mainly the environment of care infrastructure, facility management, skilled nursing staff, infection control, use and management of healthcare data, appropriate assessments and care of patients as well as the quality of care and the response to patient safety issues.
6. It compensates the low number of medical tourism inpatients, especially at the first phase, by developing a number of specific products such as dental care, eye centres and dialysis serving outpatients visiting the destinations for other activities.
7. It allows for corrections of the second phase programmes and techniques according to the consequences of the first phase and the change in the international medical tourism markets.

Disadvantages:

1. The success of the second phase and thus the positioning of its products are very much dependent on the consequences of the first phase and the image gained by its products.
2. The whole process might take longer time to implement the strategy and its action plan than the second option.
3. It will need longer time to justify the sector's real contribution to the national economy and to the healthcare industry
4. Threats from competition remain

7.4.4 Strategic targets

At present it is estimated that Egypt receives around 50,000 foreign patients for medical treatment. The vast majority of these are from neighbouring Arab countries. The recommended strategy targets are as outlined in table 3:

Table 3: Growth targets for medical tourism 2007-2020

	2007 (estimate)	2012 (Medium term target)	%	2020 (long term target)**	%
Recuperation and rehabilitation	N/A	19,220	35%	57,000	34%
Dentistry	N/A	8,250	15%	23,000	14%
Eye care	N/A	8,250	15%	23,000	14%
Plastic Surgery	N/A	8,500	15%	24,000	15%
Orthopaedic surgery (such as knee/hip replacement)	N/A	N/A	-	3,000	2%
Heart Surgery	N/A	N/A	-	3,000	2%
Oncology	N/A	550	1%	2,000	1%
Dialysis (support service)	N/A	550	1%	2,000	1%
Other medical	N/A	9,650	18%	28,000	17%
TOTAL	50,000*	55,000	100%	165,000	100%

* Source: MoT
** Approximated

Assumptions:

1. No growth was forecasted from 2008 till 2010, being establishment phase
2. A 5% growth from 2011 till 2012 (Introduction phase – marketing campaign starts)
3. A 10% growth from 2013 till 2017
4. A 15% growth from 2018 till 2019
5. A 20% growth in 2020

The growth pattern was based on Indian and Far East models. Segment performance was based on assumed demand.

7.4.5 Investment opportunities

On the international scale, experts believe that medical tourism will have a positive impact on the economies of destination countries and benefit skilled and unskilled trades alike. The medical tourism phenomenon may also bode well for foreign investors who hold an interest in those countries.

As mentioned in previous sections of this report, medical tourism destinations have emerged all over the globe, from Thailand to South Africa, and even

European countries such as Hungary and Turkey. The industry anticipates a great deal of growth in the coming years, from a 2004 estimate of $40 billion to $100 billion by 2012, according to statistics produced by McKinsey & Company and the Confederation of India. As a natural consequence of such growth, investment should also grow proportionally.

Once health providers in Egypt start to achieve required criteria for medical tourism, and with well planned international marketing campaign, the momentum of growth will be seen to involve both, the number of qualified providers and volume of investment in this industry to meet increasing demand.

To ensure that the industry continues to maintain this rate of growth, the Egyptian government will also have to collaborate with private health care enterprises to establish special support systems for patients arriving for health travel.

The government, on its part, will also have to offer attractive incentives to investors and to guarantee various forms of assistance in order to help establish quality medical tourism facilities (enabling environment).

To be eligible for government recognition, hospitals and health providers must comply with the terms of the international or National Accreditation Boards(when established) All these measures added to higher budgetary allocations by the government for its public health sector should attract foreign investments in the industry and should help secure Egypt's position as a significant player in the global health travel industry.

Our study shows that because of the weak infrastructure of the government and public sector health industry, almost all new investments will have to come from the private sector and multi-national joint ventures.

Our study also shows that due to the gaps in the value chain for Cairo as a destination, it is recommended that in the first phase of development of the Industry (scenario 3) a resort destination with a fully developed infra-structure is recommended. The product groups are stated in this scenario. It is also recommended that medical tourism centres be part of large tourism developments so as to reduce cost of infra structure.

Our preliminary research shows that estimated costs of centres/ small hospitals for cosmetic/ eye/ dental surgeries vary between USD 3-5 million. These estimates could vary dramatically according to location and size of the establishment.

Current new investments in medical tourism are mostly Arab investments in Marsa Alam, Northern coast and Hurghada

It may be worth mentioning at this stage that the KfW group of investment banks of Germany has established a special investment department for medical tourism in their Head Office in Frankfurt.

7.4.6 Promotion of medical equipment sector

Though we see little relevance of the local medical equipment sector to medical tourism industry at this stage, we have looked into this market with the following findings;

In million USD	**2005**	**2006**	**2007 (estimated)**
Total market size	235	255	275
Total local production	30	31	32
Total exports	15	16	17
Total imports	220	240	260
Imports from the US	30	33	36

The table shows that local production is around 12% of the total market. This production is mainly for hospital supplies rather than high-tech equipment

The highly competitive medical equipment market in Egypt is estimated at roughly $275 million, with an expected annual growth rate of 5% for the next two years. As there is little local production, the market relies mainly on imports and is extremely receptive to American products because of the advanced technology and associated training, and the well developed marketing systems. The USAID program has allocated $24.7 million for health care and family planning for the coming 2 years. Despite the solid reputation, U.S. market share is estimated at 20%. As the population continues to grow, more hospitals and medical and healthcare centres are being built. The Ministry and its donor partners are investing in renovating and re-equipping existing buildings with new technologies, and constructing new centres in priority, under-served areas. The private sector's demand for sophisticated medical equipment is also growing.

Currently the main requirements of the market are in

- Highly Specialised Disposables
- High-Tech Equipment
- Software for Hospital Management/Network
- ICU Monitoring Equipment.

(Source: US Embassy Commercial section)

It is important to note that there is hardly any equipment industry in Egypt and we do not believe that it is of any importance relating the possible growth in this industry to the expected growth in medical tourism. It goes without saying that with the growth of new medical tourism centres and hospitals, High-Tech equipment, software and highly specialised disposables will need to be imported.

A separate study will need to be carried out on the medical equipment industry market with view to evaluate the viability of starting this highly specialised industry in Egypt

8 Strategic development pillars

8.1 Overview

In order to realise Egypt's potential as a medical tourism destination, four strategic pillars for action are proposed. It is important that all pillars are addressed, as they are inter-dependent and the strategy will not succeed without strong action in each area.

8.2 Pillar one: An enabling environment

8.2.1 Policy: inter-ministerial sub-committee

At present there is no clear policy direction for the sector, which falls between the tourism and health ministries. It is recommended that an Inter-Ministerial Sub Committee is established, chaired by a leading figure from the private sector, ideally a tourism entrepreneur. The industry should be represented on the sub-committee through its proposed representative association.

The sub-committee should be charged with implementing this strategy, and achieving the targets outlined herein.

The sub-committee should have its own dedicated budget, project manager and core staff, and be housed in a suitable location. Identifying adequate funding for the implementation of this strategy is a key government responsibility.

The manager should develop a database for the sector (none exists at present), and draft detail annual action plans in accordance with the pillars and direction of this strategy.

The sub-committee should review Egypt's medical tourism visa regime to bring it into line with international best practise (e.g. India). Long term medical tourism visas and accompanying person's medical visas need to be introduced, together with senior citizens' retirement visas. (The development of medical tourism facilities will encourage the development of senior citizen travel to Egypt, at present a missed opportunity).

8.2.2 Industry representation: Federation of Medical Tourism Providers

An industry representative association should be established consisting of the following:

- Accredited medical tourism hospitals;
- Accredited medical tourism clinics; and
- Travel agents committed to investing in marketing medical tourism

The committee should elect its own chairman and meet on a bi-monthly basis to oversee and assist the implementation of this strategy. It has a particular role to play to encourage cooperative marketing.

8.2.3 International Patient Services Bureau

It is recommended that the industry, with the support of MOHP, establishes an International Patient Services Bureau to focus on customer care of international patients and to deal with any complaints that may arise.

The Bureau should have a substantial role in facilitating training for hospitals in the needs of international tourists (see Human Resources pillar in 8.4). The Bureau should also have a facilitating role in arbitrating awards of compensation, assisting international patients, insurance companies and hospitals to reach swift and equitable agreements.

8.2.4 Action planning

An indicative action plan is outlined in section 9.

8.3 Pillar two: product development

8.3.1 Targets

At present Egypt has no dedicated medical tourism hospitals or even medical tourism wards within hospitals. There are however some clinics which specialise in tourism, such as the treatment of alcoholism or kidney dialysis, and some significant plans for new resort-based hospital developments.

The target is to deliver five specialised medical tourism hospitals and twenty clinics by 2020 and to increase the number of dedicated medical tourism beds from zero at present to 800 – 1,000 in the same timeframe.

Hospitals will also be encouraged to develop their own serviced apartments for recuperating medical tourism patients, and to use suitable hotels. Substantial development of residential tourism is already planned in coastal locations.

A private sector-driven medical tourism industry is envisaged for Egypt, in conformity with global trends. The state has huge public healthcare burdens to address and these must remain state hospital's priority. Medical tourism should only be developed in private or semi-private discrete developments with separate entrances or different locations from over-crowded public healthcare facilities.

8.3.2 Locations

The analysis of strengths clearly indicated that medical tourism hospitals and facilities are most likely to succeed where they are very closely integrated with significant tourism product. Thus the Red Sea coastline, the Mediterranean Coastline, Lower Egypt and (to a lesser extent) Cairo are seen as the preferred destinations for medical tourism development.

The locations chosen will however be almost entirely determined by the availability of private sector finance and the market preferences of the private sector.

8.3.3 Accreditation

There is a remarkable desire by Egyptian healthcare providers to obtain international accreditation as prerequisite for quality assurance. This commitment is seen as an essential strategic requirement for any investment.

8.3.4 Investment

Developing medical facilities of any kind is an extremely expensive undertaking. Attracting very significant inward and local investment is a fundamental challenge of this strategy. Egypt however has a good record of attracting investment in tourism, and the same approach (with more clarity and focus) is needed here.

The General Authority for Investment and Free Zones (GAFI) is responsible for most inward investment policy (including tourism) and operates over 30 investor one-stop-shops. GAFI does not at present have a strategy to address medical tourism, although general tourism investment has been successfully targeted in the past (*1*).

Increased investment flows especially from the Gulf area should be targeted. There already some examples to follow, such as the Andalusia hospital group in Alexandria to be established by Saudi investors. Also, Marasi and Port Ghalib tourist projects plan to offer health tourism as distinctive services of their international clients.

8.3.5 Improving support services

Programme to improve support services such as ambulance, airport services…etc. are essential. The inter-ministerial sub committee should facilitate this by highlighting concerns and proposing solutions to airports and healthcare service providers.

Specialised travel agents and more professional hotels and resorts responding to the special needs of the sector will need to be established. This will also necessitates the development of skilled and trained personnel realising the needs of medical tourism clients and qualified to satisfy them.

8.3.6 Strategic alliances

Building strategic alliances and linkages with renowned centres of excellence for mutual benefit must be encouraged. This needs to be taken forward directly by hospital companies themselves, the project team should give support in identifying opportunities.
Leading global healthcare providers or franchised opportunities include the following: Harvard clinics; Mayo clinic; John Hopkins; Cleveland Medical Centre; Oxford University Medical School; and Duke University School of Medicine

1 Tourism was a GAFI priority in its corporate plan 2004-7, but the current plan has less emphasis on this sector.

8.3.7 New product

Table 4 offers an overview of the Egyptian potential medical products proposed in the medium term and rationales for their selection.

Table 4: Medical tourism products proposed

Medical Product	Development Term	Rationale
1- **Recuperation and rehabilitation (R&R)**	Short/medium	1- Expected growth in the number of affluent aged and retired people travelling for wellbeing and health assessment purposes. This market segment is expected to boom in the future striving for perfect health as opposed to merely living disease-free. 2- The R&R product is very much dependent on the existence of natural environmental endowments in the visited destination, which many regions in Egypt currently possess. 3- The R&R resorts combine both hospitality and medical wellness components which Egypt can easily develop in the short run. 4- R&R centres do not require sophisticated infrastructure and support services such as ambulance as some other medical products. 5- R&R products can be marketed by the tourism sector players in the medium term while other medical products will need longer time to launch compatible marketing campaigns. 6- R&R products do not require complicated medical equipments such as intensive care units, proper credentialing of physicians and support staff and sophisticated infection control systems as required for other medical products such as surgeries and operations. 7- The opportunity of attracting capital investments to such centres is higher than building a medical tourism hospital or healthcare city, especially in the short and medium terms. 8- Such centres are more viable to obtain international accreditations than hospitals especially in the short term.
2-Dental care	Short/medium	1- Capital investments needed to establish such centres in the different tourist areas are reasonable compared to other medical products. 2- The high cost of the dental care treatments in many European countries such as in UK offer potentials of satisfactory investment returns in short periods. 3- Does not require sophisticated infrastructure and support services such as facilities at the airports or ambulance. 4- Dental care centres are likely to obtain international accreditations than hospitals, especially on the short and medium terms. 5- Dental care treatments can be smoothly integrated into the tourist holiday package and be sold as an added value promoted by tour operators.

		6- Internal marketing can help such centres selling their dental care treatments to clients taking a holiday in the destination while other medical products will require prior decision to go to the destination for heart or orthopaedic surgery. 7- As clients are outpatients, the need of dedicated nursing staff with efficient personal skills is not urgent. 8- Can be developed and promoted while working on the implementation of the strategy action plan. However, other sophisticated medical products will need a fulfilment of the four strategy pillars to succeed.
3-Eye care	Short/medium	1-Pre-opening costs and capital investments needed to establish eye care centres in the different tourist areas are reasonable compared to other medical products. 2- Clients are mostly outpatients using other means of accommodations such as resorts and hotels. 3- Smooth integration of the eye treatment into the holiday package and distributed through specialised tour operators. 4- Existence of up-to-date eye care centres using the latest technology of eye treatment and operations. 5- The combination of a laser vision correction and recuperation holiday at one of the recuperation centres can easily be arranged and positioned in the international markets in the medium term. 6- Does not require sophisticated infrastructure and support services such as facilities at the airports or ambulance. 7- Can be developed and promoted while working on the implementation of the strategy action plan. However, other sophisticated medical products will need a fulfilment of the four strategy pillars to exist.
4- **Dialysis (support service)**	Short/medium	1- Dialysis is a support service which its provision is crucial to the international kidney traveller to take the decision of visiting the destination. 2- Marketing a dialysis service is supposed to be easier than marketing for other independent medical tourism products as the main motivation to visit the destination is leisure and holiday activities. The dialysis service is very much dependent on the appeal of the tourist destination and the attractiveness of its resources which already exist in many destinations in Egypt. 3- The capital investment cost and operational costs of the dialysis centre are relatively reasonable compared to other medical tourism projects. 4- The dialysis service can easily be integrated into the tourist programme of the patient. 5- As quality assurance is crucial in the filed of medical tourism, delivering and monitoring quality of dialysis services can be achieved in the short term. Compared to other medical products.

5-Plastic surgery	**Medium:** Arabs and Africans. **Long:** Europeans, Russians and Americans.	1- Potentials in the Arab market especially of its niche segments. 2- Great potentials in the European and American markets as the number of affluent clients searching for ways to slow down ageing are booming... 3- Plastic surgery is ideal if combined with spa and wellness activities for holistic beauty and health, which can be developed and offered in the Egyptian coastal regions. 4- The possibility of offering a distinctive product merging plastic surgery and leisure activities in one package. 5- Does not require sophisticated infrastructure and support services 6- Although quality is crucial for competitiveness, the preparedness of the current plastic surgery centres or the establishment of state-of-the-art centres can be reached in the medium term of the strategy. 7- Quality should be coined with competitive prices to position Egypt in the international market while using the uniqueness of combining beauty, health and leisure in a holiday package as competitive advantage. This can not be easily accomplished in the short term especially in the European and American markets. 8- Capital investments needed to establish plastic surgery centres in the different tourist areas are relatively reasonable compared to other medical products. 9- Providers of the plastic surgery package will need to offer competitive transparent prices in their websites to the international market, which can be accomplished in the medium and long terms. 10- To offer plastic surgery as a medical tourism product, the hospital has to build up a good image and a history recording. This can be easily achieved in the medium term.
6-Oncology	**Short / medium:** Specific segments of Arabs (Libya, Sudan and Yemen) and Africans. **Long:** New segments of the Gulf countries	1- Hospital 57357 along with a number of centres and hospital oncology departments can attract wider segments of the Arab markets in the long run if they manage to employ compatible marketing strategies. 2- The need of the cancer patient to repeat the visit is an advantage of the Egyptian centres to attract the Arab patients to Egypt due to its proximity to Egypt. 3- As the pre-opening, capital and operational costs of establishing a-state-of-the art oncology centre are relatively high; Cairo could be the ideal location for such investment. 4- Egyptian oncology centres will need to position themselves in the Arab market through accredited agents or offices in the generating countries and have “Arab Patient Service Department” at the hospital which can arrange for all relevant services even before the patient starts his journey including the arrangement of the accommodation for the out-patients and their accompanied persons. 5- Hospitals and centres will need to show evidences of excellence to attract new segments of the Arab market which can be accomplished through credentialed physicians, nursing staff with professional and personal skill competencies, international and national accreditation and affiliations. All such requirements can only be attained on the long term.

		6- Oncology centres will need to offer transparent prices of all treatments services and have such prices published on their websites and circulated on their agents in the Gulf market.
7-Orthopedic surgery	**Long term:** Arab and African markets **Longer term:** Europeans and Americans	1-The preparedness of the Egyptian healthcare sector for the international market requirements and competitive conditions is still inefficient. 2- The medical tourism sector still need to overcome many of the deficiencies highlighted in this report, and to adopt the strategic pillars addressed by its strategy. With regard to the healthcare sector, providers will need to confront and fill gaps in the environment of care infrastructure, facility management, proper credentialing of clinical personnel, infection control, use and management of healthcare data, appropriate assessments and care of patients as well as the quality of care and the response to patient safety issues. Additionally, marketing and promotion will be significant tools for the international competition bearing in mind that different segments of the targeted Gulf markets have currently become more familiar to the Asian medical destinations such as India, Thailand and Malaysia. 3- In addition to the preparedness of the healthcare providers to offer special medical products such as orthopaedic surgery, the support service sector should also be well developed for the marketing, promotion and distribution of the product in the international market and for handling all relevant services needed by the international patient during his trip. 4- Unlike dialysis, dental treatment, eye care or even plastic surgery, the main motivation of the international patient to travel to Egypt for orthopaedic will be centred on the quality of the operation, the competitive price it offers and the extra care he will receive during his trip and after he returns home through the arranged follow up clinic at home. The leisure and tourism component will constitute the secondary motivation in this case, which reflects the fierce competition Egypt will face to position its orthopaedic products in the international market. 5- As the Orthopaedic surgery will be offered by hospitals as one of their medical products, pre-opening, capital and operational investment to build the facility will be relatively high which implies the existence of such healthcare providers in the central urban cities such as Cairo or Alexandria to serve both international patients as well as the local market. If the future return on investments is satisfactory and the international demand on the Egyptian medical tourism sectors shows a fair steady growth, the development of healthcare providers offering sophisticated medical products such as orthopaedic surgeries can then be extended to other tourist regions such as Sharm El-Sheikh and Hurghada. 6- To offer Orthopaedic surgery as a medical tourism product, the hospital has to build up a good image and a history recording: how many procedures of the surgery type have been done over the past year, to what internationally agreed standards does the hospital or clinic subscribe, what independent inspection reports are available and what happens if something goes wrong.
8-Heart Surgery	**Long term:** Arabs and Africans	1- Cannot be easily offered in the international markets before the sector has approached the strategic competitive advantage, discussed above, to strengthen its competitive edge and has implemented the four pillars and their action plan. 2- Before rushing to establish new state-of-the-art hospitals offering heart

	Longer term: Europeans and Americans targeting the combination of heart surgery and holiday for recuperation after surgery	surgeries for the international global market, the current few eligible hospitals should be encourage to take the initiative positioning their heart surgery products in the international market, which implies a full commitment to the service value chain and to all marketing and operational devices addressed by the strategy. 3- The Arab and African markets are the most appropriate as primary generating markets while expansion in such markets or accessing new markets will be very much dependent on the success of building credibility of the Egyptian heart surgery operations in the international market. Then, investments can easily be attracted, to establish new state-of-the-art hospitals promoting heart surgeries as a main medical tourism product. 4- The competitive advantage of Egypt in the Arab and African markets will mainly be the geographical proximity to the market which can be seen as an advantage for the heart patient. However, this should be provided with other support services for the arrangement of the trip, facilities at airports and for the entertainment of the patient's accompanied persons. 5- If new investments will take pace for establishing state-of-the-art hospitals in the longer term, this should be located outskirts of Cairo in the new cities such as "Madinaty" or in the tourist regions such as Northwest coast or Sinai as recuperation after surgery will be the main competitive advantage element to attract segments from the European or American markets. 6- Healthcare providers will need to confront and fill gaps in the environment of care infrastructure, facility management, proper credentialing of clinical personnel, infection control, use and management of healthcare data, appropriate assessments and care of patients as well as the quality of care and the response to patient safety issues. 7- Healthcare providers will need to build stronger alliances with medical offices in the generating markets to act as their agents in such markets and also to arrange for collaborative work with the tourism service suppliers and travel agents to offer a comprehensive medical tourism package. Also, having an "International Patient Service Centre" is an important marketing tool for client care and satisfaction. 8- Prices of the whole package will be a determining element to attract international patients while quality assurance is a core factor driving decisions of international heart surgery patients to visit the destination. The Egyptian medical tourism sector in general and the healthcare provider in particular should be ready to adopt quality and prices as an approach for competition. 9- The success of "heart surgery" as a medical tourism product is very much determinant on the adequacy of the infrastructure support services such as facilities at the airports and ambulance services…etc. All such services can be fully provided and developed on the long term-if the strategy action plan is implemented at its fullest. 10- To offer heart surgery as a medical tourism product, the hospital has to build up a good image and a history recording: how many procedures of the surgery type have been done over the past year, to what internationally agreed standards does the hospital or clinic subscribe, what independent inspection reports are available and what happens if something goes wrong.

8.3.8 Medical tourism city

At the present time it is recommended that Egypt should adopt a niche approach to the development of medical tourism facilities**.** The development of specialist hospitals in dispersed locations close to tourism centres should be encouraged.

Mega projects, such as a medical tourism city, should not be attempted by the state until the sector has established itself internationally. In the longer term a private sector, international market-driven operation might be interested in developing such a facility and this possibility should not be excluded. A location in the future could be 'Super Delta' region (Cairo-Alexandria-Port Said triangle) is most likely.

8.4 Pillar three: human resources

8.4.1 Targets

A private sector-led approach to developing new training facilities is envisaged. Training facilities should not only be capable of attracting Egyptian students, but should also attract students from the region and beyond due to their excellence. Such training programmes should be organised by MOHP and conducted at well equipped places such as private hospitals.

Also, tourism personnel will need to be trained on the special needs of the sector which should be delivered by the Ministry of Tourism or the Egyptian Tourism Federation at well-equipped training centres or qualified hotels.

Based on an increase in medical tourists to 153,000 by 2020, we estimate the number of high calibre medical staff needed to be as follows:
By 2012: 130
By 2020: 400

8.4.2 Areas for development

- A plan for private educational universities to develop educational programmes is highly needed to graduate more qualified nursing staff to solve the current problems. Such new educational programmes should include courses for medical tourism delivering issues of customer care, medical tourist profiles, communication skills as well as language skills.
- Fostering concept of “hospital management” as a professional career through education and training.
- Adding training for medical personnel in hospitals (including doctors) on broad service-related skills including communication skills and languages.
- Implementing training programmes to enhance performance of all personnel working in the sector based on international alliance with the international institutes, such as, Harvard Medical School and Mayo Clinics.
- Training hospitality and tourism staff as well as support services staff on aspects of medical tourism.

The following table illustrates programmes suggested for human resource development

Programmes	Providers / organisers	Clients	Remarks
Educational undergraduate programme to graduate qualified nurses	Private University	Students to become professional nurses	Elective courses on medical tourism

Training courses to upgrade skills of a designated number of nurses	MoHP	Selected number of nurses currently working in the healthcare sector	Focus on communication skills, customer care…etc.
Educational postgraduate programme on "Hospital Management"	National or private university	Physicians as well as university graduates from Business Administration schools	Elective courses on medical tourism marketing, trends and generating markets
Training courses to qualify Para-medical staff and professional physicians using the up-to-date techniques in the different medical tourism fields.	International medical schools such as Mayo , Harvard or Duke with the collaboration of MoHP or Federation of medical tourism providers	Physicians	Such training programmes will be used firstly to upgrade competencies of physicians working in medical tourism and secondly to promote for the Egyptian medical tourism products
Training courses to qualify personnel working in hotels and travel agencies on the special needs of the medical tourism sector	Human Resource Development Sector at the Egyptian Tourism Federation	Current tourist personnel working in the tourism and hospitality	Different training courses will be needed on medical tourism marketing, special needs of medical tourism markets, dietary food, medical tour operation

8.5 Pillar four: Marketing

8.5.1 Targets

At present Egypt attracts some 50,000 medical tourism patients, mostly from neighbouring Arab countries. Spent and length of stay of these patients is not known. Putting in place a database to capture better information n on this subject is a priority.

The target will be to increase this figure threefold by 2020, i.e. 165,000 medical tourism patients to be attracted to Egypt. Whilst Arab countries will remain the primary target, the numbers of patients from Egypt's main tourism markets (UK, Russia, Europe, etc) will increase as medical tourism facilities are internationally well positioned.

8.5.2 Strategic positioning of products

Positioning involves key strategic policy-level decisions regarding how Egypt will:

- differentiate its medical tourism products from other destinations (quality, uniqueness, brand, etc. are key determinants for such differentiation),
- build a strong image of its medical tourism products to be perceived by the international market segments,
- attempt to compete directly with destinations offering same type of products; and
- identify certain market segments for each product group, which the destination seeks to appeal strongly to

The key competitive advantage for positioning Egyptian special interest medical tourism products globally is their integration into the existing tourist product offer through combining treatment with holidays, and availing of tourism's excellent facilities. Such integration will positively affect the way the image of the Egyptian medical tourism products is perceived in the targeted markets. The role of Egyptian travel agents and hospitals in agreeing on products to be internationally marketed is thus critical.

Egypt will be positioned as a niche destination for medical tourism, specialising in the following areas:

- Recuperation
- Dentistry
- Eye care
- Plastic Surgery
- Orthopaedic surgery (such as knee/hip replacement)
- Heart Surgery
- Dialysis (support service)

A key selling point will be the opportunity to add on Egypt's tourism product to a medical procedure and recuperate in pleasant, affordable surroundings.

The tables following outline these advantages by proposed product:

Strategic positioning for Recuperation and Rehabilitation Treatment products:

Development Term	Proposed Locations	Targeted market segments	Projects and Investments	Selling& Distribution	Competitive Advantage
Short/medium terms	Red Sea Coast South Sinai Mediterranean Coast	**Primary:** -Aged retired Europeans. - Europeans seeking weight loss & dietary treatments. -Europeans seeking treatment for alcoholism and smoking. **Potentials:** -American market can be approached in the longer term. -Specific segments of the Gulf Arab market. **Main competitor**: Turkey, Tunisia and Jordan.	**Existing:** -El-Gouna medical centre. -Porto Ghalib in Marsa Alam (to be established) -Marassi on the Northwest coast (to be established) **Opportunities:** Recuperation and rehabilitation centres at the coastal areas are needed. Investments to establish such projects can be initiated by either tourism investors or healthcare investors.	**Currently:** -Limited direct marketing and sales by operators -Through the resort marketing packages. **Opportunities:** -Sales through tour operators -Direct and relationship marketing with patients through the internet. -Relationships with health insurance companies in the designated markets especially in Europe.	Natural surroundings at the coastal areas possessing healing properties ideal for recuperation and rehabilitation treatments. The combination of a holiday and the treatment. New brands can be created such as “holiday for wellbeing”. Relative proximity to the generating markets of Europe and Gulf. Price can be used as a competitive force.

Strategic positioning for Dental Care Treatments:

Development Term	Proposed Locations	Targeted market segments	Projects and Investments	Selling& Distribution	Competitive Advantage
Short/medium terms Longer term	Red Sea Coast South Sinai Luxor & Aswan Cairo Mediterranean Coast	**Primary:** - European tourists coming for holidays. -Arabs on holidays. **Potentials:** -American tourists coming for holiday. -Japanese tourists coming for holiday. **Main competitor:** Hungary	**Existing:** -No well positioned centres working in the medical tourism field. However, a number of expatriates and international tourists target such centres due to the relative low cost of treatments. **Opportunities:** Dentistry centres are needed to be located inside a big resort or in a central area of the tourist destination. Investments to establish such projects can be initiated by the private sector.	**Currently:** -No existing ties between dentistry centres and tourism projects for joint marketing and distribution. **Opportunities:** -Travel agencies can sell the dentistry treatment products as part of their holiday packages. -Relationship and internal marketing to sell the dental care treatments to the clients of the region's resorts and hotels. -International intermediaries selling the service	The dentistry treatment component can be considered as an added value to the current tourist products. A new brand of holiday packages combining "coastal or cultural tourist activities + dental care". Prices of treatments can be used as a competitive force to attract tourists visiting the clinic while on a holiday.

Strategic positioning for eye care treatments:

Development Term	Proposed Locations	Targeted market segments	Projects and Investments	Selling& Distribution	Competitive Advantage
Short/medium terms Longer terms	Red Sea Coast South Sinai Upper Egypt Cairo Mediterranean Coast	**Primary:** - European tourists coming for holiday trips. -Arabs on holidays. **Potentials:** - Any international tourists targeting the combination of a holiday and eye surgery especially laser vision correction operations. **Main competitor:** Turkey	**Existing:** -No well positioned centres working in the medical tourism field. However, El-Maghrabi eye care group has initiated the expansion of its centres at tourists regions and opened a branch in EL-Gouna. -International Eye Hospital has the potential to increase its share in foreign market **Opportunities:** Eye care centres are needed to be located inside a big resort or in a central area of the tourist destination. Investments to establish such projects can be initiated by the private sector.	**Currently:** -No existing ties between eye care centres and tourism projects for joint marketing and distribution. **Opportunities:** -Travel agencies can sell the eye care treatment products as part of their holiday packages. -Relationship and internal marketing to sell the eye care treatments to the clients of the region's resorts and hotels. -International intermediaries selling the service	The eye care treatment component can be considered as an added value to the current tourist products. A new brand of holiday packages combining "coastal or cultural tourist activities + eye care". Prices of the holiday package including eye treatments can be used as a competitive force to attract international patients.

Strategic positioning for Plastic Surgery:

Development Term	Proposed Locations	Targeted market segments	Projects and Investments	Selling& Distribution	Competitive Advantage
Medium/long	Cairo Red Sea Coast South Sinai Mediterranean Coast	**Primary:** - Arab market. **Potentials:** - Europeans & Americans targeting Egypt for holidays. - Americans targeting the combination of a holiday and plastic surgery operation. **Main competitor:** South Africa, Dubai and Lebanon	**Existing:** -No well positioned centres working in the medical tourism field. However, Tajmeel clinics (Libyan, Gulf and Egyptian investment) initiated the establishment of a group of plastic surgery centres in Cairo, Hurghada and Sharm El-Sheikh. Marassi resort in the Mediterranean coast also plans to include state-of–the-art plastic surgery centre targeting EU market. **Opportunities:** Existing centres have the opportunity to update their operational and marketing performances to fit into the requirements of the medical tourism market.	**Currently:** -No strong ties between plastic surgery centres and tourism projects for joint marketing and distribution. However, Tajmeel clinics, Marassi and Porto Ghalib are good initiatives but still under construction. **Opportunities:** -Plastic surgery products can be sold as part of the holiday packages distributed by tour operators, hotels and resorts. -Direct marketing through the internet and intermediaries can also sell the package directly to the customers	The combination of a holiday and a plastic surgery operation. The natural coastal environment is unique for plastic surgery patients to rest after operation. A new brand of holiday packages combining “coastal or cultural tourist activities + plastic surgery”. For example, “holiday for beauty” Prices of the holiday package including plastic surgery can be used as a competitive force to attract international patients.

Strategic positioning for Orthopaedic Surgery:

Development Term	Proposed Locations	Targeted market segments	Projects and Investments	Selling& Distribution	Competitive Advantage
Long term Longer terms	Cairo (outskirts of central Cairo) Red Sea Coast South Sinai Northwest Coast	**Primary:** -Arab market. -African market. **Potentials:** -Europeans. -Americans targeting the combination of a holiday and knee or hip replacement. **Main competitor:** Thailand, Dubai and India	**Existing:** -No well positioned centres working in the medical tourism field. Dar El-Fouad and IMC are the only hospitals which have potentials offering orthopaedic surgery to international patients. **Opportunities:** The enabling environment along with the improvement of the infrastructure facilities will encourage inward and local private investments building state-of-the-art hospitals offering orthopaedic surgery among their products	**Currently:** Dar El-Fouad and IMC mainly focus on the local market (Egyptians and expatriates living in Egypt) **Opportunities:** -Advertisements and relationship marketing to attract Arabs and Africans. -Direct marketing through the hospital centre serving international patients and through the hospital website. - Relationships with international health insurance companies sending their clients abroad for treatments to include the hospital's orthopaedic products in their list of treatment abroad. -Distribution through specialised medical tourism companies.	Proximity to the Arab and African market. The combination of a holiday and orthopaedic surgery at competitive rates. A new holiday package brand. The natural coastal environment is unique for the orthopaedic surgery client to rest after operation. Tailoring special tourist programmes to the patient's companions to enjoy Egypt's natural and cultural heritage.

Strategic positioning for Heart Surgery:

Development Term	Proposed Locations	Targeted market segments	Projects and Investments	Selling& Distribution	Competitive Advantage
Long term Longer term depending on the adequacy of the medical tourism infrastructure and future preparedness of healthcare providers	Cairo (outskirts of Cairo) Red Sea Coast South Sinai Northwest Coast	**Primary:** -Arab market. -African market. **Potentials:** -Europeans. -Americans targeting the combination of heart surgery and holiday for recuperation after surgery. **Main competitor:** India and Jordan.	**Existing:** -No well positioned centres working in the medical tourism field. Dar El-Fouad is the only hospitals which has potentials offering heart surgery to international patients. **Opportunities:** The enabling environment along with the improvement of the infrastructure facilities will encourage inward and local private investments building state-of-the-art hospitals in places outside central Cairo such as “Madinaty” in New Cairo or Six October City.	**Currently:** Dar El-Fouad mainly focus on the local market (Egyptians and expatriates living in Egypt with limited marketing activities for the international market) **Opportunities:** -Advertisements and relationship marketing in the Arab and African markets to position the heart surgery product in such markets. -Presence in the international medical tourism events. -Distribution through specialised medical tourism companies in the European and American market. -Direct marketing through the hospital centre serving international patients and through the hospital website.	The proximity to the Arab and African markets. Branding the combination of a heart surgery operation and a holiday for recuperation after surgery. The unpolluted environment at the new cities in outskirts Cairo and resorts in Egypt. Tailoring special tourist programmes to the patient’s companions to enjoy Egypt’s natural and cultural heritage.

Strategic positioning for Oncology:

Development Term	Proposed Locations	Targeted market segments	Projects and Investments	Selling& Distribution	Competitive Advantage
Short/medium term Long term	Cairo Outskirts of Cairo	**Primary:** -Arab market. -African market. **Potential:** Attracting different segments of the Arab market especially in the Gulf area. **Main competitor:** Dubai, Jordan	**Existing:** -No well positioned centres working in the medical tourism field. Hospital 57357, Gamma Knife, IMC and Dr. Mohsen Barsoom Centre has potentials to serve the sector. **Opportunities:** -The enabling environment along with the improvement of the infrastructure facilities will help the existing providers better position their services in the international market. –If big investments will be directed to the establishment of state-of-the-art hospital serving the medical tourism sector, oncology treatments should be one of the main products offered.	**Currently:** The main focus is still on the local market (Egyptians and expatriates living in Egypt with limited marketing activities for the Arab market. **Opportunities:** -Advertisements and relationship marketing in the Arab and African markets to position the oncology product in such markets. -Serving patients through "International patient Service Centres" -Presence in the international medical tourism events and exhibitions especially in the Gulf area. -Distribution through specialised intermediaries in the Gulf market.	The proximity to the Arab and African market as patients may need to repeat visits to the oncology centres. The possibility of combining the long treatment with an affordable holiday The availability of different types of accommodation in different categories for outpatients. A wide range of entertainment facilities for companions.

Strategic positioning for Dialysis (support service):

Development Term	Proposed Locations	Targeted market segments	Projects and Investments	Selling& Distribution	Competitive Advantage
Short/ medium term Long term	Cairo Sinai Red Sea Upper Egypt Mediterranean Coast (in case the Northwest Coast has been developed to international destination standards as planned by the tourism sector.	**Primary:** -All holiday travellers with kidney ailments. **Potential:** Serving individual tourists organizing their own trips (especially from the Arab market). **Main competitor:** Turkey and any destination offering dialysis as a support service	**Existing:** -EMS at Cairo, Sharm EL-Sheikh and Hurghada and EL-Gouna hospital are currently serving the international dialysis tourist. **Opportunities:** – Potential to attract investment to establish dialysis centres in Marsa Alam and Luxor on the medium term and the Northwest Coast in the long term depending on the future international demand on its resorts.	**Currently:** -Through international tour operators working in dialysis holidays. -Ties with health insurance companies in generating markets. -Relationships with dialysis associations. -Attendance of international events. **Opportunities:** -Direct relationship marketing to reach individual tourists through the website and e-marketing efforts.	The possibility of combining the holiday with the treatment. Patient's companions can enjoy their tourist programmes. The dialysis service helps the Egyptian tourism attracting the international dialysis patient segments. Without this important support service, the dialysis patient will not take the decision of visiting Egypt even if he has the motive to visiting it.

8.5.3 Delivery

Due to the highly specialised nature of medical tourism marketing, this strategy recognises that the best approach is to encourage hospitals to directly market themselves through specialist agents and travel agents, specialist internet sites, and specialist trade fairs and alliances. The role of the ETA will be to facilitate this and to help to raise the (presently very weak) profile of Egypt as a medical tourism destination.

Cooperative marketing will be encouraged through the representative association and the proposed inter-ministerial sub-committee.

8.5.4 Investment Marketing

The new healthcare investment policy should be marketed directly to international healthcare development companies, through specialist trade fairs and direct selling. This should be undertaken by GAFI in strong partnership with leading individual Egyptian healthcare providers.

Specific inward investment targets should be as follows:

- The delivery of five new medical tourism hospitals by 2020, mainly in tourism locations.
- The delivery of twenty new specifically tourism-focused clinics by 2020.
- Securing investment to ensure that at least fifteen quality hospitals achieve JCI accreditation by 2020.

8.5.5 Marketing Egypt as medical tourism conference destination

Egypt should position itself as one of the world's leading destinations for medical tourism conferences. As Egypt's travel trade already knows, medical conferences represent one of the largest segments of the international meetings, incentives, conferences and exhibitions (MICE) industry. Egypt' renowned medical professionals at home and abroad can be leading ambassadors to attract these mega-events to the country. Leading conference centres in Egypt include Cairo, Sharm el Sheik, Luxor and Alexandria.

8.5.6 Financial Impact

We estimate that if the target of 165,000 visitors per annum is achieved by 2020, direct expenditure of $495 million each year would result. This is based on assumed daily expenditure of $300 and an average 10 night stay in Egypt.

At present the Ministry of Tourism estimates that visitors to Egypt for medical and therapeutic purposes are spending only $60 a day, a reflection of the very under-developed state of the product.

9 Medical tourism action plan

9.1 Enabling environment pillar

Objective	Target	Performance Indicators	Cost ($)	Source	Steps	Timeline	Responsibility
E1. Develop strategic vision at government level	National strategy endorsed by government	Official government press release	Already funded	IMC	Steering committee approves final report	December 2008	IMC
E2. Communicate vision	Awareness and sense of common purpose achieved	Publish strategy Press coverage of major conference to launch strategy Distribution of strategy	$40,000	MoT & MoHP	-Agree event concept -Appoint sub-committee and conference organiser -Publish strategy -Agree speakers -Market and deliver event Distribute strategy widely Organise follow-up events	April 2009	MoT & MoHP Federation of Medical Tourism Providers

E3. Establish medical tourism steering group	Steering group operating effectively	Minutes of meetings and annual report Growth in MT arrivals	$80,000 pa	Industry, MoT & MoHP	Agree concept and participants Appoint project manager	May 2009 onwards	Inter-ministerial committee
E4. Medical tourism federation / association	Association working effectively and competently	Growth in medical tourism arrivals	$ 50,000 pa	Funded by industry participants, MOT, MOHP	Agree on selection method of members (appoint/elect). Appoint staff	January 2009	MOT, MOHP Medical tourism providers
E5. Establish International Patient Services Bureau to ensure good customer relations and to deal with complaints	Bureau operating effectively and image of industry improved	Annual report to members	$200,000pa (*2*)	Funded by industry participants and MOHP	Detailed business plan Recruit staff and establish premises	Feasibility study 2009 Establish 2010	MoHP, industry and Federation of medical tourism providers

(2) Cost depends on whether role includes compensation awards. Role could involve arbitrating compensation claims between hospitals and non-national patients.

9.2 Development pillar

Objective	Target	Performance Indicators	Cost ($)	Source	Steps	Timeline	Responsibility
D1. Improve standard of medical air transport to Egypt	EgyptAir to market medical tourism facilities	Benchmark against Etihad	Not known at this stage	EgyptAir	Obtain corporate agreement Develop internal execution plan	By 2012	EgyptAir
D2. Improve standard of airport facilities for medical tourism patients	Clear medical tourism entry and exit facilities and procedures	Physical development of facilities	$200,000 per airport	Airports Authorities	Obtain corporate agreement Develop internal execution plan	By 2012	Civil Aviation Authority Egyptian Airport Authorities
D3. Introduce long term medical tourism visas and accompanying persons visas	Medical visas in place	Reports on number of medical visas issued	Design, training, execution $20,000	Ministry of Interior Affairs	Obtain government approval. Implement.	By 2010	Ministries of Interior Affairs and Foreign Affairs
D4. Improve ambulance facilities (road and air)	First class fleet of road and air ambulances	Number of new ambulances purchased each year	$3 million	MoHP and private sector	Remove excise duties to facilitate expansion Agree plan with MoHP	By 2012	MoHP and industry
D5. Develop specialist medical tourism travel agents	3 specialist agents by 2012, 10 by 2020	Number of registered agents	$20,000	Private sector	Publicise market opportunity. Encourage entrepreneurs to do market research	To 2020	Egyptian Tourism Federation

D6. Develop clear and generous investment incentives	Investment guidelines published and marketed	Value of investments annually	$30,000pa	GAFI	Develop plan to target investors. Lobby for the introduction of generous tax incentives (reduced excise duties, corporation tax export , etc) Communicate incentives	All years	MoTI, MoT and sub-ministerial committee
D7. Improvement of hotel services for medical tourism	Hotels part of medical tourism product	Number of rooms being sold to medical tourists	Not known	Private sector	ETA already has strategy in place	All years	MoT Federation of Medical Tourism Providers
D8. New hospitals developed	5 new medical tourism hospitals by 2020	FDI secured Hospitals opened	Not known but very substantial, dependent on scale of hospital	Private sector	GAFI secures investor TDA allocated land	All years	Private sector

D9. New clinics developed	20 new specialist clinics/centres	FDI or local investment secured Clinics opened	Not known but substantial. Dependent on scale of hospitals	Private sector	GAFI secures investor TDA allocates land IMC funding support (see 9.5.2)	All years	Private sector

D10. New national accreditation system	All medical tourism facilities accredited	Number accredited each year	$100,000 pa	MoHP Private sector	System to be put in place	By 2012	MoHP
D11. Medical tourism database created	Database operational by 2010	Production of research reports	$100,000	MoHP	Ministerial approval Feasibility study Implementation	2009-2010	MoHP

9.3 Human resources pillar

Objective	Target	Performance Indicators	Cost ($)	Source	Steps	Timeline	Responsibility
T1. Develop more ties with international educational institutions for HR development, research, technological issues, etc.	15 international partnerships by 2020	No of partnerships initiated each year	Not known, dependent on nature of partnerships	Private sector	Assist private sector to identify potential partners	To 2020	Private sector with advice from MoHP
T2.Focus on hospital management training	10 JCI accredited hospitals by 2020	JCI accreditations achieved	c .$50,000 pa	Private sector plus training agencies	Assist private sector to develop training plans to JCI standards	To 2020	Private sector with support from Federation of Healthcare providers and MoHP
T3.Focus on recruiting	10 JCI accredited	JCI accreditations	c. $30,000 pa excluding	Private sector	Review restrictions on employing non-	To 2020	Private sector with support

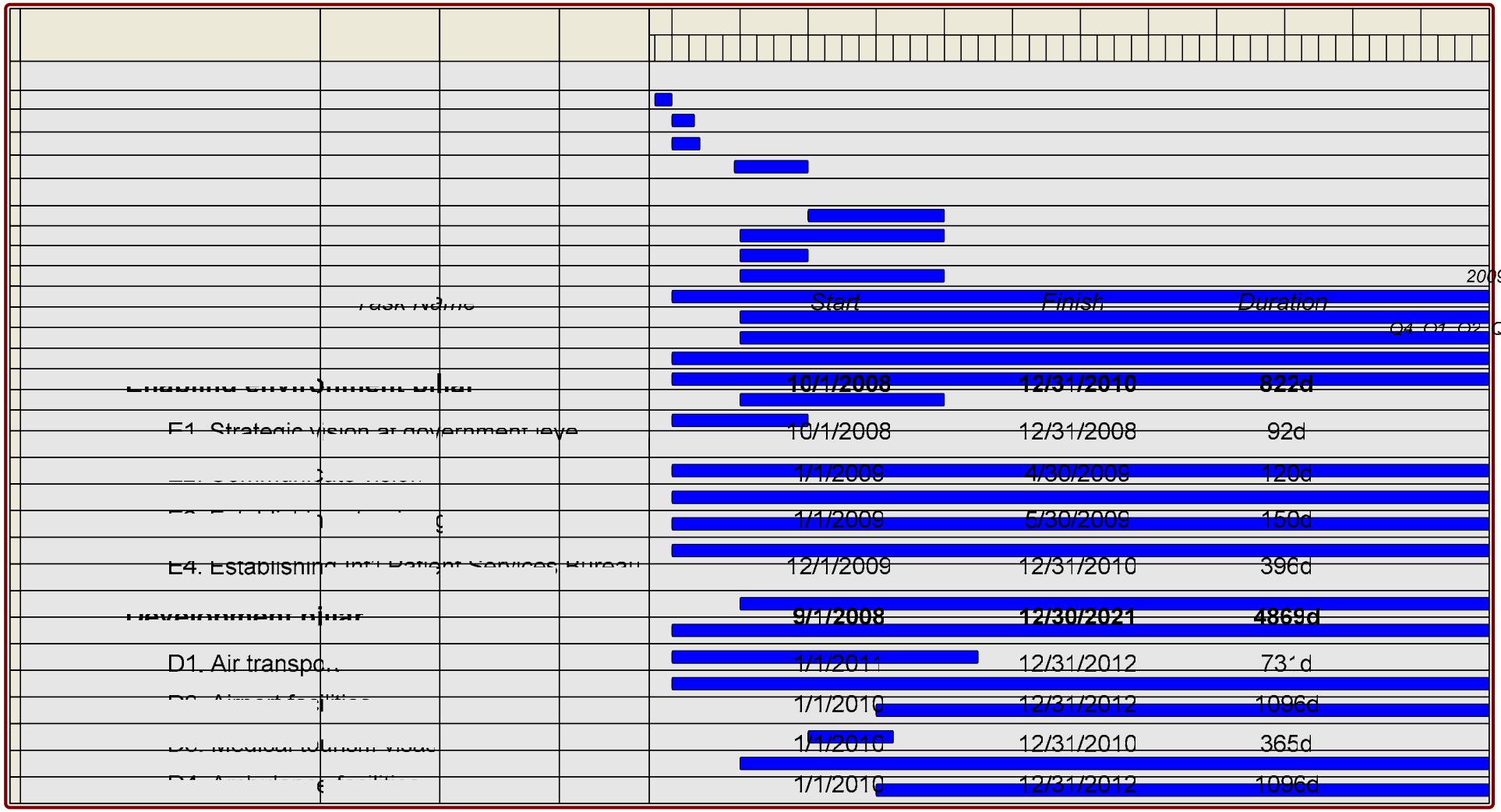
internationally certified doctors and provide on-going training in management and customer care	hospitals by 2020	achieved	recruitment costs	plus training agencies	nationals Assist private sector to develop training plans to JCI standards		from Federation of Healthcare providers and MoHP
T4. Major emphasis on improved nurse training programmes	10 JCI accredited hospitals by 2020	JCI accreditations achieved New nursing colleges opened	Not known but probably substantial	Private sector plus third level colleges	Requires strategic nursing training needs analysis Assist private sector to develop training plans to JCI standards Establish trained Nurse Association of Egypt	To 2020	MoHP private sector Federation Of Medical Tourism Providers

9.4 Marketing pillar

Objective	Target	Performance Indicators	Cost ($)	Source	Steps	Timeline	Responsibility
M1. Provide training and support to medical tourism hospitals in international marketing techniques	5 hospitals active in international marketing of medical tourism by 2020	Annual marketing expenditure by hospitals	$50,000 pa per hospital ($500,000 pa)	Private sector	Provide training and consultancy support to hospitals in international marketing	To 2020	Federation of Healthcare Providers and Egyptian Tourism Federation
M2. Achieve JCI accreditations as product endorsement	10 JCI accredited hospitals by 2020	JCI accreditations achieved	$30,000 per accreditation	Private sector	Follow JCI inspection recommendations	To 2020	Private sector
M3. Establish Egyptian accreditation system also	All medical tourism facilities accredited	Number accredited each year	$100,000 pa	MoHP IMC	System to be put in place	By 2012	MoHP
M4. Achieve international partnerships as product endorsement	15 international partnerships by 2020	No. of partnerships initiated each year	Not known, dependent on nature of partnerships	Private sector	Assist private sector to identify potential partners	To 2020	Private sector with support from MoHP
M5. Position Egyptian medical tourism as closely as possible with mainstream tourism. Start marketing the product.	ETA markets medical tourism once JCI accreditations achieved	Number of medical tourists pa	$50,000 pa	ETA	ETA has Medical and Wellness Tourism Strategy in place	To 2020	ETA Federation of Medical Tourism Suppliers

M6. Develop medical tourism website	Website launched 2011	Number of hits achieved by market	$30,000 set up plus $5,000 upgrades every 3 years	Private sector, IMC	Examine competitor websites Draft ToR and tender for creation of website (including data gathering) Launch website	2011	Federation of Medical Tourism Suppliers Inputs from ETA re Egypt brand marketing
M7. Ensure representation of Egypt at major international medical tourism promotions.	Industry presence at 4 medical tourism promotions each year	Number of promotions undertaken	$100,000 pa	Private sector		On going	Federation of Medical Tourism Suppliers
M8. Position Egypt as a premium medical conference destination	1 major conference pa	Number of delegates and nights in Egypt	$40,000 pa	ETA	As per ETA MICE marketing plan	To 2020	ETA

9.5 Action plan timeframe



Task Name	Start	Finish	Duration
Enabling environment pillar	**10/1/2008**	**12/31/2010**	**822d**
E1. Strategic vision at government leve	10/1/2008	12/31/2008	92d
[illegible]	1/1/2009	4/30/2009	120d
[illegible]	1/1/2009	5/30/2009	150d
E4. Establishing Int'l Patient Services Bureau	12/1/2009	12/31/2010	396d
Development pillar	**9/1/2008**	**12/30/2021**	**4869d**
D1. Air transpo...	1/1/2011	12/31/2012	731d
[illegible]	1/1/2010	12/31/2012	1096d
[illegible]	1/1/2010	12/31/2010	365d
[illegible]	1/1/2010	12/31/2012	1096d
D5. Medical tourism travel agents	1/1/2009	12/31/2020	4383d
D6. Investment incentives	1/1/2010	12/30/2021	4382d
D7. Hotel services	1/1/2010	12/30/2021	4382d
D8. New hospitals	1/1/2009	12/30/2020	4382d
D9. New clinics	1/1/2009	12/30/2020	4382d
D10. National accreditation	1/1/2010	12/31/2012	1096d

9.6 General Budget

In USD

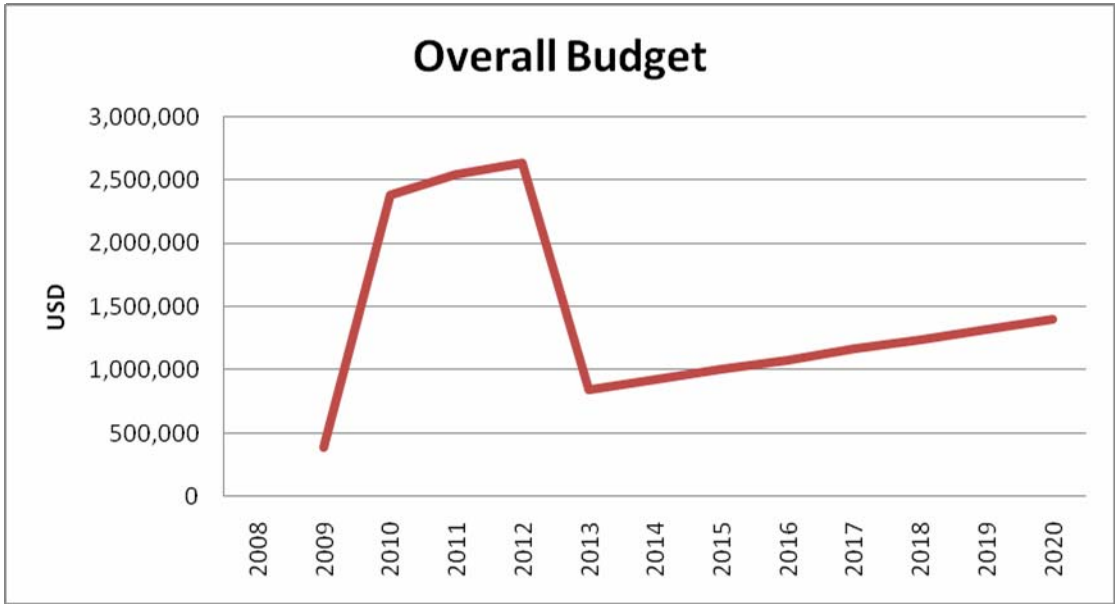
Year	Enabling environment pillar	Development pillar	Human Resources pillar	Marketing pillar	Total
2008					
2009	130,000	50,000	25,000	180,000	385,000
2010	330,000	1,820,000	80,000	310,000	2,540,000
2011	330,000	1,750,000	80,000	440,000	2,600,000
2012	330,000	1,750,000	80,000	530,000	2,690,000
2013	330,000	50,000	80,000	430,000	890,000
2014	330,000	50,000	80,000	515,000	975,000
2015	330,000	50,000	80,000	590,000	1,050,000
2016	330,000	50,000	80,000	670,000	1,130,000
2017	330,000	50,000	80,000	755,000	1,215,000
2018	330,000	50,000	80,000	830,000	1,290,000
2019	330,000	50,000	80,000	910,000	1,370,000
2020	330,000	50,000	80,000	995,000	1,455,000
Total	**3,760,000**	**5,770,000**	**905,000**	**7,155,000**	**17,590,000**

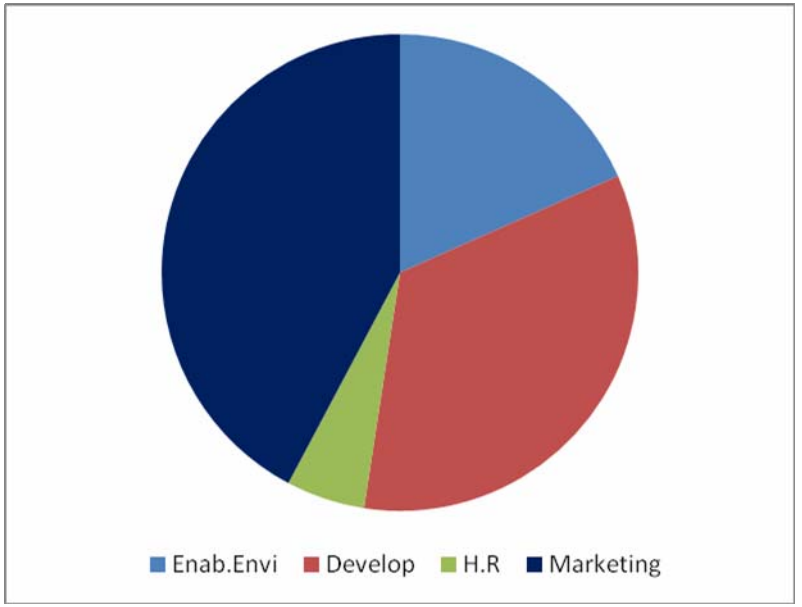
Total budget (including 15% contingency) = USD **20,228,500**

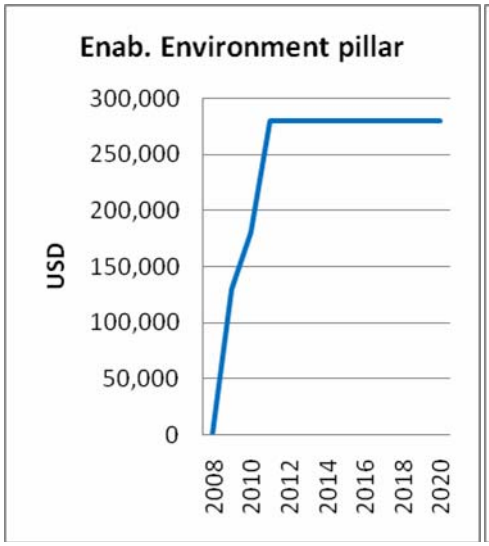
Comments:

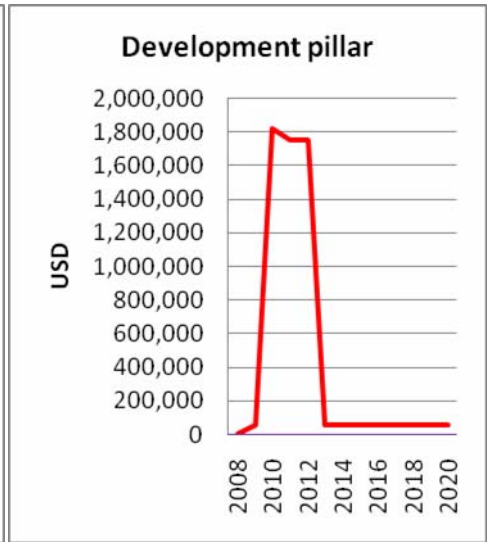
There were some items which were difficult to estimate cost as in:

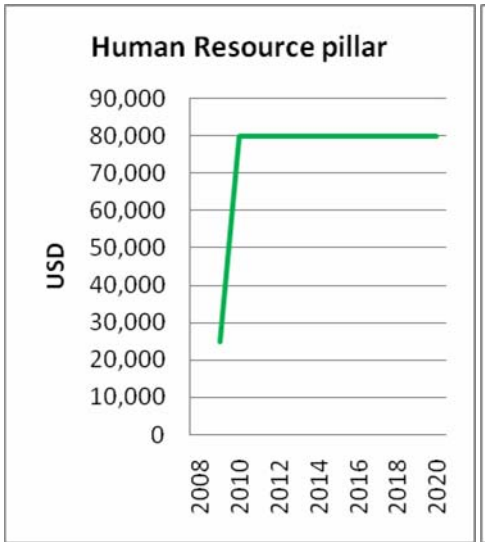
- D7 – Improvement of hotel services
- D8 – New hospital developed
- D9 – New clinics developed
- T1 – Development of ties with educational institutions
- T4 – Improved nurse training
- M4 – Partnership with international service providers

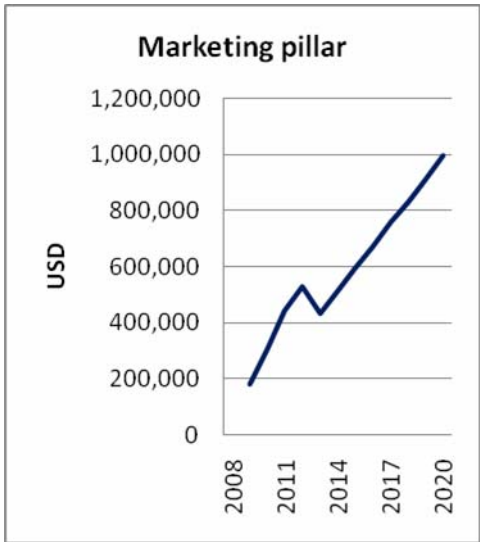

Overall Budget
USD
3,000,000
2,500,000
2,000,000
1,500,000
1,000,000
500,000
0
2008
2009
2010
2011
2012
2013
2014
2015
2016
2017
2018
2019
2020


Enab.Envi
Develop
H.R
Marketing


Enab. Environment pillar
USD
300,000
250,000
200,000
150,000
100,000
50,000
0
2008
2010
2012
2014
2016
2018
2020


Development pillar
USD
2,000,000
1,800,000
1,600,000
1,400,000
1,200,000
1,000,000
800,000
600,000
400,000
200,000
0
2008
2010
2012
2014
2016
2018
2020


Human Resource pillar
USD
90,000
80,000
70,000
60,000
50,000
40,000
30,000
20,000
10,000
0
2008
2010
2012
2014
2016
2018
2020


Marketing pillar
USD
1,200,000
1,000,000
800,000
600,000
400,000
200,000
0
2008
2011
2014
2017
2020

9.7 Role of governmental bodies

9.7.1 Inter-ministerial sub-committee

The policies proposed to this committee regarding medical tourism are as follows:

- To recognise the potential of medical tourism as an export industry for Egypt based on the country's long tradition of medicine and the high respect with which Egyptian medicine and medical practitioners are placed.
- To support the development of centres of excellence in medical tourism, in partnership with the Ministry of Health and Population and the Ministry of Tourism.
- To direct its agencies to support potential export- earning credible medical tourism projects, where international health accreditation standards can be met.
- To direct its agencies to highlight new product opportunities for the medical tourism sector and commission studies into potential new products and enterprises in order to develop innovative and internationally competitive products and broaden the country's tourism product offer.
- To direct its agencies to support enterprise within the sector, including training and export development support programmes.
- In the light of both high development costs and potential benefits to both national health and the economy, the Ministerial sub-committee should work to facilitate more generous tax measures for medical tourism, including potential tax breaks for investors, reduced thresholds, to make Egypt's medical tourism product more competitive.

9.7.2 Industrial Modernization Centre role

IMC has a critical role to play as the prime mover of this strategy. As an autonomous organisation it has the flexibility under MTI to react rapidly to the challenges and opportunities of this strategy.

Through its Export Trade Development Programme IMC it should assist the medical tourism sector through the following initiatives:

- Export strategic business plans

  Assist hospitals seeking to develop medical tourism with company assessment, export diagnoses and strategic planning. Particular attention should be paid to assisting international marketing planning.

- Market research

  Market research is needed prior to participation in international trade fairs aiming at ensuring added value to participating companies. Assistance should be given to assisting private sector participation in international specialised trade fairs, study tours, outbound & inward buyers' trade missions, and the purchase of specialist consultancy services (international hospital marketing).

- Image Building

  This is needed at both sector level and medical tourism business level (hospitals and clinics)

- General marketing

  Working with the Federation of Medical Tourism Providers and ETA to produce brochures, CDs and (critically) the Egypt Medical Tourism Website, in addition to assisting printed advertising

- Training

  IMC should fully integrate medical tourism hospitals into its national and executive training programmes.

- Access to finance

  IMC should also assist hospitals and clinics to access finance for medical tourism development purposes (only) through such initiatives as the following:

  - Equipment Purchasing Fund;
  - Credit Guarantee Fund (C.G.C);
  - Export Guarantee Fund;
  - Private Equity fund;
  - Coral fund; and
  - The Funding For Development Programme.

9.7.3 Ministry of Health and Population

MoHP as the primary agency with responsibility for health service delivery has a major role to play in the delivery of this strategy. It needs to undertake the following activities as outlined in the action plan:

- adopt the strategy and vision;
- focus on improving the standards and service of hospitals;
- establish a credible national accreditation system (plans for this are already underway);

- encourage more hospitals to achieve international accreditation;
- lobby for generous tax incentives for major investors in hospitals and clinics ($1million plus projects);
- encourage and provide training programmes; and
- establish and operate medical (tourism) database system

9.7.4 Ministry of Tourism

MoT also has a key role to play. It should undertake the following activities:

- Encourage the TDA to continue to allocate suitable lands for medical tourism projects.
- Encourage the ETA to deliver its Medical and Wellness Tourism strategy, with a particular focus on marketing accredited hospitals and clinics as these come on stream.
- ETA should advise the Federation of Medical Tourism Providers and individual accredited hospitals on marketing opportunities.
- ETA should support the participation of accredited hospitals in international tourism promotions.
- Provide market research and visitor satisfaction data to hospitals and MoHP
- Encourage the private sector to develop specialist ground handling services for medical tourism.
- Encourage Ministry of Air & Egypt Air to develop services for medical tourism

9.7.5 Ministry of Investment

The Ministry of Investment, through GAFI, has a critical role to play in attracting inward investment to Egypt for medical tourism. Without significant inward investment Egypt is unlikely to meet international competitive standards for medical tourism.

Additionally the Ministry must put together special financial packages and agree fiscal incentives to attract inward investment in this product.

9.7.6 Ministry of Interior Affairs

The Ministry of Interior Affairs is responsible for issuing visas to foreigners.

There are two types of Egyptian visa:

Tourist Visa: is usually valid for a period not exceeding three months and granted on either single or multiple entry basis.

Entry Visa: is required for any foreigner arriving in Egypt for purposes other than tourism e.g. business, work, study…etc. The possession of a valid entry visa is needed to complete the residence procedure in Egypt.

Both visas can be obtained with the following regulations:
The visa is valid only for travel within three months from the date of issue and is valid only for one month stay in Egypt, beginning of the day of arrival. If there is a reason to extend stay, this can be done by the Ministry of Interior Affairs after declaring the reasons for that and the Ministry's acceptance of these reasons.

The Ministry in coordination with the Ministry of Foreign Affairs, as mentioned previously, will have to study the possibility of establishing a medical tourism visa valid for six to twelve months with multiple entries. This visa should be a collective visa for the patient and accompanied persons.

Annexes

Annex A: Terms of reference

Annex B: Consultation undertaken

Annex C: Medical wellness and wellness tourism

Annex D: Global sector review

Annex E: Assessment of the sector in Egypt

Annex F: Benchmarking Matrix

Annex G: Process Benchmarking

Annex H: The example of India

Annex A: Terms of reference

ANNEX I: TERMS OF REFERENCE

1. Background information

1.1 Beneficiary country

Arab Republic of Egypt

1.2 Contracting authority

Industrial Modernisation Centre (IMC)

1.3 Relevant country background

Following the Barcelona Declaration Egypt initialled a partnership agreement with the European Union in 2001 covering co-operation in economic, social, and political issues and stipulating the progressive establishment, during a transition period of twelve years, of a free trade area (FTA) between Egypt and EU member states. The agreement entered into force in June 2004. The agreement will permit Egypt to join the Euro-Mediterranean free-trade zone.

To foster a more efficient and transparent business environment, several legislative adjustments have been made in areas such as sales tax, investment promotion, securities, insurance, financial leasing, mortgage, money laundering, export promotion, and intellectual property rights. The majority of these focused on the legal changes necessary to accede and comply with the WTO and enhance the readiness of the economy for globalisation.

According to the Ministry of Planning, 2003/2004 GDP has recorded a growth rate of 4.3 percent. Exports increased by a rate of 23.5 percent. It is also worth mentioning that Egypt's international trade percentage to GDP reached 57.9 percent from 45.8 percent in the previous year, where the share of exports in GDP increased from 21.6 percent to 28.1 percent.[1]

In this process of integration into the world economy Egypt can not simply respond passively to increased competitive pressures, but has to define and implement winning strategies for its industry. Achievements of Egyptian industry to date, though considerable, are not enough as the economy compares unfavourably against that of the EU. However, it does offer advantages in terms of the skills of its human resource, natural resources, geographic location, and political and social stability.

The Industrial Modernisation Programme (IMP) is an initiative of the Government of Egypt (GoE) to help develop international competitiveness in the industrial sector so that it can benefit from the new opportunities that will follow the liberalisation of trade and exposure to global markets. It is the first phase of the Governments long-term industrial development strategy. To achieve this aim of modernising Egyptian industry, the Industrial Modernisation Centre (IMC), an autonomous, private sector orientated organisation, was created under Presidential Decree 477 in the year 2000 to implement the programme.

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[1] Ministry of Planning. 2005. The Follow-up Report of the Economic Development Plan for the Third Quarter (Jan-March), 2004/2005

1.4 Relevant sector background

'Medical tourism' or medical travel is the act of traveling to other countries to obtain medical, dental, and surgical care. The term was initially coined by travel agencies and the media as a catchall phrase to describe a rapidly growing industry where people travel to other countries to obtain medical care. Leisure aspect of traveling may be included on such a medical travel trip. It includes medical services (inclusive of elective procedure and complex specialised surgeries) like knee/hip replacement, heart surgery, dental procedures and different cosmetic surgeries2.

A combination of many factors has led to the recent increase in popularity of medical travel: the high cost of healthcare in industrialized nations, the ease and affordability of international travel, and the improvement of technology and standards of care in many countries of the world3.

Medical tourists can come from anywhere in the world, but generally the bulk will come from Europe and the United Kingdom, the Middle East and Japan. This is because of their large populations, comparatively high wealth, the high expense of healthcare, lack of healthcare options locally, and increasingly high expectations of their populations with respect to healthcare. Of the above, Europe and the UK is probably the most promising source of medical tourists for the future, as it is large (with more than twice the population of the USA), while Europeans are much more likely to travel overseas than Americans4.

Medical tourism is a rapidly growing industry in many countries. India is becoming a «global health destination». Encouraged by the government, India is promoting the «high-tech healing» of its private healthcare sector as a tourist attraction. More than 100,000 foreigners visited India for medical treatment in the year 2005. India estimates that medical tourism could bring as much as $2.2 billion per year by 2012. Besides India, popular international medical travel destinations include Singapore and Thailand. About 374,000 visitors came to Singapore purely to seek healthcare in 2005, half of them from the Middle East. South Africa promotes an attractive «medical safari» catchphrase: Come to see African wildlife and get a facelift in the same trip. Other countries include Tunisia which is attracting Italians, British and French. The list of countries currently promoting medical tourism include many others such as Argentina, Bolivia, Brazil, Cuba, Costa Rica, Jamaica, Jordan, Hungary, Latvia, Lithuania, Malaysia and the Philippine5.

Egypt is considered one of the richest environments of therapeutic value by virtue of its natural resources and dry warm weather; it is home to several unique sulphurous and mineral springs: in addition to the miraculously healing ability of the black sand found in the city of Safga6.

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[2] http://en.wikipedia.org/wiki/Medical_tourism
[3] http://en.wikipedia.org/wiki/Medical_tourism
[4] http://en.wikipedia.org/wiki/Medical_tourism
[5] http://www.doaj.org/doaj?func=abstract&id=210445&q1=Hip&f1=all&b1=and&q2=&f2=all&recNo=30
[6] http://www.sis.gov.eg/En/Tourism/Egyptall/Therapeutictourism/060210000000000001.htm

Egypt has gained a valuable position on the tourist map; not only due to the fact that it contains a vast amount of historical monuments, but also because of the variety of options it presents to tourists7.

Egypt can become a hot spot for plastic surgeries, especially for people from developed countries like US and UK. The reason for the growing popularity is the abnormally low cost and tourism locations in Egypt. A thigh liposuction is done for a mere $260 in Egypt, which can cost up to $2,000 in US and $3,000 in UK. The prices for plastic surgery in Egypt are 60-70% lower, for corresponding treatment in US or UK. As these surgeries are not covered by insurance, many patients are moving out of their homeland to cut down the costs8.

There are safety concerns to note. Few of the clinics are employing medical students or general practitioners to cut down the costs. These fake clinics are mushrooming in and around Cairo are putting the people undergoing surgeries at risk9.

Moreover, Egyptian medical tourism does carry risks that local medical procedures do not. Should complications arise, patients might not be covered by insurance or be able to seek adequate compensation via malpractice lawsuits. Also, Egypt has different infectious diseases to Europe and North America, and different prevalence of the same diseases compared to nations such as the USA, Canada and the UK. Exposure to foreign diseases without having built up natural immunity can be a hazard for weakened individuals10.

2. Description of the assignment

2.1 Beneficiaries

The direct beneficiaries of the assignment are hospitals, medical labs, radiology labs medical insurance companies, medical units, health clubs, Spas, limited care medical units and other entities operating in the sector. Furthermore, the assignment will provide indirect benefits to the whole industrial community in Egypt and will support the governmental policy making process.

2.2 General objective

In continuation of its efforts towards complementing Egypt's Industrial Development Strategy for Egypt, the Studies and Policy Support Unit (SPSU) is launching a series of sector development strategies. This study is considered to be one of the sectoral studies that aims primarily to undertake a detailed comparison of the performance of the sector in Egypt with the world and benchmarked against best practice countries around the globe. The benchmarking exercise is meant to diagnose the sector problems in a detailed and systematic way so as to smoothly lead to a practical and detailed local development strategy for the sector, a global positioning strategy for the sector and thereby put forward a comprehensive action plan that can be adopted by stakeholders.

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[7] http://www.sis.gov.eg/En/Tourism/Egyptall/Therapeutictourism/060210000000000001.htm
[8] http://www.plasmetic.com/news/medical-tourism/concerns-over-low-cost-plastic-surgeries-in-egypt.html
[9] http://www.plasmetic.com/news/medical-tourism/concerns-over-low-cost-plastic-surgeries-in-egypt.html
[10] http://en.wikipedia.org/wiki/Medical_tourism

2.3 Requested Services

In order to realise these objectives, the consultant is responsible for eight main tasks:

1- ***A global review of the sector*** which includes, but is not limited to: worldwide trends, technology and trade, worldwide regulations (legal and technical) governing the sector, best practice and identification of world leaders.

2- ***A local assessment of the present performance of the sector***, key players, types of medical tourism, kind of treatment, targeted regions, technology, cost structure, prices and quality of tourism packages for problem diagnosis and positioning whereby the sector physical, institutional structure, business environment, and level of nominal & effective protection are revealed and obstacles to the sector's development are to be analysed.

3- Based on (1) & (2) reach ***general positioning for the entire value chain***.

4- ***Choice of targeted countries*** based on criteria developed by the consultant and approved by the steering committee responsible for the overall management of the project.

5- ***Detailed benchmarking process***, the benchmarking is to include the following countries:

   a. Arab Countries: Jordan, Tunisia, Lebanon
   b. European Countries: Germany, Spain, Switzerland, Czech Republic
   c. Others: India, Indonesia, Singapore

6- Based on tasks (1) through (5) above, suggestions of one or more strategies for development of the sector in general in relation with the targeted markets. ***Strengths and weaknesses of each scenario are to be delivered.***

7- ***Action plan*** for the selected scenario following the approval of the development strategy by the committee that will be established for the overall management of project.

2.3.1 Specific activities

In order to perform the detailed list of specific activities listed below, **the consultant is required to start where others finished** by reviewing previous and recent studies conducted on the sector and collect sector-specific data, documents and information needed for the assessment of the sector in an international context. The consultant will also have to design and undertake a sector survey, covering a sample of private entities in the sector, including foreign- owned entities and representing all sub-sectors in order to provide benchmarking information. A summary of the survey is to be provided to IMC.

Following this process, the consultant shall undertake the following tasks, which at the same time, will form the minimum requirements of the final format of the study, these tasks are as follows:

1. Analysis of the global sector performance:

- A Global overview of the sector including sector capacity, sector growth and emergence of new markets; supply and demand; and sector concentration in particular geographic.
- Worldwide sourcing strategies within the global sector value chain
- A global analysis of the sector including an analysis of the world's exports and imports of the service using the UNCTAD's International Trade Centre (ITC) COMTRADE statistics & trade map analysis methodology with the objective of identifying Champions, Achievers in Adversity, Underachievers, and losers.
- Identification of world leaders and related distribution channels as well as the successful models in the Mediterranean countries, and specific identification of Egypt's main competitors.
- Identification to the international quality standards required for promoting the sector.
- Requirements and constraints affecting the selection of an investment location in the sector.
- Forecast future sector growth for at least 5 years and development of high potential priority task list indicating a five-year projection of the highest potential targeted markets.

2. Assessment of the sector in Egypt:

- A brief historical background on the sector (should not exceed 3 pages of the whole study);
- Profile of the sector performance in 2007 as well as in the previous 3-5 years including basic facts & key economic determinants that include but are not limited to:
  - ⇒ Market size
  - ⇒ Exports of the service and Imports of the services
  - ⇒ Quantity and value of production
  - ⇒ Contribution to value added and output
  - ⇒ Number of employees and sector contribution to employment
  - ⇒ Physical investment
  - ⇒ Governing laws and regulations
  - ⇒ Analysis and correlation of factors affecting the performance
  - ⇒ Cost structure
- Identify systems of production that should include principles, methods and

techniques used in the sector with focus on all costs included in the process.

- An analysis of the gap between the local and international standards, clarifying the obstacles that hinder reaching international quality and environmental standards.
- Defining areas of comparative and competitive advantage and success stories and examples already existing in different areas (Sharm, Safaga, Hurgada …etc)
- Identify the role of different Egyptian ministries involved: Ex. Ministry of Tourism, Ministry of Health and Population and any other Egyptian ministry that should be involved.
- Investigate the impact of the current legal and regulatory framework. This should include those related to accreditation and certification, in addition to those affecting the environment for investment and business on the sector, and identify obstacles to growth.
- Examine the current impact of globalisation & trade liberalisation on the sector in Egypt:
  - ⇒ Examine the coherence of the sector promotion strategy, if any, with government policies
  - ⇒ Assess the potential effect of key trade agreements on the development of the sector, including their impact on the attraction of FDI.
  - ⇒ An examination of the coherence of the sector's FDI strategy with trade policy
- Based on the assessment above, construct a matrix of the sector in Egypt identifying different types of Medical Tourism, kind of treatment, key players and targeted regions. The consultant should explain the criteria chosen for selecting the key players.
- Based on the analysis of the global sector and assessment of the sector in Egypt reach general positioning for the entire value chain in Egypt.

3. Comparison & benchmarking with best practice countries for diagnosis and new positioning:

Comparison & benchmarking is to be done with at least 10 countries representing different category markets and Egypt's direct competitors in the domain. The service provider should present an explanation of the methodology of country comparison & country benchmarking for all product groups (technique/ assumptions/ reservations, country selection).

Benchmarking of all product groups in a table format across, at least 10 countries, to identify major competitiveness factors. The following factors at least should be benchmarked:

- Production & trade performance – Production (maximum capacity versus actual), Exports of the service (Quantity, Markets & Value), Imports of the service (Quantity, Markets & Value), Price of final product and cost structure.
- Technology Assessment – Technology gap.
- Industrial infrastructure of the sector - Subcontracting, distribution, component suppliers, business services, sector clusters.
- Labor Market – availability of general, skilled/technical, managerial labor; labor cost of each category, productivity, relations, regulations; availability of technical training for the labor involved in the sector.
- Infrastructure – reliable power, fuel, & process water; telecommunications; cost of various utilities, cost of telecom; road quality; port, rail & air cargo service and costs, airport facilities…etc.
- Policy and institutional support: investment grants & incentives; taxes; access to local finance; institutional support, national insurance systems…etc.

4. Diagnosis

SWOT Analysis of the sector in Egypt

The outcome of the SWOT analysis should spell out, in detail, the following:

- ✓ Egypt's strengths, weaknesses, opportunities, and threats regarding the sector.
- ✓ Key weaknesses, obstacles, & competitiveness gap in the product groups chosen for focused analysis in Egypt that need to be addressed like regulatory impediments that need to be eliminated; labour skills to be improved; transport delays to be overcome, etc.
- ✓ Specific sector or economic dynamics underlying opportunities and threats and the implications of these factors.

5. Sector Development Strategy

1. Identify **competitive advantages** enjoyed by the sector in Egypt.
2. Define a **new global strategic positioning of each product group** analysed in order to move each product group from the lowest to the highest point, i.e. from underachievers to champions. This exercise should define what needs to be done in order to achieve this new positioning, i.e. market access, cost structure, tariff and non-tariff protection, the sector global value chain, technology, human resources, etc.
3. Identification of the **highest potential products** with each targeted market to develop a "product priority list".
4. **Recommendations for overcoming obstacles** identified in the SWOT analysis.
5. Identify **investment opportunities** and specific niches where prospect of investment is most likely by determining the gaps in the sector and product groups

and recommendations of the amount and kind of investment required to fill those gaps.

6. Formulate recommendations for the promotion of the medical equipment sector and the **attraction of foreign investors** and international manufacturing companies to subcontract and/ or undertake production activities in Egypt and specify the benefits that Egypt offers to investors.

7. Formulate a clear development strategy for the sector in general, with specific focus on the product- groups identified all in relation with the targeted markets. This should include 3 scenarios including that of remaining with the present situation.

6. Action Plan

Upon approval of the development strategy by project committee,
Formulate a specific & concise action plan for implementing the strategy based on the identified issues and obstacles, that should include at least the following:

1. A detailed description of the **Specific Action** (activity, programme…etc).
2. Objectives of the action and its qualitative and quantitative targets.
3. Measurable key performance Indicators related to evaluate the outcome of each specific action.
4. A clear cost breakdown for the needed budget for the implementation of each specific action this should be projected for all actions until the qualitative and quantitative targets are reached.
5. An identification of the possible source of finance for each budget allocated for each activity, that should also include FDI when relevant.
6. A breakdown of each specific action into practical implementation steps.
7. Identify key parties and institutions responsible for each of the implementation steps within each specific action.
8. Formulate a time/activity chart for the implementation steps of each specific action. This should include a short, medium and long term projection in months/years for the time frame required for implementation.
9. Formulate a qualitative and quantitative projection of the impact of each specific action (Exports, FDI, Sales, Employment…etc) this should also include social benefits.
10. Summary of action plan. The summary should illustrate objective of the action, target, output, estimated cost, timeline and the entity responsible for execution.
11. Preparation of a summary for each concerned party or institution that should include all activities it should undertake towards the implementation of the action plan. This should include the following details: the action or activity, target, output, estimated cost, and a timeline for implementation.
12. Preparation of a policy paper to be presented to the Ministry of Industry and Trade that identifies; strategic directions, key issues, proposed strategy, identified potential products, action plan summery, required activities to be carried by the MTI different departments and centres associated with expected impact (qualitative and quantitative).

NB: The service provider should be fully aware that the action plan with all its above components is to be practical and subject to immediate easy implementation by all

concerned parties.

2.3.2 Deliverables:

Presentation of findings of each stage to the Steering Committee as per the deliverables timetable in section 5 of the TOR.

- Presentation of the findings, the proposed strategy, objectives, and action plan in a seminar to stakeholders using PowerPoint **for the audience**. Upon IMC request the service provider should be ready to present it in **English and/or Arabic.**
- Final paper should incorporate all the comments of the SPSU and stakeholders during the seminar.
- The final report is to be presented in 3 hard copies and a soft copy, **in both languages English and Arabic, where the translation of the report from English to Arabic is the duty of the consultant.**

2.4 Project management & Contractor's tasks & responsibilities

- The assignment will operate under the strategic direction of the IMC. All reports will be considered final upon receipt of written approval from the SPSU.
- The SPSU component of the IMC will monitor and evaluate the performance of the contractor and key experts.
- Any changes in the TOR may only be made subject to mutual written agreement between the IMC and the Contractor.
- Assistance to the Contractor or key experts by the SPSU component could be in the form of supplying the literature available to the IMC on the sector and arranging meetings with the Steering Committee.
- A progress report should be provided to the IMC within maximum 10 days after the end of each month.
- A kick-off meeting will be held during which the IMC will provide further elaborations and the contractor will present a project overview detailing: 1) Activities to be performed with starting & ending dates; 2) Man-days allocated to each activity; 3) The contractor's experts performing each activity; and 4) Deliverables and their time-plan.
- A Steering Committee will be established to be the main vehicle for the overall management of the assignment.
- The Steering Committee shall be involved with IMC and the consultant in the choice of all points of discussion and the development strategy prior to working on the plan of action.
- Information is to be referenced and tabulated to the maximum extent possible as well as illustrated in flowcharts and diagrams for easy assessment of work. A diagrammatic representation of the structure of the sector is to be presented using

sector.

The Team Leader should have a wide and detailed knowledge of working closely with governments and donor-funded programs in newly industrialised as well as developed countries. The senior local expert will have strong knowledge of the sector in Egypt while the two international experts should have a detailed knowledge of the sector globally and highly experienced in best practices benchmarking mechanisms. The working language of the assignment is English.

The contractor's proposal should provide a presentation on the key experts' understanding of the assignment as per the TOR. In-depth knowledge of global, regional, and domestic sector is critical to the success of this assignment. The CVs of qualified experts should clearly demonstrate sector-related experience and expertise, and other related experience and expertise as per the requirements of this TOR, in addition to the exact level of intervention in each previous assignment.

Key experts

The nature of the project and the need for sustainable outputs, suggest four experts. From whom two with international experience.

The profile of experts for this contract is as follows:

International Expert (TEAM LEADER) – Analysis of Global Sector and management of the assignment

Qualifications and skills:

- University degree in a economics or business, or at least 7 years of experience in Medical Tourism sector.
- Masters degree or PhD is a plus

General professional experience:

- Professional experience in conducting development studies internationally.

Specific professional experience

- Professional experience in international competitiveness issues in the Medical Tourism sector.
- At least 5 years of previous experience in conducting sector-specific benchmarking globally and regionally, especially for Medical Tourism sector.
- Professional experience in preparing fund raising documents.

International Expert – Global & Regional sector Benchmarking

Qualifications and skills:

- University degree in business or economics or at least 5 years of experience in Medical Tourism sector.
- A good communication skills
- A very good command of English

General professional experience:

- A background in management and strategic planning
- At least 5 years of experience in Medical Tourism sector
- Experience in conducting feasibility studies
- Professional experience in preparing fund raising documents

Specific professional experience

- A strong knowledge of the Medical Tourism sector in Egypt
- Knowledge of the Egyptian institutional framework, particularly in relation to the Medical Tourism sector

Senior Local Expert – Analysis of the sector in Egypt

Qualifications and skills:

- University degree in a relevant discipline.
- A good communication skills
- A very good command of English
- Proficient use of MS Office Programmes.
- Possesses excellent reporting skills.
- Has the initiative, enthusiasm and the ability to think pro-actively and strategically.

General professional experience:

- At least 5 years of professional experience.
- Experience in conducting company and sector surveys.
- Conducted a similar assignment during the past five years.

Specific professional experience

- Practical experience & strong knowledge of the sector and product groups in Egypt..
- Deep knowledge of major activities/functions within the sector/company.

Junior Local Expert – Company Survey

Qualifications and skills:

- University degree in Business Administration or Economics.
- At least 3 years of professional experience.
- Fluent in English, both written and spoken.
- Proficient use of MS Office programmes.

General professional experience:

- Experience in conducting company and sector surveys.
- Conducted and/or involved in conducting at least one similar survey during the past five years

Specific professional experience

- Practical experience & strong knowledge of the sector and product groups in Egypt.
- Knowledge of major activities/functions within the sector/company.

Note that civil servants and other staff of the public administration of the

beneficiary country cannot be recruited as experts.

4. Location and Duration

4.1 Project location: The assignment location will be in Cairo and taking into consideration that the team of experts shall present the findings of each stage to the steering committee as per the deliverables timetable.

4.2 Project duration: The duration of the project should not exceed 16 weeks from the date of commencement. A Draft final report should be presented not later than 7 days before the end of the 16 weeks period to leave time for modifications before the end of the assignment and the final report.

4.3 Accommodations, Transportation and support facilities:

Accommodation, transportation and any other support facilities required for the assignment are the responsibility of the Contractor. The cost thereof must be included in the fees and expenses for rendering the agreed services.

1. Reporting

5.1 Reporting requirements:

A) Upon starting the assignment, the following will be submitted to the IMC according to a format to be agreed upon. All reports mentioned hereunder should be in English and be delivered in both, electronic format and 3 hard copies.

B) Monthly progress reports should be forwarded to the project steering Committee, or whoever is authorised by the Committee, with all developments regarding the assignment specifying the tasks achieved during the previous month and the proposed activities for the upcoming month within 10 days after the end of every month, according to a format to be agreed upon.

C) A draft final report covering, at least, all the points mentioned under section 2.3.1 'Specific Activities' of this TOR, which takes into account all points mentioned under section 2.3 of this TOR, should be forwarded to the project steering Committee or whoever is authorised by the Committee within 7 days before the end of the 16 week-period of the assignment according to the format spelled in this TOR under section 2.3.1 'Specific Activities'.

D) A power point presentation of the draft final report is to be done to stakeholders by the team leader. The final paper is to include all comments by stakeholders, the assignment is not considered complete until the final paper is submitted and approved by the IMC.

E) The Contractor shall inform the SPSU Manager or whoever is authorised by the IMC as soon as the following types of conditions become known:

- Problems, delays or conditions that will affect the ability to attain objectives, prevent the meeting of time schedules and goals or obstacles to the attainment of work within the estimated task period.
- Favourable developments or events that enable time schedules to be met sooner than anticipated or more work to be produced than originally projected.

5.2 Submission & Approval of Reports:
All reports will be delivered to the SPSU or whoever is authorised by the SPSU manager within the period specified for each report as per reporting requirements in section 5 of this TOR. This is in addition to the final report delivered at the end of the assignment. These reports will be delivered to in both electronic format & 3 hard copies. **All reports should be presented in both languages Arabic and English, where the translation of reports is the duty of the service provider**.

5.3 Confidentiality & Property Rights:
Throughout the duration of the assignment and following its completion, the Contractor and all experts, shall maintain the strictest confidentiality vis-à-vis third parties in respect of all politically sensitive information gained throughout the course of the assignment. Reports, including draft reports, shall become the property of the IMC.

6. Monitoring
The SPSU Manager, or whoever is authorised by the IMC, will monitor the contents of the reports as per the scope of work specified and agreed upon with the contractor.

Milestones and deliverables will be agreed upon with the service provider during the kick-off meeting of the assignment.

Annex B: Consultation undertaken

Date	Place	Contact person	Title
5th of March	ITB – Berlin	Mr. Macello Risi	Media Officer World Tourism Organisation
5th of March	ITB – Berlin	Ms. Vanessa Nidermuller	Sales Executive Centro Vital SPA - Berlin
6th of March	ITB – Berlin	Ms. Aura Branzas	Director of Tourism S.C Turism Felix S.A – Romania
6th of March	ITB – Berlin	Mr. Csilla Mezosi	Agent for Wellness Tourism Cure & Wellness - Hungary Member of the Federation of Wellness Establishments
6th of March	ITB – Berlin	Mr. Joachim Lieber	Secretary General European Spa Association
7th of March	ITB – Berlin	Mr. Host G. Knappe	Assistant - Department of Training Wellness Hotels
7th of March	ITB – Berlin	Mr. V.G Jathavedan Namboodiripad	Executive Director Nagarjuna Ayurvedic Group
12th of March	AIT Consulting Office	Ms. Yioula Papkyriakou	Tourism Consultant Cyprus
18th of March	Wadi El Nil Hospital	Dr. Ahmed Osman Dr. Mohamed Saad Mr. Nabil Helmy	Head of Medical Department Affairs Deputy Hospital General Manager PR Manager
19th of March	International Medical Centre	Dr. Emad El Kady Dr. Ahmad Farouk Mira Dr. Sherif Ahmad	Head of Radiology Head of International Public Relation Marketing and Business development Manager
23rd of March	Gamma Knife Centre	Mr. Moustafa El-Asmar	CEO
24th of March	El Salam Hospital Mohandseen	Dr. Emad Shenouda	Head of Radiology Department Hospital Board Member
25th of March	MOH	Dr. Abdelkarim Kamel	Minister Assistant for Curative and Medical care
25th of March	Egyptian Tourism Authority	Mr. Amr El Azaby Mr. Ahmed shoukry	Chairman Head of Domestic Tourism Section
25th of March	Ministry of International Cooperation	Ambassador Abdel Rahman moussa	Consultant

26th of March	Egyptian Medical Holiday Dialysis	Mr. Amr Safaan Dr. Mohamed Salama	Marketing Manager Senior Project Manager
26th of March	International Eye Hospital	Dr. Bishr Qenawy Ms. Amal Hassan	Chairman Head of Chamber of Medical Health Care Director Chamber of Medical Health Care
27th of March	Cancer Hospital for Kids	Dr. Sherif Abo El Naga	General Manager
29th of March	EL Sheikh Zayed Hospital	Dr. Mohamed Hafez	General Manager
31st of March	Dar El Fouad	Dr. Mohamed El Said	Marketing Department
3rd of April	RAMW for Tourism & Hotels	Dr. Ahmed El Sharkawy	Chairman
15th of April	Al Nil Badrawi Hospital – Maadi	Mr. Khaled Gamal Mohamed	Marketing Manager
16th of April	El Anglo American Hospital	Dr. Nader Halim Geruis	Consultant Surgeon Board Member
16th of April	AIT Consulting Office	Professor Alaa Meshref	Urologist
17th of April	Al Salamaa hospital in Alexandria	Dr. Khamees Mahmoud Abdou	Marketing Manager
17th of April	International Cardiac Centre	Dr. Ehab El Rouby	Marketing Manager
17th of April	Alexandria International Hospital	Mr. Mohamed M Hamada	Finance consulting
17th of April	German Hospital	Mr. Walaa Adel	Marketing Manager
21st of April	International Eye Hospital	Dr. Mohamed El said	General Manager
21st of April	Thomas Cook	Mr. Khaleel Malaab	Sales Support Manager
22nd of April	British Airways	Mrs. Salwa Alfons Hana	Customer Service
23rd of April	Nursing Syndicate	Ms. Nazli Kabeel	Head of Nursing Syndicate
4th of May	Port Ghaleb Resort Head Office	Mr. Ahmed El Khadem	Chairman
5th of May	KFW	Mr. Amr abou Elazm	Senior programme officer Socio Economic Development and Private Sector
6th of May	Shalaan Medical Centre	Mr. Ahmed El Tobgy	Financial Manager

2nd of June	Ministry of Health and Population	Dr. Nagwa El Husseiny Dr. Amal farag Dr. Mahi Al Tehewy	Consultant to the Minister Healthcare Quality Hospitals Quality Specialist Director of Healthcare Quality Unit
3rd of June	Al Salam International Hospital	Dr. Harrish Pillai	Chief Executive Officer
4th of June	Dar Al Fouad Hospital	Dr. Hisham El Kholy	General Manager
5th of June	Nasr institute	Dr. Bahaa Abo zaid Dr.Mohamed Ali Fathi Mr. Essam Bayoumi	General manager Head of Medical tourism department Financial Manager
5th of June	Gamma Knife Centre	Eng. Amr M. Refaat	General Manager

Annex C: Medical wellness and wellness tourism

C.1 Product appraisal

An extensive product audit of medical wellness and wellness tourism facilities has been undertaken. The audit involved site visits to numerous existing and potential sites in all regions of Egypt. The product audit findings are outlined in detailed at the end of Annex C and are summarised below.

C.1.1 Current medical wellness product supply

Medical wellness supply in Egypt is at present is very limited. There are only a handful of places offering such products and even less can be considered as serious when benchmarked against international standards. A notable exception is the Marine de Cascade Hotel and Thalassotheraphy Spa at Soma Bay. Medical wellness facilities at Safaga were developed ahead of their time but now need a complete overhaul to meet the needs of today's up-market clients. To a very limited extent hotels in Aswan also offer medical wellness product. The hot springs and wells in the New Valley do not have a serious attraction at present for international medical wellness seekers, at best they can be seen as an folkloric by-product, orientating on a backpacker clientele.

C.1.2 Current wellness tourism supply

At present there are several hotels and resorts as well as day spas claiming to have wellness facilities. The current state of development varies with regard to quality, from excellent to very poor, from renovated to 'in dire need of renovation'. Many of the hotels are lacking an understanding of the clear differentiation between recognised wellness facilities and ubiquitous gym, leisure centre, pool or sports club (which international clients would not recognise as spa or wellness tourism facilities). There are no comprehensive data available and no organised quality control system in Egypt, possibly due to the lack of a relevant and specialised industry association. Places with wellness potential can be found virtually everywhere in Egypt (except perhaps heavily industrialised areas and the New Valley Oases). The present strategic focus has to on addressing the constraints such as the lack of a general upmarket tourism quality atmosphere in many Egyptian tourism locations, as well with challenges with regard to environmental cleanliness, smooth and swift transportation to and from the wellness hotels, and human resources weaknesses whether in transportation, taxis and buses or at control and check points at the airports. In addition a lot of emphasis must go on educating the Egyptian private sector as to the precise needs of this growing international market. The current trend in Egyptian wellness is uncontrolled and haphazard, with mushrooming of wellness facilities with low price offers, trying to sell wellness as a cheap mass product. In addition overcharging for wellness treatments in facilities clearly not matching the price quality ratio was identified. However some excellent wellness offers which are matching international standards o exist at a limited number of hotels and these would be highly competitive on the international scale if Egypt were to market itself in a focussed way as a wellness tourism destination.

C.1.3 Wellness and medical wellness support services

At present there are only very few national products with regard to the wellness and medical wellness. Examples are Nefretari Products, Zoganon and Harass. There are endless opportunities for the wellness and medical wellness manufacturing for the growing number of international clients, however products must be embedded into the right quality systems. The trust of international clients with regard to the current products offered in some of the wellness facilities is likely to be low. Support services (especially with regard to transportation, security restrictions, luggage service etc.) if not organised through a travel agency are generally poor. Here specific challenges for wellness guests exist, due to their preference for individual movement: They are often free independent travellers (FITs) and prefer to use rental cars or even chauffeur driven cars and quality taxis.

C.1.4 Investment climate

At present there appears to be a favourable investment with regard to tourism investment, although the situation with regard to regulations and permits and specific investments especially under the Tourism Development Authority (TDA) at time of the study (2007) was undergoing significant change. A one-stop-shop policy with regard to interested foreign investors is not available: A general overhaul of the investment authorities would be desirable to ensure clearly categorised beneficial financial regimes, tax breaks, inward investment incentives and special investment zones to attract specifically investors for medical tourism.

The current situation has been presented by TDA and local government investment offices to the experts implied the following:

- Private land can be bought and registered if the previous owner had registered it
- The city council will give the licence for the enterprise and will direct to coordinate further permits (e.g. military, electric companies, environmental, antiquities, etc.).
- On government land the investor selects a property, makes a feasibility study and proposes development to the authority; the authority forms a committee with members from the city council; based on the proposal the investor may be granted permission to start to operate; *later* the investor will face the committee's decision of the value of the land and it can be six month to three years before he knows what he has to pay.

This process is a serious constraint to inward investment: Investors will not risk being arbitrarily overcharged afterwards and a thorough business plan cannot be developed if the investor does not know the value or the lease value of the land he is investing in.

C.1.5 Human resource issues affecting Medical Wellness and Wellness Tourism

In **medical wellness** due to the very limited product with regard to medical wellness the human resource available (other than medical doctors) appears very low. Most of the personnel in the Thalasso and up-market spa sector is of foreign origin or trained by foreign instructors.

For **wellness tourism** there have been no specific training institutions named or identified with regard to developing wellness professionalism in Egypt. Nevertheless

some of the universities have an impressive curriculum with regard to physiotherapy, where some of those currently employed in the wellness sector (such as masseurs and therapists) are coming from.

Nevertheless all quality wellness facilities in the tourism industry have to give extra in-house or overseas-sourced training with regard to their products offered. There is a notable increase in demand with regard to need for personnel. Many therapists from the wellness sector are foreigners working on a temporary visa basis in current wellness centres.

The opinion of wellness operators with regard to the employability of graduates from the faculties of physiotherapy is mixed, some welcoming the knowledge already obtained, others preferring to train future therapists with their own methods from the scratch.

C.2 Marketing overview

C.2.1 National Tourism Marketing Strategy

Egypt has the ambitious tourism growth target of increasing visitors by one million a year to 14 million by 20126 and then to 25 million by 20207. China and India have been identified as important future source markets however no detailed National Tourism Marketing Strategy presently exists to achieve these targets. An EU-assisted twinning project has however provided capacity enhancement support to the ETA including its marketing department.

The Sixth Five Year Plan for Socio-Economic Development (MoED) indicates that the following marketing activity will be prioritised in the next five years:

- Strengthening marketing and advertising message abroad through international promotional campaigns.
- Developing a comprehensive guide plan for airlines, tour operators, travel agents, and tourist press.
- Increasing comprehensive awareness of the Egyptian product in main tourism exporting countries and targeting new markets, such as Eastern Europe, China and India.
- Organizing tourist convoys to Arab countries (Saudi Arabia, Kuwait, United Arab Emirates (UAE), Qatar, Oman, Bahrain, Jordan, Syria, Lebanon, Morocco, Tunisia, and Libya) to highlight the advantages of the Egyptian tourism product that Arab tourists search for, based on the peculiarity of the Arab market and its emotional and cultural relation with Egypt.
- Developing different promotional tools of promotion by designing new tourism site on the Internet www.egypt.travel in seven languages, providing tourist guide materials for professionals and publications, and organizing joint advertising campaigns in cooperation with foreign tour operators in order to boost sales

The Plan specifically mentions marketing non-traditional tourist products to address new segments of tourists, meeting updated needs of visitors, extending their stay duration and stimulating repeat visits, including; safari, golf, yachting, water sport, diving, fishing, and shopping tourism. Medical tourism is not specifically mentioned in the Plan, although it can be seen as a non-traditional tourist product for Egypt.

C.2.2 Special interest tourism in Egypt

In overall terms Egypt can be seen as a mass tourism destination offering high volume, large scale hotels to the mass market through mainstream tour operators. Special interest tourism is relatively undeveloped, except in the area of heritage and Egyptology where a range of tour operators can offer a specialist tourism product.

The primary activity tourism product is diving, mostly but not exclusively on the Red Sea and Sinai coasts. Adventure tourism and eco-tourism are beginning to develop, in response to market demand. This is particularly evident in 'white sand ocean' locations such as Sinai, Luxor, and west of Siwa and east of the New Valley. There are however severe security constraints at present on this product, owing to the convoy system of tourism in most desert areas and Sinai.

C.2.3 Current performance of wellness tourism products in Egypt

Medical wellness tourism numbers at present

In the area of medical wellness tourism product supply (in terms of developed tourism product capable of attracting overnight tourists) is very limited also. The main player has been the Menaville Resort at Safaga, but it would seem that this product is now primarily driven by mainstream family holidays rather than by large numbers specific medical tourists.

Some interesting new product is however developing, and Le Residence du Cascades at Suma Bay is an example of the scale and standard of medical wellness facility (in this case thalassotheraphy) that Egypt will need to compete. The various medical wellness tourism facilities identified in the product audit (Annex 2) probably involve at most 5,000 overnight visitors using medical wellness facilities. A medical wellness tourist is defined as an overnight visitor who uses medical wellness facilities.

Wellness tourism numbers at present

The main motivator for travel to Egypt is undoubtedly heritage (pharaonic, Coptic and Islamic) and sun-seeking. Many hotels claim to have wellness facilities at present and some interesting new product is emerging with new resort developments including wellness at El Alamain, Hurghada, Soma Bay, Marsa Alam and other places. We have assumed, based on the product audit, that there are presently 35,000 wellness tourists coming to Egypt at present. A wellness tourist is defined as an overnight visitor who uses wellness facilities.

C.2.4 Market potential

Medical Tourism is currently a significant growth area in world tourism. 19 million people were estimated to have made health-related trips in 200410. The majority of these trips are within Europe where ease of travel and reciprocal health insurance regimes facilitates the movement of patients. Outside of Europe, Thailand attracts at least 600,000 people a year for medical treatment, Singapore 200,000 and India currently attracts 150,000, but this figure is rapidly rising. A number of factors are stimulating growth in Medical Tourism worldwide, including the following:

- globalisation, international outsourcing and the ease of information exchange;
- increasing ease and relative declining cost of air travel;
- demographics (e.g. ageing populations in wealthy countries);

- a more health-conscious world and life-style changes

Looking to Medical Tourism in general, studies have shown that there are four key factors governing decision-making for Medical Tourism (hospitals) and Medical Wellness Tourism. These are as follows:

Price (Generally the dominant factor, especially in terms of pure cost but also in terms of added value, such as including a holiday. The major flows of medical tourism traffic are from high cost to low cost countries).

Quality (The prospect of superior quality medical services is a critical consideration).

Availability (Often treatments are not available in the patient's home country, often due to lack of facilities but also sometimes because of ethical issues, such as in the area of reproductive health).

Timeliness (In many countries with good quality health services there may be long waiting lists, and patients are often willing to travel to obtain quicker treatment).

For general Wellness Tourism (spas and luxury) however, different decision-making factors apply. This market is much-less price conscious, and the attractiveness of the destination in question plays a much stronger role than purely the treatment. The decision-making factors for Wellness Tourism may be summarised as follows:

Quality (high standards and excellent service are very important).

Ease of access (the wellness customer values his or her time and wishes to get to the centre with the minimum of fuss).

Location (attractive surroundings with quality things to do are essential; product combinations, such as wellness and art or wellness and golf may be motivators also.)

Exclusivity (the wellness customer expects that he or she will not be disturbed by other guests).

Fashion (the wellness customer will only go to facilities and locations with excellent reputations).

C.2.5 Competing destinations for Medical Wellness Tourism

The main competing destinations offering Medical Wellness tourism are as follows:

France the area of specialisation here is thalassotheraphy. France developed this product and has some 50 centres mostly in coastal locations offering this product. France is estimated to have 20 per cent of Europe's thermal springs. The vast majority of users are funded by France's national health scheme.

Central Europe Germany, Austria and Switzerland have long traditions of Medical Wellness treatments, dating back to 'taking the waters' in the 1700s. Many of these centres have had difficulty proving their scientific value, and of those that did survive 20th century scrutiny, some were developed as

'sanatoria' and have had to re-position to a more exclusive mode to survive. Central Europe has been examined in more detail by the experts in September 2007.

Eastern Europe The Soviet Union developed many sanatoria throughout Eastern Europe and most of these have had severe difficulty in adapting to the post-Soviet world. There is however a long tradition of Medical Wellness in this region, and it is a growing source of demand. Poland especially is offering those products at very competitive levels.

Tunisia & Jordan Both countries have developed extensive Medical Wellness products and are direct competitors for Egypt in this field. They have been examined in details in Progress Report 3.

Far East The Far East also offers extensive Medical Wellness tourism product. Thailand and Japan (and also China) have long traditions of Eastern medicine and medical wellness treatments. The Thai massage has become a universal wellness tourism product.

As illustrated in the product audit, Egypt at present has a limited Medical Wellness product offer in terms of developed product. ETB and developers will need to consider whether to target high end European traffic in quite a competitive environment; or to target Russia and former Soviet states in Europe where demand for (Medical) Wellness tourism undoubtedly exists. It is important to note however that markets do not mix, and so specialisation is essential.

Demand also exists in Arab markets and indeed within the Egyptian domestic market for traditional Medical Wellness product, such as hot sand treatments.

C.2.6 Competing destinations for Wellness Tourism

Wellness Tourism is on its way to becoming a mainstream tourism product which almost every developed tourism destination can offer. The global spa industry is rapidly re-shaping itself from a medically-orientated sector to a major leisure industry. This new spa product emerged in the United States in the late 1980s and has been extensively taken up in Central Europe where an ageing spa product was in need of rejuvenation.

In Europe there has been a significant shift from ill patients seeking cures who are referred to spas by doctors (and often paid for by national insurance companies), to healthy consumers seeking private leisure products. Emerging trends show diversification towards traditional and alternative treatments, such as Ayurvedic treatments from India, and the growth of global spa brands, such as Six Senses Spas and Baden-Baden. This offer clearly defined and controlled quality products to up-market segments.

Today a great many destinations feature Wellness Tourism and many more destinations are looking to develop it. The product now tends to be associated with 5 star hotels and spa brands, although the market is definitely broadening with day spas opening and growing appeal to wider markets. (The vast majority of spas in North America are now day spas targeting local residents).

The International Spa Association (ISPA) estimates that spas have grown in number by 20 per cent each year since 1992 and that there are over 10,000 spas in the USA

alone, earning $11.2 billion (€9.2 million) from136 million visits16. Europe is estimated to have over 2,000 spas. Thailand has some 250 spa centres used by 2.5 million international tourists and employing 4,000 people: Growth has been phenomenal and revenues exceeded 7 million Thai baht (€150 million).

Dubai promotes a dedicated spa brochure which features fourteen of the Emirate's top spas. This is an initiative by the Dubai Department of Tourism and Commerce. It features branded spas including the Givenchy Spa at the Royal Mirage and the Six Senses Spa at the acclaimed Madinat Jumeirah resort.

An interesting development in the Arab world is the construction of women-only destination spas. This concept derives from the traditional private women's culture of privacy, relaxation and beautifying rituals. In the UAE in particular magnificent complexes have been built centred on feminine indulgence. Examples are the Khatt Springs Hotel and Spa (www.khatthotel.com) at Ras Al Khaimah in the Hajar Mountains; and the Imar Spa (www.imarspa.com) at Umm Al Quwain. Abu Dhabi's Ladies Club (www.adlc.ae) has Le Spa which offers ladies' massages, reflexology, facials, hot stone treatments, hydrotherapy and a popular bridal package which involves a two week beautification ritual. In Egypt at least one tour operator is already offering a ladies-only *hammam* tour of Cairo, which is proving popular with Arab clientele.

Future competing destinations for Egypt will be Turkey and Greece. Turkey has announced ambitious and controversial plans for extensive accommodation expansion and is preparing a master plan for spa and wellness tourism. Greece has also identified this area for future product development and aims to be one of the world's top five tourist destinations by 2020. The country is developing plans to diversify the tourism product and lengthen the season, including developing spa tourism. Jordan's plans for this product area are being examined in detail by the team in progress report 3, and Dubai has been identified as offering an interesting product marketing example for Egypt to follow.

C.2.7 Potential target markets

Europe and the Arab world are the dominant source markets for Egyptian tourism with the fastest growth coming from the latter. The United Kingdom, Russia, Germany, Libya, Italy, Saudi Arabia, France. Palestine, the United States and the Netherlands are Egypt's top ten source markets. Given considerations of access, familiarity with the destination and familiarity of travel advisers with the destination, it is within these source markets that we must search for medical and wellness tourism potential, initially at least. The experts believe that best potential from existing markets comes from the following market areas:

- Russia and German-speaking markets offer good potential for new wellness tourism development
- In the UK, potential exists for post-operative, post-illness and recuperation holidays, rather than for medical treatments and operations
- France offers potential for wellness specifically related to thalassotheraphy as well as post-illness and recuperation holidays
- Libya and Palestine offer potential for general medical treatment. Increased travel restrictions to the EU and the USA also can offer opportunities for Egypt from other Arab and African countries for medical tourism also

- The remaining main existing markets are seen to have some, more limited, potential, mainly in the area of wellness, if new product is developed to meet their needs
- With new product development there is potential to stimulate new markets. Scandinavian countries in particular can be sold a winter sunshine (medical) wellness product.

In addition areas of specialist medical expertise can, if operated from internationally certified clinics or hospitals, offer potential for niche marketing of medical services.

In Egypt's largest inbound market, the UK, the outbound medical tourism market was estimated to be worth US$120 million in 2005. Total private healthcare within the UK however is estimated to be worth US$15 billion. Recent research by Minitel forecasts very strong growth in outbound medical tourism: 'Well off baby boomers will increasingly take their healthcare into their own hands and seek the elixir of eternal youth' (Minitel). UK travel agents are however reported to be very wary of their risks in assisting patients to have operations overseas, and this will remain a problem for Egypt. Very strong interest is however reported in 'post-operative, post-illness and recuperation holidays' and this could offer big potential.

For spa and wellness tourism there is growing demand within the UK with one third of consumers estimated to have tried a spa-type treatment or massage on a holiday (but not as part of their normal lifestyle) in the past 12 months. The Minitel report however cautions that the UK market for spa and wellness is presently a small niche, limited to up-market professionals with a female and solo traveller bias. It is estimated to be worth US150 million and growing, with average spend per trip higher than for average holidays. UK tour operators see spa and wellness as primarily a long haul luxury product, and see icon spa hotels as important to destination perception. The mass market has been slow to respond to packages around health and wellness products.

C.3 Conclusion for situation appraisal

C.3.1 Overall opportunities and constraints for, medical wellness and wellness tourism

This is discussed in details in the product audit at the end of Annex C and summarised below.

Strengths

Egypt possesses a long tradition and familiarity with tourism. Some hotels are already very capable of competing internationally in the wellness segment; others are interested in following and developing. The beauty of nature and the potential for the combination of wellness and culture, wellness and sport and the extensive coastline can be considered as strong assets. There is a relative weather stability and predictability in Egypt. World class heritage sites underline a positive marketing approach. Certain features of former medical wellness, for example in Ptolemaic and Upper Egypt might be revived. There are already some upgraded and renovated airport facilities throughout the country. A substantial number of entrepreneurs have stated interest in developing medical wellness. Some towns have undergone positive

planning changes with regard to tourism, e.g. Abu Simbel, Luxor and Sharm El Sheikh. Wellness and sun seekers are a good combination. Some food safety programmes are established in main resort hotels. Public authorities in general are very keen to see future tourism developments. There are sufficient hospital emergency support services in most (although not all) areas. Some niche medical tourism products are already in place, (e.g. recovery programme for foreign alcoholics in Al Gouna, psoriasis and rheumatic treatments in Menaville, thalassotheraphy in Soma Bay).

Weaknesses

Very substantial weaknesses do exist with regard to preliminary aspects for the implementation and marketing of the medical wellness and wellness tourism strategy. Major constraints exist with regard to the general hygiene image abroad, food safety and also visible environmental issues especially in the larger cities. Specifically there are problems around points of entry with regard to the service chain, e.g. at the airport in Hurghada. General Service Quality Systems (SQS) programmes for entire regions are not in place and the product packaging possibilities with regard to medical tourism are minimal at present. Product possibilities with regard to medical wellness are hardly developed and marketed.

Wellness facilities are mostly rudimentary, not really developed with some notable exceptions. Many entrepreneurs have the imagination of being a wellness place or think adding of some ‘wellness features’ such as a sauna or a Jacuzzi will make them a spa: The difference huge between a gymnasium and a wellness centre is not very clear to the entrepreneurs. There is a lack of overall wellness development plans comprising a holistic wellness scale, meaning certification by independent wellness organisations. Most of the wellness & health facilities are not ready at all for marketing, but already have been marketed as in the withdrawn therapeutic tourism brochure. The wellness health tourism infrastructure is not at all ready for any medium or high value international competition. The currently high tourism turnover through (cheap) mass tourism with high visitor numbers may prevent entrepreneurs in investing into the high-end wellness segment. There are restrictions and difficult permission access for foreign visitors in many key tourism areas of the country, which makes it next to impossible (especially for high spending FITs) to travel outside of convoys, such as between Aswan, Abu Simbel and Luxor with frequent check points. A lack of direct and scheduled international flights to destinations in Upper Egypt is a constraint.

Entrepreneurs face problems to obtain permits for additional product activities which would be essential in some destinations to develop the wellness products. Tourism crowding due to convoy and peak transportation times can be found at cultural sites.

Frequent power cuts e.g. in Abu Simbel and Aswan without electric backup systems or emergency lightening impede the well feeling in most of the hotels. Poor check in handling e.g. by Egypt Air exists at the airports, consequently a lack of customer information and service orientation, with no clear signs but over-controlling by the security forces. High costs for (imported) goods, especially treatment relevant importing problems with the customs facilities have been reported. The price-quality ratio within existing premises is often unrealistic. The high seasonality w due to weather extremes (heat) for wellness tourism mainly from September/November to March is a critical issue in some of the destinations.

The different investment laws or interpretation and different institutions dealing with them are not unified. For investors, there is no clear price level available for land as promoted by the TDA. Specialised and trained domestic human resources are not available in sufficient numbers for medical and wellness related products. The current accommodation standards with regard to the star system show huge gaps, e.g. some 5 star hotels would receive hardly a 3 star classification in Europe. Overcharging and bargaining hassle at tourism places turns customers off. Often there are no clearly marked price lists, e.g. in cafeterias, restaurants etc. Bills are not presented in English language, figures often not specified. General gaps in the smooth and speed of the service chain (car rental, taxis) do exist. The lack of language knowledge and training standards of the HR side is evident in many locations. For FITs in the wellness segment many essentials are missing, e.g. in Cairo and Alexandria, there are no suitable transportation system, dirty taxis and with dangerous technical conditions, drivers not skilled and/or not able to speak English, overcharging, unreliability and hassle. For foreign FITs a cross cultural gender problem exists in addition. There are cross cultural challenges with the local population. Some key coastal stretches are unattractive and overdeveloped, e.g. the coast from Alexandria to El Alamain. Decaying towns, e.g. in Alexandria and Matrouth are very evident as people move to gated resorts along coast for second homes. The lack of regional medical facilities of quality in some destinations means that hotels have to have their own staffed medical centres.

Opportunities

With regard to opportunities however, there are many especially through integral development, job education and promotion and knowledge input. Right combinations of products suiting wellness would be ethno-culture and wellness, Egyptian culture and wellness, golf and wellness, Egyptian culture and medical wellness. Also eco-friendly business promotion plus wellness factors for eco-friendly treatments could be a positive issue. Vocational training and employment potential with regard to medical wellness and wellness positions would be high on the agenda to establish regional vocational training centres. An educational training campaign involving the regional population could improve the deficient system of garbage recycling and hygiene. A social caring capacity study with regard to specific locations could be helpful for overall development of the sustainable tourism industry. Food safety programmes and rigorous HACCP implementation would improve the image drastically. More direct and scheduled flights and an open skies policy would attract more FITs to wellness destinations. The upgrading and the certification of the existing wellness or “wannabee” wellness enterprises could set the future standards. The repositioning of medical wellness in Safaga with a cluster formation can be seen as an important product development step as well as attracting upmarket wellness tourists through unique architecture and day spa centres. There are good chances for integral development through job education and promotion and knowledge input, especially in Sharm El Sheikh as well as the combination of tourism niche products e.g. wellness and diving (one operator is already offering this). Consequent and skilful marketing for high value clientele from the Russian market would be a very good opportunity for regional boost.

Threats

Multiple threats can be named that medical wellness and wellness either will not take place or it might create the wrong image to the country.

Especially over promising with regard to the medical tourism potential through marketing would be a topic. A launch of a marketing campaign too early (before improvements) would be a mistake. Uncontrolled expansion without certification of wellness and medical wellness enterprises could confuse potential clients. Cross-cultural gaps with the local population could be widening and create an adverse atmosphere. Over-development might take place on the physical (building & construction) side without development of the definitely vocational training and soft skill aspects of medical and wellness. Untrained or not suitably skilled personnel going into wellness treatments would cause problems. Environmental hazards such as hygiene and the lack of overall tidiness would scare off visitors. Increasing social inequality, over-development of tourism sites and security issues are also likely to pose a future threat.

C.3.2 Key findings

There are both significant development and marketing issues that have hampered the development of wellness tourism in Egypt.

The situation analysis undertaken for this study specifically reveals the following issues:

- Egypt currently has a very low profile as a medical and wellness tourism destination
- There is significant market potential in the area of wellness tourism
- There is a possibility of over-supply in the Middle East in terms of medical tourism facilities
- Egypt's potential product combinations (wellness plus) are very attractive.
- Egypt desperately needs a comprehensive long term tourism development master plan to address numerous problems. The Medical and Wellness Tourism Strategy should dovetail with this
- There is clear evidence of under-supply of marketable product in the area of spas and wellness hotels in Egypt
- International accreditation is essential and standards currently are generally low, although some examples of good practise do exist
- Substantial training will be required
- Few Egyptian facilities are existing offering specialist training
- Internationally marketable medical, medical wellness and wellness product is at present in very short supply in Egypt
- There is very significant competition, including from within the Middle East.
- 'Introducing Spas as a new tourism concept in Egypt', *Egyptian Journal of Tourism Studies* Viol
- Egypt's inward investment climate is at present very confusing for investors in terms of tourism incentives available
- ETA marketing for 'therapeutic tourism' is evolving without any clear strategy at present

C.4 Product development strategy

C.4.1 Introduction

Although Egypt is one of the world's oldest and most successful tourism destinations, in the area of medical and wellness tourism Egypt has not kept pace with international trends and has fallen behind in securing this type of high spend tourism. Here, we outlined how to address this deficit and considers two specialist tourism areas in particular:

Medical wellness tourism which involves patients or older people going abroad for treatments that are under specific medical supervision, but using tourist or other specialist accommodation other than hospitals; and

Wellness tourism referring to a holiday taken by generally healthy people, where mind and body experiences and the use of facilities for general well-being are important motivators, and the wellness holiday is based in a resort or hotel.

In the product audit undertaken, Egypt has been shown to be under-developed in each of these three areas. Considerable potential is seen to exist for the development of new tourism products as a result. Of these three categories (medical tourism, medical wellness tourism and wellness tourism), the greatest potential for Egypt is seen to be in the area of wellness tourism.

C.4.2 Strategic Pillars

This strategy for the development of medical and wellness tourism is based on four key pillars Strategic direction, product development, human resources and marketing. Numerous other general product weaknesses (which affect medical and wellness tourism) also need to be addressed through a future national tourism development master plan.

C.4.2.1 Market-led development strategy

The approach adopted in this study is a market-led approach to development. A number of studies have previously addressed the issue of medical or therapeutic tourism in Egypt and these have been fully covered previously. In general however these studies take a product-based approach to development, looking at the natural springs and other features that Egypt can offer for traditional 'cure' tourism. This study also examines these and other existing features, but it is primarily guided by the needs of the market for medical wellness and wellness tourism.

CHART 1: Strategic approach to medical wellness and wellness tourism in Egypt

C.4.2.2 International accreditation

International accreditation is seen as absolutely essential to the development of a medical and wellness tourism industry in Egypt. Without it potential tourists cannot know what to expect, and travel agents and medical advisers cannot determine the standard of facility they are selling. As indicated in the competition analysis, most countries have some form of international accreditation, so it is necessary for Egypt to achieve recognised accreditation to achieve credibility as a new player in the field of medical and wellness tourism19: It is absolutely essential if Egypt is to receive referral business from insurance companies or other referral agents.

The International Society for Quality in Health Care (ISQua) oversees healthcare accreditation. The main international players are as follows:

Certified spa & wellness hotel, resort, and spa standard: A license to relax

This certificate distinguishes genuine quality from businesses that have simply jumped on the bandwagon. It was developed specifically for spa hotels, resorts, and day spas. Over 300 criteria are examined ranging from the hotel environment through the kitchen to the equipment in the spa area. Also thoroughly the qualifications held by the staff, their attentiveness, and the level of service provided.

Certified medical spa & wellness treatments

TÜV aims at to use the term “medical” not in a misleading way: everything from water exercise to fruit diets is lauded as being “medical”. In a real medical spa centre, qualified doctors make the decisions about what treatments are suitable for the wellbeing of guests and the extent to which these treatments should be applied.

Health experts at TÜV Rheinland have therefore worked together with the German health association Deutsche Medical Wellness Verband e.V. to develop verifiable assessment criteria. Certification enables to demonstrate the high standards upheld by the institution and the expert abilities the staff.

Having worldwide representations around the world and also an office in Egypt with TÜV it seems most likely to get into an Egypt suiting agreement with supervision of the quality criteria at regular time intervals to develop a full quality cycle at a very reasonable cost. The intriguing factor here is that detailed check lists do exist for all three medical tourism columns, whether it is a clinic, a dental studio, a medical wellness hotel or a spa & wellness resort.

Recommendation

It is recommended that in general Egypt should pursue the European TÜV model and commence the implementation of a national approach to raising standards. The achievement of international accreditation by Egyptian hospitals and clinics depends on the readiness, needs and complexity of the organisation being assessed, and will take some considerable time.

It is recognised that substantial investment in physical facilities (in addition to human resources) is needed if Egypt is to become a serious player in the area of medical and wellness tourism. At present the considerable market potential of this product is severely constrained by a lack of facilities of internationally marketable standard.

C.4.3 Medical wellness tourism

Egypt presently has some developed medical wellness tourism products. This includes climatology treatments at Safaga on the Red Sea, thalassotheraphy centres at Suma Bay, on the Mediterranean coast and in Cairo (Hilton Hotel only), and traditional hot sand treatments at Safaga, Aswan and Siwa and some other sites. At El Gouna a specialist agency is currently targeting recuperation from alcoholism, combining Egypt’s Islaamic (non-alcohol) ethos with high quality product in this resort.

Natural springs also exist, for example at Hammam Pharaoh and Moses Springs on Sinai, but there a heavy security presence at present will make it very difficult to attract developers at present.

The standard of medical wellness facilities varies from excellent (thalassotheraphy at Suma Bay) to very poor, and some of these sites have some potential for further development.

This study sees considerable potential for Egypt to position itself in a new way, as Europe's preferred destination for post-operative, post-illness and recuperation holidays. This approach can use existing quality hotel stock (where it exists) and add appropriately trained medical supervision. Patients prefer to recuperate in less hospital-like surroundings, and this is an opportunity if good access to Egypt and medical transport facilities can be arranged. Egypt has considerable potential to combine healing with a wide range of cultural and social activities, and to offer a very strong product.

Egypt also has potential to market itself further as a winter sunshine destination, with a particular slant on medical wellness treatments to avoid winter depression and other low-light country ailments. Scandinavia in particular can be targeted in this regard. Egypt has an extensive Mediterranean coastline and there is real potential to develop more thalassotheraphy at a higher standard than Tunisia. Thalasso Aqua parks would be an ideal feature for the future to attract more visitors. The Barceló Carthage investment near Tunis would be a benchmark.

International accreditation of medical wellness centres is seen as essential and TÜV Rheinland is the recommended accreditation agency.

C.4.3.1 Key centres and additional facilities required

It would be of importance to foster the development of medical wellness and wellness clusters especially at Al Gouna, Soma Bay and Safaga as well as in Sharm el Sheikh taking into account the positive surroundings and the clean air. As to the promising trends in medical wellness product concentration can be seen as

- Thalasso;
- Ayurveda;
- Traditional Chinese Medicine (TCM); and
- Climatherapy,

Arrival facilities at Egypt's airports are often poor, although improvements are taking place. For medical tourism patients, smooth transit through airports without stress is essential. Food safety is a key concern for medical wellness tourists, and Egypt has a poor image in this regard. Applying quality controls to restaurants, hotels and hospitals is a key requirement for medical and wellness tourism.

C.4.4 Wellness tourism

Given the significant need for training and spa standards, international certification is recommended as a fundamental principle of developing this product. The European TÜV model is recommended. The development of wellness tourism should be private sector driven, with the government and ETA putting n place the incentives and support services to allow targeted development of relevant wellness products.

There is presently a very weak supply of genuine wellness hotels in Egypt and this is a marketing constraint at the present time. it is recommended that the development strategy should focus on both

- enhancing selected current hotel stock by providing incentives and training in all aspects of spa management; and

- developing selected new product, ideally in partnership with recognised spa operating companies and marketing agents

There are relatively few tourism areas of high environmental quality remaining in Egypt, sometimes as a result of tourism development. It is important that the highest environmental standards are applied to future wellness tourism developments.

Training in spa design, operations, services, management and marketing are all required, but Egypt's hotel sector has considerable potential to develop *a wide range of wellness products* to meet market needs. Certification will be essential to ensure high standards of construction and maintenance.

In particular attention should be paid to further develop signature *Egyptian spas* which will enhance and reinforce Egypt's tourism image. The Cairo Four Seasons Hotel has developed a small wellness centre along these lines, with Pharaonic treatments, a Cleopatra milk bath, Nefertari facials and other Egyptian treatments.

The Nile Cruise is also a signature tourism product of Egyptian tourism. There is strong potential to develop more elabourate *Nile spa cruises*. The Oberoi group has piloted this concept.

The example of Budapest should be followed in Cairo, by funding the restoration of *selected Ottoman hammams* to their former glory as spa tourism products and conservation projects. The Hungarian government programme provided 70 per cent funding for restoration work, and 25 per cent funding for new development.

The *women's spa concept*, as pioneered in the UAE, should be developed in Cairo to serve its extensive and growing Arab tourism market. Cairo also has potential to develop more high quality *city spas* in high end hotels.

Alexandria, Luxor and Sharm El Sheik have potential to develop Aqua parks and day spas using topics as Egyptian Culture and Egyptian Beauty. The Thalasso Carthage Centre near Tunis is an example of the scale of facility envisaged.

Wellness tourism requires more than hotels or spa centres; it requires an overall 'wellness experience' from arrival at the airport to departure. Ambience, comfort, cleanliness and service are all important considerations. These are also areas which the overall Egyptian tourism development strategy is likely to identify as needing improvement.

Although there are improvements with regard to the renovation and reorganisation in several airports still there is a high need for improvement and quality standards all through the Egyptian tourism service chain. A complete revision and long term development plan with specified training programmes will be an essential outcome from the tourism master plan. These improvements exceed the mere scope of medical wellness and wellness tourism, but will have a benefit for all customers visiting Egypt.

C.4.5 Potential capacity and development targets

C.4.5.1 Medical wellness tourism targets

Medical wellness room capacity built and available is targeted to increase from 240 rooms at present to 1,800 by year 5. Medical Wellness expansion, including repositioning of existing or planned enterprises is outlined by location in table 3.

Regions	Zone Mediterrané including Siwa & Alexandria	Zone Cairo	Zone Red Sea West Coast Line	Zone Sinai/Sharm	Zone Upper Egypt
Thalasso - Aqua Park	2	0	3	2	0
4 star hotels	4	0	6	3	2
Room capacity	480		720	360	240

Table 3: Expansion in medical wellness tourism product (targets year 5)

It is estimated that existing or new hotels would designate approximately 120 rooms for medical wellness clientele. Estimations are based on a realistic scenario that Egypt will position itself within a quality niche segment.

Target sold rooms in year 5 from medical wellness, based on room occupancy 68 per cent per annum will be 446,760 (1,800 rooms [table 3 total] x 365 days x 68 per cent occupancy). Based on an indicative 1.6 persons per room, this target represents 714,816 medical wellness clients.

C.4.5.2 Wellness tourism targets

Estimates for the number of wellness enterprises by year 5, including repositioning of existing or planned enterprises, are as shown in table 4.

Table 4: Expansion in wellness tourism product (targets year 5)

Regions	Zone Mediterrané including Siwa & Alexandria	Zone Cairo	Zone Red Sea West Coast Line	Zone Sinai/Sharm	Zone Upper Egypt
Aqua Park – Day Spa Wellness Therme	2	2	3	2	2
4 star hotels	4	0	8	4	3
5 star hotels	4	6	10	4	3
Room capacity 4 star	560		1120	560	420
Room capacity 5 star	360	630	900	360	270

It is assumed that existing hotels would designate a maximum of 140 rooms for wellness clientele in the 4 star segment and 90 rooms in the 5 star segments. Larger existing hotels could reposition (e.g. through integrating a "wellness class programmes" into their current enterprises).

Wellness room capacity is targeted to expand very significantly from the current 280 rooms in the 4 star category (quality wellness product only), to 2,660 rooms by year 5. In the 5 star categories, expansion is targeted to be from 300 rooms at present to 2,052 by year 5.

Occupancy rates of 68 per cent have been assumed for 4 star hotels, and 70 per cent for five stars23.

On this basis, the target for sold rooms in year 5 will be 660,212 in the 4 star category (2,660 rooms x 365 days x 68 per cent occupancy); and 524,286 rooms sold in the five star category 2052 x 365 days x 70 per cent occupancy). Assuming 1.7 persons per room24, this gives an overall target wellness tourism clientele of 2,013,650 wellness users by year 5.

C.4.5.2 Indicative Investment Costs

Table 5 outlines indicative costs for investments and upgrading of wellness and medical wellness facilities in Egypt over a five year period.

Table 5: Investment needs & potential (excluding training and marketing)

Investment	Year 1-3	Year 4-5	Total	Assumptions
Medical wellness				
5 star hotels	0	0	0	
4 star hotels	5 = 95 Mio $	10 = 190 Mio $	15 = 285 Mio $	140 rooms, 2000 sqm wellness area
Wellness				
5 star hotels	10 = 188 Mio $	17 = 319,6 Mio $	27 = 507,6 Mio $	90 rooms, 2000 sqm wellness area
4 star hotels	8 = 152 Mio $	11 = 209 Mio $	19 = 361 Mio $	4 Star hotels, 140 rooms

The product audit and foregoing analysis indicates that there are major investment needs if Egypt is to develop a quality spa and wellness product. Good market potential has been identified. So the chances of attracting private sector inward investment and native Egyptian investment in this product are considered good. 4 and 5 star wellness resorts, add-on spa facilities, aqua-theme parks and thalassotheraphy centres are the main products needed. The indicative investment targets are outlined at table 5.

C.4.6 Investment marketing plan

C.4.6.1 Potential target investor markets

Other[26]				
Aqua Park Therme	According investor´s size and interests	ditto	ditto	ditto
Aqua Park Thalasso	According investor´s size and interests	ditto	ditto	ditto

An extremely buoyant (and competitive) market currently exists for hotel and leisure developments in the region. Table 6 shows the overall; regional investment picture in large scale tourism projects.

Table 6: Reported investment levels in tourism mega-projects

Area	US$ millions	% GDP
Total GCC (Saudi Arabia, Oman, UAE, Kuwait, Bahrain, Qatar)	322,093	56.20%
Total Levant (Lebanon, Syria, Jordan	28,840	51.41%
Total North Africa (Egypt, Sudan, Morocco)	33,830	19.33%
Total (excl. Iran)	387,163	48.14%

Source: ABQ Sawya Ltd.(2005)

There are three important sources of investment in Egypt: Europe, the United States and Arab investors, particularly the Gulf States. According to home country statistics reported by the United Nations Conference on Trade and Development (1996), the United States holds the largest foreign direct investment (FDI) stock in the country. From Europe, France, the largest investor in North Africa (mainly in Morocco and Tunisia), does not have a significant investment presence in Egypt. The UK and Germany are more important. In recent years however the GCC countries have increased considerably inward investments in the Middle East and worldwide.
Gulf and local investors are seen as the primary targets for the inward investment marketing strategy for medical and wellness tourism. Numerous wellness tourism facilities are currently under construction with Gulf investment throughout the Middle East, and some of Egypt's most high profile tourism investments are being funded from this source. Reform of Egypt's inward investment rules for tourism to make them clear and transparent will be absolutely essential if the inward investment marketing strategy is to succeed.

C.4.6.2 Investment marketing

A pre-condition for the investment marketing strategy is reform of incentives to make them clear and transparent, and clarity relating to the respective roles of the ETA, TDA, the General Authority for Foreign Investment (GAFI), military landholders and special economic zones and other agencies.
It is recommended that, whatever the ultimate approval body, the specialist units established within ETA for medical wellness tourism, and within MoHP for medical tourism, should be the key advisory agencies for targeting inward investment. Only these bodies will have the sufficient specialist knowledge regarding medical and wellness standards and strategy for Egypt in the future.
The objective for investment marketing will be as follows:
To position Egypt as a key investment location for tourism development, with a special opportunity for medical wellness and wellness tourism development.

C.4.6.3 Actions to deliver the investment marketing objectives

The actions to deliver the marketing objectives will be as follows:

- The ETA's vision for this product area
- The publication of an investment prospectus, outlining the opportunities, potential locations and incentives available regionally in Egypt.
- The development of a specific investment website regarding medical and wellness tourism, able to be accessed through ETA, TDA and GAFI sites.
- Representation of Egypt by ESWA, ETA, and TDA investment forums and exhibitions, particularly in the Middle East.
- Retention of financial journalist(s) to syndicate articles in financial and investment publications in target investor markets.
- Advertising in specialist publications.
- Employment of short term investment advisers to identify and introduce key investors to Egyptian opportunities, on a target basis.

C.4.6.4 Investment marketing budget

An annual investment marketing budget of €150,000 should be provided for.

C.5 Human resources strategy

Any human resources strategy and related thinking should be driven by the most important aim in the entire medical wellness related sector which is "Essential Wellness Total Quality Management". Guests' satisfaction, not the most exciting architectural or treatment features, should be in the centre of any strategic planning. Egypt with its natural service friendliness can be seen as a raw diamond with its people to be employed in high value and exciting positions in the future, so diminishing the actual number of guest workers in the industry.

C.5.1 Current training provision

C.5.1.1 University and managerial training

The current training provisions for medical wellness and wellness are very limited and will require strong efforts with identified European institutions to establish national vocational training centres based on internationally acknowledged curricula.

C.5.1.2 Vocational training

Vocational training for the wellness personnel is mainly done at the few spa and wellness centres by foreign high profile instructors. Egyptians are not among the majority of trained wellness staff and more foreigners than Egyptians are at present trained. Teaming up with international institutions to a) establish own curricula at academies in Egypt is a solution but also b) batches of promising Egyptian physical therapy students with keen interest should be assisted to go for 'train the trainers' abroad.

C.5.2 Institutions for training

Having analysed the curricula of the physiotherapy schools, the Egyptian potential, especially for therapists, has been identified as very promising. However there is no institution at present that would care specifically for wellness-related education.

Austrian academic institutions have been recognising the increasing demand for specific training of human resources and several institutions are offering related vocational diplomas or even fully recognised academic degrees. Quality however varies from place to place. Only those institutions which are recognized or supervised by the state control bodies should be considered. Here the Institutes for Vocational Training (BFIs) and the Institute for Economic Developments (WIFIs) have been identified as the best partner options.

The general analysis of the relevant competence types of wellness specialists leads to the main topic of competence fields of nutrition, massage, beauty and movements. Here the graduates of the strong physiotherapy curriculum of Egypt may be offered good chances to qualify for respective specific medical wellness and wellness professions through postgraduate education. Research in Austria27 shows a relevance of needed personnel in wellness enterprises e.g. with Masseur – 85,0, Cosmetician 71,3 Wellness Trainer 41,3.

C.5.3 Certification

The most important columns of a HR strategy should be planned in line with a mentioned quality mark/certification process, essential to establish Egypt as a medical wellness and wellness destination.

Key issues are as follows:

- Soft skills (hospitality) training of the personnel including proper language training
- Therapeutic specializations as to the features offered and required by the different enterprises already operating or in future development

Customers of the Language Trainings should be:

- Spa & wellness institutions, whose personnel have the direct contact with foreign customers and who need improvement of their foreign language skills. The personnel of spa and wellness institutions are motivated to train their service and language skills in order to raise the quality of their service and broaden the variety of the products. Furthermore the customer's brochure provides additional value for the customer.
- Educational institutions in different countries, which specialise in tourism studies and who can use this study material in their tourism language studies. The material can also be basis for different continuous training modules.
- Hotel and restaurant sector with connection to the health services and catering.
- Profile of the final user - personnel of spa and wellness institution. Language teacher who can use the material for improving the quality of tourism language training or situation-based language trainings in companies. Tourism teacher who can use the material for independent modules or in the frame of tourism management studies in general. The student who can choose the spa and wellness sector for the elective course. Travelling

customer visiting the spa & wellness institution who can find the equivalent words and phrases in different language to the products and situations while being treated.

- Profile of the potential user - traditional hotel and restaurant managers who plan to bring innovation and upgrade their services and products to be more health based (because of increasing stress factor in the world). Private entrepreneurs who offer the health services and are willing to upgrade their knowledge and language skills in this particular sector. Potential customers who plan to take a vacation at the spas and therefore would like to be pre-informed concerning the possible system of services and procedures. Day spas, aqua parks, future spa oriented institutions.

C.5.4 Academic wellness programmes

With regard to the output of numbers from the faculties of physiotherapy it could be stated there will be enough personnel to be fill needs in the wellness sector, but there is a need for curriculum change to meet the needs of a rapidly changing market.

Table 7: Output of the Faculty of Physical Therapy at Misr University for Science &Technology

Year	Graduates
2003/2004	137
2004/2005	95
2005/2006	120
Total	352

Source: ETA

The degree programme academic wellness management should be considered with great care. Although there is at present a booming health care sector with wellness as one of the most promising markets of the future, the vocational side of wellness and relevant numbers have to be heavily weighed. Otherwise challenges could be faced that potentially too many people would like to study for an academic career in the wellness sector (and will not find a reasonable employment) and too less people will go into a (much more needed) vocational career.

In addition to general business administration, the wellness management jobs focuses on relevant issues from the fields of law, public health, health promotion, basics of medicine and pharmaceutics and a comprehensive management training.
Major emphasis will have to be given to cross cultural topics. As realization partners the IMC Krems as well as the technical University Puch have been successfully approached.

C.5.5 The employer factor

The wellness working environment is characterised by the following elements:

- An effective partnership exists between staff and elected officials
- The organisation's leaders model the corporate values and play a significant role in promoting a respectful and supportive workplace

- Employees in all areas work together to ensure that corporate goals are achieved
- Opportunities exist for individuals and groups within the organisation to offer ideas and suggestions to improve the workplace and the work
- Roles are respected and skills are properly utilized
- Employees find their work to be challenging, rewarding, enjoyable and fulfilling
- There is universal respect and support for the diversity of all individuals who comprise the workforce
- Barriers to full participation in the workplace are removed
- Expectations for appropriate workplace conduct are well-understood and demonstrated by all members of the team

C.5.6 Training strategy

C.5.6.1 Specialised personnel

Table 8: Estimated human resource needs (wellness) specialised personnel

Locality	Estimated Wellness Personnel new vocational training	Estimated No. Wellness Manager or executive positions[28]	Estimated Language Program Participants	Service Quality Systems - SQS[29] Participants
Zone Mediterrané including Siwa & Alexandria	320	32	352	352
Zone Cairo	170	16	186	186
Zone Red Sea, West Coast Line	600	60	660	660
Zone Sinai & Sharm	300	30	330	330
Zone Upper Egypt	210	20	230	230
TOTAL	1600	158		
Contingency fluctuation[30]				

Note: *Those numbers estimate* ***specialised*** *medical wellness and wellness personnel only – depending on the enterprise e.g. a wellness hotel, a day spa, a substantial additional number of hotel and service staff will be needed.*

C.5.6.2 Non-specialised personnel

Table 9: Estimated human resources needs (wellness) non- specialised personnel

Locality	Estimated No. Aqua Park Personnel General New Employees	Estimated Wellness Hotel Personnel General New Employees	Estimated Language Program Participants[31]	Service Quality Systems - SQS[32] Participants
Zone Mediterrané including Siwa & Alexandria	440	3660	4100	2050
Zone Cairo	300	1575	1875	940
Zone Red Sea, West Coast Line	900	5930	6830	3415
Zone Sinai & Sharm	600	2740	3340	1670
Zone Upper Egypt	600	1995	2595	1300
TOTAL	2840	15900		
Contingency fluctuation[33]				

Table 10 Training action plan

YEAR Responsible	2007 ACTION	2008 - 2010 ACTION	2010 -2012 ACTION
Organizer ETA, EU Consultants, later ETA and ESWA	International Seminar on Medical Tourism, Medical Wellness & Wellness	International Seminar on Medical Tourism, Medical Wellness & Wellness	International Seminar on Medical Tourism, Medical Wellness & Wellness
Responsibility ETA	Establishment of the Special Project Office (SPO) "Medical Tourism" within the ETA	Training Program - International Seminar Participation of the SPO	Training Program - International Seminar Participation of the SPO
Responsibility ETA - SPO & Entrepreneurs, Hotel Association	Foundation of the (ESWO) "Egyptian Spa & Wellness Organization	International Field Trips & Training, for ETA/ESWA also within Europe	International Field Trips, for ETA also within Europe
Responsibility Entrepreneurs, ESWO		Training Programs in Europe for "Train of Trainers" of Human Resources at the Academies	Foundation of the Training Academies for Medical Wellness & Wellness Professions
Responsibility Entrepreneurs, ESWO		Development of Wellness Tourism Language Programs, Test Phase	Implementation of Wellness Tourism Language Programs
Responsibility Entrepreneurs, ESWO		Development of SQS – Service Quality Systems Test Phase	Implementation of Wellness Service Quality Systems Programs
Responsibility Entrepreneurs, Ministry of Health		Development of Medical Tourism Language Programs, Test Phase	Implementation of Medical Tourism Language Programs
Responsibility Entrepreneurs, ESWO		Training Programs in Egypt for specified Human Resources vocational training at Egyptian Academies	Training Programs in Egypt for specified Human Resources vocational training at Egyptian Academies

Table 11 Training action plan costs

Topic	Duration	Costs	Remark
Train the Trainer Wellness (1.steps)	3 weeks	4625.- Euro	Calculated on Group Size of 8 pax
Diploma Health & Wellness Trainer	3 Month	29.500.- Euro	Recognized ORM D 1501 EU norms
Pilates Trainer	2 weeks	6.200.- Euro	Only for participants with pre-knowledge
Yoga Trainer	2 weeks	6.200.- Euro	Only for participants with pre-knowledge
Tuina Massages	2 weeks	6.200.- Euro	Only for participants with pre-knowledge
Sport Massages	2 weeks	6.200.- Euro	Only for participants with pre-knowledge
Back Fit Trainer	2 weeks	6.200.- Euro	Only for participants with pre-knowledge
Healing Sounds	2 weeks	6.200.- Euro	Only for participants with pre-knowledge
Wellness Manager (academic)	*4 Semester*	*10.000.- Euro*	*Offered by the Technical University Puch/Austria*

C.5.7 Institutional support available

With regard to the institutional support available it will be of utmost importance that ESWA helps to mobilize public/private training programmes involving suitable relevant University institutions e.g. the existing faculties for physiotherapy and the academies to be founded by private entrepreneurs. As to the obviously pricy “know how” for the to be trained human resources if sent abroad international joint ventures and relevant vocational training projects should be strongly encouraged to allow a swift floating “know how” transfer especially between named European institutions and Egypt.

C.5.8 The role of the Egyptian Tourism Authority

C.5.8.1 Background

The ETA was established by Presidential Decree in 1981 and is an independent agency with over 800 staff, 50 of whom work overseas. ETA has 17 offices overseas but the largest component of its staff work in its domestic tourism department (over three hundred when regional tourism structures are included). The ETA has five internal departments as follows:

- planning,
- technical and engineering;
- financial administration and management;
- domestic tourism; and

- international tourism

According to a recent assessment of ETA funded by the EC37, the ETA has four goals:

1. to raise the percentage of international tourism movement to Egypt;
2. to focus on promoting the image of Egypt including ancient civilisation and modern development;
3. to solve problems facing the tourism industry; and
4. to encourage domestic tourism

The ETA is one of three major agencies under the MoT, the others being the TDA and the Convention Bureau and International Convention Centre.

C.5.8.2 Proposed medical tourism & wellness unit within ETA

As discussed with ETA from the beginning of the assignment, a high calibre special product unit will have to be established as soon as possible within the ETA to coordinate and liaise with all public and private interests, and to oversee the foundation of the ESWA.

The unit will have the following tasks:

- research and development dissemination and coordination;
- marketing strategy implementation and coordination issues;
- assistance to ESWA;
- international liaison with ETA offices abroad, foreign academic institutions and certification bodies

Three high calibre staff who can contribute significantly to the development of the product is needed. These staff should have the following roles:

- 1st employee: Coordination of the office, familiarity with the domestic market of Egypt, familiarity with the medical wellness and wellness products, excellent coordination and negotiation skills in Arab and English, cross-cultural knowledge, understanding of standards

- 2nd employee: Marketing issues, familiar with international markets, especially with regard to international fairs, excellent English language knowledge for international representation on fairs etc., and knowledge of German and/or Russian desirable

- 3rd employee: research and development with regard to medical tourism, liaising with the public and private sector institutions, organisational skills to organise relevant meetings and workshops in Egypt, understanding of international standards.

All staff should take advantage of training from the Austrian Twinning Team and should be trained at least 15 days in Egypt and Europe for familiarity with the product, establishing close links with renowned institutions in the research and development and human resources

Best case examples the organisational development within Tunisian tourism authorities, and also with regard to special products the restructuring of the Hungarian Tourism Board has also been identified as a model.

C.5.9 Proposed Egyptian Spa and Wellness Association

Egypt urgently needs a competent and efficient Spa and Wellness Association, as has been identified in other countries. Slovenia is a good model: Here the industry has become the driver with regard to all holistic patterns concerning the wellness and medical wellness sector. ESWA should become a fast growing association for the spa and wellness industry, giving access to a wealth of information and working closely with ETA. Together, these organisations should offer the following:

- Comprehensive training programmes
- Monthly networking opportunities
- Workshops and study tours
- Access to Egyptian overseas representation;
- Advice on raising standards in the industry

As Egypt's medical wellness and wellness industry can be expected to grow rapidly, the need for an association that reaches out to all the sectors of the market should result in the formation of ESWA.

ESWA should encourage integration between the beauty industry and the (medical) wellness market. It should bring together everybody who has a keen interest in this market and thus represent the total health and wellbeing industry.

ESWA should ensure that well-trained therapists are the backbone of the industry and that customer satisfaction means repeat business. ESWA should focus on creating opportunities for its members.

ESWA's key focuses should stand on four pillars of success:

- raising standards to nurture stronger businesses and better client service
- education of its members to fill a void and offer career or business opportunities
- create a platform for industry players to share their knowledge and grow business
- be an access point to industry and market research; and
- be the gateway into government bodies and other associations

An ESWA standards committee should work to raise the local standards – together with international and national institutions and the ETA Best practices examples within the medical wellness and wellness industry should be identified and publicised.. Another important task will include liaising with government bodies like ETA, MoHP etc. For the founding of such association, ETA should collect all promising existing medical and medical wellness entrepreneurs in and put forward the round table approach initiated in this study.

C.6 Marketing strategy

This marketing strategy outlines the steps necessary to launch and position Egypt as a destination for medical and wellness tourism. It assumes that product will be developed over time to meet international standards and that a substantial investment in training will be undertaken.

The image of Egypt at present as a wellness and medical tourism destination is very weak. This means that image building will have to play an important part in marketing strategy for the first years of ETA's marketing effort. In addition, international accreditation is essential to build credibility.

Integration with Egypt Brand marketing will be critical to the success of the marketing strategy.

C.6.1 General approach to growth

Medical wellness tourism

In the case of medical wellness there are seen to be good prospects for the following reasons:

- Egypt can position itself as a destination for recuperation, post-operative recovery and rehabilitation, using existing hotel stock (with upgrades, training and medical supervision)
- Egypt can position itself as a winter sun destination for some patients

However, no facilities have international accreditation at present and there is a limited product supply.

Wellness tourism

In the case of general wellness tourism however, excellent growth prospects are likely. This is because of the following factors:

- there is world-wide growth in interest in spa and wellness tourism;
- existing high-end hotels, with good advice and appropriate investment, can add spa and wellness facilities to meet market demand; and
- Egypt can develop a strong 'beauty and wellness' image from its sun-based image and Ptolemaic heritage.

C.6.2 Current visitor numbers and future targets

There are no accurate figures relating to medical and wellness tourism available from either the MoHP or MoT. The experts have therefore had to make assumptions regarding current health tourism visitor numbers.

We have assumed that with the advent of the Marassi project and some other medical tourism developments, medical tourism will grow by 5 per cent each year in overall terms, but with a change in customer profile moving away from reliance on Libya.

Medical wellness has potential to grow substantially from its present low base.

Wellness tourism is also coming from a low base at present. We have assumed that rapid growth will be achievable with investment, training and marketing.

Table 12: Targets for medical and wellness tourism in Egypt (tourists)

	Year 5	% domestic	% international
Medical	51,051	0	100
Medical wellness	714,816	20	89
Wellness	2,013,650	10	90
Total	2,779,517		

In addition facilities such as spa Nile cruises, restored *hammams* and water-park wellness centres will further enhance the product.

C.6.3 Target markets for future growth of wellness and medical tourism

C.6.3.1 Primary target markets

The primary target markets for medical wellness will be German-speaking countries (Austria, Germany, and Switzerland), France and Arab countries. Scandinavia will also be targeted over time.

The primary target markets for wellness will be German-speaking countries, Russia and Scandinavia.

C.6.3.2 Secondary target markets

Secondary target markets will include the UK, Italy, the United States and the Netherlands.

C.6.3.3 Partnership approach

A partnership approach to marketing is essential. Good progress has been made through the creation of a steering group for this study, but the example of South Korea's approach to medical tourism might be followed for taking this forward.

South Korea's Ministry of Health has formed an alliance with the Korean Health Industry Development Institute and some 30 private hospitals to market South Korea as a medical tourism destination. At present only 10,000 medical tourists visit the country. US$1.06 million is to be spent targeting potential patients in Japan, China and US-Koreans. 50 per cent of the funding comes from the government and 50 per cent from the private hospitals. Proposals have been outlined for an Egyptian Spa and Wellness Association. This body will bring together private sector operators to drive the marketing of the sector, with the ETA.

C.6.3.4 Marketing objectives

Medical wellness tourism

For medical wellness tourism ETA's objectives will be as follows:

- *to position Egypt as a preferred destination for recuperation, rehabilitation and post operative holidays;*
- *to position Egypt as an emerging destination for thalassotheraphy; and*
- *to generate positive publicity for those medical wellness centres that achieve international accreditation.*

Wellness tourism

For wellness tourism ETA's objectives will be as follows:

- *Egypt will be strongly positioned as an emerging wellness destination offering a combined product of wellness, heritage and activities;*
- *Egypt's traditions of beauty and Egyptian treatments will be highlighted; and*
- *positive publicity will be generated for those wellness centres that achieve international accreditation and food safety certification*

C.6.3.5 Actions to deliver the marketing objectives

Publications

ETA will assist ESWA to produce a quality annual publication to be published each autumn (for the following year) covering those facilities that have achieved international accreditation.

The spa and wellness guide for Hungary has been presented to the ETA as an example of best practise. 6,000 copies of the publication should be produced, 2,000 in Russian, 2,000 in English, 1,000 in German and 1,000 in Arab.

Web presence

In association with the EU twinning project top quality web-pages will be produced for the new ETA branded website. A parallel ESWA website will be developed.

Press launch and annual promotion

Egypt will be represented and take a central role in ITB Berlin. Details of this strategy will be presented using the Wellness Forum at ITB. Each succeeding year Egypt will have a strong promotional presence at ITB involving both ETA and ESWA.

Press and PR

Press and PR will be vital if the ETA is to succeed in countering the negative images of Egypt's Trade shows. Spa magazines and the business press will be targeted.

In addition to ITB Berlin, ESWA (with ETA support) will attend specialist spa and wellness trade shows in Dubai, Paris, Moscow and Scandinavia. A specially designed ETA branded stand will be used.

Advertising

Advertising will be placed by ETA in conformity with the Egypt national tourism brand advertising campaign and advertising placement policy. It is envisaged that specialist spa advertising will be used as part of campaigns in key markets.

Web-based marketing

In conformity with ETA brand strategy, web-based marketing will be used to target specialist groups. These are not just confined to 'tourists', but web-based marketing will also target insurance companies regarding accredited hospitals in Egypt, to assist the hospitals to find potential climate. Web-based marketing will also be used to link accredited hospitals with group buyers. Hospitals will be encouraged to develop international healthcare marketing capability.

Research

The ETA wellness team will conduct and commission research into market needs and satisfaction as part of the ongoing project. Research will be presented to ESWA.

C.7 Action plan and budgets

C.7.1 Overview

Strategy pillar	Development pillar	Human resources pillar	Marketing pillar
December 2007 Strategy published & industry seminar			
Year 1 ETA wellness product team established. Wellness incorporated in National Tourism Strategy. Joint MoT/MoHP working group established to encourage international accreditation of medical tourism hospitals and clinics. Egyptian Spa and Wellness Association established. ESWA/ETA together with GHORFA Germany make a "kick off" seminar during the ITB for the topic of investments into wellness in Egypt and operator possibilities	*Year 1* ETA reaches agreement with TÜV Rheinland regarding accreditation of wellness and medical wellness facilities. MoHP reaches agreement with TÜV Rheinland regarding accreditation of hospitals. Accreditation process begins. TDA publishes opportunities for investment in medical and wellness tourism in Egypt & update website and invites PPP tenders for certain projects. TDA commences marketing of Egypt as location for inward investment in medical & wellness tourism. Construction and upgrading of facilities commence to TÜV standards.	*Year 1* ETA & ESWA collect all relevant stakeholders from public and private and academic entities. ESWA reaches agreements with European academic and vocational institutions for a long haul implementation of the training needs. Private entrepreneurs negotiate international joint venture for a medical wellness & wellness academy. Selections of suitable train the trainers from Egyptian sources for a first wellness trainer training abroad. Agreements with TÜV with regard to SQS – Service Quality System Training. Preparations for the medical languages programs with international institutions. MoH reaches agreement with regard to an extensive nurses training program.	*Year 1* Initial publication and marketing materials on spas and wellness in Egypt produced by ETA's advertising agency (English, German, Russian language versions). ETA builds wellness theme into ITB Berlin and includes presentation by EU experts on opportunities in Egypt in ITB wellness forum. ETA and private sector also attend wellness exhibition in Dubai. ETA market offices in Germany, Austria and Russia start targeting wellness specialist tour operators, in partnership with Egyptian travel trade. ETA market offices and PR representatives start targeting specialist wellness publications and feature writers. New wellness page added to ETA website (English, German, and Russian).

Year 2 ESWA/ETA encourage to become the "partner country" of GHORFA on the ITB with the most attractive topics in tourism for international promotion ESWA/ETA are present on all specific fairs around the globe.	*Year 2* Construction of medical wellness Thalasso & wellness thermal Aqua Parks. Construction of 4 & 5 star hotels in the different zones. Opening of one third of the estimated medical wellness and wellness hotels.	*Year 2* Medical wellness and wellness academy starts first activities. Training activities with regard to SQS – Service Quality Systems and medical tourism languages. Wellness trainer batch being trained abroad.	*Year 2* Joint marketing plan drawn up between ETA and Egyptian Spa and Wellness Association. Initial marketing targeting German-speaking markets and Russia.
Year 3 ETA and Egyptian Spa and Wellness Association commission research to update strategy. ESWA/ETA regularly are present on all specific fairs informing on the latest achievement in quality & satisfaction with regard to medical tourism	*Year 3* All Aqua parks functioning. Clustering processes at the different zone locations. Local network building.	*Year 3* Continuous training of Egyptian specialists at the academies. Training activities with regard to SQS – Service Quality Systems and medical tourism languages.	*Year 3* Joint marketing plan drawn up between ETA and Egyptian Spa and Wellness Association. Targeting German-speaking markets, Russia, UK and Scandinavia.
Year 4 ESWA/ETA regularly are present on all specific fairs informing on the latest achievement in quality & satisfaction with regard to medical tourism	*Year 4* Clustering processes at the different zone locations. Local network building.	*Year 4* Research and development facilities established at the academy for international spill over. Training activities with regard to SQS – Service Quality Systems and medical tourism languages. Satisfaction surveys with regard to SQS and medical languages performed.	*Year 4* Joint marketing plan drawn up between ETA and Egyptian Spa and Wellness Association.
Year 5 ETA and Egyptian Spa and Wellness Association commission research to update strategy ESWA/ETA regularly are present on all specific fairs informing on the latest achievement in quality & satisfaction with regard to medical tourism	*Year 5* Clustering processes at the different zone locations. Local network building. All 4 & 5 star hotels working at forecasted capacity. Best health Egypt destination mark in place.	*Year 5* International academy activities (research & development) for medical and medical wellness. Training activities with regard to SQS – Service Quality Systems and medical tourism languages.	*Year 5* Joint marketing plan drawn up between ETA and Egyptian Spa and Wellness Association

C.7.2 Budget

Year	Strategy pillar	Development pillar	Human resources pillar[39]	Marketing pillar
Year 1	$ 60,000	$145,000,000	$539,400 $119,625	$105,000
Year 2	$ 25,000	$145,000,000	$539,400 $199,375	$75,000
Year 3	$ 25,000	$145,000,000	$1,078,800 $279,125	$65,000
Year 4	$ 25,000	$359,300,000	$1,078,800 $319,000	$55,000
Year 5	$25,000	$359,300,000	$1,078,800 $342,925	$55,000
Total	*$160,000*	*$1,153,600,000*	*$5,575,250*	*$355,000*

Product audit

Regional SWOT analysis

Alexandria

Strengths	Weaknesses
▪ Long tradition and familiarity with tourism ▪ Some hotels are able to compete ▪ internationally in the wellness segment (e.g. Four Seasons) ▪ Some hotels might be interesting for the development of the wellness segments ▪ Beauty of natural coastline and the potential for the combination of wellness & culture ▪ Pleasant climate in the summer month and weather stability ▪ World class interesting cultural sites, e.g. Alexandria Library ▪ Historical attraction to upmarket ▪ European travellers ▪ Sufficient hospital emergency support ▪ services Salaam Hospital ▪ Specialised Heart Centre (ICC) ▪ 2 airports, good international scheduled ▪ flight connections and good train connection to Cairo ▪ Being promoted as City Break destination (British Airways) ▪ Parts of the town make suitable appearance for wellness guests, e.g. Montaza Garden, some parts of the Corniche	▪ product packaging possibilities with regard to medical tourism are unclear for western clientele due to the general constraints see medical tourism (ICC pending further information) ▪ product possibilities with regard to medical wellness and wellness are limited due to traffic, pollution and other environmental hazards ▪ For FITs in the wellness segment nearly all essentials are missing, e.g. no suitable transportation system on the corniche – taxis dirty, dangerous with regard to their technical conditions, drivers not skilled nor able to speak English, overcharging and hassle ▪ For FITs, women – specific gender hassle applies ▪ Food safety programmes with regard to hotel and restaurants hardly in place ▪ Price – quality ratio within existing premises would become more realistic for FIT if wellness centres would be included especially ABS ▪ Lack of diversion, variety of products for the long term medical wellness and wellness client ▪ Accommodation standards with regard to the star system show huge gaps, e.g. 5 star ASW would be a maximum 2- 3 star in Europe ▪ Overcharging at some tourism places, e.g. train station turns customers off ▪ Bills not always in English language, figures often not specified ▪ Gaps in the smoothness of the service chain (car rental, taxis, hotels)

Opportunities	Threats
▪ Integral development through job education and promotion and knowledge input, e.g. ABS ▪ Tourism combination products ▪ Mediterranean sea sites and culture of the town ▪ City break destination from Europe ▪ Egyptian culture & wellness, Golf & Wellness, Egyptian culture & Medical Wellness depending on the traffic concepts and areas of the town ▪ Vocational training and employment potential with regard to medical wellness and wellness positions with regard to establish a regional vocational training centre ▪ Enhancement of educational training factors with the population (garbage recycling and hygiene) ▪ Food safety programmes and HACCP ▪ Unified signing system ▪ Pathways for hiking and bicycling – sport & wellness ▪ Medical Tourism with the ICC in the future (Non Western - Arabian Market) ▪ Day Spa Centre for Alexandria in a suitable location	▪ Over-promising with regard to the medical tourism – no suitable hospital environment ▪ High dependency on domestic tourism ▪ Cross cultural misunderstandings may be increasing ▪ Over-promising of actual hotel standards through marketing ▪ Untrained or not suitably skilled personnel in wellness treatments

Recommendations Alexandria

- Concentrate on cross-marketing with suitable wellness centres on the coast
- Certification efforts with regard to the Medical Tourism in specialist niches, e.g. eyes, heart, dental.
- Undertake a feasibility study and find in Alexandria an entrepreneur to establish a Day Spa and Wellness Centre for joint use of smaller hotels
- Apply for and implement a tourism quality management programme in all different sectors of the industry
- Develop a clear marketing concept to promote & revive the relevant niche segments (medical wellness, wellness) especially with the previously arriving European culture and history travellers
- Plan for re-emergence of non-group/small group custom rather than mass tourism

Mediterranean Coast

Strengths	Weaknesses
▪ Beautiful sandy beach all along the Mediterranean Coast ▪ Excellent spa at Charm Life resort (former Mövenpick) ▪ Year round sunshine (sun-seeker destination) ▪ Food safety programmes and emergency medical clinics in three main resort hotels (Porto Marina, Charm and Almaza) ▪ Good hotel management apartment at most hotels visited ▪ Clean water once West of Alexandria ▪ Easy air access, especially for charter flights, long runway ▪ Lack of development East of Matrouth to El Alamein, large land bank ▪ High demand from local market June-September ▪ Interest in alternatives to Red Sea Riviera ▪ Much easier access to Cairo/pyramids than from Sharm El Sheik ▪ Access to Siwa Oasis El Alamein battle site and military museums ▪ Desert landscape and coastal fig plantations ▪ Excellent road once out of Alexandria ▪ Good quality new resorts ▪ Emergency medical centres in main hotels ▪ Cooperation from governorate ▪ Security ▪ Authorities keen to see future tourism developments ▪ Good investment interest ▪ Relatively clean ▪ Increasing visitor numbers	▪ Seasonality of local demand ▪ Unattractive, over-developed coast from Alexandria to El Alamein (100 km) ▪ Decaying towns (Alexandria, Matrouth) as people move to gated resorts along coast for second homes ▪ Crowding and traffic congestion June-Sept in some places ▪ Intensive development at all sites ▪ Lack of regional medical facilities of quality means that hotels have to have their own staffed medical centres. ▪ Cross cultural challenges with the small local population ▪ Very limited things to do locally ▪ Lack of awareness of eco issues (heavy ▪ Use of water in poorly planned landscaping, excessive street lighting) ▪ Dependence on limited markets (domestic, Italian)

Opportunities	Threats
▪ More eco-sensitive planning ▪ Broaden markets ▪ Early stage of development for tourism ▪ Diversify product (not all large-scale resort hotels) ▪ Eco friendly business promotion plus wellness factors for eco friendly treatments ▪ Large land bank ▪ Sea-water and thalassotheraphy ▪ Infrastructure accessibility improvements (sea, railway to Matrouth) ▪ Upgrading of existing want-to-be wellness facilities	▪ Environmental problems ▪ Social problems ▪ Further urbanization of the coastline ▪ Cross cultural misunderstandings ▪ Reliance on non-renewable underground ▪ Water

Recommendations Mediterranean Coast

- Potential to offer more Thalasso/seawater-related facilities.
- Recognise and support potential for private hospital development.
- Set aside areas of coastline to be protected from development.
- Encourage upgrading of leisure facilities (health clubs, gyms).
- To undertake the diverse strategic approaches with regard to wellness a) upgrade the programme and infrastructure to minimum standards of the current sites b) information seminar for entrepreneurs already in the field c) joint and coordinated development plan involving all stakeholders.
- To apply and implement a tourism quality management programme.
- To develop a clear marketing concept to promote the Mediterranean Coast and define key differences with Red Sea product e.g. relevant niche segments (medical wellness, wellness).
- Upgrade facilities in Matrouh town

Siwa Oasis

Strengths	Weaknesses
▪ Superb, unique environmental strengths a true oasis, some 94,000 sq km of largely pristine environment of great beauty ▪ Unique historical sites, including the famed Oracle Temple of Zeus-Ammon of antiquity and the Shali town-fortress remains ▪ Ethnic heritage product – Berber population, Siwi language, festivals and traditions, colourful traditional costumes still worn by heavily veiled women ▪ Extensive activity options including Great White Sea (huge desert sand dunes) ▪ Extensive and spectacularly beautiful salt lakes, 17m below sea level (many Dead Sea similarities including mud treatments now offered at some eco-resorts) ▪ Pristine hot springs in various locations, some very spectacular ▪ Popular tradition of 3 day sand bath treatment ▪ Extensive over-wintering bird species ▪ Year round sunshine and pleasant winter climate ▪ No mass tourism at present ▪ Superb eco-lodge product emerging, gaining in publicity owing to some celebrity guests. ▪ Luxuriant oasis vegetation (date palms, olives, vines) ▪ Remoteness and mystery ▪ Good road access, possible air access ▪ No industrial development or industrial pollution ▪ Few cars ▪ Donkey taxis and bicycle hire ▪ New hospital ▪ Authorities keen to see future tourism developments	▪ Increasing population and influx of tourists putting pressure on fragile environment in Siwa town – sewage and waste-water in particular already causing problems due to high water-rable in oasis. ▪ Inadequate littler collection regime and uncertain landfill policy leading to accumulation of plastic waste ▪ No tourism master plan and unclear policy for future development (ETA consumer brochure describes Siwa unhelpfully as „a virgin land for tourism investments” ▪ Inadequate building regulations and need to generate civic pride in vernacular styles, some hotels exceeding acceptable building heights ▪ Very inappropriate and excessive urban street lighting recently installed ▪ Inappropriate design of new urban spaces (large square and wide streets) ▪ Light pollution blocking stars: ▪ Floodlighting of buildings throughout the night (should turn off at midnight or earlier) ▪ Need for stronger visitor orientation regarding local sensitivities (in particular the need for modest dress) ▪ Many cross cultural challenges with unique, conservative local culture ▪ Some resentment of Egyptian (refered to as „foreign”) investment and control of tourism ▪ Much litter in Shali ruins, danger of collapse as visitor numbers increase ▪ General lack of awareness of eco issues by regional authority ▪ Language skills sometimes lacking (Siwi is local tongue, not Arab)

Opportunities	Threats
▪ Government should nominate Siwa Oasis as both Living Culture and Built UNESCO ▪ World Heritage Site ▪ Urgent need for Sustainable Tourism ▪ Master Plan (opportunity to shine as ecotourism and responsible tourism best case example) ▪ Introduce stronger building policy guidelines (examine example of Luang Prabang World Heritage City) ▪ Change public lighting (examine how done at El Gouna) ▪ Strictly enforce regulation that no buildings can be higher than a palm tree (example of Koh Samui, Thailand) ▪ Opportunity to diversify Egypt's product offer from mass tourism product to upmarket exclusive product. ▪ Opportunity to conserve vernacular building skills through tourism developments (already happening) ▪ Early stage of development for tourism ▪ Recognise real dangers of day-trip tourism from Med Coast resorts (example of severe over-crowding at St Catherine's Monastery, but Siwa mudbrick monuments much more fragile) ▪ Opportunity for better presentation of local hand-made crafts (olive products, dates, weaving, salt products, etc.)	▪ Main threats are environmental – sewage, water, refuse, increased number of tourists ▪ Social problems likely in the future ▪ Real danger of Siwa simply being seen as a day excursion venue from new resorts on Mediterranean Coast (3+ hours away) would have major negative consequences of Siwa socially and environmentally and bring little economic benefit to the local population ▪ Danger that regional authority and govt. actions will further urbanization of a unique rural experience ▪ likely future loss of local ethnic traditions cross cultural misunderstandings ▪ Increase in cars, noise, neon signs, etc

Recommendations Siwa

- Real potential for quality wellness tourism product here in the future if environmental quality can be preserved
- Urgent need for action now, however to address issues such as sewage, refuse collection, building and urban design issues, especially around Siwa town
- Govt should nominate Siwa as candidate World Heritage Site ASAP and commence management plan as per UNESCO guidelines

- To undertake the diverse strategic approaches with regard to wellness a) upgrade the programme and infrastructure to minimum standards of the current sites b) information seminar re environmental issues c) joint and coordinated development plan involving all stakeholders
- To apply and implement a tourism quality management programme, local tourism training and culturally sensitive HIV awareness programme (use Red Crescent or Burnett Institute or similar)
- To develop a clear marketing concept as flagship of possible future Egyptian ecotourism brand
- Impose disincentives on day-excursions and encourage overnight tourism instead
- Examine example of El Gouna as model for controlling new buildings and urban design, street lighting, road design, etc. to foster real sustainable tourism growth
- Introduce community charges on tourists, particularly coach tourists/day trippers to benefit local community projects (responsible tourism)

Cairo

Strengths	**Weaknesses**
▪ Easy access by air ▪ Enormous cultural riches, Giza, Islamic Cairo, Egyptian Museum, etc ▪ Long-time cultural capital of the Arab world ▪ Some first class hotels ▪ Some highly interesting modern museums (e.g. Coptic Museum) ▪ Good, but limited, metro service ▪ Interested entrepreneurs developing wellness products	▪ Severe pollution ▪ Generally FIT unfriendly ▪ Very difficult to get around ▪ Very poor taxi quality ▪ Presentation and decay of heritage generally ▪ Limited hotel stock and variable quality ▪ Over-development ▪ Limited wellness product at present ▪ Airport facilities not optimized

Opportunities	**Threats**
▪ Creating self-contained peace and wellness centres in luxury settings ▪ Improve heritage-related product ▪ Tourism quality programmes ▪ Taxi standards, training ▪ Traffic management and public transport investment	▪ Continued urban decay ▪ Negative image increasing

The assessments in Cairo have been concentrated towards some of the renowned larger hotels, partly claiming wellness facilities, in most cases just on the level of health clubs however.

The main obstacle for wellness (and tourism in general) in Cairo is the high level of pollution, lack of pedestrian areas and the general adverse atmosphere for FITs and severe traffic problems. Taking this into account wellness has an interesting opportunity to become a remedy and release from pollution and stress. Combining culture and wellness has potential particularly with regard to domestic-Egyptian/expatriate and Arab markets generally, where Cairo retains its cache as the cultural capital of the Arab world.

Recommendations:

- Tourism Quality Programmes initiation including a pilot quality and complaints management programme e.g. with yellow cabs
- Commission strategic tourism development strategy for the city

New Valley Oasis

Strengths	Weaknesses
▪ familiarity with tourism as such in the oasis ▪ some accommodations using natural materials and eventually capable to compete internationally (e.g. Desert Lodge) ▪ beauty of nature especially white desert ▪ typical oasis feeling (only Dhakla) ▪ potential of the desert topic e.g. white desert ▪ some desert architecture hotels ▪ plenty of natural hot springs ▪ cooperation from the governate (Kharga, Dhakla, Farafra) ▪ security ▪ authorities critical opinion with regard to future tourism developments (Baharia) ▪ constant weather warmth ▪ good investment climate, prices (new valley but Baharia) ▪ some interesting natural & cultural sites,e.g. Badr Abd El Moghny Museum – Farafra ▪ Increasing visitor numbers	▪ product with regard to medical tourism, medical wellness or wellness is not ready at all for marketing – but already marketed ▪ weak infrastructure or no infrastructure reaching international competition levels ▪ difficult permission access for foreign visitors, especially for FITs – waiting times up to 28 days, high permission costs to the military (50 U$ Dollars – information: Baharija Tourist Office ▪ road hazards and frequent check points ▪ non accessibility Baharija Oasis – Siwa ▪ no food safety programmes with regard to hotel and restaurants ▪ oasis feeling fading away (all oases except Dhakla) ▪ danger of complete neglect of Dhakla old town al Quasr ▪ no scheduled flights (besides 1 on Sundays to Kharga) ▪ most of the hot springs in an unacceptable condition to be presented to tourists (no changing facilities, no cleanliness, petrol barrels

▪ Fayoum: Close location to Cairo, some tourism development	lying around, petrol smell, noise of the pump station, difficult road access, no clear signing in English) ▪ cross cultural challenges with the local population „they take away our water" ▪ joint use with the local population – dress codes – religious and cultural factors ▪ disorientation of the price – quality ratio within existing premises ▪ high seasonality with regard to limited month for tourism September to May ▪ weather too hot ▪ investment laws for foreigners (49% foreigners, 50% Egyptians) ▪ lack of diversion for the long term medical wellness and wellness client ▪ no specialised human resources available for medical and wellness related products ▪ many hot springs not working, under repair ▪ frequent power cuts ▪ boring long drives necessary to reach the facilities (focus point medical wellness) ▪ flies (in all oasis) impeding open air medical wellness treatments and additionally mosquitoes e.g. Dhakla ▪ integrated tourism approach lacking ▪ generally very low accommodation standards (some exceptions) ▪ Fayoum polluted lake: environmental hazards

Opportunities	**Threats**
▪ Social caring capacity building ▪ Eco-friendly business promotion plus wellness factors for eco-friendly treatments ▪ Integral project development ecological safaris plus desert wellness" ▪ Vocational training and employment potential with regard to medical	▪ water levels sinking – environmental problems ▪ joint development or/and unstructured development of a) industry b) agricultural c) tourism might impede or hamper these further urbanization of the oases (notably Dhakla) – losing the

wellness and wellness positions ▪ Enhancement of educational training factors (garbage recycling and hygiene) ▪ Food safety programmes ▪ Infrastructure accessibility improvements (roads and airports) ▪ Upgrading of existing want to be medical wellness or wellness facilities ▪ Unified signing system ▪ Pathways for hiking and bicycling ▪ To increase the visitor numbers further ▪ Fayoum: develop for a day trip product, hygiene and environmental programmes, more work space in tourism	desert feeling ▪ cross cultural misunderstandings increasing ▪ gender conflict issues medical wellness and wellness tourism ▪ environmental hazards, garbage overflow (e.g. dead cows lying close to tourism paths) ▪ changing weather conditions ▪ bureaucratic obstacles for investors ▪ high drilling costs because of sinking water levels ▪ most sites will need high investment if they want to compete with standards of international comparable curing institutions ▪ Over-promising through marketing ▪ Miss any realistic product launch because of too early start up marketing Mushrooming of medical wellness and wellness facilities without using experienced know how ▪ Untrained or not suitably skilled personnel goes into wellness treatments (e.g. Baharija assessment) ▪ Increasing visitor numbers but poor organisational and infrastructural standards may lead to negative imaging of the whole desert related products

Recommendations: New Valley

- Concentrate on the desert related products with regard to eco-tourism (Baharija, Farafra, Dhakla) and use any medical wellness & wellness tourism as small niche product.
- Launch an urgent protection programme for Dhakla oasis which is in desperate need for the preservation of the old town, al Quasr" to maintain the oasis feeling.
- Establish cooperation committees between the different authorities, e.g. governorate and military and tourism authorities to sort out bureaucratic obstacles for investors
- To let necessary studies for the desert related products to be carried out e.g. social caring capacity study, environmental – ecological desert tourism study, Undertake strategic approaches with regard to desert tourism and desert wellness

a) upgrade the programme and infrastructure to minimum standards of the current sites;

b) information seminar for entrepreneurs already in the field; and

c) joint and coordinated development plan involving all stakeholders

- Apply and implement a tourism quality management programme
- Develop a clear marketing concept to promote the desert with relevant niche segments (medical wellness, wellness) included
- Make use of the study already undertaken for future eco-lodge developments and stimulate relevant developments (marketing support and local authorities support); these may include desert wellness

Red Sea (West Coastline)

Strengths	Weaknesses
▪ Familiarity with sea-orientated tourism, yachting as well as some golf opportunities ▪ One hotel capable to compete internationally in the wellness segment on the highest level (e.g. Le Cascade in Sooma Bay) ▪ Some hotels capable and interested in developing the wellness segments further (e.g. Port Ghalib) ▪ Beauty of sea and desert related nature and the potential for the combination of wellness & sports especially golf ▪ Security is strong and keeps a relatively high profile ▪ Constant climate and weather stability – see also weakness (seasonal heat) ▪ World class interesting natural diving facilities ▪ Former history and tradition of medical wellness – e.g. Safaga ▪ Sufficient hospital emergency support services e.g. Red Sea Hospital in Marsa Alam, Al Gouna Hospital, several hospitals in Hurghada ▪ Airport facilities (physical) in Marsa Alam and Al Gouna ▪ Interest of hotel entrepreneurs with	▪ Product packaging with regard to medical tourism are not very developed ▪ Product possibilities with regard to medical wellness are hardly developed and marketed (only exception Menaville, sand- & Climatherapy) ▪ Wellness facilities are mostly a by product not really a reason for visiting the location (exceptions in Soma Bay and Steigenberger Al Dau Hurghada) ▪ Some existing medical Wellness/ health tourism infrastructure not ready for any high value competition levels (at best some facilities with standards as to be found 3 stars in Poland) ▪ Strong tourism income through (cheap) mass tourism with currently high visitor numbers may prevent entrepreneurs in investing into the high end wellness segment – reliance on low spending markets ▪ Poor check in handling at the airport in Hurghada ▪ Airport of Hurghada demonstrates severe problems with human resources, security, oitering people with the baggage cards, overcharging for unclear baggage „services", long

regard to medical wellness, especially wellness products ▪ Some very well appearing resorts and communities, e.g. Al Gouna and Sooma Bay ▪ Niche products medical tourism in place, e.g. recovery programme for foreign alcoholics in Al Gouna, Psoriasis and Rheuma treatments in Menaville	queues and access, unfriendliness of the security personnel, lack of customer information and service orientation, no clear signs, over-controlling by the security forces ▪ Severe constraints for FITs due to dangerous traffic conditions even with chauffeur driven cars – traffic rules practically ignored ▪ Hygiene and environmental appearance in Hurghada at visible crossings absolutely not matching for spa & wellness clientele, e.g. garbage caught at the airport fences ▪ Difficulties for Spa & Wellness providers to important sufficient high quality products for the treatments in time due to long delays and bureaucracy between Ministry of Pharmacy and Ministry of Health ▪ Specialised and quality trained human resources hardly available for medical and wellness related treatments – knowledge at the existing educational institutions not sufficient or not available ▪ Generally unattractive appearance of Hurghada for upmarket clientele due to # building activities, likely to go on for years ▪ Lack or very limited knowledge with regard to the medical wellness or wellness development by the existing entrepreneurs (some notable exceptions) ▪ Lack of language knowledge and training standards of the HR – side (some notable exceptions)

Opportunities	**Threats**
▪ Integral development through job education and promotion and knowledge input, e.g. Port Ghalib and Al Gouna ▪ Tourism combination products golf & wellness ▪ Vocational training and employment potential with regard to medical wellness and wellness positions with regard to establish a regional vocational training centres	▪ Environmental deterioration ▪ Increasing social inequality ▪ Overdevelopment of tourism sites ▪ Security issues

▪ Enhancement of educational training factors with the population (garbage recycling and hygiene) ▪ Food safety programmes and HACCP ▪ Upgrading of existing want to be medical wellness or wellness facilities ▪ More scheduled flights to Al Gouna ▪ Medical Tourism with Al Gouna Hospital for residential retirement tourism ▪ Repositioning of medical wellness in Safaga ▪ Attracting wellness tourists through unique architecture e.g. day spa centres	

Recommendations; Red Sea West

- Concentrate on the existing entrepreneurs and encourage them to join the strategic developments, e.g. invitation to the December seminar
- To apply for and implement tourism quality management programme in all different sectors of the industry (including the airport)
- To develop a clear marketing concept to promote & revive the relevant niche segments (medical wellness, wellness)
- To improve the FIT segments needs

Red Sea & Sinai

Strengths	Weaknesses
▪ Familiarity with sea-orientated tourism, yachting as well as some golf opportunities ▪ Some hotels capable to compete internationally in the wellness segment on high level (e.g. Hotel Blue Bay in Sharm & Reef Oasis) ▪ Some hotels interested in developing the wellness segments further (e.g. Domina/Sharm, Savoy/Sharm) ▪ Beauty of sea and desert related nature and the potential for the combination of wellness & sports especially diving ▪ Security is strong and keeps a relatively high profile ▪ Constant climate and weather stability	▪ Product packaging with regard to wellness tourism not clearly developed – lack of knowledge with regard to target groups, quality requirements and prices ▪ Product possibilities with regard to medical wellness are hardly developed and marketed ▪ Wellness facilities are mostly a by product not really a reason for visiting the location ▪ Some existing medical Wellness/ health tourism infrastructure not ready for any high value competition levels due to lack of renovation, upgrading ▪ Over-promising with regard of

– see also weakness (seasonal heat) ▪ World class interesting natural diving facilities ▪ Sufficient hospital emergency support services e.g. Sharm El Sheikh ▪ International Hospital ▪ Modern Airport facilities (physical) see weaknesses (human resources) in Sharm El sheikh ▪ Interest of hotel entrepreneurs with regard to medical wellness, but especially wellness products ▪ Promising start up with regard to unique features e.g. Thalasso Therapy ▪ Segments of high value spending ▪ Russian clients ▪ Overall nice appearance as an upmarket resort town (sharp contrast to Hurghada) - significant improvements due to good town administration e.g. with regard to the topics of cleanliness and hygiene ▪ World class heritage sites in relatively close excursion reach (St Catherine's) ▪ Very dynamic and professional tow council management in Sharm	wellness treatments offered – no clear specialities in connotation to the available top standard human resources ▪ Strong tourism income through massive tourism from Russia (up to 55% dependency) ▪ Strong security impedes FIT movements on Sinai e.g. even to St. Catherine's, therefore ▪ Pharaohs and Moses Baths off for distance reasons ▪ Handling by at the airport ▪ Airport of Sharm El Sheikh needs tourism training programme with regard to all personnel sectors – negative especially behaviour and ▪ state of baggage carts, incorrect customer information ▪ Taxi & Transportation - unclear prices, overcharging for rental cars ▪ Difficulties for Spa & Wellness providers to important sufficient high quality products for the treatments in time due to long delays and bureaucracy between Ministry of Pharmacy and Ministry of Health ▪ Specialised and quality trained human resources hardly available for medical and wellness related treatments – knowledge at the existing educational institutions not sufficient or not available ▪ Lack or very limited knowledge with regard to the medical wellness or wellness development by the existing entrepreneurs (some notable exceptions) ▪ Lack of language knowledge and training standards of the HR – side (some notable exceptions)

Opportunities	**Threats**
▪ Integral development through job education and promotion and knowledge input, especially in Sharm	▪ Cross cultural issues due to heavy Russian clientele dependence

El Sheikh – all measures are pending a study by the consulting company McKinsey for the city council of Sharm El Sheikh ▪ Tourism combination products wellness & diving ▪ Vocational training and employment potential with regard to medical wellness and wellness positions with regard to establish a regional vocational training centres ▪ Upgrading of existing want to be medical wellness or wellness facilities ▪ Attracting wellness tourists through unique architecture e.g. a day spa centre ▪ Attract more high spending and high value clientele from the Russian market through specific marketing	▪ Environmental deterioration ▪ Increasing social inequality ▪ Security issues

Recommendations Red Sea & Sinai

- Concentrate on the existing entrepreneurs and encourage them to join the strategic developments, e.g. invitation to the December seminar
- To apply for and implement a tourism quality management programme in the airport and taxi and drivers sectors
- To improve the FIT segments needs with regard to security issues

Upper Egypt: Luxor, Aswan, Abu Simbel

Strengths
▪ Long tradition and familiarity with tourism ▪ Some hotels eventually capable to compete internationally in the wellness segment (e.g. Seti – ABS, e.g. St. George LUX) ▪ Some hotels interested in developing the wellness segments in ABS, ASW, LXR ▪ Beauty of nature and the potential for the combination of wellness & culture, eventually desert activities especially Nasser lake, Nubian desert, Nile River ▪ Plenitude of water for treatments, gardens and flowers ▪ Interest and cooperation are stated by the governate (ASW & ABS) – see also weakness ▪ Security is strong and keeps a relatively high profile (ABS & ASW) – see also weakness ▪ Constant climate and weather stability – see also weakness (heat) ▪ World class interesting natural & cultural sites, e.g. Nile, Abu Simbel and Luxor monuments

- Former history of medical wellness – fame of the Agha Khan (ASW)
- Long term strategy and tourism development plan – details not made available yet (LXR)
- Sufficient hospital emergency support services especially for elderly tourists in ABS, ASW and LXR
- Upgraded and pleasant airport facilities (physical) in ABS, ASW and LXR – see also weaknesses
- Interest of hotel entrepreneurs with regard to medical wellness, especially wellness products
- Suitable appearance of the town, especially ABS and LXR

Weaknesses

- Product packaging possibilities with regard to medical tourism are minimal
- Product possibilities with regard to medical wellness are hardly developed and marketed (exception ASW – Isis – sand therapy)
- Wellness facilities are only rudimentary, not really developed
- ABS, ASW, LXR wellness & health facilities are not ready at all for marketing
- Wellness/ health tourism infrastructure not at all ready for any medium or high value competition levels (at best some facilities with standards as to be found in Poland)
- Strong tourism income through (cheap) mass tourism with currently high visitor numbers may prevent entrepreneurs in investing into the high end wellness segment
- Difficult permission access for foreign visitors, next to impossible especially for FIT (fully independent travellers) to travel outside of convoys
- Strict travel regime between Aswan, Abu Simbel and Luxor - frequent check points
- Lack of direct flights to ASW and ABS monopolist air traffic policy for scheduled flights Egypt Air (e.g. only return tickets possible tp buy Aswan – Abu Simbel e.g.)
- Difficulties for entrepreneurs (ABSl) to obtain permits for additional product activities e.g. boating on the Nasser Lake
- food safety programmes with regard to hotel and restaurants hardly in place (some positive exceptions Seti in ABS, Old Cataract ASW, Mövenpick LXR)
- Tourism crowding due to convoy and peak transportation times at all sites
- Frequent power cuts (ABS, ASW) – no electric back up systems or emergency lightening in most of the hotels
- Frequency of flights and one way systems with Egypt Air to ABS with regard to new package products is missing - e.g. for the combination cruise and fly
- Not sufficient direct flights e.g. Germany – Aswan (Hotel Isis with regard to medical wellness)
- Poor check in handling (Egypt Air) at the airports, lack of customer information and service orientation, no clear signs, over controlling by the security forces
- High costs for goods, e.g. ABS due to insufficient local supply – has to be bought in from ASW, convoy costs for the entrepreneur etc.
- Price – quality ratio within existing premises would become more realistic for FIT if wellness centres would be included especially ABS

- High seasonality with regard to limited month due to weather extremes (heat) for wellness tourism mainly from September/November to March
- investment laws for foreigners (49% foreigners, 51% Egyptians) – no clear pricing for available land e.g. in promising locations in ABS
- No clear investment concepts and rules for the pricing of the government land (severe constraint)
- lack of diversion, variety of products for the long term medical wellness and wellness client especially in ABS – would change significantly (O)
- Specialised and trained human resources not available for medical and wellness related products (example Meridien Luxor – Thai massages)
- Long and exhausting drives in convoys necessary to reach the facilities (focus point medical wellness)
- flies hampering open air medical wellness treatments and additionally mosquitoes especially in ABS, occasionally ASW, less in LXR
- integral tourism strategy plan lacking or unclear with regard to its full existence - materials not available for presentation and assessments
- Accommodation standards with regard to the star system show huge gaps, e.g. 5 star ASW would be a maximum 2- 3 star in Europe (few exceptions in LXR)
- Overcharging at tourism places turns customers off – no clearly marked price lists, cafeterias, etc.
- Bills not in English language, figures often not specified
- Gaps in the smoothness of the service chain (car rental, taxis)
- Business ethics (hassle) of tourism orientated SMEs at a low level, especially felukas (ASW and LXR), kaschelees (LXR), shops (ASW and LXR)
- Non integrative tourism town planning (ASW and ABS – more positive in LXR)
- Lack or very limited knowledge with regard to the medical wellness or wellness development by the existing entrepreneurs
- Lack of language knowledge and training standards of the HR – side (some notable exceptions in LXR)
- Bureaucratic obstacles for investors

Opportunities	**Threats**
▪ Integral development through job education and promotion and knowledge input, e.g. ABS ▪ Tourism combination products ethno culture & wellness – e.g. Nubian Village, ethno activities (ABS) ▪ Egyptian culture & wellness, Golf & Wellness (LXR) and Egyptian culture & Medical Wellness(ASW) ▪ Eco friendly business promotion plus wellness factors for eco friendly treatments	▪ Over-promising with regard to the medical tourism – no suitable hospital in ASW, unlikely to be staffed with specialists in ABS in the near future – no hospital – including LXR – are certified by international standards ▪ Over-promising in the medical wellness and wellness sector due to the lack of knowledge ▪ High and “comfortable” dependency on mass tourism ▪ Wellness tourism might be impeded or hampered without clear structured

▪ Integral project development including ecological safaris plus „desert wellness" (ABS), wellness and cycling (LXR) ▪ Vocational training and employment potential with regard to medical wellness and wellness positions with regard to establish a regional vocational training centre ▪ Enhancement of educational training factors with the population (garbage recycling and hygiene) ▪ Food safety programmes and HACCP (ABS/ASW/LUX) ▪ Infrastructure accessibility improvements ▪ Upgrading of existing want to be medical wellness or wellness facilities ▪ Unified signing system Pathways for hiking and bicycling – sport & wellness (ABS, LXR) ▪ Developments more focussing on the west banks of the river for a new wellness development e.g. day spa (ASW, especially LXR) ▪ More direct flights and suitable scheduled flights to ASW ▪ Potential of cross marketing wellness and related activities, e.g. desert including topic Nubian villages ▪ Medical Tourism at Luxor International Hospital in the future Non Western - Arabian Market)	tourism development plans, especially in ABS and ASW Cross cultural misunderstandings may be increasing (ABS) ▪ Most existing hotels would need high investments if they would like to compete with standards of international comparable medical wellness and wellness institutions (Western world) ▪ Over-promising through marketing ▪ Miss any realistic product launch because of too early start of the marketing ▪ Mushrooming of medical wellness and wellness facilities without using experienced know how ▪ Untrained or not suitably skilled personnel goes into wellness treatments

Recommendations Upper Egypt

- Concentrate on the Abu Simbel development with regard to a successful blend of desert & eco-tourism in combination with wellness tourism
- Undertake a feasibility study and find in Aswan and Luxor an entrepreneur to establish a Nile Day Spa and Wellness Centre for joint use of smaller hotels
- Establish a clear structure with regard to the investment authorities and cooperation committees between the different authorities, e.g. governorate and military and tourism authorities to sort out bureaucratic obstacles for investors
- Apply for and implement a tourism quality management programme in all different sectors of the industry
- Develop a clear marketing concept to promote & revive the relevant niche segments (medical wellness, wellness) especially with the previously arriving Scandinavian sun seeker market.

Annex D: Global sector review

D.1 Description

Medical tourism is an emerging phenomenon wherein citizens, in most cases of industrialized nations, bypass services offered in their own communities and travel to other destinations (many of which are less developed countries) to receive medical care at costs much lower than at home.

The concept of medical tourism, however, is not entirely new. The first instances of medical tourism dates back thousands of years to when Greek pilgrims travelled from all over the Mediterranean to the small territory in the Saronic Gulf called Epidauria. This territory was the sanctuary of the healing god Asklepios and Epidauria became the first travel destination for medical tourism. Christian and Muslim shrines continued this tradition. 'Taking the waters' for medical purposes became popular in the eighteenth century, as did visiting the seaside for curative purposes in the nineteenth. By the 20th century invalids would travel to warmer countries and to sanatoria for long periods and countries such as Switzerland were specializing in this market. Today however mass international transport links and the information age have combined to bring about medical tourism on a scale previously unimagined.

Today, medical tourism (also called medical travel, health tourism or global healthcare) is where two important service industries, health and tourism, are dovetailed to attract people who seek healthcare services located beyond the geographical territory of their country. Such services typically include elective procedures as well as complex specialised surgeries, such as joint replacement (knee/hip), cardiac surgery, dental surgery, and cosmetic surgeries.

At present providers and customers use informal channels of communication, with less regulatory or legal oversight to assure quality and less formal recourse to reimbursement or redress (if needed) than is often the case at home. However this situation is changing: the European Union, for example, is insisting upon Europe-wide heath services guarantees between states. Insurance companies are also imposing globalise regulations if health insurance is to pay for treatments.

Many specialised subsets of medical tourism are emerging: an example is reproductive tourism, travelling abroad to undergo in-vitro fertilization and other assisted reproductive technology treatments.

D.2 The Medical Tourism equation

This can be expressed as follows:

Medical and healthcare services

+

tourism and travel services

+

Support services

=

MEDICAL TOURISM

The above equation implies the importance of considering three service pillars of the value chain in order to develop a competitive medical tourism destination. Although the development of an advanced healthcare sector at any country is prerequisite for offering compatible medical services, all destinations have to consider the development of the other two main elements to be able to compete in the international market of medical tourism: the support services as well as the complimentary travel and tourism services.

The medical tourism sector is thus not solely healthcare, and its development requires providing many other complimentary and auxiliary services which form part of its value chain. These include the following:

- medical tourism visas,
- airport facilities,
- airline reservations,
- transfers,
- entertainment,
- hospitality,
- excursions; and
- shopping

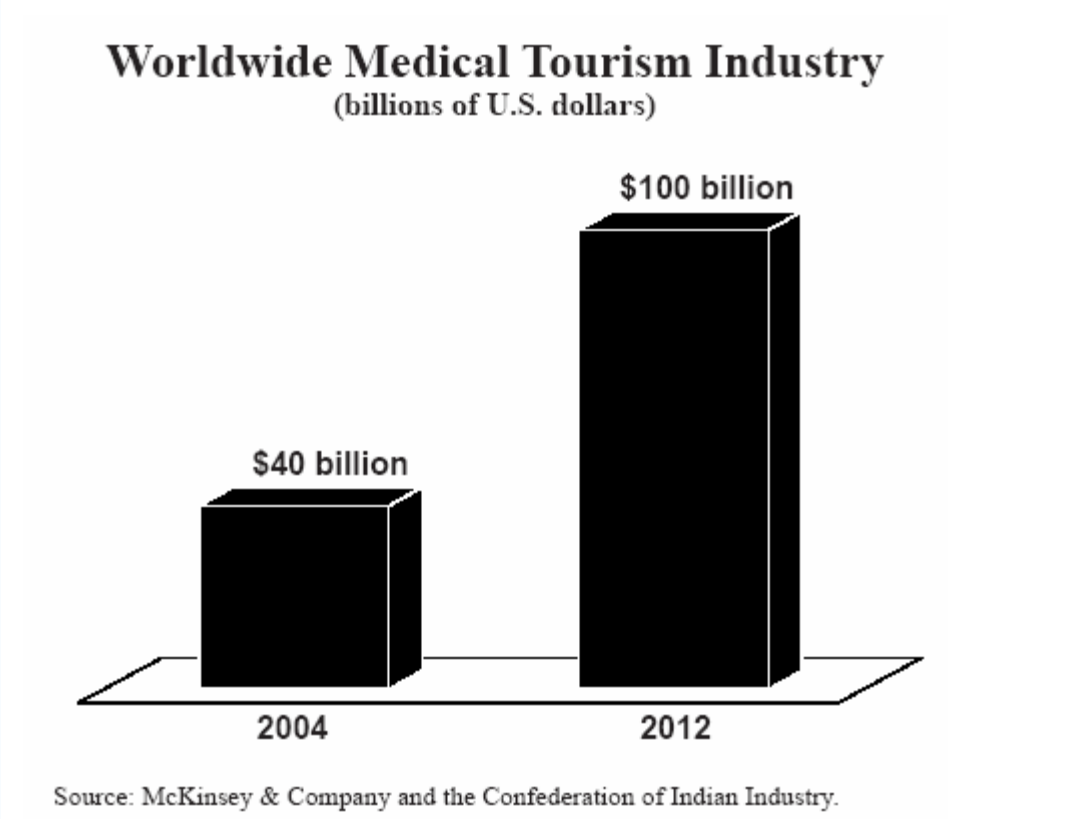
In addition, the development task implies many marketing and distribution activities as well as human resource and training strategies. The value chain approach (which this study adopts) will emphasize all such functions in detail.

D.3 The growing market for Medical Tourism

Wealthy patients from developing countries have long travelled to developed countries for high quality medical care. Now, a growing number of less-affluent patients from developed countries are travelling to regions once characterized as "third world'. These patients are seeking high quality medical care at affordable prices.

Ten years ago, medical tourism as described above, was hardly large enough to be noticed. Today Medical Tourism is growing and diversifying rapidly. Estimates vary, but McKinsey & Company and the Confederation of Indian Industry put gross medical tourism revenues at more than $40 billion worldwide in 2004. Others estimate the worldwide revenue at about $60 billion in 2006. McKinsey & Company projects that the medical tourism industry will rise to $100 billion by 1212 as shown in figure 1.

Figure 1



Reports on the number of patients travelling abroad for health care over the past few years are scattered, but all show that more than 250,000 patients per year visit Singapore alone--nearly half of them from the Middle East and over half a million foreign patients travel to India for medical care, whereas in 2002, the number was only 150,000. Thailand treated as many as 1 million foreign patients in 2005.

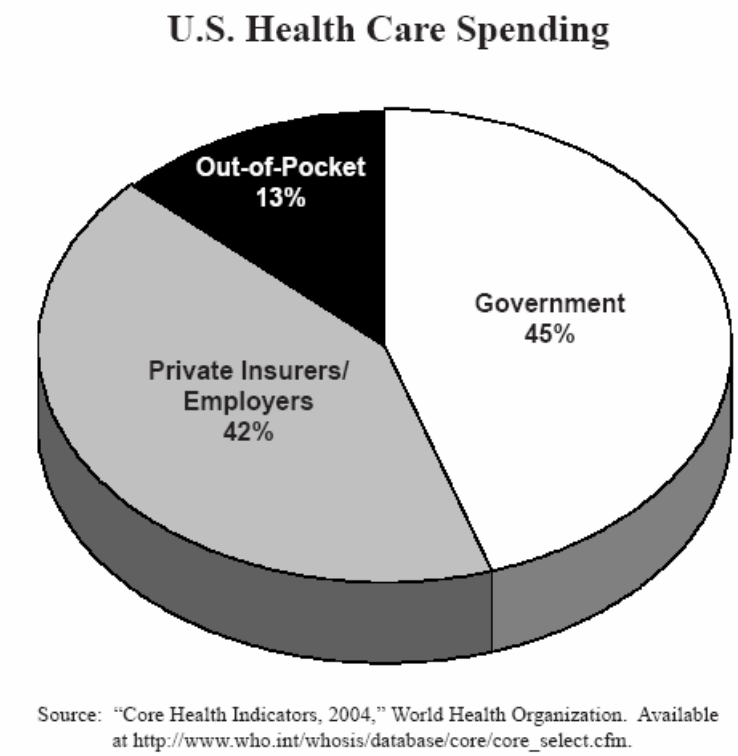
Internationally-known hospitals, such as Bumrungrad in Thailand and Apollo in India, report revenue growth about 20 percent to 25 percent annually. McKinsey & Company estimates that Indian medical tourism alone will grow to $2.3 billion by 2012. Singapore hopes to treat 1 million foreign patients that year while Argentina, Costa Rica, Cuba, Jamaica, South Africa, Jordan, Malaysia, Hungary, Latvia and Estonia all have broken into this lucrative market as well, or are trying to do so, and more countries join the list every year.

As for the future growth, some important trends imply that the market for medical tourism will continue to expand in the years ahead. By 2015, the health of the vast Baby Boom generation will have begun its slow to final decline. However, with more than 220 million Boomers in the United States, Canada, Europe, Australia and New Zealand, this represents a significant market for inexpensive, high-quality medical care.

Medical tourism will probably remain attractive worldwide, for example in USA an estimated 43 million people are without health insurance and 120 million without dental coverage, although the introduction of universal healthcare is an issue in the upcoming US presidential election.

Patients in Britain, Canada and other countries with long waiting lists for major surgery will be just as eager to take advantage of foreign health-care options (See figure 2).

Figure 2



Source: "Core Health Indicators, 2004," World Health Organization. Available at http://www.who.int/whosis/database/core/core_select.cfm.

Also, due to the low cost of overseas treatment, there is a growing trend of "an employer-sponsored healthcare". A few US employers have started offering incentives in their employee benefit packages such as paying for air travel and waiving out-of-pocket expenses for care outside of the US. For example, in January 2008, Hannaford Bros., a supermarket chain based in Maine, began paying the entire medical bill for employees to travel to Singapore for hip and knee replacements, including travel for the patient and companion.

With regard to Europe the rights for nationals to be treated abroad on public expenses or insurance companies has been strengthened within the European Union through Council Regulation 1408/71, art. 22.

As to a future potential with regard to treatments paid and recognized outside the European Union (EU) area, if the quality standards are completely ensured through western certification levels and the pressure on the cost intensively in the western countries continues, the potential would seem good. Medical travel packages can integrate with all types of health insurance, including limited benefit plans, preferred provider organisations and high deductible health plans; and insurers are beginning to establish partnerships with overseas health providers to treat their insured.

Growth in demand thus seems assured, but it is very important to realise that supply is also increasing very rapidly as more and more countries start offering medical tourism services. Price and quality are becoming much more important than simple demand for those wishing to engage in Medical Tourism.

D.4 Factors affecting present and future growth

Our review shows that there are several factors that have led to the increasing popularity of medical travel:

- the high cost of health care at home country,
- long wait times for certain procedures,
- the ease and affordability of international travel, and
- improvements in both technology and standards of care in many countries

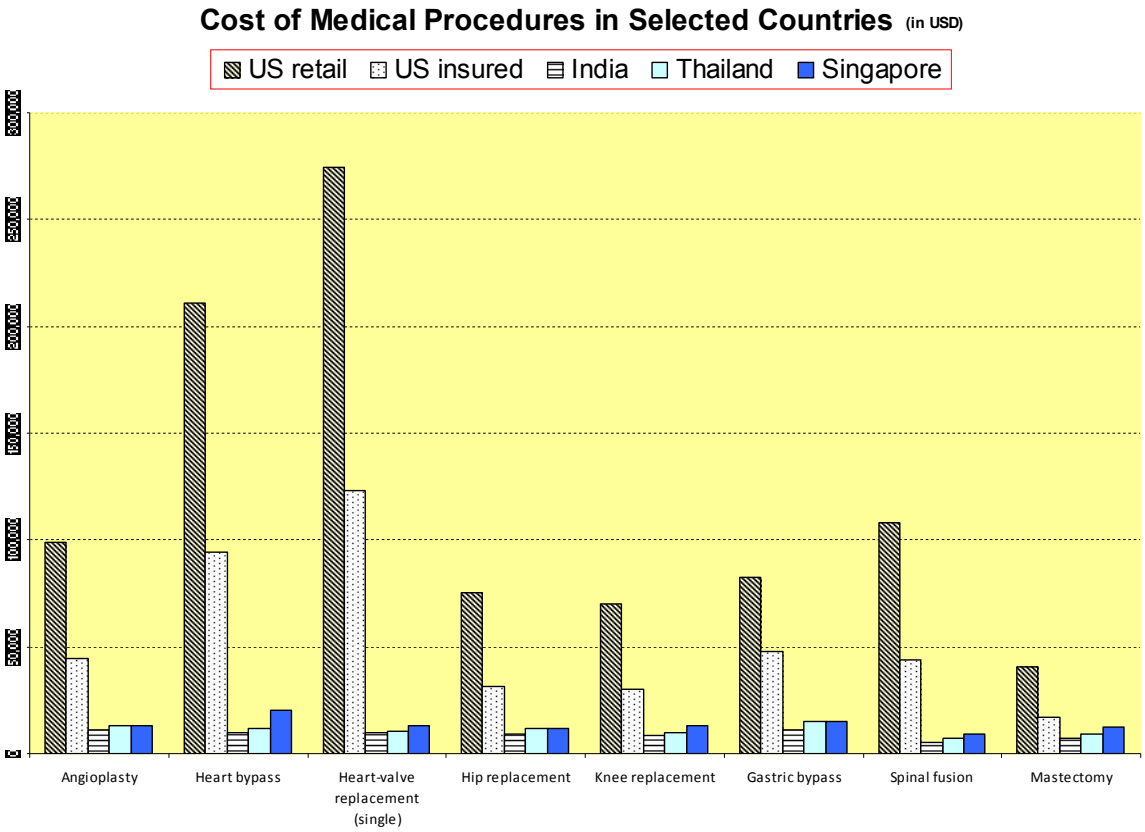
The main reasons for the recent boom of the global medical tourism sector are explored further below:

a) Cost savings:

The cost of surgery in India, Thailand or South Africa can be one-tenth of what it is in the United States or Western Europe, and sometimes even less. A heart-valve replacement that would cost $200,000 or more in the U.S., for example, goes for $10,000 in India--and that includes round-trip airfare and a brief vacation package. Similarly, a metal-free dental bridge worth $5,500 in the U.S. costs $500 in India, a knee replacement in Thailand with six days of physical therapy costs about one-fifth of what it would in the States, and Lasik eye surgery worth $3,700 in the U.S. is available in many other countries for only

$730. Cosmetic surgery savings are even greater: A full facelift that would cost $20,000 in the U.S. runs about $1,250 in South Africa. In addition, clinics in these countries provide single –patient rooms that resemble guestrooms in four-star hotels. Figure 3 shows samples of medical procedures costs in some countries.

Figure 3



b) Quality assurance:

Many hospitals and medical centres in faraway places have undergone a rigorous accreditation process that assures quality standards. A good medical travel company helps the patient to find the highest quality hospitals and surgeons and will provide corresponding credentials and background to help narrow the choice. For example, Clinical services in Singapore emphasise excellence, safety and trustworthiness, with internationally-accredited facilities and renowned physicians trained in the best centres in the world. Singapore's healthcare system was ranked as the sixth best in the world and the best in Asia by the World Health Organisation in 2000. In addition, Singapore accounts for one-third of all Joint Commission International (JCI) accredited facilities in Asia. Another example is Dubai HealthCare City (DHCC) which has invited leading academic medical institutions and pre-eminent health care organisations to participate in DHCC, including Harvard Medical School and the Mayo Clinic, among many others. In Turkey, the government and private institutions have applied rigorous quality and technical standards to all of their internal procedures, making the nation a first-

rate medical tourist destination. The Turkish partner hospital in Istanbul has received accreditation and is an international partner to Harvard Medical Centre. It is worth mentioning that the Harvard Medical International (HMI) is leveraging its experience gained by working with partners around the world to help develop the infrastructure for both high-quality health care delivery and medical education at DHCC.

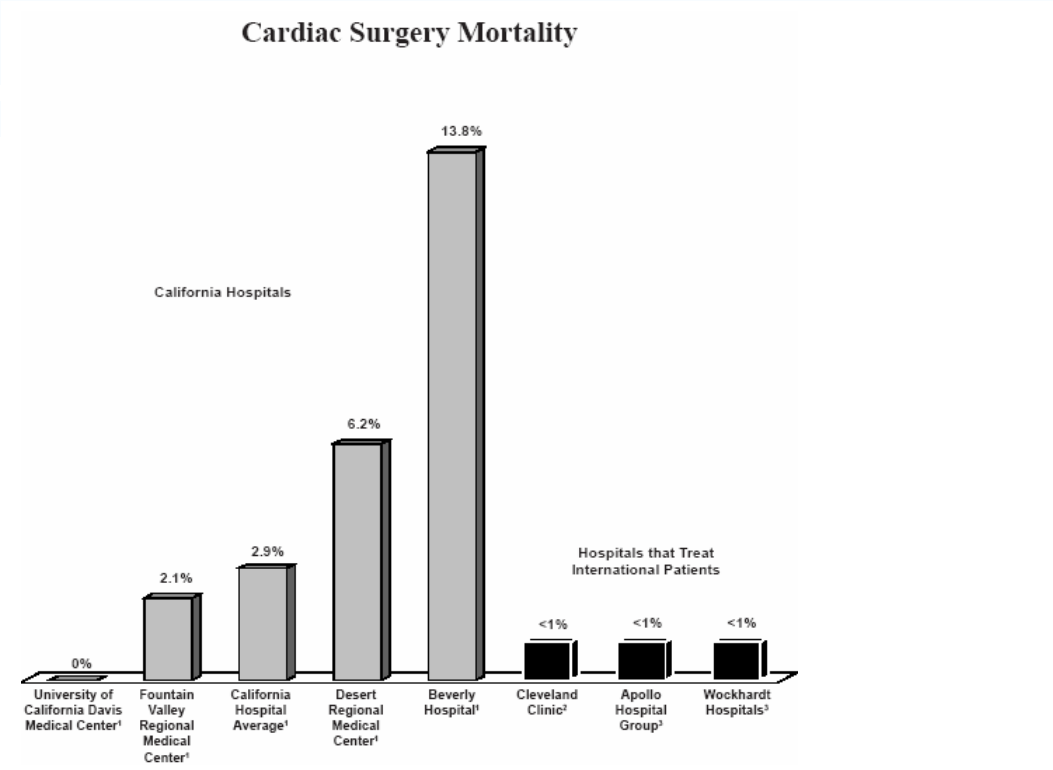
c) Shorter waiting times:

Waiting times are being virtually eliminated. For example, the time spent waiting for a procedure such as a hip replacement can be a year or more in Britain and Canada; however, in Costa Rica, Singapore, Hong Kong, Thailand, Cuba, Colombia, Philippines or India, a patient could feasibly have an operation the day after their arrival. In Canada, the number of procedures in 2005 for which people were waiting was 782,936. For certain organ transplant, "shorter waiting times" can be life saving advantage.

d) Success rates:

Certain procedures, like hip resurfacing, have only recently been approved in the U.S. Many surgeons overseas have extensive experience, with resulting success records that are unmatched in the U.S. For example, The Escorts Heart Institute and Research Centre in New Delhi boast a death rate for coronary bypass patients of 0.8 per cent. This compares with 2.35 per cent for the same procedure in New York (Escorts cardiovascular surgen Mr Naresh Trehan). Figure 4 shows comparison of cardiac surgery mortality among different hospitals.

Figure 4



e) Access to treatments:

Patients in the western communities are finding that insurance either does not cover certain treatments, (for example orthopaedic surgery such as knee/hip replacement), or imposes unreasonable restrictions on the choice of the facility, surgeon, or prosthetics to be used. Medical tourism for knee/hip replacements has emerged as one of the more widely accepted procedures because of the lower cost and minimal difficulties associated with the travelling to/from the surgery. For example, Colombia provides a knee replacement for about $5,000 USD, including all associated fees, such as FDA- approved prosthetics and hospital stay-over expenses.

In U.S., some procedures are not yet FDA approved, while outside the U.S. physicians are achieving great results with them. An example, patients suffering disk pains can have the pain relieved through Disk Nucleus Replacement abroad.

In Canada, physicians cannot privately treat their fellow Canadians if those treatments are covered by the government health plan (Medicare). Also, national health systems sometimes deny treatment to particular patients (for example, because of age or physical condition), and some treatments may not be available to any patients (for example, because of cost).

f) Personal attention:

Medical tourists find the differences in personal attention they receive overseas is a remarkable departure from their experience in their home hospitals. Doctors spend a lot of time with them at every stage, explaining the procedures and recovery process. Nurse to patient ratios are very relatively high in specialist medical tourism hospitals.

g) Long supervised recovery:

Unlike at home where high costs and waiting lists often mandate short-stay 'in hospital recovery time', patients who go overseas find they are discharged only when they are on their way to complete recovery, and most specialist facilities will offer nearby lodging where they are monitored closely.

h) Top quality facilities:

Many hospitals attracting international patients are brand new, with all the latest equipment and technology- Cyber knife technology is an example.

i) Anonymity:

Patients often want recovery away from hordes of well-intended people at home that are constantly inquiring how they are going. The distance also adds a layer of security for those who choose to keep their surgery a closely guarded private matter.

j) Leisure:

While successful surgery and recovery is the first priority, medical travel offers the opportunity to experience a different tourism experience with different cultures, leisure, entertainment and shopping activities in the visited country. In

addition, Medical Tourism providers can tailor specific touring/wellness programmes for the patient and his or her travel companions.

D.5 Worldwide trends

There are influencing trends driving the future of the medical tourism industry. The following sub-sections handle such aspects and trends which should be fully considered when crafting the strategy of developing the medical tourism sector in Egypt.

a) Impacts of globalization on international healthcare:

Medical tourism is only one aspect of the way globalization is changing the healthcare systems all over the world. Apart from patient travel, many medical tasks can be outsourced to skilled professionals abroad when the physical presence of a physician is unnecessary. This can include interpretation of diagnostic tests and long-distance international collaboration particularly in case of management and disease management programmes, because of the availability of information technology. Telemedicine (the use of information technology to treat or monitor patients remotely by telephone, Web cam or video feed) is becoming common in areas where physicians are scarce. It gives rural residents access to specialists and will probably become the preferred way to monitor patients with chronic conditions.

Because potential medical tourists must first be evaluated remotely, most large health care providers and medical intermediaries for patients will use electronic medical records (EMRs) to store and access patient files. Patients can then discuss the procedures with potential physicians via conference call. Modern hospitals abroad also use information technology to identify potential drug interactions, manage patient caseloads and store radiology and labouratory test results.

b) Medical tourism intermediaries:

Patients who are not familiar with specific medical facilities abroad can coordinate their treatment through emerging specialist medical travel intermediaries. These services work like specialised travel agents. They investigate health care providers to ensure quality and screen customers to assess those who are physically well enough to travel. They often have doctors and nurses on staff to assess the medical efficacy of procedures and help patients select physicians and hospitals. Such agents have become professionals, offering consultations on choosing the destination, medical tourism providers and surgeons. They act as a mediator between health tourism providers and their clients and make all relevant reservations and arrangements for the trip on a fixed fee and/or commission basis.

c) Relationship marketing

Recently, medical tourism providers are tending to build a direct channels of communication with their potential patients not only through their websites but also through medical tourism exhibitions and events offering complete guides on their medical tourism offers, configuring treatment costs, deciding on surgeons, planning the medical tour and organizing many other supporting services which can be facilitated through their agents. Some providers, however, have their own

agents who work exclusively for the promotion of their medical products in specific markets. The most fashionable trend is the desire of some medical tourism providers to have their own offices in designated markets to directly access potential customers and better serve them. For example Singapore's healthcare providers have set up liaison offices across the world to serve international patients better. Enquiries and medical appointments can be arranged through these offices and representatives nearest to the patients. Also, each provider working in the medical tourism sector in Singapore has an "International Patient Service Centre".

d) Online communities:

Potential patients can get some idea of the safety and quality of medical providers by searching online for testimonials of patients who have had surgery abroad. These internet communities facilitate the exchange of information about providers, including facility cleanliness, convenience, price, satisfaction with medical services and the availability of lodging while recuperating.

e) Online medical tourism journals and societies:

Technology also has very positive impacts on promoting the sector of medical tourism through professional online journals and societies which help hospitals, physicians, medical tourism providers, travel agents and clients reaching all information and trends on the business of medical tourism. Web sites such as <www.arabmedicare.com> have been established to accompany the needs of this growing market. Treatment Abroad <www.treatmentabroad.net> is the UK's leading website on medical tourism offering much useful advice to medical tourism clients. The International Medical Tourism Journal (IMTJ) on <www.imtjonline.com> also offers guidance to medical tourism clients, facilitating all procedures of travelling abroad for medical tourism.

f) Reducing product prices:

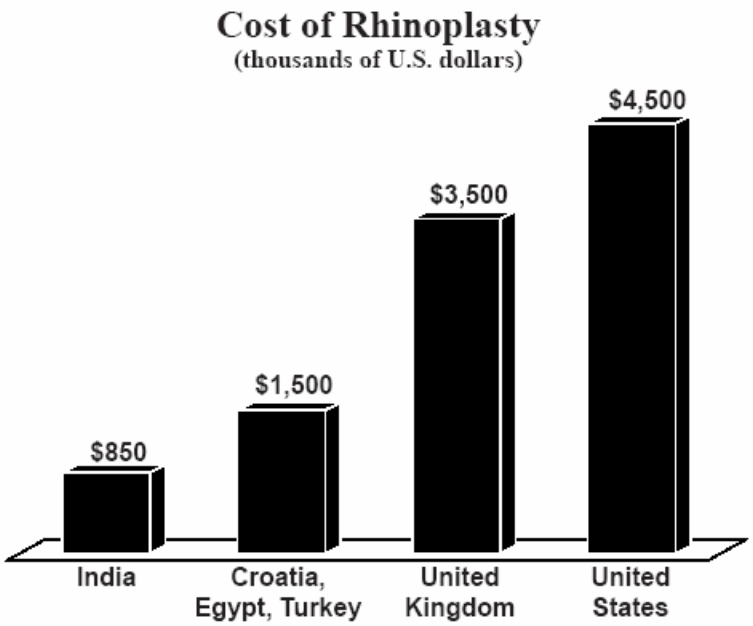
Prices for treatment are lower in foreign hospitals for a number of reasons as discussed by Herrick, 2007:

- Labour costs are lower (for example, in US labour costs equal more than half of hospital operating revenue, on the average,
- Third parties (insurance and government) are less involved or not at all involved: markets tend to be bureaucratic and stifling when insurers or governments pay most medical bills and consumer pays low percentage of it. Hence, providers in such societies are unlikely to compete for their business-based on prices.
- Package pricing with price transparency is normal: in the international health care marketplace, package prices are common and medical travel intermediaries help patients to compare prices.
- There are fewer attempts to shift the cost of charity-care to paying patients,
- There are fewer regulations limiting collabourative arrangements between health care facilities and physicians: For instance, facilities abroad can structure physician compensation packages to create financial incentives or the doctors to provide efficient care.
- Malpractice litigation costs are often lower: malpractice litigation costs are lower in other countries than in the western communities. While American

physicians in some specialities pay more than $100,000 annually for liability insurance policy, a physician in Thailand spends about $5,000 per year. Thailand does not compensate victims for negligence for non-economic damages, and malpractice awards are far lower than in the US or Europe.

Figure 5 shows an example. Rhinoplasty (nose reconstruction) procedure that costs only $850 in India, and costs almost $1500 in Croatia, Egypt and Turkey, while it costs $3,500 in United Kingdom and $4,500 in United States as shown in Figure 5 (Herrick, 2007).

Figure 5



Source: Sarah Dawson with Keith Pollard, "Guide to Medical Tourism," TreatmentAbroad.net, 2007; and "Cosmetic Plastic Surgery Costs," available at http://www.cosmeticplasticsurgerystatistics.com/costs.html.

g) Changes in healthcare regulations:

To benefit health care consumers to the fullest from global health care competition, there is a call in the western societies to change many of its healthcare regulations. For example, in the US, there is a call for the legal reforms policymakers to recognize licenses and broad certifications from other states and countries.

h) Medical tourism events:

There is a remarkable increase in the number of medical tourism events on the international scale such as congresses, conference, exhibitions and trade fairs. Such events address important issues such as the development in the global market, strategies and marketing opportunities. This will certainly consolidate the industry. More detail on these events will be included in the marketing section of the final strategy

i) New entrants:

While there are well established medical tourism destinations, many countries around the word have recently adopted rigorous medical tourism development strategies. This implies a stronger competition and higher quality services to be offered to the medical tourism customers, and vigorous price competition.

Established medical tourism destinations include the following: Argentina, India, Singapore, Malaysia, Hong Kong, The Philippines, Thailand, Turkey, Germany, Belgium, Greece, Hungary, Poland, Serbia, Israel, South Africa, Cuba, Costa Rica, Venezuela and the United Kingdom.

Emerging destinations include: the UAE, Tunisia, Lebanon, Jordan, China,, South Korea, Taiwan and New Zealand.

D.6 World leaders

The following countries are the destinations significantly leading the global medical tourism sector; not only because of the outstanding and most advanced medical products they offer or the excellent combination of the medical and tourism activities of their packages, but also due to the very competitive prices they sell such packages to the international medical tourism market.

a) Thailand

Major Centres for medical tourism are Bangkok and Phuket, with six medical facilities in Bangkok boasting hospital accreditation from the United States. As in most tourist-oriented medical communities, the major attractions are cosmetic surgery and dental treatments. Thailand treated 600,000 people from the US and UK for cosmetic surgery in 2005. However, eye surgery, kidney dialysis and organ transplantation also are among the most common procedures sought by medical vacationers in Thailand. For a few patients, Phuket has another attraction as well: Bangkok Phuket Hospital is the premier place to go for sex-change surgery. In fact, that is one of the top 10 procedures for which patients visit Thailand.

b) India

India is a relative newcomer to medical tourism, but is quickly catching up with Thailand, and recent estimates indicate that the number of foreign patients is growing there by 30 percent each year. India has top-notch centres for open-heart surgery, paediatric heart surgery, hip and knee replacement, cosmetic surgery, dentistry, bone marrow transplants and cancer therapy, and virtually all of India's clinics are equipped with the latest electronic and medical diagnostic equipment. Unlike many of its competitors in medical tourism, India also has the technological sophistication and infrastructure to maintain its market niche, and Indian pharmaceuticals meet the stringent requirements of the U.S. Food and Drug Administration. Additionally, India's quality of care is up to American standards, and some Indian medical centres even provide services that are uncommon elsewhere. For example, hip surgery patients in India can opt for a hip-resurfacing procedure, in which damaged bone is scraped away and replaced with chrome alloy - an operation that costs less and causes less post - operative trauma than the traditional replacement procedure performed in the U.S.

c) Singapore

Singapore is a multi-faceted regional medical hub, not only for healthcare services but also as a meeting place for medical professionals for conferences and training, as a base for healthcare consultancy and operations management, and as the centre for research and clinical trials. With its doctors trained in the best centres around the world, internationally-accredited hospitals and specialty centres, Singapore claims to offer wide range of specialties from basic screening and cosmetic surgery, to high-end surgical procedures and complex specialty care in areas such as Cardiology, Neurology, Obstetrics and Gynaecology, Oncology, Ophthalmology, Orthopaedics and Paediatrics among others. Singapore has invested its strategic location and its outstanding airport facilities, its exceptional airline services and the reputation of being the cleanest city in the world to establish itself as Asia's leading medical hub.

d) South Africa

South Africa draws many cosmetic surgery patients, especially from Europe, and many South African clinics offer packages that include personal assistants, visits with trained therapists, trips to top beauty salons, post-operative care in luxury hotels and safaris or other vacation incentives. Because the South African rand has such a long-standing low rate on the foreign-exchange market, medical tourism packages there tend to be perpetual bargains as well. South Africa is taking the term "medical tourism" very literally by promoting their "medical safaris".

D.7 Best practice

a) Deciding factors satisfied

Our review indicates the following are critical decision-making factors in determining choice of medical tourism products.

1) Doctor – It goes without saying that the most important factor when considering the total value of medical treatment abroad is the quality and experience of the surgeon. The selection of the surgeon can be a very confusing and stressful process, as the customer may feel overwhelmed by the sheer choice in the global marketplace of healthcare. Who can patients trust and how can they verify their true credentials? This is where the selection of a medical tourism agency brings immediate value.

2) Hospital – The hospital should also be a significant factor in the decision making process. The patient will want to feel assured that he will be having the procedure in a modern, state-of-the-art facility, with the highest accreditation and standards. His chosen hospital should have a medical travel process with a high level of commitment and reputation for serving international patients.

3) Facilitation Provider - The medical tourism service agency the patient chose to work with is very important part of the process and should never be taken

lightly. It is imperative to know that all agencies are not the same. The patient must decide if he wants to work with an agency that will basically arrange your flight, hotel stay, and surgery date, or if he wants to work with an agency that is there with you every step of the way to ensure that you have a very successful and stress-free experience from beginning until you return home and beyond. In other words, if a problem arises during his medical retreat, will his agent be there to assist him, even if it is 3:00 a.m. on a Sunday morning, or will he has to solve your problem on his own?

4) Destination Country – After the doctor, hospital, and medical tourism service agency, the destination country is of significant importance in terms of the total value of the medical treatment experience abroad. If the patient is new to the medical tourism concept, there are many factors relating to the destination country that should be taken into serious consideration that could mean the difference between a truly wonderful experience and a horribly frustrating adventure.

b) Infrastructure

Many regions of the world where healthcare expenses are a fraction of what they are in the US and EU happens to be in emerging economies. As such, their infrastructure is decades behind what clients are used to. . You may be in a great modern hospital with great doctors, but medical tourists are likely to select a destination with an equivalent hospital and doctor in better surroundings, and at the same price.

b) Hospital standards

Most leading medical tourism destinations can offer foreign patient wings in hospitals with 5 star rooms and specially selected nurses able to speak the patient's mother tongue

c) Hotels

Once the patient is released from the hospital, he will most likely proceed to a hotel to continue his recuperation before flying home. On average, the typical length of time spent in a hotel post-op is between 7 to 14 days, of course depending on the procedure performed. The price, amenities, comfort, security and proximity to the hospitals vary substantially in all the different medical tourism destinations. If the customer is working with a reputable medical tourism agency, they have hand selected the hotels that they offer for the purpose of recuperation.

d) Navigation

How easy will it be for the patient to get out and about, especially after recuperating from a surgical procedure? Will he be in a huge mega-city that is busting at the seams on every pavement, or will he be in a pleasant, laid-back destination where he can take a leisurely stroll though the local markets, as he is feeling better. If he decides to take a taxi to another area of town, will you spend two hours in crippling traffic, or will he hops in a taxi and be in any area of town in 15 minutes?

f) Culture

Along with the ability to communicate effectively with the people in the medical tourism destination, is their culture warm, hospitable, and inviting, or distant and uninviting? There are many leading medical tourism destinations where the doctors, nurses, hotel staff, and local merchants treat customers like family every step of the way.

g) Hospital Affiliation:

Some foreign hospitals are owned, managed or affiliated to prestigious International universities or health care systems:

- The Cleveland Clinic owns facilities in Canada and Vienna, Austria; and in Abu Dhabi, the clinic already manages an existing facility and is building a new hospital.
- Wockhardt (India) is affiliated with Harvard Medical School.
- Hospital Punta Pacifica in Panama City, Panama, is an affiliate of U.S.-based Johns Hopkins International.
- JCI-accredited International Medical Centre in Singapore is also affiliated with Johns Hopkins International. * Dallas-based International Hospital Corp. is building and operating hospitals in Mexico that meet American standards.
- Bumrungrad International Hospital in Thailand has an American management team to provide American-style care.

h) Physician Credentials:

Foreign health care providers and medical travel intermediaries also compete on quality by touting the credentials of the medical staff. These physicians are often U.S. board-certified, while others have internationally respected credentials. Many of the physicians working with medical tourists were trained in the United States, Australia, Canada or Europe. Nearly two-thirds of the physicians who work with PlanetHospital have either fellowship with medical societies in the United States or the United Kingdom, or are certified for a particular specialty by a medical board.

In addition, many Thai physicians today hold US or UK professional certification. Several Thai hospitals have relationships with educational facilities in the US and UK (for example, Sheffield Hallam University has links with Bangkok).

i) Human Resource Competences:

In addition to the competencies required by the medical and tourism sectors Dr. Sanjay Gupta, 2008, stated general competences which should be considered while developing human resources in the medical tourism sector.

1. Positive attitude: "I can do it" is the first thought that an employee should get when he encounters a problem. He/she can think positively if he/she is happy, cheerful with good sense of humour.

2. Ingenuity: Employees should possess natural incentive and creative

abilities to solve unforeseen problems. They should be capable of coming up with satisfactory solutions instantaneously.

3. Initiative: If a hospital has employees who are self-starters, then it is like a dream come true. If you empower people, then they show exceptional resourcefulness in handling unforeseen events or situations effectively.

4. Loyalty: Organisation should value an employee who maintains service interest uppermost in his mind. Employees who display a high degree of sincerity and honesty of purpose are upright in dealing with patients. Superiors, equals and subordinates are asset to any organisation.

5. Maturity: Tact and maturity are the keys to handle difficult and demanding patients. Employees who are considerate and understanding in dealing with patients can form the backbone of service excellence culture.

6. Team spirit: Healthcare cannot be delivered by a single person; it is always a team work of people with diversified competencies. Employees who find ready acceptance by others and make good contribution towards functioning of the group are very good team players. They provide wholehearted co-operation to colleagues, superiors and subordinates.

7. Interpersonal skills: Interpersonal skills are of paramount importance. Written and oral communication, listening skills and body language play a very important role in service delivery. It is important to be respectful and courteous with co-workers and patients.

8. Appearance and Bearing: Hospitals should see that the appearance and bearing of employees is synchronised at all levels. It should not happen that support staff like kitchen and cleaning staff does not follow any hygiene standard. It is not only the employee who is properly dressed draws attention but the employee who is not neatly dressed also excites discussion amongst the patient relatives.

D.8 Medical tourism products

There are seven main areas of treatment which motivate travelling for medical tourism as follows:

- Organ transplant
- Plastic Surgery
- Dentistry
- Eye care
- Orthopaedic surgery (such as knee/hip replacement)
- Fertility treatments
- Heart Surgery
- Dialysis (support service)

Although the first seven areas represent the main cause for travel, driving the patient's motivation to go to a specific destination for treatment, dialysis is a support medical facility which patient's decision to visit a certain destination for a holiday is dependent on its existence. Holiday dialysis is a holiday package which includes the arrangements of the dialysis medical service.

The above seven areas are attracting the majority of medical tourism clients. However, there are several other areas of medicine for which people will travel overseas.

D.9 Specialization

Although there are some destinations offering wide range of medical tourism product, there is a tendency to have specialization of the treatments promoted in the international market. The following table illustrates specializations offered by key global destinations.

Table 1: Medical tourism specializations by country

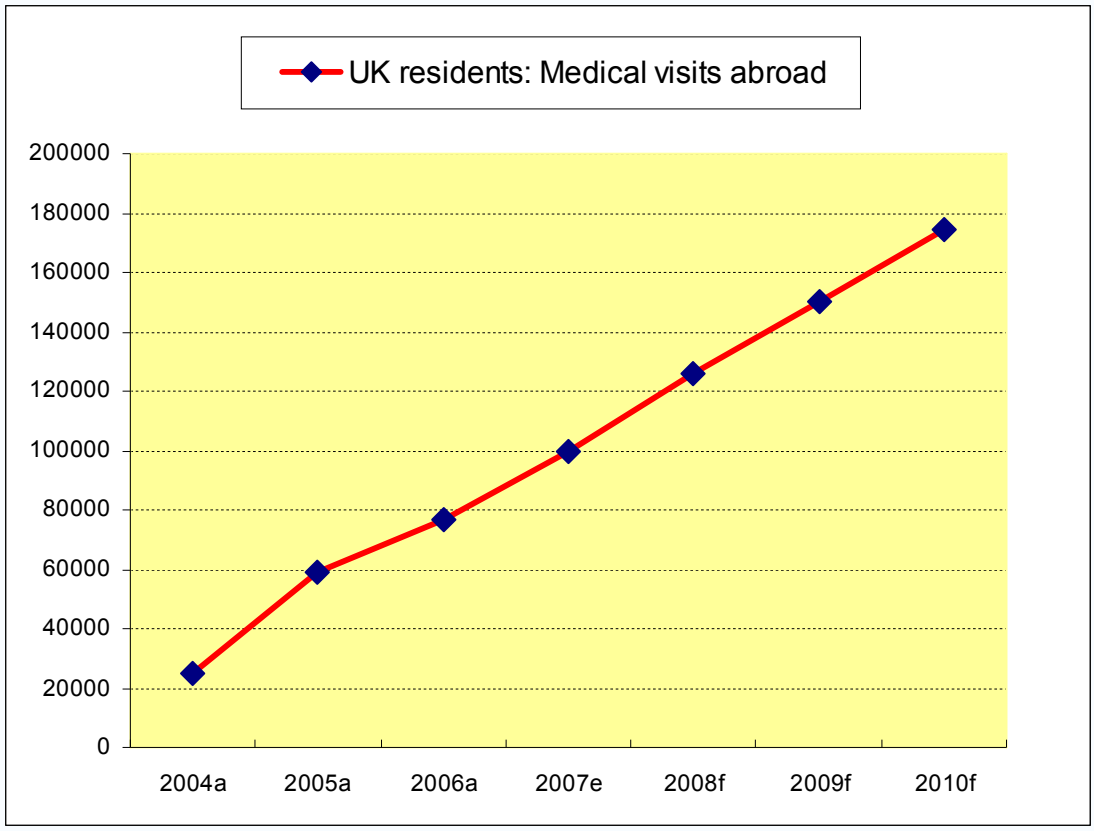
Destination	Patients go for	Remarks
Belgium	General surgery	Belgium has highly equipped clinics and English-speaking staff. ***Also worth travelling for**:* Cosmetic surgery; heart surgery.
Cyprus	Cosmetic surgery	A popular destination for the British with English speaking staff and short flights. ***Also worth travelling for**:* Minor general surgery.
Czech Republic	Cosmetic surgery	Low risk of MRSA. ***Also worth travelling to for:*** Dental work.
Dubai	Cosmetic surgery	Tax free prices and top quality surgeons who have been attracted to the emirate by its tax-free status. ***Also worth travelling for**:* Vasectomies, hernia repairs, colonoscopy, back surgery and joint replacement.
France	Hip replacement surgery	Clinics have low waiting times and most doctors at private clinics in France employ "minimally invasive surgery", which requires small incisions Also worth travelling to for: All general surgery.
Greece	Fertility treatment	High success rate and competitive prices.
Germany	Knee replacement surgery	It offers competitive prices, experiences surgeons and low risk of MRSA.
Poland	Cosmetic surgery.	Surgeons have British hospital experience. ***Also worth travelling to for**:* Dental treatment
Iceland	Fertility treatment	Has a higher IVF success rate than other European countries according to survey by Copenhagen University Hospital

Destination	Patients go for	Remarks
Hungary	Dental treatment	It has more dentists per capita of population than any other European country and the world's first dental university. Also worth travelling for: Cosmetic surgery, health screenings including blood tests, X-rays, abdominal ultrasounds, vascular checks and dermatology analysis, general surgery and laser eye surgery.
India	Heart surgery.	The Government has invested in hospitals to attract medical tourists and India now treats around 10,000 people a year from the UK, Middle East and Bangladesh for heart conditions. ***Also worth travelling for**:* Knee and hip replacements
Malaysia	Knee Replacements	Doctors are of a high standard, and hospitals are modern. ***Also worth travelling to for**:* Cardiology, fertility, ophthalmology and cosmetic surgery.
Singapore	General surgery, but also obesity surgery	Big price savings on gastric surgery for obesity. ***Also worth travelling for**:* Singapore is promoting itself as a world healthcare destination – most treatments are of a high standard.
South Africa	Cosmetic surgery	Popular with those who want to combine surgery with a holiday and spend the money they save on a safari. ***Also worth travelling to for**:* Dental work.
Spain	Cosmetic surgery	Spain has established a reputation for having surgeons on a par with the USA and Brazil. ***Also worth travelling to for**:* Eye surgeries
Turkey	Laser eye surgery	Istanbul hospitals have a high number of operations which means experienced surgeons. ***Also worth travelling to for**:* Cosmetic surgery.
Thailand	Cosmetic surgery	Government investment is behind the state-of-the-art hospitals springing up, and the holiday resorts offer can be an attractive base for recuperation. Thailand treated 600,000 people from the US and UK for cosmetic surgery in 2005. ***Also worth travelling for**:* Spinal surgery & Sex change

D.10 Medical tourism generating regions (markets)

Medical tourists can come from anywhere in the world, including Europe, the UK, Middle East, Japan, the United States, and Canada. This is because of their large populations, comparatively high wealth, the high expense of health care or lack of health care options locally, and increasingly high expectations of their populations with respect to health care. Figure 6 shows the forecasted growth of outbound medical tourism from UK.

Figure 6



However, the major flow of medical tourists in the illness sector goes from high to low cost countries. Interesting examples are those tourists; especially US citizens without insurance who would pay up to 200.000 USD for a heart surgery in their country of origin could receive the treatment with a vacation for only $10,000 in India

Data from the source European Travel Monitor (ETM) indicate that 15 per cent of all international holidays counted from the European market are health-related, summing it up to 37 million trips generating expenditure of EURO 33 Billion.

While, Australians go for the "bloody or "Scalpel Tourism" to Thailand, especially beauty surgery, Jordan attracts Middle East clients, Koreans visit the Philippines and Malaysia attracts South East Asian tourists.

However, there is a dearth of data on the profile and demographic characteristics of each region/country which suggests that in depth market research studies of each generating market have not been undertaken despite the current growing stream of developing medical tourism destinations. However, medical tourism providers will have used their own sources in each market to research, help monitor their performance and to help them know more about their potential patients.

D.11 Worldwide medical tourism destinations by region

A geographic breakdown of leading medical tourism destinations is as follows:

- **Middle East and Africa**:
  Jordan, Lebanon, UAE, Tunisia and South Africa

- **Far East:**
  India, Singapore, Malaysia, Hong Kong, Thailand and the Philippines

- **Europe:**
  Germany, Turkey, Greece, Hungary and Belgium

- **South America:**
  Costa Rica, Argentina, Brazil and Venezuela

It is worth mentioning here that Egypt's potential competitors are not necessarily those countries located in the Middle East area. As long as Egypt plans to position its medical services globally and to compete in the international medical tourism market, the international competition can emerge from any country in the world especially those who offer medical products similar to what Egypt's intends to offer.

Pricing policies, quality assurance, credential staff, accreditation, employment of the Egyptian sightseeing and the recreational areas along with compatible marketing and promotional activities are key determinants for the success of the new comer destinations.

D.12 Channels of distribution

The medical tourism sector has rapidly adopted multiple means of distribution. from traditional travel agencies and airline companies to the involvement of the medical tourism providers through active officers in certain markets and the creation of International Patient Service Centres that belong to providers working in the industry.

a) Medical travel intermediaries:

Medical travel agencies work like traditional travel agencies except that they specialise in medical travel services. They can liaise with healthcare providers and help make arrangements for travel-related needs such as flight and accommodation bookings. In addition, they can include leisure and sightseeing activities in the itinerary. Engaging a medical travel agency will free the patient and his family from dealing with the logistics of the trip so that the patient can focus on receiving the care he needs. These will be discussed in more detail in the marketing section of the strategy.

Also international travel and tourism tour operators have started to get involved in the health tourism arrangements by establishing specialised departments to serve medical travellers. For example, tour operator Kuoni travel representative office in

India has set up a specialised division for medical tourism; airlines such as Etihad and Gulf Air are involved m offering special promotional fares for medical tourists. In Malaysia MAS Golden Holidays has been launched by Malaysian Airways in strategic partnership with the HSC Medical Centre involving Malaysian airline representation offices.

One other way of promoting medical services is advertising in Airlines. In Europe, polish dentists advertise in in-flight magazines and budget airline Ryan air promotes trips to cheap medical havens like Hungary. U.S. entrepreneurs are beginning to catch up with this form of promotion

Services offered by medical tourism intermediaries:

Healthcare arrangements	Travel Arrangements
• Consultation with doctors • Diagnosis and recommendation of hospitals and doctors • Transfer of medical records • Confirmation of appointments • Hospital registration • Nursing assistance • Holistic health • Travel companion programme • After-care • Post operative/recuperation activities	• Airline ticket reservation • Visa assistance • Airport assistance • Ambulance service • Medical evacuation services • Meet and assist • Stopover programme • Hotel reservation • Care hire • Local sightseeing

b) Offices of medical tourism providers:

Medical tourism providers are the international accredited hospitals and medical Centres which offer the healthcare services to overseas patients such as Apollo Hospital Group in the Asian countries, Planet Hospital (www.planethospital.com), Bumrungrad International Hospital in Bangkok, Bangkok Mediplex in Thailand and East Shore Hospital, Gleneagles Hospital and Mount Elizabeth Hospital in Singapore. Some international healthcare providers have accessed the international markets through liaison offices across the world to serve international patients better. Enquiries and medical appointments can be arranged through these offices and representatives nearest to patients.

c) International Patient Service Centres

Many healthcare providers in the world provide one-stop International Patient Service Centres to attend to the needs of international patients. For example in Singapore, such Centres provide patients and their family members a hassle-free

and pleasant stay. The centre's experienced personnel offer assistance with a wide spectrum of services. This includes setting up medical appointments and referrals, assisting with admission and interpretation services, travel and visa arrangements, transportation, accommodation and even leisure and sightseeing arrangements (for example, Raffles Hospital, Thomson Medical Centre, and Singapore General Hospital).

International Patient Service Centres provide a wide range of useful services for international patients including:

- Doctor's referral and medical appointments
- Visa applications and extensions
- Flight arrangements and airport transfer services
- Accommodation bookings for accompanying persons
- Language interpretation services
- Advice on cost estimates and medical financial counselling
- Private nursing
- Arrangements for special dietary requirements
- Religious arrangements
- Concierge services
- Emergency care and non-emergency care
- Air evacuation and repatriation
- Visitor information and local sightseeing arrangements

D.13 Worldwide regulation

a) Accreditation and affiliation

An important global strategy within the medical tourism is the focussing of several countries on the quality approach to underline the seriousness pursuing western accreditation. A growing number of overseas hospitals are accredited under the Joint Commission International (JCI), the international an arm of the World Health Organisation (WHO) recognised Joint Commission of Accreditation of Healthcare Organisation (JCAHO) in the US and Europe. The International Standards Organisation (ISO) also accredits hospitals that meet internationally agreed-upon standards.

Many international hospitals today see obtaining JCI accreditation as a way to attract American patients and the number of JCI-accredited facilities has increased significantly over the last several years. Increasingly, some hospitals are looking towards dual international accreditation, perhaps having both JCI to cover potential US clientele and Trent for potential British and European clientele. Also, an international label, e.g. the German TÜV helps to attract the medical tourist.

The Society for International Healthcare Accreditation (SOFIHA), a free-to-join group providing a forum for discussion and for the sharing of ideas and good practice by providers of international healthcare accreditation and users of the same. The primary role of this organisation is to promote a safe hospital environment for patients.
Table 2 presents a sample list of worldwide accrediting bodies to recognize international healthcare providers in the Medical Tourism Sector).

Accreditation
Australian Council on Healthcare Standards International (ACHSI) An independent, not-for-profit organisation, dedicated to improving the quality of healthcare in Australia through continual review of performance, assessment and accreditation.
Canadian Council on Health Service Accreditation (CCHSA) The leading national accrediting body for healthcare organisations across Canada, CCHSA has 50 years of experience in the development of standards of excellence.
Health Quality Systems HQS was formerly known as Kings Fund Organisational Audit (KFOA) and was part of the Kings Fund. In 1998, it changed its name to the Health Quality Service and in 2000 became an independent charity in its own right....
Joint Commission International For more than 75 years the Joint Commission and its predecessor organisation have been dedicated to improving the quality and safety of healthcare services.
Trent Accreditation Scheme Trent Accreditation Scheme (TAS), the UK-based assessment programme, is eager to expand after finding success in Hong Kong, its first international outpost.

In addition, some countries are adopting their own accreditation standards (based on the international standards). For instance, the Indian Healthcare Federation is developing accreditation standards for its members in an attempt to reassure potential patients about India's high quality health care.

b) Quality standard challenges:

There are some inherent drawbacks which challenge the development of medical tourism in the developing countries such as

- lack of standardization in medical care and cost,
- lack of regulatory mechanisms,
- Infrastructural bottlenecks and poor medical insurance coverage.

On the other hand, tourism and hospitality industries are themselves facing some major challenges to develop the infrastructure and services. Industry and government collabouration in terms of some incentives and creation of soothing environment can further make this endeavour easy for both in the service sector.

The immediate need is the establishment of health and tourism players consortium to discuss all these issues and maintain closer interaction and co-ordination to develop medical tourism as a growth engine for export earnings.

c) Ethical and legal issues:

By travelling outside their home country for medical care, medical tourists may encounter unfamiliar ethical and legal issues. For example, illegal purchase of organs for transplantation has been alleged in countries such as India and China. Health facilities treating medical tourists may lack an adequate complaints policy to deal appropriately and fairly with complaints made by dissatisfied patients. Leading medical tourism destinations such as India have set up complaints procedures and treat them very seriously. They also have set up compensation schemes to pay the financial damages awarded to a patient by a court who has sued a hospital and/or a doctor owing to lack of appropriate insurance or medical indemnity.

Medical tourism may also raise broader ethical issues for the countries in which it is promoted. For example in India, some argue that a policy of deluxe medical tourism for the classes and poor public facilities for the masses' will lead to a deepening of the inequities already embedded in the health care system. This is also an issue for Egypt to consider.

Annex E: Assessment of the sector in Egypt

E.1 History of Medical Tourism

Egyptian medical tourism as an industry with closely coordinated inputs from both "parent" service industries, health and tourism, is at an embryonic stage of development.

As such, when compared to the existing and indeed fast developing regional and international competition (predominantly from developing countries) Egypt has, at present, very limited products to offer.

However, in the last year or so there has been increased interest and focus by local and regional investors ,health care providers (including the Chamber of Healthcare Providers) and, perhaps to a lesser extent, the government, in securing a market share of this fast growing global industry.

E.2 Profile of sector performance

E.2.1 Obstacles in data collection

Not unexpectedly, several obstacles have been encountered by the consortium team when attempts were make to obtain the data necessary to analyse sector performance such as, for example ,export volumes of the service (i.e. expenditure of inbound medical tourism) import volumes of the service (i.e. expenditure of outbound medical tourists from Egypt to other countries),and total physical investments.

Some anecdotal statistics were obtained from the numerous interviews and visits made. However, their reliability was, at best, suspect as they were not and could not be extracted from records. Main reasons for these obstacles are:

i. Poor data base systems in the hospitals and MOHP relating to numbers of foreign patients, treatments received, length of stay, pricing … etc.
ii. Unwillingness of some interviewees to disclose data for security, taxation, confidentiality or the institutional culture which tends to be against information disclosure.
iii. The limited data available on health tourism does not differentiate between medical, medical wellness and wellness tourism.

E.2.2. Facility and product appraisal

Audit visits were made by the consortium team to several hospitals, including two governmental hospitals as requested by the Steering Committee of this project. Data obtained from these audits were based on semi-structured face to face interviews. The main objective of the visits was to evaluate the current preparedness and potential of the facilities for providing credible products and services to medical tourists.

In addition several interviews were made with health care experts and governmental officials to gauge their views of Egypt and the Egyptian healthcare industry potential to compete in the global health care business.

The data obtained from these activities will be used in the comparison and benchmarking phase of the project which will be reported in the next progress report.

E.2.2.1 Hospital selection Criteria

As there was little or no comparative data and records of hospital performance and competencies, and also that available information was difficult to validate, the consortium team has based the selection of hospitals on the following:

- Previous survey done by some members of the team on hospitals of possible acceptable standards.
- The team's various interviews with healthcare experts and medical consultants.
- The team's knowledge of the Egyptian healthcare service.
- Information gathered during extensive hospital management workshops conducted by some members of the consortium team.
- Specific requests from members of the steering committee to include governmental hospitals.

E.2.3 findings of hospital visits

E.2.3.1 The following table provides information and observations made during the hospital audits.

Information and observation table

Locality	Name of the Hospital	Specialties	Market segments	Comments
1. Alexandria	Al Salam Hospital	Broad range of treatments for emergency and community services	Local population With some individual emergency cases for foreigners resident in Alex	• Two different outlets, one of apparently good standards, but neither is accredited • The first one has good standard of hygiene • Clean kitchen • Well managed • The general look of the facility is good • The second one has poor standard of hygiene • No accreditation
2. Alexandria	ICC	Specialise in Heart Treatments	International Approach to Arab market but with no definite strategy or packages	• The centre is serving local patients and cannot compete with international standards of cleanliness and room size • Standards of hygiene appear adequate • Near by the centre there is the imaging centre which is of good standards • The general appearance of the facility is acceptable • No accreditation
3. Alexandria	Alexandria International Hospital	Various kinds of treatments. Once famous in oncology	Local market only and some sporadic cases from Libya	• Poor standards of hygiene • The general look of the facility is poor • no renovation done since establishment • No accreditation
4. Alexandria	German Hospital	Various kinds of treatment	Local market only	• Poor standards of hygiene • general view of facility is poor • storage of medical supplies and solutions was in the reception area of the hospital • No accreditation
5. Hurghada	El Gouna Hospital	Various kinds of treatments	Local and European tourists residing in the resort	• Currently not operating to its fullest potential • with very good prospect for medical tourism treatments with regard to residential domestic, expatriate and international tourism • good standards of services • good standards of Hygiene • The general appearance of the facility is very good • No accreditation

6.Sharm El Sheikh	International Hospital	Various kinds of treatment	Local and emergency treatments for tourists	• Needs a lot of improvements to meet requirements of foreign tourism • No accreditation
7. Aswan	Abu Simble Hospital	Various treatments, and out patients section for tourists and community services	Local and some expatriate workers in the region	• Basically neat appearance, pleasant rooms and gardens This would have supportive character for future medical tourism development • Kitchen procedures need to be improved (preparing raw food on a wooden cutter) • No accreditation
8. Aswan	Mubarak International Military Hospital	Various treatments, but predominantly for emergency or community services	Army personnel but also foreigners working in area	• Standards of this hospital could not be thoroughly assessed due to the sensitiveness of a military compound • The hospital can treat tourists in cases of emergency and has agreements with some tour operators • No accreditation
9. Luxor	Luxor International Hospital	Broad range of treatments for emergency and community services	Local and expatriates	• Good hygiene standards, • Good performance with regard to nurses training (Australian head nurse) • good professional experience with foreigners, caring for cross cultural issues, • Interested in elective treatments in the future • General appearance of the hospital is good but not yet up to international standards for medical tourism. • No accreditation
10. Cairo	Ain Shams Hospital	Various treatments, but predominantly for community services	Local	• No international potential seen except for some countries of the neighbouring African/Middle East market due to requirements of Medical Tourism (food, hygiene and the nursing system) • Skilful physicians • Physicians themselves do not believe the product is ready for any medical tourism treatments on an international certified level • Severe communication problems between nursing staff and doctors • lack of foreign language knowledge • No accreditation
11. Cairo	Al Kasr El Aini Hospital	Various treatments	Local	• No international potential seen except for some countries of the neighbouring African/Middle East

				market • Poor standards of food, • Poor standards of hygiene • Poor standards of nursing • Skilful doctors • Communication problems between nursing staff and doctor • Lack of foreign language knowledge • No accreditation
12. Cairo	El Sheikh Zayed Hospital	Various treatment specially emergency	Local	• Good standards of hygiene • Fairly good management • general look of the facility is good • Its location (away from traffic) and facility standards could qualify it to be potential place for treatment of tourists, specially with a lot of hotels around • Recently chosen to be for highway emergency cases due to its location • No accreditation
13. Cairo	Al Salaam Hospital in Maadi	Various treatments, especially high standard physiotherapy centre	Local and expatriates living in Cairo	• Operated by Indian management • No international potential seen except for some countries of the neighbouring African/Middle East market • Food appear of adequate quality • Good standards of hygiene • Nursing system seems to be working well being under foreign supervision • Overall cleanliness of the hospital is good • Doctors themselves do not feel that the hospital is ready for medical tourism treatments • No accreditation
14. Cairo	Dar Al Fouad Hospital	Wide range of treatments, Organ transplantation	Local and International	• Matching international standards • Obviously the market leader • Have treated few international patients with the agreement of the insurance companies • 15% of the bed occupancy from Arab market, which went down dramatically when the hospital decided to refuse Libyan patients due to non payment of bills • Good nursing personnel with a good number of foreign nurses • Focusing now on African countries and the Gulf • Agreements with BUPA,SOS & BREDA • Received 11 guests in 3 years from "operations abroad" • Limited foreign languages (only English) • Doctors skeptical regarding readiness for medical tourism treatments on a

				large scale • Accredited by JCI
15. Cairo	Anglo American	Various treatment	Local with few international patients	• Location is good • Rooms need to have the various medical services added to them • Some cases of foreigners from Europe through insurance companies like Eurocross • Nursing services need to be upgraded • General appearance of the hospital is old • Hygiene appears adequate • No accreditation
16. Cairo	Nile Badrawi Hospital	Various treatment	Local	• Location is impressive • Complete renovation of the hospital has started • Food quality is poor • General appearance of the hospital is acceptable • No accreditation
17. Cairo	57357	Paediatric oncology	Local and Arab	• Good facility, • Good standards of hygiene, • Good marketing strategies, and well managed • Already well exposed in the gulf • External and Internal appearance of the hospital is good • No accreditation
18. Cairo	Wadi EL Nile	Different specialties	Local and Arab	• Well managed • Good standards of hygiene • Good share of Arab market due to international foreign professors availability (advertised in Egyptian newspapers) • General appearance of the hospital is good • No accreditation
19. Cairo	IMC International Medical Centre	Different specialties but with established reputation in oncology and orthopaedics	Local and Arab	• Good and large facility • Good standards of hygiene • Well managed by the army • Has one of the most advanced pet scan devices FDG-PET • General appearance of the hospital is very good • A good deal of very skilful doctors • No accreditation
20. Cairo	International Eye Hospital	Ophthalmology and dental treatment	Local	• Good standards of services with competent management • General appearance of the facility is good • Specialities could present attractive

				proposition for medical tourists • Good standards of hygiene • No accreditation
21. Cairo	Shalaan Health System Clinics	Various treatments	Local with some Arab	• One of the one-day hospitals in Egypt • A good number of resident ex-pats frequent this clinic • No accreditation
22. Cairo	Cairo Medical Tower	Pool of doctors offering a wide range of treatments	Local with some Arab	• No relevant international potential seen except for some countries of the neighbouring African/Middle East market due to the general challenges for Medical Tourism in Egypt

E2.3.1 A handful of the private hospitals visited have the potential to provide a range of services to medical tourists. However significant efforts, commitment and capital will be required to develop and provide these services.

Efforts will include facility accreditation, skill upgrading (especially of nurses), credentialing of physicians, acquisition of marketing expertise and development of clear workable competitive strategies to position their medical products in international markets, to mention but a few.

The majority of marketing and promotional plans tend to target the local market with haphazard and undetermined strategy for medical tourists

E2.3.2 The majority of medical tourism cases are considered sporadic cases that are based on personal circumstances of the patients.

The great majority of the patients come from Arab countries where the treatment standards are inferior to those of the Egyptian hospitals. Examples include Libya, Yemen and Sudan.

Anecdotal evidence suggests that possibly around 40.000 foreigners currently come to Egypt (mainly for Libya) to be treated. It is also suggested that this number is decreasing as a result of regional competition from UAE and Jordan.

E2.3.3 Of all the hospitals and medical centres listed in the table only Dar Al Fouad Hospital and Gamma Knife Centre have international accreditation. Dar Al Fouad has a well established promotional plan targeted at the international market.

E2.3.4 The international Medical Centre enjoys a relatively high percentage of patients from other countries. The majority tends to be from the military.

E2.3.5 A common problem voiced by the majority of hospitals is the lack of supply of qualified and skilled nurses that could deliver medical services and care close to what medical tourists get in their countries. Such lack of skill renders communication between doctors and nurses difficult.

E2.3.6 Another common problem is the apparent lack of hygiene control procedures and system such as HACCP (Hazard Analysis Critical Control Points). This is particularly important from both safety and perceived quality of health care by the medical tourists.

ED2.3.7 There is generally (with notable exception) a lack of cross-cultural awareness when it comes to non- Arab clientele.

E2.3.8 At most of the facilities visited, the interviewees discussed the need for an association to help develop, promote and support medical tourism in Egypt (a sub- section of the Chamber of Healthcare Providers might also satisfy this need). It was suggested that the association will also guard the interests of its members and ensure effective and pro- active links with the appropriate ministries of the Egyptian Government.

E2.3.9 Recent discussions with Thomas Cook have revealed that the organisation is initiating a project for the promotion of number of hospitals and medical centres in international markets. Negotiations are currently underway with the following hospitals

- Dar Al Fouad
- Al Sheikh Zayed
- El Gouna
- Al Salam (Maadi)
- Wadi El Nil

A further meeting with Thomas Cook is planned this month to discuss project implementation.

E.3 Investment and Medical Tourism

The general investment climate in Egypt, Judging by the significant increases in FDI (Foreign Direct Investment) is very attractive. FDI inflow value increased from approximately $ 300 million in 2003 to approximately $ 11 billion in 2007. Projection for 2008 is likely to exceed $ 14 billion.

The confidence in Egypt as an investment location, to some extent, is reflected in the recent trend of regional investment in hospitals and clinics some specifically for medical tourism. Examples of these investments include:

The Tajmeel Clinic

This project is supported by Libyan, Gulf and Egyptian investment. The main objective is to attract Arabs to come to Egypt for plastic surgery the project includes building and operating six centres in Cairo, Hurghada and Sharm El Sheikh. The outlet in Nasr City is already operating; another one in Maryouteya will follow.

The Marassi Project

UAE developer Emaar Misr is planning a $ 5 billion extensive development on Egypt's Mediterranean coast. Its offshoot Emaar Healthcare group is planning to develop and manage, in the next 10 years, over 100 hospitals, clinics and medical centres in the Middle East and North Africa Region (MENA), the Indian subcontinent and south East Asia. A plan for a state–of–the–art cosmetic surgery centre on Egypt's North coast is in progress. The group is also planning to form strategic alliances with renowned medical specialists to bring about best practice standards in all the regions it serves.

Port Ghalib, Marsa Alam

This $ 1.7 billion investment is planning to include a substantial medical treatment centre to attract medical tourists

Andalusia Group for Medical Services

This is a Saudi group specializing in medical services. The group has now five modern hospitals, three in Jeddah and two in Alexandria. The group has recently been recruiting aggressively in Egypt and the Middle East. The Project will also establish a new nursing school in Cairo with the capacity to train 350 nurses each year.

It is quite likely that as the pace of investment in the Egyptian medical healthcare accelerates, the development of medical tourism will be speeded up, and will be supported by the substantial development of the tourism industry. It should be pointed out however, that foreign investment in medical tourism in Egypt is likely to pose significant threats to the local burgeoning industry.

Annex F: Benchmarking matrix

Country benchmarks	India
Profile benchmarks	
Polices and scale of investments	India's National Health Policy declares that treatment of foreign patients is legally an "export" and deemed "eligible for all fiscal incentives extended to export earnings. India has taken significant steps to becoming the "global health destination" envisioned by Finance Minister Jaswant Sing in the country's 2003 budget. Medical tourism to India is growing by 30 per cent a year. However, what the Indian government has in store for foreign investors still remains uncertain. Although the government has reduced controls on foreign trade and investment, incremental progress on economic reforms still hinder foreign access to India's vast and growing market
Business structure and management	The government and private hospital groups are committed to the goal of making India a leader in the industry. Wockhardt hospitals Group have established a chain of super specialty hospitals at Mumbai, Bangalore, Hyderabad, Kolkatta and Nagpour. The Apollo group has been a forerunner in medical tourism in India and attracts patients from Southeast Asia, Africa, and the Middle East. The group has tied up with hospitals in Mauritius, Tanzania, Bangladesh and Yemen besides running a hospital in Sri Lanka, and managing a hospital in Dubai.
Healthcare providers	The majority of the healthcare providers working in the medical tourism field are internationally accredited Apollo's business began to grow in the 1990s, with the deregulation of the Indian economy, which drastically cut the bureaucratic barriers to expansion and made it easier to import the most modern medical equipment. The first patients were Indian expatriates who returned home for treatment; major investment houses followed with money and then patients from Europe, the Middle East and Canada began to arrive. Apollo now has 37 hospitals, with about 7,000 beds. The company is in partnership in hospitals in Kuwait, Sri Lanka and Nigeria.
Product specialization	Well-known medical tourist destination for cardiac and orthopaedic procedures, heart surgery, and other rejuvenation therapies can be easily combined with a vacation. There is also the Ayurveda: Traditional, natural system of medicine of India which is gaining popularity in the international medical field
Product quality and price	To realise the objective of improving quality competitiveness of Indian products and services, QCI (Quality Council of India) provides strategic direction to the quality movement in the country by establishing recognition of India's conformity assessment system at the international level. Medical treatment costs in India are lower by at least 60-80% when compared to similar procedures in North America and the UK. For example, Apollo Hospital in New Delhi charges $4,000 for cardiac surgery, while the same procedure would cost about $30,000 in the U.S. Hip replacement is at £3.547 versus £7000 in the UK

Labour/personnel (doctors, nurses, tourist staff)	Indian corporate hospitals have a large pool of doctors, nurses, and support staff ensuring individualized care. Options for private chef, dedicated 24 hour nursing staff. Most Doctors working in medical tourism hospitals and centres are internationally certified. Nurses are highly qualified so are the Para-medics
Technology/research	All medical investigations are conducted using the latest technologically advanced cutting edge diagnostic equipment (1.5T MRI, multiple slices CT scan, 64 slice non invasive angiography scan). Stringent quality assurance exercise consistently ensure reliable and high quality test in a timely manner. A good deal of high technology medical equipment and machinery are produced in India Hospital groups such as Wockhardt and Apollo are participating in research work with the local universities And international research centres
Main product strength and weaknesses	The competitive advantage is of price, outstanding human resource, state-of-the-art hospitals equipped with latest equipment, alternative medicine like Kerala's health retreat, naturopathy and yoga, The country still faces problems such as overpopulation, environmental degradation, poverty and ethnic and religious strife. Such problems may dissuade some patients from travelling to India to receive healthcare.
Service chain benchmarks	
Ambulance	All major medical tourism centres have modern ambulance cars There is also India Aero medical services PVT Ltd which is the first private sector air ambulance. The fleet includes various types of pane and helicopter to move patients to the medical service providers
Support Service Standards: Infrastructure (Airports, accessing roads…etc.)	Infrastructure facilities are still problematic but the Indian government is taking steps to address infrastructure issues that hinder the country's growth in medical tourism. However the major airports are undergoing major upgrade with Delhi and Mumbai have been equipped with cat III A landing systems allowing aircraft to land in all weather conditions they also carry ISO900!&2000. Air ports of major cities are accessible by a network of motorways Major airports have 24 hr medical centres and chemists
Hotels and resorts	India has an abundance of deluxe and affordable hotels and resorts There are also medical packages which include special rates for recuperation guests.
Main location standards: (Urban cities, entertainment, shopping...etc)	Having cultural as well as historical attractions but lacking environmental conservation standards and site management. The South Indian city of Chennai has been declared Indian's Health Capital, as it nets in 45% of health tourists from abroad and 30-40% of domestic health tourists. India is rich with traditional art and crafts, and geographical landmarks and coastlines.
Medical tourism visas	The government offers special Medical Visa for treatment up to one year multiple entry . This visa also is valid for 2 accompanied. family members

Performance benchmarks	
Medical tourism visitors	The medical tourism sector is experiencing rapid growth, with approximately 500,000 foreign patients travelling to India for medical care in 2005, compared to an estimated 150,000 patients in 2002. It is expected to exceed 1m by 2010
Estimated revenues	Government and private sector studies in India estimate that medical tourism could bring between $1 billion and $2 billion US into the country by 2012
International/national accreditation	Hospital groups have not only international accreditation such as JCI but international partners such as Wockhardt hospital which has associated with Harvard Medical School National Accreditation Board for Hospitals & Healthcare Providers (NABH) is a constituent board of the (Quality Council of India) QCI, set up to establish and operate accreditation programme for healthcare organisations. Currently there are only 12 accredited hospitals with a further 53 in the process of seeking accreditation. Future plans include extending the programme to blood banks, diagnostic centres, dentists and Ayurvedic clinics.
Human resource competencies	Highly trained physicians (many worked, graduated or trained at international medical schools in USA or Europe. Fluent English speaking staff
Marketing benchmarks	
Medical tourism marketing strategies	The market segment that the healthcare industry is targeting is the patient population from Europe and the US. There are several patients of Indian origin residing in UK and US, who are already using the services of Western patients usually, get a package deal that includes flights, transfers, hotels, treatment and often a post-operative vacation. India has attracted patients from Europe, the Middle East and Canada Price competitiveness and high quality have extensively been used by the Indian marketing strategy Foreign consulate offices and tourism bureaus act as ambassadors for promoting medical tourism to get this business a big boost.
Medical tourism websites	Different websites offered by healthcare providers, tour operators and specialised travel agents Also, India as a leading country is very well handled by the websites of the international medical tourism journals and communities. Medical tourism suppliers are very well marketed through Medindia and medical packaged can be reserved through the WebPages. Also, India as a leading country is very well handled by the websites of the international medical tourism journals and communities. India has launched an online medical tourism platform. Kerala-based company e-medSol has launched an integrated medical travel platform called Virtual Global Healthcare Ecosystem (VGHE). The aim of the platform is to link together hospitals, patients and healthcare facilitators (HCFs).
Direct/relationship marketing	Offered by big healthcare providers like Apollo. However, most of the medical tourism products are sold through intermediaries to facilitate all travel procedures and support services. Wockhardt Hospitals (www.wockhardthospitals.net) will publish a 220-page guidebook entitled "Patients Beyond

	Borders" which will offer an in-depth overview of India's top international hospitals and clinics, selected health travel agents, nearby recovery and guest accommodations, and area travel information.
Specialist travel agents	International travel agents selling the Indian medical travel packages such as" recover discover" ,"World Med" are linked up with leading medical institutions in India .Almost all medical travel agents around the globe have India in their webs. Local Erco Travels.
Distribution through tour operators/airlines	India is very well promoted in the international market and its medical products are professionally distributed through several intermediaries - some are virtual tour operators. The American company "Med Retreat", British Company Recover Discover (www.recoverdoscover.com) and Star Hospitals (www.starhospitals.net) are among those selling the Indian medical tourism services. Also see PMT (Premium Medical Tourism) as an intermediary selling Indian product. PANGAEA MEDICINE is a virtual tour operator distributing Indian's medical products. Tour operator Kuoni travel has set up a specialised division for medical tourism.
Attendance by healthcare providers at trade shows, exhibitions…etc.	All Asian medical tourism leaders are active participants in the international medical tourism events to promote their services. Events such as World Healthcare Congress, The HIMSS AsiaPac08 Conference & Exhibition and Global Healthcare expansion. Several medical trade shows are already taking place in several parts of India.
Links with major health insurance companies	The company MedRetreat, in USA (the first company to do prequalification check-up) provides information on hospitals in India to Americans who plan to go abroad for treatment.
Image	India has the lowest cost and highest quality of all medical tourism destinations, however the general image of overpopulation can sometimes act negatively on the high stratum of medical tourists

Country benchmarks	Thailand
Profile benchmarks	
Polices and scale of investments	Both public and private sectors in Thailand are investing heavily in the field of general health care with priority in state-of-the-art hospitals serving medical tourism. Bangkok Mediplex Co. has signed a contract with Singapore's Pacific health care holding holdings to help manage Bankok's first non-hospital medical complex This will be Thailand's first lifestyle and medical retail complex The $30m investment will cover 12,000 square meters and occupy the first four floors of the Nusasiri Grand Condo with direct access to Sky train station.
Business structure and management	Government hospitals, mainly for the populace, are well distributed in the country. The Bangkok hospital group, catering for middle class patients is a network of 12 hospitals located throughout Thailand
Healthcare providers	Hospitals with Joint Commission accreditation is growing. The government is working to expand international accreditations to all new hospitals with view to remaining competitive with other countries of the region. Prime example of medical tourism establishment is the Bumrungrad *Bumrungrad International hospital is an internationally accredited, multi-specialty hospital located in the heart of Bangkok, Thailand. Founded in 1980, today it is the largest private hospital in Southeast Asia, with 554 beds and over 30 specialty centres. Bumrungrad offers state-or-the-art diagnostic, therapeutic and intensive care facilities in a one-stop medical centre. Bumrungrad serves over a million patients annually. Over 400,000 are internationals. They include thousands of expatriates who live in Bangkok and nearby countries, plus visitors from 190 countries around the world who come here for treatment.* With the growth of medical tourism new hospitals of such category are being developed. Most clinics assign patients a personal assistant for the post hospital recovery period and throw in a vacation incentive as well, and the deal gets even more attractive.
Product specialization	Neurological illnesses, Heart surgery, Orthopaedics and cosmetic surgery. Thailand is also renowned for gender sexual reassignment surgery. In addition, Thailand is promoting its ancient Thai herbal remedies to the EU, Middle East and Far East.
Product quality and price	High quality treatments at very affordable rates Thailand and India are top medical tourism exporters in the Far East. As an example, the cost of facelift including hospital stay, doctors' fees, travel from the UK and hotel accommodation £2.795, breast reduction at £2.585. A Lasik eye surgery in USA costs $ 3700 while in Thailand costs $730
Labour/personnel (doctors, nurses, tourist staff)	More personalized level of nursing care than westerners are accustomed to receiving in hospitals at home. Bumrungrad International hospital has more than 700 internationally -trained and board-certified doctors and over 1500 qualified nurses

Technology/research	The most up-to-date technology at Neuroscience centres such as computerized Tomography (CT), Magnetic Resonance Imaging (MRI, MRA, MRV), cerebal Angiogram, Electroencephalography (EEG), Video EEG Monitoring, Nerve Conduction, Study NCS and Brain Stem Auditory Evoked Response (BAER). Also Neurological Gamma Centre is available.
Main product strength and weaknesses	Competitive products and prices but yet to declare a system transparency such as in Singapore
Service chain benchmarks	
Ambulance	Public Emergency Medical Services (EMS) Handles all emergency calls. The calls are transferred to the command and communication centre (CCC) which in turn decides whether the ambulance car needed is a BLS (Basic Life Support) ambulance ALS (Advanced Life Support) ambulance. Normal response time is 10-15 min. The cars are modern with well trained emergency staff.
Support Service Standards: Infrastructure (Airports, accessing roads…etc.)	Adequate infrastructure with up-to-date airport facilities and networks of motor ways. Main airports have 24hr medical centres and ambulance service Additionally, many Asian airlines offer special frequent-flyer miles to ease the cost of returning for follow-up visits.
Hotels and resorts	The holiday resorts offer can attractive base for recuperation. Hotels and resorts are modern and with modern facilities. Almost all international chains are present in Thailand
Main location standards: (Urban cities, entertainment, shopping...etc)	Modern locations combining recent facilities with the ethnic culture. Distinctive places with the Thai atmosphere, culture and food. Thailand is world renowned for its entertainment and night life. Shopping also is considered good value for money. Thailand has some of the best resorts in the world
Medical tourism visas	Most countries of the world do not require visas. For countries which need Visas , it is easy to obtain such visa Medical tourism packages include visas
Performance benchmarks	
Medical tourism visitors	In 2007, Thailand received 1.3 million medical tourists of which 700,000 from the US and UK for only cosmetic surgery., and the rest came from Australia, New Zeeland and other regional countries. Currently, receives more than 1 million tourists (be inpatient or day surgery)
Estimated revenues	In 2007 $ 1.25 billion with expected annual increasing of 12 – 15%
International/national accreditation	A wide range of accreditations by JCI.
Human resource competencies	Most doctors are certified from American and British medical institutes. English speaking medical staff

Marketing benchmarks	
Medical tourism marketing strategies	Joint and collaborative marketing is very well in place. ThaiMed Associates have referral contracts with a range of premium- care local hospitals, clinics and health service providers-they pay the company a modest commission for referral clients. While India has attracted patients from Europe, the Middle East and Canada, Thailand has been the goal for Americans.
Medical tourism websites	Very good websites of providers. The website of ThaiMed Associates offer medical packages and sell services of different providers, hotels, wellness spas. Another important national website is: www.medical-tourism-in-thailand.com Most international websites in the field of medical tourism have Thailand on their destinations.
Direct/relationship marketing	Providers are promoting their services directly to overseas patients on the websites
Specialist travel agents	Thailand is one of the hot spots for medical travel agents. Bumrungrad International Hospital appointed Diethelm Travel Thailand to offer packages and support services for inbound patients.
Distribution through tour operators/airlines	Thai Airways' Royal Orchid Holidays is promoting medical packages to Bangkok, Chiang Mai and Phuket for travellers flying its Dubai-Thailand routes. Bumrungrad International Hospital appointed Flight North America as its preferred travel provider for patients travelling to the hospital. Also big operators like Med Retreat and PMT (Premium Medical Tourism) tour operator sell the Thai medical tourism packages. Also, PANGAEA MEDICINE is a virtual tour operator distributing Thai medical tourism products.
Attendance by healthcare providers at trade shows, exhibitions…etc.	Very good presence in international events especially those of the Asian's markets. Thailand has a large stand in the coming World new congress in San Francesco
Links with major health insurance companies	The company MedRetreat, in USA (the first company to do prequalification check-up provides information on hospitals in Thailand to Americans who want to go abroad for treatment. Med Retreat has strong ties with privately funded corporations, institutions and insurance companies looking to provide healthcare recipients with high quality, low cost alternatives to healthcare in the U.S. Thailand treated western expatriates across Southeast Asia. Many of them worked for western companies and had the advantage of flexible, worldwide medical insurance plans geared specifically at the expatriate and overseas corporate markets.
Image	Well positioned destination in global medical tourism

Country benchmarks	Singapore
Profile benchmarks	
Polices and scale of investments	Singapore medicine is a multi-agency government initiative that aims to develop Singapore into a leading destination for healthcare services. The agency comprises The Economic Development Board (EDB), Singapore Tourism Board (STB), and International Enterprise (IE). The Singapore's Medical tourism policy aimed at positioning Singapore as the Asia's leading medical hub not only serving medical travellers but also as the leading spot for education, training, research centres and institutes such as the Biomedical Research Institutes.
Business structure and management	The International Medical Travel Association (IMTA), a non-profit Singaporean association, represents the broad and diverse interests of medical travellers and the medical travel industry, including healthcare providers and medical travel facilitators from around the world. Membership is growing steadily with international hospitals, healthcare providers and businesses added recently. Singapore's Ministry of Health maintains a transparent healthcare system, publishing vital information and statistics such as infection control statistics and average hospital charges for common procedures online. Beyond international certifications, the quality of healthcare is also seen in published clinical indicators. Many healthcare providers in Singapore publish their success rates on their websites which are comparable to, if not exceeding, international standards.
Healthcare providers	Nine Singapore hospitals and two medical centres have obtained Joint Commission International (JCI) accreditation, accounting for one-third of all JCI-accredited facilities in Asia. Hospitals: National university hospital, Mount Elizabeth Hospital, Tang Tock Seng Hospital, Gleneagles Hospital, East Shore Hospital. Hospital groups also exist. For example, Raffles Hospital group and Pacific Healthcare which runs five major integrated medical centres in Singapore and planning to expand to India, China and Vietnam
Product specialization	General surgery, cardiac surgeries, neurosurgeries Orthopaedic surgery, and obesity surgery.
Product quality and price	Singapore's top healthcare providers have facilities that are comparable to five-star hotels. Patients are treated and recuperate in private and exclusive environments. Singapore is a multi-faceted regional medical hub, not only for healthcare services but also as a meeting place for medical professionals for conferences and training, as a base for healthcare consultancy and operations management, and as the centre for research and clinical trials. Prices are relatively higher than other competitors as Singapore has positioned itself as a medical tourism destination for niche segments. Big price savings on gastric surgery for obesity. £3,500 for a lap band.
Labour/personnel (doctors, nurses, tourist staff)	Renowned physicians trained in the best centres in the world.. Singapore's doctors and specialists continuously upgrade their clinical skills and knowledge by attending the Ministry of Health's Continuing Medical Education

	programme and other medical-related training. Bio-medical physicians are among the best in the world. Nurses and Para-medics are very well trained.
Technology/research	Very specialised research centres for Biopolis the S$500 million state-of-the-art infrastructure for the life sciences, Biomedical research including Bioinformatics Institute, Bio-processing technology institute, Genome institute of Singapore, Institute of Bioengineering & Nanotechnology, Institute of Medical Biology and Institute of Molecular and cell-biology. In addition, important leads to new therapies that benefit patients are being discovered through world-class scientific research fostered by the Agency for Science, Technology and Research (ASTAR) and its biomedical research institutes. Many medical technology companies have made Singapore their manufacturing base for their key products. These include Applied Bio systems, Baxter, Becton Dickinson (BD), Biosensors, CIBA Vision, Fisher Scientific, Hoya Healthcare, Japan Medical Supply (JMS), MDS Sciex, Siemens Medical Instruments and Waters.
Main product strength and weaknesses	Singapore won the "Best Medical/Wellness Tourism Destination" award at the TravelWeekly (Asia) Industry Awards 2007. Centre for Transfusion Medicine in Singapore is internationally reputed for its high standards of blood safety practices and management of blood transfusion services. There is hardly any weakness except probable the cost of treatments which is poised for niche markets only. (around 20-30% more than India & Thailand)
Service chain benchmarks	
Ambulance	Ambulance service is operated by Singapore Civil Defence Force (SCDF). .Vehicles used are state of the art and Para-medics are very well trained with different specialisations . All emergency cases are transferred to hospital free of charge. Non emergency cases are charged equivalent of $120.
Support Service Standards: Infrastructure (Airports, accessing roads…etc.)	Having one of the best international airport in the world, the best national airline, and the busiest port in the world are just the start of Singapore's world-class standards and achievements Changi International: 3 terminals (no 3 opened Jan 2008). All terminals are connected together with fast moving sky trains. Distance to town centre 20 km by motor way. The Changi International Airport is connected to some 180 cities around the world, making the island-state highly accessible. The airport has Medical clinic in each building and 24 hour medical centre for emergencies, chemists and ambulance service. • Medical tourists are given priority at immigration gates
Hotels and resorts	Deluxe establishments of high standards. Almost all international hotel chains have one or more hotels in Singapore. These vary from deluxe five star to 2 star
Main location standards: (Urban cities, entertainment, shopping...etc)	While Singapore's hospitals are no more reliable than the medical tourist facilities of their competitors, Singapore's pristine streets contrast sharply to India's overcrowded and underdeveloped cities to inspire confidence in the city-state's medical abilities. For those very nervous about going to a developing country for health care, Singapore's shining towers are a strong alternative People in Singapore live in an environment of high security and low crime.

	A dynamic and multi-cultural city rich in contrast and colour with strategic location, excellent infrastructure and great attractions. Singapore is a leading destination for business, leisure and duty free shopping. There are many attractions in Singapore. such as the isles of Singapore, museums, reserves, parks ethnic quarters, night clubs concert hall and art galleries
Medical tourism visas	Easy to get due to the facilities offered by intermediaries and the International Patient Service Centres. Medical tourists are given priority at immigration gates.
Performance benchmarks	
Medical tourism visitors	In 2005, some 374.000 visitors came to Singapore purely to seek healthcare. The country expects the number to double to 1 million medical visitors by 2012. The number of patients from the Middle East is also growing though it might start declining with the opening of Dubai medical city.
Estimated revenues	The 1 million foreign tourists (targeted for 2012) are estimated to generate USD 3 billion in expenditures, contributing more than 1 percent in value added to Singapore's GDP.
International/national accreditation	Singapore accounts for one-third of all Joint Commission International (JCI) accredited facilities in Asia. Seven Singapore hospitals are International Organisation for Standardization (ISO) certified. Beyond international certifications, the quality of healthcare is also seen in published clinical indicators.
Human resource competencies	Singapore's Ministry of Health only recognises medical degrees awarded by a select group of top-ranking universities such as the National University of Singapore (NUS), Oxford University Medical School, the Faculty of Medicine and Dentistry of the University of Dundee in the UK, Duke University School of Medicine, Harvard Medical School and Mayo Medical School in the US. In addition, joint training programmes with top foreign universities are also being forged. An example is the Duke-NUS Graduate Medical programme. Vocational training is also carried out with various colleges in UK and the US. English is the first language of education and business.
Marketing benchmarks	
Medical tourism marketing strategies	Marketing strategies are among the main factors of the Charter of Singapore Medicine. Healthcare providers in Singapore are customer-focused and are committed to delivering efficient service with the aid of advanced technology in well-managed healthcare environments
Medical tourism websites	Singapore-based International Medical Travel Association now has a website (www.intlmta.org) Excellent websites offering all relevant information

Direct/relationship marketing	Most healthcare facilities in Singapore have dedicated International Patient Service Centres to attend to international patients' needs, from their first enquiry and "meet and greet" at the airport, to interpreter services and support for accompanying persons, to the final send-off and post-treatment follow-up when patients are back in their home county e.g. Raffles International Patients Centre, Singapore Health Services (SingHealth) International Medical Service, Singapore's' Raffles Hospital, Alexandra Hospital and Mount Alvernia Hospital. Most Singapore's healthcare providers are represented through liaison offices in a number of feeder countries.
Specialist travel agents	Singapore's travel agents offer a wide range of facilities needed for medical tourists and arrange for all requirements in an excellent manner Gleneagles Hospital Singapore works in collaboration with local travel agencies to arrange for special health packages that will include logistic and travel requirements.
Distribution through tour operators/airlines	Distributed through international medical travel agents and the International Medical Centres of each provider Singapore's Raffles Hospital works with 50 agents in 12 countries. Parkway Group Healthcare has marketing offices in 15 countries including China, India, Bangladesh, Sri Lanka, Vietnam, Brunei, UAE, Brittan, Russia, Canada,, Indonesia, and Malaysia.
Attendance by healthcare providers at trade shows, exhibitions…etc.	Singapore is always present in medical tourism trade shows and medical research meetings, thus consolidating its strategy to become the medical hub if Asia
Links with major health insurance companies	All international insurance companies accepts Singapore hospitals treatments However for treatment abroad India and Thailand are a competition in mass market due to lower cost of treatments
Image	A clean cosmopolitan duty free city offering a high standard healthcare in the context of a trip. Also Considered one of the safest places in the world.. Singapore has a well-deserved reputation as a high-tech, clean and orderly city-state

Country benchmarks	Malaysia
Profile benchmarks	
Polices and scale of investments	Malaysia has ambitions to develop itself as a medical hub and to compete with its regional neighbours providing state-of-the-art medical facilities and services for tourists.. It attracts medical tourists and investors alike for its favourable exchange rate, political and economic stability and high rate of literacy. Malaysia's real estate market offers the potential for significant returns. Malaysian policy has employed the low exchange rate of the currency to attract both investments and tourists. Malaysia Favourable exchange rates (one Malaysia Ringgit is equivalent to approx. USD 0.26
Business structure and management	There is a highly active Association for Private Hospitals of Malaysia working to develop medical tourism. Private hospitals form an important part of the service industry of the country and address in particular, the medical needs of the country.
Healthcare providers	Few private hospitals are internationally accredited but they hold international certifications such as ISO and are nationally accredited. Such hospitals are Johor , Kedah, Kelantan, Melaka, Negeri Sembilan, Pahang, Perak ,Pulau Pinang , Sabah, Sarawak , Selangor and Wilayah Persekutuan - Kuala Lumpur
Product specialization	Main products are Knee Replacements. Also worth travelling to for: Cardiology, fertility, ophthalmology and cosmetic surgery
Product quality and price	Malaysia offers a wide array of medical procedures—including dental, cosmetic and cardiac surgeries—at significantly lower costs than in the West. In Malaysia, cardiac bypass surgery, costs around $6,000 to $7,000, Hip replacement at £2.205
Labour/personnel (doctors, nurses, tourist staff)	Medical specialists in the country are highly qualified professionals, and supported by well-trained nurses and Para-medical staff and sophisticated medical equipment. The staff is multi-ethnic, multi-lingua from various religious denominations, e.g. Islam, Christianity, Buddhism, Hinduism, etc.
Technology/research	Integrating technology into its healthcare system is broadly sustained by the national policy as well as the trade associations. There is also prudent investment in modern health technology. These include the increasing rate of technological change and variations in the use of healthcare technology. In addition, there is a growing private sector with emphasis on new technology such as MRI, 64-Slice CT Scan, and cyber knife
Main product strength and weaknesses	Affordable hospitalisation costs, low exchange rate of the currency. Few hospitals are internationally accredited

Service chain benchmarks	
Ambulance	Public Emergency Medical Services (EMS) Handles all emergency calls. These are BLS (Basic Life Support) ambulances ALS (Advanced Life Support) ambulances . The quality of ambulance service in Malaysia is improving. In 2006, all important ambulance services were provided by Red Crescent Society, St. John's ambulance, the department of Civil Defence & private hospitals. The Ministry of Health is planning to purchase 800 new ambulances and it is also looking to the possibility of privatizing the ambulance service to make it more efficient.
Support Service Standards: Infrastructure (Airports, accessing roads…etc.)	Accessibility to major international airports. There are 224 hospitals in the private sector located nationwide Comprehensive network of hospitals and clinics. 88.5% of the population are within 5 km of a public health clinic or private practitioner.
Hotels and resorts	Malaysia hotels & resorts offer a wide range of facilities and excellent accommodation to cater for all types of travellers, including health travellers for medical tourism. Visitors can benefit from a range of services offered and will appreciate the superb facilities, excellent infrastructure and attentive staff provided by Malaysia hotels. Additionally, most private hospitals provide hotel-like amenities with comfortable and well-appointed accommodation, ranging from suites to private rooms for single occupancy or more.
Main location standards: (Urban cities, entertainment, shopping...etc)	Modernized and clean Malaysia is a tourist's haven and it's no exception for patients coming from medical tourism. Patients get ample opportunity to enjoy the beaches or go for sightseeing and participate in other tourist activities during their recuperation. Malaysia also offers enough opportunity for critically-ill patients to take a leisurely vacation on the quiet beaches. An extensive tour of Malaysia not just works as an enriching experience but also actively contributes to the patient's recovery. Entertainment and several ethnic cultures mix together to give an exhilarating experience for visitors. Malaysia is a harmonious, plural society practicing a variety of religions and cultures
Medical tourism visas	The immigration authorities provide a "Fast Track Clearance" for foreign patients provided that the relevant hospital informs the authorities at the airport of entry to Malaysia (3 days prior to arrival). The patient and next-of-kin accompanying the patient may also apply for extension of their stay from the Malaysian Immigration Department. To ease entry formalities for patients, the Immigration Department of Malaysia has implemented a special Green Lane System at main entry points which expedites custom clearance for medical travellers.
Performance benchmarks	
Medical tourism visitors	The number of foreigners seeking healthcare services in Malaysia has grown from 75,210 patients in 2001 to 296,687 patients in 2006, according to the Association of Private Hospitals Malaysia. The Association of Private Hospitals Malaysia projected that the number of foreigners seeking medical treatment in Malaysia will continue to grow at a rate of 30 percent a year until 2010.

Estimated revenues	The large volume of patients in 2006 brought approximately $590 million in revenue.
International/national accreditation	Few of Malaysia's hospitals currently hold international healthcare accreditation. However, Malaysia has a very good national accreditation scheme of the Malaysian Society for Quality of Health (MSQH). Some hospitals have applied for different types of international accreditation bodies as a marketing tool
Human resource competencies	Highly-trained medical specialists, most with recognised post-graduate qualifications from the UK, Australia and USA All medical staff are English speaking
Marketing benchmarks	
Medical tourism marketing strategies	The national marketing strategy objectives are to promote Malaysia as a centre of medical excellence; to formulate a strategic plan for the promotion and development of health tourism in Malaysia; to promote smart partnerships between the government, healthcare providers, travel organisations and medical insurance groups; to promote Malaysia as a centre of excellence for medical conferences, seminars and medical education at all levels; and to study and identify the need and rational for better tax incentives, reasonable fee schedules, and amendments to rules and regulations relating to advertisement, in order to promote medical and health tourism.
Medical tourism websites	Different websites for the Association of Private Hospitals, national health care accreditation bodies, the Malaysian Society for Quality Healthcare, healthcare providers and travel agencies.
Direct/relationship marketing	Healthcare providers promote directly through their websites two types of packages a) Wellness Paradigm (Health Screening Packages) b) Disease Paradigm featuring services and facilities offered and prices of treatments.
Specialist travel agents	Local: Malaysian healthcare, Gorgeous Getaways International: MediTravels , Med Journeys, MedRetreat
Distribution through tour operators/airlines	Recently has been included in the promotional materials of some international tour operators as well as virtual tour operators such as PANGAEA MEDICINE. MAS Golden Holidays has been launched by Malaysian Airways in strategic partnership with HSC Medical Centre involving Malaysian airline representation offices. Also Malaysian healthcare providers have alliances with big operators such as Med Retreats and Recover Discover. The National Committee for the Promotion of Health Tourism in Malaysia utilizes airlines as a marketing arm.
Attendance by healthcare providers at trade shows, exhibitions…etc.	Began to participate international events. There are plans to host and organise health tourism exhibitions and trade shows as a means of promoting their medical tourism
Links with major health insurance companies	The company MedRetreat, in USA (the first company to do prequalification checkup) provides information on hospitals in Malaysia to Americans who want to go abroad for treatment. There are a good deal of international insurance companies in Malaysia that provides medical and health insurance (also know as Hospitalization and Surgical Insurance). The growth in medical and health tourism industry in Malaysia led private health providers and medical centres to establish a relationship with major international health insurance

	companies in order to get their referrals.
Image	New emerging destination with competitive features such as state of the art hospitals, low exchange rate and attractive multi-ethnical society. The World Health Organisation, in its 2007 World Health Care Report has given this fast growing Asian nation top mark for the state of its health care system. The WHO report concludes that Malaysia "has achieved a high overall standard of health care", a rating similar to more recognized western health care systems. The WHO report has put the spotlight on Malaysia as a premier medical travel destination. Malaysia is ranked among the top 5 Asian medical tourism destination besides India, Thailand, Singapore and Philippines

Country benchmarks	Jordan
Profile benchmarks	
Polices and scale of investments	The kingdom of Jordan has plans to become the healthcare vacation destination of the Middle East in four years. Kuwaiti investors have lunched a medical city project in Amman at a cost of $3.5 billion. The city will include hospitals with the latest medical technology, hotels, entertainment centres, swimming pools and gardens. The Jordanian health care providers are subject to stringent regulations and inspection by different governmental bodies
Business structure and management	The government is taking serious steps in the upgrading of the health care system to international standards. Several research groups are continuously assessing the competitiveness of Jordan's medical tourism sector and determining the preparedness for international market requirements and competition conditions including gaps in the environment of care infrastructure, facility management, proper credentialing of clinical personnel, infection control, use and management of healthcare data, appropriate assessments and care of patients as well as the quality of care and the response to patient safety issues. The recommendations of the groups are implemented.
Healthcare providers	In total, Jordan has 101 hospitals of which 58 are privately run, not all of them are accredited and only a quarter of those are members of the Private Hospital Association. One of the main government plans is to apply a hospital accreditation programme that appraises private sector hospitals, which will open a medical passage between Jordanian and foreign hospitals. A small clinic for psoriasis is opened at Movenpick hotel on the dead sea. Kempinski spa is the latest and more advanced project (opening 2008). There are plans to establish a dolphin-assisted therapy for children with physical and neurological disabilities.
Product specialization	Kidney replacement, orthopaedic procedures, neurological operations and heart surgeries. Dental work is also popular with incoming tourists. Jordan is very reputed for its medical wellness and wellness products especially in Gulf of Aqaba
Product quality and price	Jordan became a leader in medical facilities in the region when it became the fifth nation worldwide to carry out a successful heart transplant operation. An open-heart surgery in Jordan costs $ 16000; kidney transplant $14000 and liver transplant $70000. There is one good company for wellness products (www.rivageline.com) which is now aiming for quality certification l to increase its international exports.
Labour/personnel (doctors, nurses, tourist staff)	Jordan is self-sufficient when it comes to competent doctors and nursing cadres—over 17,000 doctors—which is in turn a high number for a population of five and half million. However, there are shortages in personnel with qualifications and skills in the field of community medicine and its related fields including health policy and management, epidemiology, education, environment, and health economics. Efforts are ongoing in this direction by the public sector in collaboration with WHO, USAID, and the World Bank
Technology/research	With a planned increase in the number of private and public hospitals and medical facilities, as well as upgrading

	existing ones, there will be an increased demand of new medical equipment, technology and services.
Main product strength and weaknesses	Jordan can offer the three types of health tourism products, medical, medical wellness and wellness. International affiliations, a competitive marketing strategy and well trained personnel in certain specialties are among the weaknesses.
Service chain benchmarks	
Ambulance	The Jordan Red Crescent plays a complementary role through providing a variety of health services and programmes that are developed to fulfil local and international needs. The quality of service is high. Standards and training of ambulant staff is carried out specialised instructors.
Support Service Standards: Infrastructure (Airports, accessing roads…etc.)	Queen Alia Airport is considered the main airport in Jordan 30 KM away from Amman. An office is available at "Queen Alia Airport" to help patients upon arrival and Jordanian embassies abroad are notified. It offers services such as quick immigration desk processing, information brochures on all hospitals and tourist sites and direct transportation to the hospital. There is also Marka airport which serves which serves domestic parts within Jordan and also King Hussein Int'l Airport. Due to the country's small size, any destination within the country can be reached by road
Hotels and resorts	The new stream of luxury hotels emerging in Amman, Petra, Aqaba and the Dead Sea is just adding quality to a refined product that is distinct, accessible and friendly, making Jordan a preferred destination to travelers' especially medical tourism tourists. Movenpick Resort, Dead Sea Spa and Marriot Jordan valley are the most famous resorts for wellness in Jordan. Novotel, Intercontinental and Kaminski will also soon be added as wellness resorts.
Main location standards: (Urban cities, entertainment, shopping...etc)	Travellers can enjoy the different tourist's attractions in Jordan including Amman, Petra, Aqaba, the Dead Sea and Jerash. They can enjoy the varieties of restaurants, shopping malls and museums in Amman, archaeological sites in Petrs and Jerash and the resorts of the dead and red seas
Medical tourism visas	Tourists coming for medical treatment will need a visa to enter Jordan whether for themselves or any of their companions. Upon arrival, all entry procedures are facilitated at the immigration desk at Queen Alia Airport.
Performance benchmarks	
Medical tourism visitors	The Department of Statistics' latest figures show 130,000 persons entered the country for medical procedures in 2004. That same year, 180,000 persons entered with them as companions. A 20% growth is expected annually The majority of foreign patients still come from countries of the region. According to officials, Sudan is the number one country sending patients to Jordan, followed by Iraq and the Gulf states
Estimated revenues	Official figures show that within the past three years, the health sector has been generating around $650 - 700 million

	annually in hospital fees from more than 120,000 foreign patients alone. In 2004, the Ministry of Health set a plan with the public and private sectors to generate $1 billion annually in medical tourism income by 2010.
International/national accreditation	Since most of the hospitals in Jordan lacks accreditation, government is planning to apply hospital accreditation programme in an attempt to appraise private sector hospitals A number of local hospitals established links with reputable international hospitals such as Mayo Clinic, Cleveland Medical Centre and Guys and St. Thomas Hospitals in the UK.
Human resource competencies	There is a shortage in Para- medical personnel's qualifications and skills. The government has a tourism training strategy on the national level but no specific medical and wellness training strategies. The management level in most medical tourism providers are ex-pats
Marketing benchmarks	
Medical tourism marketing strategies	Although having a medical tourism strategy, marketing is still considered an obstacle for Jordan to meet its medical tourism plans Jordan depends mainly on the Arab markets (mainly from Sudan, Libya and Iraq) as generating markets and has yet to be well positioned in the international market as destination for medical tourism
Medical tourism websites	There are several governmental & non-governmental agencies websites that helps in promoting medical tourism such as: private hospital association, Ministry of Health, Ministry of Tourism and the Jordanian Tourism Board
Direct/relationship marketing	Poor direct and relationship marketing schemes by its providers especially those offering medical tourism. Promotional materials of wellness products are mainly distributed by the JTB (Jordanian Tourist Board) in several languages.
Specialist travel agents	Currently some international T/A utilises Jordanian service providers, how ever with the growth of Amman medical city local specialised travel T/A should come to the sector
Distribution through tour operators/airlines	National carrier -Royal Jordanian- is suitable for scheduled flights for up market wellness travellers. It is a member of "one world alliance"
Attendance by healthcare providers at trade shows, exhibitions…etc.	Jordan attends almost all travel trade shows were wellness and medical wellness tourism is well promoted. Fewer efforts in the global healthcare events.
Links with major health insurance companies	German insurance companies send their patients to the dead sea area for skin treatment as the dead sea saline water prosperities are highly recommended by doctors. The main completion being Israel who shares with Jordon the shores of the dead sea.
Image	Jordan is becoming the health vacation jewel of the Middle East. The Arab World Competitiveness Report 2005 places Jordan as the top ranking Arab country in terms of business impact of health issues

Country benchmarks	Lebanon
Profile benchmarks	
Polices and scale of investments	Lebanese National Health tourism council (formed of the Ministries of Public Health, Tourism, Foreign Affairs, Information, Environment & all concerned Lebanese Syndicates) set up to 'Turn Lebanon into the hospital of the East'. The new body aims at tapping into the region's lucrative healthcare market and competing with other regional providers. Due to previous circumstances investment has yet to gain momentum
Business structure and management	Health care and Hospitalization services are well developed in Lebanon and are an integral part of the Lebanese culture (where medical ethics are the basic infrastructure of the Lebanese medical system). 48 medical societies, 161 hospitals, 48 hospitals with international accreditation, 144 medium and short stay hospitals, 17 hospitals for long term stays and seven university hospitals. There are several medical association attributing to the management of medical health care e.g. Lebanese Neurological Society, Lebanese, Brazilian Medical Association, Lebanese Society of Gastroenterology, Lebanese Ostomy Association, Lebanese Autism Society , Lebanese Society of Gastroenterology , Lebanon Chiropractic, Bone and Joint Decade Lebanon, Lebanese Health Care Management Association
Healthcare providers	48 hospitals with international accreditation,
Product specialization	Paediatrics, psychiatry, surgery, orthopaedics, the ophthalmology programme, the ENT programme, obstetrics, gynaecology and other areas. However, Lebanon is mostly reputable for plastic surgery such as Breast Augmentation, Breast Enhancement Surgery, Brow Lift, Camouflage Cosmetics, Chemical Peels, Chin Surgery, Face Lift, Hair Replacement, Breast Enlargement, Plastic Surgeons.
Product quality and price	Depend mainly on highly qualified Lebanese Doctors especially in Plastic surgery. The prices are lower than in US and EU The general quality is very high due to the large local market interest in keeping the young look.
Labour/personnel (doctors, nurses, tourist staff)	Of the 10,500 doctors who have completed their specializations in European, North American and Lebanese universities ,37% Graduated and specialised in European Universities,11% Graduated and specialised in North American Universities, 35% Graduated and specialised in Lebanese Universities
Technology/research	As the result of more than one century of cumulated education, Lebanon is trying to gain continuous modifications & upgrading of the medical technology. Most research work is done by universities, Centre of Psychological and Psychosomatically Studies and World health organisation.
Main product strength and weaknesses	High profile personnel with international credentials but suffering political instability. Investment in the sector is still limited compared to other competitors.

Service chain benchmarks	
Ambulance	Apart from hospitals ambulance, the Lebanese Red cross is the main provider of ambulant service mass built reputation since 1975 as an effective and professional Para-medical service provider. In 1995 the government declared LRC to be the national ambulance provider with funding from the state and services offered free of charge. Since 2005 the government has suspended the funding Funds from several international organisations have not been sufficient. Several international appeals has kept it going but the sustainability is in doubt.
Support Service Standards: Infrastructure (Airports, accessing roads…etc.)	To a certain extent affected by wars and political turmoil. However, with the new peace in sight and with the typical Lebanese talent for quick recovery of this situation is bound to change Has been unstable for sometimes , but expectations are favourable
Hotels and resorts	A wide range of hotels and resorts with excellent tourist support services
Main location standards: (Urban cities, entertainment, shopping...etc)	Lebanon is privileged with varied landscapes from sea side to mountains and beautiful valleys. This allows for a varied types of extravecular activities such as sea side, mountain, ice seeking. The Lebanese are masters of entertainment, whether be it western or middle Eastern entertainment. Lebanon is also rich in its cultural heritage and, offers visitors Archaeological tourism
Medical tourism visas	Most travel Companies do easily arrange for the Visa to Lebanon. However many countries are exempted. There is no Medical visas yet in place
Performance benchmarks	
Medical tourism visitors	There are no statistics available
Estimated revenues	Data not available
International/national accreditation	International accreditation already existing in a number of hospitals With the intention to improve the quality of care, control health expenditures, and protect consumers in Lebanon, the MOPH developed and implemented a new hospital accreditation policy in Lebanon, in collabouration with the World Bank through the health sector rehabilitation project (HSRP) to replace the old Alpha-Star rating system. With the assistance of an Australian company, Overseas Project Corporation of Victoria (OPCV), the MOPH developed an accreditation manual for hospitals in Lebanon (Hospital Accreditation Manual and Guidelines) containing multi-disciplinary standards of care.
Human resource competencies	The council is aiming to train all parties involved, enabling them to become acquainted with the existence of this sector and the market, and provide detailed, accurate information to clients. Personnel of K&M International Health Tourism are trained to communicate with patients and their families in their native languages, to respect their traditions, culture, religion, food and clothes requirements, in order to assure them as much as comfortable home like environment. Most of the hospital staff is local with foreign supervisory elements in

	some cases
Marketing benchmarks	
Medical tourism marketing strategies	Health and wellness tourism, an innovative niche market in Lebanon's tourist industry, is about to move out of the specialty market and become an important asset to the Lebanese economy with the establishment of the Lebanese Council for National Health Tourism. The Health Tourism council has managed, through teamwork with various health ministries and related sectors, to create concrete relationships with seven Arab Countries, including Saudi Arabia, Dubai and Kuwait.
Medical tourism websites	Very good websites for the Council, K&M international and healthcare providers e.g. Univadis Medical Lebanon, Orthopedagogues Official website of the Syndicate of Orthopedagogues in Lebanon. Domain: www.orthopedagoguesliban.com
Direct/relationship marketing	The council provides the patients who come to Lebanon with all facilities and services from the moment they leave their country to the moment of their return. Pre-planned, tailor made packages are prepared to make patients and that families accompanying them, feel at home and to let them get the most out of their "healthy visit"
Specialist travel agents	K&M International- Health tourism
Distribution through tour operators/airlines	K & M International, is entrusted to promote this new sector emphasizing that health care and hospitalization services are well developed in the country and are an integral part of Lebanese culture K & M International - Health Tourism s.a.l has been recently based in Lebanon in order to serve as a regional office for the medical industries in the Middle East, in association with European & American based Companies.
Attendance by healthcare providers at trade shows, exhibitions…etc.	Weak, However we expect more active participation as the political situation settles down
Links with major health insurance companies	Links are very limited due to major product being cosmetic surgery and also the local political situation
Image	Lebanon's reputation is a rejuvenating place and a healthy state

Country benchmarks	UAE
Profile benchmarks	
Polices and scale of investments	UAE announced a general strategy on the federal level, to coordinate between the governmental and the private departments' efforts, and the tourist authorities, to support and develop medical tourism. A report issued by the information centre of Abu Dhabi Chamber of commerce and Industry (ADCCI) expected that the country's medical tourism to grow by 15 per cent annually, in line with the increase of tourists' demand on such tourism
Business structure and management	The Abu Dhabi Chamber of commerce and Industry ADCCI report recommends establishing new hi-tech hospitals, hotels and resorts chain with an international and specialist managements, building more institutions and medicine factories, beside organise more conferences and medical workshops and training courses Dubai Healthcare City will become the internationally recognized location of choice for quality healthcare and an integrated centre of excellence for clinical and wellness services, medical education and research.
Healthcare providers	Dubai Healthcare City DHCC has invited leading academic medical institutions and pre-eminent health care organisations to participate in Dubai Healthcare City, including Harvard Medical School and the Mayo Clinic, among many others. DUBAI has several hospitals of international standards such as: The American Hospital Dubai, The Belhoul Hospital, the Cedars – Jebel Ali International Hospital, The Emirates Hospital in Jumeirah the Gulf Plastic Surgery Hospital, International Modern Hospital and others.
Product specialization	UAE is a new entrant in the medical tourism market and seems difficult to identify specific products but plastic surgery and aesthetic surgery seem to be the more apparent specialization so far. DHCC's total site comprises of two phases, including the disease treatment, prevention and wellness facilities. The first phase, located behind Wafi City, Dubai, is approximately 4.1 million square feet in size. The second phase, dedicated to wellness facilities, comprising of 19 million square feet of land, will allow DHCC to offer the complete healthcare continuum, including hospitals, wellness and clinical centres. DHCC's services and facilities will be available to the UAE, the whole of the Middle East, and surrounding regions
Product quality and price	Treatment packages are provided on a tailor made basis. The medical tourism products will be at a very high quality but it is expected to be sold at high prices for the niche market segments. The medical services and facilities that can be found in Dubai are of an extremely good standard.
Labour/personnel (doctors, nurses, tourist staff)	Depend mainly on well trained foreign staff to offer all services relevant of the medical tourism value chain.

Technology/research	Dubai HealthCare City will also transfer the up-to-date technology. Partnerships with international universities such as Harvard are also an avenue for research and technology.
Main product strength and weaknesses	High quality but high tailored prices Despite "expert" predictions that new high-quality hospitals will enable locals to get a higher level of care locally than before and will keep them at home, the number of Arab visitors travelling to Asia for medical treatment shows no sign of abating.
Service chain benchmarks	
Ambulance	Some hospitals have their own ambulance system as well as Dubai Ambulance Services Centre which provides its services to the public. The Ambulance Services Centre launched Intensive Unit mobile cars last year which travel on Dubai roads to provide services to all patients. The vehicles are well-equipped to transmit information about the heart patient's blood pressure, diabetes and other data to the hospital. Dubai Ambulance Services Centre is well established. The Centre is also working in collaboration with Dubai police to set up a database, which will include heart patients with crucial cases so that rescue teams could reach the locations of the patients and has full information about the patient's health condition. The ambulance system is introducing new services to streamline the rescue of heart patients in collaboration with Dubai police; Experiments are being conducted on the new services for heart patients on the basis of an initiative to establish an electronic link between the Operation Room of Dubai Police and heart patients in critical condition. Under one programme, heart patients will be provided with small size alarm devices linked with the police operation room, which will help them call the ambulance by pressing a button.
Support Service Standards: Infrastructure (Airports, accessing roads…etc.)	The Dubai International Airport was built in 1959. The airport is 4 km (2.5 miles) south-east of the city centre. The Dubai Intl. Airport is continuously developing and currently has 3 terminals and accommodates 100 airlines, which connect to over 140 destinations. Dubai International Airport introduced its services online to facilitate and make it available 24 hour a day and accessible for all users. There is a 24-hour fully-equipped medical centre. The "Special Lounge" is a dedicated lounge for unaccompanied minors and passengers with special needs is available in the Arrivals Hall. Some hospitals such as the American hospital in Dubai & the WELCare hospital may provide, upon request, an ambulance pick up at the airport (prior arrangements are to be made). Also there is air transportation facility in some hospitals (the American hospital has a helipad for Emergency use and has an affiliation with a well known Flight Ambulance Company (FAI).
Hotels and resorts	A wide range of hotels and resorts but relatively expensive in Dubai, Abu Dhabi and other UAE states
Main location standards: (Urban cities, entertainment,	Dubai Health care City site is located in Bur Dubai alongside Rashid Hospital, a short distance from the tranquil surrounds of Dubai Creek and the Creek side park. DHCC lies in the heart of the city and is accessible from Abu Dhabi and Al Ain through Sheikh Zayed Road. Additionally, it is located 4 kilometres from Dubai International Airport and is

shopping...etc)	only 5 minutes from City Centre Mall. In the near future, Dubai Metro will allow access to DHCC patrons via the Green Line with its own designated stop. This state-of-the-art railway system will allow easy access in and out of DHCC for the patients, families and staff. A wide range of entertainment and shopping areas.
Medical tourism visas	The Abu Dhabi Chamber of commerce and Industry report recommends easing issuing of the visit visas for the medical tourists, and encouraging investments in the treatment tourism sector for both local and international investors.
Performance benchmarks	
Medical tourism visitors	The UAE is aiming to attract about six million tourists from a worldwide 600 million tourists with special needs. It also predicted the number of medical tourists arriving in the country will grow by 15 percent annually until 2010.
Estimated revenues	A 2007 Abu Dhabi Chamber of Commerce and Industry report forecast medical tourism to become a US$2 billion industry for the UAE by 2010
International/national accreditation	As Dubai Healthcare City DHCC's key strategic collaborator, Harvard Medical International HMI is leveraging its experience gained by working with partners around the world to help develop the infrastructure for both high-quality health care delivery and medical education at DHCC. Al Corniche Hospital has become the fifth Abu Dhabi hospital to achieve JCI status.
Human resource competencies	Because of the high level of salaries UAE medical tourism sector attracts skilled personnel from different spots all over the world.
Marketing benchmarks	
Medical tourism marketing strategies	The two municipalities of Dubai and Abu Dhabi have marketing strategies to promote the healthcare services to local and expatriate population and people from different countries, particularly from the Arab world.
Medical tourism websites	Good websites of medical tourism providers
Direct/relationship marketing	Not competitive to those of the Asian and Far East destinations.
Specialist travel agents	Treatment packages are provided on a tailor made basis. These are provided by several institutions and agencies.
Distribution through tour operators/airlines	Etihad airlines and Gulf Air are offering special promotion fares for medical tourists. PANGAEA MEDICINE which is a virtual tour operator also distributes medical tourism products of UAE
Attendance by healthcare providers at trade shows, exhibitions…etc.	Dubai has hosted two big events for medical tourism in 2008 the European Health Tourism Congress held in February and Global Health Expansion to be held in October

Links with major health insurance companies	Most of Dubai major hospitals are linked with major international insurance companied due to the excellent quality of service providers and the large population of EU,US and other expatriates
Image	A very well positioned destination for Business tourism, Meetings, Incentives, Conventions and Exhibitions with outstanding Shopping and entertainment atmosphere

Country benchmarks	Tunisia
Profile benchmarks	
Polices and scale of investments	Tourism sector has already become the country's second highest foreign currency earner and the second largest employer in Tunisia. Tunisia has only recently decided to get in on the medical tourism act and is beginning to offer extremely attractive prices to bring foreign patients into the country. Currently, most medical tourists are from neighbouring countries such as Libya, Algeria and France. Fifty two percent of investments in medical industry come from private sector.
Business structure and management	Thalassotherapy projects in the tourist area such as Hammamat are very well positioned in the international market. Medical tourism mainly cosmetic surgery is a recent business in Tunisia. Tunisia is reportedly making moves to become a medical tourist hub in its own right backed by its image in the medical wellness and wellness activities
Healthcare providers	Specialised resorts and hotels provide thalasso centres at very high quality such as Hotel Hammam Bourguiba, Hotel les Thermes, Residence des Thermes, Hotel Les Sources, Hotel les Thermes and Hotel Cheylus. Most of these hotel could be used for recuperation of medical tourists
Product specialization	Thalassotherapy, thermal cure, plastic surgery / beauty care and
Product quality and price	Medical care in Tunisia is adequate, with a number of new, private "polyclinics" available that function as simple hospitals and can provide a variety of procedures. Specialised care or treatment may not be available yet.. Facilities that can handle complex trauma cases are being built. While most private clinics have a few physicians who are fluent in English, the medical establishment uses French and all of the ancillary staff in every clinic communicates in Arab and/or French. Public hospitals are overcrowded, under-equipped and understaffed. In general, nursing care does not conform to U.S. standards. However private cosmetic surgery clinics are modern with competent staff. A hair transplant package including airline ticket from UK, accommodation and relevant services cost between £1400 and £2130. Hip replacement at £3.000. The cost of a facelift package including hospital stay, doctors' fees, travel an hotel accommodation is £2.615, while the same package upper eyelid surgery costs £1.155 and costs £2.185 for breast reduction.
Labour/personnel (doctors, nurses, tourist staff)	High profile personnel at the Thalassotherapy centres of resorts and Free standing operations. Private clinics and hospitals especially those with tourism connections have well trained medical staff. To become a cosmetic surgeon in Tunisia students must first complete the standard medical studies which lasts seven years. Following this, doctors then specialise in cosmetic surgery which takes a further four years of study. Many Tunisian doctors train for this specialty in France or the USA. Altogether the total study time is 11 year
Technology/research	The government is giving great attention to medically related researches with view to improving health care service in Tunisia. Quebec National Scientific Research Institute (INRS) and "Lyon Biopôle," are partnering with Tunisian

	technological poles to carry out researches in biotechnology, medical and pharmaceutical. R Quebec National Scientific Research Institute (INRS) and "Lyon Biopôle," are partnering with Tunisian technological poles to carry out researches in biotechnology, medical and pharmaceutical Since 2004 research budget in Tunisia represents 1% of the contrary's GDP
Main product strength and weaknesses	Health conditions have shown significant improvement in recent years, although diet and sanitation remain deficient by EU standards. Cosmetic surgery standards are high and private clinics for this product are up-to-date. Major weakness is the high variance in pricing the procedures
Service chain benchmarks	
Ambulance	Immediate ambulance service may not be available outside of urban areas. Even in urban areas, emergency response times can be much longer than in the United States. Doctors and hospitals expect immediate cash payment for health care services although some hospitals may accept credit cards.
Support Service Standards: Infrastructure (Airports, accessing roads…etc.)	Tunisia has highly developed health infrastructure facilities on par with international standards. Tunisia has 6 main international airports; the main international airport for scheduled flights is Carthage International Airport (TUN) near Tunis. Its second airport is Monastir (MIR) which is served for low cost charter flights from all over Europe. Monastir is nearer to most of the holiday destinations. Road conditions vary greatly throughout the country. There are excellent dual carriageways, as well as unnerving, one-vehicle wide, un-surfaced roads. Rural roads are poorly maintained. Plans are in progress to improve Tunisia's roads.
Hotels and resorts	For several years now, private Tunisian investors have undertaken a bold policy to develop the hotel network, sometimes with the support of foreign loans. They have thus built a lot of quality hotels and holidays resorts. Tunisia achieves more than her fair shair of Mediterranean tourism
Main location standards: (Urban cities, entertainment, shopping...etc)	Tunisia in general is a tourism friendly country with very positive customer care appearance in street and hotels. It is full of entertainment and attractions that medical tourists and their companions can enjoy. Hammamet and Djerba are suitable recovery destinations for those looking for relaxation after treatment. Beautiful sandy beaches provide opportunities to do nothing other than enjoy the sunshine, pleasant coastal scenery and the pleasure of inactivity. Those visitors without any post-operative impediments can enjoy swimming and a variety of water sports.
Medical tourism visas	Morocco, European Union countries, USA and Canada citizens do not need a visa to enter Tunisia for up to three months stay. All other countries will require a visa to enter Tunisia
Performance benchmarks	
Medical tourism visitors	Tunisia reportedly drew just 500 international tourists for surgery, mainly cosmetic procedures, in 2005. There has been continuous growth in the industry. Speculations set the number medical tourists this year at 8000-10,000 Tunisia has become an extremely popular destination of choice for patients from France and Italy as well as from Arab countries. .

Estimated revenues	Close to 6.4 million holidaymakers visited Tunisia in 2005 contributing $1.98 billion to the country's economy. With a view to becoming a prospect destination for medical tourism, it is expected to bring higher revenue. There are no reliable statistics on medical visitors
International/national accreditation	Hospital accreditation has not been fully implemented. However the MoH is working to develop the necessary prerequisites. Norms and standards concerning facilities, buildings and human resources (needs and qualifications) were adopted in 1993, and national sanitary information system is being developed. There are a number of public and private initiatives to set up a mechanism in order to ensure high quality in health care provision. There are few private establishments working on getting ISO certification. The JCI 64th world congress will be meld in Tunis in 2009
Human resource competencies	Medical experts are highly qualified and have had medical training in United States and European countries. Investment in training is in place especially by hotel spas which invest time and money to train personnel on the job.
Marketing benchmarks	
Medical tourism marketing strategies	Thalassotherapy is recognized as an important niche product and Tunisia hopes to expand the product considerably. Cosmetic Surgery is also popular when it comes to Tunisia Competing aggressively with France using its low cost thalassic products and high quality services.
Medical tourism websites	The Flying Patient is managed by Oumeima Ben Youssef, a dedicated health care professional with more than 20 years experience gained in both Tunisian and British hospitals. This organisation provides total service for med. Tourists. It specialises in Cosmetic and Orthopaedic Surgeries and treatments
Direct/relationship marketing	Tunisian medical server Contains information on medical, dental, pharmacy and veterinary resources
Specialist travel agents	Estetika Tour is the medical tourism pioneer in the French speaking world .Estetika Tour organises all-inclusive cosmetic and dental surgery travel at affordable prices to Tunisia. There are quite a number of travel agents that are specialised in medical tourism promote packages of cosmetic surgery to Tunisia
Distribution through tour operators/airlines	Thalassic treatments and cosmetic surgery in Tunisia is covered in several specialised tour operator's brochures. Tunis air promotes Thalassic treatments in its on flight magazine
Attendance by healthcare providers at trade shows, exhibitions…etc.	Tunisia has very good attendance record in all major travel trade shows where medical wellness is well advertised. Tunisia has also very consistent representation in medical tourism trade shows
Links with major health insurance companies	Being mainly a cosmetic surgery destination, links with health insurance companies is very limited
Image	Tunisia might not be at the top of people's lists when they research medical tourism destinations. However, it has a quaint image as a green coastal destination for Thalassotherapy and rehabilitation.

Country benchmarks	Hungary
Profile benchmarks	
Polices and scale of investments	Hungary is well positioned as a traditional destination for medical wellness and wellness...The Mediterranean was Hungary's first covered thermal water park is located at Debrecen and cost US$9.6 million. A US$ 10.4 million spa facility has been developed at Hajduszoboszlo in Eastern Hungary and there's a US$ 43.4 million spa complex at Egerszalok. The European Union has been a substantial investor in Hungary's medical and wellness spas. On the other hand Hungary has positioned itself as a destination for firstly, Dental Travel and secondly for beauty and plastic surgery. The private sector has the lion's share of dental tourism.
Business structure and management	There are 2 main bodies influencing health care, Ministry of Welfare and Federation of Hungarian Medical Societies (MOTESZ). Hungarian clinics are friendly and personable ones with all the modern dental equipment and experienced staff taking care of patients as if they were a part of the family. Clinics use up-to-date equipments, which makes for accurate diagnosis and efficient and effective treatment. The Budapest clinic is among the best in Europe for implants. Many spas are classified as 'medicinal' and are certified by Hungary's Ministry of Health as having some healing effects.
Healthcare providers	Hungary is one of the leading destinations for high quality and low cost dental care. Dental Care Treatments is offered by professional clinics located in Budapest or in different parts of the country such as the city Győr which is one hour driving from Budapest offering the same quality of the clinics of Budapest but at lower prices. FirstMed Centre is a well-positioned centre for dental care. For cosmetic surgery as well as dental treatment Beauty Hungary is a good provider.
Product specialization	Dental Care Treatments and cosmetic surgery. Medical wellness treatment is also offered in high quality at its famous spas
Product quality and price	The general quality of treatments is excellent .Cost of filling at £45, root canal treatment £104, full acrylic dentures £336, dental implants at£ 665 and porcelain bonded crowns at £ 173. Hungary is also becoming a destination for cosmetic surgery
Labour/personnel (doctors, nurses, tourist staff)	Hungary has generally high quality well qualified medical staff. It also has reputed dentists.
Technology/research	In 2004, the National Institute for Strategic Health Research was established to guide governmental health policy decision making by undertaking activities in four main areas: health informatics and information policy; health economics; health services and health system research; and health technology assessment and coverage policy.

Main product strength and weaknesses	Competitive dental care prices attracting European markets mainly English. Some spa sites are traditional and need compatible strategies for rejuvenation and marketing.
Service chain benchmarks	
Ambulance	Private ambulance services in Budapest are available such as the Trauma Hospital Ambulance and the Falck Ambulance Service. Hospitals in Budapest also operate their own ambulant services Generally ambulant services standards are good
Support Service Standards: Infrastructure (Airports, accessing roads…etc.)	Until 2011, Budapest Airport will be investing more than 261 million euros in expanding and modernizing the airport's infrastructure. With the planned investments, the owning company aims at meeting the demand of growth and enriching and improving customer service and comfort. Road network around Budapest is good The new Budapest Airport will promote further economic growth for the region and will create additional jobs – directly and indirectly. In realising all these projects, the new owners of Budapest Airport Zrt. comply with the obligations laid down in the privatization contract. The airport is accessible by a network of motorways and high ways and shuttle bus and trams are available form the airport to centre of Budapest. The new air port will have extensive medical facilities.
Hotels and resorts	Hungary has a mixture of modern internationally operated Hotel and traditional spa hotels since the Austro-Hungarian empire The airport has 2 hotels in the vicinity.
Main location standards: (Urban cities, entertainment, shopping...etc)	Budapest is the main location and the other countryside's towns are with ecological assets. Entrtainment, restaurants Historical sites, are plentiful. Lake Balaton has a wealth of resorts and sport activities
Medical tourism visas	Though visas are not required for most countries of the world it is easy to get it for those who require it. Medical visas are also available but require support documents proving availability of funds
Performance benchmarks	
Medical tourism visitors	Hungary draws large numbers of patients from Western Europe and the U.S. for high-quality cosmetic and dental procedures that cost half of what they would in Germany and America. Since joining the EU more than one million Austrians travel to Hungary each year for dental treatment. Other EU countries are following suit. There are no reliable statistics on the Number of Medical tourists visiting Hungary Estimates are in the vicinity of 1.5 million
Estimated revenues	No accurate data available
International/national accreditation	Limited compared to the key players in the field. However , being a European country , the necessity of accreditation is not as vital , as a marketing tool as in developing countries

Human resource competencies	During Hungary's economic reforms in the early 1990s, nursing education was elevated from diploma level to degree level to match that of other countries in Western Europe. Until 2005, the development of the bachelor of science in nursing programme in Hungarian universities was supported by staff from Western Reserve University (Cleveland, Ohio) to make it more compatible with the degrees available in Western countries. Now there are several colleges offering degrees in nursing. In 2006 the Doctoral School of Health Sciences at the Faculty of Health Sciences, University of Pecs (Pecs, Hungary), was established with the aim of strengthening research in nursing and in health sciences The high quality of Hungarian nurses has led to bleeding process to countries such as USA and Canada which if continues , will represent a thread to health care in Hungary
Marketing benchmarks	
Medical tourism marketing strategies	Mainly targeting the other European markets where dental treatments are not covered by health insurance and dental care products are offered by private clinics at high rates. Hungary promotes itself as the land of spas and wishes to be strongly associated with water tourism.
Medical tourism websites	Medical tourism providers have good websites offering all treatments products, prices and all support services such as locations of entertainments and tourist activities. The is also a special web site for dental tourism which represents the largest sector in medical tourism However, such websites are not as outstanding as those of Singapore, India, Malaysia or Thailand.
Direct/relationship marketing	International medical service centres that belong to the providers are in use but are not as the same standard as those of Singapore for example.
Specialist travel agents	MedicalTravel Consultants is the first Hungarian-American owned and operated medical tourism company based in the United States with a branch in Budapest. This company has its own web site which promotes mainly dental tourism other international medical travel agents : Globe Health Tours in Scotland, Hungarian Dental Travel in London, Kreativ Dental in Wales, Perfect Profiles in UK, Health base USA
Distribution through tour operators/airlines	Hungarian medical products especially dental care and cosmetic surgery are distributed through tour operators mainly in Europe such as Dental Travel in England Hungarian medical tourism products are distributed through virtual tour operators such as PANGAEA MEDICINE.
Attendance by healthcare providers at trade shows, exhibitions…etc.	Hungary is usually well represented in international trade shows specifically those in the USA and EU countries
Links with major health insurance companies	Well connected and recognized by international health insurance companies
Image	A traditional spa destination with distinctive environmental assets and tourist services offered at reasonable prices. Has lately developed the image of being the best dental tourism destination in EU

Country benchmarks	Turkey
Profile benchmarks	
Polices and scale of investments	Turkey plans to become the world's largest medical tourism destination within 15 years. The policy invests in the geographical proximity to Europe, making it an easy flight for many Europeans.
Business structure and management	Two large hospital groups. Istanbul's Acibadem Health Group, which is in Istanbul, Bursa and Kocaeli and Memorial healthcare group. The Acibadem Health Group operates with over 6000 employees of which 1000 are physicians, in 20 different locations through a network of 6 general hospitals, 5 outpatient clinics, 1 ophthalmology centre, medical centres, and laboratories.
Healthcare providers	A number of great modern hospitals are ISO certified. Hospital groups such as Acibadem's hospitals and medical centres have JCI accreditation. Istanbul's 170-bed Yeditepe University Hospital has become the latest in Turkey to achieve JCI status. And specialises in orthopaedic surgery The memorial health care group has a special guest house for families of medical tourism patients. There is an increase of number of internationally accredited medical centres and hospitals. Also, the Largest Turkish hospitals are affiliated with prestigious U.S. based institutions: Andolu Medical Centre operates in conjunction with Johns Hopkins, while Istanbul Hospital is a Harvard Medical Centre partner
Product specialization	Treatment packages for kidney, liver, pancreas and stem-cell transplant operations for medical travellers. Oncology, cardiology, and ophthalmology are also provided. However, Orthopaedics eye survey (especially lasic operations) tube baby, dentistry, plastic surgery, psoriasis, Thalassotherapy and thermal springs are the main specialty attracting tourists
Product quality and price	Turkey is a great place to rest after medical treatment. Package deals can set patient up with massages, spa treatments and visits to the famous Turkish baths for post-op relaxation. Hip replacement at £4.725. The cost of laser eye surgery including hospital stay, doctor's fees, travel and hotel accommodation is at £610, facelift at £2.884, upper eyelid surgery at £1.245, breast reduction at 2.466.
Labour/personnel (doctors, nurses, tourist staff)	Most Doctors and surgeons have post graduate qualifications. They use the same high quality materials that are used in the Western Hemisphere in well equipped hospitals.
Technology/research	Turkey is moving into the new area of "medical out-sourcing" where hospitals subcontract services such as overnight

	use of their computer systems and laboratory facilities to the overburdened medical care systems in western countries. Memorial hospital group for example has Genetic lab developed the first beating heart cell in Turkey.
Main product strength and weaknesses	The country benefits hugely from wellness and spa tourism, as well as a large and increasing number of internationally accredited medical centres.
Service chain benchmarks	
Ambulance	There are 7 ambulance service providers over and above ambulance services offered by hospitals. The standards of most of them are high. There is also "Angle med flight worldwide air ambulance operates to and from Turkey
Support Service Standards: Infrastructure (Airports, accessing roads…etc.)	Turkey has several convenient and well-equipped airports that have opened up .Air fairs with the national carrier are reasonably priced. There are ten airports in Turkey, many of which accept international flights and have good transportation links. All major airports have emergency medical facilities
Hotels and resorts	A wide range of hotels and resorts at different prices and service standard. Antalia is the Mediterranean part of Turkey with a wide spectrum of hotel chains
Main location standards: (Urban cities, entertainment, shopping...etc)	Turkey is originally an international tourist area with good location standards. However, its over reliance on mass tourism has relatively affected its standards. Turkey is rich with cultural and historical monuments as well as beautiful beaches, mountains and lakes all near the warmth of the Mediterranean coast.
Medical tourism visas	There is no Medical visa per se, however the application form for a standard visa includes questions for medical tourists. Visas for US and EU citizens can be obtained at the arrival air port
Performance benchmarks	
Medical tourism visitors	Being new in the medical tourism Turkish Medical Institutions served only an estimated 15,000 foreign patients last year. This number is expected to grow at an estimated rate of 15%
Estimated revenues	No Reliable data.
International/national accreditation	The Turkish medical training model is based on that the U.S. and other western countries, so doctors receive numerous years of training. Doctors pride themselves on their attentiveness to patients, so a high level of personally catered care can be expected. The JCI world congress was held in Antalia in 2007
Human resource competencies	Turkey has no apparent problem with nurses, middle management, Para-medics..
Marketing benchmarks	
Medical tourism marketing strategies	Very good websites by providers, service centres and operators.

Medical tourism websites	International offices to promote services to international patients are offered by providers. For example, Yeditepe has an International Patient Service Department that can arrange medical, travel and hotel services. Acıbadem Healthcare Group also has International Patient Centre. "International Patient Centre" staff at Acıbadem Healthcare Group meets the needs and expectations of international patients within 48 hours of their request by acknowledging them on the treatment plan, length of stay, average package pricing that includes all medical, social and accommodation costs
Direct/relationship marketing	Western patients usually get a package deal that includes flights, transfers, hotels, treatment and often a post-operative vacation through international operators Turkey's leading healthcare institution Acıbadem Healthcare Group is targeting Gulf countries for more patients
Specialist travel agents	Most health tourism travel agents are now putting Turkey on their web sites and brochures
Distribution through tour operators/airlines	Sanatollia Care is a Turkish Medical and dental care service organisation based in Istanbul, Ankara, Izmir and Antalya. They have representatives in Canada, United Kingdom and Netherlands. American Med Retreat company distribute the Turkish medical products and have partnerships with providers in Turkey
Attendance by healthcare providers at trade shows, exhibitions…etc.	Turkey has organised its first International Health Tourism Congress, held in Antalia in March and promoted its medical tourism products. Attendees included representatives of hospitals, private clinics, spa establishments, insurers and tourism agencies. A total of 37 presentations were given to 300 delegates and was dedicated to the topics of general health tourism, spa and wellness tourism, and health tourism for the older generation.
Links with major health insurance companies	The company MedRetreat, in USA (the first company to do prequalification checkup) provides information on hospitals in Turkey to Americans who want to go abroad for treatment. The three hospital groups in Turkey agree to direct-billing arrangements with insurer CIGNA International Expatriate Benefits (CIEB). CIEB is a leading provider of international benefits for expatriates, business travellers, and retirees abroad. A business unit of CIGNA International, CIEB provides coverage for expatriates in more than 170 countries and jurisdictions around the world. CIEB uses 3,200 physician-screened practitioners in 438 cities and 156 countries outside the US
Image	Turkey is a growing health tourism destination with knowledgeable doctors offering medical services ranging from eye surgery to dental implants. There are also hot springs which serve to treat or cure many ailments, including Psoriasis. The general image is like that of general tourism. Good value for money

Country benchmarks	Germany
Profile benchmarks	
Polices and scale of investments	Germany spends 8.8% of its GDP (105-2% above EU average) on health services.. A good deal of hospitals is funded by insurance companies. German investors are currently directing a good deal of investment to developing countries e.g. Philippines
Business structure and management	German health care enjoys an excellent reputation abroad, both in terms of quality and cost. Medical tourism is booming and Germany could be making more of it. The management generally is very well structured
Healthcare providers	Well established providers such as Heiligenfeld Health Centre for Psychosomatic Medicine and Mental Health and SanaFontis in Freiburg/Breisgau for cancer patients. There are dozens of other reputable medical centres of international standing. Germany is also famous for its medical wellness and spa providers such as Kursanatorium Altenberg for rehabilitation and spa
Product specialization	Orthopaedics particularly Spine surgery and novel cancer treatment, Aesthetic surgery, Bone marrow transplantation, Brain surgery. Anaesthesia / Treatment of Pains and mental health treatment.
Product quality and price	Product quality is impeccable .Prices are lower than most western EU countries and considerably higher than Asian countries Example: Hip replacement at £5.296, facelift package including hospital stay, doctor's fees, travel and hotel accommodation at £4.609 while the same package for eyelid surgery at £1.832 and breast reduction at £3.830. (more details in process benchmarking section)
Labour/personnel (doctors, nurses, tourist staff)	All medical staff are highly trained and of high calibre. Most medical employees are trained in quality management and possess certificates given by the Landesärztekammer (State Medical Association) respectively by the EFQM. Moreover the employees are trained to lead clinic-internal quality circles. Most hospitals have quality management structure consisting of leading group, quality coordinator, measures catalogue, project groups, responsible persons who develop criteria etc. Also part of a continuous and comprehensive system of the quality-development is a systematic complaint-management, an operational proposal system and a regular survey of employees and patients.
Technology/research	Medicine made in Germany - this stands for qualities like reliability, a highly developed sense of responsibility and an excellent standard of qualification and technology German health professionals have always been known for intensive research to help prevent and combat diseases as well as developing the latest operation methods. They do this through constant communication and cooperation with their European and American colleagues
Main product strength and weaknesses	The product strengths are numerous due to high standards of doctors, nurses, support services and the quality of equipment used (mostly locally made). The weaknesses, few as they are basically in the local health care system. From a German perspective, the ability to maintain a costly social insurance system based on pay-roll contributions,

	while competing in an increasingly globalise economy is jeopardized by a number of developments: a) in the year 2030 almost one third of the population will be over the age of 65, giving Germany the highest proportion of elderly among the industrialized countries, and b) a shrinking income base due to the declining share of wages to the GDP and the high unemployment rate of about 11%. The increase of cost percentage contribution from GDP can be partially attributed to that. This of course has negative impact on medical tourism.
Service chain benchmarks	
Ambulance	Municipal bodies do have the responsibility for providing Emergency Medical Services but do not necessarily fulfil them by themselves. The task of performing pre-hospital care can also be performed by non-profit or private-owned organisations. Thus, EMS in Germany is provided by either St. John Ambulance, The Red Cross, The "Malteser Hilfsdienst,The "Arbeiter-Samariter-Bund", Privately-owned companies and All ambulances are state of the art machinery and equipment with an advanced data communication with hospitals. There are also air ambulance facilities (example Munich airport) for air transportation in case of illness or injury.
Support Service Standards: Infrastructure (Airports, accessing roads…etc.)	Almost all major German air ports have 24 hr medical clinics and are designed to meet the requirements and specification for disabled travellers and travellers with special needs. All major airports have fast intercity trains from the arrival halls to centre of towns. All other modes of transport are available at very high standards The Munich Airport Clinic has two surgery rooms and 13 beds. Individually designed packages can include diagnosis, inpatient or outpatient surgery, hotel accommodation, transfer to a partner clinic for long-term treatments, and sightseeing programmes for patients and their families. The clinic will even collect patients at the aircraft and take them through immigration. Frankfort and new Berlin airports are being modelled to include similar medical facilities as those in Munich airport.
Hotels and resorts	All hotel chains in the world are present in Germany. All medical service providers are close to the accommodation facilities with special hotel rates for hospital clients and accompanied guests
Main location standards: (Urban cities, entertainment, shopping...etc)	Germany as a centre of culture, entertainment and excellent shopping with beautiful, superb and scenic landscape and fairly pleasant climate shouldn't give any time for boredom for the patients and accompanied family /friends. Restaurants and museums make Germany a tourist haven.. Urban cities offer first class accommodation, excellent cuisine (with extensive consideration for ethnic and religious requirements), friendly and cooperative personal (English or native language spoken) and perhaps more importantly, an all-around diligent attendance of the patient and his/her relatives. A variety of sporting activities, theatres, festival halls, casinos, galleries, local festivals, shopping facilities, and so on, offer a quite varied daily programme.
Medical tourism visas	Germany has a medical visa which allows multiple entries and accompanied family members

Performance benchmarks	
Medical tourism visitors	An estimated 50,000 foreign travellers choose Germany as a destination to receive medical treatment away from home. Experts say up to 10,000 Arab patients go to Germany for medical treatments.
Estimated revenues	Estimated at €125 million for the German economy.
International/national accreditation	Like the UK few German hospitals have international accreditation, however, they are recognized as one of the world best medical centres. Internal quality management is based on the principles of Total Quality Management (TQM). Self-assessments are executed according to the principles of the EFQM (European Foundation for Quality Management) and from it various quality project are derived.
Human resource competencies	Germany is considered one of the best, if not the best country in medical human resource competencies
Marketing benchmarks	
Medical tourism marketing strategies	Traditional markets to Germany are Middle East and North Africa. Recently many Americans find Germany a much cheaper option than treatment in their home country. More strategies to also attract new markets such as patients from US, Russians and Eastern Europeans in addition to the traditional markets of the Middle East and North Africa.
Medical tourism websites	Very good websites by providers, Lufthansa and intermediaries. Also a general site "German Medical net "which is a very comprehensive medical tourism site.
Direct/relationship marketing	This is carried out by medical health intermediaries and various clinics for local market. Most medical health tourism direct marketing is carried out for treatments overseas
Specialist travel agents	There are several local and international specialised travel agents operating in Germany e.g.; Tui,Kuoni
Distribution through tour operators/airlines	Delta-med international is one of the intermediaries which is in a position to meet the needs of foreign patients and is setting new standards in service. German medical tourism products are also distributed through virtual tour operators such as PANGAEA MEDICINE. Lufthansa has announced its partnership with German Health, and AXIS Holidays Worldwide offering fully organised medical packages to Germany from the UAE. A collaboration between Lufthansa City Centre, Wetzlar, Lufthansa German Airlines, the Steigenberger group of hotels and the German Industry .The Arab Health Exhibition and Congress in Dubai saw the introduction of the German – Arab Medical Network in the U.A.E. offering the best international medical treatment specifically catered to the Middle East market. Lufthansa is the only airline in the world entertaining an Intensive care unit (ICU) which can be operated in wide body aircraft for the transport of patients who need intensive medial treatment. A Lufthansa spokesman mentioned that last year they had over 40 transports and the demand is growing, particularly in the Arab world"

Attendance by healthcare providers at trade shows, exhibitions…etc.	The German providers and in many cases regional counsels representation is seen in international trade fairs. Germany itself hosts several medical tourism fairs last being this year in Munich In November this year the largest medical and health tourism show "Medica" will take place in Düsseldorf attracting an estimated 4300 exhibitors from 65 nations
Links with major health insurance companies	German health service is partially managed by insurance companies. Almost all international health insurance companies accept treatments in Germany
Image	Has long been a medical tourism destination due to its pleasant and clean climate but also because of its very accessible clinics and the German thoroughness.

Country benchmarks	South Africa
Profile benchmarks	
Polices and scale of investments	South Africa has been a leader in the medicine community since the first human heart transplant was performed in Cape Town in 1967 and today the high standard of cosmetic surgery in South Africa is world renowned. South Africa offers modern, private cosmetic surgery clinics with access to the latest technology and treatments as well as distinguished surgeons. In addition to the great facilities and care, South Africa's favourable exchange rates of its Rand are another attraction to medical tourists seeking out plastic surgery and a vacation all at the same time and at affordable cost. In general terms. SA spends 3.6% of GDP on health services
Business structure and management	South Africa's health system consists of a large public sector and a smaller but fast-growing private sector. Health care varies from the most basic primary health care, offered free by the state, to highly specialised hi-tech health services available in the private sector for those who can afford it. The public sector is under-resourced and over-used, while the mushrooming private sector, run largely on commercial lines, caters to middle- and high-income earners who tend to be members of medical schemes (18% of the population), and to foreigners looking for top-quality surgical procedures at relatively affordable prices. The private sector also attracts most of the country's health professionals. The number of private hospitals and clinics continues to grow. Four years ago there were 161 private hospitals, with 142 of these in urban areas. Now there are 200. The mining industry also provides its own hospitals, and has 60 hospitals and clinics around the country. Most health professionals, except nurses, work in private hospitals. With the public sector's shift in emphasis from acute to primary health care in recent years, private hospitals have begun to take over many tertiary and specialist health services. Public health consumes around 11% of the government's total budget, which is allocated and spent by the nine provinces. How these resources are allocated, and the standard of health care delivered, varies from province to province. With less resources and more poor people, cash-strapped provinces like the Eastern Cape face greater health challenges than wealthier provinces like Gauteng and the Western Cape. Hospitals and clinics in South Africa are vying to attract more international medical tourism patients from around the world. With many private, world-class medical institutions, highly skilled doctors, serene vacation settings and somewhat close proximity to Western Europe; Europeans have been travelling to South Africa for medical treatment for some time now. Although the cost of medical treatment is not as price competitive as many of the other popular medical tourism destinations of Asia, the quality of treatment is world-class and available tourist’s attractions are astounding. With the boom of medical tourism the Medical Tourism Association of South Africa (SAMA) was founded 2006 which should play a vital role in the advancement of this industry.

Healthcare providers	South Africa offers modern private cosmetic surgery clinics with access to the latest technology and treatments for medical tourists. e.g. Bay View Private Hospital Mossel Bay, South Africa In South Africa, there is an abundance of excellent spas and wellness centres scattered all around the country from mountain hideaways, beach retreat to game lodges and even a wellness centre located on a golf course.
Product specialization	Cosmetic surgery. Common procedures requested include breast augmentation, liposuction, facelifts, tummy tucks, eyelid surgery and nose reshaping as well as dentistry. SA is also known to have the best Thyroid doctors in the world A growing number of tourists to South Africa are planning a vacation for sun, safari and surgery. In other words they mix plastic surgery with a safari tour.
Product quality and price	The majority of South African medical tourists are after cosmetic surgery, with breast augmentations as the number one procedure. South African prices however around 40-60% of those in the US, making them one of the more expensive medical tourism hubs. Tourists to South Africa will find a very polished experience, however, with a mature medical tourist industry. Cost of facelift in a package including hospital stay, doctors, fees, travel and hotel accommodation is at £4.029, while the cost of the same package for upper eyelid surgery is at £1.912 and £3.685 for breast reduction.
Labour/personnel (doctors, nurses, tourist staff)	Because of the high standards of medical education in SA. There is a great international demand for SA doctors. Migration of doctors has been considerable. Cuban doctors are employed to off set the deficit. Same case with nurses. This situation has basically affected rural areas health service with little effect on plastic surgery clinics in big cities
Technology/research	Advanced with regard to cosmetic surgery operations South Africa has a long legacy of medical innovation and world-class healthcare in leading edge medical technologies, expertise and value-for-money attracting foreign clients for a myriad of cosmetic, corrective or dental procedures. The South African medical research counsel (SAMRC) has an annual budget of R440m .,Number of staff 850 and 45 research units
Main product strength and weaknesses	South Africa's strength lies in the packaging of its tours, rather than the outright price of their medical capabilities. While their hospitals are at first world standards, South African facilities have far less experience with heart or joint surgery and specialist hospitals in India or Thailand are better for these patients. Prices are also higher than competitors
Service chain benchmarks	
Ambulance	There are 24 privately owned emergency service providers with Netcare911 being the largest. There is also Flying Doctor's service operated by AMREF which is the largest in Africa evacuating 600 people annually. All emergency services have emergency physicians, certified nurses in advance life support.
Support Service Standards: Infrastructure	The Johannesburg Airport medical clinic offers a wide variety of services to travellers. The public can see a physiotherapist, consult a doctor, have their eyes tested, visit the dentist - and even go for botox injections!

(Airports, accessing roads…etc.)	JNB is in the throes of massive redevelopment in the lead up to the 2010 World Cup tournament, including development of a new central terminal building, new car parks, a station on the new Gautrain network, and hotel expansions. Consequently, new facilities are constantly coming online in the interim, and considerable construction work may lead to changes in existing available facilities.
Hotels and resorts	There are many good hotels, lodges and resorts to choose from. Mountain resorts offer the choice of healthy but gentle exercise, or gentle contemplation with views of distant peaks and huge skies. Resorts in Animal reserves offer high quality camera safaris. The Cape also offer great ocean side resorts
Main location standards: (Urban cities, entertainment, shopping...etc)	With the amazing climate and wonderful scenery, there are so many perfect settings for real rejuvenation and 'decompression'. Superb fresh food and wines are available at extremely low prices. Lazy days at private lodges can be spent looking at magnificent wild animals, spotting beautiful birds, seeing rare and unusual plants, or playing a round or two of golf. Shopping for African art crafts is good value for many experience
Medical tourism visas	Is facilitated through travel agents such as Serokolo. Emergency cases arriving by air are exempted from entry visa
Performance benchmarks	
Medical tourism visitors	South Africa being a new comer in medical tourism with mainly one specialty (Cosmetics): there are no reliable data on medical tourism.
Estimated revenues	No reliable data available
International/national accreditation	South African has a National Accreditation System named Council for Health Service Accreditation of South Africa which assists health care facilities to meet standards for patient safety and quality care and The Health Professions Council of South Africa (HPCSA), an autonomous organisation committed to promoting the health in South Africa, determining standards of professional education and training and fair standards of practice. Many cosmetic surgeons are members of the General Medical Council in the UK. Cosmetic surgeons should be registered with reputable medical associations such as The South African Medical Association (SAMA)
Human resource competencies	South African medical schools have produced professionals whose qualifications are recognized worldwide
Marketing benchmarks	
Medical tourism marketing strategies	Marketing strategies aim at increasing numbers of foreign tourists, mainly from the US and UK who take advantage of the low Rand (currency) and South Africa's medical excellence and integrate plastic surgery operation into their Safari tourism programme. Washington, D.C:. Venue International Professionals, Inc. has signed a cooperative agreement with Serokolo Health Tourism in order to promote health and medical tourism services in South Africa. Serokolo Health Tourism (Serokolo) is a health and medical tourism company, based in Johannesburg, South Africa.

	Scalpel Safaris to South Africa: Medical tourists on these so called scalpel safaris are take advantage of everything South Africa has to offer in the plastic surgery world. They leave for an exotic vacation in South Africa, have the surgery, relax and recover, and return home a completely new, rejuvenated person.
Medical tourism websites	Good presentation in the websites of the international tour operator and Serokolo travel agent but modest website of healthcare providers.
Direct/relationship marketing	Not mature as the medical care product (mainly plastic surgery) is sold in a tourist package by specialised travel agents and tour operators.
Specialist travel agents	Specialised medical tourism companies (e.g.: Serokolo) offering medical and hospital services for clients: Serokolo affords international and foreign patients access to world class and quality health care through private and public medical centres / clinics and specialists at affordable and competitive prices. Serokolo offers services such as Medical visa applications, basic initial medical screening, global medical quotations, personalized client liaison by qualified medical personnel, accommodation before and following medical/ surgical treatment to allow for reputation, tours to South Africa's magnificent scenery, collation of medical account and account management, aero medical evacuation services from host country to South Africa, securing specialist appointment and hospital admission, medical Tours for medical practitioners, medical/ Surgical case management, including clinic visits.
Distribution through tour operators/airlines	South African medical tourism products are distributed through large tour operators such as Treatment Abroad as well as virtual tour operators such as PANGAEA Medicine. Big operators such as the American Med Retreat have partners of healthcare providers in South Africa to sell their products to the American market.
Attendance by healthcare providers at trade shows, exhibitions…etc.	South Africa providers attend regularly medical tourism trade shows
Links with major health insurance companies	The company MedRetreat, in USA (the first company to do prequalification check-up) provides information on hospitals in South Africa to Americans who want to go abroad for treatment.
Image	South Africa is a solid candidate for tourists that want to be pampered after their cosmetic surgery and don't mind paying a premium for it.

Country benchmarks	Egypt
Profile benchmarks	
Polices and scale of investments	No identified policies and regulations for the medical tourism sector. In addition, very modest articulation among authorities (mainly Ministry of Health, Ministry of Tourism, Ministry of Investment ...etc) for developing the field. , Remarkable growth in investment ventures initiated by both sectors healthcare and tourism - mainly private sector.
Business structure and management	There is currently an emerging trend of chain and group business with regard to the Eye centres (such as EL-Maghraby) and labs such as El-Borg. However, the hospital groups have yet to be established on a wide scale. Hospital Management standards have not been professionally applied and style and competence vary greatly from one hospital to another depending on the hospital administration and executives.
Healthcare providers	There is no reliable data on providers working in medical tourism in Egypt but they are mainly private sector hospitals such as Dar Al-Fouad and Al-Salam hospital and these deals mainly with local expatriate community. Some private centres and clinics serve outpatients from specific Arab markets such as Libya, Sudan and Yemen.
Product specialization	No identified products to be marked although some Arabs come for oncology treatment However, there are potentials for dental care products, eye surgeries and plastic surgery. However, there are potentials for dental care products, eye surgeries, plastic surgery and thalassotherapy.
Product quality and price	A system of setting quality standards has not been established thus resulting in a wide range of variance in quality standards between hospitals. Variance in prices of hospitals and medical services providers is based on location and facilities and demand. Doctors fees vary greatly due to demand for the doctor personally. However, a big operator like treatment abroad has indicates some package rated for treatments in Egypt as follows: cost of a facelift packages including hospital stay, doctor's fees, travel and hotel accommodation is £2.610 while the same package for upper eyelid costs £1.275 and £2.710 for breast reduction.
Labour/personnel (doctors, nurses, tourist staff)	Large pool of skilful doctors but few l have international credentials as in the other competitive destinations, Also, communication problems between doctors and nurses exist in addition to doubts of the abilities of the current nursing staff to meet standards of the international medical tourism market.
Technology/research	Almost all equipment and technology are imported by big hospitals and specialised centres such as Gamma Knife. Limited research activities with the exception of post graduate researches at the university.
Main product strength and weaknesses	Main strength lies in the current position of Egypt as the biggest tourist destination in the Middle East which offers potentials to the integration of the health offerings into its current tourism products.

	Also, Egypt is reputed of its skilled physicians and its rooted healthcare history. However, absence of strategies, regulations and cooperation among authorities as well as the environmental and hygienic problems in some places are the main points of weakness.
Service chain benchmarks	
Ambulance	Some hospitals have fairly well equipped ambulance vehicles while others use the local ambulance service which is relatively poor with regard to equipment and paramedical personnel. There is a plan to improve the national ambulance system by purchasing new vehicles from South Africa to cover all cities of Egypt with centres in different districts of Cairo and Alexandria to shorten time between call and arrival. It is rumoured that the South African company NET911 will be managing the new ambulant service
Support Service Standards: Infrastructure (Airports, accessing roads…etc.)	International Airports are relatively well equipped for tourist flows but still lack many facilities to receive international patients.
Hotels and resorts	A wide range of accommodation facilities at Cairo, Alexandria and major tourist destinations.
Main location standards: (Urban cities, entertainment, shopping...etc)	Urban cities and main tourist destinations are at reasonable standards while some places have environmental problems as well as hygienic and food safety challenges. A wide range of entertainment places for dining at restaurants and social activities.
Medical tourism visas	Easy to get visas, but will need to consider special chapter for international patients
Performance benchmarks	
Medical tourism visitors	Not available. Until now there is no reliable data on numbers of medical tourists - The only available figures are for international tourists in general.
Estimated revenues	Not Available
International/national accreditation	Very few are accredited mainly Dar Al Fouad and gamma knife centre and other hospitals are proceeding to finish acquisition of JCI (Al-Salam Hospital, Maadi) National accreditation has yet to be implemented
Human resource competencies	Still need lot of training programmes, personal skill development especially for the nursing staff and Para-medics. Egypt will still need to qualify a larger number of therapists to work at the spa centres at hotels and resorts. Tourist personnel responding to the specific services of the medical tourism sector will need to be created.
Marketing benchmarks	
Medical tourism marketing	No available national marketing strategy

strategies	Dar Al Fouad, Al-Salam Hospital, Maadi and some other few hospitals have some form of marketing strategies, the rest have no strategies for marketing but depend on the personal skills of the managers owners ,doctors and public relations managers.
Medical tourism websites	Few hospitals have a website to serve the international market.
Direct/relationship marketing	Dar Al-Foud use direct marketing but in limited scope.
Specialist travel agents	Not available
Distribution through tour operators/airlines	Currently Thomas cook is working on promotional packages for Egyptian medical tourism
Attendance by healthcare providers at trade shows, exhibitions…etc.	Hardly any representation in the international health tourism trade shows. However our attendance in tourism trade shows is regular and prominent
Links with major health insurance companies	Some hospitals have contracts with few health insurance companies: e.g. Dar Al Fouad has links with BUPA and SOS, The Anglo American has links with Eurocross
Image	Well establish as conventional tourism destination.

Annex G: Process benchmarking

Profile benchmarks: A medical tourism policy

Best Practices	Egypt	Implications for Egypt
The Lebanese National Health Tourism Council has identified clear objectives of the sector policy to 'turn Lebanon into the hospital of the East'. The new body aims at tapping into the region's lucrative healthcare market and competing with other regional and international providers. The Singapore's Medical tourism policy aimed at positioning Singapore as the Asia's leading medical hub not only serving medical travellers but also as the leading country for education, training, research centres and institutes such as the Biomedical Research Institute. India's National Health Policy declares that treatment of foreign patients is legally an "export" and deemed "eligible for all fiscal incentives extended to export earnings. Malaysia has a policy to develop itself as a medical hub and to compete with its area's neighbours providing state-of-the-art medical facilities and services for tourists. It attracts medical tourists and investors alike for its favourable exchange rate, political and economic stability and high rate of literacy.	No identified policies and regulations for the medical tourism sector (till present time).	A clear policy of the medical tourism sector will need to be crafted and formulated based on goals / objectives and strategies. Launching plans and programmes with specific time frames and activities to be prepared. Such policy should identify the different stakeholders representing key players for the sector development and outline tasks to be done by each formal and informal stakeholder.

Profile benchmarks: Agency and articulation between authorities/stakeholders

Best Practices	Egypt	Implications for Egypt
Singapore medicine is a multi-agency government initiative that aims at developing Singapore into a leading destination for healthcare services. The agency comprises The Economic Development Board (EDB), Singapore Tourism Board (STB), and International Enterprise (IE). Lebanese National Health tourism council was formed of the Ministries of Public Health, Tourism, Foreign Affairs, Information, Environment & all concerned Lebanese Syndicates. UAE announced a general strategy on the federal level, to coordinate between the governments and the private departments' efforts, and the tourist authorities, to support and develop the treatment tourist.	Very modest articulation among authorities (mainly Ministry of Health, Ministry of Tourism, Ministry of Investment ...etc) for developing the field.	An agency like a council or board of Egyptian Medical Tourism should be formed to represent all relevant stakeholders, coordinate tasks between authorities and ensure implementation of management polices and regulations for the development of the sector. The following stakeholders should be represented: 1- Ministry o Health, 2-Ministry of Tourism, 3-Ministry of Investment 4-Ministry of International Cooperation 5-Civil Aviation Authority 6-Egyptian Tourism Federations 7-Egyptian Hospital Association (to be formed). 8-Members of any other relevant authorities.

Profile benchmarks: Investment policies and scale

Best Practices	Egypt	Implications for Egypt
A wide range of large to small scale investments by both government/public sector and private sector can be summed up as follows: Malaysian policy has employed the low exchange rate of the currency to attract both investments and tourists. The Lebanese Council for National Health Tourism has invested over $500,000 in the new industry with the aim of getting travel-related industry back on course and turning Lebanon into the biggest hospitalization centre in the region, which will have a direct and positive impact on the country's economy. Thailand is investing extensively in the field and government investment is behind the state-of-the-art hospitals. For example, Bangkok Mediplex, Thailand's first lifestyle and medical retail complex is opening in June this year (mainly for outpatients). The $ 3 million investment will cover 12,000 square meters and occupy the first four floors of the Nusasiri Grand Condo Ekamai.	Remarkable growth in investment ventures (small to medium sized) initiated by both healthcare and tourism sectors – mostly private sector enterprises.	Egypt's investment policies should consider offering more privileges to attract national and foreign investments in the healthcare sector with a focus on medical tourism. Investments will also be needed to develop other support services such as ambulance, facilities at airports, training and human resource development, marketing and establishment of specialised travel agents as well as to develop efficient medical research centres. Private sector enterprises should be financially stimulated to provide some of the above services. The government will still need to finance specific elements of the value chain mainly infrastructure. The sector policy should be able to identify scale of investments needed with regard to the different phases of the sector development. For example, it might consider developing competitive

Profile benchmarks: Investment policies and scale – cont'd

Best Practices	Egypt	Implications for Egypt
Kuwaiti investors have lunched a medical city project in Amman/Jordan at a cost of $3.5 billion. The city will include hospitals with the latest medical technology, hotels, entertainment centres, swimming pools and gardens. Dubai is currently investing to establish an international Healthcare city to be recognized as a location of choice for quality healthcare and an integrated centre of excellence for clinical and wellness services, medical education and research. The Abu Dhabi Chamber of commerce and Industry ADCCI report recommends establishing new hi-tech hospitals, hotels and resorts chain with an international management, building more learning institutions and medicine factories, beside organise more conferences, medical workshops and training courses. Investments have also been extended to the airport facilities, ambulance equipments and other support services.		Healthcare providers for the short term while having a long term investment strategy developing a healthcare city or complex upon the improvement of the other components of the value chain.

Profile benchmarks: Business lobbying and association

Best Practices	Egypt	Implications for Egypt
The International Medical Travel Association (IMTA), a non profit association, represents the broad and diverse interests of medical travellers and the medical travel industry, including healthcare providers and medical travel facilitators from around the world. Membership is growing steadily with international hospitals, healthcare providers and other related businesses. There is a highly active Association for Private Hospitals of Malaysia working to develop medical tourism. Private hospitals form an important part of the service industry of the country and address in particular, the medical needs of the country. Jordan has 101 hospitals of which 58 are privately run, not all of them are accredited and only a quarter of those are members of the Private Hospital Association.	There is no Medical Tourism Association or even a Hospital Association to organise and foster the role of the healthcare providers in developing the medical tourism sector.	A Medical Tourism Association will need to be formed. Regulations and rules of this association should be studied carefully. For example, memberships should only be offered to the state-of-the-art healthcare providers who could compete internationally This association should be able to represent its members before the formal authorities, discussing challenges and problems facing the sector and offering collaborative work such as joint marketing or training to personnel…etc. Membership should also be open to support service providers such as specialised travel agents, laboratories … etc.

Profile benchmarks: Structure and management of healthcare providers

Best Practices	Egypt	Implications for Egypt
The emergence of hospital group concept illustrating huge identities with dynamic operations synonymous with chains, examples: In India, The Apollo group has been a forerunner in medical tourism in India and attracts patients from Southeast Asia, Africa, and the Middle East. The group has tied up with hospitals in Mauritius, Tanzania, Bangladesh and Yemen besides running a hospital in Sri Lanka, and managing a hospital in Dubai. Wockhardt hospitals Group, is another example in India, which has established a chain of super speciality hospitals at Mumbai, Bangalore, Hyderabad, Kolkatta and Nagpour. In Thailand for example Bangkok hospital group is a network of 12 hospitals located throughout Thailand. Hospital groups are also very well represented In Turkey, three big hospital groups are Istanbul's Jinemed Medical Centre, Acibadem Health Group, which is in Istanbul, Bursa and Kocaeli and Memorial healthcare group.	Hospital Management has not been professionally applied and varies greatly from one hospital to another depending on the hospital administration and its executives. Al Salaam Hospital in Maadi is one pilot project in hospital management having contracted an Indian company to manage it	Egypt should start considering "hospital management" as a profession having its own requirements, skills, competencies, approaches and techniques. New careers should be developed for professional hospital managers. Academic educational programmes as well as training courses should be offered to assist nursing staff and other labour force meeting such requirements. Egyptian healthcare project proprietors wishing to position their products in the international market should consider arranging management contracts with the big healthcare groups such as Apollo. It is worth mentioning that Dubai is initiating such management techniques. This will also help Egyptian medical tourism providers competing more aggressively in the international market in general and to compete with the new healthcare entrants in the Egyptian market in particular

Profile benchmarks: Structure and management of healthcare providers – cont'd

Best Practices	Egypt	Implications for Egypt
The Turkish Acibadem Health Group has a network of 6 general hospitals, 5 outpatient clinics, 1 ophthalmology centre, medical centres, and laboratories. In Singapore, the international Medical Referral Centre (MRC) is a service provided by Parkway Group Healthcare for its international patients. The Group's three hospitals - Mount Elizabeth, Gleneagles and East Shore, are the first private hospitals in Asia Pacific to achieve the ISO 9002 international quality certification, and they have collectively performed one of the largest number of cardiac surgeries and neurosurgeries in the private healthcare sector in the region However, there are smaller healthcare providers very well positioned in the international medical tourism market such as the Hungarian dentistry clinics. For example, The Budapest clinic is among the best in Europe for implants. The management of such clinics offers its international patients friendly and personable experience with all the modern dental equipment and experienced staff taking care of patients as if they are a part of the family. Clinics use up-to-date equipments, which makes for accurate diagnosis and efficient and effective treatment. They have also managed to offer competitive dental care prices attracting European markets mainly English.		

Profile benchmarks: System transparency and database of sector performance

Best Practices	Egypt	Implications for Egypt
Singapore's Ministry of Health maintains a transparent healthcare system, publishing vital information and statistics such as infection control statistics and average hospital charges for common procedures online. Prices of medical tourism products are published by the healthcare providers on their websites and can be easily obtained. For examples healthcare providers in India, Thailand, Singapore, Malaysia, Lebanon, Germany and Hungary have all their services and prices published. Statistics on the number of medical tourists and revenues obtained are also well used in the decision making process by the international medical destinations such as Germany, India, Singapore, Thailand and Malaysia.	Information on Egyptian healthcare system and providers are to a great extent confidential and secured. Some hospitals, for example, still restrict releasing data on the hospital policies, performance, product prices….etc. Variable prices are offered by providers and can not be easily obtained by the international tourist to compare it with competitors. Until now there is no reliable data on the number of medical tourists or tourist revenues - The only available figures are published by the Ministry of Tourism in its annual report "Tourism in Figures" on the number of tourists visiting Egypt for health treatment purposes. Such data have been collected from the immigration points at the different ports and also include outpatients who receive the treatment at private clinics while using other means of accommodation such as furnished flats of hotels.	The medical tourism policy should guarantee a more transparent system with regard to regulations, rules, performance, statistics and challenges facing the Egyptian healthcare system. Healthcare providers should be publishing the prices of their services. A reliable data base system will need to be created linking formal authorities with the sector providers, medical care travel agents and immigration authorities to make good use of statistics on the sector performance. Statistics should also include not only number of medical tourists but also their nationalities, demographics, expenditures, medical care specialties they come for, the number of providers, the number of travel agents specialised in the sector…etc.

Profile benchmarks: Quality Assurance of the Medical Tourism Product

Best Practices	Egypt	Implications for Egypt
To realise the objective of improving quality competitiveness of Indian products and services including healthcare; QCI (Quality Council of India) provides strategic direction to the quality movement in the country by establishing recognition of India conformity assessment system at the international level	Egyptian Ministry of Health currently has a committee for setting quality standards, however this committee still needs to be empowered and instrumented with more effective tools to monitor and guarantee quality of the Egyptian healthcare, as the current situation shows wide range of quality standards between hospitals and variable prices offered by providers. The Egyptian Society for Quality in Healthcare (ESQua) was established in 1995 with a mission is to mobilize resources and to coordinate scattered efforts aiming at improving quality of national health system.	Egypt Ministry of Health needs to adopt more effective Quality Standard System for the healthcare Industry. Such system should be applied to all hospitals in Egypt. It is also suggested that the National Accreditation Body should be responsible for setting and implementing this quality standard system. Quality of the support services offered by other stakeholders will also need to be monitored and guaranteed such as ambulance, laboratories, facilities at airports, hotels, travel agents …etc.

Profile benchmarks: Technology and research

Best Practices	Egypt	Implications for Egypt
Integrating technology into the healthcare system has been broadly sustained by the international medical tourism market. Most of the international medical tourism providers have the latest technology in their labs, diagnostic clinics as well as the most up-to-date technology at Neuroscience centres. State-of-the-art technology is available, such as MRI, 64-Slice CT Scan, and cyber knife Singapore, for example has very specialised research centres for Biopolis ($500 million state-of-the-art infrastructure for the life sciences), Biomedical research including Bioinformatics Institute, Bio-processing technology institute, Genome institute of Singapore, Institute of Bioengineering & Nanotechnology, Institute of Medical Biology and Institute of Molecular and cell-biology. Turkey is moving into the new area of "medical out-sourcing" where hospitals subcontract services such as overnight use of their computer systems and laboratory facilities to the overburdened medical care systems in western countries. On the other hand, Memorial hospital group for example has Genetic lab which developed the first beating heart cell in Turkey. India manufacture almost 30% of its equipment, technology and supplies	Technology is very much imported by big hospitals such as Dar El-Fouad, IMC (International Medical Centre) and As-Salam and specialised centres such as Gamma Knife, El-Maghraby Eye Centres, International Eye Hospital, and Alfa Scan. Limited research activities compare to the international healthcare institutions with the exception of post graduate researches at university level. Almost all equipment and technology are imported by big hospitals and specialised centres such as Gamma Knife Centre	Egypt will need to consider two types of technology: medical technology and service support technology to become a competitor the medical tourism market. Medical technology means increasing rate of technological change and variations in the use of healthcare with regard to equipments and procedures. Health providers also need to implement support service technology such as EMR (Electronic Medical Records) for international patients, electronic transfer of the medical reports and files. Communication between potential international patients and his physician can be conducted through web-camera and conference calls. Medical care travel agents and ambulance service providers should also adopt the latest technological devices in their work.

Profile benchmarks: Relationship with international medical educational institutions

Best Practices	Egypt	Implications for Egypt
Dubai Healthcare City DHCC has invited leading academic medical institutions and pre-eminent health care organisations to participate in Dubai Healthcare City, including Harvard Medical School and the Mayo Clinic, among many others. Several Thai hospitals have relationships with educational facilities in the US and UK (for example, Sheffield Hallam University has links with Bangkok hospital).	Limited co-operative work between Egyptian medical care providers/universities and the international medical institutions such as Harvard Medical School and Mayo Clinic.	Stronger ties between healthcare providers along with Egyptian medical schools. The international medical schools should be approached as a key instrument for human resource development, researching, technology application…etc.

Profile and marketing benchmarks: Product specialization and positioning

Best Practices	Egypt	Implications for Egypt
Product specialization is a notable feature of the global medical tourism sector. Each medical destination has managed to position itself as best practice in offering specific products. However, the range of such specialised products differ from one destination to another; while a number of destinations successfully offer more than one product, others are reputed of a single but very well positioned one. India, for example, is a well-known medical tourist destination for cardiac and orthopaedic procedures, heart surgery, and other rejuvenation therapies such as Ayurveda medicine. Germany is highly reputed for spine surgery and novel cancer treatment, Aesthetic surgery, Bone marrow transplantation and Brain surgery. Thailand is specialised in neurological illnesses and offers spinal surgery, cosmetic surgery and heart surgery. It is the most famous destination for gender sexual reassignment surgery. South Africa's medical tourism is so far exclusive to high quality plastic surgery to be offered to niche market segments mainly Americans and Europeans while on a Safari trip	No identified products to be marked although some Arabs come for oncology treatments. However, there is a potential for dental care products, eye surgeries and plastic surgery.	The Egyptian medical tourism policy will need to identify features of the Egyptian medical tourism offering based on compatible strategies to position such products in the international market. The selection of the products should be based on the following: ▪ Its medical care resources with regard to its providers, staff, equipment…etc. ▪ Its infrastructure capacities and adequacy of support services. Needless to note that heart disease patient need more extra care at airports and proper ambulance system than a patient coming for dentistry or plastic surgery. ▪ A very good research on each potential market with regard to the motivations of travel for medical tourism, expectations and services they need to get.

Profile and marketing benchmarks: Product specialization and positioning – cont'd

Best Practices	Egypt	Implications for Egypt
Hungary has positioned itself as a best practice destination for dentistry especially in the British market where dental care treatments are expensive and not fully covered by health insurance. Medical wellness treatment also offered in high quality at its famous traditional spas. Although Jordan offers kidney replacements, orthopaedic procedures, neurological operations and heart surgeries, it is very reputed for its medical wellness and wellness products especially at its Dead Sea resorts for the treatment of psoriasis. Tunisia is very well-positioned as a competitive destination offering high quality thalassotherapy and thermal cure at its Mediterranean resorts. It started to develop new products such as beauty care and plastic surgery. Turkey offers medical as well as medical wellness products such as eye surgery (especially lasic operations) tube baby, dentistry, plastic surgery; psoriasis, thalassotherapy and thermal springs are the main specialty attracting tourists.		Diagnosis of the competitors with regard to quality of their products, pricing policies and instruments of marketing and promotion. An identification of Egypt's competitive advantages and the employment of such strong points in the positioning strategy. For example, Egypt is a well-established tourist destination and quality dental care treatment products, eye surgery and plastic surgery can easily be integrated into the current tourist packages. Also, its natural, ecological and cultural resources along with tranquillity of many areas on the Red Sea, Sinai and North West Coast offer a potential for alcoholic addict treatments, drug addict treatments, programmes for quitting smoking and rehabilitation programmes. Sea resorts are also ideal for recuperation.

Profile and marketing benchmarks: Product competitive prices and pricing policies

Best Practices	Egypt	Implications for Egypt
Competitive prices are a driving element for the growth of the sector and for the selection of a specific destination by the international patients. India has professionally employed its low cost medical care products as an instrument to compete while at the same time implementing quality competitiveness and the up-to-date equipment and technology. However, destinations such as Singapore and South Africa have positioned their products as high service quality for niche markets which entails selling such products at higher prices to maintain image. Such pricing policies are based mainly on a full understanding of their competitive advantage points as Singapore is perceived in the to the international market as the cleanest city in the world having one of the best international airport and the up-to-date advanced technology. South Africa however, sells its plastic surgery medical product as a feature of specific holiday packages including sun, safari and surgery. The main market of such packages. UAE seems to follow Singapore and South Africa.	A system of setting quality standards has not been established yet resulting in a wide range of service quality between hospitals and variable prices offered by providers. Most of the providers have no transparent prices to be offered to the international patient and published in the websites. Egypt's products are rarely distributed through international intermediaries. However, Egypt's products and prices have been offered to the international market through "Treatment Abroad" for plastic surgery operation packages.	Pricing policy should be instrumented by medical tourism providers as an effective tool to compete. However four crucial points should be realised: 1-Price competitiveness should be coined with high quality standard not as perceived by some players approaching price reduction through lower service quality. 2-Pricing policy should also be based on a positioning strategy. Low prices for example are not recommended when the approached market is high and niche segments. 3-Price of medical care products should be transparent and published on the websites and all promotional materials for comparison.

Profile and marketing benchmarks: Product competitive prices and pricing policies – cont'd

Best Practices	Egypt	Implications for Egypt
"Treatment Abroad" offers the following prices for its plastic surgery packages at different destinations in which Egypt is included. The price includes hospital stay, doctor's fees, travel from UK and hotel accommodation. **Cost of Facelift:** Germany: £4.609 Thailand: £2.795 Hungary: £2.270 Tunisia: £2.615 India: £2.241 Turkey: £2.884 South Africa: £4.029 **Cost of upper eyelid surgery:** Germany: £1832 Thailand: £840 Hungary: £836 Tunisia: £1550 India: £1133 Turkey: £1245 South Africa: £1912 **Cost of breast reduction:** Germany: £3.830 Thailand: £2.585 Hungary: £2.215 Tunisia: £2.185 India: £2.087 Turkey: £2.466 South Africa: £3.685	Plastic surgery has been selected to benchmark its prices against the other destinations as it is the only Egyptian product sold by "Treatment Abroad" Egypt: £2.610 Egypt: £1275 Egypt: £2.710	4-Price setting of medical tourism products will need collaboration between different parties as support service providers will get involved with the hospitals. The specialised tour operators will present the best packaging price which should sell.

Cost of buttock lift: Germany: £3.901 Malaysia: £3.005 Hungary: £2.800 Turkey: £2.284 India: £1.737	Egypt: £2.510	

Performance benchmarks: International Accreditation

Best Practices	Egypt	Implications for Egypt
International accreditations such as JCI and ISO certification have become a prerequisite for any healthcare provider to position itself as a player in the medical tourism market. In India, the majority of the healthcare providers working in the medical tourism field are internationally accredited. Singapore accounts for one-third of all Joint Commission International (JCI) accredited facilities in Asia. Seven Singapore hospitals are International Organisation for Standardization (ISO) certified. A wide range of accreditations by JCI that audit medical quality are also given to healthcare providers in Thailand, Turkey, Lebanon, UAE as well as many other destinations in the world . In Turkey, Istanbul's 170-bed Yeditepe University Hospital has become the latest to achieve JCI status. In addition the Trent Accreditation Scheme, the UK-based assessment programme, the Canadian Council on Health Service Accreditation (CCHSA) and the Australian Council on Healthcare Standards International (ACHSI) are also recognized accrediting bodies.	Very few healthcare providers are accredited mainly Dar Al Fouad and gamma knife centre. Other hospitals are proceeding to finish acquisition of JCI e.g. Al-Salam Hospital, Maadi is proceeding with the upgrade of their facilities and services to meet JCI requirements.	All healthcare providers wishing to serve the medical tourism market should have a scheme to get international accreditation.

Performance benchmarks: National Accreditation

Best Practices	Egypt	Implications for Egypt
In addition to the international accreditation, medical tourism destinations have a well established national accreditation system. -In India the National Accreditation Board for Hospitals & Healthcare Providers (NABH) is a constituent board of the (Quality Council of India) QCI, set up to establish and operate accreditation programmes for healthcare organisations. Currently there are only 12 accredited hospitals with a further 53 in the process of seeking accreditation. Future plans include extending the programme to blood banks, diagnostic centres, dentists and Ayurvedic clinics. Although few Malaysian hospitals have international accreditation, Healthcare Providers are also nationally accredited by the Malaysian Society for Quality in Health (MSQH). Since most of the hospitals in Jordan lack international accreditation, government is planning to apply a national hospital accreditation programme in an attempt to appraise private sector hospitals. Beyond international certifications, many healthcare providers in Singapore publish their success rates on their websites which are comparable to, if not exceeding, international standards.	Egyptian MOHP has recently initiated a national accreditation programme which has been awarded in 2007 by ISQua.	The proposed accreditation programme still needs to adopt more efficient criteria to meet the international accreditation standards and to take more serious steps for application. It will also be of great benefit to compare with the national accreditation programmes of other Medical Tourism destinations such as Malaysia, India and Jordan.

Performance benchmarks: International partners (affiliation)

Best Practices	Egypt	Implications for Egypt
In India, hospital groups have not only international accreditation such as JCI but international partners such as Wockhardt hospital which has associated with Harvard Medical International. The Largest Turkish hospitals are affiliated with prestigious U.S. based institutions: Andolu Medical Centre operates in conjunction with Johns Hopkins, while Istanbul Hospital is a Harvard Medical Centre partner. In Jordan, a number of local hospitals established links with reputable international hospitals such as Mayo Clinic, Cleveland Medical Centre and Guy and St. Thomas Hospitals in UK. As Dubai Healthcare City DHCC's key strategic collaborator, Harvard Medical International HMI is leveraging its experience gained by working with partners around the world to help develop the infrastructure for both high-quality health care delivery and medical education at DHCC.	Limited affiliation with international partners (Dar Al-Fouad has some form of association with Cleveland Medical Centre).	Affiliation and partnership schemes should be considered as an effective marketing and quality assurance tool which help healthcare providers positioning their products in the international medical tourism market.

***Performance benchmarks: Doctor's competencies* (credentials *and training*)**

Best Practices	Egypt	Implications for Egypt
Indian physicians are highly trained (many worked, graduated or trained at international medical schools in USA, UK or Europe. Fluent English speaking staff. Singapore's Ministry of Health only recognises medical degrees awarded by a selected group of top-ranking universities such as the National University of Singapore (NUS), Oxford University Medical School, the Faculty of Medicine and Dentistry of University of Dundee in the UK, Duke University School of Medicine, Harvard Medical School and Mayo Medical School in the US. English is the first language of education and business. Malaysia also has highly-trained medical specialists, most with recognised post-graduate qualifications from the UK, Australia and the USA. English speaking medical staff. Many Thai physicians hold US or UK professional certification. English speaking medical staff. The Turkish medical training model is based on that in the U.S. and other western countries, so doctors receive numerous years of training. Doctors pride themselves on their attentiveness to patients, so a high level of personally catered care can be expected.	Large pool of skilful doctors, some have international credentials as in other competitive destinations.	Any healthcare provider having plans to serve in the medical tourism market will need to determine standards of its staff competencies and qualify them to meet accreditation standards. In the medical tourism market, doctor's credentials and expertise are among those factors influencing the international patient decision to use a specific provider or even to go to a specific destination. In addition to the professional training, doctors and nurses working in the medical tourism sector will also need personal skill development training such as communication skills, time management, stress management, public relations, language proficiency skills …etc. As mentioned earlier, each provider will need to establish agreements with the international medical schools to train its physicians.

Performance benchmarks: Doctor's competencies* (credentials *and training) - cont'd

Best Practices	Egypt	Implications for Egypt
Hungary has very good therapists working in its spas and health resorts. In Tunisia, Medical experts are highly qualified and have had medical training in United States and European countries, especially France. In addition, investment in training is in place especially by hotel spas which invest time and money to train personnel on the job. Jordan has received aid form WHO, USAID, and the World Bank to upgrade its healthcare sector tapping different issues such as education, training, policy, management, environment and health economics. The joint efforts between the public sector and donors provided qualified personnel filling gaps in the above fields (mainly hospital management, epidemiology, education, environment and health economics).	Professional therapists working at spas and thalassotherapy centres are quite few leading to over-reliance on foreign labour to fill such gaps. Some executive training courses in hospital quality management is offered by the American University in Cairo (AUC)	Egypt is in bad need to develop professional therapists working at its current and potential spas and health resorts. As the number of spa projects is projected to increase in the coming few years, the two sectors: healthcare and tourism should plan developing human resources to meet the expected demand. It is worth mentioning that training is very a crucial factor to reach international competencies.

***Performance benchmarks: Nurses and support staff competencies* (credentials, *training and nursing care*)**

Best Practices	Egypt	Implications for Egypt
In general terms, with staff wages in the Far East being lower than European counter parts, the ratio of staff to patients is higher Thailand healthcare providers offer more personalized level of nursing care than westerners are accustomed to receiving in hospitals at home. English speaking medical staff. Indian corporate hospitals have a large pool of nurses and support staff ensuring individualized care. All medical staff members are English speaking. Malaysia has multi-ethnic, multi-lingual nurses and support staff from various religious denominations, e.g. Islam, Christianity, Buddhism, Hinduism… etc. The Lebanese National Health Tourism Council has a plan to train all parties involved in medical tourism, enabling them to become acquainted with the existence of this sector of the market, and provide detailed, accurate information to clients.	Communication problems between doctors and nurses exist in addition to doubts of the abilities of the current nursing staff to meet standards of the international medical tourism market. Most staff lack knowledge of foreign languages.	Professional training programmes as well as personal skill development trainings are highly needed especially for the nursing staff. Such personal skill development programmes should be able to improve the nursing staff performance with regard to their communication skills, customer care, time management, stress management, language skills and logistics. Tourist personnel responding to the specific services of the medical tourism sector will also need to be trained same way.

Service chain benchmarks: Ambulance

Best Practices	Egypt	Implications for Egypt
In Germany, municipal bodies do have the responsibility for providing Emergency Medical Services but do not necessarily fulfil them by themselves. The task of performing pre-hospital care can also be performed by non-profit or privately owned organisations. There are also air ambulance facilities (example Munich airport) for air transportation in case of illness or injury. In UAE, Dubai Ambulance Services Centre is well established. The Ambulance Services Centre launched intensive unit mobile cars last year which travel on Dubai roads to provide services to all patients. The vehicles are well-equipped to transmit information about the heart patient's blood pressure, diabetes and other data to the hospital. The Centre is also working in collaboration with Dubai police to set up a database, which will include heart patients with crucial cases so that rescue teams could reach the locations of the patients and has full information about the patient's health condition. The quality of ambulance service in Malaysia is improving. The Ministry of Health is planning to purchase 800 new ambulances and it is also looking to the possibility of privatizing the ambulance service to make it more efficient.	Some hospitals have fairly well equipped ambulance vehicles while others use the local ambulance service which is relatively poor with regard to equipment and paramedical personnel. There is a plan to improve the national ambulance system by purchasing new vehicles from South Africa to cover all cities of Egypt with centres in different districts of big cities to shorten time between call and arrival. It is rumoured that the South African company NET911 will be managing the new ambulant services.	The plan to improve the national ambulance system will also need to consider the ambulance services from/to Egyptian airports. To tackle problems of traffic jams, air ambulance facilities should be provided to serve the medical tourism sector.

Service chain benchmarks: Airport services

Best Practices	Egypt	Implications for Egypt
Singapore Changi International (3 terminals) is one of the best airports in the world. All terminals are connected together with fast moving sky trains. Distance to town centre is 20 KM by motor way. The Changi International Airport is connected to some 180 cities around the world, making the island-state highly accessible. The airport has Medical clinic in each building and 24 hour medical centre for emergencies, chemists and ambulance service. Medical tourists are given priority at immigration gates. The Dubai Intl. Airport is continuously developing and currently has 3 terminals and accommodates 100 airlines, which connect to over 140 destinations. Dubai International Airport introduced its services online 24 hour a day and accessible for all users. There is a 24-hour fully-equipped medical centre. The Special Lounge is a dedicated lounge for unaccompanied minors and passengers with special needs is available in the Arrivals Hall. Some hospitals such as the American hospital in Dubai & the WELCare hospital can provide, upon request, an ambulance pick up at the airport. There is also air transportation facility in some hospitals (the American hospital has a helipad for Emergency use and has an affiliation with a well known Flight Ambulance Company (FAI). The Munich Airport Clinic has two surgery rooms and 13 beds.	Egypt's International Airports are fairly well equipped for tourist flows but still lack many facilities to receive international patients. Cairo International Airport is currently working on the construction of Terminal Building (3), to be operational soon**.** The new Terminal location will be adjacent to Terminal Building (2) & connected to it via a sky bridge. The new terminal will be equipped with modern medical support units & first aid in case of emergency, in addition to the pharmacies, where you can find wide range of medicines.	The Egyptian International airports will need to improve its facilities to supply the following services: ▪ Picking up patients from the aircraft upon arrival. ▪ Fast immigration track for international patients. ▪ Special equipped lounge for international patients and travellers with disabilities. ▪ Well equipped medical centres and pharmacy at each terminal. ▪ Ambulance centre having fully equipped vehicles. ▪ Air ambulance facilities such as helicopter pads ▪ Communication system with medical tourism providers to facilitate patient's arrival and departure services.

Service chain benchmarks: medical entry visa

Best Practices	Egypt	Implications for Egypt
The Indian government offers special multi-entry medical visa for treatment up to 1 year. The visa is also valid for 2 family members. In Malaysia, the immigration authorities provide a "Fast Track Clearance" for foreign patients provided that the relevant hospital informs the authorities at the airport at any point of entry to Malaysia (3 days prior to arrival). The patient and next-of-kin accompanying the patient may also apply for extension of their stay from the Malaysian Immigration Department. To ease entry formalities for patients, the Immigration Department of Malaysia has implemented a special Green Lane System at main entry points which expedites custom clearance for medical travellers. An Abu Dhabi Chamber of Commerce and Industry report on medical tourism recommends easing issuing of the visit visas for the medical tourists. All medical tourism intermediaries and providers facilitate the entry visa procedures as part of their medical tourism packaged services.	Most nationalities can obtain entry visa at the airport upon arrival. Also, tourist visa is easy to get from the Egyptian embassies abroad. However, citizens might need to travel long distances to the Egyptian embassies to get the visa.	Egypt still needs to consider a special chapter for international patients in its immigration policy. Regulations and fees of such specific type of visa should be published on the websites of the government as well as the commercial websites of intermediaries and healthcare providers. All relevant issues such as visa extension and visa for companions should also be published and facilitated. A Link between medical tourism facilitators, healthcare providers and travel agents and the immigration authority should be established. Egypt should also approach new methods to facilitate the process when entry visa application is required before travelling and tackle problems of long distance travel to the Egyptian embassies located away from central areas of the country.

Service chain and marketing benchmarks: travel agencies

Best Practices	Egypt	Implications for Egypt
Singapore's travel agents offer all facilities needed for medical tourists and arrange for all requirements in an excellent and professional way. Gleneagles Hospital in Singapore works in collaboration with local travel agencies to arrange for special health packages that will include logistic and travel requirements. In South Africa specialised medical tourism companies such as Serokolo offers medical and hospital services for clients. Serokolo arranges and offers services such as Medical visa applications, basic initial medical screening, global medical quotations, personalized client liaison by qualified medical personnel, accommodation before and following medical/ surgical treatment to allow for recuperation, tours to South Africa's magnificent scenery, collation of medical account and account management, aero medical evacuation services from host country to South Africa, securing specialist appointment and hospital admission, medical tours for medical practitioners, medical/ Surgical case management, including clinic visits.	Until medical tourism develops, there will be no dedicated local medical tourism travel agents.	Although travel agencies will spontaneously get involved once Egypt has well-featured medical tourism products, the role of such travel agencies should be predetermined and outlined in the medical tourism policy to guarantee high quality of services. The Travel Agency Chamber at the Egyptian Tourism Federation should be represented in the Medical Tourism Board to endorse quality of services offered by its members and to ensure means of liaison and networking between travel agencies, medical care providers and other suppliers of the medical tourism value chain. Staff of travel agencies wishing to work in medical tourism should also be trained and educated with the specific needs of the market.

Service chain and marketing benchmarks: Airline services

Best Practices	Egypt	Implications for Egypt
From a service stand point, Lufthansa is the only airline in the world having an intensive care unit (ICU) which can be operated in wide body aircraft for the transport of patients who need intensive medial treatment. From a marketing stand point, Lufthansa has announced its partnership with German Health, and AXIS Holidays Worldwide offering fully organised medical packages to Germany from the UAE. Collaboration between Lufthansa City Centre, Wetzlar, Lufthansa German Airlines, the Steigenberger group of hotels and the German Industry and Commerce Office in Dubai, the advent of the Arab Health Exhibition and Congress in Dubai saw the introduction of the German – Arab Medical Network in the U.A.E. offering the best international medical treatment specifically catered to the Middle East market. The Emaratian Etihad airlines and Gulf Air are also offering special promotion fares for medical tourists. MAS Golden Holidays has been launched by Malaysian Airways in strategic partnership with HSC Medical Centre involving Malaysian airline representation offices. Membership at the National Committee for the Promotion of Health Tourism in Malaysia is open to all airlines.	There are no Egyptian medical tourism packages promoted through national or international airline companies.	The Egyptian Medical Tourism Policy should highlight the role to be played by international airlines in marketing and providing support services. The suggested Medical Tourism Federation should open membership to international airlines. Egypt Air as a national carrier should consider integrating international patient services as well as marketing activities into its new product development policy. Medical tourism packages can successfully be sold in the international tourist markets through the different branches of Egypt Air and its website. Joint marketing effort between healthcare providers, Airlines and travel agencies to offer comprehensive marketing campaigns and complete value chain services.

Service chain and marketing benchmarks: hotel and resort services

Best Practices	Egypt	Implications for Egypt
In Germany, where all hotel chains of the world are present, medical service providers are usually close to the accommodation facilities with, in certain cases, special hotel rates for hospital clients and accompanied guests. Malaysia hotels & resorts offer a wide range of facilities and excellent accommodation to cater for all types of traveller, including health travellers for medical tourism. Visitors can benefit from a range of services offered and will certainly appreciate superb facilities, excellent infrastructure and attentive staff provided by Malaysia hotels. Additionally, most private hospitals provide hotel-like amenities with comfortable and well-appointed accommodation, ranging from suits to private rooms for single occupancy or more. In Jordan, the new stream of luxury hotels emerging in Amman, Petra, Aqaba and the Dead Sea is just adding quality to a refined product that is distinct, accessible and friendly, making Jordan a preferred destination to travellers of all kind especially medical tourism travellers. The Thai holiday resorts are most attractive base for recuperation.	A wide range of accommodation facilities at Cairo, Alexandria and major tourist destinations. A growing number of hotels with facilities for handicapped clients. Dietary and nutritious food is still a limited service offered by few resorts and hotels. A limited number of resorts offering quality rehabilitation and recuperation programmes.	The Egyptian lodging industry will need to be represented in the Medical Tourism Board addressing problems that might undermine performance of the hotel industry in the field of medical tourism such as personnel training, facilities offered to medical guests, food nutrition and safety and implementing recuperation programmes. Joint and collaborative work will need to be performed between hotels, travel agencies, ETA offices abroad and medical tourism providers in marketing. Hotels can also join in marketing alliances with outpatient centres and clinics and promote their medical services to the hotels' guests. Medical tourism clients should be professionally served by hotels staff.

Marketing benchmarks: marketing strategies and techniques on the national as well as industry levels

Best Practices	Egypt	Implications for Egypt
On the national governmental level, Malaysia for example has a national marketing strategy with objectives to promote Malaysia as a centre of medical excellence; to formulate a strategic plan for the promotion and development of health tourism; to promote smart partnerships between the government, healthcare providers, travel organisations and medical insurance groups; to promote Malaysia as a centre of excellence for medical conferences, seminars and medical education at all levels; and to study and identify the need and rational for better tax incentives, reasonable fee schedules, and amendments to rules and regulations, in order to promote medical and health tourism. The National Committee for the Promotion of Health Tourism in Malaysia has been established to support the sector. On the trade and industry level, joint marketing is well implemented in many destinations for example in Thailand the ThaiMed Associates have referral contracts with a range of premium- care local hospitals, clinics and health service providers.	A national marketing strategy for the sector is yet to be formulated. Notable individual marketing strategies by few healthcare providers such as Dar Al-Fouad and Al-Salam Hospital in Maadi.	The Egyptian medical tourism national policy should develop a marketing strategy for the sector emphasizing: 1-potentail medical product features and range, 2-market research analysis on the potential generating markets, 3-competitive price initiatives, 4-effective promotional tools 5-means of accessing international distributors and decision makers of each market. Collaborative and joint marketing among industry stakeholders should be approached as a key element in the success of the sector. Such campaigns should be launched by the suggested Medical Tourism Association. On the business level, it is also suggested that healthcare providers can have joint marketing campaign with certain hotel chain, airline companies and travel agents.

Marketing benchmarks: websites

Best Practices	Egypt	Implications for Egypt
Most of the medical tourism destinations have excellent websites created by its formal medical tourism body, the sector association, healthcare providers, travel agents and hotels. Also, medical products of such destinations are very well promoted though websites of international tour operators and intermediaries. For example, Singapore-based International Medical Travel Association now has a very good website (www.intlmta.org). In India, different websites are offered by healthcare providers, tour operators and specialised travel agents. Also, India as a leading country is very well featured in the websites of the international medical tourism journals and communities. Medical tourism suppliers are very well marketed through Medindia and medical packaged can be reserved through the web pages. Furthermore, India, as a leading country, is very well featured in the websites of the international medical tourism journals and communities.	Dar al Fouad is the only hospital which has a website to the international market. However, the website would need to be upgraded to compete with other international sites.	Compatible websites will need to be created for the National Medical Tourism association, healthcare providers and support service providers. Such sites should be used not only to promote the products but also to sell such products employing the E-marketing techniques and facilitating the direct connection between clients and service providers. Prices of each product, services offered along with procedures of travel and hospital reservation arrangements are among those important information to be placed on the sites.

Marketing benchmarks: medical tourism, tour operators and intermediaries (existing and virtual)

Best Practices	Egypt	Implications for Egypt
The American company "Med Retreat", British Company Recover Discover and Star Hospitals are among those selling the Indian medical tourism services. Also PMT (Premium Medical Tourism) is an intermediary selling Indian products. Malaysian healthcare providers have alliances with big operators such as Med Retreats and Recover Discover. American Med Retreat company distributes the Turkish medical products and has partnerships with providers in Turkey. It also has partners of healthcare providers in South Africa to sell their products to the American market. Virtual tour operators such as PANGAEA Medicine also exist and successfully sell medical tourism products of India, Malaysia, Hungary and South Africa.	Thomas cook currently working to prepare promotional packages for Egyptian medical tourism	Healthcare providers will need to approach international tour operators and intermediaries for the promotion and distribution of their products.

Marketing benchmarks: Healthcare provider offices and International Patient Service

Best Practices	Egypt	Implications for Egypt
Many healthcare providers are represented through liaison offices in a number of feed countries such as Singapore's providers. Relationship and direct marketing also used as follows: In Turkey, international offices to promote services to international patients are offered by providers. For example, Yeditepe has an International Patient Service Department that can arrange medical, travel and hotel services. Another example, International Patient Centre" staff at Acıbadem Healthcare Group meets the needs and expectations of international patients within 48 hours of their request by acknowledging them on the treatment plan, length of stay, average package pricing that includes all medical, social and accommodation costs. Most healthcare providers in Singapore have dedicated International Patient Service Centres to attend to international patients' needs, from their first enquiry and "meet and greet" at the airport, to interpreter services and support for accompanying persons, to the final send-off and post-treatment follow-up when patients are back in their home country. Example, Raffles International Patients Centre, Singapore Health Services (SingHealth) International Medical Service, Singapores' Raffles Hospital, Alexandra Hospital and Mount Alvernia Hospital.	No presence of specific "International Patient Service Centre" even at the big hospitals where foreign patients frequent. No accurate data on offices abroad distributing medical tourism products offered by healthcare providers.	Healthcare providers willing to enter the medical tourism market should consider the creation of a department for "International Patient Service". This is crucial for having a direct relationship with their potential international patients and to guarantee a competitive performance of customer care.

Marketing benchmarks: links with international insurance companies

Best Practices	Egypt	Implications for Egypt
The three hospital groups in Turkey agree to direct-billing arrangements for international insurer CIGNA International Expatriate Benefits (CIEB). CIEB is a leading provider of international benefits for expatriates, business travellers, and retirees abroad. A business unit of CIGNA International, CIEB provides coverage for expatriates in more than 170 countries and jurisdictions around the world. CIEB uses 3,200 physician-screened practitioners in 438 cities and 156 countries outside the US. In Jordan, German insurance companies send their patients to the dead sea area for skin treatment as the dead sea saline water is highly recommended by experts of such companies. Thailand treats western expatriates across Southeast Asia. Many of them worked for western companies and had the advantage of flexible, worldwide medical insurance plans geared specifically at the expatriate and overseas corporate markets.	Data available on an existing link between 3 Egyptian Healthcare providers and international insurance companies.	Healthcare providers, especially those offering medical wellness products such as thalassotherapy and psoriasis treatments should verify the use of their resources as beneficial for the treatments of certain diseases and should get accreditation from international bodies and then approach the international insurance companies for screening and agreements.

Marketing benchmarks: Attendance by healthcare providers at medical tourism events trade shows, exhibition...etc

Best Practices	Egypt	Implications for Egypt
National Medical Tourism Associations, healthcare providers and support service suppliers of all destinations are keen to attend the international medical tourism events. In addition, some destinations have planned to host such events as means of marketing and promoting their own country. For example, Singapore has planned its medical tourism strategy to become a centre for medical tourism events and research in Asia. Plans to host academic meetings are in place. Dubai has planned to host two big events for medical tourism in 2008 the European Health Tourism Congress held in February and Global Health Expansion to be held in October. Turkey has organised its first International Health Tourism Congress, held in Antalia in March and promoted its medical tourism products. Attendees included representatives of hospitals, private clinics, spa establishments, insurers and tourism agencies. A total of 37 presentations were given to 300 delegates. A day was dedicated to each topic of general health tourism, spa and wellness tourism, and health tourism for the older generation.	Hardly any representation in the international health tourism trade shows. However our attendance in tourism trade shows is regular and prominent.	The national Egyptian policy of medical tourism should target presence (exposure) in the international medical tourism events for marketing, public relation as well as education and training purposes. Egypt should be represented through a delegation including Medical Tourism Association members, healthcare providers, support services suppliers and media. The national policy will also need to consider hosting one of the global events of medical tourism attended by international tour operators, insurance companies, healthcare providers, airlines and exhibitors which will offer an opportunity of displaying Egyptian medical tourism products and relevant services. This can help in the promotion of Egypt as a medical tourism destination.

Marketing benchmarks: Destination image and competitive advantage

Best Practices	Egypt	Implications for Egypt
Although India still faces problems such as overpopulation, environmental degradation, poverty and ethnic and religious strife, India's competitive advantages remain in its lowest cost and highest quality products among all medical tourism destinations. Malaysian image is a new emerging destination with competitive features such as state of the art hospitals, low exchange rate and attractive multi-ethnical society. A WHO report concludes that Malaysia "has achieved a high overall standard of health care", a rating similar to more recognized western health care systems. The WHO report has put the spotlight on Malaysia as a premier medical travel destination. Singapore has greatly invested in its image as a clean cosmopolitan city offering a high standard healthcare in the context of a trip for the competitive advantage edge. Singapore is also considered one of the safest places in the world. It has a well-deserved reputation as a high-tech, clean and orderly city-state. Dubai is also employing its tourist image as a spot for shopping, business and MICE "Meetings, Incentives, Conventions and Exhibitions" as factors of competitive advantages while the main point underpinning its competitive advantage edge is its "Health City".	Egypt's image is still depending on tourism in general with very limited knowledge of its health tourism capabilities.	The wide range of Egypt's tourism and hospitality resources and its appeal as a distinctive tourist destination should be employed as elements for international competition. SWOT analysis should be helping Egypt identifying its points of strength, foreseeing its potential in the medical tourism market, knowing its weak points and predicting different threats.

Annex H: The example of India

India has been one of the most successful countries in capitalising on the globalisation of medical treatment. It offers high quality procedures and advanced technology at a fraction of the cost of the EU of the US: India's national health policy declares the treatment of foreign patients as an export and this gives good fiscal benefits to investors. Private hospitals pay lower import duties, an increased rate of depreciation to write off medical equipment and other benefits. This has helped to stimulate investors and international partners. An example is the Wockhardt Hospitals Group which has formed a partnership with Harvard Medical in Boston to develop specialised hospitals in four cities: Hydrabad, Mumbai, Kolkatta and Nagpur. Apollo Hospital Enterprises is the largest Indian hospital group targeting medical tourism. It can offer 6,400 rooms in 37 hospitals. It has partnerships with hospitals in Kuwait, Sri Lanka and Nigeria and manages a hospital in Dubai.

Medical travel visas (Mvisas) are also important; Mvisas were issued for six months but this has recently been extended to three years when based on a doctor's recommendation. Mvisas are issued for accompanying family members for the same period. Embassies must process Mvisa applications within 48 hours. A five year multiple entry Mvisa is being considered for designated countries.

The healthcare sector in India is private sector driven and the private sector accounts for 80 per cent of service delivered. The private sector in turn is characterised by investment from the corporate sector rather than loans or grants. The focus is on tertiary care facilities for cardiology, vascular surgery, orthopaedics, oncology, etc and super speciality treatments for the future. According to the Indian Ministry of Tourism 150,000 medical tourists visit India (McKinsey Consulting estimates that this figure may be understated). Latest growth figures indicate an annual growth of 30 per cent. In a presentation for the Indian Tourism Commission at ITB Berlin in March 2007, Dr Sanjay Rai of Max Healthcare said that India's Medical Tourism business earned $450 million in 2006 and is expected to be worth $2.2 billion by 2012 and 1,000 additional hospital beds will have been created.

India's success is strongly based around education, quality and accreditation. 30,000 doctors and nurses quality a year and some 37,000 are registered with the American Medical Association: Many of these have been attracted to return to India. Only accredited hospitals are marketed overseas. The Quality Council of India and the National Accreditation Board for Hospitals and Healthcare Providers have introduced Australian Council on Healthcare Standards International (ACHSI) frameworks for hospital accreditation. Australia will provide services and support to India to develop a national accreditation programme. Indian hospitals are also actively marketing their facilities to insurance companies and governments in Africa, the Middle East, Europe and North America. Travel industry companies are encouraged to market side-by-side with hospitals, medical institutions, treatment centres and suppliers of medical products.

India's image problem has been addressed at private hospitals targeting overseas patients through a series of initiatives as illustrated in table 26.

Medical Tourism India, myths and realities

Perception	Actions to address
Hospital conditions unhygienic	Adopt and exceed JCI international quality accreditation. Put in place independent national scheme (National Accreditation Board of Healthcare).
Technologically backward	Put in place investment incentives and market to attract investment from international hospital groups to the highest standard 1 million hospital beds to be added by 2012, mostly by the private sector Encourage interaction with support industries 1) Pharmaceuticals (India 4th largest in the world) 2) Biotech (3rd largest in Asia-Pacific) 3) Health Insurance (liberalization of market underway)
Non availability of professional staff	Attract back India's highly regarded internationally-based doctors and nurses. (45,000 Indian doctors in the USA and 25,000 in the UK). Develop India's culture of service.
Language barriers	Highlight English as international language. Also provide translators.

Source: Max Healthcare, India

Interestingly India's Kerela Institute of Medical Sciences has recently announced major investment plans for hospitals in the Middle East. Kerala will open clinics in Qatar, Oman, the UAE and Saudi Arabia within twelve months. The Kerela Institute has operated a hospital in Bahrain since 2004 and has partnerships with medical travel companies in Asia, the USA and the Middle East.
Source: ETA Medical & Wellness Tourism Strategy (Thelen & Travers 2007)

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