

student development of one or more of the CanMED roles. This is not only a way of standardizing the value obtained from student experiences but it also promotes the “core competencies” that are integral to effective physicianship.

In addition, SHINE hosts monthly journal clubs, quarterly workshops (on leadership, advocacy, preventative medicine, etc.), and annual events with world-renowned leaders, to allow SHINE students to envision their own impact in the greater context and receive feedback and insight from individuals who have dedicated their lives to improving the human condition.

Results (Scientific Abstract)/Collaborative Partners (Programmatic Abstract): SHINE partners with institutions and community-based organizations (CBOs) serving marginalized populations, both in Calgary and abroad. Partnerships entail a reciprocal relationship that enable medical students to develop their CanMED roles (“core competencies” integral to effective physicianship), while at the same time assisting CBOs/institutions to achieve a desired program goal/execute their mandate.

Current partners include 1. the YMCA (to develop a Youth Wellness Program targeting Youth Age 12-17), 2. Bo School of Community Health Sciences and Bo Government Hospital (to create a sustainable Neonatal Resuscitation Program that aims to reduce neonatal mortality attributable to birthing asphyxia by increase the number of health professionals in Bo trained in neonatal resuscitation), 3. WoodsHomes (to create of a framework and curriculum for addiction cessation that uses a combination of harm-reduction strategies, and targets youth 16-24), and 4. Remand Center (to sensitize students to the unique challenges of working with prison populations and develop a tailored health assessment questionnaire).

Summary/Conclusion: Sixteen students across a multitude of disciplines have been enrolled for the 2013-2014 program. Each placement is supported by a physician mentor. A sustainability plan has been created to ensure placements remain available from year to year.

Creating collaborative connections across a continent: Seven children’s hospitals striving for a sustainable global health partnership

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Background: The St. Damien Collaborative to Improve Pediatrics in Haiti (SCIPH) is a newly established partnership among six US-based pediatric institutions and St. Damien Pediatric Hospital (SDH) in Tabarre, Haiti. SCIPH aims to foster academic collaboration and support SDH through international exchange of medical trainees, quality improvement initiatives, support of SDH subspecialty training, an annual conference with all participating institutions, and fundraising.

Structure/Method/Design: SDH is a 120-bed children’s hospital dedicated to providing quality inpatient care and outpatient programs to over 90,000 Haitian children. SDH includes a maternity ward, NICU, PICU, dental clinic, and oncology ward, in addition to providing care for children with HIV, TB, malnutrition, and other

chronic conditions. Each SCIPH member is an equal partner with a collective strength that outweighs the mere sum. A US-based partner has hosted Haitian medical trainees; each US-based partner sends two pediatric residents to St. Damien Hospital for 1 month each year. A US-based SCIPH partner has accepted five cardiothoracic surgery patients from Haiti, in addition to supporting the development of SDH’s own cardiac care and surgical programs. One partner continues to teach and improve ultrasound techniques to Haitian providers. Coordinated efforts for evidence-based quality improvement projects include the provision of copies of the WHO Pocket Book of Hospital Care for Children for SDH residents and the creation of order sets and clinical pathways for commonly seen medical conditions. Educational efforts include development of problem-based learning and supporting small-group, self-directed learning. Responsibility for organizing the annual SCIPH conference is rotated among each US-based partner, with a long-term goal of a Haitian-hosted academic conference. The goal of the SCIPH conference is collaboration, increasing awareness of SDH and SCIPH at the host’s institution and community, and fundraising for SDH.

Results (Scientific Abstract)/Collaborative Partners (Programmatic Abstract): St. Damien Pediatric Hospital, Akron Children’s Hospital, Hasbro Children’s Hospital, Children’s Hospital of The King’s Daughters of Eastern Virginia Medical School, UMass Memorial Children’s Medical Center, University of Minnesota Amplatz Children’s Hospital, University Hospital Rainbow Babies and Children’s Hospital, University of Notre Dame Haiti Medical School

Summary/Conclusion: The strength of the program has been its multifaceted approach to collaboration, leading to the challenge of effectively coordinating efforts and communication among institutions. Striving for evidence-based, sustainable practices that fulfill the expressed needs of St. Damien is a continued commitment of the group. The establishment of a residency program at St. Damien will bring further opportunities for collaboration and another dimension to all projects.

The effect of standardized protocols for trainees on a global child health program in Haiti: Improved diagnosis and treatment accuracy

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Background: An increasing number of pediatric health professionals and medical trainees are interested in working with underresourced communities abroad and programs in global child health have increased exponentially to meet this need. While there are documented benefits to the trainees for these short-term experiences, ethical concerns have been raised about the use of inexperienced and undersupervised medical students and residents to provide care for local residents. Since 2011, a team of educators in collaboration with the Haitian Ministry of Health developed and implemented an effective, efficient, and sustainable pediatric outreach health program targeting all children in the Bas Limbe region of Northern Haiti. This outreach program is an ongoing effort to service a larger population of children. Standardized protocols for treatment of the most common conditions were created to encourage consistency across providers, including medical trainees. To evaluate the effectiveness of this program, data was reviewed on the pediatric patients seen during these outreach missions over a 2-year period to compare the consistency of diagnosis.