media campaigns. Through the new virtual library configuration, the GANM will be better equipped to strengthen access to resources, knowledge, and best practices to build the capacity of the global GANM community.

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Teaching Global Health Nursing: The Process of Integrating Nursing Training into the Clinical Education Partnership Initiative

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Program/Project Purpose: Nurses make up the majority of the healthcare workforce. For this reason, the Clinical Education Partnership Initiative (CEPI) expanded its model of medical training to include University of Washington nurses, specifically graduate students in nurse practitioner, midwifery and community health nursing programs. With an eye towards education, multidisciplinary collaboration, and strong local partnership, the UW nursing/CEPI partnership has been able to better engage providers and staff of various clinical backgrounds and specialties in and around Naivasha, Kenya. This has strengthened the capacity of nurses at the Naivasha Sub-County Hospital and surrounding community and has created a uniquely sustainable introduction to global health nursing for the students from UW.

Structure/Method/Design: CEPI started in 2012 building off of a longstanding research partnership between the University of Nairobi (UoN) and the UW, through the Medical Education Partnership Initiative (MEPI). CEPI allows UW residents, medical students and now nurses to partner with UoN trainees and Kenyan providers at Naivasha Sub-County Hospital in clinical practice, health education and quality improvement initiatives. It has trained 2 cohorts of faculty-supervised nurses for 4-week rotations each August. Trainees have ranged from undergraduate students, to community health Master of Nursing (MN) students, to Doctorate of Nursing Practice students in midwifery and nurse practitioner programs specializing in pediatrics, adult-gerontology, family practice and mental health. In addition to the focus on building partnerships, trainees completed pre-departure activities, submitted reflective journals, facilitated continuing medical (CME) sessions, and wrote a final report for a grade.

Outcome & Evaluation: Nursing trainees have facilitated 18 CME and health education trainings, participated in 2 public health programs, and initiated 5 hospital-focused quality improvement projects. They've also established lasting partnerships with Kenyan colleagues that have continued after the study abroad ended. 25% of UW nurses from the first cohort returned to work at Naivasha this year, and more are expected to in the near future.

Going Forward: Nursing rotations are limited to once a each year but moving forward the goal is to rotate nurses through with residents year-around. The next step is to also partner UoN graduate nursing students with UW nursing trainees.

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Global Child Health Curricula: A Systematic Review

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Background: Global child health (GCH) education is becoming an increasingly important component of paediatric training. Over the past 10 years, the number of medical programs offering GCH tracks or elective courses has significantly increased. This rising demand highlights the need for thoughtful assessment of GCH curricula.

Methods: A systematic review of Ovid MEDLINE and EMBASE databases concerning GCH curricula was conducted. Three search themes were used: curriculum, global health, and paediatrics.

Findings: A total of 416 records were identified for initial screening and of these, 28 were included in our final analyses. All GCH curricula identified were designed for one or more audiences within the medical profession, with 96% of curricula aimed at medical residents. Strikingly, we did not identify any published literature on curricula that were designed for health professionals other than physicians. Key curricular components included domestic and/ or international field experiences (78% of identified curricula), followed by didactics in various topics related to GCH (48% of identified curricula), and scholarly projects (43% of identified curricula). The topics deemed important were ethics and cultural awareness (68%), diagnosis/management of common pediatric tropical diseases (64%), and global child survival/mortality and morbidity (55%). Most papers recommended teaching these topics via didactic methods (80%). Great variability was noted among the methods used to evaluate both trainees and programs. Funding and financial support was noted as a major barrier to implementing a GCH curriculum in the majority of published records (71%).

Interpretation: While there is some consensus among published reports, variability in curricula still exists, especially among program and trainee evaluation methods. Given the interdisciplinary nature of GCH, it is noteworthy that no peer-reviewed literature exists regarding GCH curricula designed for interdisciplinary trainees. The findings from this study will inform future educational endeavors that aim to design and evaluate a novel curriculum in GCH.

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3D Printing to Repair, Modify and Create Medical Equipment in a Resource Limited Setting

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Program/Project Purpose: Clinicians and technicians working in low resource settings have limited technology. They must be innovative to care for a diverse patient population with a wide breadth of