We suggest similar programs consider core curricula in grant writing and global public policy.

Funding: None.

Abstract #: 1.029_HRW

Better preparing emergency medicine physician trainees for global and rural practice settings: a longitudinal component of university of Arizona's south campus emergency medicine graduate medical education curriculum

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Program/Project Purpose: University of Arizona's South Campus Emergency Medicine (EM) residency program created a unique Global, Border, and Rural Health (GBRH) curricular component to increase recruitment/training of Emergency Physicians to staff rural resource-limited settings in Arizona and internationally. This program addresses national efforts to better educate clinicians in population-based health, intercultural care, and ultimately reduce health disparities locally and globally. With 30% of Arizona being primarily Spanish speaking in 2010 and projected to reach 50% by 2030, this program also aims to increase quality of care in the Spanish speaking population through reducing language barriers by integrating Spanish language training.

Structure/Method/Design: This ACGME residency training institution has a specific GRBH focus across clinical specialties and trains 400 medical students and 450 post-graduate resident physicians annually. The 6 EM residents/year enrolled in the 3yr program apply according to the ACGME "match" process. The GRBH curricular components embedded in the EM residency program include: a required rural clinical rotation, longitudinal GRBH lecture series with medical Spanish/cultural competency training, and an opportunity to become a dual-role Spanish interpreter. A "Distinction Track" is available and aligns academic requirements with clinical rotations to complete an educational or quality improvement project in capacity development with rural/ international collaborators. Formative program assessments include ACGME milestones attainment, faculty evaluations, rural/ global site evaluations, self-evaluation and individual biannual medical Spanish language assessments. The GRBH curricula component is revised based on programmatic feedback and evolving guidelines.

Outcome & Evaluation: Since 2010, twenty-two resident physicians completed the program, with several taking clinical jobs in rural hospitals. Eight EM residents qualified as dual role Spanish interpreters. Currently, there are 4 rural Arizona sites (including hospitals on Native American reservations) and international rotations in Guatemala, Costa Rica, Mexico, Nepal, Kenya, and Uganda.

Going Forward: This unique GRBH curriculum component has had significant impact in recruitment and desire to practice in rural EDs. Challenges include obtaining sustainable funding for resident rotation/presentation expenses and protected faculty time

for program refinement and collaboration development. Future goals include increasing dual-role Spanish interpreters, creating evaluation metrics for global health competencies, and developing collaborative proposals for fundable stakeholder-driven education, quality improvement, and research projects in Arizona and internationally.

Funding: None.

Abstract #: 1.030_HRW

Collaborative development of an international training program in surgery, pathology, anatomy and medical education: exploration of the value in exchange experiences between Haitian, Rwandan and canadian medical students

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Background: As healthcare delivery requires providers to cross international barriers and collaborate with other countries, there is a recent trend towards international training approaches of future health practitioners. We organized an international training program at McGill University from June 29- July 17th 2015. The aim of the project was to explore the value of an international exchange program for medical students in surgery, pathology, anatomy, and medical education.

Structure: The three-week long international training program involved students from Rwanda(N=3), Haiti (N=2), and Canada(N=2). The students spanned from first year to sixth year of their medical training. The program consisted of five key components; Anatomy Dissection, Research Methods with students participating in small group-learning sessions that introduced the research method, Clinical Simulation activities to practice suturing, orthopaedic casting, and foley catheter insertion. Clinical Shadowing of pathologists and trauma surgeons, and Structured Teaching Sessions to ensure the effective transfer of knowledge back to their communities. To evaluate the international exchange program a survey was administered to students using a mixed methods approach (qualitative and quantitative).

Outcome/Evaluation: Common motivations for pursing the international exchange included personal and professional growth, travel, and establishing relationships. The outcomes of the exchange included improved career development, a sense of responsibility towards one's own community, development of teaching skills, and an increased cultural awareness and sensitivity. All students participating in the exchange agreed that the anatomy dissection component improved their knowledge of anatomy and made them more comfortable teaching the material. Furthermore, all the students agreed that the clinical simulation activities and clinical shadowing experiences allowed for them to integrate the different disciplines. All students felt the research component had too little time devoted to it within the program, and that the knowledge presented was beyond their educational level.

Going Forward: The development of an integrated program in surgery, anatomy, pathology and medical education provided medical students with an opportunity to to learn about differences