Program Purpose: Medical residents are demanding global health themed and international electives to promote their training and interests. The Center for Global Health and the Children’s Hospital of Colorado developed a formal global health track and international elective in 2012. The clinic, in southwest Guatemala, provides experiential learning, through illness and psychosocial issues that are unique to international experiences, but not systematically learned during pediatric residency. Preliminary evaluation by rotating residents reported unique experiences and growth in diagnostic skills, treatment options and interpersonal communication; but also revealed a lack of preparedness and resources for these unique clinical situations. Current research supports pre-rotation education, competency-focused goals and debriefing as important factors to successful global health electives. This program intends to create a full elective curriculum, designed to address specific competencies using entrustable professional activities.

Structure and Methods: This is a group effort with residents in the global health track, the fellow and faculty. The American Academy of Pediatrics and additional organizations have developed competencies for global health education, from which we are customizing to our elective. Entrustable professional activities are also forming the framework for developing an online, downloadable, platform with text and video material, assigned reflections as well as teaching presentations for the pediatric residency program and the clinic nurses. This platform will complement and enhance the clinical experience.

Outcome and Evaluation: Post elective debrief and surveys alongside formal evaluations facilitate assessment and improvement of the curriculum. To date, there is an outline of curriculum, including competencies and entrustable professional activities, with topics currently being curated into text and video. The team is working with the medical education department within the residency program as well.

Going Forward: The team is working to create content and evaluations to assess progress. The curriculum will be made available to rotating residents as it is created. The elective will become more robust and this curriculum may be adapted for use by international rotations at additional institutions.

Funding: The team has no direct funding of this program but is supported by the institutions listed above.

Abstract #: 2.023_HRW

Developing an oral health care curriculum for Rwandan primary school-aged children using the classroom teachers in a non-traditional manner to promote life-long oral health knowledge and practices

V.I. Meeks¹, M.N. Johnson¹, R.E. Salzman¹, S. Yoon¹; ¹University of Maryland School of Dentistry, Baltimore, MD, USA

Program/Project Purpose: The Rwanda Annual Health Statistics Booklet produced by the Rwanda Minister of Health’s Health Management Information System notes that diseases of the teeth and gums consistently ranks among the top ten most frequent outpatient services in the district hospitals of Rwanda. In 2010, diseases of the teeth and gums ranked #1. There are a reported approximately 122 dentists and dental therapists in Rwanda serving a country of 11 million. This shortage of oral health care providers, even more apparent in resource-poor rural communities of Rwanda, provided motivation to design a project where the use of available human resources could be used to promote and expand oral health knowledge. This non-traditional approach to providing oral health education uses primary school instructors to teach oral health across the various classroom subjects in the school curriculum. The goal of the project was to develop an oral health care curriculum that can be implemented across various primary school classroom subjects that would provide instruction in proper oral hygiene instructions as well as foster sustainable lifelong oral health care knowledge and habits. The Unukundo Learning Center (ULC), a preschool to third grade (with fourth grade classrooms under construction) primary school located in rural Muhunga, Rwanda was selected for the project because of direct access to school administrators and teachers, relatively small teacher to student ratio class size and there is a dental clinic onsite.

Structure/Method/Design: Utilizing available NIH and American Dental Association (ADA) oral health education guidelines for elementary school age children, lesson plans were developed with modifications paying close attention to the need for cultural competency. Lesson plans were designed to be assimilated to the “Scheme of Work” template used by the ULC faculty. Collaborative discussion between the faculty and project designers provided input relative to where in the curriculum (i.e. subject) could various oral health concepts could be presented.

Outcome & Evaluation: Facilitate increasing autonomy in developing lesson plan topic that promote life-long good oral health is anticipated as lesson plans are reviewed after implementing.

Going Forward: The University of Rwanda College of Medicine and Health Sciences, School of Dentistry uses ULC as one of its outreach dental clinic sites. The project hopes to have the dental students work with the ULC faculty to foster good oral health as an interprofessional collaboration as lesson plans continue to be developed.

Funding: University of Maryland Baltimore CENTER FOR GLOBAL EDUCATION INITIATIVES Interprofessional Global Health Grant Award for Faculty 2014-2015.

Abstract #: 2.024_HRW

From buzzword to lasting change: The journey from headcount diversity to truly inclusive nursing communities

F. Mena-Carrasco, A. Gresh, E. Dallman, E. Johnson, L. Rosales, V. Pantaleon, K. Brooks, P. Sharp; Johns Hopkins University School of Nursing, Baltimore, MD, USA

Program/Project Purpose: Diversity, inclusion and cultural humility are foundational for building an effective health care workforce. The IOM reinforces the imperative to develop a nursing workforce that is prepared to serve an increasingly diverse and global population. Efforts to improve diversity in health care, however, must themselves be inclusive in design. One that not only improves the pipeline and recruitment of underrepresented individuals, but also creates and sustains inclusive, respectful conditions in which all can contribute, learn, feel valued, and succeed.

Structure/Method/Design: In 2008, the Dean of the Hopkins School of Nursing (JHSON) commissioned an evaluation that identified gaps in the ethnic, cultural, and religious diversity of JHSON