Background. To mitigate the HIV pandemic and increasing outbreaks of infec-
tious diseases, sub-Saharan African countries need increased healthcare worker cap-
acity. Using a small needs assessment survey, we describe a successful collaboration between the Ministry of Health (MOH), the University Teaching Hospital (UTH), the University of Zambia (UNZA), and the University of Maryland Baltimore (UMB) to train Zambian physi-
cians in advanced HIV medicine and infectious diseases.

Methods. We examined the need for advanced HIV clinical care expertise in
Zambia, UNZA, UTH and UMB and partnered in 2008 to create a 1-year Postgraduate
Diploma in HIV Medicine. The consortium extended this to an 18-month Master of Science in HIV Medicine to better align with existing professional advancement schema. In 2012, UNZA and UMB started a 4-year Master of Medicine in infectious diseases (MMedID), which was then expanded to a 5-year training program combin-
ing internal medicine and infectious disease (MMedIM/ID) in order to produce a cadre with wider expertise in internal medicine and infectious diseases. Instruction consists of bedside teaching, didactic lectures, case conferences, and journal clubs. The bulk of teaching came from UMB clinical faculty with expertise in HIV and ID; faculty are either based in Zambia or visit from the United States.

Results. The MSc HIV program trained 27 physicians; of these, 24 (89%) are in health leadership positions in Zambia, with 17 (65%) directly involved in clinical care (mostly in the public sector) and 7 (15%) working within either private practice or for non-governmental organizations. In 2017, 1 physician emigrated to another African country, another one died and the third is in clinical nonleadership position in Zambia. The MMed ID program has enrolled 14 physicians. The first two graduates of the program completed the program in 2017 and took health leadership roles within the MOH as well as teaching positions at UNZA.

Conclusion. Educational collaborations embedded within local institutions and structures can provide advanced healthcare expertise within resource-limited settings. The UNZA/UMB MMed IM/ID collaboration is a model example of a successful university partner-
ship that has resulted in retaining health leadership and clinical care expertise in Zambia.

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1322. Implementation and Effectiveness of the Asia Pacific HIV Practice Course: Building Capacity of Healthcare Workers in the Region

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Background. Building the capacity of healthcare workers (HCW) can positively influence service quality and patient care. Given the limited HIV training opportuni-
ties in the Asia Pacific Region, the Asia Pacific HIV Practice Course (APHPC) aims to
improve knowledge and skills and encourage patient-centered practice.

Methods. The APHPC is organized by an interprofessional organizing commit-
tee. The course was developed based on a needs assessment of HCWs in the region and is run over 4 days. Using didactic and interactive learning approaches, the course covers aspects of service delivery to hundreds of HCWs, predominantly nurses, social workers/counselors and, pharmacists have attended the course over 2 years (2016 and 2017). Participants have attended from Singapore, Sri Lanka, Indonesia, Malaysia, Philippines, Bangladesh, Papua New Guinea, Myanmar, and Thailand. The APHPC has proven to be an impactful and highly evaluated
program. Changes include, additional staff training, revisions to counseling models and services and the implementation of monitoring and evaluation struc-
tures.

Conclusion. The APHPC has proven to be an impactful and highly evaluated
course. To ensure the course continues to influence and improve practice, the content of the course can be expanded to cover nonstandard topics, and further interactive learning experiences can be incorporated.

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