The stairway to health: A community-based education programme on exercise promotion in a University Hospital

Alberto Velazquez, Instituto Universitario del Hospital Italiano de Buenos Aires, Buenos Aires, Argentina
Alejandrina Losasso, Instituto Universitario del Hospital Italiano de Buenos Aires, Buenos Aires, Argentina
Cecilia Picolla, Instituto Universitario del Hospital Italiano de Buenos Aires, Buenos Aires, Argentina
Christian Rhaiel, Instituto Universitario del Hospital Italiano de Buenos Aires, Ciudad de Buenos Aires, Argentina
Eduardo Durante*, Instituto Universitario del Hospital Italiano de Buenos Aires, Ciudad de Buenos Aires, Argentina

Background: Community-based education (CBE) refers to learning activities that use the community extensively as a learning environment. CBE enables students to experience the health needs of society. In our urban community, lack of physical activity is a priority health problem.

Summary of Work: We designed a CBE teaching programme for medical students. Twenty six students in 4 groups supervised by teachers designed, implemented, analysed and reflected on an intervention to promote exercise in the community. The study included 4 phases; each phase lasted 2 weeks on consecutive weeks. Students acted as observers. The first phase consisted in registering the number of persons entering the hospital using the stairway (SW) or the escalator (EC). Each intervention was added to the previous. The first intervention consisted of the display of calories wasted in each step with stickers (S); the second one, announcements (A) posted at the beginning of the stairway and the third one, the distribution of brochures (B). Chi-square test was used for comparisons.

Summary of Results: Phase one (no intervention) included SW 880 and SC 9,264 persons; phase two (S), SW 1124 and SC 9029; phase three (S+A), SW 1514 and SC 9784; and phase four (S+A+B), SW 1213 and SC 7159 (all differences p<0.00). Also, comparisons showed an incremental significant difference of approximately 2% for each intervention in favour of the use of SW (p<0.00). Students reflected about the impact of community interventions on the promotion of exercise.

Discussion and Conclusions: CBE is fundamental for students to develop the ability to incorporate principles of behaviour change appropriate for specific populations within a community.
Experiences with clinical rotations in nursing homes in medical education

Elin Olaug Rosvold*, University of Oslo, Department of General Practice, Faculty of Medicine, Oslo, Norway
Jarund Strand, University of Oslo, Department of General Practice, Faculty of Medicine, Oslo, Norway
Gunnar Kvalvaag, Oslo Municipality, The Nursing Home Agency, Oslo, Norway
Ingrid Os, University of Oslo, Faculty of Medicine, Oslo, Norway

Background: Tomorrow’s physicians have to deal with a rapidly growing ageing population. Despite being the largest institutional level in our health care system, Norwegian medical students have so far not been trained in nursing homes as part of their undergraduate training.

Summary of Work: In 2013, a pilot program of two weeks clinical rotation in nursing homes for medical students was established at the Faculty of Medicine in collaboration with the Oslo municipality. The students, who were in the last years of the study, were supervised by a physician at each nursing home. They were trained in clinical skills and procedures according to a written manual. Evaluation of the pilot was done by interviews of students and supervisors.

Summary of Results: The pilot included 38 medical students and 22 supervisors at 16 different nursing homes. The evaluation showed that both students and supervisors found the training very useful. The students reported improved skills in communication with elderly patients and their next of kin. They were engaged in multidisciplinary team work, particularly in medication review and in the end-of-life care. The students were surprised about the large extent of advanced medical treatment in nursing homes.

Discussion and Conclusions: Nursing homes are important learning arenas for undergraduate medical students. This work-based training should be part of the medical curriculum.

Take-home messages: An aging population calls for physicians skilled in treatment of elderly patients. Nursing homes are important learning sites for work-based training in clinical skills, communication and multidisciplinary teamwork.

Home visit experience: A Medical school curriculum

Sangsuee Thamakaison*, Faculty of Medicine, Ramathibodi Hospital, Mahidol University, Family Medicine, Bangkok, Thailand
Kanokpon Sukhto, Faculty of Medicine, Ramathibodi Hospital, Mahidol University, Family Medicine, Bangkok, Thailand
Dumrongrat Lertrattanon, Faculty of Medicine, Ramathibodi Hospital, Mahidol University, Family Medicine, Bangkok, Thailand
Thunyarat Anothaisintawee, Faculty of Medicine, Ramathibodi Hospital, Mahidol University, Family Medicine, Bangkok, Thailand

Background: Incorporating home care in medical school training for students to understand psychosocial, economic and community factors as the determinants of health, we have set home care sessions for undergraduate medical students at Faculty of Medicine, Ramathibodi Hospital, Thailand.

Summary of Work: The fourth year medical students have scheduled to visit chronic patients during Family Medicine rotation with multidisciplinary team. They had two half-day home visit sessions (one-month-interval) and chart review for preparation prior to each visit with multidisciplinary staffs. Finally, there is summary session for discussion with further plan.

Summary of Results: Half of fourth year medical students were included in the study (N=84). The 5-point Likert scale was used to evaluate the home visit attitudes, skills training, and satisfaction. The scores revealed higher in domain of attitudes towards home visit practice for 4.03±0.56 (mean±SD). However, they scored lower in the domain of confidence in performing home based therapy and home visit skills for 3.42±0.75 and 3.65±0.52 respectively, with at least 8 students felt considerably unconfident. Moreover, the students’ satisfactions with our home care curriculum was scored just 3.67±0.59.

Discussion and Conclusions: Our three sessions of home visits and discussion may be effective to establish home care attitudes for students, however it was not sufficient to make the students gain confidence and enough skills. Thus, more home visit lessons should be implemented into the curriculum. By the way, the students had only moderate satisfactions with our home care lessons and staffs, so we plan to revise the home care curriculum in next semester.

Take-home messages: Home visits have allowed the students to understand the patients’ contexts, home service delivery, the multidisciplinary team work and community as the quality medical care. However, our two half-day lessons had provided only the attitudes but not enough confidence and experience.
#9CC05 (26053)
Medical student reflection on palliative home care experience

Krishna Suvarnabhumi*, Prince of Songkla University, Community Medicine, Songkhla, Thailand
Tasanee Khunthong, Prince of Songkla University, Community Medicine, Songkhla, Thailand

Background: Palliative care has been identified as a core component in undergraduate medical curriculum in many medical schools. Educational technique may vary in each medical school. Prince of Songkla University provided learning experiences to students including lectures, communication skill workshop, palliative home care and case conference.

Summary of Work: Since 2012, fifth year students who rotated to the division of family medicine were assigned to do 3 palliative home visits and attend 1 case conference. Students were divided into small groups. Each group visited 1 palliative care patient. After their first patient visit, students discussed palliative care issues with their assigned preceptor. Then, they conducted a further home visit. Later, each group prepared a case presentation to multidisciplinary palliative care team. After the conference, students do one more home visit. At the end of the rotation, students wrote their reflection on their palliative home care experience.

Summary of Results: Students reflected that they had some experience to work with home care team; they gained palliative care knowledge and skills; they will use palliative care concepts with their future practices; they had gained more insight about ways of life and human life cycle; this experience reminded them of their role to take care of their own family members in the future.

Discussion and Conclusions: From students’ reflection, palliative home care experience has several aspects of recommended educational strategies for palliative care education including experiential learning, multi-professional learning, occasion for self-reflection and group discussion and integration of ethical and psychological considerations. Palliative home care experience is one method of an effective educational experience.

Take-home messages: Palliative home care experience gives an opportunity for medical students to learn palliative care issues.

#9CC06 (25983)
Attitudes and satisfaction of medical students of the Faculty of Medicine, Vajira Hospital, Navamindradhiraj University, towards community service

Anongnard Kasorn*, Faculty of Medicine, Vajira Hospital, Navamindradhiraj University, Bangkok, Thailand
Waranya Imprasittichai, Faculty of Medicine, Vajira Hospital, Navamindradhiraj University, Bangkok, Thailand

Background: The Faculty of Medicine, Vajira Hospital, Navamindradhiraj University is located in the center of Bangkok. Therefore, improving quality of life of communities around the hospital is one of the main policies. Thus, community service activity is now integrated into several subjects including the clinical pathology course.

Summary of Work: A questionnaire was used as a tool to assess the attitudes and satisfaction of 72 third-year medical students enrolled in the clinical pathology course and participated in the community service activity.

Summary of Results: The attitudes and satisfaction of the students toward the community service activity were at the high level (mean = 4.00 and SD = 0.63) and moderate level (mean = 3.08 and SD = 0.59), respectively. In addition, a significant relationship between attitude and satisfaction of the students was observed with p value of 0.0001 and correlation coefficient of 0.7765. There was no significant different between male and female students.

Discussion and Conclusions: The results from this study suggested that the most of the students had positive attitudes and satisfied with the community service activity. However, the results can be used to improve the management of this programme to benefit not only students but also people in the community.

Take-home messages: Community service activity can be used as a mean to enhance medical students’ attitudes toward their community and society.
Pre- and post-attitude and change towards elderly care of second-year medical students after activity participation at a retirement facility

**Fuangfa Benjaorjan**, Suranaree University of Technology, Family and Community Medicine, Nakhonratchasima, Thailand

**Soraya Kaewpitoon**, Suranaree University of Technology, Family and Community Medicine, Nakhonratchasima, Thailand

**Seekaow Churproong**, Suranaree University of Technology, Family and Community Medicine, Nakhonratchasima, Thailand

**Ratsadakorn Yimsabai**, Suranaree University of Technology, Family and Community Medicine, Nakhonratchasima, Thailand

**Background**: The aging population is growing at an alarming rate. The physician’s attitudes, awareness and skills require constant improvement. The study objective is to identify the medical students’ attitude and change towards Elderly care before and after participating in the elderly’s health promoting activity at Tammapakorn Retirement Center.

**Summary of Work**: This experimental study utilizes the second year medical students from Suranaree University of Technology. A self-answer questionnaire is used as a data collecting tool. The collected data is then divided into three categories consisting of general characteristics of the sample population, the pre-attitude and the post-attitude towards elderly care after activity participation. The questionnaire used was translated from the validated UCLA Geriatrics Attitude Scale measuring rating scale. The full score rating is five. The related statistical data analyzed in this study are Mean, Standard Deviation and Paired Sample T-Test.

**Summary of Results**: From 79 medical students, 78 answered the questionnaire representing 98.73% in which 53.8% are male and 46.15% are female. The students’ GPA falls in the range of 3.0 - 3.5 (50%). Per knowledge and experience in elderly care, most students have little to none (66.67%). The analytical comparison of elderly care, pre- and post-attitude is found to have distinction in statistical implication (p<0.01). In addition, the average score for each question is found to be higher for the post-attitude’s score.

**Discussion and Conclusions**: The medical students’ attitude towards elderly care is found to be positive. After the activity participation, the positive attitude is changed to be more positive.

**Take-home messages**: This attitude change can be implemented in medical school curriculum in order to continuously promote positive attitude towards elderly care and geriatrics which leads to social and planning for the growing aging population.

---

**Soraya J Kaewpitoon**, Institute of Medicine, Suranaree University of Technology, Medical Education, Nakhon Ratchasima, Thailand

**Natthawut Kaewpitoon**, Vongchavalitkul University, Public Health, Nakhon Ratchasima, Thailand

**Fuangfa Benjaorjan**, Institute of Medicine, Suranaree University of Technology, Family Medicine, Nakhon Ratchasima, Thailand

**Niwatchai Namwichaisirikul**, Institute of Medicine, Suranaree University of Technology, Family Medicine, Nakhonratchasima, Thailand

**Seekheow Churprung**, Institute of Medicine, Suranaree University of Technology, Family Medicine and Community Medicine, Nakhonratchasima, Thailand

**Ryan A Loyd**, Institute of Medicine, Suranaree University of Technology, Family Medicine and Community Medicine, Nakhonratchasima, Thailand

**Fuangfa Benjaorjan**, Institute of Medicine, Suranaree University of Technology, Medical Education, Nakhon Ratchasima, Thailand

**Nattawat Kaewpitoon**, Vongchavalitkul University, Public Health, Nakhon Ratchasima, Thailand

**Fuangfa Benjaorjan**, Institute of Medicine, Suranaree University of Technology, Family Medicine, Nakhon Ratchasima, Thailand

**Niwatchai Namwichaisirikul**, Institute of Medicine, Suranaree University of Technology, Family Medicine, Nakhonratchasima, Thailand

**Seekheow Churprung**, Institute of Medicine, Suranaree University of Technology, Family Medicine and Community Medicine, Nakhonratchasima, Thailand

**Fuangfa Benjaorjan**, Institute of Medicine, Suranaree University of Technology, Medical Education, Nakhon Ratchasima, Thailand

**Nattawat Kaewpitoon**, Vongchavalitkul University, Public Health, Nakhon Ratchasima, Thailand

**Fuangfa Benjaorjan**, Institute of Medicine, Suranaree University of Technology, Family Medicine, Nakhon Ratchasima, Thailand

**Niwatchai Namwichaisirikul**, Institute of Medicine, Suranaree University of Technology, Family Medicine, Nakhonratchasima, Thailand

**Seekheow Churprung**, Institute of Medicine, Suranaree University of Technology, Family Medicine and Community Medicine, Nakhonratchasima, Thailand

**Ryan A Loyd**, Institute of Medicine, Suranaree University of Technology, Family Medicine and Community Medicine, Nakhonratchasima, Thailand

**Background**: This study aim to assess the medical students’ attitudes toward research base learning (RBL) in community and compare their attitudes between problem bases learning (PBL) in the classroom.

**Summary of Work**: 4th year medical students from medical school of Suranaree University of Technology (2014) participated in this study. A comparison was made of attitudes toward the epidemiology subject between students in two, continually, the problem base learning, knowledge and skill of epidemiology taught predominantly by medical teacher in the format of PBL in classroom and RBL with community diagnosis, survey in the community and then students referred to as the Questionnaire.

**Summary of Results**: The results, a total of 48 (22 Males and 26 Females) students completed data collection. Attitude scales were administered in two successive classes of students. The good level attitudes toward PBL and RBL, were received in which the higher level attitude toward the RBL (p<0.01), respectively. Most of participants was highly satisfied with this RBL and its pressure their perceived value of epidemiology.

**Discussion and Conclusions**: In conclusion, this finding shows that modification in educational methods in general and relevant, RBL in community experience in particular can favorably influence students’ attitudes toward epidemiology.

**Take-home messages**: Transformative Medical Education in community: modification in educational methods in general and relevant, RBL in community experience in particular can favorably influence students’ attitudes toward epidemiology.
Chemical risk assessment of the farmers using applied occupational medicine tool by medical students

Napak Duangjumphol*, The Medical Center of Maharat Nakhon Ratchasima Hospital, Occupational Medicine, Nakhon Ratchasima, Thailand

**Background:** Risk assessment in occupational medicine is a good way to identify problems and to determine safe working practices. Therefore medical students learned about risk assessment by using an occupational medicine tool which involved camping out in the community as well as formal classes.

**Summary of Work:** A camping experience for medical students was coordinated by the hospital on the subject of health promotion, to examine the working practices of farmers in relation to chemical use. The students interviewed the farmers using a questionnaire as an applied-occupational medicine tool. The data were collected and analyzed by descriptive statistics.

**Summary of Results:** The results from 54 respondents were that the chemicals mostly used are paraquat and glyphosate. The unsafe actions of the farmers are that they did not wear protective rubber gloves (51.58%) and that they ate or drank in the workplace (50%). The medical students analyzed and applied the results to give the correct advice and knowledge to farmers.

**Discussion and Conclusions:** Most of the farmers have moderate to high risk in chemical use and lack the understanding for working with chemicals. Health care workers should be aware of this and medical students’ experience can be of use in the future.

**Take-home messages:** Learning from real application of risk assessment using an occupational medicine tool allows medical students to assess risks, to plan and to give advice on safe working practices.

What had students really learned in community-based hospital?: a qualitative evaluation of learning program

Jiratha Budkaew*, Medical Education Center of Khon Kaen Hospital, Family Medicine, Khon Kaen, Thailand

**Background:** The 4th year medical students were assigned to spend one week program in community-based hospitals which expected them to improve knowledge, attitudes, and clinical skills (history taking, physical examination, and provisional diagnosis). This study aimed to explore what they had really learned and to evaluate their achievement of learning objectives.

**Summary of Work:** A qualitative evaluation was conducted among 50 students who had experiences of learning in a community hospital. They were invited to write their reflection regarding what they had learned and to participate in focus groups. All students participated in written reflection and 8 students were selected based on their reflective writing took part in 2 focus groups interview. The discussions were audiotaped and transcribed for content analysis.

**Summary of Results:** Main contents of learning were understanding about hospital administration, informing health promotion and health education, realizing role of physicians in primary care, and adapting to work in rural area. They reflected that they had rarely learned practicing clinical skills. Most of them indicated that one week was too short to learn in needed topics.

**Discussion and Conclusions:** We found that contents what students had learned met the prerequisite learning objectives. Clinical skills may not appropriate for one-week program in community-based hospitals. Curriculum should be revised to ensure the achievable objective objectives. Learning in a community hospital can form the medical experiences for students as physician in primary care. Then, exploring the specific content what they had really learned in that context is necessary to develop appropriate program to enhance active learning and conduct effective educational experiences.
Elective community extension activities: contributions to the undergraduate training of health professionals

MP Panincio-Pinto*, Ribeirão Preto Medical School, Neuroscience and Behavioral Science, Ribeirão Preto, Brazil
L Assoni, Ribeirão Preto Medical School, Neuroscience and Behavioral Sciences, Ribeirão Preto, Brazil
L Oliveira, Ribeirão Preto Medical School, Department of Ophthalmology, Otorhinolaryngology and Head and Neck Surgery, Ribeirão Preto, Brazil
CZ Carniel, Ribeirão Preto Medical School, Department of Ophthalmology, Otorhinolaryngology and Head and Neck Surgery, Ribeirão Preto, Brazil

Background: In the training of health professionals, community outreach activities comprise the elective care network, qualifying the training of students and health care. This study investigated the standpoint of students about the contributions that participation in community extension project offers for their education.

Summary of Work: Through a descriptive exploratory design, this study addressed 24 students from four different health courses (semi-structured questionnaire - Google docs). Qualitatively, content analysis identified empirical categories (open questions); in quantitative terms the frequency of categories was obtained.

Summary of Results: Along the study period (2010-2012) 59 students received scholarships from the Community Extension Program, in 36 approved projects in FMRP-USP. A predominance of projects involving the direct care to the community (61%) was identified. The content analysis of 117 testimonials allowed the identification of three categories on the main contributions to the training of undergraduates. (1) “Developing specific skills” (40.7%), (2) “Personal / Professional Development” (39.3); (3) “Integration theory-practice” (20.5%).

Discussion and Conclusions: The speeches revealed that guided insertion of practical activities from the beginning of undergraduate through community extension activities allows the approach of students to the field of action and specificity of the profession, enabling them to develop skills that may not have been acquired in the lectures. The elective extramural activities also found to be important for enabling the acquisition of procedural skills, a challenge to the training of health professionals.

Take-home messages: The diversification of learning scenarios is a powerful tool for curriculum transformation, approaching students of people’s lives and developing critical scholars glances, facing the real population needs.

Integrating Social Service into Medical Humanities and Social Sciences Curriculum

Soojung Kim*, School of Medicine, The Catholic Univ. of Korea, Medical Humanities and Social Sciences, Seoul, Republic of South Korea
Pyeong Man Kim, School of Medicine, The Catholic Univ. of Korea, Medical Humanities and Social Sciences, Seoul, Republic of South Korea
Claire Junga Kim, The College of Medicine, Ewha Womans University, Medical Education, Seoul, Republic of South Korea
Wha Sun Kang, School of Medicine, The Catholic Univ. of Korea, Medical Lifescience, Seoul, Republic of South Korea

Background: The 5-star doctor of WHO has specified the doctor’s role as care provider, decision maker, communicator, community leader and manager. It is crucial for medical students to be exposed to community needs and have good relationships with other people in order to prepare them for those roles. Medical education can provide students with an opportunity to encounter the marginalized communities and motivate them to be involved with the needs of disadvantaged people.

Summary of Work: The Catholic University of Korea includes social service program in the medical humanities and social sciences curriculum. The course has lectures on social welfare, human rights, and social service and four day social service in Flower Village which is a Catholic social welfare institution.

Summary of Results: This study analyzes satisfaction, feedback, and reflection paper of students who completed the social service program and provides an educational model of medical humanities and social sciences.

Discussion and Conclusions: Students’ satisfaction for the program was 4.23 out of 5. Qualitative study of students’ reflection papers derived 7 keywords, out of which “nature and practice of social service”, “holistic understanding of human”, “empathy and communication”, “social responsibility” are identified with goals of this program, and “happiness”, “respect for human life”, and “compassion” are good indicators as a result of students’ compassionate participation.

Take-home messages: Encounter with marginalized communities within medical curriculum allows students to serve for the people with social difficulties and work for the improvement of their living condition. Students learn to approach to social needs with concern and empathy and seek ways to contribute to those communities.
Community psychology as “Door to community” can help medical students in Inter-professional skill: A qualitative research

Maytinee Konkaew*, Medical Education Center, Psychiatry, Phuket, Thailand

Background: Working with others and understanding the patient’s cultural background and beliefs lead to acceptance and sympathy for the patient. As teamwork is important in patient care, the medical students of Vachira Phuket Medical Education Center were taught community psychology in 5th year to evaluate the skill to work with patients and medical staff.

Summary of Work: We carried out a group interview of the 5th year medical students (recorded mp3) about concepts of community psychology applied to their daily work with others in the professional health team. We analyzed qualitatively data by using SCAT (steps for coding and theorization).

Summary of Results: The medical students believe this subject is about understanding the different individuals that they have to deal with such as patients, relatives, and colleagues had got the knowledge to work with patients and relatives to the doctor’s treatment. Moreover it can be used for community health projects where they are motivated to adjust their health behavior such as in the Muslim community. One student said “Community Psychology is the door to the community”. This knowledge leads students to understand and accept the patient who refuses the doctor’s treatment and it can be used to get important data from patients, relatives, and the inter-disciplinary health team such as the nurse, pharmacist, physiotherapist, psychologist and nurse aid.

Discussion and Conclusions: The medical students applied community psychology in daily practice as "Door to the community". The majority apply it to patient care, to understanding the patient’s way of life, culture, belief, determination, and acceptance of their doctor’s treatment.

Take-home messages: The medical students should had community psychology skill before they work with the community.

The effect of a study tour in a disaster area on medical students’ interest in local healthcare

Junichi Tanaka*, Tohoku University Hospital, Department of Education and Support for Community Medicine, Sendai, Japan
Seiki Kanemura, Tohoku University Hospital, Department of Education and Support for Community Medicine, Sendai, Japan
Shin Takayama, Tohoku University Hospital, Department of Education and Support for Community Medicine, Sendai, Japan
Michiaki Abe, Tohoku University Hospital, Department of Education and Support for Community Medicine, Sendai, Japan
Tadashi Ishii, Tohoku University Hospital, Department of Education and Support for Community Medicine, Sendai, Japan

Background: After the Great East Japan Earthquake, disaster areas have faced a serious shortage of physicians, especially on the Pacific coast. In addition, it has been observed that some medical students are uninterested in providing medical services in this area, as they do not know the seriousness of the situation.

Summary of Work: We designed and conducted a compulsory study tour for first-year medical students that consisted of exploring some affected areas and listening to a lecture on the disaster. Then, we administered a questionnaire about the study tour. The main questionnaire items included an evaluation of the tour, students’ impressions of the sites as places where they might want to work, etc. Students noted their responses on a 5-point Likert scale, ranging from 1 (worst or weakest) to 5 (best or strongest).

Summary of Results: The questionnaire was answered by 121 students, 93% of the total number. Regarding the evaluation of the tour, the average rating was 4.08. A comparison of ratings before and after the tour of the places where students said they might want to work showed a significant increase for rural areas (2.90 vs. 3.27), disaster areas (3.33 vs. 3.68), clinics (2.74 vs. 3.03), and small medical facilities (3.25 vs. 3.48).

Discussion and Conclusions: This study tour increased medical students’ interest in working in rural areas, disaster areas, and small medical facilities. Further studies will need to investigate which specific factors were beneficial.

Take-home messages: The study tour in the disaster area was a useful way to increase medical students’ interest in local healthcare.
Northern Family Medicine Residency Teaching: A Qualitative Study of the experiences

Christie Newton, University of British Columbia, Family Practice, Vancouver, Canada
Joanna Bates*, University of British Columbia, Centre for Health Education Scholarship, Vancouver, Canada

**Background:** Across Canada, family practice training takes place in widely distributed sites, including rural, northern settings far from the main campus. At the University of British Columbia, the Family Practice Residency Program is distributed into 16 teaching sites, across the province, over 900,000km². Over half of the 800 plus family practice preceptors teach in a rural community. Given some of the challenges identified in the postgraduate program at these distributed sites, we wanted to learn more about the teaching experiences of preceptors in northern BC communities.

**Summary of Work:** This qualitative study aimed to develop a better understanding of the teaching experiences of preceptors in rural northern communities. Twelve preceptors (6M:6F) from northern British Columbia completed semi-structured interviews about their day-to-day experiences with residents, teaching in their community, and their relationship with the residency program. Interviews were recorded, transcribed and coded, the resulting data reviewed, and emergent themes identified by the research team.

**Summary of Results:** The data revealed that challenges, facilitators, and rewards of teaching in northern training sites arise from the individual resident, the prior experience and professional identity of the preceptor, the isolation of the community and the larger program characteristics. While some experiences mirror those of preceptors everywhere and in every discipline, some appear to be unique to preceptors in northern communities.

**Discussion and Conclusions:** Preceptor challenges are generally well understood; however, those specific to preceptors in northern rural communities are less well articulated.

**Take-home messages:** With more information, we can design better support mechanisms to ensure sustainability of these preceptors, one of our most valuable educational resources.

Perception of Brazilian medical school teachers and students on curriculum integration based in cases from the primary health care

Helena Chini*, Federal Institute of Southern Minas Gerais Brazil, Physiology, Brazil
Maria José Osis, Unicamp, Obstetrics & Gynecology, Brazil
Meire de Paula Ribeiro, Unicamp, Obstetrics & Gynecology, Brazil
Eliana Amaral, Unicamp, Obstetrics & Gynecology, Brazil

**Background:** National Directives on Medical Curriculum 2001 & 2014 adopted community-based learning and integrated curriculum between basic, clinical and humanistic science through problematization of the experience in primary health care.

**Summary of Work:** Seven focus groups with 60 students, and semi-structured interviews with 23 teachers in four medical schools were conducted. Two public and two private schools, were chosen to identify factors associated with success and failure of curriculum integration experiences.

**Summary of Results:** Professors perceived as factors leading to success: student participation in clinical practice, patient contact, use of real cases, bringing together teachers of basic and clinical sciences, and commitment to teaching. For students, the success factors are: observing clinical consultations, teacher facilitating learning, teacher’s profile, and small group discussion. As factors that contribute to failure, teachers mentioned: lack of students´ commitment to case discussions, teachers commitment to learning, teaching time dedicated to the integration activity. Students indicated as failure factors: lack of teachers´ commitment with teaching and integration activities, not aligning with integration objectives, and lack of educational program evaluation.

**Discussion and Conclusions:** To reach an integrated curriculum success, the different perspectives involving professor and students should be considered to plan and redesign. Conclusion Teachers and students agree that profile of the facilitator and commitment for the learning process, patient contact, discussing real cases are factors that contributed to the success of the integration strategy. Strategy should continue, and be evaluated periodically.

**Take-home messages:** The use of real cases is a powerful strategy, which is can reach the maximum potential when teachers are prepared to promote reflection.