776 PERCETION'S OF FUTURE PHYSICIANS ABOUT HOMOPHOBIA

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Background Lesbian, gay, bisexual, transgender and intersex (LGBTI) persons represent an underserved-population susceptible to health-care inequalities. Homosexuality is now accepted as a normal variant of human-sexuality, but homophobia among health-care professionals is not well documented. Establishment of trustful doctor–patient relationships is impossible in the presence of homophobia. Therefore in this study, it is aimed to determine whether homophobia existed and how it is effected in a sample of the first and last year medical students (FLYMS), future doctors.
Methods In this descriptive study data is collected with a questionnaire on socio demographics, Hudson and Ricketts Scale (HRHS), some experiences with LGBTI individuals from FLYMS in a university via their internet groups.
Results Out of 802 students, 28,9% participated (56,0% last year). Average age is 22,0 ± 0,9 and 24,0 ± 1,0, and share of the female students is 47,8% first year and 50,4% last year respectively. 52,8% of the students read a book, 62,7% watched a movie, and 53,6% educated on LGBTI before the survey. Frequency of a LGBTI member in the family is 3,3%, and 43,3% (repeated cases) among friends. 3 student declared their sexual identity as LGBTI. Average score of HRHS is 81,06 ± 30,6 (comparatively high-indicating homophobia). There is no difference between classes in terms of HRHS score medians. Female students' scores is high ($p < 0.001$) than males, 45,9% declared LGBTI patient will not affect their service provision, 36,4% are not sure how to communicate with LGBTI persons. When a student have t interpersonal contact with LGBTI friends, watched movie and read a book about LGBTI persons and untied to traditions, HRHS score decreases ($p < 0.001$) ie, these are associated with positive attitudes.
Conclusions Medical students' homophobia if left unchallenged, will hinder care provided to LGBTI patients. Physician homophobia may disallow a health doctor-patient relationship and may cause a decrease in patient's ability to disclose sensitive issues. Students should be trained on to respect and conscious about LGBTI person's health rights, and equity to health service access. Activities of student groups on sexual orientation and sexual identity should be supported.

777 PATIENT SAFETY: LAST YEAR MEDICAL STUDENTS' KNOWLEDGE ABOUT INFECTION CONTROL IN A UNIVERSITY HOSPITAL-2014, TURKEY

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Background Health-care-associated infections/hospital-acquired-infection-HAI affects patients in a hospital or other health-care facility, and is not present or incubating at the time of admission. These infections are commonly transmitted when health care providers become complacent and do not practice correct hygiene regularly. Moreover, some medical procedures bypass the body's natural protective barriers. Since medical staff moves from patient to patient, the staff themselves serves as a means for spreading pathogens. Essentially, the staff acts as vectors. In the United States, it is estimated roughly 1.7 million HAIs, cause or contribute to 99,000 deaths, in Europe, the category of Gram-negative infections are estimated to account for two-thirds of the 25,000 deaths each year. In this study it is aimed to investigate last year medical students` (LYMSs) basic knowledge on contamination, basic rules and merits of prevention on HAIs.
Methods A questionnaire was administered to LYMSs containing questions on their sociodemographics and some questions about HIA (knowledge, practice and prevention of contamination). Of the LYMSs, 70% participated in this descriptive study.
Results Of the respondents, 65,8% were male, 55,9% experienced work accident, 59,6% had knowledge about HIA from various sources. Average score of knowledge questions was 17.4 (min 5, max 25). No association was found between the score and gender, formal training on HIA. Significant relation was found between knowledge score and hospital infection control program awareness (Mann Whitney U, $p = 0.001$), work accident history (Mann Whitney U, $p = 0.029$).
Conclusions Changes in undergraduate medical training mean that students have direct patient contact from an early stage of their training. These results raised concerns about medical students' knowledge about infection control. In spite of the vigorous efforts of the Hospital Infection Control Committee since 1984 in this hospital, HIA is moderately frequent. The study is shared with the Faculty. Therefore faculty should consider the need for a more structured model for the teaching and assessment of infection control for medical-students.

778 DESIGN RESEARCH TOWARDS RESILIENT CYBER-PHYSICAL EHEALT SYSTEMS

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Background eHealt systems are cyber-physical systems (CPS) making safety-critical decisions based on information from other systems not known during development. To achieve the trust of users, measures of safety have to be taken into consideration in accordance with the "privacy by design" approach. This requires secure storage of information and guaranteeing safe exchange of data preventing unauthorised access, loss of data and cyber-attacks.
Methods In this design research, a proof-of-concept for eHealth CPS is built utilising 1) general principles of information security, 2) principles of building of cyber trust and 3) Hevner & Chatterjee's theory of complex software-intensive system.
Results Resilient CPS consists of two sub-systems: the proper resilient system and the situational awareness system (main prerequisite towards cyber security). In a system of CPS, three networks are composed: hardware, software and social network. Trust should be systematically built up at all layers. The resilient hardware network is the basis on which the information sharing between different stakeholders could be created via software layers. However, the trust inside social networks quantifies the pieces of information that will be shared - and with whom.
Conclusions From citizens' point of view, eHealth is wholeness in which sectors of information security (availability/confidentiality/integrity) hold true. Present procedures emphasise confidentiality