



Kaiser Permanente Southern California Code of Conduct and Risk Reduction Agreement for Global Health Electives

Kaiser Permanente Southern California is committed to preparing leaders for distinguished careers in clinical practice, teaching, research, and public service. As part of that commitment, we support our trainees in their humanistic and compassionate desire to participate in global health experiences. This document provides important information about the health and safety risks of traveling abroad and also recognizes that while abroad, you are a representative of Kaiser Permanente. As such, in order to participate and receive credit for your experience, you are required to carefully review and sign this risk reduction and code of conduct document. **Please review this form and initial each section, date and sign the last page, and submit the document with your application.** Please also review this form with the Kaiser Permanente faculty member who will serve as your global health mentor and make sure you fully understand all aspects of this policy. A global health experience can be incredibly powerful and inspiring, and we congratulate you on your decision to apply for this global health experience.

Personal Health:

- I will arrange an appointment with my primary medical doctor or travel clinic, to ensure that pre-travel vaccinations, medications, malaria prophylaxis, and other essential medications are obtained in sufficient time prior to departure (it is recommended a pre-travel appointment be scheduled for two months prior to departure).
- I will sign up for travel insurance which will provide coverage for health issues while abroad, coverage of lost or stolen items, as well as expatriation should there be any conflict or safety concern while I am abroad. I understand that I will be financially responsible for any items or dollar amount not covered through the travel insurance (deductibles, exclusions, etc).
- I will keep a copy of my health insurance and evacuation insurance information with me on my person at all times during my international experience, and provide a copy to my team lead.
- Health issues may be exacerbated under stressful and unfamiliar situations. I have no physical or mental health issues that would put me at risk or preclude my safe participation in this program. I understand that there may be limited availability of medications and will be responsible for bringing my own supply of necessary medications (over-the-counter and prescription) for personal use.
- I understand that neither Kaiser Permanente nor the host institutions are responsible for expenses relating to any illness occurring during my international experience. I will be responsible for medical and medically related expenses and for seeking reimbursement

from my travel insurance and/or my own health insurance company.

- Prior to my departure I will review the emergency contact information with my Kaiser Permanente faculty mentor and fully understand whom to contact in case of illness or injury while working abroad. If I become ill or injured I will follow the notification process as outlined.

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Occupational Standards:

- I will or have already participated in the Kaiser Permanente Global Health Education Program (GHEP) pre-departure training, or have reviewed the on-line health and safety talk and passed the quiz associated with this presentation.
- I understand that I should always apply universal precautions, and that if there is possible exposure to HIV I will contact the nearest local health official to receive HIV post-exposure prophylaxis.
- I will discuss with my faculty mentor whether I will need to bring N95 masks and gloves, or HIV post exposure prophylaxis, and will review with my mentor the appropriate situations for use of these precautions.
- I will utilize universal precautions at all times.

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Travel and Recreational Safety:

- I understand that my global health experience is for educational purposes. If I would like to travel for tourism, I will do so outside of my educational time, it will not conflict with my clinical or research commitments, and it will be at my own risk. I will arrange for my own travel and cover my own expenses when travelling as a tourist. When traveling as a tourist I recognize that I remain a representative of my institution and will maintain the same code of conduct and engage in the same safety measures.
- If there are any itinerary changes, regardless of whether these changes impact the dates of my rotation abroad, I will discuss these with my faculty trip mentor or site preceptor.
- Traveling by car in the developing world is markedly more dangerous than traveling elsewhere. I will wear safety belts in vehicles when a belt is available.
- I understand that my institution recommends against traveling on motorcycles, in the open back or tops of vehicles and trains, and at dusk or nighttime. I will participate in these modes of travel at my own risk.
- I understand that my institution recommends against driving motorized vehicles while working or traveling internationally, and I will do so at my own risk.
- When engaging in water sports, I will wear personal flotation devices and will avoid hazardous or unknown conditions.
- Prior to travel, I will review with my primary medical doctor, travel clinic physician, or trip medical lead the risks for exposure to bodies of water that may be sources of infectious diseases (i.e., schistosomiasis, Guinea Worm, bacterial infections, etc.)

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Professionalism and Behavior:

- As a representative of Kaiser Permanente, I will hold myself to the highest standards of professionalism, respect and courtesy.
- I understand that the same standards of professionalism apply when I am abroad as when I am at Kaiser Permanente, including full disclosure about my status as a trainee, discussing patient care with a supervising preceptor, and obtaining consent from patients and their families.
- I recognize that personal behaviors, clinical skills and competencies are culturally framed and resource-dependent. I will refrain from passing judgment and will be sensitive to cultural differences in standards of care.
- If awarded funding (stipend, scholarship, grant, etc.) from Kaiser Permanente, I understand that the stipend is to contribute to but may not cover all costs of travel preparation, travel, accommodation, food, and elective associated fees, and is not meant to support tourism or vacation related travel.
- I understand that if I receive funding from Kaiser Permanente, I am making a commitment to participate in the experience. Once I have signed this conduct form I understand that if I cancel my elective I may be held responsible for costs incurred on my behalf including, but not limited to, airfare, travel advances, and administrative fees. Exceptions will be made only in the case of medical or personal emergency with an attending physician note and upon discussion with my faculty mentor.
- I am aware that I am responsible for fulfilling the number of elective weeks required for graduation.
- I understand that Kaiser Permanente will require me to participate in a pre-travel curriculum, and upon my return, I may be required to present my experience or participate in feedback to meet the requirements of this program and to receive elective credit if applicable (requirements determined by specific faculty mentor).
- I have been made aware of and understand all the requirements of this elective.

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Clinical Care:

- If performing clinical care, I will care for patients under the direct supervision of a local preceptor, within the limitations established by my level of training.
- I will keep the welfare of the patient foremost in my mind. I recognize that it is particularly important to honor patient autonomy in communities with limited resources, where all patients must be given the choice of whether or not to have trainees involved in their care.
- I will not give money to patients, clinicians, or the institution, nor make any commitment or implication of commitment of personal or Kaiser Permanente institutional funding to patients, clinicians, or the institution.

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Social Media and Photographs:

- I will use discretion in taking photographs, especially in a medical setting. When taking a photograph or video, I will always seek permission first, and provide information

regarding planned use of the photograph to individuals or the host institution being photographed. If photographs will be used for public viewing (blogs, internet, email, Facebook, presentation, publication, etc.), Kaiser Permanente photograph release forms must be signed.

- In taking photos I recognize that it is important to respect people and take into consideration whether they may experience negative consequences of having their photo used.
- If I would like to keep family and friends informed of my experiences while abroad, I will use my personal email and ask that these emails not be shared publically without my consent.
- I will avoid posting any sensitive information (i.e. regarding patient care, lack of resources, cultural differences, or political situations) on any public forum including but not limited to blogs, Facebook, twitter, etc.

Initial Here:

Personal Conduct:

- I will respect and comply with the rules, regulations, and cultural standards of both the US and my host country, Kaiser Permanente and host institution.
- I will inform my Kaiser Permanente faculty mentor immediately of any legal problems.
- I will not engage in illegal substance use. This includes alcohol if use of alcohol is illegal in the host country. If culturally appropriate to consume alcohol, I will do so responsibly.
- I understand the sensitivities (exploitation of power dynamics) involved in engaging in sexual relationships with individuals in less resourced settings and risks (HIV and other sexually transmitted infections) and will avoid engaging in such relationships.
- I will not engage in romantic or sexual relationships with staff, community members, or patients in my host country during my elective.
- I will refrain from participating in any political activity (i.e. strike, demonstration, protest, rally, etc.).
- I will dress in a culturally appropriate and professional manner.
- I will be punctual and arrive at meetings and rotations on time. I realize that people in my host community may not always be punctual by Western standards, and I will also be sensitive to cultural difference regarding punctuality.

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Research and Teaching:

- I will consult with a faculty mentor if I am interested in conducting research or obtaining data for publication during my global health elective, to ensure that I obtain IRB approval and appropriate human subjects/ethical training if needed.

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Gift and Donation Policy:

- In practicing global health I am receiving education and experience from this elective, and will likely receive more out of this experience than I am able to contribute. Personal gifts and donations, while expressions of my gratitude, may have negative consequences by causing jealousy, conflict and/or favoritism in the workplace. Prior to my departure I will discuss with my faculty mentor the appropriateness of giving personal gifts and donations.
- I will not make direct donations to patients or other individuals, as that may compromise the patient-clinician working relationship and would also set a precedent for future visiting clinicians. If I would like to contribute to a patient’s care, I will request to do so in an anonymous manner and will obtain permission through the host administration and mentor, and discuss this with my Kaiser Permanente faculty mentor.
- In making donations of medical supplies I will discuss with my Kaiser Permanente faculty mentor the utility of those donations in the clinical setting and the sustainability of an individual bringing donations of medical supplies. I will not administer expired medication or use non-sterile equipment without discussion with my Kaiser Permanente faculty mentor and/or the faculty mentor at my host institution.

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**Code of Conduct and Risk Reduction Agreement for Global Health Electives
Acknowledgment of Review:**

Please submit this signed form with your application.

I have carefully reviewed the risk reduction agreement and code of conduct. The above risk reduction and code of conduct document is designed to serve as a guide to ensure a safe, fulfilling, and ethically sound global health experience for both trainees and for host institution.

Participant’s Name (please print)

Participant’s Signature

Date

Kaiser Permanente Trip Mentor or Site Preceptor Name (please print)

Kaiser Permanente Trip Mentor or Site Preceptor Signature

Date