

Safety and Security during the Global Health Residency

June 2023

Introduction

The Global Health Residency completes the training in Global Health and Tropical Medicine (GH&TM) and offers a unique opportunity for every resident to consolidate the skills and knowledge gained during the clinical residencies and Diploma Course (NTC) in the Netherlands.

It has been designed such that residents develop important competencies in the fields of preventative medicine, infectious tropical diseases, the organisation and management of care, governance and advocacy and intercultural aspects of healthcare. The 6 months spent working under supervision in a low-resource setting aims to prepare residents for their future work at the crossroads of clinical care and public health, in an international setting, often for disadvantaged populations.

The Global Health Residency (GHR) forms an invaluable part of the training for the future doctor GH&TM. The Training Institute for Global Health and Tropical Medicine (OIGT) recognises that traveling and working abroad comes with risks that one might not be confronted with in the Netherlands.

Safety and security during the GHR therefore deserve attention. This document is written for the resident GH&TM, the partnering hospitals/organisations as well as for internal use by the OIGT. It highlights important considerations and precautions to be taken prior and during the GHR and describes standard operating procedures that are expected to be followed in times of a breach of safety.

Risk analysis of placements

Accepted risk

By default, deployment of residents to remote and low-resource settings often lacking basic infrastructure implies a certain level of acceptance by both the OIGT as well as the resident that incidents *may* occur. Instances in which staff are threatened or experience serious harm are commonly referred to as *critical incidents*. An incident becomes a *crisis* when an immediate organisational response is required which goes beyond the local and national contingency plans and management structures in place.

The OIGT does its utmost to place doctors in settings that do not pose a disproportional safety risk to its residents. The advice of the Ministry of Foreign Affairs is leading in this, where for countries with an orange (reconsider travel) travel advice OIGT evaluates placement periodically by considering the available local safety information. Training hospitals in countries with a red travel advice are excluded from placement. An exception to this are residents placed with Médecins sans Frontières – in this case the resident him/herself should be well-informed by MSF of the increased safety and

security risks and should take a deliberate decision on whether he/she feels comfortable to start or continue the GHR.

Local embassies

The OIGT is subscribed to updates from the Ministry of Foreign Affairs and thus maintains a close eye on possible changes in the safety and security situation of the countries where residents are placed. The International Liaison Officer will contact the resident with extra information derived from these updates when this is deemed necessary.

Residents are **strongly advised** to register with their local embassies upon arrival.

Risk Mitigation

Common sense

The OIGT expects a professional attitude from its residents – reckless behaviour impeding the safety of oneself as well as the reputation of the OIGT and/or working relations with partnering hospitals is not tolerated. Common sense is key here.

It is essential that residents feel safe and comfortable in the settings where they are working. Where this is not the case, the resident is encouraged to get in touch with the International Liaison Officer of the OIGT to discuss the background and implications of these sentiments. It is important to note that - irrespective of the actual and objective situation – the OIGT will place the personal feelings and wish of the resident first and facilitate any consequent actions.

Please see the OIGT Guideline *Personal Health and Wellbeing during the Global Health Residency* for more detailed information on risk mitigation when it comes to health.

Insurance

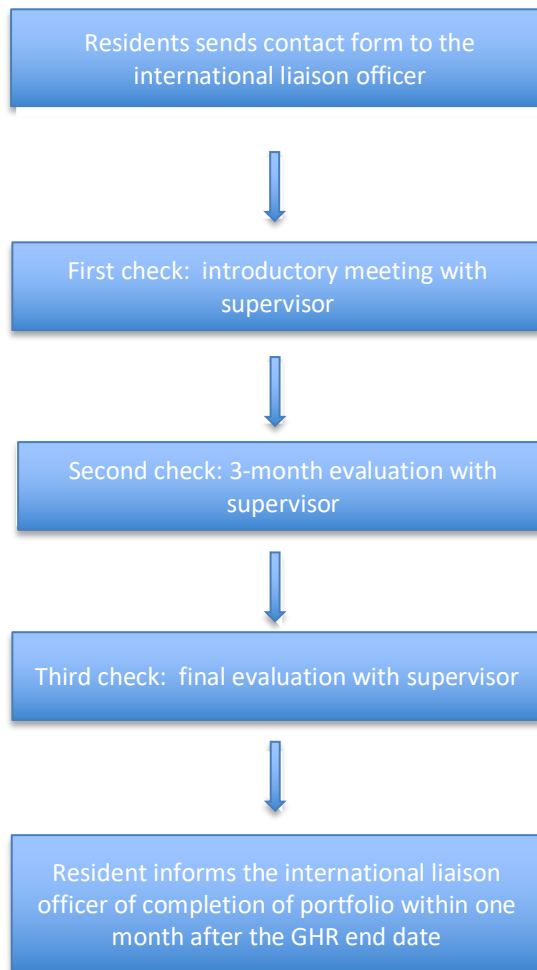
Residents are responsible for organising their own health care insurance for their time abroad. In times of political unrest or changes in the safety and security situation of the country of placement, residents are advised to get in touch with their insurance company to discuss the consequences of these changes.

Contact with OIGT during the GHR

Before departure, the International Liaison Officer sends the resident the *OIGT Contact Form* (see Appendix A). This form includes the name and contact details of a first and second contact person and the emergency number of the resident's health insurance. The resident is expected to complete this form and send it digitally to buitenland@oigt.nl. The international liaison officer of the OIGT then uploads this form into the Backoffice so that the information is readily accessible in case of an emergency.

It is the responsibility of the resident to keep the local supervisor and OIGT adequately and timely informed concerning his or her stay abroad. If any risk situation occurs, this should be commented with the supervisor and the international liaison officer. Evaluations with the local supervisor are to be held within the timeframe and documented in VREST. The international liaison officer will monitor the resident's progress through the periodic evaluations reports and where possible participate in these evaluation meetings.

In the following flowchart the checking moments are demonstrated:



Embassies

As mentioned above, residents are strongly encouraged to register themselves at their local embassies upon arrival.

Incidents

Introduction

Despite adequate risk mitigation, critical incidents can never be completely prevented. Examples of incidents include, but are not limited to: assault, violence, arrest, detention, involvement in riots or demonstrations, acts of terrorism, natural disasters, death of a colleague, disease outbreaks, medical evacuation etc.

When such incidents occur, special protocols and structures may be activated so as to minimise the consequences for the individual staff members or organisations involved.

Role of the OIGT

The OIGT does not have its own crisis or incident management teams. Thus, for the immediate response to critical incidents, the OIGT very much relies on the policies in place in the collaborating hospitals and/or organisations. Sometimes, as is the case for example in large-scale evacuations, the UN, embassies or the military may take on this lead role.

Having said this, the safety and security of her residents is a priority for the training institute and a pro-active role will be taken at all times. The OIGT will always ensure that an appropriate level of influence over decisions and access to information is attained. Hereby OIGT relies on a strong network and effective communication channels with the resident and the local supervisor.

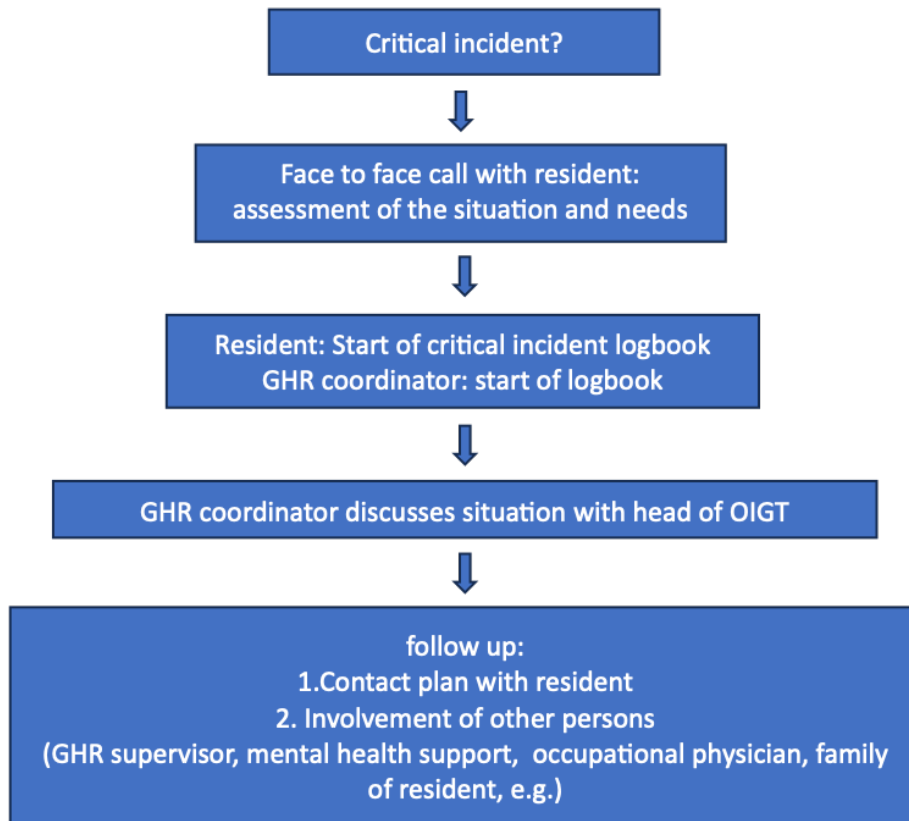
If an incident causes significant harm to the resident, the head of the OIGT will communicate this in a timely fashion to the next of kin/contact persons. The preferable method for this is a face-to-face meeting, however: the benefits of this must be weighed against possible consequences such as a potential delay due to geographical distance.

The OIGT will make use of the *OIGT Critical Incident Logbook* (see appendix B) to document actions taken.

Role of the resident

Residents are at all times encouraged to communicate worries or concerns with the International Liaison Officer, even if these are not officially categorised as critical incidents.

In case a critical incident does occur, the resident is expected to document his/her findings in the *OIGT Critical Incident Report* (see Appendix C).



Media management

In the majority of cases, a low-key approach with regards to the media is advisable. If deemed necessary, the Head of the OIGT will release a press statement, whilst always protecting the identity of the resident.

Operational consequences

Critical incidents may alter the risk profiles of the settings to which residents are sent for their GHR. Perceptions, organisational image and relations with key stakeholders may have shifted. Thus, a review of the risk analysis as briefly described earlier in this guideline (Risk analysis of placements) may be necessary.

Training consequences

In case a resident is unable to complete his/her allocated 6 months of the GHR, the OIGT will actively explore alternatives so as to bring the training to a successful completion. This will be done on a case-to-case basis and may include for example: extra public health exercises, completion of the GHR at a later stage or alternative work experience in the Netherlands.

Psychosocial support and debriefing

Psychosocial support after a critical incident is of utmost importance and will be discussed with the resident. Often the OIGT is able to identify external professional support and aid the resident in getting in touch with these institutions.

Important contact details in case of emergency

The preferred method of communication with the OIGT is via **email**. However, in times of necessity, the resident may wish to contact the members of the OIGT by phone. Please use these details responsibly.

- Head OIGT (Albertine Baauw): abaauw@oigt.nl, +31628265551
- International Liaison Officer (Heleen Kruip): buitenland@oigt.nl, +31638913661

Conclusion

Deployment of residents to remote and low-resource settings during their GHR implies a certain level of acceptance by both the OIGT as well as the resident that incidents may occur. The OIGT expects a professional attitude from its residents in these situations and will provide assistance where possible.

Appendix A: OIGT Contact Form

CONTACTGEGEVENS AIOS-IGT BUITENLANDPERIODE

Bij nood willen we graag weten met wie we contact op moeten nemen. Graag invullen vóór vertrek naar het buitenland en naar info@oigt.nl en buitenland@oigt.nl mailen.

Contactgegevens aios-IGT

Naam: [NAAM AIOS-IGT]

Mailadres: [MAILADRES AIOS]

Mobielnummer (ook voor Whatsapp): TELEFOONNUMMER AIOS

Gezondheidsverzekering loopt bij : [VERZEKERINGSMAATSCHAPPIJ]

Polis: [POLISNUMMER]

Contactgegevens: [TELEFOONNUMMER CONTACTPERSOON VERZEKERING]

SOS-nummer verzekering: [TELEFOONNUMMER CONTACTPERSOON VERZEKERING]

Contactgegevens eerste contactpersoon

Naam: [NAAM EERSTE CONTACT]

Relatie tot aios-IGT: [RELATIE]

Telefoonnummer: [TELEFOONNUMMER EERSTE CONTACT]

Mailadres: [MAILADRES EERSTE CONTACT]

Contactgegevens tweede contactpersoon

Naam: [NAAM TWEEDE CONTACT]

Relatie tot aios-IGT: [RELATIE]

Telefoonnummer: [TELEFOONNUMMER TWEEDE CONTACT]

Mailadres: [MAILADRES TWEEDE CONTACT]

Appendix B: Critical Incident Logbook (for use by the OIGT)

Datum	Tijd	Actie ¹	Deelnemers	Inhoud	Beslissing/conclusie

¹ Bijvoorbeeld: telefoongesprek, Whatsapp bericht, vergadering, email etc.

Appendix C: Critical Incident Report (for use by the Resident GH&TM)

Date and time of incident	
Location of incident	
Name of person reporting incident	
Position	
Description of incident	
Description of action taken	
Witness(es)	
Date of submission to the OIGT	
Signature	