NOTE- THIS IS THE POLICY FOR OUTREACH PROGRAMS VIA THE IAES

POLICY GUIDELINES FOR “INTEREST”

(INTERNATIONAL ENDOCRINE SURGICAL TEAMS)

AN INITIATIVE OF THE INTERNATIONAL ASSOCIATION OF ENDOCRINE SURGEONS

1. PURPOSE AND SCOPE

This policy outlines the criteria to be considered by the INTEREST Subcommittee of the Council of the IAES in assessing whether a certain activity will be undertaken and supported as part of “INTEREST”, an outreach program of the International Association of Endocrine Surgeons. The criteria should be considered closely by the applicants and any application should address the areas of concern.

Although extensive, the guidelines are necessary to ensure the continued Tax exempt status of the IAES by the IRS. Similarly, following September 11, 2001 the “Patriot Act” requires funding to abide by Anti-Terrorist Financing Laws.

Some members of the IAES may wish to participate in various activities but may not be able to establish a defined activity. Those members of the IAES may notify the Secretary-Treasurer of their availability for inclusion in various INTEREST activities where vacancies arise. (Attachment 4)

Should various bodies or individuals wish to donate to INTEREST then “Fiscal Sponsorship Agreements” will be available to facilitate tax deductibility for citizens or organizations based in the USA.

BODY OF POLICY

2.1 Criteria for selection of new international INTEREST project activities.

The criteria below must be met in order for the Council of the IAES support a new activity:

a) The activity is within the general area of Endocrine Surgery and the Organisation, Government body or Individual has the network or skill set to deliver the provision of services in that area of Endocrine Surgery.

b) The activity or program is based upon the”Hippocratic” concept of “First do no Harm”.

c) The program should involve considerable teaching with the ongoing legacy of training rather than simply providing for various medical procedures and immediate care.

d) The activity is requested by either the appropriate Federal or State Government, the partner Government of the country involved, an appropriate NGO or other international
funding authority, or a medical facility or organisation requiring the provision of either teaching or supervision of medical care.

e) There is funding to fully support the new activity which will ensure that the IAES will not be liable for additional costs unless the activity is an initial feasibility assessment, funded by INTEREST, with the anticipated expectation of potentially extra costs for future activities. The funds provided however are limited in amount and in the situation of a feasibility activity there would be no guarantee of mandatory continued funding.

f) The activity can be managed to ensure there is no financial risk to the IAES and the recipients of any support undertake to ensure appropriate insurance is established to ensure no liability risks to the IAES.

g) The activity is not exploiting the pro bono work of IAES Volunteers;

h) The activity is consistent with the IAES strategic direction of promoting both the IAES and the provision of Endocrine Surgical services to developing communities.

i) The surplus of funding provided from any completed or closed international project will be returned to INTEREST to fund further appropriate international project activities as approved by the IAES Committee.

2.2 Acceptance of a project is through the INTEREST Subcommittee and the IAES Council after a complete and detailed application has been fully reviewed and after the financial situation and confirmation of appropriate insurance provisions has been confirmed. In the event of competing applications judgment will be on the development of a sustainability focussed project, the applicants' record of participation in successful projects and the support provided from the country where the project is to occur.

The decision of the Council is final.

In assessing the success and appropriateness of the project after it has been completed a report is to be generated for the IAES Council for assessment and the participants undertake to provide such a report prior to the final payment of any support.

2.3 Criteria for accessing the funds

These funds may also be available for the following uses and with the following criteria:

1. As a contingency fund for un-budgeted surgical responses to natural disasters in the rebuilding phase by supporting local surgeons to provide surgical services following a natural disaster.

2. Funding appropriate feasibility assessments for appropriate activities where necessary funding is not available from any other source and where the request for assistance has been ratified by the appropriate local authorities. The activity supported should meet the following criteria:

   i. Be within the IAES sphere of outreach support providing endocrine surgical services.

   ii. Be a potential model which may be replicated on other occasions and at variable locations.

   iii. Demonstrate that it can have a significant impact on the community being served.
iv. Demonstrate support by an appropriate National or International committee or an affiliated body and that such a project has been requested by the appropriate community.

3. Providing necessary educational medical training resources in endocrine surgery, either material or manpower, to appropriate training centres in accordance with general IAES principals, and ratified by the local authorities.

4. Funding critical equipment to a medical facility in accordance with general IAES principals, where there is no other available source of funding, and ratified and requested by the local authorities and with adherence to the general guidelines of equipment donation.

5. Funding a gesture of goodwill endorsed by the Council of the IAES as strategically important to the IAES International Program.

3.1 Funding Restrictions

As a general rule, INTEREST will not support requests by surgeons for

- Attachments of individual International Surgeons to training programs or medical facilities outside of their country of origin.
- Individual attendance at conferences, seminars and similar activities as requested by applicants
- Activities where the primary purpose of the visit is to examine surgeons or other health professionals in another country.

The funding is limited by the overall amount available as determined by the annual budget approved by IAES Council. The number of projects supported will depend upon the number and quality of the applications and the amount of funding available.

3.1.1 The INTEREST Subcommittee will also note the "Voluntary Best Practices" guidelines produced by the U.S. Department of the Treasury regarding Anti-Terrorist Financing Laws (The Patriot Act and Executive Order 13224) and follow such guidelines.

3.2 Applicants’ Requirements for Funding

The Applicant(s) shall complete an appropriate request for support document, with criteria and details as outlined in attachment 1, and having completed the relevant documentation will sign to confirm the acceptance of the guidelines and the truthfulness of the information provided. Attachment 2 provides a suitable template for applicants.

It is recommended that the application address each and all itemised requirements with appropriate comments such as "not applicable" should this be the case. Copies of appropriate documentation such as Code of Conduct (attachment 3), Indemnity Insurance (and travel insurance once obtained) should be attached to the application (or forwarded once obtained and prior to departure) to avoid delays in assessment of the application.
An application according to the guidelines is necessary to ensure the continued Tax exempt status of the IAES by the IRS. Similarly, following September 11, 2001 the “Patriot Act” requires funding to abide by Anti-Terrorist Financing Laws and these considerations need to be noted by the applicant(s). The applicant(s) should also note the “Voluntary Best Practices” guidelines produced by the U.S. Department of the Treasury


The funded individual or team undertakes to provide a comprehensive report of the activity and the outcomes achieved to the International Committee within 4 weeks of return to their home country. This report will include details of financial expenditure.

Wherever appropriate, 75% of the funds requested will be provided prior to the commencement of the activity (the use of which will detailed to the committee in an activity report upon the individual/team’s return) and the remaining 25% will be payable on receipt of the required report.

Should the project not proceed after allocation of any funds then the applicants will be required to provide a report to the INTEREST Subcommittee outlining the circumstances.

Should those funds be already received by the applicants then those funds will be forthwith returned to INTEREST. Should there be any shortfall in funds returned then a full explanation and report on the use of those funds be provided and further decisions regarding the shortfall be considered by the INTEREST Subcommittee.

The funded individuals undertake to adhere to the IAES Policy on Roles and Responsibilities of Volunteers which govern Volunteer behaviour and representational responsibilities. A code of conduct form will need completion and submitted with the application. (Attachment 3)

The funded individual or team undertakes to supervise and take responsibility for any accompanying non IAES members (for example medical students, Fellows or partners) and that appropriate medical indemnity, health and travel insurance and qualifications are arranged for all members of the team.

4. **EQUIPMENT FUNDING**

Where funding is requested for the provision of equipment the following guidelines need to be considered. In most cases, donations are the mainstay of equipment acquisition programs in some nations, as developing countries may lack sufficient funds to procure new equipment. The IAES is sensitive to needs identified by the recipient country while following a documented process for equipment donation, to the mutual satisfaction of donors and recipients.

The IAES through INTEREST may on occasions fund donations in kind which may either be medical equipment or materials and supplies. Donated equipment can be either new or pre-owned.

The following policy outlines the conditions under which the IAES and INTEREST will lend its name in support for the distribution of appropriate medical equipment for international aid projects.
The principles when collecting and distributing donations of medical supplies are in line with the World Health Organisation’s *Good Donations Practice* (March 2000):

- Donations should be a direct result of a request from the recipient community;
- Donations should be made with respect for the authority and autonomy of the recipient;
- Donations should be made in conformity with recipient government and institutional regulations.

There should be no double standards with regards to quality and safety. If the quality is not acceptable for the country of origin it is not suitable for donations.

4.1 Planning Guidelines

Donated equipment should be consistent with the recipient country’s Ministry of Health’s (MoH) current guidelines for medical equipment. Communication with the MoH or hospital is essential to maximise the benefits from the donated medical equipment and the genuine good will of potential donors.

There should be coordination of a joint plan between donor and recipient for procuring and allocating donations. The plan should outline the responsibilities and actions required by donor and recipient for effective implementation and ongoing maintenance of the donated equipment.

4.2 Procurement Guidelines

If an agreed plan has been developed by the donor and recipient that integrates the principles for good donations practice, the equipment must be evaluated to determine if it is safe, acceptable and appropriate for use in the donor country.

The IAES supports donations of medical equipment that meet the following criteria wherever possible:

- the equipment is requested by the community;
- the equipment is technologically appropriate;
- the equipment is in good working condition;
- the equipment is normally no more than 5 years old except where the donor can certify that with normal maintenance, the equipment should still provide another 3-5 years service from the date of acceptance in the recipient nation;
- the equipment has an operation and service manual which is available in English and preferably in the language of the recipient;
- the accessories and attachments are included for immediate operation;
- medical equipment displays a current biomedical safety certification label, electrical medical equipment displays a current electrical safety certification as well;
- x-ray emitting equipment has been calibrated and inspected by a qualified Medical Physicist prior to shipment;
- the equipment is set to the standard voltage of the recipient country;
- the equipment is supported by the vendor/manufacturer;
- a supply of consumables for one year of normal operation has been included;
- it is reasonably certain that consumables will be available and affordable for at least five years;
- if the equipment requires installation, there is proof that the recipient has access to staff who can properly install the equipment for its safe use;
- there is funding available that can be used to freight the equipment to the final recipient, and/or consider maintenance of the donation;
• the final recipient has agreed to the donation;
• donations of non-electrical equipment (instruments, beds, drip stands, stainless steel trolleys, overbed tables, bassinets etc.) in sound working order and with a life expectancy of five years will be acceptable if required and requested by a recipient health facility.

The receiving health facility is required to confirm that it releases INTEREST from any further responsibility for the equipment once it is received by the community.

4.3 Follow-up Evaluation

To ensure the success of future donations, the donor and recipient should assess and document the level of operational success or failure of the donated equipment within 12 months of delivery.

4.4 Emergencies

INTEREST adheres to the advice maintained by the WHO regarding donations of medical equipment in emergencies. The WHO advises that capital equipment should not be donated in emergency situations, unless it is established that the emergency will continue over a long period.

4.5 External Suppliers

Any individual or organisation who wishes to arrange a donation of medical equipment or supplies under the auspices of INTEREST must sign a code of conduct which adheres to the above terms and principles.
ATTACHMENT 1

INTEREST APPLICATION GUIDELINES

Should include details outlining:

1. The Scope, Aim and expectations of the proposal.
2. The participant(s) and their qualifications and the role and responsibilities of each participant (including accompanying persons, e.g. medical students, residents, fellows and partners).
3. The host country and duration of the program.
4. The dates of the program.
5. Whether the program is a new development, a continuation of an established program or a feasibility study for future activities.
6. The urgency of the request.
7. The associated agencies or governments involved
8. Confirmation of a request for aid from the planned recipient.
9. The safety and security considerations for the participants including any emergency evacuation plans in the event of civil unrest or other disaster.
10. The level of funding requested, whether this is complete or partial funding of the project and whether other sources will be providing funds.
11. The applicant(s) undertaking and confirmation that the IAES will not be liable for additional expenses above the amount granted for the project.
12. Confirmation that the funds supplied by INTEREST are regarded as a grant in support of the project and do not express any continuing liability or expectation for further funding.
13. Confirmation that appropriate Medical Indemnity Insurance is held by all of the participants and a statement releasing the IAES from any liability for malpractice or patient care issues.
14. Confirmation of appropriate Medical Registrations of the participants and the acceptance of these qualifications by the host country’s Ministry or Department of Health.
15. The applicant(s) undertaking and confirmation that medical and travel insurance is adequate and appropriate for all participants including evacuation, retrieval, kidnapping and hostage situations including that related to civil unrest and riots, with particular relevance to the area of travel.
16. The applicant(s) undertaking to provide a full breakdown of costs and expenditure with the completed report of the project upon return to their host country.
17. The applicant(s) undertaking to return any unused funds to INTEREST.
18. The applicant(s) undertaking to allow the IAES and INTEREST to report and present the activities of recipients of project funding for promotion of the INTEREST concept.
19. Confirmation that all participants in the project and acting with the support of the IAES accept and have completed the Code of Conduct statement.
20. Confirmation that the IAES member accepts responsibility for any accompanying NON IAES member under their supervision (including medical students, residents, fellows or partners) ensuring adequate health, travel and medical indemnity insurances are in place.
21. Confirmation that the participation of any accompanying person (including medical students, residents, fellows or partners) is acceptable to the requesting government, NGO or medical support recipient.

22. The applicant(s) undertaking to accept the decision of the INTEREST Subcommittee in areas of dispute, notwithstanding a balanced approach by the Subcommittee and the right of appeal by the applicant to the full Council of the IAES where extenuating circumstances dictate that a full refund of funding cannot be made where the project could not proceed or be not satisfactorily completed.

23. The applicant(s) confirm that the conditions of Application and the INTEREST Guidelines have been read, accepted and will be complied with and that their signatures on the application attest to this fact and to the truthfulness of the application details.

PLEASE NOTE: Further details may be requested by the INTEREST Subcommittee prior to any decision for support. It is recommended that the application address each and all itemised requirements with appropriate comments such as “not applicable” should this be the case. Copies of appropriate documentation such as Code of Conduct, Indemnity and Insurance should be attached to the application to avoid delays in assessment of the application.