



Health & Safety / Volunteer Healthcare

1.1 Liability

As a Project Leader the Health & Safety of the Volunteers is our primary concern and duty of care and should be at the forefront of every decision taken. The Leaders must always set the standard of safe and responsible behaviour and understand the potential liability of any injury or illness incurred by a volunteer.

1.1.1 Project Activities: Under the Think Pacific T&C's for volunteers and project leaders, the following activities must not be arranged or advised by any member of the Think Pacific staff team due to Health & Safety concerns and Liability conditions:

- • Horse Riding
- • Rock Jumps / Waterfall Jumps
- • Use of Machetes
- • Jumping off Boats or Trucks
- • Travelling at Sea or by River without a Life Jacket
- • Climbing Coconut Trees
- • Spear fishing

NB: If arranged independently by the volunteer then no liability is on Think Pacific, however a Leader must not participate in, make arrangements for, or actively encourage the above activities. Leaders must set example at all times.

1.1.2 R&R Activities: If a volunteer enquires regarding doing a Sky Dive / adventure activity as an independent excursion during R&R the Project Leader must advise them to check their insurance policy regarding cover for such activities, and if they do not have the necessary cover the Think Pacific advice must be to not participate in that excursions. (Ultimately it is however at the discretion of the individual)

Project Leaders can make bookings via telephone on behalf of volunteers but cannot at any point be engaged in receiving payment or transferring funds on behalf of the volunteer. If involved in the payment process, Think Pacific would assume liability for any damages.

1.1.3 Building Sites – Build Projects Only: It is essential that Project Leaders maintain the highest possible Health & Safety standards on the Build Site, based on the local surroundings, including the use of hard hats, high visibility jackets and closed footwear by ALL staff and volunteers.

On the first day of project the Leaders and Building Manager must deliver an awareness briefing for the volunteers, including:

- Requirements for Footwear, High Visibility Jackets & Hard Hats.
- Potential Hazards on the Build Site.
- Safe & Correct use of Tools. Eg Saws / Hammers / Levels / Chisels / Drills.
- Safe lifting techniques.
- Communication on Build Site & Importance of Listening to Building Manager & Leaders.

NB: Safety advice and guidance should be included throughout project, with mistakes or un-safe practices highlighted and corrected. The Building Manager can demonstrate techniques as required!

1.2 Volunteer Healthcare

As a Project Leader volunteer healthcare should be the primary focus of care and support. The mindset is essential in ensuring clinics are delivered daily at the specified time, and if someone may be unwell, uncomfortable or injured, the leaders are extremely proactive in checking in and observing at all times.

Please note that Leaders are there to offer care and support, not to 'diagnose' or 'treat'. If in any doubt, seek medical advice, as until the volunteer sees a medical professional (Nurse or Doctor), the liability for their care is with Think Pacific / the Leader, and we want to protect our Leaders at all times.

1.2.1 Volunteer Healthcare – Leader Process

The below process is designed to provide clarity for all Project Leaders on the process for volunteer healthcare, designed to ensure we are consistent in our care.

A key point is that 'success' is not keeping a sick or injured volunteer on project, but rather success is ensuring their immediate and long term health as our primary objective.

Step 1: Illness or Injury & Unable to Attend Project – Contact Project Manager

Step 2: Deterioration or 48 Hours of Illness or Injury – See Medical Professional (Nurse or Doctor)

NB: The Project Manager should be advised prior to a volunteer being taken to the Nurse or Doctor, with information provided on the illness or injury, timeframe etc.

Step 3: 76 Hour Review from Medical Attention – If no improvement, Remove from Project for 48 Hours

- Seek Hospital Review
- Volunteer to contact Insurance to open Case File
- TP cover Accommodation & Food

Step 4: 48 Hour Review – Consult with Doctor & Project Manager.

- If improving – Return to project when approved by Doctor.
- If deteriorating / no improvement – Discuss removal from Project.
Note: If a volunteer requests to see a medical professional at any time on project, this must be done as quickly as reasonably possible!

NB: Any instance of a volunteer refusing to see a medical professional, or refusing medical treatment advised, and they can be removed from Project immediately under our T&C's and Duty of Care to our teams.

1.2.2 Volunteer Healthcare – Common Illnesses

Whilst 1st Aid Courses provide training for 'major injury' or trauma, it is important to understand that on project it is more often you see 'smaller' illness or injury related to the conditions and environment. Common health problems or illnesses that you may encounter on project include:

- Boils: At first, the skin turns red in the area of the infection, and a tender lump develops. After four to seven days, the lump starts turning white as pus collects under the skin.
Treatment – Keep area clean and covered. Take anti-biotics if advised.
- Diarrhoea & Vomiting: Signs include loose bowel motions or vomiting episodes.
Treatment – Sipping fluids consistently. Drink ORS or electrolytes. Eat when you can. A drip may be required in severe cases.
- Constipation: Difficulty in emptying the bowels due to hardened faeces.
Treatment – Drink lots of water. Eat pawpaw and other fruits. Take laxatives where required.
- Heat Rash: You can develop heat rash when your pores become blocked and sweat can't escape. The cause of heat rash is often friction on the surface of the skin.
Treatment – Bathe or shower in cold water, and then let skin air dry, rather than using towel. Avoid using creams or lotions that may block pores further.
- Dehydration: Signs include headaches, very dark urine, dry skin, feeling dizzy, rapid heartbeat, rapid breathing, lack of energy & fainting.
Treatment – Sip small amounts of water. Drink ORS or electrolytes. A drip may be required in severe cases.
- Bed Bugs: Signs include a raised itchy bump with dark centre and lighter swollen surrounding area or small red bumps in a line or zig zag pattern. The bites will often itch and occur at night.
Treatment – Wash / Boil all sheets or clothes. Apply sprays to mattresses or pillow. Sun all items that may have been in contact with the bugs.
- Scabies: Scabies is not an infection, but an infestation of tiny mites called Sarcoptes. Scabies can cause severe itch, and a red rash on skin of infected areas.
Treatment: Creams or lotions (from pharmacy) that can be applied across entire body to remove and kill mites.

1.2.3 Female Volunteers – Menstrual Cycle

It is important for Leaders to advise female volunteers that the change in environment on project can have effects on their menstrual cycle, with key points for the discussion as:

- Due to changes in climate, diet and weight their menstrual cycle can be affected.
- If volunteer is on the contraceptive pill advise not to double up, as it can cause complications and make you ill.
- It can be common to have more than one cycle in a month, have one whilst on pill, or not have one at all.
- If volunteer's period starts while still on pill, advise to check with pill information or nurse / doctor on whether to continue taking the pill, or come off the pill whilst the cycle is completed.
- Keep leaders updated of any usual changes esp. if painful or worrying
- Make sure volunteers have lots of sanitary supplies (can be bought during shopping day)
- If abnormal changes to periods continue for over 14 days seek medical advice. i.e. Island Nurse (however most issues resolve themselves when body has acclimatized)
- Don't flush any sanitary items down village toilets. Put in bags, fire pits or drop toilets. Best to ask Fijian mum on what is best for their home environment.
- With regards to implants and coils ask the team to make the leaders aware of this. (In private is fine)

NB: Leaders must be calm, confident and mature in delivering this discussion to the group as a whole so that all volunteers feel comfortable raising any issues with them. And remind volunteers to be open and honest to all leaders regardless of gender as their health is imperative!

1.2.4 Volunteer Healthcare - Hospital Treatment

If requiring hospital consultation or treatment for a volunteer, beyond the local nursing station or Doctor, it is important for Leaders to advise the volunteer on the options available to them for their treatment as:

1) CWM Hospital / Sigatoka Hospital / Rakiraki Hospital / Nadi Hospital

These are 'state' hospitals where treatment is free of charge, or with minimal associated costs for the volunteer. However, waiting times may be longer, and conditions not as favourable.

2) Miot Pacific Hospital – Suva

This is a private hospital facility, with associated costs as per guide listing in Appendix of Leader manual. Waiting times may be shorter, and conditions more favourable.

Note: Miot Pacific often do not accept payment from Overseas Insurers, and it would therefore be a 'Pay & Claim' process for Volunteers and they would need funds available for their consultation and treatments.

NB: If advised by a Doctor that the case is High Risk, with a threat of Loss of Life, with immediate admittance or treatment required, advise the Project Manager and Think Pacific can act as Guarantor / pay initial cost, to be reimbursed by volunteer when available. For non-high-risk cases, Think Pacific would require the funds to be available prior to acting as Guarantor or making any payment.

1.2.5 Think Pacific Leader Process – Miot Pacific Hospital

If accompanying a Think Pacific Volunteer to Miot Pacific Hospital for their medical consultation and/or treatment, it is important to follow the steps below to ensure our duty of care is maintained and the volunteer may complete the necessary steps for treatment, and insurance cover.

Step 1: Inform Project Manager

Inform your Project Manager when 30 minutes from the Hospital, and upon arrival.

Step 2: Volunteer File - Miot Pacific Hospital

On arrival the volunteer shall need to open a medical file with Miot Pacific Hospital, and the registration form is available at the reception desk.

Step 3: Insurance Case File – Insurance Provider

Once the medical file has been completed with the hospital, the volunteer shall need to open a case file with their insurance provider. You can provide your TP phone if the volunteer does not have access to a mobile, however it MUST be the volunteer who speaks with the insurer, as they shall require personal information, and to hear directly from the person insured / 'patient'.

NB: Important to remind volunteer to have all their insurance documentation with them when travelling for medical consultation or check up.

Step 4: Medical Consultation – Miot Pacific

The volunteer shall then have their medical consultation with a doctor at the Miot Pacific Hospital. Key information required for the insurance, and that MUST be obtained from the Doctor, is:

- Illness or Injury
- Date it began / progression
- Current Signs or Symptoms
- Recommended course of action from the Doctor e.g. anti-biotics / admittance / scans / surgery
- Timeframe for review and recovery & whether the volunteer may return to the project setting or remain in Suva for that period of time.

NB: As typed medical reports can often take time and have a cost associated, ask the doctor if they may be able to complete a hand-written medical report immediately, so that it may be forwarded to the insurance provider for their approval for cover of costs associated.

Step 5: Scan & Email Medical Documentation – Insurance Provider

Advise the volunteer to ask Miot Pacific to scan and email the medical report provided to the insurance provider, and then to call them to ensure that the report has been received and if they can advise on cover asap.

NB: Due to time difference this approval can take time if during the night in the UK, however advise the volunteer to contact the 24-hour medical line if the insurance may have one available.

Step 6: Update Project Manager – Details

Once all information has been forwarded to the insurance company, update the Project Manager with key information as:

- Medical Advice of Doctor – Treatment & Timeframe
- Volunteer's Insurance Case File No

Step 7: Volunteer Treatment & Care

Once the volunteer receives confirmation from the Insurance provider that they are approved for cover for that particular injury or illness, they can proceed with all care and treatment required on a 'pay and claim' basis.

NB: Should the volunteer wish to proceed with treatments prior to the approval from the insurance company, advise that this is at their own risk in terms of assurance that any costs incurred shall be refunded.

NB: As above, if a Volunteer's case is deemed 'High Risk' by the Doctor, with a threat of loss of life, Think Pacific Project Managers can act as 'Guarantor's' for the volunteer and may sign on their behalf for admittance immediately for treatment.

1.3 Pastoral Care

'Personal Project Planning' (PPPs) / 1 to 1 Chats: PPP's are a vital component of the Leadership role and a great way of building stronger relationships. The Key points in delivering PPP's are included in your Leader Roles and Responsibilities Manual, however, it's also a great opportunity for the volunteer to open up on a 1on1 basis and share areas in which they are struggling both on and off project.

NB: Discuss highlights of the week and commend them on areas which they succeeded. It's amazing how much a leaders recognition can boost the volunteers confidence.

NB: Goal Setting – A key component of the Leadership role is facilitating the personal and professional development of the volunteers, and a PPP can be used for self-reflection and goal setting. Example attributes to discuss include: Communication Skills, Teamwork, Social & Cultural Awareness, Resilience & Critical Thinking.

NB: A PPP should be entirely focused on that individual volunteer, and never discussed with other volunteers and villagers. Never enter into rumour or gossip.

1.3 Healthcare – Community Members / Students

It is important for Leaders to be clear that we are not able / responsible to provide medical care and treatment for community members, youths and students when on project.

This is a fundamental liability issue, but also a duty of care concern in being unable to provide sustained care, treatment or 1st aid supplies across ALL community members if required.

Processes for Community Healthcare if approached by a child or adult would be:

Village: Advise they speak to a) Village Health Worker and/or b) their Parent (if a child) and/or c) Local Nurse or Doctor. And for Volunteer to inform Leaders, and Leaders to inform TNK (if a child).

School: If a student is injured or becomes ill at school advise their teacher or HT immediately, so that they may assume responsibility for their care and further action.

NB: 1st Aid supplies are donated to the Village Health Worker and can also be donated to the School by TP or Volunteers, but the Village / Teachers must maintain responsibility for all care and treatment.