



How to build-up a global mission of mutual aid in Otolaryngology Head-Neck surgery

The Charter of the French Association of global mutual aid in Otolaryngology Head Neck Surgery: Association d'Entraide Globale ORL Française (AEGOF)

Objectives

- The French ENT Association of global mutual aid in Otolaryngology Head Neck Surgery helps and supports as much as it can, French organisations involved in missions of mutual aid abroad
- Its vocation is to provide support to mutual aid missions in:
 - Teaching programs
 - Ethical issues
 - Legal issues
 - Technical support

Minimal standard of care

Article 1: General principles

Missions are independent of any groups (political, economical, ethnical, confessional)

Article 2

- Missions have the objectives of providing Medical help together with diffusing Medical knowledge

Article 3: Ethical concerns

- The help is given with no discrimination and always adapted to the critical situation of the rescued population

Article 4

The missions are to be achieved with respect of the cultural identity and the dignity of each individual

Article 5: Ethical concerns

- Missions are always carried out in response to a request of the concerned population or of the legal representatives, in emergency, or for long-term projects.

Missions are to be coordinated and must collaborate with other missions or institutions

acting for the same medical problems

Article 6: Ethical concerns

Members of the missions have to be experienced professionals, fully mastering the techniques they use during their missions

Article 7:

Objectives of the missions are to be realistic and adapted to local conditions

The follow-up of patients is to be organized

Art 7.1: Hearing program:

Art 7.1.1 Hearing assessment. When a hearing program is being envisioned, several steps are recommended. The first one is the assessment of the needs of the population in hearing rehabilitation. This assessment should be ideally elaborated together with the local teams, including physicians, audiologists and all else professionals as well as with the local government if possible, in order to range the principal needs in hearing rehabilitation.

Art 7.1.2 Screening of hearing impairment. When the aim of the mission is to rehabilitate hearing function, it is recommended to first check that the material for prevention, diagnosis and rehabilitation is available.

Art 7.1.3 Surgical missions: Surgical missions can only be programmed in coordination with the local surgical teams, and after official acceptance by the government. Follow-up of patients has to be comforted by local staff before any surgical programmed is being begun.

Art 7.1.4 Teaching programs: Teaching programs should be elaborated in response of the needs asked by local surgical and audiological teams. For surgical purpose "hands-on" anatomic or artificial specimens are a good way of training. Theoretical teaching has also to be delivered.

Art. 7.2 : Pediatric otolaryngology. Specificities in laryngotracheal and head and neck pathologies

Article 7.2.1: The needs and the exact requirements of the local teams must be known and accurately identified before the mission starts. An accurate schedule will be provided and validated by both local and foreign teams.

Article 7.2.2: A complete check of the surgical and peri-operative devices required will be made. Perioperative environment, specifically the availability of an ICU, should be checked out before envisioning any surgical procedure with a high vital risk, in particular for airway surgery.

Article 7.2.3: Local physicians who will perform the follow-up of the patients operated on during the mission must be previously identified.

Article 7.2.4: A contact procedure in case of an emergency for requiring an advice must be established, using a quick and responsive mode of communication such as e-mail, chat, or mobile phone.

Article 7.2.5 : Within the foreign team willing to help, the referent physician of a patient will be clearly identified.

Article 7.2.6 : The local team will have in charge the monitoring of patients cared for by the foreign team and will give them courtesy reports.

Article 7.2.7 : A discussion with the families and the children must be held about the surgical procedures, especially in case of an airway surgery. For that, the local teams undertake providing an interpreter able to understand the surgical concerns.

Article 8 :
Missions should rather be part of a long –term project

- Diffusion of knowledge to the local population must be the priority objective

Article 9: security

- Members of the missions must be covered by a repatriation insurance and public liability.