PROTECTING YOUR PEOPLE IS OUR PRIORITY

International SOS is the world's leading medical and travel security risk services company. We care for clients across the globe, from more than 1,000 locations in 90 countries.

We pioneer a range of preventive programmes strengthened by our in-country expertise. We deliver unrivalled emergency assistance during critical illness, accident or civil unrest.









Our 11,000 employees are passionate about helping you put Duty of Care into practice. With us, multinational corporate clients, governments and NGOs can mitigate risks for their people working remotely or overseas.

A GLOBAL INFRASTRUCTURE YOU CAN DEPEND ON:



27 ASSISTANCE CENTRES

With our local experts available globally, you can speak to us in any language, anytime 24/7.



5,200 MEDICAL PROFESSIONALS

Immediate access to experts with extensive experience in all fields of medicine coupled with a thorough knowledge of the local environment and healthcare system.



200 SECURITY SPECIALISTS

24/7 access to travel security reporting, analysis and expert advice from our security consultants, analysts and tracking experts around the world.



1,000 MEDICAL SERVICES SITES

An accredited, integrated network of 58 clinics and 1,000 medical sites around the world. Practising a supervised international standard of medicine - in developed and emerging countries, offshore and remote locations.



72,000 ACCREDITED PROVIDERS

A network of accredited healthcare, aviation and security providers ensuring we provide you with the best logistics in the air, on the ground and at sea.









Welcome

Dear Reader,

No matter where you are in the world, hardly a week goes by without reports of a natural disaster, terrorist attack or a virus outbreak. In the past year alone we have seen devastating earthquakes, multiple terrorist attacks, and concerns over the Zika virus.

For organisations that operate abroad, preparing for the unexpected has never been more important. As global mobility levels are predicted to double by 2020*, the need for a trusted assistance partner is vital.

Your employees are the heart of your organisation and crucial to the success of your business. Around the world, we are on the constant lookout for any events that can affect our members.

In this edition you can read about how our medical and travel security teams are working together to help reduce risks and protect people.

We hope you enjoy *Hotline*. If you have any comments, questions, or, if you would like to contribute to a future edition, please email us at: hotline@internationalsos.com.

Stay safe,

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Zika and other worldwide disease outbreaks are an ever present danger. International SOS has a number of specialists dedicated to alerting clients to such risks.

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When providing general assistance - excellent service is paramount, no matter how small the issue may be.



Dr Pascal Rey-Herme Co-Founder, Chairman and CEO Co-Founder, Group Medical Director



Preparing for PANDEMICS

Worldwide disease outbreaks - or pandemics - are an ever present danger. Influenza can strike at any time. As well as causing illness and even death, pandemics can cause major disruption to businesses. International SOS has a number of specialists dedicated to alerting clients to such risks. And helping them prepare.



"It's vital to track pandemic threats and be prepared for the next one. Although it is uncertain which virus will cause the next pandemic, and where it will arise, one thing is certain - another pandemic will happen."

DR BARRY DYER, MANAGER, MEDICAL INFORMATION & ANALYSIS, INTERNATIONAL SOS, LONDON

The Medical Information & Analysis Team is based around the globe. This means they can apply the 'follow the sun' or 'round-the-clock' workflow and monitor emerging events 24/7.

SPECIALIST KNOWLEDGE

One of the team members, Dr Barry Dyer, Manager, Medical Information & Analysis, is based in our London office. "It's vital to track pandemic threats and be prepared for the next one. Although it is uncertain which virus will cause the next pandemic, and where it will arise, one thing is certain – another pandemic will happen", says Dr Dyer.

When a new virus emerges, there is often a lot that is unknown about it. As the scientific community studies the situation, there may be a rapid flurry of new information. The team maintains close links with many experts in emerging infectious diseases, including the virologist Professor John Oxford.

ZIKA VIRUS OUTBREAK

Zika virus is a mosquito borne disease of tropical areas. Since it appeared in Brazil in May 2015, it has been spreading explosively in the Americas, and could potentially spread to any area that has the type of mosquito that can carry Zika virus.

The majority of people infected have no or only mild symptoms, howeve there is growing evidence linking the disease to birth defects and neurological complications, and reports of sexual transmission from men to women. There is currently no vaccine, and no cure. Prevention is through preventing mosquito bites, and through public health and community measures to curb mosquito breeding.

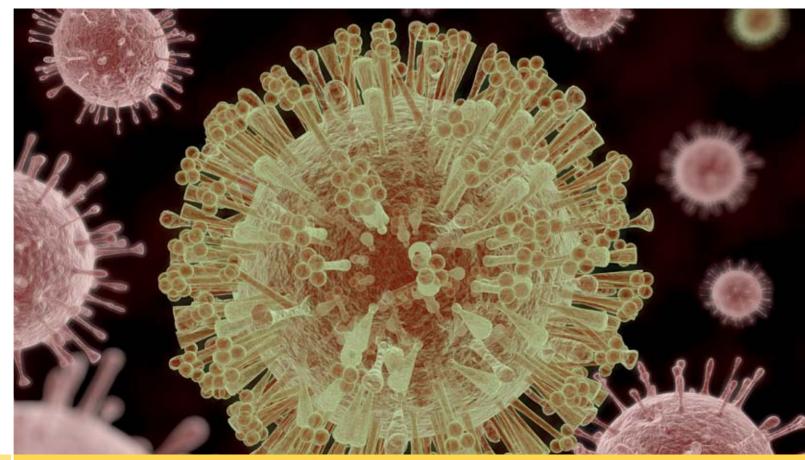
As the greatest concern is over possible birth defects, many authorities are currently advising pregnant women to postpone travel to affected areas. For the latest developments, see the dedicated website:

https://pandemic.internationalsos.com/zika









"Advising travellers and managers about these diseases, including how to prepare, prevent and respond, is a key task."

DR BARRY DYER, MANAGER, MEDICAL INFORMATION & ANALYSIS, INTERNATIONAL SOS, LONDON

SWINE-FLU

'Swine flu (H1N1)' was the first pandemic of the 21st Century. It started in 2009 near a pig farm in Mexico and spread to villages, towns and cities, and ultimately across the world. Like other pandemic viruses it was able to spread quickly between humans. This was facilitated by the large travelling population. As Dr Dyer points out, "It's shocking how quickly and how far it spread. We kept a very close eye on it." Eventually a vaccine was created.

The team is keeping a close watch on other potential pandemic threats, such as bird flu H5N1 and H7N9. Bird flu usually infect birds. Humans in close contact with infected birds, such as poultry farmers, can get infected. A significant number of them develop a severe illness which can be fatal. Occasionally bird flu does spread from one person to another. However, if the virus adapts to spread more easily between people, a pandemic is possible.

MERS - COV

Another disease firmly on our radar is Middle East Respiratory Syndrome Coronavirus (MERS - CoV). This new disease first appeared in 2012 in the Middle East. People are probably infected from exposure to camels however infected people can pass the virus to other people, and explosive outbreaks can occur, particularly in hospitals. Travellers risk spreading the disease to new areas. A single traveller triggered a large outbreak of over 150 cases in South Korea.

INFORMATION AND EDUCATION

"Advising travellers and managers about these diseases, including how to prepare, prevent and respond, is a key task", according to Dr Dyer. Following the SARS outbreak, in response to the evolving landscape, a pandemic preparedness service was launched in 2005. Since then we have continued to enhance the information, tools and advice we provide.

In July last year, this culminated in the launch of our refreshed dedicated website: https://pandemic.internationalsos.com

As Dr Dyer explains, "We totally revamped and re-launched the website to bring it up-to-date. We wanted to take advantage of the latest technological developments and find better ways of presenting information."

The site explains the background to pandemics and particularly focuses on current 'active threats'.

There are also newly designed pandemic eLearning courses available for members and managers. The modules provide practical advice and information on how to keep safe and prepare for a potential pandemic. Our clients can access these courses via the International SOS Training Hub.

BEING PREPARED

There are different levels of access to the pandemic information. The public can gain a general overview of pandemics. International SOS members have more detailed advice on individual diseases as well as access to travel advice. Pandemic information subscribers can go even deeper. They can access the latest pandemic news as well as extensive background and scientific information on pandemic planning. They also have access to country-by-country situation assessments, planning tools, and educational materials to share with their employees.

Pandemic information subscribers also receive email updates and have access to regular webinars.

All this knowledge forms vital background information for the development of pandemic preparedness plans. Many of our clients are now using these crucial tools to help them mitigate their risks.

A RECOGNISED AUTHORITY

The website has been very well received.
Our interactive map is particularly popular.
Users can check the locations where they have operations to see the latest news on active threats.

Although information about diseases can be found elsewhere, International SOS is recognised as an authority. From the early days of the Ebola outbreak in West Africa, many international agencies relied on our website as the first port of call, and many continue to use it on a daily basis.

As Dr Dyer points out, "When there are evolving situations with a multitude of sometimes conflicting information, we can filter through it, using our people on the ground and contacts in many agencies to provide our members with reliable information that is comprehensive, upto-date and actionable."

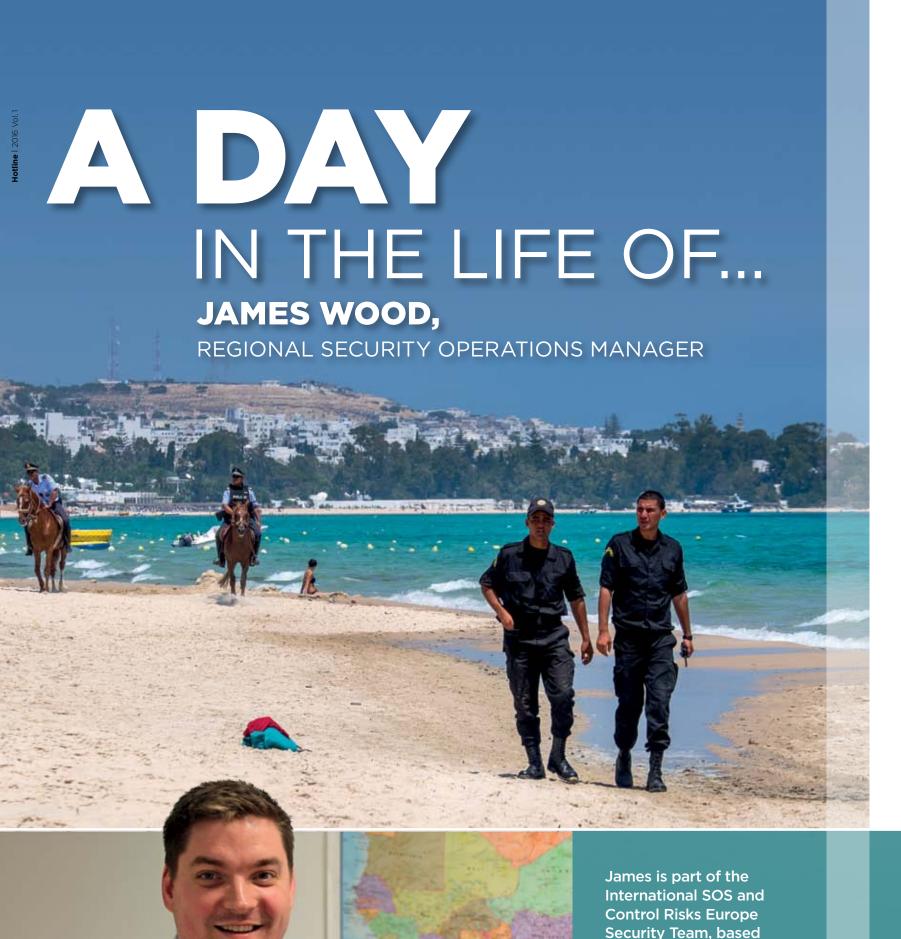
ABOV

Some airlines implement preventive measures regarding the MERS virus on their flights within affected areas.

OPPOSITE PAGE, TOP RIGHT:

6

7



in London.

Hotline spoke to

James about what it

takes to be a Security

Operations Manager.

HL: Tell us about your iob.

I oversee the operational support we provide to our clients. Ours is a wide and diverse area, covering the whole of Europe, Central Asia and Northwest Africa. Many different challenges, such as protests, a lost passport or stolen luggage, or crime and terrorism, can and do arise there.

There are three key elements to our work: assessment, advice and assistance. We are constantly assessing the current and potential impact of developing situations and events across the region and evaluating information from multiple sources. We then use those assessments to provide operational advice for our clients to help them make decisions.

Most advice is given pre-departure to help organisations and their travellers understand and prepare for potential risks. We also help anyone involved in security incidents while travelling, including evacuating them.

HL: Don't governments advise on whether it is safe to travel?

Yes some do, but we look at the potential risk from the business traveller's perspective and look to enable the safe continuity of business travel where we can.

An example of this is the attacks in Paris in January and November 2015, and subsequent threat level increases in Belgium. Based on our objective and clear assessment of the situation and the ongoing threat, we were able to provide practical advice to our clients. This meant we could advise them that it remained broadly safe to travel to Paris and to Brussels. We were also able to forewarn clients about the increased security presence and the tense atmosphere there, as well as assist in planning for events in the region.

Our advice is based on the wealth of information we have access to and our ability to synthesise this information into a balanced, independent and objective assessment based on the reality on the ground.

Our advice is tailored to the event and the individual concerned.

We might say it is safe for an experienced corporate executive to go to a business district. But we might advise a lone student in the same city against visiting certain areas.

HL: What is a typical day for you?

We are a 24/7 operation so first of all the team gets up to speed on events and cases linking with our experts around the world. What has happened overnight? Is anything predicted to happen?

I oversee the thousands of calls we get from clients, how these are handled, and act as an escalation point.

When we are not dealing with an incident we work behind the scenes. That means ensuring we have the processes in place to deal with nearly all situations.

We constantly reassess all unfolding events and reshape our advice to clients. Then, as the day ends, we review where we are. What needs to be passed to the night team? What are our priorities tomorrow?

It is fair to say that every day is different.

HL: What kind of background do people typically have in this role?

Our specialists have extensive experience living and working in their regions, including in some of the most challenging security environments. Backgrounds are diverse, including military intelligence, research, police,

51 CASES

aviation, non-governmental organisations, journalism, crisis management and commercial security. Most of my colleagues hold Master's Degrees in relevant fields like international relations or security studies. Our security team represent over 18 nationalities and combined speak 24 languages.

HL: What do you do to relax when work is over?

I have a busy home life with a very active twoyear old daughter. However, it's important for me to spend time with family and friends and to fully recharge away from the office. I try to exercise when I can but this seems to be a harder pursuit than in previous years.

HL: Do you have much contact with clients?

Yes. Working directly with clients is a big part of the job. As well as calls from individual travellers, we frequently advise senior managers about unfolding situations and how to manage their employees' exposure to security threats and risks. We work with clients at all levels of their organisation. This ensures they are as prepared as possible from a policy level through to the practical application of these policies in their travel risk management structure.

I also visit clients for more in-depth discussions, as a subject matter expert. As well as being always ready to respond, we offer our clients proactive support. We like to keep them involved in our planning and preparation processes.



DURING THE PARIS ATTACKS IN NOVEMBER 2015:

We managed

628
SUPPORTED
CASES
FOR FRANCE

182
CASES
FOR BELGIUM

86 CASES

TRAVEL SECURITY ALERTS

were sent, from initial updates on the

updates on the developing situation in Paris, to assessments of the likely impact of the events across Europe.

MAIN IMAGI

Two weeks after the terrorist attack of Sousse, Tunisia, the tourist beaches of Hammamet are deserted, the police control beaches.

OPPOSITE PAGE, BELOW LEFT:

James Wood, Regional Security Operations Manager

ABOVE

Paris, 11 January 2015, during the march for Charlie Hebdo, Republique suare

9



Every year, natural disasters such as earthquakes, droughts, wildfires, hurricanes, floods and tsunamis occur around the world. Asia Pacific is the most disaster prone region in the world - according to the United Nations.*

*ESCAP technical paper released in March 2015, over two million people died from natural disasters between 1970 and 2014 in Asia and the Pacific.

Around the world, we are on the constant lookout for any event that can affect our members. When a disaster occurs, International SOS immediately activates a crisis management team to assist and support its members. Hotline revisits the events that took place during last year's major earthquakes in Nepal and Malaysia:

Magnitude 7.9 earthquake struck Nepal, 50 miles north of Kathmandu

DATE: 25 APRIL 2015

IMPACT:

This was the most powerful earthquake to hit the area for 80 years. It killed more than 8,000 people and injured 13,500 others. Besides the local population at least 300,000 tourists were in Nepal at the time.

SITUATION:

We already knew that there was the potential for seismic activity in Nepal. Our team of travel security specialists that operate on a 24/7 basis spotted the earthquake as it happened at 11h56 local time. Aditya Luthra, Regional Security Information Manager, Asia Pacific, explains, "We immediately escalated the matter internally according to our set procedures. At 12h25 local time we alerted our clients and issued an advisory against travelling to the area."

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Hotline | 2016

Our clients' primary concern was to find out where exactly their employees were. Those who subscribed to TravelTracker had an advantage and we knew from their real time travel itineraries where they were.

As clients started verifying their staff's locations, we offered our advice and support. Aditya continues, "The calls from our members were coming in fast, with more than 50% of the calls classified as complex - as they ranged from requests for specific information to missing people."

ON-THE-GROUND SUPPORT:

As soon as flights were permitted to land we had a team on the ground in Kathmandu. This consisted of both security and medical specialists. Our security specialists focused on providing accurate and corroborated information that could be disseminated to our clients as well as to relocate members from the worst-affected areas of the country. Kathmandu Airport shut down immediately after the quake and was intermittently closed for the next 48 hours. When it fully reopened two days later, thousands of people were clamouring for flights. We advised our clients to stay away from the airport until they could secure seats. Our Assistance Centre began coordinating with the commercial airlines. We also liaised with different embassies who were arranging special flights for their citizens. Within the first few days after the Kathmandu airport re-opened, we were able to facilitate and assist our clients to move out of Kathmandu.

Another challenge was helping those in remote locations outside Kathmandu. Four of our members were trapped in Lukla, the starting point for treks to Everest base camp. While Lukla's small airstrip was not damaged, there were no internal commercial flights available. As Aditya explains: "From our research trips to the area, we knew the road infrastructure would have been severely damaged by the quake." Given the lack of air and land options we advised members not to attempt the overland journey on their own and instead to remain in Lukla until other options became available.

We then set about organising a private flight for them by helicopter. However, all helicopters had been requisitioned by the government authorities for rescue efforts. When the government authorities briefly released a helicopter to be used by a local security provider, our pre-existing relationship with the provider ensured that we were given priority in arranging transport for our members in Lukla. We transported the four members back to

Kathmandu, organised a hotel and they too were soon on a flight home.

Meanwhile, our medical specialists had been busy too. They visited hospitals to locate and support any clients who may have been injured.

A magnitude 5.9 earthquake struck a mountain in Sabah, Malaysia

DATE: 5 JUNE 2015

IMPACT:

The earthquake was the strongest to affect Malaysia since 1976. The tremors from the quake triggered a landslide. 18 people died on Mount Kinabalu, while about 137 other people who were climbing the mountain were stranded, but were subsequently rescued.

SITUATION:

At 7h15 local time we received the first call from a college student from an international school, who was at the peak of the mountain together with his school mates. They were instantly provided with security advice such as to remain in the current location (the damage to the path down the mountain was unclear), to conserve mobile phone life, food and water, and how to stay warm. We remained constantly in touch with them until they returned back to Singapore. Within a few hours after the first call, we received a call from a national primary school who had 37 students and teachers at the mountain as part of an expedition. "In a crisis that involves mass casualties and plea for assistance, it is crucial that we keep our

emotions in check and not lose focus", says Dr David Teo, Regional Medical Director for South and Southeast Asia. Our crisis management team quickly deployed our medical and security experts from offices in Singapore, Malaysia and Thailand to Kota Kinabalu to assist our members and clients.

This included visiting and assessing the students and teachers in hospitals and immediately evacuating the ones that were fit to fly. We also sized up the situation by assessing the impacts of the earthquake on the roads en route to Kota Kinabalu. We did this over the next two days and the information was relayed back to the clients.

Throughout the next two days our crisis team worked closely with the local authorities whilst in Kota Kinabalu to get timely information with regard to the status of the search and rescue mission conducted by the local authorities. With this, we were able to provide scheduled updates to the relevant parties involved - thereby allowing them to make sound decisions.

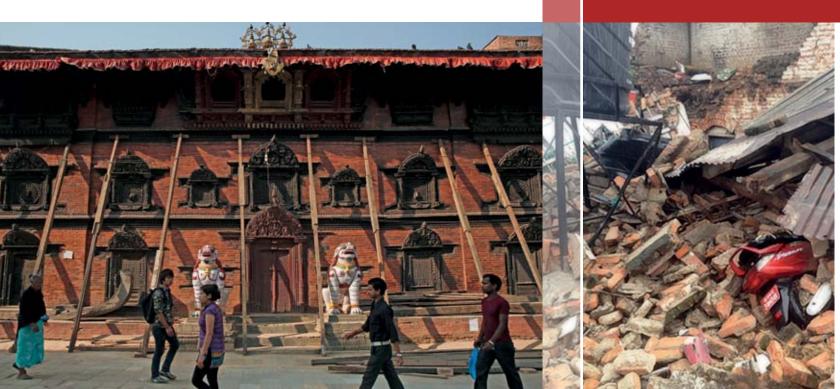
As for the students and teachers who did not survive the earthquake, our local team provided emotional support to the relatives and also helped facilitate any necessary arrangements.

THE NEED TO LEAVE

Natural disasters have dramatic impact. As well as injuries to people, the infrastructure suffers huge damage. Communications can completely break down. Transportation is

Respect

When the government authorities briefly released a helicopter to be used by a local security provider, our pre-existing relationship with the provider ensured that we were given priority in arranging transport for our members in Lukla.



totally disrupted. Power supplies fail. Healthcare services soon face extreme pressure. Food, water, fuel and cash quickly become scarce. There is an increased risk of disease. There can even be a breakdown in law and order. Then there is the added risk of aftershocks making everything even worse.

CONSTANT UPDATES

When an incident occurs, having accurate medical and security information at hand at all times is vital. We provide our clients with reports containing urgent advice and detailed briefings on an ongoing basis. These include information on the constantly evolving travel situation, updates on the status of the hospitals, etc.

In the case of the two earthquakes, our Assistance Centres responded to the increasing number of client calls. We provided regular updates via email, social media and on the International SOS and Control Risks travel security website.

Much of this information came from our people on the ground. This is vital for accuracy. In a crisis, there are usually many media reports of growing unrest which are not verified. Thanks to our own sources we can set the record straight and calm clients' concerns.

OPPOSITE PAGE, LEFT:

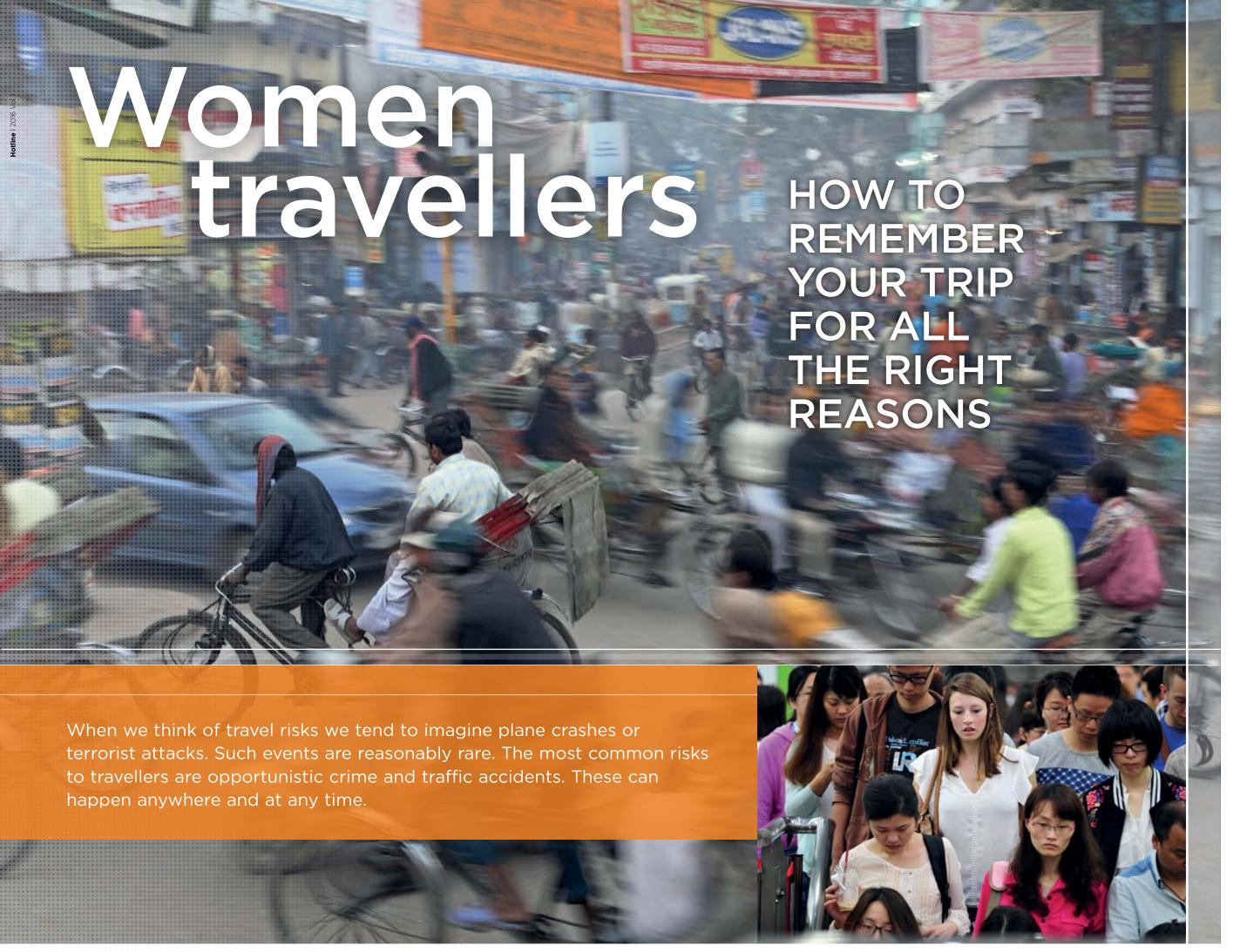
Nepalese pedestrians walk in front of Kumari Palace, or living goddess, at Hanumandhoka Durbar Square in Kathmandu.

ABOVE:

A boy places a candle in memory of the earthquake victims in Kota Kinabalu. Malaysia.

LEFT:

Photo taken in Kathmandu by our team on the ground, providing accurate and corroborated information.



MAIN IMAG

Street in old Varansi, North-Central India

BELOW, RIGHT:

Passengers walk downstairs at a metro station in Shanghai, China.

In the case of crime,
women are often perceived to
be 'easier' targets as it can be
easier to snatch a handbag
than pickpocket a wallet.
A snatched handbag means
losing money, credit cards, ID,
travel documents and more.
Also, women are more likely
than men to be victims of
sexual harassment or worse.

Recognising this, International SOS offers specific advice to women travellers to help mitigate these risks. We hold our travel safety webinars and recently launched an eLearning module specifically for women. We also hold in-person training courses on this topic. Fely Bowen, Regional Security Manager, Security Solutions, Asia-Pacific conducts these courses in her region.

In Singapore, Fely has also given a number of talks to students before they go travelling. Teenage girls can be particularly vulnerable and these sessions are very popular. The team also trains men about mitigating the risks to their female travelling companions. For example, if on a train or bus, the man should sit on the aisle seat with the woman by the window. This can reduce the chances of the woman being exposed to handbag theft or sexual harassment or assault.

TRAINING FOR WOMEN TRAVELLERS FOCUSES ON FIVE KEY RULES:

KNOW YOUR PERSONAL PROFILE.

Understand that if you are a Caucasian visiting China or the Middle East you will stand out, no matter how you dress. An Iranian woman may feel equally out of place in some areas of Australia wearing a chador or hijab.

RESEARCH THE DESTINATION AHEAD OF TIME.

Understanding the culture of a place is important too. In Malaysia for example, Muslim men may not shake hands with women. Knowing that helps you understand and feel at ease. Similarly, know what outfit is acceptable and stay on the side of being conservative.

BE A HARD TARGET.

Stay on guard throughout your trip. Incidents often occur in places we feel safe in and know well. It is easy to let your guard down. It is all about mitigating the risks by acting sensibly. If you think you are being followed, seek help. Go into the nearest shop or hotel and seek assistance.

Blend in and leave expensive jewellery at home.

BE CONFIDENT AND ASSERTIVE.

Limit unwanted attention by appearing self-assured. Do not stand looking lost holding a tourist map. Look as if you know your way around. In conversation, mention the presence of a boyfriend or husband and consider wearing a fake or real wedding ring.

STAY CALM.

If your bag is snatched, let it go. It is better to lose the bag than get injured in a struggle. Make sure you have packed only the essentials for the day and have back-up versions of all important documents. That way the loss is more manageable. If a weapon is threatened, a non-confrontational response is likely to be the best option.

If an incident does occur, International SOS is there to help. Call one of our Assistance Centres and we can arrange any support needed.

We advise on how to replace documents and cancel credit cards. We can arrange money transfers too. We are here to help in any way we can. Ideally, by following our travel advice, such incidents can be averted or the impact minimised.

Both men and women are exposed to risks. It is important that companies recognise this and implement policies and procedures accordingly.



TOP TRAVE

AT THE AIRPORT:

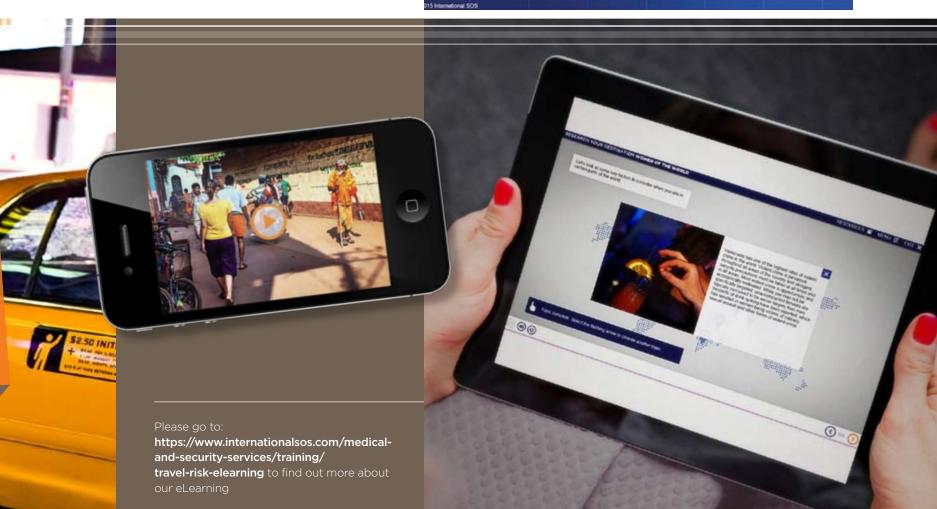
- Stay alert- especially if it's been a long flight
- Know exactly who is picking you up from the airport and check their ID.
- · Make sure the driver knows who you are and where you are going

AT THE HOTEL:

- Get the receptionist to write down your room number rather that saying it out loud.
- If it is late and you feel uncomfortable, ask someone you trust to take you to your room. Have them wait while you check it is safe.
- Double-lock the door and use a rubber doorstop to wedge it shut.
- Do not open the door to unexpected staff or visitors;
 verify who they are by calling reception.

GOING OUT:

- Get the hotel to call you a taxi from a reputable firm.
- Keep a hotel business card (in the local language) with you.
- Carry your bag on your side that is away from the road
 that makes it harder to snatch
- Walk on the side of the street against the prevailing traffic



OPPOSITE PAGE:

eLearning

International SOS' Women's Security

16 Hadden Harring Harri

THE TIDE ON MALARIA



Public Health England noted an overall increase of 5.7% in imported malaria infections in the UK in 2014 compared to the prior year.

WORLD MALARIA DAY 2016 - INVEST IN THE FUTURE: DEFEAT MALARIA.

We are used to reading bleak headlines about malaria. In 2015 however, the World Health Organization (WHO) reported zero indigenous cases of malaria in the European region for the first time since it began keeping score. The region of the Americas and Western Pacific region have also achieved substantial reductions in malaria cases.



Abu Lodge, dusk over the swamps. Botswana, Okavango Delta listed as World Heritage by UNESCO.

THIS PAGE, TOP:

Mosquito net over the bed to protect against mosquito bites at night.

THIS PAGE, BELOW:

International SOS' malaria eLearning.

It is the African region that continues to shoulder the heaviest malaria burden. However, there have been impressive gains too: since 2000, malaria mortality rates have fallen by 66% among all age groups, and by 71% among children under five according to the World Health Organization.

So, is the tide finally turning on malaria? No doubt there has been enormous progress reaching more people than ever with lifesaving malaria interventions and reducing malaria deaths worldwide. About 3.2 billion people - half of the world population - remain at risk of malaria. People are still not accessing the services they need to prevent and treat malaria. World Malaria Day (25 April 2016) is a much-needed reminder that this serious, and at times fatal, disease still has a devastating impact.

MALARIA AND BUSINESS TRAVEL

This year, travel buyers are forecasting a confident outlook for business travel despite broader economic challenges, according to new research from the ATPI Group and the Institute of Travel and Meetings (ITM). More companies than ever send their employees to new markets to expand their global footprint.



MALARIA IN NUMBERS*:

- In **2015** there were an estimated **214 million** new cases of malaria and **438,000** deaths
- About **3.2 billion** people remain at risk of malaria
- New estimates show that reductions in malaria cases in sub-Saharan Africa saved an estimated US \$900 million over 14 years
- 57 countries are on track to reduce malaria incidence by 75% by 2015 in line with the World Health Assembly's target for **2015**
- Approximately **80%** of malaria deaths are concentrated in 15 countries, mainly in Africa

*All data taken from World Health Organization (WHO) website and World Malaria Report 2015. More information can be found at: who.int/malaria/media/world-malaria-report-2015/en/



However, in June 2015, Public Health England (PHE) reported an overall increase of 5.7% in imported malaria infections at: https://www.gov.uk/government/news/ malaria-health-advice-for-travellers.

While there is no vaccine, malaria is both preventable and curable. Travellers, schools, expatriates, businesses and non-governmental organisations must know the risks before travelling abroad. Getting accurate information out about prevention is the first step.

A recent Ipsos Global Advisor study asked participants about their concerns and preparations when travelling abroad. Among the global sample of people who travel abroad, 92% say they make some kind of preparations before they travel. But just 32% of those who travel tend to research diseases.

International SOS 'Dr Irene Lai highlights, "Companies must exercise Duty of Care and define their training procedures and policies towards malaria if they have employees travelling to, or operating in, risk areas. Even a quick business trip could potentially be fatal without appropriate measures in place."

MOVING FORWARD

International SOS provides education and malaria prevention services to reduce risks to organisations and their travelling employees. The value of such programmes was highlighted last year in the Return on Prevention study, published by research and consultancy firm Prevent. The analysis of one company's malaria prevention programme demonstrated a decrease in the occurrence of fatal cases by 70%.

HOW DOES MALARIA SPREAD?

Malaria is spread to humans via the bite of an infected Anopheles mosquito which typically bites at night (from dusk until dawn).

MALARIA SYMPTOMS

Symptoms such as fever, chills, head/body aches and generally feeling tired and unwell develop about seven days after being bitten but can take a month or longer to appear. If not promptly treated, malaria can be severe.

It may cause mental confusion, seizures, kidney failure, coma and death. Travellers are more likely to suffer these complications than local inhabitants.

HOW WE ARE PROTECTING OUR MEMBERS:

EDUCATION



eLearning to prepare employees travelling to, or working in, malaria affected areas.

MALARIA CONTROL PROGRAMME



Designing and implementing appropriate, integrated malaria control programmes that include risk assessment, employee education, and vector control measures.

3 MALARIA KITS



A range of kits which can include insect repellent and bed nets, through to stand by emergency treatment.

You can find more information at: https://www.internationalsos.com/topics/ malaria2016

PREVENTION

There is no vaccine to prevent malaria. Prevention is through prevention of mosquito bites. Some people are also advised to take anti-malarial drugs to prevent infection (chemoprophylaxis), depending on where they are travelling to, their accommodation and the type of activities they are undertaking.

Chemoprophylaxis and bite prevention is not 100% effective, and people must still be alert for symptoms of the disease, and seek prompt diagnosis treatment if they develop.

ABOVE:

Doctor looking at malaria virus through microscope

Demonstration of how to use a mosquito net

JUST ASK

Some of the (non-medical or security) requests we assist with:

BEFORE TRAVEL

Visa requirements
Flight arrangements
Transport options
Arranging passport photos

DURING TRAVEL

Extra accommodation due to flight delays
Roadside assistance
Change of travel plans
Lost membership card
Lost passport
Lost phone
Lost wallet - cash advance needed
Lost luggage

AFTER TRAVEL

How to claim medical expenses
Follow up on appointments

DID YOU KNOW?

We can also provide members with:

- General practice consulting
- Expatriate doctors
- 24/7 ambulance and emergency stabilisation
- Minor surgery referrals
- Healthcare checks and occupational health services
- Malaria control programmes
- Vaccination
- Medical evacuation
- Consultation for diagnosis and treatment
- First aid training

"Eighty-nine percent of companies plan to compete primarily on the basis of the customer experience by 2016."

https://www.gartner.com/doc/2857722/gartner-survey-finds-importance-customer

PREPARED TO ANSWER

We welcome calls from members before, during and after travelling. Answering a simple question early can avoid a serious problem later. This is better for the member and can ultimately save their company time and money.

Prior to travel, members may ask us what inoculations they need. Or what places to avoid for security reasons. More general questions might cover visa requirements or transport availability. We have also been asked "where can I get a replacement passport in West Africa?" or "what should I do after I have been pickpocketed in Brazil?". We answer them all.

While abroad our teams are always on hand for any medical and travel security issue. Be it major or minor. A member can talk directly to a doctor or security expert within a few minutes. The many general assistance queries are dealt with by our customer services executives. They have invaluable local knowledge and access to our vast information systems. Our worldwide network means we can handle calls in almost any language too.

WHO IS CALLING?

In 2015 our 27 Assistance Centres dealt with requests for medical, travel security and other forms of assistance.

Calls 4,600,000 Cases* 1,557,500

*Each case often involves a number of calls.

Evacuation / repatriation / RMR (repatriation of mortal remains) under 1% Out-patient 15%

Information / Advice / Referral 80%

PREPARED TO ASK

We pay particular attention to how we respond to these 'everyday' calls. We want each call to be a positive experience for our members. Kim Danks, Assistant General Manager - Quality, has been leading this work. She spoke to *Hotline* about plans and progress.

"We have always encouraged client and member feedback on how we are doing. Their views have truly helped shape our service offering. We also recognise that what might be a priority today, may not be a priority tomorrow. It is crucial we keep our fingers on the pulse of what is needed. That way we can create a service designed by our members - for our members "

We are listening to both client businesses and individual members. After calling our Assistance Centres, members are asked to evaluate their experience. All research is conducted to the international quality standard for market research: ISO 20252.

The results help us identify what is driving positive experiences with us and what factors are becoming more increasingly important for the future. 18 months ago we found that the biggest driver of satisfaction was efficiency - so we reacted by ensuring that our service was optimised to meet this expectation. 18 months on, we see this gradually evolving: efficiency is still important, but other factors are coming to the forefront. So, we adapt our service again.

"We listen to thousands of members' views each time. It is crucial to continuously improving their experience. We listen, we analyse, and we adapt. Then we repeat the process. This way, we evolve with our members", says Kim.

The process is working. Since 2015, 71% of our members were very likely to recommend our service to colleagues, friends or family. 88% of members were 'very' - 'extremely' satisfied with the service they have received.

As Kim concludes, "The results are staggeringly high, especially when we compare to external benchmarks. However, we cannot afford to stop listening. Not for a minute. We see it as a core part of caring for people. You pay close attention and you do your very best to help them."

OPPOSITE PAGE, ABOVE:

Businesswoman using her ph

OPPOSITE PAGE, LEFT:
International SOS Assistance Centre