

Protocol for External Visitors to BUP

As you plan your upcoming experience in Botswana, please read the following document and complete the relevant fields. As an external visitor (an individual who is not a student or fellow at Penn, or is not directly employed by Penn or CHOP), we want to ensure that you understand what steps you need to take before you arrive in Botswana and the services that BUP may provide to you with their associated fees.

Your signature will be required on the final page as proof of your acknowledgement and acceptance of the terms and conditions of BUP described here. You will be notified once the completed form and supporting documents have been reviewed and accepted.

Name:	
Email:	
Occupation:	
Home Institution:	
Primary Contact at Home Institution:	
Dates of visit to Botswana (dd/MMM/yy):	
Reason for visit to Botswana/ BUP:	
Supervisor/PI Contact in Botswana/BUP:	
Primary Contact Phone:	Email:
Emergency Contact and Phone Numbers: Name:	
Phone # 1 (include country code):	Home/work/cell?
Phone # 2 (include country code):	Home/work/cell?
Email address:	

Pre-Departure Responsibilities

Prior to arrival in Botswana, **all** external visitors are responsible for obtaining/ completing the following:

- 1. **Travel Health Insurance** external visitors working with BUP must provide proof of travel health insurance for the duration of the individual's stay in Botswana. Proof of coverage must be submitted with this form.
- Travel Med Visit external visitors must consult with a healthcare provider to obtain any recommended prescriptions. These medications should be filled and brought with you to Botswana.



The following is **only** for those who are submitting a BHPC application to practice medicine in Botswana.

- 3. **Post-Exposure Prophylaxis (PEP)** external visitors working in a clinical setting have an increased risk of exposing themselves to HIV and Hepatitis B and C. External visitors are responsible for consulting with a healthcare provider to obtain a prescription for Post-Exposure Prophylaxis (PEP). This PEP prescription should be filled and brought to Botswana to be taken in the event of an exposure. As an external visitor, you will need to establish an action plan with your healthcare provider in the event that you are exposed to these infectious diseases, especially regarding access to testing, counselling, and follow up treatment as needed.
- 4. Medical Professional Liability Insurance Penn medical professional liability insurance is limited to Penn employees, faculty, and students. It is important that any external clinicians who work with BUP and practice medicine in Botswana are aware that they are <u>not</u> covered by Penn's medical professional liability insurance and are at risk for any legal implications that may arise as a result of your clinical practice. In Botswana, it is not required by law to have medical professional liability insurance to practice medicine in the public sector. However, Penn/ BUP strongly recommends that you consult with your home institution or clinical practice regarding its coverage and/or advice for its clinicians practicing medicine in other countries. If your home institution or clinical practice provides medical professional liability insurance while you are practicing in Botswana, please submit proof when you submit this form.

BUP Services and Associated Costs

Please check all the services that you are requesting:

____ BHPC Application Assistance:

BUP can provide administrative support to register external visitors with the Botswana Health Professions Council (BHPC), which is required for all physicians practicing medicine in Botswana. BUP will explain the necessary documentation needed to complete the BHPC application and assist with its submission. The cost of this service is <u>P1000 (\$100)</u> and is due within 30 days of the invoice date.

Visa and Permit Assistance:

For external visitors, BUP can assist with the visas and work and residency permit applications. The cost of these services are below. Payment is due within 30 days of the invoice date. BUP can also assist you in determining which type of visa or permit you may require during your stay in Botswana.

Type of Assistance	Gov't Fee/ Person	BUP Fee/Person	Total Cost/Person
Visa	P500	P1000	P1250 (\$150)
Permit Waiver (for visitors staying	No fee	P1000	P1000 (\$100)
less than 90 days)			
Long Term Exemption Permit (for all	P1500	P3000	P4500 (\$450)
visitors, staying more than 90 days)			
Work & Residence	P3000	P3000	P6000 (\$600)
Dependents	P1500	P1000	P2500 (\$250)



Airport Pick Up and Drop off:

BUP can provide airport pick up and drop off services to/from the Sir Seretse Khama International Airport in Gaborone. One roundtrip airport transfer is <u>\$30</u> and is due within 30 days of the invoice date. This service is reserved for BUP work-related travel to/from the airport (i.e. your initial arrival and final departure). It is not intended for any personal travel to/from the airport during your time in Botswana.

If you are requesting an airport pick up and drop off, please submit your flight itinerary with this form.

___ Accommodations at Pilane Court:

Space permitting, BUP can also provide shared accommodations for your stay in Botswana at Pilane Court, residential flats leased by the University of Pennsylvania. Pilane Court services include:

- Daily cleaning services, including weekday laundry service
- Security guard night and day
- Personal key to accommodations, to be returned at end of stay
- Shared room
- Access to full kitchen, WIFI, library and two desktop computers
- Items provided: hand soap in bathrooms, <u>one</u> bottle of water upon arrival, bed linens, pillow, towel

The nightly rate is <u>\$50</u> for external visitors (this rate is subject to change in the new fiscal year, starting July 1). A deposit will be required to confirm this reservation. The balance is due within 30 days of the invoice date.

If you would like to request a reservation at Pilane Court, please provide the dates you are requesting accommodations at Pilane Court (dd/MMM/yy): ______

If you check any of the services above, please tell us how will you be paying (credit card or check)? _____

My signature below indicates my acceptance of my responsibilities outlined above. I assume full responsibility for all risks associated with my travel to Botswana and with my work with BUP.

My signature below also indicates my acceptance of the terms and costs of the services that BUP offers as outlined above.

Signature

Date

Sign, scan and email to Liza Rissik (rissikl@bup.org.bw).