

CODE OF CONDUCT FOR HCA VOLUNTEERS

As a volunteer with HCA, we ask that you read, understand and accept the following code of conduct and confidentiality undertaking:

- that I have to attend an Induction program conducted by HCA;
- that I shall abide by and follow the instructions/directions provided by my Volunteer Coordinator, or the HCA and its framework, policies, Volunteer Management rules and procedures;
- the code of confidentiality with regard to any information related to HCA's corporate/customers/patients/volunteers;
- that I must be punctual for my volunteering service;
- that I should inform the Volunteer Coordinator or HCA if I am medically unfit to carry out my duties;
- that during my volunteer service, I shall not coerce/entice any of my charges into any agreement or transaction that would benefit my personal finance interest (directly or indirectly). Examples of these include BUT are not limited to direct/indirect selling of healthcare consumables, investment-related products: investment fund, insurance, real estate, etc.;
- that I shall not offer any service including but not limited to tuition services, home nursing services, etc. or share my personal details to my charges, their caregivers or other volunteers in our programmes without seeking prior approval from my Volunteer Coordinator or HCA;
- that I shall not offer any form of medical diagnosis or alternative medication to my charges;
- that I shall be sensitive to and always respect the privacy and cultural/religious background of our patients/participants;
- that I acknowledge and understand the illegality of vaping, which applies to all premises, including offices, public spaces, educational institutions, and any location where volunteering takes place. I also understand that HCA may impose additional disciplinary measures, such as immediate termination of volunteers, on top of the national penalties for violating this law.
- I shall give one (1) weeks' notice to my Volunteer Coordinator and HCA should I wish to resign from volunteer service;
- HCA may terminate this Agreement without cause upon giving thirty (30) days' prior written notice

CONFIDENTIALITY UNDERTAKING

- It is my/our responsibility to ensure that in the course of volunteering for HCA Hospice Limited (HCA) and/or any of our community-related volunteer programmes, I/We shall protect any information which I/we have been given access to be it corporate or

patient-related, for which appropriate consent had been obtained, from any use which may be deemed detrimental to the integrity of HCA and/or any of our community-related volunteer programmes. This non-disclosure, whether directly or indirectly, extends to my family members and fellow volunteers who are not authorised to have access to such information;

- I/we am/are committed to observing the code of confidentiality set out below:
 - I/we must refrain from copying, reproducing, extracting, translating or using information for any unofficial or unauthorised use;
 - I/we must not communicate any information regarding my volunteer work to any external parties such as the media, external authorities, etc., without prior approval from HCA;
 - I/we must safeguard the integrity of all confidential information and must not remove, falsify, deface, or destroy such information in any manner;
 - I/we must not compromise the security of confidential information where the action may give rise to potential misuse of information by unauthorised individuals;
 - If I/we have received information in any form that was mistakenly sent to me, I must promptly inform the issuer about the error and act on the relevant advice given by the Issuer. I must not under any circumstances retain, copy, reproduce, extract, forward, propagate or use in any way the information so received;
 - I/we must promptly surrender, without demand, all information held in my custody. I shall be held liable if I destroy or remove any information or paraphernalia belonging to HCA without any proper authorisation which could result in disciplinary or legal action commenced against me;
- In the event of any breach of confidentiality, my volunteering service will be terminated. I may also face legal action in the event that HCA seeks compensation for any claims, damages or losses suffered as a result of or in connection with such breach;
- The Letter of Undertaking is deemed valid throughout the duration of my volunteering service. I acknowledge and accept that my/our agreement herein survives the termination or resignation of my/our volunteering service with HCA and its related establishments mentioned in this Letter of Undertaking.
- I/we have read and fully understand the contents of this Letter of Undertaking. I/we hereby accept the terms and conditions as stated herein and confirm that I have signed this Letter of Undertaking after I have fully understood the contents herein.