

## **Additional Files: Tables**

### **Table 1: Each core outcome and how it was used in the tool**

CORE OUTCOME	INCLUDE/REMOVE/COMBINE	Reason/changed to/combined into
INCREASED AWARENESS OF/KNOWLEDGE ABOUT CULTURAL DIFFERENCES AND SIMILARITIES (e.g., understanding key issues within a culture, culturally acceptable behaviour and cultures of UK immigrants, learning about, accepting and changing assumptions about other cultures)	COMB	I have demonstrated a good awareness about how cultural differences influence health
INCREASED AWARENESS OF/KNOWLEDGE ABOUT THE CULTURAL ASPECTS OF HEALTH (e.g., greater understanding of health promotion, how culture affects daily life and professional work, cultural differences in health, the effects of politics on health, sustainable healthcare)	COMB	I have demonstrated a good awareness about how cultural differences influence health
ABILITY TO WORK WITH LIMITED RESOURCES (e.g., being more resourceful, ability to target resources, ability to find solutions despite limited resources, making use of everything available, ability to work without reliance on technology, manage in a low resource setting)	COMB	I have frequently had to find solutions despite limited resources
INCREASED AWARENESS OF/KNOWLEDGE ABOUT CULTURE IN PRACTICAL ASSESSMENTS (e.g., the importance of collecting relevant cultural information about people's presenting health problems and learning how to conduct cultural assessments and culturally based physical assessments)	INC	
ABILITY TO APPLY CLINICAL SKILLS TO ANOTHER CONTEXT (e.g., a more challenging environment or a low resource setting)	INC	
ABILITY TO BE ADAPTABLE AND INNOVATIVE IN TEACHING (e.g., ability to transfer skills and knowledge to the most influential people or to another context, recognising different learning styles, being adaptable in assessment)	INC	
INCREASED AWARENESS OF/KNOWLEDGE ABOUT HOW OTHER HEALTHCARE SYSTEMS FUNCTION (e.g., developed insight into disparities within healthcare systems, understanding of other systems)	INC	
ABILITY TO COPE (e.g., improved coping strategies, ability to deal with lack of structure, knock backs and stress, being unfazed by things and taking things in stride, new approach to guilt for patients problems)	INC	
INCREASED CULTURAL SENSITIVITY (e.g., sensitivity to reasoning behind cultural differences, feelings of minority and language barriers)	COMB	I have frequently demonstrated cultural sensitivity (e.g. understanding that words and behaviours can have different meanings)
UNDERSTANDING THAT WORDS AND BEHAVIOURS CAN HAVE DIFFERENT MEANINGS (e.g., understanding how words are perceived by others, understanding how to speak and behave so as not offend people)	COMB	I have frequently demonstrated cultural sensitivity (e.g. understanding that words and behaviours can have different meanings)

ABILITY TO APPLY KNOWLEDGE ACROSS SYSTEMS (e.g., ability to apply knowledge from host system to UK and vice versa, using knowledge gained in system to improve/change another)	INC	
DEVELOPMENT OF A NEW PERSPECTIVE (e.g., revising assumptions, seeing things differently, changed world views and outlook, look at everything in a new light, openness to new experiences, put things into perspective)	INC	
IMPROVED FLEXIBILITY AND ADAPTABILITY (e.g., acceptance of other ways of working, adaptation to responsibility, being able to adapt more easily to unfamiliar situations, able to cope more easily with change, gaining a wider perspective, understanding the flexibility of roles)	INC	
ABILITY TO BE INNOVATE WHEN OVERCOMING CHALLENGES (i.e., finding unique ways of overcoming cultural and language challenges)	COMB	I have frequently had to find solutions despite limited resources
INCREASED RESPECT FOR OTHER CULTURES	COMB	I have demonstrated a good awareness about how cultural differences influence health
INCREASED UNDERSTANDING OF BASIC SKILLS AND IDEAS (i.e., back to basics, e.g., basic observations using eyes, less reliance on lab tests and technology, basic clinical skills and science)	COMB	I have relied heavily on the basic skills of my profession (e.g. physical examination)
CONFIDENCE IN TEACHING ABILITY (e.g., being more comfortable around others, confidence public speaking, confidence in transferring knowledge)	COMB	In the last month I have demonstrated that I'm a good teacher  I am confident in my ability to teach others
IMPROVED CONFIDENCE (e.g., in caring for clients from another culture, in quality improvement methods, to take bolder steps, to address challenging situations, self-confidence, confidence in professional ability,)	INC	
CONFIDENCE TO WORK IN OTHER LOCATIONS (e.g., confidence to move to another city/country, working with UK multicultural/ underserved populations)	INC	
INCREASED AWARENESS OF/KNOWLEDGE ABOUT GLOBAL ISSUES (e.g., re-evaluating world issues, shared purpose)	INC	
INCREASED AWARENESS OF/KNOWLEDGE ABOUT CONDITIONS AND PROCEDURES RARELY ENCOUNTERED IN THE UK (e.g., greater understanding of procedures not used in the UK, unfamiliar equipment and delayed presentations, better management of conditions that are not common in the UK)	COMB	I have a good knowledge of conditions and procedures rarely encountered in the UK (e.g. tropical diseases, delayed presentations, old equipment)
INCREASED AWARENESS OF/KNOWLEDGE ABOUT TROPICAL DISEASES	COMB	I have a good knowledge of conditions and procedures rarely encountered in the UK (e.g. tropical diseases, delayed presentations, old equipment)
INCREASED AWARENESS OF/KNOWLEDGE ABOUT THE IMPORTANCE OF MUTUAL LEARNING AND RESPECT (i.e., greater understanding of reciprocal learning)	INC	
ABILITY TO BE ADAPTABLE IN LEADING (e.g., able to lead in complex novel situations, ability to compromise not dictate)	INC	
ABILITY TO WORK WITHIN A SYSTEM WITH UNFAMILIAR POWER DYNAMICS	INC	
ABILITY TO ADAPT SOCIAL NORMS TO MEET NEEDS OF ANOTHER CULTURE (e.g., change behaviours to fit into another culture, being aware of own social norms and adapting them)	INC	
ABILITY TO EXCHANGE IDEAS WITH THOSE FROM ANOTHER CULTURE	INC	

INCREASED SELF-AWARENESS (e.g., understanding own skills and limitations, how to challenge own beliefs and importance of reflecting on own situation)	INC	
PATIENCE AND TOLERANCE (e.g., accepting and working at other peoples pace, more tolerant)	INC	
PROACTIVITY (e.g., thinking on feet, using initiative, efficiency, get on with things rather than look for someone to blame)	INC	
ABILITY TO WORK WITH RESOURCES AVAILABLE IN SPECIFIC CONTEXTS (i.e., understanding the reasons behind lack of resources)	COMB	I have frequently had to find solutions despite limited resources
ABILITY TO WORK TOWARDS SOLUTIONS (e.g., solution focused approach)	INC	
UNDERSTANDING THAT SPEED AND LANGUAGE COMPETENCY AFFECT COMMUNICATION (e.g., awareness of how speed affects comprehension, understanding language differences and checking recipient comprehension, ability to use an interpreter)	INC	
INCREASED AWARENESS OF/KNOWLEDGE ABOUT THE IMPORTANCE OF COMMUNITY PARTICIPATION IN HEALTH (e.g., understanding the community and social influences on health, the role of the community in health, public health and the importance of community work)	INC	
ABILITY TO USE A BROADER RANGE OF CLINICAL SKILLS (e.g., enhancing existing skills and acquiring new clinical skills, greater all round competence)	INC	
UNDERSTANDING THAT CHANGING BEHAVIOUR IS COMPLEX (e.g., understanding how to make small changes and not to force your perspective onto others,)	COMB	In my work I have demonstrated skills in changing patients' or colleagues' behaviours
ABILITY TO IMPROVE SERVICE (e.g., renewed enthusiasm for service improvement)	INC	
INCREASED STAFF KNOWLEDGE AND SKILLS (e.g., increased staff knowledge of low cost healthcare, more knowledgeable staff able to cover more areas, to discover better ways of doing things and more aware of waste reduction)	REM	too vague and not based on individual
INCREASED AWARENESS OF/KNOWLEDGE ABOUT HOW CONTEXT AFFECTS COMMUNICATION (e.g., effectively conveying ideas in a contextually appropriate way)	INC	
INCREASED AWARENESS OF/KNOWLEDGE ABOUT THE NEED FOR AND IMPORTANCE OF TRAINING (i.e., understanding how important effective training is in)	INC	
IMPROVEMENT IN TEACHING SKILLS (e.g., learning new techniques, greater training delivery skills, lecturing skills and small group teaching skills)	COMB	In the last month I have demonstrated that I'm a good teacher  I am confident in my ability to teach others
ABILITY TO DEAL WITH THE UNEXPECTED	INC	
ABILITY TO MANAGE PROJECTS	INC	
DEEPER ENGAGEMENT WITH ISSUES OF EQUALITY AND DIVERSITY	INC	
ABILITY TO OVERCOME COMMUNICATION CHALLENGES (e.g., ability to communicate effectively in high pressure situations, engage in challenging conversations and liaise between groups)	INC	
ABILITY TO BE INNOVATIVE WITH CLINICAL SKILLS (e.g., use of innovative techniques, finding new ways to approach a condition, new ways of working)	INC	

APPRECIATION OF HAVING THE RIGHT TOOLS AND EQUIPMENT TO BE ABLE TO DO THE JOB (i.e., resources: technical equipment, disposal equipment, cleaning products and protective equipment)	COMB	I have frequently had to find solutions despite limited resources
APPRECIATION OF EXCELLENT HUMAN RESOURCE IN THE NHS (e.g., multidisciplinary TEAM WORKs, HR structures, appreciation of own profession, understanding hierarchy and the importance of each person within it)	INC	
IMPROVED EMOTIONAL INTELLIGENCE (e.g., changed engagement with self, knowledge and world)	INC	
ABILITY TO IDENTIFY AND ANTICIPATE POTENTIAL PROBLEMS (e.g., identify problems when setting up a new project)	INC	
INCREASED AWARENESS OF/KNOWLEDGE ABOUT APPROPRIATE CLINICAL BEHAVIOUR (e.g., knowing when to stop and when to move forward, when to ask for help and different populations needs)	INC	
ABILITY TO MAKE INDEPENDENT CLINICAL DECISIONS (e.g., ability to make an urgent decision in an emergency, dealing with uncertain outcomes, evaluating risks to patients and self)	COMB	I am confident in my ability to make appropriate independent clinical decisions
UNDERSTANDING OWN POTENTIAL TO EMPOWER PEOPLE	INC	
ABILITY TO WORK AS PART OF A TEAM WORK (e.g., understanding TEAM WORK group norms, perception of roles within the group, managing personal objectives within a group)	INC	
ABILITY TO BUILD A GLOBAL NETWORK	INC	
ABILITY TO DISSEMINATION BEST PRACTICE GLOBALLY	INC	
APPRECIATION OF FREE UNIVERSAL HEALTH (e.g., the NHS system of free healthcare for all, privilege and opportunity, the expectations that are placed on NHS by service users)	INC	
IMPROVED SITUATIONAL AWARENESS (i.e., understanding your environment so you can understand what to do)	REM	Research suggests self-report does not measure this effectively
INCREASED JOB SATISFACTION (e.g., increased motivation and morale within profession, renewed passion for work, sense of reward)	INC	
PERSONAL SATISFACTION (e.g., personal achievements and challenges, new experiences, experiencing a different lifestyle, a holiday, appreciation of own life, personal fulfilment)	INC	
CAN-DO ATTITUDE	INC	
ABILITY TO PROVIDE BETTER CARE (e.g., ability to integrate primary and secondary care, to provide multicultural care, to develop most effective approaches to care and taking responsibility for providing quality of care)	INC	
ABILITY TO CO-OPERATE (e.g., willingness to see another point of view)	INC	
APPRECIATION OF CLINICAL GOVERNANCE PROCEDURES WITHIN NHS (e.g., waste disposal, audit, TEAM WORKwork, education system, tests and investigations)	COMB	I have thought about and appreciated clinical governance
APPRECIATION OF THE IMPORTANCE OF CARE AND COMPASSION (e.g., ability to compare compassion in both systems, empathy and fairness)	INC	
INCREASED AWARENESS OF/KNOWLEDGE ABOUT THE POSITIVE IMPACT OF CLINICAL POLICIES AND GOVERNANCE (e.g., understanding the benefits of a comprehensive checklist)	COMB	I have thought about and appreciated clinical governance
INCREASED AWARENESS OF/KNOWLEDGE ABOUT ETHICS (i.e., experiencing ethical dilemmas, understanding the importance of ethics)	COMB	I have frequently experienced ethical dilemmas

CHANGED PERCEPTION OF OTHERNESS (e.g., understanding importance of being a friendly stranger in UK, feeling like a foreigner)	INC	
INTEGRITY	REM	Too vague
INDEPENDENCE (e.g., lone working)	INC	
ABILITY TO PLAN AND ORGANISE (e.g., ability to set direction, improved audit skills)	INC	
ABILITY TO MAKE DECISIONS (e.g., understanding who the decision is for, taking action on decision, making judgements)	COMB	I am confident in my ability to make appropriate independent clinical decisions
ABILITY TO MANAGE RISK (e.g., manage risk in advance, evaluation of environment, understanding the clinical importance of risk management and the wider implication of poorly managed risk)	INC	
INCREASED PATIENT SATISFACTION (e.g., staff better able to respond to UK multicultural populations, staff able to compare how systems affect patient satisfaction, have greater relationships with multicultural population, more in tune with patients and more aware of individual needs of patients).	REM	Cannot be measured in professional self-reports alone
ABILITY TO COMMUNICATE NON-VERBALLY	INC	
ABILITY TO ESTABLISH COMMUNICATION SYSTEMS (e.g., formal and informal)	INC	
INCREASED CLINICAL KNOWLEDGE IN RELATION TO OTHER PROFESSIONS (e.g., doctors understanding nurses and vice versa, multi-disciplinary awareness)	INC	
ABILITY TO GET THE MOST OUT OF PEOPLE (e.g., encouraging people to work together, recognise their own strengths and to take possession of their own work/projects, ability to assess the capability of others)	INC	
ABILITY TO MANAGE PEOPLE (e.g., able to allocate tasks and co-ordinate people, to deal with people with differing objectives, to negotiate with multiple stakeholders, to manage difficult people)	COMB	Colleagues have noticed my abilities to manage difficult people
ABILITY TO DEVELOP FRIENDSHIPS (e.g., relationship formation skills, developing new friendships)	INC	
ABILITY TO MANAGE SELF (e.g., own expectations, self-reliance, self-management, self-assurance, reflexivity)	INC	
CHANGED JUDGEMENT (e.g., non-judgemental attitude, changed self-judgement)	INC	
DIPLOMACY	REM	Too vague
ABILITY TO FIND FACTS TO SOLVE PROBLEMS	INC	
DEVELOPING REDUNDANT OR BAD SKILLS/ATTITUDES (e.g., developing non-transferable skills, bad habits, deskilling, returning with overconfidence in own ability, poorer communication skills, loss of confidence)	INC	
FINANCIAL LOSS (e.g., costs of getting involved, loss of earnings, pension or employment entitlement)	REM	Too contextual- add to variables
REDUCTION IN NHS DROP OUTS (e.g., increased staff retention, when they volunteer and come back to NHS)	REM	Cannot be measured in professional self-reports alone
ABILITY TO OBSERVE AND EXAMINE PATIENTS (e.g., increased intuitive knowledge of clinical signs and clinical judgement ability to make diagnosis without investigations)	COMB	I have relied heavily on the basic skills of my profession (e.g. physical examination)
ABILITY TO WORK IN A PROFESSIONALLY COMPETENT WAY (e.g., having wider view of profession, intellectual development, reminder of professional responsibilities, stronger work ethic)	REM	Too vague
INCREASED UNDERSTANDING OF HOW TO BE A GOOD TEACHER (e.g., allowing students to learn from mistakes, ability to suggest and acknowledge improvements in teaching,	COMB	In the last month I have demonstrated that I'm a good teacher

understanding how communication affects learning, how to target training most effectively and the importance of experiential learning)		I am confident in my ability to teach others
ACT AS A ROLE MODEL (e.g., lead by example)	INC	
INFLUENCES CAREER PATHWAY (i.e., affects specialism choice, exploration of potential career pathways, pursuing careers in primary care, family practice, public service, sub-specialism in global health, teaching)	REM	Went into variables
ABILITY TO MANAGE TIME AND PRIORITISE (e.g., ability to respond quickly in an emergency, managing immediate need vs long term need, prioritisation of limited resources)	CHANG	In my ability to manage myself and prioritise (e.g. time management, managing emotions, responding an emergency, prioritising workload)
INCREASED ABILITY TO CHANGE BEHAVIOUR IN COLLEAGUES OR PATIENTS (e.g., ability to implement behaviour change and to assess the impact of healthcare systems)	COMB	In my work I have demonstrated skills in changing patients' or colleagues' behaviours
ABILITY TO MANAGE TRAGEDIES	INC	
EXPOSURE TO ETHICAL DILEMMAS (e.g., expected to work outside of competency, to do clinical work, little regulation, little supervision, too much responsibility)	COMB	I have frequently experienced ethical dilemmas
REDUCTION IN STAFF COMPETENCE (e.g., brain drain reversal: NHS loss of competent staff to overseas placements, staff unable to cope with paperwork on return)	REM	Cannot be measured in professional self-reports alone
NO RECOGNITION OR ACCREDITATION UPON RETURN	REM	Put into variables
INCREASED INTERNATIONAL REPUTATION OF NHS (e.g., greater fulfilment of social responsibility)	REM	Cannot be measured in professional self-reports alone
INCREASED INTERNATIONAL REPUTATION (of UK)	REM	Cannot be measured in professional self-reports alone
ABILITY TO VERBALISE KNOWLEDGE (e.g., ability to verbalise core concepts and deep knowledge, ability to explain complex ideas to others)	INC	
INCREASED AWARENESS OF/KNOWLEDGE ABOUT THE IMPORTANCE OF TRUST BETWEEN COLLEAGUES WITHIN HEALTHCARE SYSTEMS	INC	
INCREASED AWARENESS OF AND KNOWLEDGE THE FUNCTIONING OF SYSTEMS (e.g., able to identify stakeholders and change agents, understanding influencing patterns of those in power, value systems and the difficulty of questioning organisations)	INC	
REFRESHMENT AND REINVIGORATION (e.g., chance to take time away to become refreshed and feel reinvigorated to work upon return)	INC	
ABILITY TO MANAGE HEALTHCARE ENVIRONMENTS (e.g., ability to manage wards and staff)	COMB	Colleagues have noticed my abilities to manage difficult people
INCREASED AWARENESS OF/KNOWLEDGE ABOUT THE IMPORTANCE OF CONSCIOUSLY MAKING AN EFFORT TO GET ON WITH COLLEAGUES (e.g., learning colleague's names)	INC	
INCREASED AWARENESS OF/KNOWLEDGE ABOUT THE COSTS OF HEALTHCARE	INC	
ABILITY TO ACCEPT AND UNDERSTAND FAILURE (e.g., to continue with something that did not have desired outcome at first, learning to accept failure, thinking differently about failure, persistence)	INC	
HUMILITY (including professional humility)	INC	
ABILITY TO THINK THROUGH PROBLEMS IN A LOGICAL WAY (e.g., analytical/lateral thinking)	INC	

ABILITY TO ENGAGE SENIOR PEOPLE	INC	
HEALTH CONSEQUENCES (e.g., animal bites, tropical diseases, STDs, injuries and transport accidents, infection, jet lag, skin disease)	REM	Went into variables
EXTREME NATIONALISM TOWARDS UK	INC	
LOSS OF INTEREST IN PROFESSION (e.g., not wanting to work in your profession when home)	INC	
NHS BECOMES A MORE ATTRACTIVE EMPLOYER (e.g., an employer that offers staff the opportunity to volunteer)	REM	Cannot be measured in professional self-reports alone
INCREASED WORKFORCE PRODUCTIVITY	REM	Cannot be measured in professional self-reports alone

**Table 2: Construct used to frame statement**

Statement	Area of Interest
awareness about how cultural differences influence health	Experience
ability to find solutions despite limited resources	Confidence
find solutions despite limited resources	Experience Confidence
conscious of culture when working with patients (e.g. the importance of collecting cultural information)	Attitudes
ability to apply clinical skills to another context	Confidence
teach clinical colleagues	Experience
adapt the way I teach to make it more valuable	Experience
knowledge about how healthcare systems outside of the UK function	Attitudes
ability to cope in work (e.g. ability to deal with stress)	Experience
cultural sensitivity (e.g. understanding that words and behaviours can have different meanings)	Experience
apply my clinical knowledge in any health system	Confidence
developed a new perspective (e.g. changed my outlook)	Experience
ability to adapt and be flexible in work	Confidence Experience
thinking about basic sciences (e.g. physiology, cell biological, biochemistry)	Experience
relied basic skills profession (e.g. physical examination)	Experience
rely more on laboratory tests than physical examination	Attitudes
confident in workplace	Confidence
confident to work in another country	Confidence
knowledge about global issues	Attitudes

knowledge of conditions and procedures rarely encountered in the UK (e.g. tropical diseases, delayed presentations, old equipment)	Attitudes
ability to work within an unfamiliar power dynamic	Confidence
adapting my social norms to meet the needs of another culture	Experience
leader in work	Experience
my abilities to be adaptable and innovative as a leader	Confidence
thought about my own skills, limitations and beliefs	Experience
patient and tolerant	Experience
proactive at work (e.g. used my initiative, got on with things, thought on feet)	Experience
someone who focuses on solutions not problems	Attitudes
changed the way I speak so that somebody can understand me	Experience
community participation is crucial for the health of the individual	Attitudes
clinical skills that I have hardly ever used before	Experience
difficult to change someone else's behaviour	Attitudes
skills in changing patients' or colleagues' behaviours	Experience
improved the healthcare service I work in	Experience
changed the way I communicate to make it more contextually appropriate	Experience
good teacher	Experience
ability to deal with the unexpected	ConfidenceExperience
ability to manage projects	Confidence Experience
deeply engaged with issues and equality and diversity	Attitudes
highly skilled in challenging conversations and effective communication, even in high pressure situations	Experience
glad that I have access to the right tools and equipment to do my job	Experience
thought about and appreciated the excellent TEAM WORKs, structures and individuals I work with in the NHS	Experience
good understanding of my own thoughts, feelings and behaviours	Attitudes
I am good at anticipating future problems	Experience
ability to make appropriate independent clinical decisions	Confidence
ability to empower others to help themselves	Attitudes
good at working as part of TEAM WORK	Experience



professional network that includes people from all over the world	Attitudes
confident in my ability to disseminate UK best clinical practice globally	Confidence
thought about and appreciated free universal health	Experience
gone about my daily work in a fairly automatic way	Experience
satisfied in job	Attitudes
satisfied in personal life	Attitudes
'can-do' attitude	Experience
provide excellent, high quality care	Experience
willingness to see someone else's point of view	Experience
thought about and appreciated clinical governance	Experience
thought about and appreciated the importance of care and compassion	Experience
experienced ethical dilemmas	Experience
appropriately manage ethical dilemmas	Confidence
experiences of feeling like an outsider	Attitudes
abilities to work independently when necessary	Confident
abilities in planning and organisation	Experience
actively manage risk, including anticipating risk and evaluating my environment	Experience
to rely on my non-verbal communication	Experience
establish communication systems (formal or informal)	Experience
understanding of the roles and responsibilities of all the professional staff I work with	Attitudes
capable of 'getting the most out of people' e.g., encouraging them and empowering them	Attitudes
managed difficult people	Experience Confidence
allocated tasks and co-ordinated colleagues	Experience Confidence
developing friendships and social relationships	Attitudes
ability to manage myself, including self-reliance and reflexivity	Confidence
quick to judge other people	Attitudes
developed bad habits in work	Experience
lost some confidence in my clinical practice	Experience
work ethic	Attitudes
act as a good role model at work	Attitudes

manage situations that I consider to be a tragedy	Experience Confidence
ability to explain complex ideas to others	Experience
trust between colleagues is crucial in healthcare systems	Attitudes
good understanding of organisations e.g., identifying change agents and understanding who has power	Attitudes
work has made me feel refreshed and reinvigorated	Experience
consciously make an effort to get on with colleagues e.g. learning everybody's name	Attitudes
aware of the financial costs of healthcare	Experience
persistent in the face of failure	Attitudes
accept failure as a part of learning	Attitudes
direct and positive communication with senior people in the organisation I have been working in	Experience
the UK is the best country in the world	Attitudes

**Table 3: Variables from systematic review and when they were presented t**

<b><u>Variable</u></b>	<b><u>Presented</u></b>
Type of project (Charity, profit making, non-for-profit)	To project manager
Professionals involved in project	To project manager
Volunteer recruitment	To project manager
Continuity of visits	To project manager
Number of British professionals in country at each time	To project manager
Logistical organisation	To project manager
Project funding	To project manager
Volunteer/British Professional funding	To project manager
Local funding	To project manager
Volunteer activities	To project manager
Organisational support	To project manager
Preparation	To project manager
Learning objectives	To project manager
Evaluation and reflection	To project manager
Risk Assessments	To project manager

Local needs assessment	To project manager
Who is involved in development of aims, focus, structure of project	To project manager
Relationships with receiving organisation	To project manager
Importance of sustainability, capacity building and service delivery	To project manager
Project name, company and location	Pre-placement questionnaire
Employment immediately before trip	Pre-placement questionnaire
Use of annual leave	Pre-placement questionnaire
Motivation	Pre-placement questionnaire
Support	Pre-placement questionnaire
Comfort working outside of competence or in a high situation	Pre-placement questionnaire
Expectations of impact	Pre-placement questionnaire
Professional knowledge	Pre-placement questionnaire
Length of stay	Post-placement questionnaire
Project engagement	Post-placement questionnaire
Learning host language	Post-placement questionnaire
Utilisation of skills	Post-placement questionnaire
Number of Interactions with patients	Post-placement questionnaire
Conditions experienced	Post-placement questionnaire
Understanding of local context	Post-placement questionnaire
Similarities to UK	Post-placement questionnaire
Transferability of skills to UK	Post-placement questionnaire
Opportunities	Post-placement questionnaire
Local staff	Post-placement questionnaire

Negative consequences	Post-placement questionnaire
Cost of placement	Post-placement questionnaire
Reflection	Post-placement questionnaire
Contact with loved ones	Post-placement questionnaire
Support	Post-placement questionnaire
Number of projects in facility	Post-placement questionnaire
General experience	Post-placement questionnaire
Ability to cope with NHS paperwork upon return	Post-placement questionnaire
Less interest in profession upon return	Post-placement questionnaire
Desire to leave NHS/UK upon return	Post-placement questionnaire
Recognition/Accreditation upon return	Post-placement questionnaire
Employment status upon return	Post-placement questionnaire
Returner schemes upon return	Post-placement questionnaire
Influence on career path upon return	Post-placement questionnaire

## **Table 4 : results of cognitive interviews**

<b>Statement</b>	<b>Comment</b>	<b>Action taken (or reason not )</b>
Frequently/constantly	interchangable	Decision was made on purpose
I exchanged ideas with colleagues from a different culture	Red herring- exchanged	Choose Exchanged, as communicated could mean asking what time the bus arrives, want this to represent meaningful conversation
I feel I've developed a new perspective	Doesn't really make sense pre-placement, need to use more examples to contextualise	Participant used, having some kind of revelation, include this as an example
I anticipated future problems	... and took necessary action	Decided to take participants advice here, and add took necessary action as anticipating them alone is not enough
Skills, limitations and beliefs	too much for one sentence	remove beliefs
I provided excellent high quality care	Excellent and high quality are the same remove excellent	Remove excellent

I am able to find solutions despite limited resources	What if don't have limited resources i.e. in UK	Leave as is, participants won't agree if have adequate resources
I have tried to understand somebody else's POV	I have understood somebody else's POV	Remove tried
I have demonstrated patience and tolerance	Need time marker	Change to -I have frequently demonstrated patience and tolerance
I relied heavily on the basic skills of my profession	Need more examples	Include low tech and intuitive
I lost some confidence in my clinical practice	Change to: Sometimes I feel I have forgotten the things I have learnt	Leave as is, participants will know what clinical practice is
I thought about and appreciated	Maybe use just appreciated	change
I think I have developed bad work habits	Remove 'I think' and include some	I have developed some bad work habits
I actively managed risk, including anticipating risk and evaluating environment	Too much- change to I anticipated risk and actively managed it	I anticipated risk and actively managed it (e.g. evaluating environment)
I frequently managed projects		Include e.g. (including one continuous project, or components of a project)
I managed one or more situations that I consider to be a tragedy	Chance to tragic situations	Leave as is
I established communication systems (formal and informal)	What about if they are already established	Changed to established/used
I changed the way I speak so that somebody can understand me	Change to I have adapted my communication to suit to context	Leave as is, too much jargon in suggestion
I frequently had to rely on my non-verbal communication	I frequently relied on my non-verbal communication	Change
I demonstrated that I am highly skilled in challenging conversations and effective communication, even in high pressure situations	I demonstrated that I am skilled in challenging conversations, even in high pressure situations	Removed some to make it more understandable
I dealt with difficult people	Include frequently	I frequently dealt with difficult people
I demonstrated that I am able to manage difficult people	I demonstrated that I am able to manage difficult people effectively	Add in effectively
I taught clinical colleagues	(of any profession at any career stage)	Add in brackets
Perceptions of yourself	Change to About you – and change the other to demographics	Change
When I work clinically I am frequently thinking about basic scientific principles (e.g. physiology, cell biology, biochemistry)	Change e.g's	Physiology, chemistry
I have a good knowledge of how healthcare systems outside of the UK function	I have an awareness of how other healthcare systems (outside of the UK) function	Change- as most people will only know 1 or 2 countries not all

I have a professional network that includes people from around the world	Change to other countries	May not be around the world, just in 1 or 2 countries
I tend to develop a good understanding of how organisations can work	Change to I have	Tend to confuses things
I am someone who focuses on solutions not problems	Comments that no-one would answer no to this	Then it would disappear in the psychometrics and statistics so leave
I have an excellent work ethic	Comments to change to conscientious	Will not change means something different
I keep trying when things are difficult	Comments to change to persevere	Yes keep simple
I have an excellent understanding of the roles and responsibilities of all the professional staff I work with	Change to clear	I have a clear understanding of the roles and responsibilities of all the professional staff I work with
I am quick to judge other people	Add admit and sometimes	I admit I am sometimes quick to judge other people
I believe I have the ability to empower patients to help themselves	I am able to empower patients to help themselves, also patients isn't the word midwives use	Remove believe as adds another dimension, keep patients as it is obvious who we mean to that 1 group
I believe I have the ability to empower colleagues to help themselves	I am able empower colleagues to help themselves	Remove believe as adds another dimension
In my work I have demonstrated skills in changing patients behaviour	In encouraging and supporting patients to change behaviour	Change to -In my work I have demonstrated skills in encouraging and supporting patients to change behaviour
Its crucial to consciously make an effort to get on with colleagues	Add 'I feel'	No need to add 'I feel' adds another dimension
I demonstrated that I am capable of getting the most out of people	Change to 'best' move to 'in the last month'	Change to - I demonstrated that I am capable of getting the best out of people- move to last month, add enabling into e.g's
Community participation is crucial...	Add I feel	No need to add 'I feel' adds another dimension
Job satisfaction	Use validated single item- Taking everything into consideration, I am satisfied with my job	Reliability and Validity of a Single-Item Measure of Job Satisfaction Christyn L. Dolbier, PhD; Judith A. Webster, MSN; Katherine T. McCalister, EdD; Mark W. Mallon, MS; Mary A. Steinhardt, EdD, LPC  an adaptation of the one in the literature that correlates with other larger measures, to suit the current format of an agreement likert scale?
Life satisfaction	Instead use 5 item validated SWLS scale	Ed Diener, Robert A. Emmons, Randy J. Larsen and Sharon Griffin as noted in the 1985 article in the <i>Journal of Personality Assessment</i>

I sometimes I felt like an outsider	I sometimes felt like an outsider in my environment	Add in my environment to make it more contextualised, move to culture area rather than life satisfaction as it seems less intrusive
In my ability to manage situations that I consider to be awful, tragic or difficult	Remove awful, too many words	In my ability to manage situations that I consider to be tragic or difficult
In my ability to manage myself	Expand into 2: In my ability to manage myself in a clinical environment In my ability to manage myself in life generally (e.g. time management, managing emotions)	Split into 2
In my ability to adapt and be flexible in work	Would be different for clinical and everything else – pp more confident In ability to be flexible clinically	Separated
In my ability to find solutions despite limited resources	See above comment about 'despite'	Maybe as this is confidence have, ability to find solutions in an environment with limited resources, the above one could literally say, in the last month I have had to find solutions in an environment with limited resources, then we expect low scores pre, and high during and possibly post.
That I can apply my clinical knowledge in any health systems	Change any to another	That I can apply my clinical knowledge in another health system
In my ability to work within an unfamiliar power dynamic	Don't quite understand the question, suggested are you affected by power dynamics	Are you affected would change the question. move to in the last month, have been affected by power dynamics and one about dealing with it appropriately
In my workplace	Remove place	Change to in my work
In my ability to disseminate best practice globally	Globally too big, maybe across a wider context (e.g. to other countries)	Change to disseminate UK best practice to other countries
Career Stage	Louise and John had- experienced, mid etc.	Change to year of registration free text
Nationality	British, European, non-eu (LMIC) non-EU (high income)	Change to free text
Project Name	Make non-mandatory and ask to describe in one sentence project- e.g. RCM project in Uganda based in Mulago Hospital	in a sentence describe the title of your project and where it takes place e.g., RCM mentoring project in Mulago Hospital, Uganda. Or Milton Keynes Hospital Trust training project in University of City, Country
I would feel comfortable working in a high risk situations	Comment- Is the risk to the patient or the volunteer	High risk situation is well defined
I agreed with and internationalised lots of the knowledge, skills, behaviours and attitudes of the other staff in the host facility	Too confusing	Simplify sentence

At least once I questioned by view of reality	Confusing- changed answer after I explained	Change to at least once I have been aware of my opinions or perspectives changing in a profound way'
Which of the following were correct about local staff:  I engaged with them frequently  There was frequently a more knowledgeable person than me around  We had many shared values	Reword- seems like everyone would agree  Too Context Specific  Said they did but didn't act on it	This is about Vygotsky's MKO, could we separate into 2- more clinically knowledgeable, more culturally knowledgeable  change to, it was obvious we had many shared values?
Health consequences (animal bites, injuries, illness)	Remove animal bites, gets confused with mosquito bites which most people would get	Remove animal bites
I feel unable to cope with NHS paperwork	Not to do with placement	Doesn't matter? If it's not to do with placement, then we will see that it is the same before and after?
I would like to leave the NHS to work overseas	Not all employed by NHS	Change to NHS/UK
Project Managers:		
Which of the following describe the relationship between your organisation and the receiving organisation: We depend on each other	Weird statement  Add in well maintained relationships with local staff and leadership Links with local experts	Remove
Does your project have links with local experts and well maintained relationships with local staff and leadership	Move to earlier Q	Move to earlier Q
What type of preparation do volunteers receive?	Add all  Change options to: Contact with previous volunteers Formal training and preparation events in the UK Informal training and preparation events in the UK Formal training and preparation events in host country Informal training and preparation events in country Handbook or written preparation Other	What type of preparation do all volunteers receive? – otherwise one or two might get it  Change options



What is the main focus of your project: Service delivery Capacity Building Development Sustainability Training Other	Most would tick all	Change to separate question:  How important is sustainability/service delivery/capacity building to your project – Very Important • Important • Moderately Important • Slightly Important • Not Important  Remove training development and other
Who was involved/consulting during development of aims, focus, structure, project tasks within your project	Remove 'within your project'  In example grey area (at some stage)  Change health policy makers and management in LMIC to Management in LMIC Local government and policy makers	Change
Do you volunteers take recurring trips?	Change options	Always Very Often Sometimes Rarely Never
In the last year have any volunteers dropped out of your project?	Remove as too context specific could be illness etc	Remove question
Is volunteer learning incorporated into project or assessed?	Comment- Add informal reporting and learning	Do you formally assess volunteer learning or professional or personal development? And then time points
How many volunteers are placed at one time within this project	Add on average	Add on average
How would you describe your organisation?	Change list- does not encompass all, make tick box: <ul style="list-style-type: none"> <li>• New organisation</li> <li>• Established organisation</li> <li>• Hospital or university link (health partnership)</li> <li>• Commercial/profit making</li> <li>• Not for profit/charity</li> </ul>	
Which of the following describe the relationship between your organisation and the receiving organisation? We depend on one another We are especially good at collaboration	Remove depend statement, weird and out of context Change collaboration one to we work well in collaboration	Change

To the best of your knowledge, what income level is the host country?		Remove now as we will code countries
Do restructure of questions so similar are together		Do restructure
Add to post-placement		
Which country was your placement in- free text		Add
What support do your volunteers receive?  A local or western expert to provide feedback	Change to Have access to – move to volunteer post  Change to: an opportunity to get frequent feedback from a local or western senior colleague	Change to have access to and move to post placement- what support did you have access to?  Change
Are you the only project working in the healthcare facility	Was yours the only project working in the healthcare facility	Change and more to post placement
Length of stay		Move length of stay to Post placement
Recurring visits		Move to post placement

**Table 5: How participants were recruited through collaborative organisations**

Organisation	Method of distribution of questionnaire	Target Group	Number of people that had opportunity to engage
Ambulance Station 1	Attended with paper versions	All groups	15
Conference 1	Handed out paper versions at conference, presented online link at conference, online link sent by contact within organisation	All groups	Up to 400 on mailing list (who may have also attended conference)
Field Hospital 1	Online link sent by contact within organisation	Returned Volunteers	180
Field Hospital 2	Online Link sent by contact within organisation	Returned Volunteers	50
Field Hospital 3	Attended event with paper version	All groups	6

Field Hospitals 4	Online Link sent by contact within organisation	All groups	80
General Practice 1	Attended with paper versions	All groups	4
Health Partnership 1	Online Link sent by contact within organisation	Current Volunteers	2
Health Partnership 2	Online Link sent by contact within organisation	All groups	6
Health Partnership 3	Online Link sent by contact within organisation, also asked to send to one colleague with no international experience	Returned and no international experience	50
Health Partnership 4	Online Link sent by contact within organisation	Pre Placement	Awaiting Response
Health Partnership 5	Online Link sent by contact within organisation	All groups	6
Health Partnership 6	Online Link sent by contact within organisation	All groups	15
Hospital 1	Online Link sent by contact within organisation	All groups	30
Hospital 2	Attended induction events with paper versions	All groups	85
Individual Influencer 1	Posted link to personal twitter and emailed 7 colleagues	All groups	182 twitter followers 7 colleagues
Online Community of Practice 1	Posted link to Community of Practice Online group	All groups	297 members
Previous Research Participants 1	Link sent by researcher directly to participants	All groups	290
Previous Research Participants 2	Link sent directly to email addresses	All groups	59
Professional Network 1	Link distributed in E bulletin	All groups	374 opened link (sent to 1800)

Professional Network 2	Online Link sent by contact within organisation	All groups	Awaiting response
Recruitment Event 1	Attended event with paper versions	All groups	15
Recruitment Event 2	Attended event with paper versions	All groups	18
Royal College 1	Online Link sent by contact within organisation	Returned Volunteers	70
Royal College 2	Online link sent by one member to a select few relevant individuals Conference attended with paper versions	Returned Volunteers	11
Royal College 3	Online Link sent by contact within organisation	Returned Volunteers	19
Royal College 4	Link sent directly to group members email addresses	All groups	45
Royal College 5	Online Link sent by contact within organisation	All groups	437
Royal College 6	Link posted on global health facebook group	All groups	79 in group
The Royal College 7	Link posted on blog and to twitter	All groups	1000 blog followers, 400 twitter followers
Trust 1	Online Link sent by contact within organisation	Returned Volunteers	43
University Alumni 1	Link posted to Facebook, Twitter and LinkedIn groups	All groups	1000+
University Department 1	Online Link sent by contact within organisation (stated was only for qualified health professionals)	All groups	270

University Department 2	Online Link sent by contact within organisation	No international experience	21
University Department 3	Online Link sent by contact within organisation	No international experience	37
University Department 4	Paper versions handed out at end of lecture	All groups	17
University Department 5	Online Link sent by contact within organisation	All groups	55
University Department 6	Online Link posted on students forum	All groups	500
Volunteer Project 1	Online Link sent by contact within organisation	Current Volunteers	9
Volunteer Project 2	Online Link sent by contact within organisation	All groups	116
Volunteer Project 3	Online Link sent by contact within organisation	Pre placement	5
Volunteer Project 4	Online Link sent by contact within organisation	All groups	4
Volunteer Project 5	Online Link sent by contact within organisation	Returned Volunteers	35

**Table 6: Staff Group x International Experience**

Staff group	Past international experience	Currently internationally working	No experience - interested	No experience- not interested	Planned future international experience	
Medical and Dental	77	20	10	7	32	146
Nursing and Midwifery	51	2	39	31	13	136
Allied Health Professionals	23	4	12	17	9	65
Healthcare Scientists	6	0	1	5	1	13
Ambulance	2	0	1	10	1	14

Support to clinical staff (HCAs)	0	0	8	22	0	30
NHS infrastructure support	1	0	3	1	0	5
Other scientific, therapeutic & technical	8	0	4	9	5	26
Other	1	0	0	2	0	3

**Table 7 – Correlation coefficients between the latent variables. their standard errors and *p*-values. according to the proposed multidimensional item response theory model.**

	Estimate	S.E.	<i>p</i> -value (two tailed)
LIFE SATISFACTION	WITH		
CONFIDENCE	0.295	0.045	0.000
CULTURAL	WITH		
CONFIDENCE	0.41	0.044	0.000
LIFE SATISFACTION	0.223	0.051	0.000
ADAPTING COMMUNICATION	WITH		
CONFIDENCE	0.12	0.044	0.000
LIFE SATISFACTION	0.223	0.049	0.000
CULTURAL	0.497	0.043	0.000
TEACHING	WITH		
CONFIDENCE	0.662	0.031	0.000
LIFE SATISFACTION	0.208	0.049	0.000
CULTURAL	0.29	0.051	0.000
ADAPTING COMMUNICATION	0.319	0.048	0.000
DIFFICULT COMMUNICATION	WITH		
CONFIDENCE	0.518	0.035	0.000
LIFE SATISFACTION	0.196	0.046	0.000

	Estimate	S.E.	<i>p</i> -value (two tailed)
CULTURAL	0.412	0.045	0.000
ADAPTING COMMUNICATION TEACHING	0.58	0.037	0.000
	0.44	0.04	0.000
BEHAVIOUR CHANGE WITH			
CONFIDENCE	0.638	0.027	0.000
LIFE SATISFACTION	0.289	0.045	0.000
CULTURAL	0.397	0.051	0.000
ADAPTING COMMUNICATION	0.427	0.041	0.000
TEACHING	0.554	0.035	0.000
DIFFICULT COMMUNICATION	0.558	0.035	0.000
MANAGEMENT WITH			
CONFIDENCE	0.563	0.035	0.000
LIFE SATISFACTION	0.113	0.051	0.025
CULTURAL	0.367	0.051	0.000
ADAPTING COMMUNICATION	0.436	0.043	0.000
TEACHING	0.545	0.036	0.000
DIFFICULT COMMUNICATION	0.54	0.038	0.000
BEHAVIOUR CHANGE	0.364	0.044	0.000
TEAM WORK WITH			
CONFIDENCE	0.757	0.028	0.000
LIFE SATISFACTION	0.362	0.049	0.000
CULTURAL	0.497	0.047	0.000
ADAPTING COMMUNICATION	0.522	0.043	0.000
TEACHING	0.577	0.037	0.000
DIFFICULT COMMUNICATION	0.653	0.036	0.000
BEHAVIOUR CHANGE	0.658	0.034	0.000
MANAGEMENT	0.696	0.032	0.000
FLEXIBILITY WITH			

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	Estimate	S.E.	<i>p</i> -value (two tailed)
CONFIDENCE	0.571	0.033	0.000
LIFE SATISFACTION	0.198	0.044	0.000
CULTURAL	0.492	0.039	0.000
ADAPTING COMMUNICATION	0.475	0.04	0.000
TEACHING	0.423	0.041	0.000
DIFFICULT COMMUNICATION	0.497	0.038	0.000
BEHAVIOUR CHANGE	0.514	0.034	0.000
MANAGEMENT	0.527	0.036	0.000
TEAM WORK	0.705	0.03	0.000

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