



Louisiana Volunteers in Mission
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Healthcare Team Member Evaluation

The following questions are suggested to guide you in evaluating your experience on the mission trip. Your response will be used to plan future experiences, to learn what you considered most important, and to find out where we need to work harder. Please add anything you feel was not adequately covered in these questions. Return this to the team leader. If you prefer, return this to your jurisdictional or conference UMVIM Coordinator.

Conference _____

Departure date ____/____/____
MM DD YY

District _____

Local church _____

Return date ____/____/____
MM DD YY

Country _____

Location _____

Project name _____

Team leader _____

Work phone _____

First Name Middle Initial Last Name

Home phone _____

Address _____

Fax _____

Email _____

What type of orientation/training did you receive in the US? By whom?

What on-site orientation did you receive? In what way would you improve it?

Did you achieve your goals? Why or why not? Did your goals change during your stay? Explain.

Did you find your living arrangements satisfactory?

Was there good coordination with the local personnel? If not, where did it break down?

Did you identify specific equipment needs for the site?

Was there adequate workspace? A potable water supply? A power source?

Were there problems with availability of or dispensing of drugs? If so, explain.

What ongoing problems in the host community with water supply, sanitation, and nutrition did you observe?

Is there a need for programs in immunization, maternity care, well-child supervision?

What was the team's relationship to local health personnel?

What arrangements were made for patient follow-up?

Is there a need for dental care, vision care and glasses, specialty teams?

Signature (optional)