TOOL 1

Leadership Readiness Assessment

Phase One — complete before recruiting any team members

FREQUENCY Before formation begins

PRIMARY USERS Pastoral Leadership, Missions Leadership

ABOUT THIS TOOL This assessment is completed by pastoral and missions leadership — not the Care Team — before any team members are recruited. It evaluates whether the church has the foundational structures in place to support a Care Team: clarity of purpose, pastoral ownership, whole-person commitment, confidentiality framework, sustainability planning, and pastoral readiness to support the team through what the missionary may bring to it. A team launched before the church is genuinely ready does a specific kind of damage: it creates an expectation in the missionary's mind, and then quietly fails to meet it.

WHEN TO USE Before formation — complete this assessment with pastoral and missions leadership before recruiting any team members. Score each section honestly. Use the results to identify what needs to be established before proceeding.

RATING SCALE

1	2	3	4	5
Not present or not considered	Early awareness, no concrete plan	Partial — discussed, not fully resolved	Clear — established and communicated	Strong and sustainable — embedded

ASSESSMENT

ASSESSMENT AREA	KEY QUESTIONS	RATING (1–5)
1. Clarity of Purpose Leadership must articulate what this team will do, what it will not do, and what whole-person care includes.	• Can we state in one paragraph what this team does? • Do we know what this team is not responsible for? • Have we defined whole-person care beyond spiritual and financial?	1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯
2. Pastoral Oversight There must be a clear pastoral owner who stands behind the team, supports its referrals, and provides accountability.	• Is a specific pastor or elder assigned to oversee this team? • Is the escalation pathway clearly defined and communicated? • Does the Care Coordinator know who to call and when?	1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯
3. Whole-Person Commitment Does leadership genuinely affirm that emotional strain, marriage stress, and physical fatigue are legitimate areas of care?	• Are we prepared for the team to hear about marriage strain? • Do we affirm emotional fatigue as a legitimate care need? • Are we committed to preventative care, not just crisis response?	1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯
4. Confidentiality Framework Confidentiality is the environment that makes honesty possible. The team must have clear guidelines before its first meeting.	• Is there clarity about what stays in the team? • Does the missionary understand what will be shared publicly? • Is the one exception — risk of harm to self or others — clearly defined?	1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯
5. Sustainability Planning Volunteer fatigue is predictable. The team that launches without a sustainability plan will eventually collapse.	• Are team terms defined before launch? • Is there a plan for role rotation after the first term? • Have we identified a potential backup coordinator?	1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯

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ASSESSMENT AREA	KEY QUESTIONS	RATING (1–5)
6. Pastoral Leadership Readiness A missionary who trusts a Care Team will bring it things that pastoral leadership must be prepared to help the team respond to well.	• Does pastoral leadership understand what a well-functioning Care Team will bring them? • Is there a clear pathway for the coordinator to bring the team's needs for help without waiting for a crisis? • Has pastoral leadership committed to regular check-ins with the coordinator?	1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯

TOTAL SCORE: _____ / 30

SCORING AND DECISION

Score	Decision	Guidance
25–30	**Proceed**	All areas are strong. Launch formation with confidence.
19–24	**Proceed with modification**	Identify areas scoring below 4 and address them concurrently with early formation steps.
12–18	**Delay — address gaps**	Significant foundations are missing. Work the capacity-building pathway in Chapter II-1, then re-score.
Below 12	**Pause and rebuild**	The foundation is not yet ready. Bring pastoral and missions leadership together for a focused planning conversation.

Our decision: ◯ Proceed ◯ Proceed with modification ◯ Delay — address gaps ◯ Pause and rebuild

Areas requiring attention before launch:

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Action steps and timeline:

Completed by	Role / Title	Date

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TOOL 2

Care Team Annual Budget Worksheet

Phase One — complete during leadership readiness — before any invitation is extended · Review annually at the alignment review

ANNUAL BUDGET BY CATEGORY

Category	Annual $	Notes / Assumptions
Care packages and shipping		
Communication (team meeting account, subscriptions, credits)		
Travel reserve		
Professional care subsidy posture		
Training and materials		
Hospitality and re-entry welcome		
Team sustainability (annual gathering)		
Startup equipment, one time (team laptop, conference microphone)		
Other		
TOTAL		

THE WRITTEN POSTURE ON ESCALATED CARE

In one or two sentences, record the church's answer: if the escalation pathway reaches professional referral (Tool 15, Level 4), what is this church prepared to do financially, and who decides?

APPROVAL

Approved by (missions leadership)	Approved by (pastoral oversight)	Date / Budget year

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TOOL 3

Leadership Commitments Declaration

Phase One — close of readiness; re-signed at each annual alignment review

ABOUT THIS TOOL One signed page that converts leadership's readiness into named commitments: which pastor, which counselor, which number, which posture, decided by whom. The covenant is the team's promise to the missionary; this page is the church's promise to the team.

WHEN TO USE At the close of leadership readiness (Chapter II-1), before any invitation is extended. Re-signed at each annual alignment review and at any change of the named pastoral owner. Filed with the team's formation records, beside the covenant.

OUR PURPOSE

In our own words, this Care Team exists to:

It is not responsible for:

☐ Whole-person care in this church includes all eight Care Mapping domains — affirmed by leadership.

Affirmed by leadership on (date)

PASTORAL OVERSIGHT, BY NAME

Name, role:

Beginning (month):

The person named above will maintain a quarterly rhythm with the Care Coordinator beginning in the month named, support the team's functioning and referrals, receive any risk-of-harm concern immediately, and name a successor to this page before stepping away from the role.

REFERRAL INFRASTRUCTURE

Our documented referral contacts for professional missionary care (at least one organization or counselor, with contact information on file at the church office):

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FINANCIAL COMMITMENTS

The annual Care Team budget line of $ _____ is approved for budget year _____ (Tool 2).

Our written posture on funding escalated professional care is:

_____

...decided by _____

SIGNATURES

Pastoral oversight	Missions leadership	Date

Reviewed and re-signed:

Review 1 — date / initials	Review 2 — date / initials	Review 3 — date / initials	Review 4 — date / initials

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TOOL 4

Coordinator Selection Worksheet

Phase One — complete during leadership readiness — one worksheet per candidate · Keep with the team's formation records

Candidate

Prepared by / Date

THE FIVE QUESTIONS — EVIDENCE, NOT IMPRESSIONS

Question	Rating 1–5	Evidence
1. Existing trust with the missionary family	1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯	
2. Realistic capacity: 2–4 hours monthly for the full term	1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯	
3. Relational authority to ask hard questions and carry concerns forward unprompted	1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯	
4. Receives difficult information without minimizing or overreacting	1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯	
5. Understands the role: holds the team's faithfulness, not the primary relationship	1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯	

☐ This candidate has been presented to the missionary, and the missionary's choice is recorded below.

☐ The candidate has visited (or will visit) an established Care Team before committing (Chapter II-1).

☐ The candidate has received this book, and at least one week to respond.

Missionary's choice / notes:

DECISION

Decision: ◯ Invite ◯ Wait ◯ Decline

Decision notes

Term proposed

Successor conversation date

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TOOL 5

Safeguarding Readiness Checklist

Phase Two — complete before the covenant is signed · File with the church's child-protection records and the team's formation records

POLICY ALIGNMENT

- ☐ The church has a current child-protection policy, and the MK Lead role has been placed under it.
- ☐ The person responsible for the church's child-protection compliance knows the Care Team exists and knows who the MK Lead is.

SCREENING AND TRAINING

- ☐ The MK Lead has completed the church's standard background check and reference process.
- ☐ The MK Lead has completed the church's standard child-protection training.
- ☐ The MK Lead has reviewed the role's boundaries in the Role Clarification Guide (Tool 9), including the safeguarding bullets, and affirmed them in writing (initials on their role sheet).
- ☐ Renewal dates for screening and training are calendared on the church's normal cycle.

WORKING NORMS

- ☐ Parents have been involved and have affirmed the contact plan for each MK (channels, rhythm, and any age-specific norms).
- ☐ Communication channels are observable, and a parent is copied on written contact with younger children.
- ☐ A simple factual contact log exists, with its location and access agreed (adapted for restricted-access contexts as needed).
- ☐ The two concern pathways are understood and written down: wellbeing concerns → Care Coordinator (Tool 15); safety concerns → the church's child-protection policy and applicable law, immediately.

MK Lead (signature)	Child-protection lead (signature)	Date completed

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SELECTION · INSTRUMENT 1

Care Team Role Description

Handed to the prospective member first — read it, keep it a week, and pray before you answer

WHAT THIS IS You have been asked to consider serving on a Crossing Cultures Care Team. This page tells you, in plain language, what the team is, what members actually do, what the commitment looks like in hours and years, and what the team needs from every member. Nothing here asks for an answer today.

WHAT COMES NEXT The Personal Reflection Guide (Tool 7), for your eyes only; one unhurried conversation with the coordinator (Tool 8); a visit to a team meeting; then a week to pray and talk it over at home.

THE INVITATION

Missionary family | Invited by | Date

The role you are being asked to consider:

◯ Care Coordinator ◯ Relational Liaison ◯ Logistics Support Lead ◯ Spiritual Encouragement Lead ◯ MK Lead
◯ Secondary / At-Large Member

Term begins | Term ends (eighteen months) | Expected hours each month

WHAT A CARE TEAM IS

A Crossing Cultures Care Team is a small group of people who have made a structured, covenanted commitment to walk alongside a missionary family across the long arc of their calling — not just at commissioning, not just in crisis, but steadily, across years.

The missionary directs the care. The team serves in six named roles, meets monthly, signs a covenant together, keeps what it hears in confidence, and has a named pastor standing behind it.

WHAT MEMBERS ACTUALLY DO

- Attend the team's monthly meeting, and bring your whole attention to it.
- Keep the contact rhythm the missionary sets for your role — often twice a month for the Relational Liaison.
- Pray for the missionary and family by name, with detail, over time.
- Take part in Care Mapping conversations that look at the whole person: spiritual, emotional, marriage and family, cultural, ministry and organizational, physical, practical and financial, and the children.
- Hold what is shared inside the team. Nothing leaves the team without the missionary's consent — with one exception: a risk of harm to self or others goes to pastoral leadership without delay.
- Bring concerns to the team rather than carrying them alone, and help the missionary find the right person when something is beyond what the team can carry.

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THE SIX ROLES

Role	What it carries
Care Coordinator	The structural heart of the team. Facilitates monthly meetings, keeps records, maintains the escalation pathway, and connects with pastoral oversight.
Relational Liaison	The team's primary relational connection to the missionary. Maintains consistent, personal contact — not just ministry updates, but genuine friendship.
Logistics Support Lead	Anticipates and addresses the practical dimensions of the missionary's life — housing, packages, MK care, re-entry planning, financial needs.
Spiritual Encouragement Lead	Holds the team's devotional and prayer life. Leads the prayer dimension of each meeting and cultivates a culture of Scripture-grounded encouragement.
MK Lead	The team's dedicated advocate for the missionary's children. Maintains consistent, age-appropriate connection with each MK and ensures their wellbeing is reviewed as a distinct domain — not assumed to be covered under general family care.
Secondary / At-Large Member	Provides flexible support across all roles. Serves as backup and transition support when other members need to step back.

Your role sheet (Tool 9) lists the specific responsibilities of the role you are being asked to consider.

WHAT THE COMMITMENT LOOKS LIKE

- **A defined term.** Eighteen months, with the expectation of renewing at least once — about three years in all — through furloughs, transitions, and hard seasons.
- **Honest hours.** Most roles run about one to two hours a month; the Care Coordinator role runs two to four. Your inviter will name the figure for your role above.
- **Training.** Five training sessions with the rest of the team; the fifth is the team's first real monthly meeting. The covenant is read aloud and signed together in the third session.
- **A way out before the signing.** Until the covenant is signed, either you or the team can still step back, with no awkwardness at all.

WHAT EVERY MEMBER MUST BRING

These five are required of every member at the time of joining, whatever their other strengths.

- **Confidentiality.** A track record of holding sensitive information — something people who know you could speak to.
- **Long-term commitment.** Able and willing to commit to the full eighteen-month term, expecting to renew, and to stay through transitions. Drop-in availability is not enough.
- **Basic crisis awareness.** You understand you are not a counselor, that some situations are beyond what a friend can carry, and that bringing in help is a strength.
- **Genuine, settled faith.** A mature believer, active in the local church, whose stability does not depend on being needed.
- **Working within the team.** You act inside the team's shared discernment and rhythms, not as a solo agent.

If you are married and both of you are being asked, each of you is considered separately.

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WHAT THE TEAM HOPES TO GROW IN YOU

No one brings all of these fully formed. The team needs honest knowledge of where each member is, so that together it covers what no one person can.

Quality	What it looks like
A biblical foundation for care	Care held within a theology of sending, suffering, and perseverance — gospel ministry, not organized kindness.
Cross-cultural understanding	A working grasp of culture stress, identity in transition, missionary kids, and re-entry, so the worker is not always explaining their own world.
Personal spiritual maturity	A settled walk that can give without needing the worker's affirmation.
Listening and presence	Unhurried attention; noticing what is unsaid; following up later on what was shared.
Confidentiality and trust	Holding sensitive things — and knowing the single circumstance in which a confidence cannot be kept.
Handling conflict	Engaging hard conversations without avoidance and without harshness.
Reliable communication	Contact that is regular and timed to the worker's rhythms, so they never wonder whether they have been forgotten.
Prayer for the worker	Specific, sustained intercession that follows up on its own requests.
Practical support	Tangible help — logistics, hospitality, re-entry, family care — offered reliably.
Staying power	A counted cost and a defined term, held through transitions and hard seasons.
Readiness for hard seasons	Recognizing burnout, trauma, and family strain, and seeing referral as part of good care.
Working as a team	Care discerned together: meetings attended, rhythms honored, no freelancing.

FOR YOUR OWN USE

What in this role looks life-giving to you? What looks costly?

Questions I want to ask before I answer:

My name | Date received | Answer by (one week)

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TOOL 6

Care Team Selection Profile

Phase Two — before and after each selection interview

ABOUT THIS TOOL A diagnostic profile of twelve competencies read against six levels of formation — Curious, Open, Willing, Committed, Devoted, Anchored. Used three ways: candidate self-assessment before the interview; recruiter or pastor diagnostic from observation; and team composition, plotting candidates side by side. Its design draws on implementation fidelity scales, applied to individuals.

HOW TO READ For each competency, read the levels from Curious upward and check every one that honestly describes the candidate. Their current level is the highest one checked before the first gap. The minimum standards (Chapter II-5) are non-negotiable regardless of strength elsewhere. Assess spouses individually. After the interview, interviewer and candidate complete the profile independently and compare — the gaps are the follow-up agenda.

Candidate	Completed by (self / interviewer)	Date

CLUSTER ONE — FOUNDATIONS

LEVEL	Biblical Foundation for Care	Cross-Cultural Literacy	Personal Spiritual Maturity
ANCHORED Settled, immovable; a stabilizing presence for others.	☐ Has internalized a robust theology of suffering, sending, and perseverance; shapes care biblically.	☐ Deep, lived grasp of culture stress, identity in transition, TCK dynamics, and re-entry.	☐ Spiritually settled, consistent in disciplines, a source of stability for others under pressure.
DEVOTED Integrated into how they live and serve.	☐ Regularly draws on Scripture to encourage workers; sees care as gospel ministry, not just kindness.	☐ Actively studies cross-cultural realities; spots culture stress before the worker names it.	☐ Walks closely with the Lord; spiritual life is evident and woven into daily rhythms.
COMMITTED Reliably shows up and follows through.	☐ Has thought biblically about the sending church's role in worker care and can articulate it.	☐ Has read and reflected on cross-cultural ministry literature and worker experience.	☐ Active in personal devotion, prayer, and church involvement; growing steadily.
WILLING Says yes and acts when invited.	☐ Familiar with key passages on sending, suffering, and endurance; growing in application.	☐ Aware that workers face context-unique challenges; willing to learn.	☐ Consistent in core spiritual practices; faith is genuine and visible.
OPEN Receptive; some practice but inconsistent.	☐ Some exposure to biblical teaching on missions and care through sermons or studies.	☐ Some secondhand exposure to cross-cultural ministry; thinking is forming.	☐ Genuine faith but inconsistent in disciplines or growth patterns.
CURIOUS Interested and open to learning.	☐ Interested in learning the biblical basis for cross-cultural care.	☐ Limited exposure but interested in beginning to learn.	☐ New or growing believer; needs further maturation before serving in care.

Current level (highest checked before the first gap):

Biblical Foundation for Care	Cross-Cultural Literacy	Personal Spiritual Maturity

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CLUSTER TWO — RELATIONAL CAPACITY

LEVEL	Listening & Presence	Confidentiality & Trust	Conflict Navigation
ANCHORED Settled, immovable; a stabilizing presence for others.	☐ Workers seek this person out; their unhurried, attentive presence feels deeply safe.	☐ Workers trust this person with sensitive struggles; track record over years is unbroken.	☐ Skilled in stepping into hard relational dynamics with grace, clarity, and biblical wisdom.
DEVOTED Integrated into how they live and serve.	☐ Consistently makes space for unhurried conversation; notices what's unsaid and follows up.	☐ Demonstrably trustworthy; understands the weight of pastoral confidence and guards it.	☐ Engages conflict honestly rather than avoiding it; helps others move toward resolution.
COMMITTED Reliably shows up and follows through.	☐ Regularly available and attentive; asks good follow-up questions.	☐ Holds confidences well in normal situations; knows when to escalate appropriately.	☐ Willing to have hard conversations and does so respectfully.
WILLING Says yes and acts when invited.	☐ Listens well when asked; participates in structured care conversations.	☐ Generally discreet; growing in awareness of confidentiality boundaries.	☐ Aware that cross-cultural ministry involves conflict; growing in capacity to engage it.
OPEN Receptive; some practice but inconsistent.	☐ Listens deeply on occasion, usually in response to a clear need.	☐ Means well but occasionally shares more than they should.	☐ Prefers to avoid conflict but can engage when required.
CURIOUS Interested and open to learning.	☐ Interested in growing as a listener but not yet practiced.	☐ Not yet demonstrated capacity to hold sensitive information well.	☐ Tends to avoid conflict or escalates it; needs growth in this area.

Current level (highest checked before the first gap):

Listening & Presence	Confidentiality & Trust	Conflict Navigation

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CLUSTER THREE — ENGAGEMENT

LEVEL	Communication Discipline	Prayer for the Worker	Practical Support
ANCHORED Settled, immovable; a stabilizing presence for others.	☐ Reliable, thoughtful, timely in every form of contact; workers never feel forgotten.	☐ Worker-specific intercession is a settled daily practice; the worker feels prayed for.	☐ Anticipates practical needs (logistics, hospitality, re-entry, family) and acts unprompted.
DEVOTED Integrated into how they live and serve.	☐ Consistent rhythms of written and verbal contact; respects time zones and field realities.	☐ Prays regularly and specifically for the worker, family, and field; tracks requests.	☐ Actively offers tangible help and follows through reliably.
COMMITTED Reliably shows up and follows through.	☐ Communicates regularly with workers, with only occasional lapses.	☐ Prays weekly for the worker and follows up on specific requests.	☐ Responds well when practical needs are communicated.
WILLING Says yes and acts when invited.	☐ Sends notes, prayer messages, or check-ins roughly monthly.	☐ Prays for the worker as part of broader prayer rhythms.	☐ Helps with specific tasks when asked.
OPEN Receptive; some practice but inconsistent.	☐ Communicates occasionally, often around holidays or events.	☐ Prays occasionally for the worker, especially when prompted.	☐ Occasionally helps with logistics or hospitality.
CURIOUS Interested and open to learning.	☐ Interested in growing in regular communication habits.	☐ Interested in beginning to pray regularly for a cross-cultural worker.	☐ Interested in helping practically as opportunities arise.

Current level (highest checked before the first gap):

Communication Discipline	Prayer for the Worker	Practical Support

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CLUSTER FOUR — ADVANCED

LEVEL	Long-Term Commitment	Crisis Readiness	Team Collaboration
ANCHORED Settled, immovable; a stabilizing presence for others.	☐ Committed for the long haul — through transitions, hard seasons, and returns; turnover is rare.	☐ Trauma-informed, knows when to refer to professionals; calm and capable in crises.	☐ Functions seamlessly within a care team; values shared discernment over solo action.
DEVOTED Integrated into how they live and serve.	☐ Counts the cost and commits to multi-year involvement; treats it as a calling, not a slot.	☐ Recognizes signs of crisis (burnout, trauma, marital strain) and knows escalation pathways.	☐ Actively contributes to team meetings, defers to team rhythms, and avoids freelancing.
COMMITTED Reliably shows up and follows through.	☐ Willing to commit to a defined term and likely to renew.	☐ Aware that crises occur on the field; willing to learn appropriate responses.	☐ Works well alongside others on the team; communicates openly.
WILLING Says yes and acts when invited.	☐ Willing to commit for one term and see how it goes.	☐ Understands the basics of member care and crisis referral.	☐ Participates in team meetings and follows team decisions.
OPEN Receptive; some practice but inconsistent.	☐ Available for short-term or project-based involvement.	☐ Limited exposure to crisis dynamics; would need training.	☐ Prefers individual engagement but can work with a team when needed.
CURIOUS Interested and open to learning.	☐ Interested but not yet ready to make a defined commitment.	☐ New to the concept of crisis care; interested in learning.	☐ Tends to operate independently; needs growth in collaborative work.

Current level (highest checked before the first gap):

Long-Term Commitment	Crisis Readiness	Team Collaboration

FOLLOW-UP — GAPS BETWEEN THE TWO PROFILES

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TOOL 7

Personal Reflection Guide

Phase Two — for your eyes only — a tool for discernment, not evaluation

BEFORE YOU BEGIN

This guide is for you. No one else will see your answers unless you choose to share them. Its purpose is not to grade you, qualify you, or disqualify you. Its purpose is to help you think honestly about whether God is calling you into Care Team work in this season, and where you might want to grow if you say yes.

There are no right answers. There is no passing score. The questions that feel hardest to answer are often the ones that matter most. Take your time. Pray as you go. Come back to it across several days if that helps.

How to use this guide. For each of the twelve areas below, read the description, sit with the reflection question, and mark where you honestly believe you are today on the six-level scale. The levels are not a ladder of worth — they describe growing degrees of formation. Most people will sit at different levels across different areas, and that is exactly what the guide is meant to show.

A note on honesty. The temptation will be to score yourself higher than you are because you want to be useful, or lower than you are because you feel unworthy. Both distortions block discernment. Try to answer as a trusted friend would describe you on a normal day.

> **A note about this fillable form.** If you save a filled copy, it lives wherever you save it. Keep it somewhere private, and share it only if you choose.

THE SIX LEVELS — A QUICK ORIENTATION

Each level describes a different posture toward the area being considered. They run from openness to deeply settled practice:

- **Curious.** Interested and open to learning, but not yet practiced.
- **Open.** Receptive; some practice but inconsistent.
- **Willing.** Says yes and acts when invited; engages when prompted.
- **Committed.** Reliably shows up and follows through; this is part of how you live.
- **Devoted.** Integrated into how you see yourself and operate.
- **Anchored.** Settled, immovable; a stabilizing presence for others.

OPENING REFLECTION

Before working through the twelve areas, sit with two larger questions. Your answers here will shape how you read everything that follows.

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1. Why am I considering this? What is drawing me toward Care Team service right now — and what, honestly, might I be hoping it gives me?

2. What season am I actually in? Looking at my family, work, health, church involvement, and inner life — is this a season for taking on a multi-year ministry commitment, or might it be a season for something else?

TWELVE AREAS TO REFLECT ON

For each area: read the description, sit with the question, mark where you honestly are today, and use the writing space to capture anything you want to remember.

1. BIBLICAL FOUNDATION FOR CARE

Caring for cross-cultural workers is gospel work. It rests on a biblical theology of sending, suffering, perseverance, and the role of the sending community.

When you think about caring for a cross-cultural worker, what Scriptures shape your understanding of the work? Where might your thinking still be more sentimental than biblical?

Mark where you honestly are today: ◯ Curious ◯ Open ◯ Willing ◯ Committed ◯ Devoted ◯ Anchored

2. CROSS-CULTURAL LITERACY

Cross-cultural workers face realities — culture stress, identity in transition, re-entry — that are invisible to most people at home. Care work asks you to learn that world so the worker is not always explaining it.

How much do you actually understand about the worker's context and the cross-cultural experience in general? What would you need to learn?

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Mark where you honestly are today: ◯ Curious ◯ Open ◯ Willing ◯ Committed ◯ Devoted ◯ Anchored

3. PERSONAL SPIRITUAL MATURITY

Care work draws on your own walk with the Lord. You cannot give what you do not have. A team member needs settled faith — not perfection, but stability.

If a worker called you in a dark moment, would your own spiritual life be a source of stability for them, or would you be drawing on theirs?

Mark where you honestly are today: ◯ Curious ◯ Open ◯ Willing ◯ Committed ◯ Devoted ◯ Anchored

4. LISTENING AND PRESENCE

Workers often most need someone who will simply hear them without rushing to fix, advise, or interpret. Presence is one of the most pastoral gifts a team can offer.

Think of the last time someone shared something heavy with you. Did you listen, or did you rush to respond? What does that tell you?

Mark where you honestly are today: ◯ Curious ◯ Open ◯ Willing ◯ Committed ◯ Devoted ◯ Anchored

5. CONFIDENTIALITY AND TRUST

Workers will share things with the team that cannot go elsewhere — struggles, doubts, family difficulties, ministry frustrations. The team must hold these as sacred trust.

Is there evidence in your life that people trust you with sensitive things? When was the last time you held something hard and did not share it with anyone else?

Mark where you honestly are today: ◯ Curious ◯ Open ◯ Willing ◯ Committed ◯ Devoted ◯ Anchored

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6. CONFLICT NAVIGATION

Care work involves hard conversations — within the team, and occasionally with the worker. Avoidance damages care just as harshness does.

How do you typically respond when conflict arises? Avoidance, escalation, or honest engagement? What would those closest to you say?

Mark where you honestly are today: ◯ Curious ◯ Open ◯ Willing ◯ Committed ◯ Devoted ◯ Anchored

7. COMMUNICATION DISCIPLINE

Workers are sustained, in part, by knowing they are not forgotten. Care teams that communicate erratically — or only when convenient — leave the worker uncertain.

Are you a reliable communicator in your other relationships? Do people typically hear back from you, or do messages sit unanswered?

Mark where you honestly are today: ◯ Curious ◯ Open ◯ Willing ◯ Committed ◯ Devoted ◯ Anchored

8. PRAYER FOR THE WORKER

Prayer is not a token contribution. It is the team's most important and enduring work. It asks for sustained, specific intercession over years.

Right now, who are you praying for by name, with detail, over time? What would it cost you to add a cross-cultural worker and family to that list?

Mark where you honestly are today: ◯ Curious ◯ Open ◯ Willing ◯ Committed ◯ Devoted ◯ Anchored

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9. PRACTICAL SUPPORT

Care also takes tangible form — logistics, hospitality, re-entry help, family support, care packages, airport runs. Practical service is love made visible.

What practical contributions are realistic for you given your current life? Where might you give more than you think? Where would you overpromise?

Mark where you honestly are today: ◯ Curious ◯ Open ◯ Willing ◯ Committed ◯ Devoted ◯ Anchored

10. LONG-TERM COMMITMENT

Care Team service is not a short-term project. It asks for an eighteen-month term and the expectation of at least one renewal — about three years in all. Workers are harmed by team turnover.

Can you honestly commit to multiple years, including through life changes you cannot foresee? What might pull you away, and how would you handle that?

Mark where you honestly are today: ◯ Curious ◯ Open ◯ Willing ◯ Committed ◯ Devoted ◯ Anchored

11. CRISIS READINESS

Sometimes a worker is not just tired — they are in crisis. The team needs members who can recognize the difference, respond calmly, and know when to escalate to professional or pastoral help.

Have you walked with anyone through real crisis — illness, grief, breakdown, trauma? What did that teach you about your capacity and your limits?

Mark where you honestly are today: ◯ Curious ◯ Open ◯ Willing ◯ Committed ◯ Devoted ◯ Anchored

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12. TEAM COLLABORATION

Care is stronger when it is discerned together. Soloists, however well-intentioned, undermine care teams. Members defer to shared rhythms and contribute to the group's discernment.

Are you naturally a team player, or do you prefer to operate independently? When have you submitted your judgment to a group's discernment, and how did it go?

Mark where you honestly are today: ◯ Curious ◯ Open ◯ Willing ◯ Committed ◯ Devoted ◯ Anchored

LOOKING AT THE WHOLE PICTURE

Now that you have worked through the twelve areas, step back and look at your responses as a whole. The point is not to add up a score — there is no score. The point is to see the pattern.

Where am I strongest? Which two or three areas show the most settled practice? What does this tell me about how I might contribute to a team?

Where am I weakest? Which two or three areas would I most need to grow in, or rely on teammates for? Are any of them in the 'minimum standard' categories — confidentiality, long-term commitment, basic crisis awareness, settled faith, willingness to work as a team?

What surprised me? Did anything in this reflection catch me off guard — a strength I had not named, a weakness I had been avoiding, a fear, a sense of invitation?

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What is the Spirit drawing me toward? Sit with this question in prayer. Not 'what should I do' — that comes later — but 'what is God showing me about myself and this calling right now?'

DISCERNMENT QUESTIONS

Before you respond to whoever invited you to consider this role, take time with these final questions. If you are married, work through them with your spouse.

- Is the desire to serve coming from a settled place, or from guilt, obligation, or the need to be needed?
- Have I talked with my spouse, pastor, or a trusted friend about this? What did they see that I might not?
- Do I have the actual margin in my life — time, energy, attention — to sustain this for several years?
- Am I willing to grow in the areas where this reflection showed me weakness? Or am I hoping to serve from a place that does not stretch me?
- If I say yes, what would I need to say no to? Have I counted that cost honestly?
- If, after praying and reflecting, I sense the answer is 'not now' or 'not me' — am I at peace with that being an honorable answer?

My notes on these questions:

A CLOSING WORD

Saying yes to Care Team service is a real and weighty commitment. So is saying no, or not yet. Both are honorable answers when they come from honest discernment.

If you sense the Lord drawing you toward this work, take what you have written here into your conversation with the team leader. Be honest about your strengths and your gaps. Ask what training and support will be available. Ask the team to be honest with you in return.

If you sense the answer is not now, trust that. The worker is best served by team members who are clearly called and unhurried, not by those who served out of obligation. Your honest no may be one of the most loving gifts you give.

"As each has received a gift, use it to serve one another, as good stewards of God's varied grace." — 1 Peter 4:10

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TOOL 8

Structured Selection Interview

Phase Two — once per candidate, before the observation visit

ABOUT THIS TOOL A guided conversation for evaluating a prospective Care Team member against the twelve competencies and the five minimum standards. Used by the coordinator (with the missionary consulted beforehand and pastoral oversight aware). One interview per candidate; 45–60 minutes; unhurried.

WHEN TO USE Phase Two, after the candidate has received the Role Description and completed the Personal Reflection Guide privately, and before the observation visit and covenant. The interview is discernment, not examination — say so out loud at the start.

Candidate	Interviewer	Date

BEFORE THE INTERVIEW

- ☐ The coordinator has presented this candidate to the missionary, and the missionary has approved moving forward.
- ☐ The candidate has had the Role Description for at least a week and has completed the Reflection Guide privately. They bring it only if they choose; the interviewer never asks to see it.
- ☐ The interviewer has reviewed the twelve competencies and knows which competencies this team has made minimum standards based on the worker's stated needs.

OPENING FRAME — IN THE COORDINATOR'S VOICE

> *"Thank you for taking this seriously enough to sit down with me. I want to say the most important thing first: this conversation is discernment, not a job interview. There is no score to pass. My work today is to help both of us see honestly whether this role, in this season, is the right yes for you — and a clear no would serve the family as much as a yes. What we cannot build on is a reluctant maybe. I'm going to ask about some specific areas. Answer as a trusted friend would describe you on a normal day — not the best day, not the worst."*

PART ONE — THE MINIMUM STANDARDS

Ask all five. These gate the conversation: significant hesitation on any minimum standard is discussed honestly and, if it stands, ends in a warm redirect — not in creative accommodation.

1. "Tell me about a time someone trusted you with something sensitive. How did you handle it — and who else ever learned of it?"

Listen for: A concrete story, told without disclosing the confidence itself. A candidate who shares the sensitive details to prove the point has answered the question in the other direction.

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2. "This role runs in eighteen-month terms, and we ask members to expect at least two — about three years, through furloughs and hard seasons. Looking at your actual calendar and your family's next few years — not your willingness — what would make that term realistic or unrealistic?"

Listen for: Realism about the hardest predictable months, a consulted spouse, named competing commitments. "I'll make it work" without specifics is willingness, not capacity.

3. "Suppose the worker shares something that worries you — beyond what a friend should carry alone. What do you do with it?"

Listen for: Instinct toward the team and the escalation pathway rather than solo counsel or silence. The right answer knows its own limits and calls referral a strength.

4. "Tell me about your own walk with the Lord right now — not the ideal version, the actual one."

Listen for: Settled honesty. Present-tense practices, a real church life, stability that does not depend on being needed.

5. "This team decides things together, and sometimes the team's discernment will differ from your instinct. Tell me about a time you deferred to a group decision you initially disagreed with."

Listen for: A true example with the disagreement intact. A candidate who cannot recall ever deferring is telling you how they will serve.

PART TWO — THE FOUR CLUSTERS

Two questions per cluster. Follow the candidate's actual answers; the script is a spine, not a cage.

FOUNDATIONS

6. "When you think about caring for a cross-cultural worker, what in Scripture shapes how you understand the work?"

Listen for: Any genuine engagement — sending, suffering, perseverance, the body. Sentiment without Scripture locates the candidate at Curious or Open, which is information, not disqualification.

7. "What do you know — firsthand or from reading and listening — about what culture stress or re-entry actually feels like?"

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Listen for: Curiosity and any real exposure. Listen especially for teachability: "I don't know, and I'd want to learn" outranks confident generalization.

RELATIONAL CAPACITY

8. "When someone tells you about a struggle, what do you find yourself wanting to do first?"

Listen for: Presence before repair. Fix-it energy is common and coachable; note it. Advice-giving as identity is harder ground.

9. "Tell me about a hard conversation you didn't avoid. How did you enter it, and how did it land?"

Listen for: Honesty and gentleness traveling together. Avoidance patterns and harshness patterns both surface here.

ENGAGEMENT

10. "Walk me through what staying in touch with someone far away has actually looked like in your life."

Listen for: Evidence of sustained rhythm anywhere — a parent called weekly, a friend written to for years. Past discipline predicts future discipline better than stated intention.

11. "How does prayer for specific people work in your life right now — and how do you keep track?"

Listen for: Specificity and follow-up. "I pray when they come to mind" is Open; a kept list with answered requests remembered is Devoted.

ADVANCED

12. "If, eight months in, you realized a teammate was quietly doing this work solo — contacting the worker outside the team's rhythm — what would you do?"

Listen for: Willingness to name it inside the team. This question doubles as teaching: it tells the candidate freelancing is watched for.

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13. "What would make you proudest about this team three years from now?"

Listen for: Answers about the worker's flourishing and the team's faithfulness rather than the candidate's role in it. Criterion-five failure — wanting to be the care rather than steward it — often shows itself here.

PART THREE — CAPACITY AND CLOSE

14. "Set the role aside — tell me about your margin. What is this season of life actually like?"

Listen for: An honest inventory. Strong competencies plus zero margin is a redirect, said kindly and plainly.

15. "What questions do you have for me — about the family, the team, the covenant, anything?"

Listen for: Hard questions before a yes are criterion three in action. No questions at all may be politeness; offer some: "Most people ask about the time commitment, or what happens if life changes mid-term."

CLOSING — IN THE COORDINATOR'S VOICE

> *"Here is what happens next, and none of it requires an answer today. You'll sit in on a team meeting so you can see what this actually is. Then take a week — pray, talk it over at home. Whatever you bring back, bring it honestly. And if it's yes: the covenant is signed together in training, and until that signing either of us can still step back with no awkwardness at all."*

AFTER THE INTERVIEW

- ☐ Both parties complete the Selection Profile independently — the interviewer from evidence heard, the candidate as self-assessment.
- ☐ Compare the two profiles. Gaps of two or more levels in any competency are the agenda for one follow-up conversation — gaps are usually more revealing than the scores themselves.
- ☐ Check the minimum standards: every one at its required level, from evidence. There is no total score, and high strength elsewhere never offsets a minimum standard.
- ☐ Record the outcome (invite / wait / redirect), the missionary's approval, and the term proposed — with the formation records, alongside the Recruitment Tracker.

Outcome: ◯ Invite ◯ Wait ◯ Redirect

Missionary's approval (date)	Term proposed	Follow-up conversation date

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TOOL 9

Role Clarification Guide

Phase Two — formation; each term renewal; annual recalibration

FREQUENCY Formation; each term renewal; annual review

PRIMARY USERS Care Coordinator, Full Care Team

ABOUT THIS TOOL This guide assigns specific responsibilities to each of the six Care Team roles before care begins. Ambiguity about who does what is one of the most common sources of team drift and coordinator burnout. Each role block includes a description, core responsibilities, and fillable fields for name, contact, start date, and term. The MK Lead role includes a dedicated Boundaries and Reminders section. Each role has an adjacent notes field for adjustments. The guide should be reviewed at every term renewal and whenever a role changes hands, ensuring that no gap in care goes unnamed.

WHEN TO USE At formation — complete this guide before the first team meeting so every member knows their specific responsibilities before care begins. At each term renewal — review and update as membership changes. At annual review — confirm that each role is functioning and that responsibilities still match capacity.

Missionary Name(s)

Care Team Launch Date

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CARE COORDINATOR

The structural heart of the team. Facilitates monthly meetings, keeps records, maintains the escalation pathway, and connects with pastoral oversight.

CORE RESPONSIBILITIES

- Facilitate all team meetings
- Keep meeting minutes and care records
- Maintain quarterly contact with pastoral oversight
- Coordinate the Care Mapping schedule
- Serve as the first contact point for escalation concerns
- Ensure congregational advocacy happens (carried by the Spiritual Encouragement Lead)
- Guard the missionary's trust: nothing leaves the team without their yes; when the risk-of-harm exception applies, tell them what is happening and why as soon as it is safe
- Host team meetings from the team laptop and team account: admit participants by name, monitor access, remove anyone not authorized; name a backup host
- Keep the church's team laptop and the team's meeting account; hand both off at succession and change the password
- Make the team's internal decisions after hearing the team; anything that touches the missionary goes to the missionary
- Hold the missionary's crisis preferences and serve as the single point of contact in a crisis
- Hold the team's memory across transitions

THIS ROLE IS FILLED BY

Name	Contact	Start Date	Term

Notes / Adjustments for this role:

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RELATIONAL LIAISON

The team's primary relational connection to the missionary. Maintains consistent, personal contact — not just ministry updates, but genuine friendship.

CORE RESPONSIBILITIES

- Initiate direct contact with the missionary at the rhythm they set, often twice a month
- Provide emotional attentiveness between meetings
- Listen for what is not being said in newsletters
- Bring observations to the full team at each meeting
- Serve as the team's relational barometer

THIS ROLE IS FILLED BY

Name	Contact	Start Date	Term

Notes / Adjustments for this role:

LOGISTICS SUPPORT LEAD

Anticipates and addresses the practical dimensions of the missionary's life — housing, packages, MK care, re-entry planning, financial needs.

CORE RESPONSIBILITIES

- Coordinate practical support (care packages, housing resources, re-entry logistics)
- Track upcoming transitions and practical needs
- Liaise with the church's administrative support systems
- Anticipate practical needs before they become crises
- Mobilize the congregation for specific practical requests
- Handle gifts and shipping under the statement of accountability: no money handled, the missionary decides what is sent, two people, every shipment recorded
- At the missionary's request, help with the home front — parents, property, paperwork

THIS ROLE IS FILLED BY

Name	Contact	Start Date	Term

Notes / Adjustments for this role:

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SPIRITUAL ENCOURAGEMENT LEAD

Holds the team's devotional and prayer life. Leads the prayer dimension of each meeting and cultivates a culture of Scripture-grounded encouragement.

CORE RESPONSIBILITIES

- Lead opening devotional at each team meeting
- Maintain a prayer calendar for the missionary and family
- Send regular Scripture-based encouragement directly to the missionary
- Coordinate the church's prayer mobilization around this missionary
- Carry congregational advocacy — keep the missionary present to the whole church, with their approval of what is shared (the Care Coordinator is accountable for its happening)
- Keep the family's calendar of remembered dates
- Bring spiritual attentiveness to the team's Care Mapping conversations

THIS ROLE IS FILLED BY

Name	Contact	Start Date	Term

Notes / Adjustments for this role:

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MK LEAD

The team's dedicated advocate for the missionary's children. Maintains consistent, age-appropriate connection with each MK and ensures their wellbeing is reviewed as a distinct domain — not assumed to be covered under general family care.

CORE RESPONSIBILITIES

- Maintain age-appropriate, consistent connection with each MK
- Track key transitions in each MK's life
- Monitor for early indicators of MK strain
- Coordinate practical support for MK-specific needs
- Serve as the team's primary resource on MK development and cross-cultural childhood
- Raise MK-specific observations during Care Mapping conversations
- Escalate promptly to the Care Coordinator, and involve the parents, when an MK shows signs requiring specialized attention

BOUNDARIES & REMINDERS

- You are not a counselor or educator — you are an attentive advocate for the child's wellbeing
- Always involve the parents before making direct contact with MKs, especially younger children
- If an MK's concerns require more than the team can offer, escalate to the Care Coordinator promptly and involve the parents
- Recognize that MK strain often surfaces in behavior before it is named in words
- Complete your church's child-protection screening and training before beginning this role — the same standard applied to children's ministry volunteers applies here
- Keep all direct communication with MKs observable: use platforms and channels the parents can see, copy a parent on written contact with younger children, and never arrange unaccompanied in-person time

☐ I have read and affirm these boundaries (initial in the field below).

MK Lead initials: _____

THIS ROLE IS FILLED BY

Name	Contact	Start Date	Term

Notes / Adjustments for this role:

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SECONDARY / AT-LARGE MEMBER

Provides flexible support across all roles. Serves as backup and transition support when other members need to step back.

CORE RESPONSIBILITIES

- Be available to fill gaps in all other roles
- Serve as primary backup to the Care Coordinator during absence
- Provide additional relational contact during high-stress seasons
- Assist with logistics during transitions or high-need periods
- Begin transitioning into a primary role as succession planning dictates

THIS ROLE IS FILLED BY

Name	Contact	Start Date	Term

Notes / Adjustments for this role:

Completed by	Role / Title	Date

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TOOL 10

Team Recruitment Tracker

Phase Two — maintained by the Care Coordinator through Phase Two · File with formation records at launch

> One row per candidate. The tracker is confidential to the coordinator and pastoral oversight — it records the missionary's approvals and declined invitations, neither of which the wider team needs to see.

Candidate	Role Considered	Missionary Approval	Invited (date)	Observed (date)	Response

MK LEAD ONLY — SAFEGUARDING STATUS

Screening completed	Training completed	Contact plan affirmed by parents	Tool 9 filed (date)

COVENANT

All confirmed members	Role	Covenant signed (date)

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TOOL 11

Covenant of Shared Stewardship

Phase Two — sign before the team begins; revisit at each term renewal

FREQUENCY At formation; each term renewal; new members

PRIMARY USERS Full Care Team + Pastoral Oversight

ABOUT THIS TOOL The Covenant of Shared Stewardship is not a formality — it is the defining act of team formation. Read aloud together before signing, it names the commitments and acknowledgements that transform a group of volunteers into a care team. The conversation it generates around the table is often the most important formation conversation the team will have. It should be revisited and re-signed at every term renewal, and any new member should read and sign it before beginning their role.

WHEN TO USE At formation — read this covenant aloud as a full team before signing. At each term renewal — revisit and re-sign at each renewal cycle (every eighteen months). When a new member joins — any new team member should read and sign before beginning.

Read aloud together before signing. Do not rush past this.

We, the undersigned Care Team for _____

enter into this covenant together as an act of shared stewardship. We acknowledge that our missionary's sustained flourishing is a responsibility we hold together — not as individuals acting alone, but as a team operating in covenant with each other, with our missionary, and with this church.

WE COMMIT TO:

- **Show up consistently** — attending meetings, maintaining our assigned contact rhythms, and bringing our whole attention to this team's work.
- **Care for the whole person** — attending to every domain of our missionary's life: spiritual, emotional, marriage and family, cultural, ministry and organizational, physical, practical and financial, and our missionary's children.
- **Follow our missionary's lead** — letting them direct the care they receive within what we have agreed to offer, trusting their experience of their own life, telling them honestly when a request is beyond our resources, and helping pursue those resources elsewhere.
- **Maintain confidentiality** — keeping what is shared within this team, holding together what is told to any one of us, and never holding one member's confidence apart from the team, with the single exception of a risk of harm to self or others, which we will bring to pastoral leadership without delay — and posting nothing about our missionary or their family, anywhere, without their express approval.
- **Escalate wisely** — with the missionary's consent, helping them find the right person to carry what exceeds our capacity, seeking pastoral oversight's counsel on how best to help, and never waiting for a crisis.
- **Sustain our team** — planning for transitions, identifying successors, and prioritizing the health and continuity of this team as a care structure.
- **Reflect honestly** — participating in periodic self-assessments, inviting our missionary's own evaluation of our care, and being willing to name what is not working.
- **Address conflict directly** — bringing disagreement between team members first to one another, then to the Care Coordinator if unresolved, and then to pastoral oversight, so that no conflict is carried silently into this team's care of our missionary.
- **Keep our missionary present to our church** — carrying their story, with their approval, to our congregation, so the whole church keeps the promise it made at their sending.

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WE ACKNOWLEDGE:

- That no single team member carries this responsibility alone — we are collectively responsible for the care this team provides.
- That this is a season of faithful service, not a vague commitment — and that when our term ends, we will facilitate an intentional handoff rather than a quiet departure.
- That our missionary is not a project to manage but a person to accompany — and that our job is to see them clearly, not to present them as fine.

PASTORAL OVERSIGHT COMMITS TO:

- Meeting with the Care Coordinator at least quarterly — not only in crisis.
- Supporting the team's functioning — helping it find the right people and resources for what it cannot carry, and responding within the agreed timeframe.
- Honoring our missionary's consent and this team's confidentiality, with the same single exception for risk of harm.

BEFORE YOU SIGN:

Talk these through together, aloud, before any signature is given.

- What would make your role hard for you, honestly?
- The first time one of us misses the rhythm we have calendared, how will we say so — directly, and kindly?

Missionary Name(s) | Field / Location

SIGNATURES

Name	Role	Date Signed

Pastoral Oversight Representative:

Name | Signature | Date

Date of next covenant renewal | Term length agreed upon

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TOOL 12

Coordinator Pre-Launch Checklist

Phase One — complete by the end of Session Five

FREQUENCY Once, before launch

PRIMARY USERS Care Coordinator, Pastoral Leadership

ABOUT THIS TOOL This checklist ensures that everything necessary for a healthy team launch is in place by the team's first working meeting (Session Five). It covers leadership and oversight, team formation, covenant and commitment, care mapping and roles, communication structures, escalation readiness, and sustainability planning. If any item cannot be checked, the launch should pause until the gap is resolved. A team launched on an incomplete foundation creates an expectation in the missionary's mind that it then quietly fails to meet.

WHEN TO USE Before your first team meeting — this checklist consolidates pre-launch requirements into a single reference point. Complete it with pastoral and missions leadership before the covenant signing. If any item cannot be checked, pause and resolve it before proceeding.

LEADERSHIP AND OVERSIGHT

- ☐ A specific pastor or elder is named as pastoral oversight and understands the role: supporting the team and its referrals, and receiving any risk-of-harm concern immediately.
- ☐ The Leadership Readiness Assessment (Tool 1) has been completed and scored by pastoral and missions leadership.
- ☐ Scores below 4 in any area have been addressed or have a documented action plan.

TEAM FORMATION

- ☐ The missionary has said yes to a Care Team, chose the Care Coordinator, and approved each member for relational fit.
- ☐ The missionary has set the contact rhythm they want with each role, and knows how to change it.
- ☐ The missionary has shared their crisis preferences: whom to call first, what may be shared and with whom, who speaks to the congregation, and who cares for the children and home (Chapter III-5).
- ☐ Every member understands that nothing is posted about the missionary or their family, on any platform, without the missionary's express approval.
- ☐ A Care Coordinator has been selected before the rest of the team was recruited.
- ☐ All team members have been invited to observe the team in context before signing the covenant.
- ☐ The potential successor to the Care Coordinator has been identified.
- ☐ The MK Lead has completed the church's child-protection screening and training, consistent with the church's existing children's ministry policy.

COVENANT AND COMMITMENT

- ☐ The Covenant of Shared Stewardship (Tool 11) has been read aloud together as a team.
- ☐ All team members have signed the covenant and received a copy.
- ☐ Pastoral oversight has signed the covenant as a party, not merely a witness.

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CARE MAPPING AND ROLES

- ☐ The Care Coordinator has read the Missionary Care Mapping Workbook (Tool 13) and can explain it to the team.
- ☐ The Role Clarification Guide (Tool 9) has been reviewed and all roles are assigned.
- ☐ A baseline Care Map has been completed with the missionary — or is scheduled for the first or second meeting.

COMMUNICATION AND DOCUMENTATION

- ☐ A confidential shared document (digital or physical) exists for meeting minutes and care records.
- ☐ The communication rhythm for each role is established: how often each member will contact the missionary and by what means.
- ☐ The Care Coordinator's quarterly check-in rhythm with pastoral oversight is confirmed and calendared.

ESCALATION READINESS

- ☐ The escalation pathway is clear to every team member: who to call, when, and how.
- ☐ The missionary has heard, in plain words, how the team's confidentiality works: what they tell one member, the team holds together, so no member keeps anything from the rest of the team; what they share is their choice; nothing leaves the team without their consent — and the one exception, a risk of harm to self or others.
- ☐ The missionary has answered the six questions (Chapter II-4) and has given a crisis contact to pastoral oversight and the coordinator only.
- ☐ Tools 2, 3, 4 and 5 are complete, and the Recruitment Tracker (Tool 10) is filed with the formation records.
- ☐ The coordinator and at least one other member have visited an established Care Team (Chapter II-1).
- ☐ A documented list of professional care referral resources exists and is accessible to the Care Coordinator.
- ☐ The church's policy on financial support for escalated professional care or emergency travel is documented.

SUSTAINABILITY

- ☐ Term lengths for each team member are defined and documented.
- ☐ The Structural Stewardship Guide (Tool 18) has been reviewed.
- ☐ The three first-year booster conversation dates are calendared (months 3, 6, and 12).

Notes — Items Requiring Follow-Up Before Launch:

Missionary Name(s)	Field / Location	Date Completed

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TOOL 13

Missionary Care Mapping Workbook

Phase Three — quarterly in Year One, biannually thereafter, at each major transition

FREQUENCY Quarterly (Yr 1), biannually thereafter, at every major transition

PRIMARY USERS Full Care Team with Missionary

ABOUT THIS TOOL Care Mapping is the practice of attending to the full arc of the missionary's life — not just ministry updates. This workbook guides the team through all eight domains of care: Spiritual, Emotional, Marriage and Family, Cultural Adaptation, Ministry and Organizational, Physical Health, Practical and Financial, and Children / MK Wellbeing. Each domain has the missionary's own status rating, conversation questions, team notes, and action fields. The workbook closes with a Care Map Summary, follow-up actions, and a signature table for those who participated. Missionary strain rarely presents in one domain — Care Mapping is the practice of seeing the whole person, consistently and intentionally.

WHEN TO USE THIS TOOL

At formation — complete a baseline Care Map at the beginning of the team's work. **Quarterly** — in the first year, use this Care Map every quarter. **Biannually** — after the first year, use this Care Map twice a year at minimum. **At every major transition** — return to this tool at re-entry, end of term, field change, crisis recovery, or any significant life change.

When you use this tool, begin by reminding the missionary of why you are asking: not to evaluate them, not to report on them, but to see them. The missionary rates their own domains — ideally with the team present, so members can ask clarifying questions and understand each rating in the missionary's own words rather than reading it later in notes. The team's observations sit alongside the missionary's rating, never over it. When an observation differs from the rating, members say so gently in the room, as a question rather than a correction: "You marked Emotional as Stable — you seemed tired on our last two calls. What has that been like?" And then listen more than you speak.

Missionary Name(s)	Date of Care Map	Lead

Single missionary? Use Module 1 (Living as a Single Person) in place of Domain 3. **Annually and at transitions,** add Module 2 (Living Between Two Worlds) alongside Domain 4. Both modules are separate forms in this set.

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1 · DOMAIN 1: SPIRITUAL

Faith vitality, connection to Scripture and prayer, sense of calling, community worship

Missionary's rating: ◯ Thriving ◯ Stable ◯ Needs Attention ◯ Wants more help

Conversation questions:

- Describe your spiritual life right now in a sentence or two.
- What's feeding you spiritually? What's draining you?
- Where is God showing up for you — and where does he feel distant?
- How is your prayer life? Scripture?
- Are you in meaningful Christian community on the field?

Team notes:

Specific actions assigned from this domain:

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2 · DOMAIN 2: EMOTIONAL

Emotional resilience, processing capacity, indicators of burnout, anxiety, grief

Missionary's rating: ◯ Thriving ◯ Stable ◯ Needs Attention ◯ Wants more help

Conversation questions:

- How are you feeling — honestly, not ministry-wise?
- What has been emotionally heavy over the last few months?
- Are you able to rest and recover, or does it never really stop?
- Are there feelings you haven't had space to process?
- How would you describe your emotional energy on most days?

Team notes:

Specific actions assigned from this domain:

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3 · DOMAIN 3: MARRIAGE AND FAMILY

Marital health, intimacy, parenting pressures, MK wellbeing

Missionary's rating: ◯ Thriving ◯ Stable ◯ Needs Attention ◯ Wants more help

Conversation questions:

- How are you and [spouse] doing — not ministry-wise, just as a couple?
- What's been hardest on your marriage in this season?
- How are the kids? What are they navigating right now?
- Is there anything in your family life you've been absorbing privately?
- What does your family need that they're not currently getting?

Team notes:

Specific actions assigned from this domain:

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4 · DOMAIN 4: CULTURAL ADAPTATION

Language fatigue, cultural dislocation, field relationships, sense of belonging

Missionary's rating: ◯ Thriving ◯ Stable ◯ Needs Attention ◯ Wants more help

Conversation questions:

- What's your relationship with the host culture like right now?
- Language fatigue — how is it landing?
- Do you have meaningful relationships with local believers?
- What aspects of the culture are you still navigating or struggling with?
- Where do you feel most at home right now — and where do you feel most foreign?

Team notes:

Specific actions assigned from this domain:

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5 · DOMAIN 5: MINISTRY AND ORGANIZATIONAL

Effectiveness, role clarity, co-worker relationships, relationship with the sending organization

Missionary's rating: ◯ Thriving ◯ Stable ◯ Needs Attention ◯ Wants more help

Conversation questions:

- How is the work actually going — beyond the newsletter version?
- What's your relationship like with your team or organization?
- Is your role clear? Do you feel aligned with what you were sent to do?
- Where is there friction — with leadership, co-workers, or expectations?
- What would make your ministry situation more sustainable?

Team notes:

Specific actions assigned from this domain:

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6 · DOMAIN 6: PHYSICAL HEALTH

Physical vitality, chronic health conditions, sleep, access to healthcare

Missionary's rating: ◯ Thriving ◯ Stable ◯ Needs Attention ◯ Wants more help

Conversation questions:

- How is your physical health? Anything you've been managing?
- Are you sleeping? Eating reasonably well?
- Any health concerns that haven't been addressed?
- Do you have access to adequate healthcare?
- What does physical rest and recovery look like for you right now?

Team notes:

Specific actions assigned from this domain:

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7 · DOMAIN 7: PRACTICAL AND FINANCIAL

Financial stability, housing, logistics, practical support needs

Missionary's rating: ◯ Thriving ◯ Stable ◯ Needs Attention ◯ Wants more help

Conversation questions:

- How are things practically — finances, housing, logistics?
- Is your support level stable? Any concerns about funding?
- Are there practical needs your team or church should know about?
- What's coming up — any major transitions, purchases, or logistical challenges?
- What would make your day-to-day life more manageable?

Team notes:

Specific actions assigned from this domain:

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8 · DOMAIN 8: CHILDREN / MK WELLBEING

Developmental wellbeing, relational belonging, educational continuity, TCK identity

Missionary's rating: ◯ Thriving ◯ Stable ◯ Needs Attention ◯ Wants more help ◯ N/A — no children

Conversation questions:

- How are your children doing overall — emotionally, socially, educationally?
- Are they building meaningful friendships? Is there a TCK community or peer group available?
- Are there educational transitions coming up the team should be planning around?
- How are you navigating your role as a parent in this cultural context?
- Is there anything your children have said or shown recently that is weighing on you?

Team notes:

Specific actions assigned from this domain:

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CARE MAP SUMMARY

Overall status this meeting (agreed with the missionary):

◯ Thriving ◯ Stable ◯ Needs Attention ◯ Wants more help

Domains most needing attention:

Specific follow-up actions and who is responsible:

Date of next scheduled Care Map:

CARE MAP COMPLETED BY

Name	Role	Date

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TOOL 13 · MODULE 1

Living as a Single Person

Phase Three — a population-specific module of the Missionary Care Mapping Workbook · use in place of Domain 3

FREQUENCY At every Care Mapping session, in place of Domain 3, for single missionaries

PRIMARY USERS Full Care Team with Missionary

ABOUT THIS MODULE Many missionary care models are implicitly built around married couples with children. Single missionaries carry a different relational texture: belonging, companionship, support networks, and identity questions that the Marriage and Family domain does not reach — and pressures that affect resilience, longevity, and ministry effectiveness just as directly. This module is used in place of Domain 3 for single missionaries, in the same way Domain 8 is marked "N/A" for missionaries without children. It does not add a ninth domain. The eight-domain architecture of the Care Mapping Workbook remains intact; this module is simply the form Domain 3 takes for this population.

Begin with strengths, not deficits. This module does not assume loneliness. It opens with what is life-giving and moves toward what is difficult, so the missionary is seen as a whole person rather than assessed against a married template.

WHEN TO USE At every Care Mapping session — for a single missionary, use this module wherever the workbook calls for Domain 3 — at the baseline Care Map, quarterly in Year One, biannually thereafter, and at every major transition. At a change in relationship status — if the missionary marries, the team returns to the standard Marriage and Family domain at the next session.

When you use this module, begin the same way you begin every domain: remind the missionary that you are not evaluating them or reporting on them. You are asking because you want to see them. And then listen more than you speak.

Missionary Name(s)	Date of Care Map	Lead

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3A • DOMAIN 3-ALT: SINGLENESS AND SIGNIFICANT RELATIONSHIPS

Relational wellbeing, belonging, companionship, support network, friendships and significant relationships

Missionary's rating: ◯ Thriving ◯ Stable ◯ Needs Attention ◯ Wants more help

Conversation questions:

- What is bringing you joy and satisfaction in this season?
- What has been most life-giving lately — and what has been most difficult?
- Who knows you well where you live? Who knows you well back home?
- If you had a hard week, who would you naturally reach out to?
- How are your friendships and significant relationships going — on your team and in your local community?
- Are there relational tensions, unmet desires, or boundaries that have become difficult to navigate?

BOUNDARIES & REMINDERS

- You are not a counselor or a matchmaker — you are an attentive companion to the missionary's relational wellbeing
- Let the missionary set the depth. Ask openly; never press for details about romantic relationships or singleness itself
- Never treat singleness as a problem to be solved — it is a season (or calling) to be supported
- Confidentiality applies with full force — relational disclosures are among the most sensitive things this team will hear
- If the conversation surfaces persistent loneliness, grief, or a relational concern beyond lay capacity, offer, with the missionary's consent, Tool 15's Level 3 (Referral Support) or Level 4 (Professional Referral)

Team notes:

Specific actions assigned from this domain:

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TOOL 13 · MODULE 2

Living Between Two Worlds

Phase Three — a supplemental subsection of Domain 4 (Cultural Adaptation)

FREQUENCY At least annually, at every major transition, and whenever contact with home surfaces as a concern

PRIMARY USERS Full Care Team with Missionary

ABOUT THIS MODULE Many missionaries describe feeling simultaneously rooted in two places — present in the host culture while still tethered to family, church, and supporters at home. Domain 4 already asks where the missionary feels most at home and most foreign. This module deepens that question. It is not a ninth domain. It is a supplemental subsection of Cultural Adaptation, used when the missionary's connection to home — family, sending church, supporters, and communication rhythms — deserves focused attention. It sits at the intersection of relationships, identity, and cultural adaptation.

The theme that ties this module together is identity and belonging. A single well-placed question — where do you most feel at home these days? — can open thirty minutes of meaningful conversation. Let it.

WHEN TO USE At least annually — include this module in one Care Mapping session per year, alongside Domain 4. At every major transition — re-entry, furlough, field change, and term end all reshape the missionary's relationship to home. Use this module whenever the workbook is used at a transition. Whenever contact with home surfaces as a concern — strained family communication, drifting supporter relationships, or a fading sense of connection to the sending church are all signals to bring this module into the next session.

Missionary Name(s)	Date of Care Map	Lead

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4B • DOMAIN 4B: LIVING BETWEEN TWO WORLDS

Connection with family, sending church, and supporters; communication rhythms; identity and belonging across two worlds

Missionary's rating: ◯ Thriving ◯ Stable ◯ Needs Attention ◯ Wants more help

Conversation questions:

- Many missionaries feel rooted in two places at once. How has that been true — or not true — for you recently?
- Where do you most feel "at home" these days?
- Has your sense of belonging changed over the past year?
- How is your contact with family and close friends back home?
- How connected do you feel to our church and to your supporters?
- Are your communication rhythms with home life-giving, draining, or somewhere in between?

Team notes:

Specific actions assigned from this domain:

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QUICK REFERENCE

Meeting Across Distance

For every call with the missionary · goes with Chapter III-1

Missionary Name(s)	Call date	Host

Item	Done
BEFORE THE CALL	
The missionary chose the time (their time zone), the platform, and the format.	☐
Video by default; audio-only when bandwidth, security, or the missionary's preference calls for it.	☐
Passcode and waiting room set; link sent directly to participants, never posted.	☐
Room audio tested from every seat with the conference microphone; test call held before a Care Mapping conversation.	☐
Agenda or domain questions sent ahead.	☐
Fallback agreed: audio only, phone call, or voice messages.	☐
EQUIPMENT AND ACCOUNT	
Team laptop (church-owned, kept by the coordinator) and the team's own meeting account — no personal computers.	☐
Coordinator and one named backup hold the login; password changed when anyone with access leaves the team.	☐
IN THE ROOM	
One device carries the room's audio; any others muted with speakers off, or on headphones.	☐
Everyone in a private space; headphones where others are nearby.	☐
DURING THE CALL	
Host admits participants by name, watches the participant list, removes anyone not authorized, and locks the meeting once all have arrived.	☐
Co-host named as backup host.	☐
Start with the person, not the agenda; one person leads.	☐
The missionary is never the only face watching a room.	☐
Allow for lag; leave room for silence.	☐
Ask who is within earshot on the missionary's end before sensitive topics.	☐
AFTER THE CALL	
Nothing recorded; no screenshots.	☐
Notes follow the consent rule and are kept only where the team's records are kept.	☐
A call dropped during something hard gets a callback within minutes.	☐
RESTRICTED-ACCESS FIELDS	
The organization's security guidance governs platform, vocabulary, and whether names or places are typed.	☐
Pre-agreed language set at formation.	☐
Nothing sensitive typed in a chat box or an email.	☐

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TOOL 14

Support and Care Alignment Review

Phase Four — quarterly in Year One, biannually thereafter, following significant events

FREQUENCY Quarterly (Yr 1), biannually thereafter, after significant events

PRIMARY USERS Full Care Team; the missionary (Evaluation of Care)

ABOUT THIS TOOL This review evaluates how well the Care Team is functioning — not how the missionary is doing, but how the team itself is performing its care responsibilities. Nine areas are rated on a 1–5 scale. Any area scoring below 3 becomes a priority for discussion. The missionary evaluates the team's care on their own form — the Missionary's Evaluation of Care — at least once a year and whenever they wish, and may return it to the Care Coordinator or privately to pastoral oversight. Their evaluation is read before the team finalizes its scores. Once a year, the coordinator or pastoral oversight also asks the missionary in person — the form opens that conversation; it does not replace it.

COMPANION FORMS The Missionary's Evaluation of Care and the annual Model Fidelity Self-Check are separate fillable forms in this set.

Date of Review	Completed by	Year of Team Operation

1	2	3	4	5
Rarely or never	Inconsistently	Sometimes, not reliably	Consistently in most areas	Consistently across all areas

REVIEW

		1	2	3	4	5
Meeting Rhythm	Are team meetings happening monthly, with minutes, and with consistent attendance?	○	○	○	○	○

Notes — Meeting Rhythm

		1	2	3	4	5
Whole-Person Coverage	Are all eight domains of the Care Mapping Workbook being addressed — not just spiritual and ministry?	○	○	○	○	○

Notes — Whole-Person Coverage

		1	2	3	4	5
Relational Quality	Are team members in genuine personal contact with the missionary, beyond newsletters and group calls?	○	○	○	○	○

Notes — Relational Quality

		1	2	3	4	5
Coordinator Health	Is the Care Coordinator functioning without carrying an unsustainable weight? Are they connected to pastoral leadership?	○	○	○	○	○

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Notes — Coordinator Health

		1	2	3	4	5
Missionary Trust and Openness	Does the missionary appear to trust this team? Are they being honest, or managing their image?	○	○	○	○	○

Notes — Missionary Trust and Openness

		1	2	3	4	5
Escalation Pathway Clarity	Does every team member know when and how to escalate a concern? Has this been used appropriately when needed?	○	○	○	○	○

Notes — Escalation Pathway Clarity

		1	2	3	4	5
Team Communication	Is information shared consistently across the full team, not just between two or three members?	○	○	○	○	○

Notes — Team Communication

		1	2	3	4	5
Pastoral Engagement	Is pastoral oversight engaged and informed — as a regular rhythm, not only in crisis?	○	○	○	○	○

Notes — Pastoral Engagement

		1	2	3	4	5
Covenant Fidelity	Is the team operating according to the commitments made in the Covenant of Shared Stewardship?	○	○	○	○	○

Notes — Covenant Fidelity

FOLLOW-UP

Areas scoring below 3 — priority for discussion:

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Actions agreed upon from this review:

Date of next alignment review:

☐ The Missionary's Evaluation of Care was read before the team finalized its scores (when one has been returned).

COMPLETED BY

Name	Role	Date

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TOOL 14 · FOR THE MISSIONARY

The Missionary's Evaluation of Care

Completed by the missionary · returned to the coordinator or privately to pastoral oversight

> This page is yours. Complete it at least once a year, and any time you wish. Return it to the Care Coordinator, or privately to pastoral oversight — your choice. The team reads it before it finalizes its own review, and once a year someone will also ask you in person. The form opens that conversation; it does not replace it.

Your name(s)

Date completed / returned

How true is this for you?	1	2	3	4	5
I feel known by this team, not just updated on.	◯	◯	◯	◯	◯
The team follows my lead about the care I want.	◯	◯	◯	◯	◯
Contact comes at the rhythm I asked for.	◯	◯	◯	◯	◯
I trust the team with what I share.	◯	◯	◯	◯	◯
When I ask for something, it happens — or I am told honestly why not.	◯	◯	◯	◯	◯
Our children are seen and cared for (skip if not applicable).	◯	◯	◯	◯	◯
I can tell the team when something isn't working.	◯	◯	◯	◯	◯

Scale: 1 = rarely true · 3 = sometimes · 5 = consistently true

What is helping most?

What would you change?

Anything you would like said privately (to the coordinator or pastoral oversight)?

Returned to: ◯ Care Coordinator ◯ Pastoral oversight (privately)

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TOOL 14 · ANNUAL SUPPLEMENT

Model Fidelity Self-Check

Once a year, at one alignment review

ABOUT THIS SUPPLEMENT Teams that stay close to the model keep its promises; teams that drift from it lose them gradually, and the drift is rarely visible from inside a busy season. The alignment review examines the care and the season. Once a year, this page asks the parallel question: are we still running the model we covenanted to run? Twelve marks, three honest readings each. **Faithful** — this is how we actually operate. **Drifting** — true some months, slipping. **Lapsed** — we have quietly stopped.

HOW TO USE IT Completed by the full team together, once annually, as part of an alignment review — fifteen minutes, out loud. No score is totaled and nothing is reported; a mark in the Drifting or Lapsed column is an agenda item, not a verdict. The only required outcome is the movement line at the bottom: what we will move back toward, and who will carry it.

Core component of the model	Faithful	Drifting	Lapsed
Care Mapping is happening on its covenanted rhythm — all eight domains, every time	○	○	○
Contact rhythms are being kept as covenanted — the missionary can feel them	○	○	○
The team meeting is actually happening, monthly	○	○	○
The missionary is directing the care — their choices honored, nothing shared without consent	○	○	○
Concerns are escalated at the right level — the pathway is intact and used	○	○	○
Confidentiality is holding — nothing leaves the team without consent except a risk of harm	○	○	○
Pastoral oversight is keeping its quarterly rhythm with the coordinator	○	○	○
All six roles are filled — or vacancies are named, with a plan	○	○	○
Safeguarding discipline is current — MK contact per the church's policy	○	○	○
The budget line is funded and actually being used for care	○	○	○
Alignment reviews are happening on schedule	○	○	○
Terms are current; the next successor is identified before being needed	○	○	○

Our movement for the year ahead — the one or two components we will deliberately move back toward Faithful, and who carries each:

Completed on _____ as part of the alignment review dated _____

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TOOL 15

When Strain Deepens

Continuous Attentiveness — use whenever a concern surfaces, not only in confirmed crisis

FREQUENCY Whenever a concern surfaces, not only in confirmed crisis

PRIMARY USERS Full Care Team, Care Coordinator

ABOUT THIS TOOL This tool equips the team to recognize, name, and respond to deepening strain before it reaches crisis. It is not a diagnostic instrument — it is a guide for faithful noticing. It includes a domain-by-domain strain recognition table, a five-level response framework (from Increase Presence through Safety Response), guidance for three difficult conversations teams most often avoid, a reflection form for documenting concerns when they arise, and adaptations for restricted-access and remote contexts. The safety row is highlighted in red throughout: any risk of harm to self or others requires immediate escalation, without waiting for the next meeting — the only circumstance in which the team acts beyond the missionary's choice.

WHEN TO USE • When a team member brings a concern to the group between meetings. • When the missionary rates a domain "Needs Attention" or asks for more help. • When the missionary's communication has noticeably changed in tone, frequency, or content. • When a team member has a persistent sense that something is wrong that they can't yet name. • When any risk of harm to self or others — however small — surfaces.

You are not expected to diagnose. You are expected to notice faithfully.

RECOGNIZING DEEPENING STRAIN

DOMAIN	WHAT TO WATCH FOR	WHAT IT MAY INDICATE
Spiritual	• Persistent inability to find meaning in the work • Withdrawal from prayer, Scripture, or community worship • Expressions of feeling abandoned by God	→ Spiritual burnout or crisis of faith → Depression presenting spiritually → Calling confusion beyond normal questioning
Emotional	• Sustained flatness, numbness, or emotional unavailability • Significant change in tone — from hopeful to resigned or cynical • Expressions of hopelessness or worthlessness	→ Clinical depression requiring professional support → Trauma response from field experience → Burnout requiring rest and intervention
Marriage & Family	• Direct statement from either spouse that the marriage is in trouble • Extended silence about the marriage when directly asked • Reports of children showing significant behavioral regression	→ Marital crisis needing pastoral and/or professional support → Family breakdown being absorbed privately → MK crisis requiring specialized care
Organizational	• Escalating conflict with sending organization or team showing no resolution • Expressions of feeling trapped, controlled, or unseen by leadership • Talk of leaving the field that has moved from processing to planning	→ Organizational crisis requiring the organization's involvement → Vocational discernment needing pastoral support → A situation requiring mediation beyond team capacity
Safety	• Any expression of self-harm or harm to others • A field situation posing physical danger — act with the missionary: the organization's crisis line, emergency services • Any indication that a child or vulnerable person is being abused or is at risk	**→ IMMEDIATE ESCALATION REQUIRED** **→ Do not wait for the next meeting** **→ Contact pastoral leadership without delay**

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THE RESPONSE FRAMEWORK

LEVEL	TRIGGER	RESPONSE
Level 1 — Increase Presence	Something has shifted but is not yet at crisis level. Early strain indicators in one domain.	Offer more contact, and let the missionary set its shape. Reach out personally. Ask more direct questions. Let the missionary know you've noticed and you're paying attention.
Level 2 — Team Consultation	Indicators are persistent across multiple contacts or multiple domains. The team feels uncertain about how to respond.	Bring the full team together outside a regular meeting if needed. Discuss what each member has observed. Pray. Identify specific responses. Document what was decided.
Level 3 — Referral Support	The concern is significant. Marriage strain has been named. The missionary asks for more help. The team feels out of its depth.	Help the missionary find the right person to carry this — counselor, member care, mentor, or pastor of their choosing. The coordinator may consult pastoral oversight on options, sharing only what the missionary allows. If they decline, stay present and keep the offer open.
Level 4 — Professional Referral	Indicators suggest clinical depression, trauma response, relational crisis, or any concern requiring specialized professional care.	Offer, don't impose. Normalize professional support: "What you're carrying deserves more than we can offer." If they choose to go, help identify a missionary-focused counselor. Follow up — don't refer and disappear.
IMMEDIATE — Safety Response	Any risk of harm to self or others, including suspected abuse of a child or vulnerable person.	Contact pastoral leadership immediately, with or without the missionary's agreement. Tell the missionary what is happening as soon as it is safe. Do not handle this alone. If the missionary is in immediate physical danger, facilitate contact with emergency services.

NAVIGATING DIFFICULT CONVERSATIONS

Scenario 1: The Missionary Who Is Minimizing Strain

You have noticed something — a change in tone, increasing flatness, a comment that didn't quite land right. The missionary says everything is fine. Your sense is that it isn't.

> *"I've noticed you seem a bit heavier than usual over the last few conversations — and I'm not asking you to confirm that or explain it. I just want you to know I've noticed, and I'm not going anywhere. Whenever you're ready to talk, I'm here."*

Scenario 2: Asking About the Marriage

The marriage domain is the one most often skipped. It feels intrusive. And yet it is one of the domains where missionaries are most silently struggling. Skipping it consistently sends its own message: that this is the domain the team doesn't want to know about.

> *"We ask everyone this, every time, because we know this context is genuinely hard on marriages — not because we're worried about yours specifically. How are you and [spouse's name] doing — not ministry-wise, just as a couple?"*

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Scenario 3: Introducing the Idea of Professional Referral

You've reached the point where what the missionary is carrying is beyond what the Care Team can hold. A referral is not a retreat. It is an escalation of care — more, not less.

> *"What you're carrying right now is real, and it matters. We're not going anywhere — we're still here. But we want you to have access to the kind of support that goes beyond what a care team can offer. That's not us stepping back. That's us making sure you have everything you need."*

REFLECTION FORM — WHEN A CONCERN ARISES

Date of concern identified

Team member who first observed

Describe what was observed or shared (facts, not interpretations):

What domain(s) of the Care Map does this concern touch?

Actions taken and by whom:

Follow-up scheduled:

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Response level selected:

- ☐ Level 1 — Increase Presence
- ☐ Level 2 — Team Consultation
- ☐ Level 3 — Referral Support
- ☐ Level 4 — Professional Referral
- ☐ **IMMEDIATE — Safety Response**

Missionary's consent (Levels 3–4):

◯ Given ◯ Declined — team stays present, offer stays open ◯ Not required — risk of harm to self or others

ADAPTING FOR RESTRICTED-ACCESS OR REMOTE CONTEXTS

- A delayed response is NOT itself a strain indicator in restricted or bandwidth-limited contexts — establish a communication baseline at formation and evaluate changes against that baseline.
- Use asynchronous voice messages (WhatsApp, Signal) when real-time calls are not possible — voice conveys tone and emotional texture that text cannot.
- In high-security contexts, establish pre-agreed language at formation that allows the missionary to signal concern without explicitly naming it.
- Written Care Map check-ins using domain prompts are an effective substitute for synchronous mapping conversations.
- See Meeting Across Distance (Chapter III-1) and its quick reference in Part VI. The escalation pathway does not change in remote contexts — the method of contact may. Urgency is not reduced by distance.

COMPLETED BY

Name	Role	Date

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TOOL 16

Re-entry Care Plan

Phase Five — four to six weeks before each homecoming; 90-day review

ABOUT THIS TOOL One plan, built with the missionary — not for them — that gathers everything the team will handle around a homecoming, so the family does not arrive to a to-do list. Chapter IV-2 is the practice behind every line.

WHEN TO USE Begun by the coordinator with the missionary 4–6 weeks before arrival; reviewed at the first team meeting after landing and at the 90-day mark.

Missionary Name(s) | Plan begun (date)

Item	Owner	Date	Done
ARRIVAL			
Arrival date			
Airport pickup			☐
First-week meal calendar			☐
Pantry stocked			☐
PROTECTED DECOMPRESSION WINDOW — no church appearances or reports · longer after a hard term			
From / to (dates)			☐
Guarded by (pastoral oversight)			
LOGISTICS — each line has an owner and a date			
Housing			☐
Vehicle			☐
Phones / connectivity			☐
School enrollment (each MK)			☐
Medical / dental catch-up			☐
Other			☐
DEBRIEF — offered to the family, their choice			
Provider (organization / referral)			☐
Scheduled (within 6–8 weeks of arrival)			☐
Funding (per written posture, Tool 3)			☐

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Each family member's debrief noted, MKs age-appropriately:

MK PLAN — PER CHILD

Name	School and social transition notes	MK Lead's home-season contact rhythm

CHURCH CALENDAR AGREEMENTS — SPEAKING AND REPORT REQUESTS, COLLECTED BY THE COORDINATOR

Accepted — the missionary's list	Declined with thanks

Review: first post-arrival meeting (date)

Review: 90-day mark (date)

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TOOL 17

Care Discernment Review

Phase Five — end of Year One, Year Three, and at major transitions

FREQUENCY End of Year One; Year Three; at each major transition

PRIMARY USERS Full Care Team with Care Coordinator

ABOUT THIS TOOL Care Discernment is the practice of stepping back — at defined thresholds — to ask whether the care this team is providing still fits this missionary in this season. It is distinct from the Support and Care Alignment Review (Tool 14), which asks how well the team is functioning. This tool asks a prior question: Is the team still functioning in the right direction? Three thresholds structure the review: End of Year One, when early patterns have been established and care should be sharpened; Year Three, when familiarity can breed blind spots; and Major Transitions — re-entry, field change, crisis recovery, or term end — when the missionary's needs are most likely to have shifted. At each threshold, the team moves through a set of discernment questions together and reaches a documented conclusion about what the next season of care should look like.

NOTE Always include the missionary's voice before finalizing the team's discernment conclusions. Complete the threshold that applies, then the Missionary Voice, the Annual Health Check, and the Discernment Summary.

Missionary Name(s)	Field / Location	Date of Review

Threshold: ◯ End of Year One ◯ Year Three ◯ Major Transition

THRESHOLD 1 — END OF YEAR ONE · COMPLETE AT FIRST ANNUAL RENEWAL

The first year is formative. By the end of it, the team has learned more about the missionary than they knew at the start — and the missionary has learned what this team is actually like. This discernment conversation asks: given what we now know, what shape should care take for the next two to three years?

› What have we learned about this missionary — their patterns, their strain signals, their needs — that we did not know a year ago?

› Are our current roles still the right fit, or have we discovered that different gifts are needed for this particular person?

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› Is the missionary genuinely trusting this team — or are they still managing their image with us? What evidence points either direction?

› What did we miss or underserve in Year One that we need to be more attentive to going forward?

› Is pastoral leadership engaged at the right depth for where this missionary is?

› Additional Observations — anything unexpected or significant that surfaced in this conversation:

THRESHOLD 2 — YEAR THREE · COMPLETE AS THE TEAM ENTERS ITS THIRD YEAR

Long familiarity is an asset. It is also a risk. A team in relationship for three years can develop blind spots — domains where they stopped asking because the answers used to be stable. The year-three review asks: are we still asking the right questions, or have we begun managing a relationship rather than attending to a person?

› Are there domains of this missionary's life we have not genuinely assessed in the last six months? Name them specifically.

› Has the missionary's world changed significantly — new assignment, team conflict, family transition, health concern — that has not yet been fully addressed in care?

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› Are we as a team still bringing the same quality of attention we brought in Year One, or has our engagement become more routine than attentive?

› Does this missionary have adequate local community and access to professional support if needed?

› What would this missionary say, if asked honestly, about how well this team is currently serving them?

› Additional Observations — anything unexpected or significant that surfaced in this conversation:

THRESHOLD 3 — MAJOR TRANSITIONS · USE AT RE-ENTRY, FIELD CHANGE, OR CRISIS RECOVERY

Every major transition — returning home on furlough, ending a term, moving to a new field or role, recovering from a crisis — is a discernment threshold regardless of when in the team's life it occurs. Transitions routinely require more care than the current rhythm provides.

› What does this missionary need from this team during this specific transition that they are not currently receiving?

› Who on the team is best positioned to increase contact and presence during this season?

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› Are there practical needs this transition will surface — re-entry housing, finances, MK care, professional support — that require specific planning?

› After this transition stabilizes, what does sustained presence look like — and when will the team re-assess?

› Additional Observations — anything unexpected or significant that surfaced in this conversation:

MISSIONARY VOICE — COMPLETE THIS SECTION BEFORE FINALIZING DISCERNMENT CONCLUSIONS

> Before the team draws conclusions at any threshold, the missionary's own perspective should be directly elicited. Ask them: How are you experiencing the team's care right now? What do you need more of? What is less helpful than it once was? What should we be watching for in you that you cannot always see clearly yourself?

› How is the missionary experiencing the team's care right now?

› What do they need more of — or less of — from this team?

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› What should the team be watching for in them that they cannot always see clearly themselves?

› Anything else the missionary named that the team needs to hold:

ANNUAL CARE TEAM HEALTH CHECK — RATE 1–5; DISCUSS OPENLY AS A TEAM

Once per year, step back from the missionary's situation to assess the team's own health as a care system. Rate each area 1–5. Areas scoring below 3 become priority discussion items.

AREA	RATING
Meeting consistency — Are we meeting monthly as committed? If not, why not?	1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯
Role clarity — Does every team member know their responsibilities and feel equipped?	1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯
Missionary trust — Is the missionary being genuinely honest with this team?	1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯
Responsiveness — When a concern surfaced this year, did the team respond appropriately?	1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯
Leadership support — Is our pastoral contact engaged and do we have what we need?	1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯

DISCERNMENT SUMMARY — WHAT THIS REVIEW CONCLUDES AND WHAT CARE SHOULD LOOK LIKE NEXT

› What is changing in how this team will show up for this missionary in the coming season?

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› What specific adjustments to roles, rhythms, or focus areas are being made?

› What will the team watch for — and when will it next assess whether care is still well-calibrated?

COMPLETED BY

Name	Role	Date

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TOOL 18

Structural Stewardship Guide

Phase Five — at formation, each alignment review, each term renewal

FREQUENCY Formation; each alignment review; each term renewal

PRIMARY USERS Care Coordinator, Pastoral Leadership

ABOUT THIS TOOL Volunteer fatigue is predictable. The Care Team that launches without a structural plan for its own sustainability will eventually collapse — not dramatically, but gradually, the way care always collapses when structure is absent. This guide has three sections: Section 1 documents term structure and succession pathways for all six roles at formation, so that sustainability is built in from the start. Section 2 is a sustainability practices checklist reviewed at each alignment review, ensuring that the conditions for durable care remain in place. Section 3 documents the specifics of each term renewal and transition — organizational memory transfer, overlap periods, and missionary introduction plans. Succession planning is not preparing for failure. It is building a team that can outlast any single member's season of service.

WHEN TO USE At formation — complete Section 1 before the team launches. Define terms and succession before you need them. At each alignment review — revisit Section 2 to ensure sustainability practices remain in place. At each term renewal — complete Section 3 to ensure intentional handoffs and renewed commitments.

Missionary Name(s)

Planned team launch date

SECTION 1 — TERM STRUCTURE AND SUCCESSION · COMPLETE AT FORMATION

Define every role's term and succession pathway before the team launches. A team with undefined terms will struggle to transition gracefully when the time comes.

Role	Person in Role & Term End Date	Identified Successor	Successor Introduction to Missionary — Planned Date
Care Coordinator			
Relational Liaison			
Logistics Support Lead			
Spiritual Encouragement Lead			
MK Lead			
Secondary / At-Large Member			

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SECTION 2 — SUSTAINABILITY PRACTICES · REVIEW AT EACH ALIGNMENT REVIEW

- ☐ Staggered terms are in place — not all members renewing at the same time.
- ☐ Each team member's current capacity has been checked — no one is carrying an unsustainable load.
- ☐ The Care Coordinator has a named successor in view.
- ☐ Meeting minutes and care records are stored where every team member can access them.
- ☐ The team's covenant, care maps, and role guide are stored where a new coordinator could find them.
- ☐ A review of team health has been conducted and any concerns have been named and addressed.
- ☐ The three first-year booster conversation dates are calendared or have been completed (months 3, 6, 12).

Notes from sustainability review:

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SECTION 3 — TERM RENEWAL AND TRANSITION · COMPLETE AT EACH TERM RENEWAL

Every role transition is an opportunity to strengthen the team or to lose organizational knowledge. Complete this section for each member transitioning out. A minimum 4–6 week overlap period is strongly recommended to allow relationship transfer before the outgoing member steps back fully.

TRANSITION RECORD 1

Date	Member transitioning	Role

What organizational memory should be transferred to the next person in this role?

How will the outgoing member introduce the missionary to their successor before the full transition?

Overlap period planned (recommended minimum: 4–6 weeks):

Additional notes for this transition:

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TRANSITION RECORD 2

Date	Member transitioning	Role

What organizational memory should be transferred to the next person in this role?

How will the outgoing member introduce the missionary to their successor before the full transition?

Overlap period planned (recommended minimum: 4–6 weeks):

Additional notes for this transition:

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Name	Role	Date

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TOOL 19

Ending Protocol

Phase Five — when any ending is named

ABOUT THIS TOOL The structural opposite of the quiet fade: however an ending arrives, the same protocol closes the team — named, finished, and released with gratitude. Chapter IV-3 is the practice behind every line.

WHEN TO USE Opened by the coordinator with pastoral oversight when any ending is named; filed with the formation records at completion.

Missionary Name(s)	Protocol opened (date)

THE ENDING

Type: ◯ Missionary's season ◯ Team's season ◯ Transfer of care ◯ Hard ending

Item	Who / notes	Date	Done
Ending named			
Communicated to the team			☐
Communicated to the missionary			☐
Communicated to the congregation (by oversight, as agreed with the missionary)			☐
THE CARE QUESTION — required before the final meeting whenever care remains			
Ongoing care carried by			
Agreed on			☐
Introduced to the missionary			☐
FINAL CARE MAP CONVERSATION			
Held			☐

Handoff items (with the missionary's consent):

Item	Who / notes	Date	Done
RECORDS DISPOSITION — confidentiality outlives the team			
Transferred with consent			☐
Archived under oversight's confidential keeping			☐
Destroyed			☐

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Item	Who / notes	Date	Done
MK contact log handled (per the church's child-protection retention policy)			☐
TEAM EVALUATION			
Tool 21 completed and reviewed with pastoral oversight			☐
THE TABLE			
Closing gathering held — blessing exchanged, team released			☐

Coordinator	Pastoral oversight	Date

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TOOL 20

Faithful Partnership Discernment Instrument

Phase Five — after reconciliation, when the partnership itself is in question

ABOUT THIS TOOL For the question that follows genuine reconciliation: we are at peace — should we still be working together? Chapter IV-4 carries the framework; this instrument hosts the process. It applies to ministry partnerships only — never to marriage — and it is never a substitute for the biblical process: Movement 1 gates everything.

WHO IS IN THE ROOM The parties; a facilitator who is not a party (pastoral oversight, the organization's member care office, or a mutually trusted third); the Care Team coordinator only if the missionary asks. Outcomes are recorded for the authority that owns them.

Parties	Date

MOVEMENT 1 — REVIEW THE BIBLICAL PROCESS

What has been confessed, forgiven, and directly addressed — and what remains? Anything incomplete pauses this instrument and returns there.

MOVEMENT 2 — THE FIVE QUESTIONS (EACH PARTY ANSWERS IN WRITING, WITH EVIDENCE, BEFORE COMPARING)

1. Have we been faithful to the full biblical process?

Party A	Party B

2. Have we achieved genuine relational peace, even without full agreement?

Party A	Party B

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3. Is there sufficient trust to actually fulfill our shared responsibilities — dependability and shared vision, not forgiveness alone?

Party A	Party B

4. Is the conflict consuming disproportionate resources — counted: the meetings, supervision hours, and emotional energy of the past six months?

Party A	Party B

5. Would restructuring — a different role, supervisor, team, or location — better serve both the people and the mission?

Party A	Party B

MOVEMENT 3 — THE OUTCOME, NAMED

◯ RENEW ◯ RESTRUCTURE ◯ RELEASE

- **Renew** the partnership as it stands — repaired commitments written below.
- **Restructure** — the different arrangement specified, with what each party carries into it.
- **Release** — gracious realignment, with the relational commitments (peace, honor, prayer) that survive the working partnership.

The outcome, its commitments, and its reasons:

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MOVEMENT 4 — REVIEW

Discernment is confirmed by fruit.

Review date	Party	Party

Facilitator	Receiving authority	Date

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TOOL 21

Team Evaluation

Phase Five — after the team's first six months; again at every ending

FREQUENCY After the first six months; at every ending — as part of the Ending Protocol (Tool 19)

PRIMARY USERS Care Coordinator

ABOUT THIS TOOL This tool is designed to surface what the team has learned in its first six months with the Crossing Cultures Care Teams model. It is not about missionary wellbeing — it is about model fidelity, tool usefulness, and what the team still needs. Section 2 evaluates the core tools on usage and helpfulness. Sections 3–6 address meeting rhythm, escalation clarity, missionary response, where the team was not ready, and recommendations for the season ahead. The coordinator reviews the completed form with pastoral oversight and keeps it with the team's records.

Church / Organization

Date of completion

Care Coordinator completing this form

Months of operation

SECTION 1 — LAUNCH AND FORMATION

› What did your team find most helpful during the formation phase?

› What was most difficult or confusing during formation?

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SECTION 2 — TOOL USAGE

TOOL	USED?	HELPFUL?	NOTES
Tool 12 Coordinator Pre-Launch Checklist	◯ Yes ◯ No ◯ Partially	◯ Very ◯ Somewhat ◯ Not particularly	Notes
Tool 11 Covenant of Shared Stewardship	◯ Yes ◯ No ◯ Partially	◯ Very ◯ Somewhat ◯ Not particularly	Notes
Tool 1 Leadership Readiness Assessment	◯ Yes ◯ No ◯ Partially	◯ Very ◯ Somewhat ◯ Not particularly	Notes
Tool 13 Missionary Care Mapping Workbook	◯ Yes ◯ No ◯ Partially	◯ Very ◯ Somewhat ◯ Not particularly	Notes
Tool 9 Role Clarification Guide	◯ Yes ◯ No ◯ Partially	◯ Very ◯ Somewhat ◯ Not particularly	Notes
Tool 14 Support and Care Alignment Review	◯ Yes ◯ No ◯ Partially	◯ Very ◯ Somewhat ◯ Not particularly	Notes
Tool 15 When Strain Deepens	◯ Yes ◯ No ◯ Partially	◯ Very ◯ Somewhat ◯ Not particularly	Notes
Tool 17 Care Discernment Review	◯ Yes ◯ No ◯ Partially	◯ Very ◯ Somewhat ◯ Not particularly	Notes
Tool 18 Structural Stewardship Guide	◯ Yes ◯ No ◯ Partially	◯ Very ◯ Somewhat ◯ Not particularly	Notes

Additional Tool Usage Notes

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SECTION 3 — MODEL FIDELITY

› Are monthly meetings happening as committed? If not, what has gotten in the way?

› Are all eight domains of the Care Mapping Workbook being addressed? Any being consistently skipped?

› Is the escalation pathway clear to all team members and to pastoral leadership?

SECTION 4 — MISSIONARY RESPONSE

› How has the missionary responded to the Care Team model? What feedback have they given (formally or informally)?

SECTION 5 — WHERE THE TEAM WAS NOT READY

› Is there a situation your team has faced that it was not equipped to handle well? What would have helped?

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SECTION 6 — RECOMMENDATIONS FOR THE SEASON AHEAD

› If you could change one thing in how this team works, what would it be?

› Is there a practice, tool, or conversation the team should add?

> **Thank you.** Your first six months are the best evidence of what this team needs next. Bring this form to pastoral oversight, keep it with the team's records, and return to it at the next alignment review.

COMPLETED BY

Name	Role	Date

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