

The Mission Director (MD) is the primary on-site representative of Alliance for Smiles (AfS) and has the authority to act on behalf of Alliance for Smiles in an emergency (though all medical decisions must be made by the medical leads). The MD is responsible for the safety and well-being of the team and needs to be able to deal with all diplomatic and logistical challenges in a calm and professional manner.

Qualifications

Strong leadership and communication skills

- The Mission Director (MD) must be willing to act as a strong leader who leads the team, liaises with the local partners, advances the mission's goals and follows the protocols of AfS.
- The MD helps the team bond and works to unite both medical and non-medical volunteers. Thus, a calm, positive attitude and conflict resolution skills are very important.

Adaptable and able to communicate working standards

- Since the team is working in a foreign country which may have unfamiliar customs, foods and living conditions, the MD should familiarize themselves with local customs and information
- Must be a diplomatic problem solver and make the team aware of the standards of behavior set by AfS and assure that protocols are followed.

Organizational skills

- The MD must make sure that the clinic, surgery days and other day to day activities support and maximize the ability of the team to **safely** operate on as many children as possible.
- The MD works with the medical leads, especially the Lead Nurse, to accomplish these goals.

Able to work in difficult conditions

- Since the days are long and the work is intense, the MD should be in good health and able to sustain long work hours, as needed.

Be trained and certified by AfS

- The MD will need to go through Mission Director training and a pre-certification process, and if possible, visit the AfS warehouse to help pack the medical supplies prior to a mission.
- The MD should also have been in a leadership position (preferably Assistant Mission Director) on at least one prior AfS mission.

Job Description and Expectations

Before Mission

1. Study the Mission Director Binder

- a. Prior to the mission, AfS will send the MD a **Mission Director Binder**. The MD should be familiar with the contents of the Mission Director Binder, which includes:
 - i. All mission role descriptions and in-service trainings
 - ii. Medical guidelines and standards regarding patient care
 - iii. Emergency procedures as they exist
 - iv. Timelines, schedules, and logistics (e.g. flight schedules)
 - v. Team information and other organizational documents

2. **Communicate mission information to the team**
 - a. The MD sends out a series of pre-mission memos to the team conveying necessary information related to schedules, logistics, housing, and other relevant matters.
 - b. These memos will be provided by the office and can be edited as each MD sees fit.
 - c. The goal is to begin the team bonding process well in advance of the actual mission and ensure the team has all the information they need to prepare themselves.
3. **Create a group communication channel for the team**
 - a. Prior to the mission, the MD should create a mobile messaging group (such as a WhatsApp group) for the team and ensure that all team members have joined. This messaging tool is essential for real-time communication during the mission. If this technology is not familiar to the MD, the AfS office can help.
4. **Conduct a pre-mission conference call with the team**
 - a. The MD conducts a pre-mission conference call with all team members approximately one week prior to departure. The AfS staff will help with coordinating this and will have at least one team member on the call to assist in answering questions and preparing the team.
5. **Monitor team flight schedules**
 - a. The MD, working with the travel agent and AfS office, is responsible for ensuring that all team members are on the correct flights, and that flights are on time.
 - b. If a flight is delayed or a team member misses a connection, the MD will communicate with the team member, and will work with the travel agent to ensure that they arrive at the final destination. WhatsApp makes this type of communication much easier.
6. **Monitor list of supplies and equipment**
 - a. Prior to departure, the AfS office will email the MD a packing list of supplies and equipment. This list will include item quantities, box numbers, and where the boxes are located (if coming from multiple areas, e.g. if team members are departing from separate airports).
 - b. The MD and Lead Nurse coordinate the smooth transfer of all supply cases between connecting flights, negotiating, if necessary, for reduced charges for additional boxes.

Immediately After Arriving in Country

1. **Account for all supplies and equipment**
 - a. On arrival in the destination country, the cases of supplies will need to clear customs and accompany the team to its ultimate destination.
 - b. The MD, with the assistance of the Lead Nurse, must be certain that all supplies and equipment are accounted for at the airport, and later at the hospital.
2. **Prepare all team members to be culturally sensitive and politically correct.**
 - a. Issues to be avoided include any negative comments about any aspect of the host country, including their healthcare system, culture, politics or customs.
 - b. No references to the economics of the country, such as being a so-called “third world country”, should be spoken.

- c. Comments should focus on the partnership of the team and the host country to bring positive changes in the lives of children and families.
3. **Represent Alliance for Smiles during the mission**
 - a. The Mission Director is **the official on-site spokesperson for AfS** and should **coordinate all media requests** during the mission
 - b. Initial media and press contacts are likely upon landing at the international airport, and, again, upon arrival in the host city.
 - c. The press may seek detailed briefings of medical personnel, including photo sessions.
4. **Confirm local transportation needs and arrangements**
 - a. Once on site, the MD confirms the local transportation needs and arrangements between the airport, hotel, and hospital
5. **Organize the team at the hotel**
 - a. Upon arrival at the hotel (or other housing), the MD will make room assignments, announce the current & following day's schedule, and assist with luggage disbursement.
 - b. As soon as practical, the MD will issue name badges and apparel. All team members should wear name badges and AfS apparel for official group activities.
6. **Keep team members on task**
 - a. Team members should be made aware that they are expected to be present for assignments, common meals and team meetings, except when excused by the MD.
7. **Check in with and motivate team members**
 - a. At morning & evening meals, the Mission Director should be prepared to provide positive motivation and inspiration for the team, reminding them of the life-changing impact their selfless volunteerism is making possible.
 - b. During the evenings, the MD should also assist the photographer in collecting the days inspiring stories for the Daily Briefing by including a call for stories to the team at the end of evening announcements.
 - c. Individual complaints and conflicts between team members are better handled privately.
 - d. Non-medical volunteers should be reminded that their job is always to support and assist the medical staff.
8. **Check in with the hospital before Opening Clinic**
 - a. The MD and the Lead Nurse, along with whichever medical volunteers the Lead Nurse deems appropriate, go to the hospital as soon as possible to:
 - i. ensure that supply cases have been delivered to a safe area
 - ii. review the clinic site
 - iii. make sure that ward rooms and operating rooms are available and adequate.
 - b. The MD interacts with any hospital administrator who may be present in a courteous and friendly manner.

After Arriving at Hospital on Opening Clinic Day

1. **Organize supplies and assist the Lead Nurse**
 - a. At the opening clinic, the MD should assist the Lead Nurse in organizing the supplies, medical stations, and volunteer duties.
 - b. Other volunteers will be assigned to specific tasks, such as photography, record keeping, translating, and assisting in the examination rooms.
2. **Remind non-medical volunteers to not engage in medical activities**
 - a. As a reminder, non-medical volunteers, including the MD, should not perform, or be perceived to perform, any medical procedures on patients, no matter how minor.
3. **Hold a daily team meeting at the beginning of each day**
 - a. Each morning at breakfast, the MD should conduct a team meeting to discuss the day's upcoming schedule and activities.
 - b. The MD should first ask each medical lead to discuss any issues they may want to bring up, then ask the other team members if they would like to discuss anything.
 - c. The MD should wrap up with a quick pep talk reminding them of the lives they will change and the importance of their work as a team.
4. **Organize team transportation to and from the hospital**
 - a. Throughout surgery days, the team may depart for the hospital in two groups: one group to set-up for surgeries and a smaller second group, including recovery room personnel.
 - b. The MD should always be part of the first group to arrive and should be among the last group to leave at the end of the day.

Near End of Mission

1. **Attend the Host's closing ceremony**
 - a. A closing ceremony will usually be planned by the hosts, often in conjunction with the hospital. The most important function of this ceremony will be the recognition of team volunteers and local volunteers. Lists should be exchanged to ensure that no one is overlooked. Gifts and certificates provided by AfS may be presented.
2. **Take a team photo**
 - a. The MD should work with the photographer to organize a team photo at some time during the mission, making sure that all volunteers wear the AfS t-shirt. The MD should make a collection of any newspaper articles that might appear during the mission.
3. **Take inventory of equipment**
 - a. At the end of the mission, left over consumable supplies may be donated to the hospital or stored for a future mission. Durable equipment will be returned to the US.
 - b. The MD should work with the Lead Nurse to ensure that these tasks are handled properly, that an accurate inventory is made of stored supplies, and that the cases are properly packed and prepared.

4. Ensure equipment and supplies return to AfS

- a. The MD and Lead Nurse are responsible for ensuring that the supply cases are accepted and loaded onto the plane.
- b. Upon arrival in the US the MD, Lead Nurse, or a designee must see to it that the cases are cleared through customs, then delivered to an AfS representative.

After Mission

1. Prepare a Mission Report

- a. Immediately following the mission, the MD will prepare a Mission Report for AfS, including statistics on the number and type of surgeries, issues arising during the trip (including resolutions), and recommendations for the future.

2. Complete a post-mission evaluation

- a. The MD will fill out a post-mission evaluation survey sent by AfS

3. Debrief Meeting

- a. The AfS office will organize an online debrief meeting to include the MD, mission medical leads, and other relevant parties.

Commonly Recurring Problems

Communication

Effective communication is vital for the success of a mission at all levels, including:

- Amongst the team regarding logistics, responsibilities, schedules, etc.
- With the hosts, hospital, hotel, and volunteers
- With patients and their families
- With the media and press

Translation is an added difficulty in a foreign country, and the consequences of poor or mistaken translation can be serious if not actually life threatening. Use all available resources to ensure the most concise, accurate, and appropriate translations.

Illness

Team members may become ill. The most common ailments are stomach disorders, diarrhea, and upper respiratory ailments. All illnesses should be immediately treated by the pediatrician, who is also the team doctor.

Uncooperative Team Members

The Mission Director may observe or be informed by other team members of lazy, uncooperative, bad mannered or ill-tempered volunteers. To avoid exaggerated rumors, the MD should discreetly

investigate the incidents, gathering all relevant perspectives, and address the problems in a non-confrontational manner.

When appropriate, one-on-one counseling is recommended. Confrontation in front of a group is inappropriate, often detrimental, and is to be avoided. Repeated or severe misconduct may result in a team member being asked to return home pursuant to the Alliance for Smiles Volunteer Agreement.

Conflict Resolution

Team members work long hours, often under great stress, especially in the case of medical emergencies. Occasionally, personality and other conflicts will occur. In such cases, the MD must serve as a conciliator and mediator.

The team member(s) may be reminded that they are all volunteers dedicated to fulfilling a medical mission and it is for the benefit of all, including patients, families, and local partners, that the team behaves maturely, responsibly, and with as much consideration, respect, and empathy as possible.

Maintaining High Spirits

The MD must always strive to keep the team spirit high, starting with a positive friendly attitude and lots of smiles. Let each member know they are important, appreciated and valued. Other methods of maintaining team spirit include happy hours, special meals, and sharing copies of news articles relevant to the mission.

Attendance at Social Functions

Just as our team is working hard, so are the local volunteers. Their contributions must be constantly recognized in person and in team communications. It is important that team members attend any formal events, especially the closing ceremonies. These events will be kept to a minimum.

Medical Decisions Must Be Made by Medical Personnel

The MD must emphasize and ensure that **medical decisions are made only by medical personnel**. Non-medical volunteers are not approved to practice medicine on the mission and should not attempt to do so – **even if they are licensed to practice medicine in the United States**.

Often, the patients and their families cannot make any distinction between a non-medical and a medical volunteer; they all look alike in hospital clothing. So, even if an answer to a medical question is known by a non-medical volunteer, they should refrain from answering, and defer the question to appropriate medical personnel.

Overall, the role of MD is one of the most important on any mission and serves many functions to ensure the support and success of the team and the mission.

Thank you for being willing to undertake this crucial role. Please know that we – the team at AfS – are here to best prepare and support you. We are deeply grateful that you are willing to change lives and smiles with us!