



Annual Survey Questions for U.S. Partners

1. What is your hospice name (if you are part of a multi-site organization, please specify location)?
2. What is the name of the person completing this form?
3. What is the name of Global Partner?
4. How many years have you had this Partnership?
5. What is (are) the name(s) of the primary contact(s) for Global Partners at your US hospice?
6. What is (are) the email address(es) of the primary contact(s) for Global Partners at your US hospice?
7. What is (are) the name(s) of the primary contact(s) for your Global Partner abroad?
8. What is (are) the email address(es) of the primary contact(s) for your Global Partner abroad?
9. In the last year, did your hospice have a Partnership Committee?
10. In 2013, did your hospice have a person on staff whose assigned responsibilities included coordinating the Global Partnership?
11. How many total hours per week, on average, are devoted by staff and/or volunteers in the coordination of Partnership activities?
12. Did your hospice visit your Global Partner in the last year?
13. What was the reason and/or focus for the trip(s)?
14. Did your Global Partner visit your hospice in the last year?
15. What was the nature and/or focus of the trip(s)?
16. In the last year, how often did your hospice and your Global Partner communicate with each other?
17. In the last year, how did you communicate with your Global Partner?
18. What type(s) of projects and/or activities did your hospice and your Global Partner collaborate on in the last year?
19. In the last year, was funding for your Global Partnership included in your organization's or foundation's budget?
20. What opportunities did your hospice offer to only your staff for contributing directly to your Global Partnership?
21. Aside from direct contributions from staff, in what ways did your hospice raise money for your Global Partnership?
22. Overall, how engaged was your organization's staff in your Global Partnership in the last year?
23. Overall, how engaged was your Executive Leadership in your organization's Global Partnership in the last year?
24. Overall, how engaged was your Board of Directors in your organization's Global Partnership in the last year?

25. In what way(s) was your organization able to engage your local community in support of your Global Partnership?
26. Rate the overall level of engagement of your local community in supporting your Global Partnership in the last year.
27. In what ways did your Global Partnership have an impact on your organization in the last year?
28. How would you rate the overall impact your Global Partnership has had on your hospice?
29. How would you rate the quality of the relationship you have had between your hospice and your Global Partner in the last year?
30. How useful was communication from Global Partners for keeping you updated about activities, events, and program changes in the last year?
31. How useful were the resources provided by Global Partners in assisting you to fulfill your role as a Global Partner in the last year?
32. How would you rate the overall process for wiring funds to your Global Partner in the last year?
33. Overall, how would you rate the quality of the support Global Partners provided to you as a US Global Partner in the last year?
34. What additional resources would you like to see Global Partners provide to support for your Partnership?
35. Please share any additional thoughts, comments, or suggestions regarding your experience as a Global Partner.