OAKLAND UNIVERSITY SCHOOL OF NURSING

# NIGHTINGALE AWARDS FOR NURSING EXCELLENCE®

Thank you so much for your nomination. Please read ALL of the information below before submitting your nomination. Failure to follow directions may disqualify your deserving nominee.

#### **Award Eligibility:**

- Nominator must be 18 years or older.
- Current Oakland University Board of Visitors members, and past award winners are not eligible.
- Past nominees and runners-up are eligible for consideration, but must have an updated nomination submitted for the current year. <u>All</u> nominations must be from the current year.
- Nominee demonstrates nursing excellence.

Please note: The Selection Committee may re-categorize a nomination if appropriate. This will be determined on a case-to-case basis for the betterment of the nominee.

All nominations are DUE no later than January 31, 2020 at 11:59 PM.

#### THE FOLLOWING CRITERIA MUST BE MET FOR CONSIDERATION:

SECTION A: Nominee information section must be complete.

**SECTION B:** Documentation must include measurable achievements in nursing, achieved within the past two years. Complete both achievement sections #1 and #2. There is a 1000 character maximum for each achievement section. Each section is scored separately.

**SECTION C:** Description of leadership characteristics and/or behaviors, 1500 character maximum for thissection.

**SECTIONS D**: Signed supervisor support of nomination must be completed by the nominee's immediate supervisor. This signature is required regardless of who is completing the nomination. Must be submitted as an attachment with completed application.

**SECTION E:** One-page recommendation letter, which must be written by an individual other than the nominator. Must be submitted as an attachment with completed application.

Blank sections will be given a "zero" score. Absence of all required sections and documents listed above will result in the nomination NOT being reviewed by the Selection Committee. DO NOT submit until the entire nomination is assembled. Missing sections will disqualify the nomination.

Please submit your completed nomination by email to nightingale@oakland.edu

OR by mail to: OU Nightingale Nominating Committee 433 Meadow Brook Road Human Health Building 3057 Rochester, MI 48309-4401

| SECTION A: Nominee Information                |          |             |
|---|----------|-------------|
|   |          |             |
|   |          |             |
| Professional Credentials                      |          |             |
|   |          |             |
| Nominee Contact Information:                  |          |             |
|   |          |             |
| City:   | _ State: | Zip:        |
| Email:  |          |             |
| Mobile Phone:                                 |          | Work Phone: |
|   |          |             |
| Nominee Education/Work Information:           |          |             |
| Current Professional Title of Nominee:        |          |             |
| Organization/Institution/Agency:              |          |             |
| Highest Degree Earned in Nursing:             |          |             |
| College or University (if known):             |          |             |
|   |          |             |
|   |          |             |
| Supervisor Name & Credentials:                |          |             |
| Title:  |          |             |
| Phone:  | Email:   |             |
|   |          |             |
|   |          |             |
| Nominator's Name & Credentials:               |          |             |
| Nominator Professional Title an Organization: |          |             |
| Home Address:                                 |          |             |
|   |          | Zip:        |
| Email:  |          |             |
|   |          | Work Phone: |
|   |          |             |

Nominee Name: \_\_\_\_\_

| Nomi   | nee Name:   |
|--------|---|
|        | the Award Category that best applies from the following list:  der to support your nomination, the Selection Committee may re-categorize the nomination on a case-by-case   |
| DUSIS. |   |
|        | Advanced Practice Nursing Excellence: Demonstrates excellence in patient care as an advanced practice nurse (nurse practitioner, CNS, nurse midwife, nurse anesthetist, researcher, etc.)   |
|        | <b>Distinguished Alumni Award</b> : Any Oakland University School of Nursing graduate, making meaningful contributions to the field of nursing  |
|        | <b>Emerging Nurse Leader</b> : Champions creative strategies and management in health care service to foster quality health care delivery, enables efficient operation, generates enthusiasm, and fosters team work. (first line manager: nurse manager, assistant nurse manager or supervisor) |
|        | <b>Excellence in Education:</b> Demonstrates innovative educational activities, contributes to quality patient care through education   |
|        | <b>Excellence in Executive Administration</b> : A visionary in leading people and change, builds effective teams, develops leaders and inspires others to action (those holding director level positions and above)   |
|        | <b>Excellence Nursing in the Community:</b> Delivers innovative nursing services in a non-hospital setting, demonstrates compassionate care in an exemplary way   |
|        | <b>Post-Acute Care and Specialty Nursing Award:</b> Contributes to and advances a particular area of nursing such as rehabilitation, homecare, long-term care, dialysis, oncology, political or legal arenas, case management, entrepreneurial activities or military                           |
|        | <b>Excellence in Staff Nurse Practice:</b> Demonstrates excellence in direct patient care delivered in a hospital, clinic and/or sub-acute care facility. **TWO awards will be presented in the Staff Nurse category**  |
|        | <b>Pioneer in Nursing Research:</b> A visionary or groundbreaking researcher with a passion for advancements in nursing through research.   |

| SECTION B: EXCEPTIONAL ACHIEVEMENTS IN NURSING   |
|--|
| Initiatives, special projects, quality improvement, cost saving initiatives, customer satisfaction surveys which |
| illustrate measurable achievements, etc. Clearly indicate the achievement as an initiative and its related       |
| outcome/impact. Achievements must be recent, within the last two years.  |
| C   1 - POTI   -   1   1/4   1/2 There is a 4000   heart to be a few and be a little and the                     |
| Complete BOTH achievement #1 and #2. There is a 1000 character maximum for each achievement.                     |
| DO NOT include Attachments, PowerPoint slides, word/pdf documents to supplement achievements. They will NOT      |
| be considered. Each achievement is graded separately.  |
|  |
|  |
| Ashiovement #1 /1000 sharestor mayingure)  |
| Achievement #1 (1000 character maximum):   |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
| Achievement #2 (1000 character maximum):   |
| <u> </u>   |
|  |
|  |
|  |
|  |

Nominee Name: \_\_\_\_\_

| Nominee Name: |  |
|---------------|--|
|               |  |

### SECTION C: LEADERSHIP CHARACTERISTICS AND/OR BEHAVIORS

Describe the nominee's personal attributes which demonstrate their contributions to the nursing profession such as exhibits respect for others, acts with integrity, goes above and beyond to get the job done, shows passion for work, brings creative solutions and translates ideas into actions, respects and encourages diverse ideas and opinions, etc.

Provide specific examples of HOW these characteristics are demonstrated. (1500 character maximum)

| Nominee Name:   |
|---|
| SECTON D: SUPERVISOR SUPPORT  |
| NOTE:   |
| This page is required REGARDLESS of who completed the nomination.   |
| If this page is not included, the applicant will not be considered and the nomination will not be sent for review by the Selection Committee. |
|   |
| l,  |
| (Supervisor's printed name)   |
| the supervisor of, (Nominee's printed name)   |
| support their nomination for the Nightingale Awards for Nursing Excellence® in the category of  |
| (Category)  |
| This nominee is currently is a licensed nurse in good standing with their employer and has not had any  |
| disciplinary actions taken against them.  |
|   |
| Sincerely,  |

(Date)

(Signature of Supervisor)

| Nominee Name: |
|---------------|
|---------------|

## **SECTION E: LETTER OF RECOMMENDATION**

NOTE: Recommendation must be written by a person other than the nominator or this will section will receive a ZERO score.

Please submit a one-page Recommendation briefly describing the nominee's exceptional achievements within their specific award category, including any details about their leadership characteristics and/or qualities that makes them worthy of the Nightingale Award for Nursing Excellence<sup>®</sup>. A separate letter of recommendation is acceptable but MUST BE submitted with the entire packet – do not submit unless all parts/documents are together.