

# AWARD NOMINATION FORM 2024



Presbyterian Support  
Central

— Our services —



## INSTRUCTIONS

**Nominations for the 2024 Quality and Innovation Awards must be received no later than 5pm, 31 May 2024.**

Please answer all of the following questions, unless otherwise noted. You should provide evidence of the improvements/outcomes, where possible. This could be in the form of audit reports, graphs, client feedback, testimonials from colleagues, photos, letters of support – whatever you think will help to demonstrate the positive impacts this person/team/project is having. **Please also mention everyone involved in the project in your nomination.**

Email your completed and approved form and supporting evidence to [events@psc.org.nz](mailto:events@psc.org.nz) with the subject line of 'PSC Quality and Innovation Awards'.

Date of submission

Category

## MY DETAILS

This nomination is being made by:

Job title/position of person making nomination:

Phone number of person making nomination:

Email address of person making nomination:

Location/site of person making nomination:

This nomination has been approved by:

*All nominations must be approved by site managers.*

## AWARD CATEGORIES

**Beyond the call of Duty**

This award acknowledges individuals or teams who consistently exceed expectations and make a positive impact on the lives of residents/ clients or the organisation. Any staff member or volunteer from PSC, Family Works or Enliven can be nominated.

**Best Team**

This award recognises successful team collaboration that has resulted in positive outcomes for PSC and/ or clients, residents and stakeholders. This award is open to staff and volunteers across PSC.

**Demonstrable Improvement to the Lives of Residents/ Clients**

This award recognises initiatives that improve social and/or health outcomes for residents/clients with innovative and sustainable approaches. This award is open to staff and volunteers across PSC's business units.

**Volunteers**

This award acknowledges and showcases our dedicated and successful volunteers. The judges are looking for nominations highlighting successful, volunteer-led initiatives and outstanding dedication. Any PSC, Enliven or Family Works volunteer or volunteer group can be nominated.

**Best Eden Alternative Initiative**

This award is given to the Enliven team or volunteers who have implemented the Eden Alternative philosophy most effectively to promote companionship, spontaneity, and usefulness among our home residents and clients. All Enliven staff and volunteers can apply for this award.

**Best Family Works Outcome Story**

This award recognises the story(s) that best demonstrates a project, initiative or intervention which significantly improved the outcome(s) for a child, young person, family member or other group. This category is open to all Family Works staff.

**Improved Health & Safety**

This award recognises innovative projects and/ or quality initiatives that have improved health and safety at PSC. This award is open to staff across all PSC's business units.

**Improved Working Environment for Staff**

For the project or initiative that has most improved the working environment for staff including efficiencies and/ or fostering a supportive and encouraging team atmosphere.

## NOMINATION DETAILS

**Name of project and/or team**

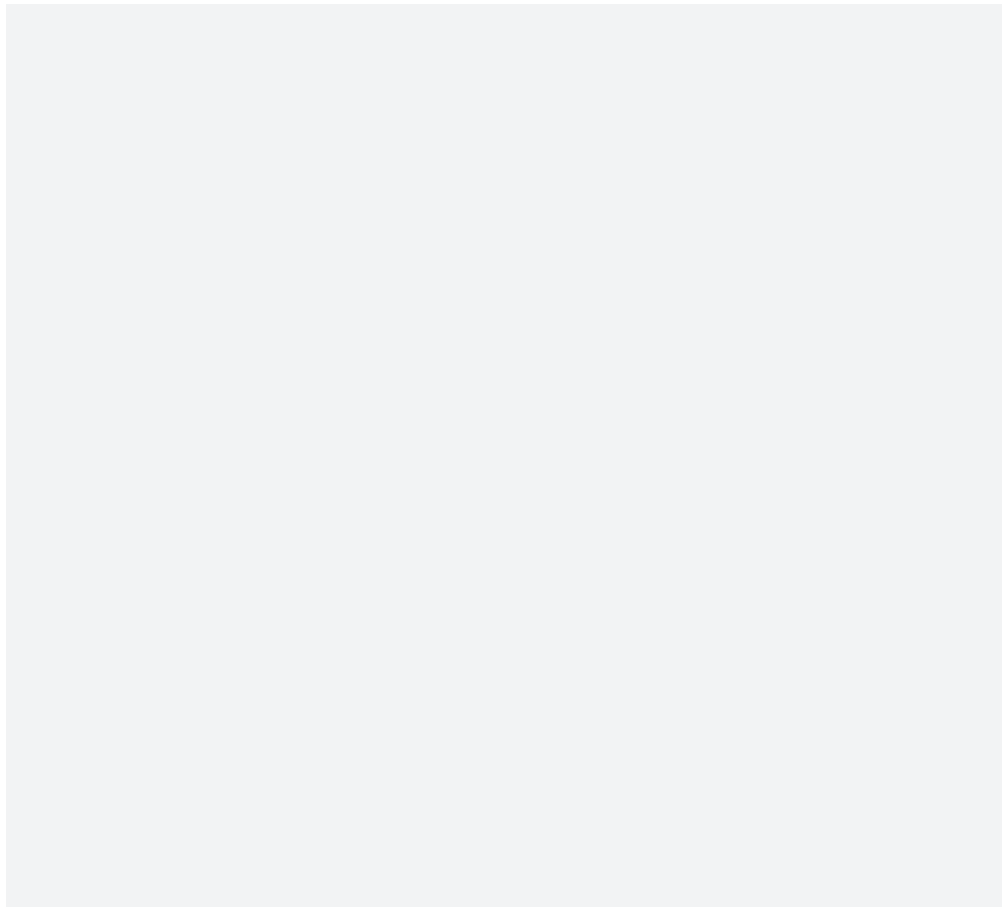
**Name(s) and position(s) of all team members.**

*Please include first name, surname and job title/position of **all** people that should be recognised should this nomination be successful in winning an award.*

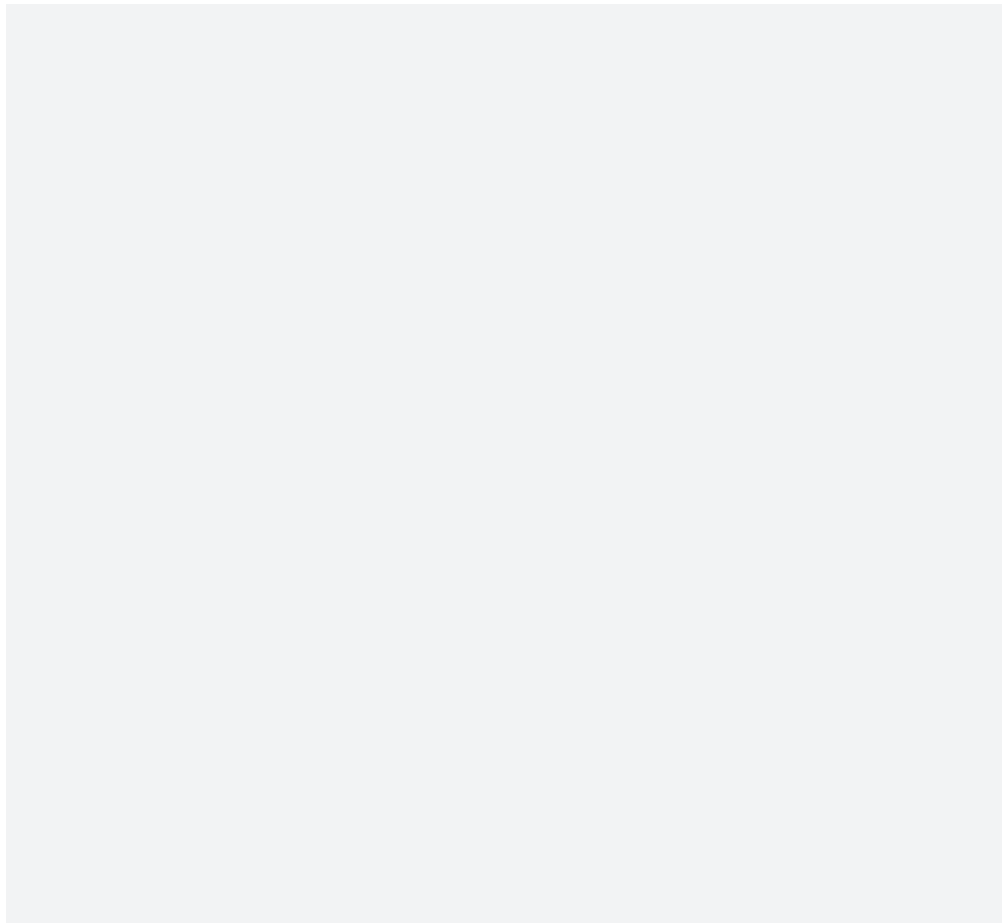
**Describe the project or initiative.**

*The description should cover what has been done and why, how it was done and briefly what has been achieved.*

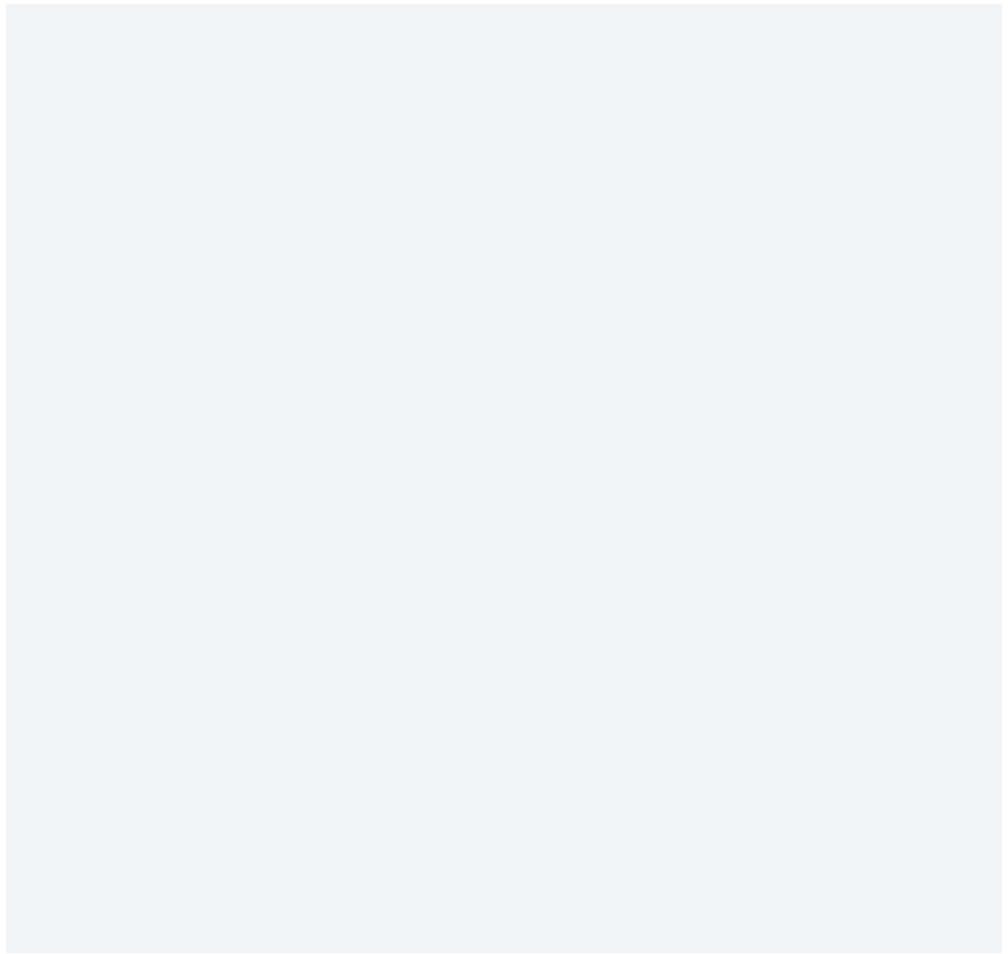
**Benefits/ Impact?** *Please list.*



**Evaluation of effectiveness:**



**Anything else we should know?:**



**Provide evidence to support your nomination.**

*You should list the evidence here and then provide copies of the evidence as part of your nomination. For examples of evidence please see the Q&I Awards Nomination Information Pack.*



**Please attach relevant evidence supporting your nomination when you send the nomination form.**

**If you need more space to elaborate, you can submit a separate attachment.**

## COMPLETION CHECKLIST

Please tick the following when completed:

I/we have answered all the questions.

I/we have proofed our nomination and checked for inaccuracies.

I/we have had a colleague read and give feedback on the nomination.

I/we have involved the site manager in this nomination and they have endorsed the nomination – see details below.

## SITE MANAGER'S APPROVAL

In signing this nomination, I confirm that I have checked the nomination to confirm it is accurate and that I endorse this nomination.

Manager's name

Additional note  
from Manager

Today's date