

**2008**  
**EXCELLENCE IN EDUCATION AWARDS**  
**Children's and Women's Health Centre of British Columbia**

**NOMINATION FORM**

**What are the Excellence in Education Awards?**

The Excellence in Education Awards, offered every two years, recognize C&W staff for education activities in clinical teaching/mentoring, for developing education programs or major education events, and for resource developments for clinical or patient and family education.

**Who can be nominated?**

Nominees may include any staff, students, patients, family members or community partners who have worked on an educational initiative or in an educational capacity at C&W within the last two years. Group projects must include at least one C&W employee. Nominees must have been employed by or affiliated with C&W within the last two years.

**How are the Nominations Assessed?**

The nominations are assessed by a multi-disciplinary committee according to the following criteria:

- Leadership in Education
- Contribution to staff, patient & family or student education
- Demonstrated effectiveness for intended group
- Impact on knowledge, care, safety, costs, etc.
- Creativity, innovation and quality in design, content and delivery
- Quality of teaching, mentoring strategies
- Evaluation results, testimonials, indications of positive outcomes

The nomination form, examples, and other relevant documents submitted by the nominator are used by the committee in assessing nominations. Each year a few Awards with Distinction are selected for those education initiatives which the committee considers outstanding according to several of the evaluation criteria.

**Where do I obtain and submit nomination applications?**

1. **Online** access at [http://infosource.cw.bc.ca/cw\\_edserv/content/awards/intro.asp](http://infosource.cw.bc.ca/cw_edserv/content/awards/intro.asp)
2. **E-mail** submission to [jsimpson@cw.bc.ca](mailto:jsimpson@cw.bc.ca) or
3. **On-site** Learning and Development at B203 SHY, or at Media Production and Services

**Deadline** for nomination submissions is **February 22, 2008**. Please fill the form and attached documents or resources that will support nomination evaluation and reviews.

<b>Part A: Nominee (s) Information</b>	<p>Please complete the following information required:          Is this for a(n): <input type="checkbox"/> Individual <input type="checkbox"/> Team</p> <p>Project or Resource Title: _____</p>
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	<p>Full Name(s): Note: please be sure you include ALL members of your team, including those who contributed significant technical expertise. (add a page, if necessary).</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;"><b>Project Leads</b></td> <td style="width: 50%;"><b>Title and Department</b></td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td><b>Project Collaborators</b></td> <td><b>Title and Department</b></td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> </table>	<b>Project Leads</b>	<b>Title and Department</b>	_____	_____	<b>Project Collaborators</b>	<b>Title and Department</b>	_____	_____	_____	_____
<b>Project Leads</b>	<b>Title and Department</b>										
_____	_____										
<b>Project Collaborators</b>	<b>Title and Department</b>										
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<p><b>Part B: Nomination Category</b></p>	<p>Please identify your nomination as:</p> <p><input type="checkbox"/> Resource Development</p> <p><input type="checkbox"/> Development/delivery of Workshop/Course</p> <p><input type="checkbox"/> Developing/Coordinating Education Events</p> <p><input type="checkbox"/> Clinical Teaching/Mentoring</p>										

<p><b>Part C: Supporting Questions &amp; Documentations</b></p>	<p>Please answer the following questions of the individual or team nominated that has delivered and contributed towards education and resource development, both formal and informal, or has provided outstanding and continuous commitment to educational support, initiative and leadership:</p> <ol style="list-style-type: none"> <li><b>Briefly describe</b> the education program, resource or initiative that you are nominating for the award for <b>excellence in education</b>. What was the project and how was (or is) it important or what was the contribution to staff/patient and family or student education?</li> </ol> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <ol style="list-style-type: none"> <li><b>Who has directly benefited and how?</b>(e.g. students, staff, patients, etc).. Please be very specific. Also indicate any community or BC –wide benefits.</li> </ol> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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3. **What impact did the program/project/activity have?** Please provide specific examples (e.g. education cost savings; improvements in staff productivity, safety or care, recruitment and retention; increasing patient knowledge, student or staff knowledge and/or skill developments, etc.).

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4. **What is innovative or creative** about the resource or education provided? Please provide specific examples (e.g. describe the content, design, organization, approach, delivery, format of resource or materials, etc.)

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5. **What leadership or mentoring** skills has this individual/team demonstrated in organizing, developing, delivering, or coordinating education? Comment on innovation and effectiveness. Please be specific.

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6. **Please provide the results of any evaluations.** Include details from user questionnaires, follow-up assessments, collection of feedback, etc.

7. **IMPORTANT: Please send or attach supporting documentation,** including resource samples, user/participants' comments, evaluation results, or testimonials to support the initiative, teaching, or program/project success. List below the attachments or supporting documentation being sent. Provide an address or location if resources or items submitted are to be returned. Provide a specific address if the resource is online.

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<b>Part D: Contact Information</b>	<p>Two nominators are required to finalize the submission. Please complete the following:</p> <p>1. Full Name: _____  Position Title: _____  Telephone (Local): _____  Email(s): _____</p> <p>2. Full Name: _____  Position Title: _____  Telephone (Local): _____  Email: _____</p>

**Checklist:**

- Exact Title of program being nominated**
- Nomination category selected**
- Completed nomination form with all nominees and contacts listed**
- Explanation of why you consider the nomination “excellent” education**
- Examples of education plans and documents enclosed/attached**
- Samples of resources included**
- Evaluations/testimonials/feedback enclosed**

**Thank you for your submission. Please send by February 22, 2008**

Please note that the nominator may be contacted by one of the committee members as part of the evaluation process. If you have any questions or comments, please contact Margaret Landstrom at 604-875-3409 or [mlandstrom@cw.bc.ca](mailto:mlandstrom@cw.bc.ca).