
On Behalf of the Area Director:

The Portland Area Indian Health Service is now accepting nomination of Federal, Tribal, and Urban Staff of Indian health programs and organizations to be recognized for their calendar year 2014 accomplishments and contributions. Although service units, district/field offices, and Tribal and Urban health programs have their own awards programs, it is important that there be an opportunity for those who accomplishments merit Area-wide recognition. Please take the time to show your appreciation of those who have demonstrated exemplary dedication to our collective mission by completing and submitting a nomination form.

Enclosed you will find a nomination packet and form with a description of the categories. As you consider possible nominees for particular recognition, please be mindful of the stated purpose and targets of the recognition categories. Also, please note that the nominations must have the concurrence of the nominee's supervisor.

Nominations are due by close of business **Thursday, February 5, 2015**. Please submit nominations to POR_AORecognitionCommittee@ihs.gov.

Asha Petoskey
Area Director's Secretary
Portland Area IHS, Office of the Director
1414 NW Northrup St, Suite 800
Portland, OR 97209
(503) 414-5558 (phone)
(503) 414-5554 (fax)

2015

**Recognition of Excellence
Ceremony**



**NOMINATION
PACKET**

Recognition of Excellence Program

Each year, the Portland Area Director recognizes individuals or groups of employees whose special efforts and contributions have resulted in significant benefits to Portland Area Indian Health Service (PAIHS or IHS) programs, priorities, or customers in fulfillment with the IHS mission.

Award Categories:

- I. Direct Patient Care (page 2)
- II. Support in the Delivery of Healthcare (page 3)
- III. Health Promotion/Disease Prevention (page 4)
- IV. Excellence in Leadership (page 5)

Nomination Procedure:

Who Can Nominate? Anyone can nominate another person, nominations can be peer to peer, but the supervisor's signature is required. Nomination forms must be complete and signed by nominator and supervisor. A complete nomination includes the Recognition Justification and Citation Summary. An additional page may be included for listing of team members and must include: name, position title, phone number, e-mail, and address of each team member.

A nominator may submit the original nomination form with appropriate signatures using either of the following methods:

- ♦ Mail to: 1414 NW Northrup St., Suite 800, Portland, OR 97209
- ♦ Fax to : (503) 414-5554
- ♦ E-mail to: POR_AORecognitionCommittee@ihs.gov

Incomplete Nomination Forms will be returned. Adobe Acrobat e-signatures are accepted.

Key Dates:

The Recognition Performance Period is Calendar Year **January – December 2014**

The Nomination Period is **January 5 – February 5, 2014**

The deadline to submit nominations is close of business **February 5, 2014**

Selection & Notification:

Each nomination is reviewed for completion by the ROE Committee then submitted to the Area Director to make a final selection. The Area Director will notify selectees via letter.

**For more information, contact the committee via e-mail at:
POR_AORecognitionCommittee@ihs.gov.**

I. Direct Patient Care

This category is intended to recognize health care providers within the Portland Area Indian Health Service who consistently demonstrate a high level of commitment and dedication to the healthcare delivery objectives.

Nominations should include information on the impact of the nominee's actions.

Examples include:

- ◆ Improved patient care services. Incumbent makes measurable and exceptional contributions to the mission of IHS in the Portland Area which is to raise the health care status of Indian people to the highest level possible.
- ◆ Exceeded work expectations continually. Incumbent demonstrates perseverance, skill, and willingness to work as a sole clinician or a team member toward accomplishments of Portland Area objectives.
- ◆ Exhibited outstanding attitude in serving customers (internal/external). Incumbent demonstrates courteousness, genuine compassion for patients, enthusiasm, and dedication to the health care delivery component.

ELIGIBILITY:

Only Portland Area hands-on health care providers (such as physicians, nurses, dentists, and technicians) in Federal, Tribal, and Urban programs are eligible to receive this recognition. However, there are no limitations on the number of recognitions in this category.

II. Support in the Delivery of Healthcare

All employees are eligible for recognition, whether as a member of a team or for individual achievements in providing support to the delivery of healthcare. This recognition classifies service that has significantly advanced the Indian health Service's mission and priorities through customer service.

Nominations should include information on the impact of the nominee's actions.

For example:

- ♦ Demonstrated outstanding skills, determination, and performance, while working individually or as a group.
- ♦ Displayed an unusually notable act of compassion, helpfulness, kindness, and/or respect in treating customers, tribes, or outside organizations, or fellow employees, while seeking, identifying and implementing a creative way to address the customer's concern.
- ♦ Developed or suggested plans that improved health programs, such as obtaining increased funding, increasing third party collections, upgrading service delivery, etc.

ELIGIBILITY:

All Portland Area Federal, Tribal, and Urban employees are eligible to receive this recognition. Groups may be eligible for this recognition if their joint efforts represent excellence in the pursuit of the principles above. There are no limitations on the number of recognitions in this category.

III. Health Promotion/Disease Prevention

This category is intended to recognize that the prevention of illness and injuries and the promotion of health is a vital part of the mission of the Portland Area Indian Health Service. This recognition represents dedication to building and strengthening healthy communities.

Nominations should include information on the impact of the nominee's actions.

For example:

- ◆ Makes outstanding contributions to *health promotion* efforts within communities served by Portland Area Indian Health Service.
 - ◆ Develops creative, innovative approaches to preventing health problems.
- ◆ Demonstrates significant impact on reducing the burden of illness or injuries faced by communities.
- ◆ Demonstrates measurable positive health benefits of cooperative community based efforts in health promotion.
- ◆ Demonstrates skill, creativity, and the ability to work well together with a variety of community groups and organizations towards the common goal of building and strengthening the Portland Area American Indian and Alaska Native people.

ELIGIBILITY:

All Portland Area Federal, Tribal, Urban employees, and community members working in the area of health promotion/disease prevention may qualify for this recognition. Groups may be eligible for this award if their joint efforts represent excellence in the pursuit of the principles above. There are no limitations on the number of recognitions in this category.

IV. Excellence in Leadership

This recognition identifies leadership as well as to acknowledge achievements with the potential to make a positive difference in the lives of American Indian and Alaska Native people.

Nominations should include information on the impact of the nominee's actions.

Examples include:

- ♦ Demonstrate exemplary leadership skills that measurably increase the functional effectiveness of programs/departments.
- ♦ Make exceptional, highly successful contributions to the accomplishments, goals, and objectives of the Area's programs or departments.
- ♦ Develop innovations that provide measurable, increased effectiveness in the leadership of programs/departments
- ♦ Exercises exceptional judgment in making leadership decisions as demonstrated by consistent, successful efforts
- ♦ Make choices that tend to maximize the use of available resources as demonstrated by successful leadership of financial and other resources.

ELIGIBILITY:

All Portland Area Federal, Tribal, and Urban employees are eligible to receive this recognition. Groups may be eligible for this recognition if their joint efforts represent excellence in the pursuit of the principles above.

There are no limitations on the number of recognitions in this category.

PORTLAND AREA INDIAN HEALTH SERVICE
AREA DIRECTOR'S RECONGITION OF EXCELLENCE PROGRAM
NOMINATION & APPROVAL FORM, DUE February 5, 2015

1. Please Select the following: <div style="display: flex; justify-content: space-around; align-items: flex-start;"><div style="text-align: center;"><input type="checkbox"/> Individual</div><div style="text-align: center;"><input type="checkbox"/> Group</div><div># of Employees (Group Award)</div></div>	2. Name of Nominee or Group
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Please list name of the Nominees as it will appear on the plaque or certificate, include credentials if applicable (max 3). For a group award attach a list of group members.

3. Nominee Organization	4. Nominee Address & E-mail
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5. Period Covered in Nomination From:	To:
Month	Year
Month	Year

6. Select Category that applies:

☐ Direct Patient Care
☐ Support in the Delivery of Health Care
☐ Health Promotion/Disease Prevention
☐ Excellence in Leadership

7. Award Justification (250 words or less)

8. Citation Summary: Summarize nominee(s) contributions in 25 words or less. This summary statement will be used at the awards ceremony.

9. Nominator & E-mail:			
Name	Title	Signature	Date

10. Award Nominee's Supervisor & E-mail:			
Name	Title	Signature	Date

Dean M. Seyler, Director, Portland Area Office

Name

Signature

Date

E-mail Nominations to: POR_AORecognitionCommittee@ihs.gov