

Sample form, not for offline completion.

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Excellence in Clinical Care

This award recognises excellence by individuals or teams in the delivery of clinical care to meet the needs of consumers of hospital services, community health services or residential aged care services.

Nominations in this category should show one or more of the following:

- Demonstrated contribution to the provision of a coordinated health care system across acute, community and aged care.
- Demonstrated improvements in health outcomes and safety and quality for people receiving clinical care in hospital, community health or residential aged care services.
- Demonstrated improvements in the efficiency and effectiveness of clinical services.
- Demonstrated contribution to effective coordination and continuity of care.
- Examples of how their clinical work has resulted in performance advances, efficiency and effectiveness, improvements or positive feedback.

Who is eligible? Open to clinical individuals and teams.

Individual/team name or program/project title

Who are you nominating?

	▼
Myself	
Colleague or their team/project/program	

Nomination type

- ☐ Individual
- ☐ Team
- ☐ Program
- ☐ Project

Provide your contact details below

First name

Surname

Position title

Hospital/Health Service (optional)

Best contact number

Email

Provide the details of the person you are nominating below.

Please ensure the nominee is aware of this nomination and agrees to be nominated as they will become the main contact.

First name

Surname

Position title

Hospital/Health Service (optional)

Best contact number

Email

Merits and outcomes

300 words

Refer to the description of the award category being applied for and detail how the nominee has improved health outcomes as a result. (300 words max)

Evidence

300 words

Provide examples or describe how the nominee has demonstrated excellence and/or exceeded what could be expected as part of the role of the individual / team / project / program. (300 words max)

☐ I confirm, to the best of my knowledge, the nominee is eligible to enter the selected award category and I have received consent from the nominee for the nomination.

☐ This nomination has been endorsed by the relevant Team Leader/Manager or Director/Executive Director.

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