## Sample form, not for offline completion.

Visit <a href="https://efnlhnawards.awardsplatform.com">https://efnlhnawards.awardsplatform.com</a> to enter.

## Excellence in Non-Clinical Services

This award recognises excellence by individuals or teams who provide outstanding support, advice, and direction in non-clinical services. It acknowledges improved policies, processes and efficiencies supporting high-quality health care and improved outcomes for consumers.

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

- Demonstrated excellence in the provision of non-clinical services.
- Demonstrated improvements to systems and processes that support the delivery of high-quality healthcare and/or wellbeing initiatives.
- Contributed to improvements in people's everyday lives.
- Examples of how their non-clinical work has resulted in performance advances, efficiency and effectiveness, improvements or positive feedback.

Who is eligible? Open to non-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
Defer to the description of the award category being applied for and detail how the namines has improved health outsomes as a
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.

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