

Department of Health and Human Services Indian Health Service Director's Awards

INSTRUCTIONS FOR NOMINATION FORM

Nominations Deadline: May 15, 2024



The Director of the Indian Health Service recognizes individuals or groups of employees whose special efforts and contributions beyond their regular duty requirements have resulted in significant benefits to the IHS strategic goals, objectives and programs, customers, and fulfillment of the IHS mission.

To nominate someone for the 2023 Director's Awards, you must choose from the following categories based on the nature of the act, service, or performance. These awards recognize the performance of an individual or group within the calendar year of 2023.

Award Categories:

- **IHS Director's Award:** This award recognizes service that has significantly advanced the IHS mission and vision through work focused on the goals and objectives in the IHS Strategic Plan: Access, Quality, and Management Operations with particular emphasis on quality improvement activities.
- IHS Director's for Patient Safety: This award recognizes service that has significantly advanced the IHS mission and vision through work focused on the goals and objectives in the IHS Strategic Plan. This work significantly enhanced patient safety through risk recognition, reporting and mitigation; implementation and/ or sustainment of <u>Total System Safety</u>; or innovation and improvement contributing to the achievement and sustainment of high reliability principles.
- IHS Director's Award for Customer Service: This award recognizes service that has significantly advanced the IHS mission and vision and the strategic goals and objectives through customer service. This award is designed to recognize innovation and exceptional performance and/or exemplary actions resulting in quality service to patients and their families, colleagues/other units or departments, and/or partners of the IHS.
- IHS Director's Award for DEIA Excellence: This award recognizes exemplary contributions by the Indian Health Service managers, supervisors, non-supervisory employees, contractors, and teams who work to cultivate an inclusive, diverse, fair, equitable, and accessible workplace.
- IHS Luana Reyes Leadership Award: This annual honor is reserved for an individual whose professional and/or community involvement demonstrates the leadership that Ms. Luana Reyes exemplified. Nominees for this award must demonstrate exceptional initiative and have made the most of the advantages and opportunities available to them. *Members of senior leadership are not eligible for this award.

For additional details about the award criteria, please visit https://www.ihs.gov/nda/. To learn more about the IHS Strategic Plan, please visit https://www.ihs.gov/strategicplan/.

NOMINATION SUBMISSION: To nominate someone for an award, both the nominator and the nominee's supervisor must initiate and sign the nomination form. Once completed, the nominations will be sent to the <u>Area Awards Coordinator</u> to be reviewed and ranked by the Area Director. For those at Headquarters, nominations should be submitted through their Office Director and Senior Executive Leadership.

Area Award Coordinators must send all award nominations with rankings via email to lHSDirectorsAwardsCommittee@ihs.gov. The deadline for receiving nominations is May 15, 2024. Any nominations received after this date will not be considered. If you have any questions, please contact the IHS Director's Awards Committee at IHSDirectorsAwardsCommittee@ihs.gov.



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NOMINATION FORM



Nominations Deadline: May 15, 2024

 Complete a separate nomination form for each individual/team nominee. 								
	Award Category							
	Indicate Award Category:							
	Indicate Type of Award (Individual or Team):							
	Nominee Information							
	NDIVIDUAL AWARD: *Please list the Individual's Name as it should appear on the award.							
	First Name/Last Name:	Title						
	TEAM AWARD: *Please list the Team Team Name:	Name as it should appe	ear on the plaque or certificate*					
	Team Leads First Name/Last Name:							
	*Please make sure to use Attachment A (Page 4) to list all team members who are being nominated for this award. Award Citation: *This text will be used directly in the official award script. (Please limit write-up to approximatel 25 words or less)							
	Award Citation: *This text will be use 25 words or less)	d directly in the officia	i awaru script. (Flease illilit wri					
•		d directly in the officia	i awaru script. (Flease illilit wil					
•		Title:	Signature:	Date:				
	25 words or less)							
	25 words or less) Nominator's Name:	Title:	Signature: Signature:	Date:				
	Nominator's Name: Nominee's Supervisor Name: (for Areas/Service Units only)	Title:	Signature: Signature:	Date:				

9. AWARD NOMINATION JUSTIFICATION								
In the space provided, please explain how the individual or team significantly advanced the IHS mission and vision through enhancements supporting one or more of the following IHS Strategic Goals: Access, Quality, and Management and Operations for the award category.								

Team Member Names – Attachment A

Name of Team:								
Please list each team member's name as it should appear on the certificate								
Team Lead (Please indicate one team lead in this column)	Last Name	First Name	Commissioned Corps Officer Rank OR Official Title (i.e. Capt. or Dr.)	Email Address				