

# FMDA's 2<sup>nd</sup> Annual Quality Champion Award

**Purpose:** FMDA's Quality Champion Award is presented in recognition of the skills, talents, expertise, commitment, and personal attributes that encompass quality patient-centered care.

This award honors Florida-based clinicians who work day-in and day-out to serve the most-frail population in Florida's post-acute and long-term care (PALTC) continuum. The recipient of this award embodies the highest standards of dedication, leadership, engagement, and innovation. The recipient is personified as a cornerstone in both his or her respective field as well as within the facility(s) or roles served.

**Eligibility:** Physician, Medical Director, Advanced Practice Nurse, Consultant Pharmacist, and Physician Assistant practicing in PALTC for at least five years. Either the nominee or nominator must be a member of FMDA in good standing.

**Nominators:** Any Physician, Medical Director, Advanced Practice Nurse, Clinical Pharmacist, Assistant/Director of Nursing, Nursing Home Administrator, Regional Nurse Consultant, patient/resident, or volunteer may nominate a worthy candidate. Nominees may not self-nominate but may be nominated by other FMDA members, colleagues, or other health professionals involved in PALTC.

**Award:** The recipient will be selected on the basis of the nomination eligibility criteria and through a blind committee review process.

The award winner will be announced during FMDA's Virtual 29<sup>th</sup> Annual Conference, on **Saturday, Oct. 24, 2020**.

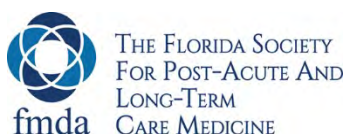
**Deadline:** All nominations, must be received by **Monday, Sept. 21, 2020**. There will be no exceptions. Nomination forms may be completed online or delivered to the FMDA business office.

**Instructions:** Please submit supporting documentation and cite specific examples including patient and clinician comments. Also submit relevant data when available. If you require more space, you are welcome to attach a sheet to the nomination form.

## Award Policies

1. Nominations will be reviewed by the FMDA Awards Committee.
2. Only completed nominations will be considered.
3. Candidates will not be identified by name to the Awards Committee – This will be a blind review process.
4. Current FMDA board members are not eligible during their term of office.
5. Nominees must have worked in their respective field for a minimum of five (5) years.
6. Nominees may be nominated by other members, colleagues, administrators, medical directors or any other health professional involved in long-term care.
7. Candidates may not self-nominate.

**Sponsorship:** FMDA's 2<sup>nd</sup> Annual Quality Champion Award is sponsored by **Optum**.



400 Executive Center Drive, Suite 208, West Palm Beach FL 33401  
(561) 689-6321; Fax: (561) 689-6321; [www.fmda.org](http://www.fmda.org); [www.bestcarepractices.org](http://www.bestcarepractices.org)

# FMDA's 2<sup>nd</sup> Annual Quality Champion Award Nomination

Please Note: This Document is e-Fillable at [www.fmda.org/awards.php](http://www.fmda.org/awards.php)

Nominee's Name: \_\_\_\_\_ Nominee's Email: \_\_\_\_\_

Length of Service at current organization/facility: \_\_\_\_\_ years. FMDA Member: \_\_\_ Yes, \_\_\_ No

Length of Career in PALTC: \_\_\_\_\_ years. Current Position: \_\_\_\_\_ years.

Facility Name: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Administrator's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Facility Address: \_\_\_\_\_  
Street City State ZIP

Facility Phone: \_\_\_\_\_ Facility Fax: \_\_\_\_\_

Nominated by: \_\_\_\_\_ Title: \_\_\_\_\_ FMDA Member: \_\_\_ Yes, \_\_\_ No

Nominator's Email: \_\_\_\_\_ Nominator's Phone: \_\_\_\_\_

Nominator's Organization Name: \_\_\_\_\_

Administrator's Name (if applicable): \_\_\_\_\_

Directors of Nursing's Name (if applicable): \_\_\_\_\_

Organization's Address: \_\_\_\_\_  
Street City State ZIP

Organization's Phone: \_\_\_\_\_ Organization's Fax: \_\_\_\_\_



400 Executive Center Drive, Suite 208, West Palm Beach FL 33401  
(561) 689-6321; Fax: (561) 689-6321; [www.fmda.org](http://www.fmda.org); [www.bestcarepractices.org](http://www.bestcarepractices.org)

# FMDA's 2<sup>nd</sup> Annual Quality Champion Award

## Nominee's Qualifying Criteria

1. How does the nominee demonstrate leadership associated with indicators such as quality measures, restraints, falls, pressure ulcers, infection prevention, antibiotic stewardship, antipsychotic reduction, narcotic reduction, hospital readmissions reduction, response to COVID-19, etc.

---

---

2. Describe how the nominee demonstrates role modeling and mentoring of others in promoting quality and safety.

---

---

3. Highlight how the nominee serves as a leader to effect positive change in clinical outcomes.

---

---

4. Illustrate how the nominee contributes to safety and quality improvement initiatives and processes.

---

---

5. How has the nominee made an impact on his or her professional sphere and in the community?

---

---

6. What characteristics or dynamic makes this nominee stand out?

---

---

**Note to Nominator: Provide additional appropriate information in support of this nomination to [info@fmda.org](mailto:info@fmda.org).**