**L – 11 Implementation Coordinator (Program Director)**

Name of Nominee:

Name of Organization:

Nominated By:

Approved by Service Excellence Council? □ Yes

A. Provide a brief snapshot of “why” this individual is being nominated.

*Please tell us what makes your Implementation Coordinator (Program Director) a stand-out. Is it his/her organizational skills? Commitment to the SEI? Quiet confidence? Ability to be a cheerleader? Leadership? Ability to cut to the heart of the matter?*

B. How has the Implementation Coordinator (Program Director) made a difference?

*Got a story that sums it up about this individual? How does she/he get everyone moving in the same direction toward excellence? Is this person great at twisting arms, when necessary? Or does this person have that indefinable something called “charm.” (And that’s why stuff gets done.)*

C. How and what impact has the individual had on patient/customer satisfaction?

*If the facility’s satisfaction scores have gone up, it’s ultimately due in large part to the IC’s leadership of the SEI. Can you see your IC’s fingerprints all over whatever new successes the organization has had with taking care of its clients and its community?*

D. How and what impact did the individual have on improving employee morale and the culture of their environment?

*The IC doesn’t do it alone, but he/she deserves a share of the kudos when they’re handed out. Can you name any special up-tick in morale that is traceable to your IC? Culture change, too?*

E. What impact has this individual had on improving the community’s perception of the organization?

*Please provide specific details.*

F. Which behaviors distinguish this individual from others?

*Give us details of how this individual has provided leadership “above and beyond?”*

**This nomination, with supporting documentation (if applicable), should be sent via email to** [info@hcsecawards.com](mailto:info@hcsecawards.com) **once approved by the Service Excellence Council.**