

NOMINATION FORM FOR:



### **What is The DAISY Award?**

The DAISY Foundation was established in 1999 by the family of J. Patrick Barnes. Patrick died at the age of 33, from complications of the auto-immune disease Idiopathic Thrombocytopenia Purpura (ITP). During his eight-week hospital stay, his family was impressed by the care and compassion his nurses provided, not only to him but to everyone in the family. They created the DAISY Award in Pat's memory to recognize those nurses who make a big difference in the lives of so many people.

Our DAISY Award honorees demonstrate at least one of the criteria listed on the back page. They also demonstrate excellence through their clinical expertise. They are recognized as role models in our nursing community. Scott Memorial Hospital is proud to be a DAISY Award partner, and will recognize one of our nurses with this special honor twice per year. Each DAISY Award Honoree will be recognized at a public ceremony in her/his unit, and will receive:

- A beautiful certificate
- A DAISY Award pin
- A hand-carved stone sculpture entitled A Healer's Touch

In addition, their clinic/unit will celebrate with Cinnabon® cinnamon rolls – a favorite of Patrick's. The Barnes family asks that whenever nurses smell that wonderful cinnamon aroma, they stop for a moment and think about how special they are.

### **How to Nominate an Extraordinary Nurse**

- Nomination form is on the back of this page

Patients, families, visitors, nurses, physicians, and other employees may fill out this nomination form and submit it in a nomination box. Each nursing unit and registration has a nomination box.

**Scott Memorial Hospital  
1451 North Gardner  
Scottsburg, Indiana 47170**

To find out more about the DAISY program, including the growing list of Partners, please go to [www.DAISYfoundation.org](http://www.DAISYfoundation.org).

NOMINATION FORM FOR:



**FOR EXTRAORDINARY NURSES**  
**IN MEMORY OF J. PATRICK BARNES**

I would like to nominate \_\_\_\_\_ from the \_\_\_\_\_ unit/department for **The DAISY Award for Extraordinary Nurses.**

Please describe a situation in which the nurse demonstrated at least one of these criteria:

- **Job performance exemplifies the mission, vision and values of Scott Memorial Hospital.**
- **Provides compassionate care.**
- **Has made a special connection with a patient, family member/visitor or peer.**
- **Is a role model for others.**
- **Models extraordinary nursing skills and competency.**
- **Demonstrates continued commitment to excellence.**

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Thank you for taking the time to nominate this extraordinary nurse. Please provide your contact information so we can include you in the award celebration if your nominee is chosen.

Date of Nomination \_\_\_\_\_ Your Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

I am (please circle one): Patient Family/Visitor Volunteer Staff

(If Staff, please provide: Title \_\_\_\_\_ Work Location \_\_\_\_\_)

**Please place completed form in one of the DAISY nomination boxes (located throughout the hospital), give it to a Scott Memorial team member to turn in, or send to address listed on the front page.**

Name of person accepting Nomination form here. \_\_\_\_\_