



## CAHS Staff Awards – Nominating a CAHS staff member

Sponsored by PCH Foundation, HESTA and ME Bank



The CAHS Staff Award recognises staff members or teams that demonstrate exceptional performance in line with the CAHS values of Compassion, Collaboration, Equity, Respect, Excellence and Accountability.

The award will be presented quarterly at a Stars of CAHS Awards presentation.

### Eligibility

All CAHS staff members are eligible for the award.

### Nomination process

This award is for staff members nominated by peers and consumers. Nominators will complete the attached nomination form, before submitting it to their head of department for sign off. All nominations will be sent to [starsofcahs@health.wa.gov.au](mailto:starsofcahs@health.wa.gov.au), who will review before submitting to the judging panel.

### Nominating a staff member

Describe how the nominee's performance, accomplishment or contribution is unique or noteworthy and which of the CAHS values is best represented by the achievement or behaviour of the staff member(s).

### CAHS Values

**Compassion** - We always act with courtesy and care, so you're treated with real kindness.

**Collaboration** - We care about our colleagues and partners; by cooperating, we improve.

**Equity** - By treating people in a fair and just manner, everyone receives the same rights and opportunities.

**Respect** - Your dignity is recognised and your self-worth is supported and valued.

**Excellence** - By striving to improve, we constantly get better and deliver better care.

**Accountability** - Always acting with integrity, we take full responsibility for our actions.



## Nominator details

(Please print out – this is not an electronic form)

Name: \_\_\_\_\_

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

Date: \_\_\_\_\_

Position title: (if applicable) \_\_\_\_\_

Department: (if applicable) \_\_\_\_\_

Manager: (if applicable) \_\_\_\_\_

I give consent for the details of my nomination to be disclosed the staff member/team I have nominated:

(Please circle) Yes No

\_\_\_\_\_

\_\_\_\_\_

Nominator signature

Manager's signature (if applicable)

**Reason for Nomination:** Please print out the attached sheet and provide a one page description of the nominee's noteworthy performance, significant accomplishment or contribution and explain why the nominee should be considered for the CAHS Staff Award.

Describe how the nominee's performance, accomplishment or contribution is unique or noteworthy and which of the CAHS values is best represented by the achievement or behaviour of the staff member(s).

Please provide details of the impact of the accomplishment (i.e. time or costs savings, improved customer service etc.) and what the result was. Include any challenges or complications the nominee may have had to overcome.

For further information, email [starsofcahs@health.wa.gov.au](mailto:starsofcahs@health.wa.gov.au)

