

# 2017 Auxiliary of the Year Award



## Call for Nominations

Entry deadline: Friday, June 30, 2017

# 2017 Auxiliary of the Year Award

## Is your hospital auxiliary making a positive impact in your community?

The MAHA Auxiliary of the Year Award was established to recognize outstanding contributions of Missouri hospital auxiliaries. In addition to acknowledging the value of volunteerism to individuals, organizations and communities, the award is designed to:

- Recognize auxiliary leadership qualities, service records and the ability to successfully collaborate with hospital administration to achieve established goals.
- Generate enthusiasm and support for hospital and community programs, including fundraising, in-service activities and the MAHA state project.
- Honor the dedication and commitment to assigned duties. This may include participation in MAHA annual events, volunteer hours, newsletter, hospital in-service programs, community involvement, scholarships for health students and recruitment of new members.

## Eligibility Requirements

The eligibility period is June 30, 2016, through June 30, 2017. Nominees must be members in good standing and will be judged on the following hospital categories.

- Category 1.....1 to 30 licensed beds
- Category 2.....31 to 100 licensed beds
- Category 3.....101 to 300 licensed beds
- Category 4.....more than 300 licensed beds

## Nomination Process

Nominations may be submitted by a hospital CEO, volunteer and auxiliary leader, volunteer service professional in collaboration with the director of public relations, human resources or finance professionals.

No videos, CDs or scrapbooks will be accepted. Photos should only be used, if necessary, to explain the project. Judging will be based on the quality of projects undertaken and service rendered. We encourage you to share this nomination form throughout your organization.

Entries must be emailed or postmarked by **Friday, June 30, 2017**.

## Notification of Winners

Award winners will be notified both by phone and letter by Sept. 29, 2017.

## Presentation of Awards

Awards will be presented on Thursday, Nov. 2, 2017, at the awards luncheon during the Missouri Hospital Association's 95th Annual Convention & Trade Show in Osage Beach, Missouri. Recipients are encouraged to attend the luncheon to be recognized and receive their award.



# 2017 Auxiliary of the Year Award

(June 30, 2016, through June 30, 2017)

For official use:

Entry No. \_\_\_\_\_

## COVER SHEET

DATE: \_\_\_\_\_

AUXILIARY NOMINATED: \_\_\_\_\_

HOSPITAL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ PHONE#: \_\_\_\_\_

CEO: \_\_\_\_\_

NOMINATOR NAME AND TITLE: \_\_\_\_\_

PHONE#: \_\_\_\_\_

EMAIL: \_\_\_\_\_

COVER SHEET MUST ACCOMPANY THIS ENTRY FORM.  
**ENTRIES MUST BE EMAILED OR POSTMARKED BY JUNE 30, 2017**

Email to [dmcculloch@mhanet.com](mailto:dmcculloch@mhanet.com) or mail to:

Auxiliary of the Year  
Missouri Hospital Association  
Attn: Donna McCulloch  
P.O. Box 60  
Jefferson City, MO 65102-0060



# 2017 Auxiliary of the Year Award

(June 30, 2016, through June 30, 2017)

For official use:  
Entry No. \_\_\_\_\_

## NOMINATION FORM

The nomination form must be completed in its entirety to be considered for nomination.

Number of Auxiliary Members (based on categories below)

- Category 1.....1 to 30 licensed beds
- Category 2.....31 to 100 licensed beds
- Category 3.....101 to 300 licensed beds
- Category 4.....more than 300 licensed beds

### 1. PARTICIPATION IN MAHA ANNUAL EVENTS (Representation at the following events.)

- MAHA Legislative/Leadership Conference
- MAHA District Meeting
- MHA 2016 Annual Convention & Trade Show

### 2. IMPLEMENTATION OF MAHA STATE PROJECT (“Heart Disease: Educate Yourself, Save a Life”)

Explain what programs your auxiliary used this year to promote the 2017 MAHA state project, “Heart Disease: Educate Yourself, Save a Life,” and the continuation of any past state projects.

### 3. HOSPITAL IN-SERVICE PROGRAMS (Please check your in-service areas.)

In-service programs are in-house services initiated by the auxiliary with administrative approval or requested by administration and performed by auxiliaries. Judges will consider the creation of new programs or upgrades to an ongoing program. Programs may be departmental or patient service.

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Admissions           | <input type="checkbox"/> Blood Bank        | <input type="checkbox"/> Tray Favors      |
| <input type="checkbox"/> Flowers              | <input type="checkbox"/> Gift Shop         | <input type="checkbox"/> Emergency Clinic |
| <input type="checkbox"/> Patient Feeding      | <input type="checkbox"/> Sewing            | <input type="checkbox"/> Messenger        |
| <input type="checkbox"/> Baby Photos          | <input type="checkbox"/> Cancer            | <input type="checkbox"/> TV Rental        |
| <input type="checkbox"/> Geriatrics           | <input type="checkbox"/> Clinic            | <input type="checkbox"/> Escort Service   |
| <input type="checkbox"/> Pediatrics           | <input type="checkbox"/> Library           | <input type="checkbox"/> Information Desk |
| <input type="checkbox"/> Beauty Shop          | <input type="checkbox"/> Snack Bar         | <input type="checkbox"/> Other:           |
| <input type="checkbox"/> Gift Cart            | <input type="checkbox"/> Clergy File       |   |
| <input type="checkbox"/> Recreational Therapy | <input type="checkbox"/> Mail Distribution |   |

REMARKS: (description of new in-service or upgraded service programs, etc.)

## **4. COMMUNITY INVOLVEMENT – HEALTH EDUCATION PROGRAMS – PUBLIC RELATIONS PROGRAMS (in-hospital or out-of-hospital)**

This includes any program performed by the auxiliary, with administrative approval or by its request, that creates positive community awareness of your hospital and its services. Health wellness education programs will be given consideration.

## **5. SCHOLARSHIPS FOR HEALTH CAREER STUDENTS**

List the number of scholarships offered, dollar amount, if they are renewable and field of study considered. What method do you use to advise possible applicants of the availability of scholarships?

## 6. MEMBERSHIP/GROWTH — RECRUITMENT

List the number of members retained and recruited throughout the year, and describe recruitment methods used by the auxiliary.

Total Beginning of Period: \_\_\_\_\_ Total End of Period: \_\_\_\_\_

Membership Drive Month: \_\_\_\_\_

Describe Recruitment Method:

## 7. FINANCIAL DATA

(Do not include income from dues or auxiliary operating expenses, such as meetings, postage, etc.)

### A. Income:

Fundraising Projects Net Income ..... \$ \_\_\_\_\_

Other (donations, interest, etc.) ..... \$ \_\_\_\_\_

**TOTAL INCOME** ..... \$ \_\_\_\_\_

### B. Distribution of Monies:

Funds to Hospital ..... \$ \_\_\_\_\_

Funds Spent for Hospital Equipment ..... \$ \_\_\_\_\_

Cost of Hospital Service Programs..... \$ \_\_\_\_\_

Scholarships..... \$ \_\_\_\_\_

Other..... \$ \_\_\_\_\_

**TOTAL FUNDS CONTRIBUTED** ..... \$ \_\_\_\_\_

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**8. FUNDRAISING PROJECTS**

**9. VOLUNTEER HOURS (June 30, 2016, through June 30, 2017)**

Total Auxiliary Volunteer Hours: In-Hospital \_\_\_\_\_ Out-of-Hospital \_\_\_\_\_

Other Volunteer Hours: In-Hospital (Red Cross, RSVP, etc.) \_\_\_\_\_

Grand Total of Volunteer Hours in Period: \_\_\_\_\_

Number of Auxilians Involved: \_\_\_\_\_

**10. NEWSLETTER/FREQUENCY**

How do you participate in the MAHA newsletter?

**11. HOSPITAL STAFF/MEDICAL STAFF/AUXILIARY RELATIONS**

Describe any activities initiated by the auxiliary to promote camaraderie between staff, physicians and volunteers.



## 12. COMMENTS

This section provides an opportunity to discuss any innovative program your auxiliary has sponsored to help your hospital and its patients.

COVER SHEET MUST ACCOMPANY THIS ENTRY FORM.  
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Email to [dmcculloch@mhanet.com](mailto:dmcculloch@mhanet.com) or mail to:

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Missouri Hospital Association  
Attn: Donna McCulloch  
P.O. Box 60  
Jefferson City, MO 65102-0060