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| **NHS England col “Recognising the Value of General Practice Nursing”** | |
| **Practice Nurse Leadership Award (Team or Individual) 2018**  This award recognises and rewards the vital contribution the practice nurse / team provides in primary care.  The judges are seeking nominations from practice nursing teams who consistently deliver confident contemporary care and who consistently perform above what is considered as the ‘norm’ for their peer group.  Entries are welcomed from the entire primary care nursing workforce of:  **North East Lincolnshire (Humber Coast and Vale)**  Nominations can be made by anyone, including patient and carers. | |
| **PLEASE COMPLETE AND RETURN THIS FORM TO** [**england.gpnawards@nhs.net**](mailto:england.gpnawards@nhs.net)  **BY MIDDAY ON FRIDAY 2 FEBRUARY 2018** | |
| **Name of individual / team being nominated** |  |
| **GP Practice Name**  **GP Practice Address**  **(Where the team works)** |  |
| **Team’s Contact No.** |  |
| **Email of lead member of the team being nominated.** |  |
| **Which clinical commissioning group (CCG) does the Team work in.** |  |
| **Name and email address of the nominator.** |  |
| **Please advise the capacity in which you are nominating the Team.** |  |
| **Please fill in all the sections that you feel are relevant.** | |
| **Describe how patients have consistently experienced a better experience, better care outcomes and support because of the Individuals / Team’s care.** | |
| **Describe how they have contributed to a thorough programme of illness prevention** | |
| **Describe where and how the Individual / Team works collaboratively with or alongside the wider Health and Social care teams such as GPs, District Nursing, or Social workers** | |
| **Describe how the Individual / Team engage with the wider community such as care homes, practice patient groups.** | |
| **Describe how the Individual / Team has contributed to improving quality improvement within the practice setting.** | |
| **Describe what is different about the care the Individual / Team provides.** | |
| **Describe how the Individual / Team has engaged with patients.** | |
| **Describe how the Individual / Team obtain feedback on the care that they provide.** | |
| **Any other comments that you wish to add about the Individual / Team’s care** | |