

2018 AHCA Awards Program Nomination Packet



ID/DD HERO
of the YEAR

At its 69th Annual Convention & Expo in San Diego on October 7-10 2018, AHCA will recognize an honoree of distinction from an ICF/IID facility or HCBS Waiver Home for his/her dedication to improving the quality of life of clients and advancing community understanding of individuals with intellectual or developmental disabilities.

Following are the requirements and nomination forms for the

INTELLECTUAL DISABILITIES/DEVELOPMENTAL DISABILITIES

Hero of the Year Award

Objective

To honor those people who have shown commitment, dedication, and compassion in serving persons with intellectual and/or developmental disabilities and their families.

Eligibility Criteria

All nominations must meet the following criteria:

Submit nominations by email, with attachment, by **June 8, 2018 11:59 p.m.** *Faxed and hard copy nominations are not accepted.*

- Nominees must be from a member ICF/IID, HCBS Waiver Home or other setting, which is in good standing with the state affiliate organization and AHCA at the time of judging.
- Nominee can be a volunteer, family member, member of the community, or staff person who has touched the lives of individuals with intellectual and/or developmental disabilities in a significant way.
- Nominee must have consistently demonstrated the ability to exceed expectations and produce noteworthy results.
- Staff nominees must show significant client contact and accomplishment **above and beyond** their required duties. Staff includes management personnel.
- All nominee activities must directly contribute to the emotional, social, and mental well-being of clients and foster understanding by the community-at-large.
- A care center/home may only submit one nomination per year.

Selection Criteria

A panel of judges will evaluate the nominations based on the following criteria:

- The nominee's hands-on involvement in activities that directly impact clients, families, volunteers and the care center or home.
- The breadth and reach of these activities at the center or in the community-at-large.
- The nominee's overall role or influence in designing or initiating programs for clients and/or the families/guardians of clients.

Recognition of Honoree

To show the ID/DD Hero of the Year honoree how much we, as a profession, appreciate his or her service to clients, families and the profession, AHCA holds the awards presentation during the annual convention. AHCA will invite the ID/DD Hero of the Year honoree and one guest, to participate in convention activities at AHCA's expense. The 2018 Annual Convention & Expo will take place October 7-10, 2018 in San Diego.

Email the nomination to: Dana Halvorson dhalvorson@ahca.org

DEADLINE TO RECEIVE NOMINATIONS IS JUNE 8, 2018 11:59 p.m.

ID/DD Hero of the Year Nomination Form



1201 L St. N.W. Washington, DC 20005

All submitted essays, photos and other materials become the property of AHCA/NCAL and will not be returned.

Deadline to submit nominations is June 8, 2018 11:59 p.m.

Section I

Care Center/Home and Nominee Information

Center's/Home's Name: _____

Total Number of Beds at the center: _____

Center's/Home's Address: _____

Center Contact's Telephone Number: _____

Center Contact's Email Address: _____

Center's Designation:

- IID/DD, SNF/NF/PAC Waiver Home
 Other (please identify & explain):

1. Is Nominee a volunteer? (*check one*)

Yes ___ No ___

2. Is Nominee on staff? (*check one*)

- Yes *Title/Position:*
 No

3. Is Nominee 18 years of age or over? (*check one*)

Yes ___ No ___ *Current age:*

Nominee's Name: _____

Nominee's Address: _____

Nominee's Telephone Number: _____

Nominee's Email Address: _____



Nominator's Information

Nominator's Name: _____

Nominator's Title: _____

Nominator's Telephone Number: _____

Nominator's Email Address: _____

Explain any unique licensing characteristics of the center/home



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Section II

I. Provide the following information about the Nominee and his/her center:

Length of service* at nominating center: _____ years

**Must have served at least one continuous year at nominating center*

Frequency of service*:

Nominee serves ____ hours per week; or ____ hours per month

**If staff, note time above scheduled requirements.*

Please answer the following, II through VI.

Use separate sheets if necessary or preferred; repeat the question and use same alpha/numeric format.

II. Describe what types of projects and/or activities the nominee excels at (*approximately 50 words*):

III. Has the nominee initiated any program(s) at the center? If so, please describe below (*approximately 50 words*):



- IV.** Explain how the nominee fosters a greater understanding of persons with ID/DD in the community-at-large (*approximately 50 words*):

- V.** Describe how the nominee's work reflects the mission of the center. (*approximately 50 words*):

Essay

- VI.** In no more than 200 words, explain what makes the nominee special. Use the following prompts as a guide:
- Describe how the nominee helps clients become active members of the center, home and/or community-at-large.
 - Describe ways has the nominee educates the external community about the value of persons with intellectual and/or developmental disabilities.