



***OMBUDSMAN
OF THE YEAR***

The **Ombudsman of the Year** will demonstrate a true concern for the resident by working with the facility staff, families and community resources.

The award will be presented during the Annual THCA House of Delegates Meeting at THCA's Annual Convention and Trade Show, October 29 - November 1, 2018 in Dallas. The judging panel will consist of the Region Chair Council. Nominee must:

1. have been actively involved as an Ombudsman/Volunteer Ombudsman in the nominating THCA Member facility for at least one (1) year;
2. have letter of recommendation from Administrator of nominating THCA Member facility;
3. be affiliated with a THCA member facility at the time the award is presented;
4. have a recommendation of character, as well as instances showing the nominee as a visible advocate for quality of care in a situation involving a family and/or resident; and

Nomination packet should include:

- Nomination Form;
- Letter of Recommendation from Administrator of nominating facility; and
- Two (2) letters of support from other interested individuals, such as family members, residents and/or volunteers.

**SUBMIT COMPLETE NOMINATION ELECTRONICALLY ON OR
BEFORE SEPTEMBER 7, 2018 TO: THCAawards@txhca.org**

NOTE: This is a Writable PDF

**Texas Health Care Association
2018 Ombudsman of the Year Award Nomination Form**

NAME: _____

ADDRESS: _____ CITY: _____ ZIP: _____

PHONE: _____

OCCUPATION: _____ EMPLOYER: _____

DATE CERTIFIED AS OMBUDSMAN/VOLUNTEER OMBUDSMAN: _____

AREA WHERE CERTIFIED: _____

LIST FACILITIES WHERE OMBUDSMAN HAS WORKED/VOLUNTEERED:

<u>Facility</u>	<u>Dates</u>	<u>Name of Administrator</u>
-----------------	--------------	------------------------------

_____	_____	_____
_____	_____	_____
_____	_____	_____

Nomination packet should include:

- Nomination Form;
- Letter of Recommendation from Administrator of nominating facility; and
- Two (2) letters of support from other interested individuals, such as family members, residents and/or volunteers.

Administrator Making Nomination

Nominating Facility

**SUBMIT COMPLETE NOMINATION ELECTRONICALLY ON OR
BEFORE SEPTEMBER 7, 2018 TO: THCAawards@txhca.org**