

HOSPITAL PHARMACY TEAM OF THE YEAR

Scottish Pharmacist Awards 2019/20

Application form - Rules & Guidelines

Entry is **FREE**

Entry deadline is Wednesday 6 November, 2019

- Please send a high resolution photo of the Pharmacy team with your application form
- Please complete the application form, adhering to the word count for each section

Why enter?

Good teamwork is central to successful collaborative work and, as such, this award is designed to recognise best practice throughout hospital pharmacy. We are seeking applications from hospital pharmacy teams, which have identified areas in which projects or initiatives are required in order to improve both patient outcomes and general productivity.

The winning team will be one which has excellent communication and collaborative working practices at its centre, combined with evidence of ongoing and dynamic contribution to the healthcare of patients within its wards on a daily basis.

Who can enter?

This category is open to all hospital pharmacy teams with a minimum of three team members and which is working in the hospital sector in Scotland across all sectors, including:

- Cancer
- Neurology
- Respiratory
- Dermatology
- Rheumatology
- Cardiology
- Psychiatric

All entries will be judged by an independent panel of experts, who will be looking for:

- A team, which can provide evidence of clearly-defined objectives for both themselves and their team within the hospital
- Enthusiasm and commitment to the enhancement of hospital pharmacy in Scotland
- Exceptional quality above and beyond what is expected
- An ability to overcome challenges in pursuit of goals
- How performance has been measured and benchmarked

- Evaluation of project success and patient outcome

If you have questions, concerns, or just want to speak with one of the Scottish Pharmacist Awards team, please call Aoife Jackson: 028 90 270 940 or email: awards@scottishpharmacist.com

If you are applying online, please complete the form below and ensure you click the 'submit' button for your application.

If you are submitting your application via email, please email the application to, awards@scottishpharmacist.com

Full Name *

First Name

Last Name

Name of proposed nominee if different from the information above

Pharmacy Name *

Title/Position *

Address *

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Country

Phone Number *

Area Code

Phone Number

E-mail *

example@example.com

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PLEASE ANSWER ALL 5 QUESTIONS

1. List each member of the team and their job title. Describe the staffing structure within your team (300 - 500 words) *

(300 - 500 words)

2. Please provide evidence of how the team identified areas for improvement and subsequently compiled clearly-defined objectives. Give examples of these areas (300-500 words) *

(300 - 500 words)

3. Please give evidence of how the skills of each team member were utilised to ensure optimum levels of collaboration (300-500 words) *

(300 - 500 words)

4. Please provide examples of initiatives on which the team worked collaboratively. Please include evidence of objectives, benchmarking and subsequent evaluation measures (300-500 words) *

(No more than 1000 words)

5. Please outline below in no more than 500 words why this entry deserves to win the title of Hospital Pharmacy Team of the Year 2019/20 (300-500 words) *

Where did you hear about the Scottish Pharmacist awards? *

Scottish Pharmacist magazine

Newspaper advert

Twitter / Facebook / LinkedIn

Attended the SP Awards in a previous year