

## COMMUNITY PHARMACY TEAM OF THE YEAR PROUDLY SUPPORTED BY NUMARK

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 or the exterior of the pharmacy with your application form
- Please complete the application form, adhering to the word count for each section

#### Why enter?

Throughout Scotland, many pharmacy teams make a significant contribution to patient outcomes and patient care in their local community, while simultaneously demonstrating excellent business acumen and continuous business growth. This award recognises that contribution.

#### Who can enter?

This award is open to pharmacy teams in which every member of the team - pharmacist, medicines counter assistant, dispensing assistant or technician, superintendent pharmacist, pharmacy manager or pre-registration trainee - has played a vital role in delivering a first-class service to the local patients.

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

- Evidence of teamwork that goes above and beyond the standard level of service expected from pharmacy teams
- Evidence of having contributed to the pharmacy service in general and to the local community in particular

In particular, the judges will be looking for clearly—defined, well-evidenced examples of initiatives and projects, which not only demonstrate innovation, productivity and pharmacy excellence, but which also highlight the vital role played by team collaboration and integrated working.

#### How to enter

Application can be by personal application or by nomination by a third party pharmacist or pharmacy

contractor.

*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](mailto: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](mailto: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

Email address \*

## COMMUNITY PHARMACY TEAM OF THE YEAR

**PLEASE ANSWER ALL 5 QUESTIONS BELOW**

**1. Please provide an outline of the pharmacy's history and development, as well as a description of the current pharmacy team (300-500 words) \***

(300 - 500 Words)

**2. Please define how the pharmacy business objectives were identified by the team and addressed (300-500 words) \***

(300-500 words)

**3. Describe how these objectives were put into practice and provide both evidence of initiatives and projects, and examples of pharmacy team collaboration. Special mention should be made of 'outreach' projects targeted at the local community (300-500 words) \***

(300-500 words)

**4. Please give evidence of how each individual within the team's skills have been put to best use for the enhancement of the whole team (300-500 words) \***

(300-500 words)

**5. Please outline in no more than 800 words why your pharmacy deserves to win this award \***

**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