

WORKING IN PARTNERSHIP

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?

Collaboration between healthcare professionals helps to reduce the pressure on both primary and secondary care. Pharmacists have a vital role to play in this collaboration – whether it is with GPs, district nurses, physiotherapy teams or other healthcare professionals, it is the working in partnership that leads to optimal healthcare outcomes.

This award is designed to recognise pharmacy teams which have worked in partnership with other healthcare professionals. Of particular interest is collaboration between community pharmacists and their fellow professionals working in GP practices.

Who can enter?

This category is open to all pharmacy teams - either independent or group - which can clearly demonstrate a successful track record of working closely in collaboration with other healthcare team.

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

- Pharmacy teams which have collaboration at the heart of their business and who seek opportunities outside of the pharmacy walls to improve patient care.
- Teamwork that is evident in the examples put forward of good practice, which clearly highlight the benefits to patients in the local community.
- Clearly-defined, well-evidenced examples of initiatives and projects, which not only showcase the collaborative nature of the work involved, but which clearly illustrate the vital role played by team collaboration and integrated working.

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 BELOW

1. Please provide an outline of the nature of the working in partnership, clearly highlighting the nature of the healthcare teams involved (300-500 words) *

(300 - 500 words)

2. Please provide an outline of how pharmaceutical care needs in the community were identified and what measures were put in place to both benchmark and measure outcomes (300 - 500 words) *

(300 - 500 words)

3. Please indicate how the role of each member of the partnership teams was defined to ensure the maximum level of collaborative working (300-500 words) *

(300 - 500 words)

4. Please provide a description of at least one initiative or project employed by the collaborative teams which has been proven to contribute to the highest quality of patient-centred care in the community. Testimonies from local community groups etc can be included in the application (500 words) *

(No more than 500 words)

5. Please outline in no more than 800 words why this initiative or project deserves to win this award *

(No more than 800 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