

**National Service User Awards**

**Nomination Form**

Please return this completed form to events@cygnethealth.co.uk

The deadline for entries is: **Friday 25th January**

**PLEASE DO NOT include any service user identifiable information on this form as the email address is not secure and nominations need to be anonymous for the shortlisting process.**

The judging day will take place in early February 2019 - successfully shortlisted finalists will be notified by the end of January and invited to attend the ceremony in May 2019.

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| **Ward/ Service Name:** |  |
| **Hospital/Unit:** |  |
| **Organisation/Company/Trust Name:** |  |
| **Submitted by**  | **Name:****Role:** |  |

**Nomination category –** please tick below as appropriate for your entry:

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| * **Community and Education Projects**
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| * **Raising Mental Health Awareness**
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| * **Recovery and the Arts**
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| * **Health and Wellbeing**
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| * **Outstanding Service User Involvement**
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| **Name/ Title of Initiative: (maximum 10 words)** |
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| **Your reference:**  |  |
| Your reference should not include any service user identifiable information. This reference is to help you to identify the nomination if shortlisted, where you / your service have submitted multiple entries. |

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| **Person to be contacted in the event of a successful nomination:** |  |
| **Phone number:** |  |
| **Email Address:** |  |

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| Brief summary of initiative in **no more than 50 words***(if successful this will be printed in the Awards programme, so 50 words is the strict limit)* |
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| Full overview of project (no word limit)Please consider the following in your response:* Has this project been led by service users
* How involved service users have been in the project please give examples
* What impact the project has had on service users and the service as a whole
* Can this project have a long lasting effect
* How original is the project
* Why was the project started
* How easy would it be for service users to copy this project
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| Comments from service users involved in the project or any other additional information: |
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| If you wish to include any supporting information / evidence please include as an email attachment, or send via post, clearly labelled with your entry name to:**NSUA, c/o Louise Bannister, Cygnet Hospital Derby, 100 City Gate, London Road, Derby, DE24 8WZ** |