QUALITY SERVICE AWARD

WESTERN NEW YORK INDEPENDENT LIVING, INC.

**PURPOSE:**

The Quality Service Award is an interagency program by which employees of the Western New York Independent Living, Inc. family of agencies, are recognized for their service to consumers, fellow employees and the community.

Nominees for this award are:

1. Individuals who have demonstrated their commitment to service excellence through exemplary service to consumers
2. Consistently high performance of their assigned duties and
3. Extended effort and support for the mission of their agency

The basis of this program is in people recognizing people for **doing their best**.

The integrity is in honest recognition of each others efforts and accomplishments.

The pride is in being recognized by peers for a job well done.

**PROCESS:**

The attached for is to be used to nominate candidates for the monthly Quality Service Award for employees of the agency. Candidates for this award may be nominated under the following guidelines:

**1) ELIGIBILITY:**

Any paid staff member (who is not a member of Management Team) is eligible to be nominated and considered for the monthly Quality Service Award. Volunteers of the agencies are not eligible for nomination. All staff members become eligible after completing the 180 day probation period for newly hired staff and remain eligible unless they are on disability leave, leave without pay, administrative probation, or suspension. Those individuals become eligible upon returning to full work status. Eligibility status is confirmed with supervisor.

Nominees will remain eligible until the end of the nomination year during which they were nominated (June through May) and need not be re-nominated each month for consideration. Eligibility will be re-confirmed with supervisor, each month. At the end of the eligibility year, all nominations will be placed in the personnel file.

Exclusion: Members of the combined WNYIL Management Team are ineligible for nomination.

**2) NOMINATIONS:**

Candidates may be nominated more than once. There are restrictions on who may nominate. A candidate may not nominate himself or herself. Anonymous nominations will not be considered. Nominations will be accepted from: a consumer, staff member, volunteer or board member familiar with the candidates work, manager or supervisor for persons outside of their work group.

Nomination forms will be accepted during the first two full weeks of work each month, for consideration that month. Forms not received by the last day of the second full week will be held over consideration the next month. All nominations are confidential. Nominees will not be told they are up for consideration, nor will they be told who they were nominated them. Members of the committee will not disclose any information of, or to, non-committee members. No nominee will be allowed access to any nomination form until it is placed in their personal file. A list of all employees nominated for the year will be compiled and all nominees will be recognized at the WNYIL Annual Dinner.

**3) SELECTION:**

Selection of the monthly Quality Service Award recipient will take place prior to the last full staff meeting of each month. The monthly winner (for the next month) will be announced at that staff meeting. Nominations will be reviewed by a committee made up of at least one (1) member of each work group and one (1) non-voting chairperson elected from committee members. Candidates not selected for the award, once re-approved by the supervisor, will be considered the next month, until the end of the nomination year (June through May) in which they were nominated. Selection of the monthly winner will be based on service and merits of the nominee as outlined and described in the nomination form. During consideration of nominees, the committee (or any member) may request the person writing the nomination to provide additional information intended for clarification of the nomination. Once a candidate has been selected for an award, they will not be eligible for consideration for one full year (12 calendar months) from the award month.

**4) AWARD**

Winners of the monthly Quality Service Award will receive a paid day off (date to be approved by supervisor), a certificate suitable for framing and temporary custody of the ‘Employee of the Month’ desk plaque. All winners will be consideration as candidates for the Employee of the Year Award, as presented at the annual dinner.

**HOW TO NOMINATE:**

1. Obtain a copy of the Quality Service Award nomination form from your program manual, any committee member or the wall displays.
2. Provide the information requested on the form. Date. Your name(s). Name of nominee. And a detailed explanation of why you believe this individual deserves the award.
3. Follow the instructions on the Nomination Form.
4. Put the completed nomination form in a sealed envelope.
5. Write ‘Employee of the Month’ on envelope.
6. Turn the form into any committee member. (Committee member names are listed on the wall displays.)

**REMINDER:**

Nominations without the name of nominators will not be considered. Nominations received after the close of the second full work week will not be considered that month. They will be held over and considered the next month. Nomination does not guarantee winning. Be specific, the more detailed a nomination, the less need for clarification. Be specific, this will better enable the committee to make an informed choice.

**QUALITY SERVICE AWARD**

**NOMINATION FORM**

Date: Your Name(s):

 Phone(s):

NOMINATION:

Candidates for this award are:

1. Individuals who have demonstrated their commitment to service through excellent service to consumers.
2. Consistently high performance of their assigned duties and
3. Extended effort and support for the mission of their agency

Please use the space below, and on the reverse side, to thoroughly describe the reason the Candidate is deserving of the award. Remember the quality of your effort, through specific examples and detailed description, can greatly enhance the committee’s ability to select the most deserving candidate.

I wish to nominate for consideration of the Quality Service Award.

Please Answer ONE or MORE of the following questions. (Use back of paper if needed.)

1. How has the nominee demonstrated commitment to service through excellent service to consumers? (**BE SPECIFIC**)
2. How has the nominee demonstrated consistently high performance of their assigned duties? (**BE SPECIFIC**)
3. How has the nominee demonstrated extended effort and support for the mission of their agency? (**BE SPECIFIC**)
4. Why do you believe this nominee is most deserving of the award? (**BE SPECIFIC**)

Return to:

Western New York Independent Living, Inc.

3108 Main St.

Buffalo, NY 14214

Attn: Human Resource Dept.