# 2023 Prevention Awards of Excellence Nomination Form



Nominations must be emailed and received by **5 p.m. Wednesday, August 9, 2023** Email Your Completed Nomination Form to: **martha.williams@hca.wa.gov** 

If a nominator wishes to submit more than one nomination, a separate nomination form must be submitted for each additional nominee.

## Mark one award category (categories are bolded) and sub-category (if applicable)

### Tribal and Urban Indian prevention efforts

Individual professional or leader

Promising new prevention professional (individuals with two or less years in the field)

Youth Leadership

Middle school individual (grades 6 - 8)

High school individual (grades 9 - 12)

High school group/club

Middle school group/club

Youth council

Coalition, task force or prevention group

American Indian/Alaskan Native organization, business, or agency

#### Youth leadership (school-aged youth)

Individual

Middle school youth (grades 6 - 9)

High school youth (grades 10 - 12)

Group

Middle school group/club

High school group/club

Tribal group/club

#### Young adult leadership

### Prevention professional and/or community prevention supporter

Individuals with two or less years in the field

Individuals with three or more years in the field

Lifetime achievement

Community coalition and/or co	ommunity prevention group		
Community-Based Organiza	tion (CBO)		
Community Prevention and V	Wellness coalition (CPWI)		
Drug Free Communities (DFC)	)		
Tribal			
Other prevention focused org	Other prevention focused organization (including problem gambling-focused)		
Contributions to prevention by	y an organization, business, or ager	псу	
Outreach or implementation o	of a prevention program		
Early-career prevention profes	ssional		
Nominator information for	or all categories		
Nominator name:			
Nominator agency:			
How do you know the nominee:			
Nominator telephone:			
Nominator cell phone:			
Nominator email: Nominator mailing address:			
Street:			
City:	Zip code:	:	
Do you want the Award committee	to contact the nominee regarding t	he results of the nomination?	
Yes, please contact them.	No, I will contact them myself.		
References for all catego	ories		
List the names, email addresses, and you have provided (required):	telephone numbers of two references	that can substantiate the information	
Name	Email address	Telephone number	
1			

## Nominee information for categories 1 - 6 Name of nominated individual, group/club, organization, business, or agency:

Nominnee mailing address:		
City:		Zip code:
Nominee telephone:		
Nominee email:		
For category 6 only: Name of contact at the group/club, c	rganization, business (s	such as library, theater, restaurant, etc.), or agency:
Nominee information for	category 7	
Name of outreach or implemented p	rogram:	
Name of program lead:		
Program lead mailing address:		
City:	State:	Zip code:
Program lead telephone:		
Program lead email:		
Nominee information for	category 8	
Name of degree-granting institution:		
Name of degree or certificate program	n:	
Name of nominated early-career pre	vention professional:	
Nominee mailing address:		
City:	State:	Zip code:
Nominee telephone:		
Nominee email:		

## Award nomination narrative

Each question response is rated on a scale of 0-4 points (0 is low, 4 is high). A perfect submission could yield a total of 36 (for categories 1 - 7) or a total of 40 (for category 8). Scores are competitive within respective categories.

The best nominations will completely answer each question, provide specific examples, and include information in each answer that shows how the nominee excels in their work. Keep in mind that the review committee will have only the information that you provide to assess the nominee's suitability for an award. Nominations with missing or otherwise incomplete information may not be able to be scored properly due to missing information.

## Questions for Categories 1 - 6

### Explain why or how the NOMINEE excels in each of the following areas:

1. How long has the nominee been contributing to prevention?

2. Describe their substance use disorder prevention, problem gambling prevention, suicide prevention, violence prevention, or mental health promotion work or activities and how it sets them apart from their peers. 3. Describe how the nominee demonstrates cultural competency. 4. Give an example of how the nominee has served under-served populations. 5. Provide at least one example of an outstanding contribution or commitment in which the nominee was involved with the community or school in prevention efforts. 6. Describe how the nominee faced or overcame challenges (i.e. systemic barriers, lack of funding, and/or leadership support) to achieve their goals. 7. Provide an example of how the nominee has shown leadership in prevention. 8. Provide examples of strong partnerships that have been developed and how the partnerships have enhanced prevention efforts. 9. Optional: What other information would you like the review team to consider?

## Questions for Category 7

## If nominating the outreach or implementation of a PROGRAM, answer the following:

1. How long has the substance use disorder prevention, problem gambling prevention, suicide prevention, violence prevention, or mental health promotion program been implemented?
2. What is the program's goal, objective, and target audience? Describe the success of the program based on how it was implemented.
3. Outline the program's evaluation plan (outcomes expected, tools, and timelines to measure success, process for improvement based on outcomes, etc.).
4. Please share any findings (pre-post data, Healthy Youth Survey, etc.) of the prevention program's outcome- based evaluations?
5. When implementing/operationalizing the program, please share any evidence-based prevention theory, such as the Risk and Protective Factor Model, that were incorporated?
6. Please describe any strategies used to successfully find volunteers or in-kind contributions based on the merits of the program?
7. How is collaboration and community involvement incorporated into the program's implementation?

8. Describe local community sectors and any stakeholder/audience involvement in assessment, planning, implementation, and evaluation?
9. Optional: What other information would you like the review team to consider?
Questions for Category 8  Explain why or how the NOMINEE shines in each of the following topics.  1. How long has the nominee been studying or contributing to prevention?
2. Describe their scholarly contributions to the field of substance use disorder prevention, problem gambling prevention, suicide prevention, violence prevention, or mental health promotion work or activities and how it sets them apart from their peers.
3. Describe how the nominee strives to serve under-served populations.
4. Give an example of how the nominee demonstrates cultural competency.
5. Provide at least one example of an outstanding intellectual or scholarly contribution or commitment in which the nominee was involved with the generation of dissemination of scientific evidence regarding effective prevention program(s) or practice(s).

6. When carrying out the work described in response E above, how was evidence-based prevention theory, such as the Risk and Protective Factor Model, incorporated?
7. Describe how the nominee faced or overcame challenges to achieve goals.
8. Provide an example of how the nominee has shown they are a leader in prevention.
9. Provide examples of strong partnerships that have been developed and how the partnerships have enhanced prevention efforts.
10. Optional: What other information would you like the review team to consider?
Thank you for submitting the nomination!