DBHIDS Transformation Decade Awards

Friday, November 13, 2015

CALL FOR NOMINATIONS

The City of Philadelphia’s Department of Behavioral Health & Intellectual disAbility Services and the DBHIDS Quality of Work Life Committee invite you to submit a nomination for an individual, provider agency, or group (e.g. committees, coalition, etc.), whose practices have exemplified the spirit of the DBHIDS system transformation initiative.

Help us celebrate our Transformation Decade by acknowledging those in the community who have made a difference in the areas of addiction services, intellectual disAbility services, mental health, and recovery/resilience advocacy. We welcome individuals from all walks of life: Neighbors, individuals with disAbilities, teachers, friends, family, employers, co-workers, spiritual leaders, civic groups/organizations, self-advocates, medical professionals, business professionals, et al.

The categories below may seem very specific but we encourage you to send in your nomination even if you are unsure of the appropriate category. We are very interested in those who exemplify the DBHIDS transformation principles, directed at creating and supporting communities of recovery, resilience, and self-determination.

Arthur C. Evans, Ph.D.
Commissioner, Department of Behavioral Health & Intellectual disAbility Services
City of Philadelphia
www.dbhids.org/PHLtransformed
#PHLtransformed
Transformation Decade Awards

NOMINATION CATEGORIES

Please check the best category that would apply.

☐ SELF-DETERMINATION & BRIGHTER FUTURES: Nominee(s) is/are dedicated to promoting the broad range of supports and services to individuals with intellectual disAbilities, with emphasis on promoting self-determination, meaningful personal relationships, and community participation (Examples: Agency employees, teachers, etc.)

☐ COMMUNITY MENTAL HEALTH & WELLNESS: Nominee(s) is/are dedicated to community-based mental health services, with additional focus directed at creating communities of recovery and resilience (Examples: Community mental health workers, faith initiatives, coalitions, etc.)

☐ CHILDREN & YOUTH: Nominee(s) is/are dedicated to behavioral health treatment and/or intellectual disAbility support services for children and youth, reinforcing the importance of resilience-oriented care (Examples: Child/youth advocates, provider agencies, hospitals, etc.)

☐ CROSS-SYSTEM COLLABORATION: Nominee(s) exhibit(s) a commitment to enhancing services and coordinating care relevant to the fields of behavioral health and intellectual disAbility services, yet works outside of the fields (Examples: Individuals may work within the fields of criminal justice, child welfare, shelter system, school system, higher education, etc.)

☐ ALIGN, COORDINATE, & INTEGRATE – INNOVATIONS & IMPROVEMENTS IN SERVICE DELIVERY: Nominee(s) is/are dedicated to identifying innovative approaches and/or improving system practices, specific to behavioral health & intellectual disAbility service delivery (Examples: Individuals whose work may be focused in the areas of technology, evidence-based practice, health reform, etc.)

☐ ADDICTION SERVICES & RECOVERY ADVOCACY: Nominee(s) is/are dedicated to transforming efforts in the areas of substance use prevention, intervention, treatment, and recovery/resilience advocacy (Examples: Recovery specialists/coaches, alcohol and other drug providers/groups, etc.)

☐ PEER CULTURE & FAMILY INCLUSION: Nominee(s) has/have shown influence as a source of peer support/leadership and/or family member advocacy within the areas of behavioral health and intellectual disAbility services (Examples: Peer specialists, parent advocates, etc.)

DEADLINE FOR NOMINATIONS: OCTOBER 1, 2015

Thank you for your nomination!
Transformation Decade Awards

NOMINATION CONTACT INFORMATION

Tell us why your nominee(s) is/are an outstanding Transformation Decade champion. Please choose one category per nomination. Use additional paper to support your nomination if needed.

I nominate: ________________________________________________________________

Agency/Business/Affiliation (if any) _____________________________________________

Home address, city, state, zip: ________________________________________________

Phone ___________________________ Email: ________________________________

Why is this individual/agency/group worthy of a Transformation Champion award?

Your name_________________________ Email_________________________

Relationship to nominee: ____________________ Cell#__________________________

Agency/Business/Affiliation and address: _______________________________________

Send nominations to loreal.mccollum@phila.gov, 215-546-1200 x 4773 (phone), 801 Market Street, 7th fl. (Ste. 7200), Philadelphia, PA 19107