

## 2021 RWHC RURAL HEALTH AMBASSADOR AWARD NOMINATIONS

### **Purpose:**

*RWHC has established the Rural Health Ambassador Award to recognize employees at member hospitals who have gone above the call of duty in promoting their respective organizations and who made significant contributions to rural health care in general. The award criteria do not necessarily emphasize job performance or years of service—although these may be used as secondary factors in your internal selection process. Any organization that is a current member of RWHC is encouraged to select one employee to receive this annual award. The ideal candidate should demonstrate a history of fostering positive communication and relations within the hospital’s respective service area—and beyond.*

### **Criteria:**

1. Nominee must be a current employee of a hospital that is an active member of the Rural Wisconsin Health Cooperative.
2. Primarily, Nominee must be involved in one or more activities that enhance either the image of the hospital or the relationship between the hospital and the surrounding service area. Examples include:
  - Serving as the hospital representative on community boards/service organizations
  - Taking advantage of volunteer or public speaking opportunities through the hospital
  - Participating in hospital events (health fairs, outreach activities, parades, etc.)
  - Supporting community health activities beyond the scope of the hospital
3. Secondly, Nominee supports and strengthens rural health care within their community, including participation in RWHC roundtables, task forces and committees.
4. Nominee routinely demonstrates a positive attitude and demeanor during interactions with patients, visitors, coworkers and other customers.

**Process:**

1. RWHC solicits nominations from member hospitals. Each hospital must identify a “Nominator” (typically the PR/marketing manager) who will serve as the hospital contact.
2. The Nominator should organize an internal nominating committee that could include representatives from administration, HR, and PR/marketing, etc. This group will be responsible for determining the internal selection process for their respective organization. Several nominees can be considered, but only one name can be submitted to RWHC for the award. *It is strongly recommended that the review team adhere to the award program criteria and solicit input from department managers.*
3. Names of final nominees must be submitted to RWHC by **April 23, 2021**, using the forms provided. Send complete nomination packet to:

*Jane Mutch*  
*RWHC*  
*880 Independence Lane*  
*Sauk City, WI 53583 Fax:*  
*608-643-4936 email:*  
[jmutch@rwhc.com](mailto:jmutch@rwhc.com)

4. One award recipient will be recognized for every hospital that submits a nomination; one per hospital. All recipients will receive a certificate of recognition, a small token of appreciation and will be featured on the RWHC website.
5. The award will be presented at the recipient’s place of employment. Coordination of any onsite award ceremony will be the responsibility of the Nominator. The presentation can be made by either a representative of RWHC and/or a representative of the hospital.
6. RWHC will assist in preparing and distributing press release content relating to the award.



**RURAL WISCONSIN HEALTH COOPERATIVE  
2021 RURAL HEALTH AMBASSADOR AWARD**

**Nominee information** (use additional pages, if necessary)

**Name:**

**Department:**

**Organization:**

**Length of time in this position:**

**Length of time with organization:**

**Job title/duties:**

**Formal education:**

**Community activities (hospital-related and other):**

**Involvement with RWHC or other rural health organizations (secondary and optional):**



**RURAL WISCONSIN HEALTH COOPERATIVE  
2021 RURAL HEALTH AMBASSADOR AWARD**

**Nominator Page** (use additional pages, if necessary)

**Name:**

**Title/department:**

**Relationship to nominee (e.g., co-worker, manager, etc.):**

**Contact information (inc. phone and e-mail):**

**Name of nominee:**

**Why do you feel this person is deserving of this award?**

**Briefly describe your internal nomination/evaluation process:**

**Nominator signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_