**AHF Partnership in Leadership Award  
Submission 2024**

**Form Instructions:**

* *Complete the Submission Form below in its entirety.*
* *“Save As” the file name including the nominees name, ex. “AHF 2024 Partnership in Leadership Submission Form\_First Name Last Name”.*
* *Upload this completed and saved file in the online submission form on the* [***AHF Conference Website***](https://ahfconference.org/2024-call-for-entries/)*.*

**Entry Requirements:**

* All entries must be submitted in a single Word document that does not exceed 4 pages
* Nominees must be an AHF member in good standing

**Evaluation Criteria**

* Demonstrate project primary objective and overall results
* Highlight the scope and complexity of director/administrator relationship
* Explain obstacles encountered and resolutions achieved by working together
* Administrator support and advocacy of AHF and its members
* Applicability to AHF membership and the healthcare industry

***Deadline for submission is March 31, 2024.***

**Partnership in Leadership Award Submission Form**

**Nominator's Name:**

**Nominator's Facility/Company:**

**Nominator's Email Address:**

**Nominee's Name:**

**Nominee's Facility:**

**Nominee's Email Address:**

**Nominee's Preferred Phone Number:**

**Nominee's Facility Location:**

**Nominee's Facility Size/Bed Count:**

**All entries must answer *at least five* of the following questions, one from each criteria category:**

***Each questions answer should be 750 words or less and submitted in this Word Document. You may use photos to illustrate points.***

**Project primary objective and overall results**

* What was the inspiration for your project or initiative?
* What was the goal of the project or initiative that the Operator and Administrator worked on together?
* What were the specific results achieved?
* How did the project improve patient care, nutrition, or satisfaction?
* What impact has your project had on patients, staff, and the overall organization?

**Scope and complexity of director/administrator relationship**

* Describe the nature of the relationship between the Operator and Administrator.
* How did you work together to plan and implement the project?
  + How did you work together to support each other's goals and objectives?
* How have you built trust and rapport?

**Obstacles encountered and resolutions achieved by working together**

* What were some of the challenges you faced and how did you overcome them?
* What lessons did you learn along the way?

**Administrator support and advocacy of AHF and its members**

* How has the Administrator supported AHF and its members?
* Have they been involved in AHF committees or activities?
* Have they advocated for self-operated healthcare foodservice?

**Applicability to AHF membership and the healthcare industry**

* How can other AHF members learn from the Operator and Administrator's experience?
* How can their project or initiative be replicated in other healthcare settings?