



2016
Core Value Recognition
Awards



To: All Employees
From: Richard Velos, CEO
Date: November 29, 2016
Subject: Announcement of Core Values Awards Program

Introduction

This purpose of this communication is to announce the launching of our new Core Values Award Program, which will begin on Today, November 29, 2016. Our Mission and Core Values invaluable guiding principles, which energize, drive and enrich our purpose of providing affordable and health care and education in a welcoming multi-cultural environment. Consequently, our *Core Values Awards* are the **MOST PRESTIGIOUS AWARDS** for any employee to receive to recognize outstanding employees who truly live our mission and core values, while achieving excellence in their service to our patients, their families, and our SCFHC community in 2016.

It is essential that the process for these selections is fair and based only on the merits as describe in the nomination documents. To this end, SCFHC has contracted Mr. Angel Obregon, Executive Human Resources Consultant, to assist us with this program. Mr. Obregon has developed our program and will ensure that our nominating and selection process will be fair, professional and exciting!

Program Process

All employees are encouraged to nominate themselves, other coworkers, supervisors, managers, or executives, whom they believe demonstrate our mission and core values while performing their job duties. Our Mission and seven Core Values are provided below.

Mission

- ★ The Mission of South Central Family Health Center is to improve the quality of life for the diverse Community of inner city Los Angeles by providing affordable and comprehensive health care and education in a welcoming and multi-cultural environment.
- ★ To lead the way in health care in South Los Angeles, as the premier provider and employer of choice offering comprehensive, high quality, affordable, efficient and culturally responsive services.

Core Values

- ★ **#1 - Excellence** striving for the highest quality patient experience regardless of our individual role
- ★ **#2 - Integrity** firm adherence to a code of ethics, honesty, dependability, and respect
- ★ **#3 - Service** enthusiastic and professional service to our patients, their families, the referring physicians, our colleagues, and our community
- ★ **4 - Compassion** for our patients, their families, and each other
- ★ **5 - Respect** appreciation of patients, partners, and staff
- ★ **6 - Dedication** commitment to our mission and recognition of the group and individual needs
- ★ **7 - Fiscal Responsibility** long term financial discipline is the key to the security, strength, and growth of the organization

Nominating Forms

Each of the seven Core Values has a Nomination Form. Each Core Value Nomination Form has a set of four questions, which are ‘*unique*’ to each Core Value. Each question is worth 25 points, so answering all four questions (100 points) is important in order to increase the score of the nominee to receive the highest score. You may nominate an employee for more than one core value, but it is important to read and respond to each ‘unique’ question per Core Value Nomination Form.

Drafting Answers to Nomination Form

You are encouraged to “*tell the story*” of your nominee and how the nominee’s service ‘best represents’ the specific Core Value for which the employee is nominated. Telling the story of a specific example or set of examples is very powerful as you describe the event, the nominee’s actions, the patient’s actions, coworker’s actions and so on. Again, make certain you ‘fully’ answer all four questions (100 points), because each question is valued at 25 points. It is important to AVOID using the name of the Nominee when responding to each question. Simply write as follows, “***The Nominee demonstrated outstanding service when...***(describe the specific example). Avoiding the use of the NAME of Nominee is critical to ensure ‘fairness’ and objectivity. The NAME of Nominee should only be mentioned at the top of the Nomination Form.

Submission and Deadline

All nomination forms are provided to you in a Word document. You should type each of your nominations and when you complete your nomination form, you should enclose it in a self-sealed envelope and drop it into the Nomination Collection Box. **All Nomination Submission must be made by NOON Monday, December 12, 2016 to be considered. No exceptions!**

Confidentiality

Your nomination is *'confidential'* and we request that you keep it confidential. No employee may inquire whom you nominated, or for which core value, or why you nominated the employee. Only Mr. Obregon, Executive HR Consultant, is authorized to collect the nominations, read and evaluate each nomination. Mr. Obregon will also assign each nominee an *Identification Number* (Nominee #10) and going forward, the Nominees Name will remain anonymous. Mr. Obregon will then 'cut' the top portion of the Nomination Form to ensure anonymity of the Nominee for the Award Selection Committee.

Rating and Scoring System

Each question will be scored on a 100 point scoring system. The scale below provides an example of how each question within each Core Value category. Table 1, below, also provides how the 'percentage scoring range' is ranked.

Table 1. Question Rating System

Rating	100 Points Scale (4 Questions)	Ranking
Superior	90 to 100	1st
Excellent	89 to 80	2nd
Average	79 to 70	3rd
Below Average	69 and Below	Not Ranked

Scoring Evaluation

Each nomination will be reviewed and evaluated within each of the seven Core Value categories based upon 25 points per question, which equals to 100 points for all four questions. Table 2, below, illustrates the scoring and ranking system per questions. The Total Score, in **red**, represents how they were ranked.

Table 2. Core Value #1: Excellence

A	B	C	D	E	F
Max 100%		Question 1	Question 2	Question 3	Question 4
Total Score	Example CV #1 Questions	Excellent Patient Experience	Best Possible Services	Goes Extra Mile	Compassionate Care & Commitment
98%	Nominee #10	25	25	24	25
96%	Nominee #20	24	24	24	24
95%	Nominee #30	23	23	24	25

Selection of Finalists

The ‘*Top 3 Nominees*’ for each of the seven Core Values will be selected as ‘*Finalists*’ based upon their score. Table #3, below, illustrates the Finalist List.

Table 3. Finalists Table

Core Value Category	Nominee #	Final Ranking
Core Value #1: Excellence	Nominee #10	
Core Value #1: Excellence	Nominee #20	WINNER
Core Value #1: Excellence	Nominee #30	
Core Value #2: Integrity	Nominee #40	WINNER
Core Value #2: Integrity	Nominee #50	
Core Value #2: Integrity	Nominee #60	
Core Value #3: Service	Nominee #70	
Core Value #3: Service	Nominee #80	
Core Value #3: Service	Nominee #90	WINNER
Core Value #4: Compassion	Nominee #100	
Core Value #4: Compassion	Nominee #200	WINNER
Core Value #4: Compassion	Nominee #300	
Core Value #5: Respect	Nominee #400	WINNER
Core Value #5: Respect	Nominee #500	
Core Value #5: Respect	Nominee #600	
Core Value #6: Dedication	Nominee #700	
Core Value #6: Dedication	Nominee #800	WINNER
Core Value #6: Dedication	Nominee #900	
Core Value #7: Fiscal Responsibility	Nominee #1000	
Core Value #7: Fiscal Responsibility	Nominee #2000	
Core Value #7: Fiscal Responsibility	Nominee #3000	WINNER

Selection of the Winners

The Nomination Form for each of the 21 Finalists, 3 per Core Value category, will be sent to the Award Committee. The Award Selection Committee will be required to read and evaluate each nominee per Core Value category per the scoring and ranking system. Each Award Committee member will then ‘rank’ each nominee per Core Value category and determine the winner for each Core Value category (See Table 3, above, Final Ranking). Therefore, the Award Selection Committee will determine the seven winners based upon 100% rating and ranking system.

Awards Presentation

The names of the 21 Finalists will be announced at the Awards Event on December 16th. Each of the Finalists will be awarded a *Certificate of Recognition* for each Core Value category. The Winners for each Core Value will then be announced and this employee will be presented a beautiful Core Value Award trophy!

Best of Luck to All!
**Look Forward to See You at the Awards
Presentation!**



2016 Core Value Awards

Excellence, Integrity, Service, Compassion, Respect, Dedication and Fiscal Responsibility



South Central Family Health Center

2016 Core Value Awards

Nomination Form for: Core Value # 1

Excellence striving for the highest quality patient experience regardless of our individual role

Deadline: December 12, 2016 - Noon

NOMINEE INFORMATION:

First and Last Name: _____
(print the required information)

Title: _____ Dept: _____

VOTER'S INFORMATION:

My Name: _____
(Print First and Last Name)

My Title: _____ My Program/Phone # _____

ALL QUESTIONS MUST BE ANSWERED COMPLETELY AND THOROUGHLY. YOU MAY USE ADDITIONAL PAGES AND ATTACH TO THIS FORM TO PROVIDE ADDITIONAL INFORMATION IF NECESSARY.

1. How does the nominee provide an 'excellence patient experience' when providing service to patients? Give an example how the patient responded after receiving care.

2. Does the nominee 'go beyond his or her duties' of providing the best possible services to the patients? Is the nominee always there for other s and how?

3. Give a specific example of how the nominee has 'met the patient or family needs' without question or complaint to ensure that the patients receive the best possible care.

4. Give a specific example of how the nominee professionalism and commitment to care has 'elevated the performance of others and the department'.



2016 Core Value Awards

Nomination Form for: Core Value # 2

Integrity firm adherence to a code of ethics, honesty, dependability, and respect

Deadline: December 12, 2016 - Noon

NOMINEE INFORMATION:	
First and Last Name: _____ (print the required information)	
Title: _____	Dept: _____
VOTER'S INFORMATION:	
My Name: _____ (Print First and Last Name)	
My Title: _____	My Program/Phone # _____
<i>ALL QUESTIONS MUST BE ANSWERED COMPLETELY AND THOROUGHLY. YOU MAY USE ADDITIONAL PAGES AND ATTACH TO THIS FORM TO PROVIDE ADDITIONAL INFORMATION IF NECESSARY.</i>	

1. Give an example of how the nominee demonstrates SCFHC's 'code of ethics, honesty, dependability, and respect' with employees, patients and/or community.

2. Describe how the nominee follows SCFHC's standards 'professional conduct' in dealing with people inside and/or outside of the organization.

3. Give an example of how the nominee has demonstrated 'integrity in the performance' of his/her job and 'loyalty' to SCFHC and to his/her fellow employees.

4. What has the nominee done to consistently promote the respect and the 'rights of patients, or staff or others'?



2016 Core Value Awards

Nomination Form for: Core Value # 3

Service enthusiastic and professional service to our patients, their families, the referring physicians, our colleagues, and our community

Deadline: December 12, 2016 - Noon

NOMINEE INFORMATION:	
First and Last Name: _____ (print the required information)	
Title: _____	Dept: _____
VOTER'S INFORMATION:	
My Name: _____ (Print First and Last Name)	
My Title: _____	My Program/Phone # _____
<i>ALL QUESTIONS MUST BE ANSWERED COMPLETELY AND THOROUGHLY. YOU MAY USE ADDITIONAL PAGES AND ATTACH TO THIS FORM TO PROVIDE ADDITIONAL INFORMATION IF NECESSARY.</i>	

1. Describe how the nominee provides 'enthusiastic and professional service' to our patients, their families, the referring physicians, our colleagues, and our community.

2. While providing services to SCFHC's patients describe how the nominee helps 'develop, coach and mentor other employees'.

3. What does the nominee do as a 'team member to create a positive working environment' and promote effective patient/customer service and communications among other staff?

4. How does the nominee 'contribute to the overall success of your department/program'? Give an example of how the nominee contributes or assists other employee/s to be successful.



2016 Core Value Awards
Nomination Form for: Core Value # 5
Dedication commitment to our mission and recognition
of the group and individual needs
Deadline: December 12, 2016 - Noon

NOMINEE INFORMATION:	
First and Last Name: _____ (print the required information)	
Title: _____	Dept: _____
VOTER'S INFORMATION:	
My Name: _____ (Print First and Last Name)	
My Title: _____	My Program/Phone # _____
<i>ALL QUESTIONS MUST BE ANSWERED COMPLETELY AND THOROUGHLY. YOU MAY USE ADDITIONAL PAGES AND ATTACH TO THIS FORM TO PROVIDE ADDITIONAL INFORMATION IF NECESSARY.</i>	

- 1. Describe how the nominee ‘promotes a dedication and commitment to our mission to improve the quality of life’ for the diverse community of inner city Los Angeles**

- 2. Describe how the nominee ‘provides or advocates for affordable and comprehensive health care and/or education’ in a welcoming and multi-cultural environment.**

- 3. Describe how the nominee provides ‘recognition of a community member or community group’ with assistance to meet the individual’s or group’s need(s).**

- 4. Explain how the nominee is ‘proactive in establishing wellness activities and maintaining relationships with community members’ who are involved in positive changes or used his/her “voice” to advocate for strong and healthy communities.**



2016 Core Value Awards
Nomination Form for: Core Value # 6
Respect appreciation of patients, partners, and staff
Deadline: December 12, 2016 - Noon

NOMINEE INFORMATION:	
First and Last Name: _____ (print the required information)	
Title: _____	Dept: _____
VOTER'S INFORMATION:	
My Name: _____ (Print First and Last Name)	
My Title: _____	My Program/Phone # _____
<i>ALL QUESTIONS MUST BE ANSWERED COMPLETELY AND THOROUGHLY. YOU MAY USE ADDITIONAL PAGES AND ATTACH TO THIS FORM TO PROVIDE ADDITIONAL INFORMATION IF NECESSARY.</i>	

- 1. Give an example how the nominee demonstrates ‘respect and dignity’ for patients, or partners, and/or staff when the nominee performs his/her responsibilities.**

- 2. How does the nominee ‘balance the needs’ of patients, or partners, and or staff when the nominee performs his/her responsibilities?**

- 3. Give an example of how the nominee demonstrates ‘inclusiveness’ when interacting with patients, or partners, and or staff.**

- 4. Explain how the nominee has demonstrated ‘openness’ to include the point of view of our patients, or partners or staff when the nominee performs his/her responsibilities.**



South Central Family Health Center

2016 Core Value Awards

Nomination Form for: Core Value # 7

Fiscal Responsibility long term financial discipline is the key to the security, strength, and growth of the organization

Deadline: December 12, 2016 - Noon

NOMINEE INFORMATION:

First and Last Name: _____
(print the required information)

Title: _____ Dept: _____

VOTER'S INFORMATION:

My Name: _____
(Print First and Last Name)

My Title: _____ My Program/Phone # _____

ALL QUESTIONS MUST BE ANSWERED COMPLETELY AND THOROUGHLY. YOU MAY USE ADDITIONAL PAGES AND ATTACH TO THIS FORM TO PROVIDE ADDITIONAL INFORMATION IF NECESSARY.

1. Describe how the nominee has demonstrated 'fiscal responsibility and long term financial discipline' to ensure the security, strength, and growth of the organization.
2. Provide an example how the nominee 'inspires others' to be financially disciplined and utilize company resources wisely.
3. Describe how the nominee's fiscal leadership assists in 'achieving a key department of corporate goal'. Was the nominee been 'responsible and accountable' for the achievement of the goal?
4. Describe how the nominee's activities fiscal responsibility has 'advanced SCFHC's mission to become a premier provider and employer of choice offering comprehensive, high quality, affordable, efficient and culturally responsive services.