



## WHAT SETS A SUNFLOWER AWARD-WINNER APART?

The Sunflower Award recognizes and celebrates the extraordinary work of staff other than your doctors and nurses who help you during your hospital visit.

**SUNFLOWER AWARD** nominees should demonstrate the following principles:

### INTEGRITY

Maintains trust and confidence of patients

### COMMITMENT

Serves patients and families by honoring Capital Health mission

### ADVOCACY

Focuses on serving the best interest of patients

### RESPECT

Provides dignity and respect to everyone

### EXCELLENCE

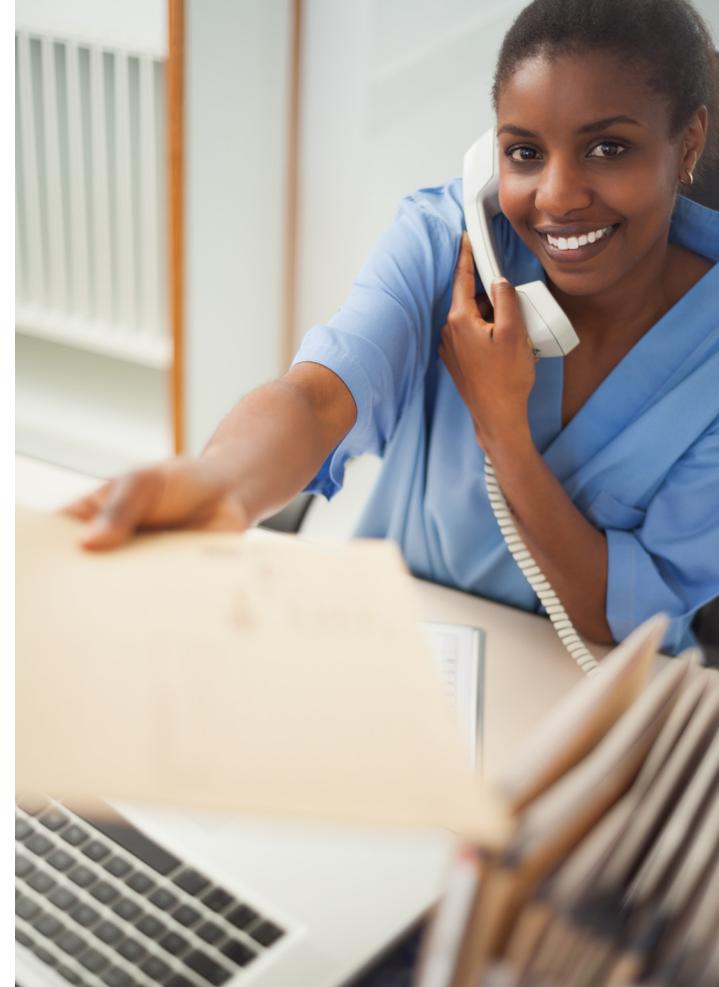
Strives for highest quality care

Two honorees will be selected each quarter, representing both hospitals and off-site locations. Nominations can be submitted at any time via mail or online at: [capitalhealth.org/sunflower](https://capitalhealth.org/sunflower).

**QUESTIONS?** Contact Capital Health Nursing Administration (Hopewell: 609.303.4150, RMC: 609.394.6033).

If you'd like to help honor these wonderful caregivers, consider making a donation to the Healthcare Heroes Program. To learn more, visit [capitalhealth.org/donate/healthcareheroes](https://capitalhealth.org/donate/healthcareheroes) or call the Development Office at 609.303.4121.

Capital Health Medical Center – Hopewell  
ATTN: Nursing Administration  
SUNFLOWER Award Nomination Committee  
One Capital Way  
Pennington, NJ 08534



# SUNFLOWER AWARD



The Sunflower Award



capitahealth

Minds Advancing Medicine

[capitalhealth.org/sunflower](https://capitalhealth.org/sunflower)

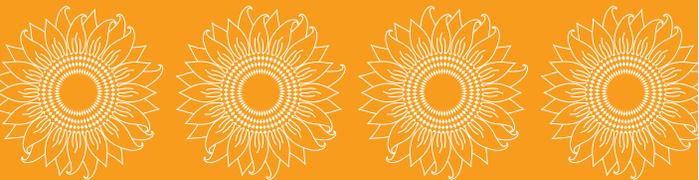


Submit a nomination online at [capitalhealth.org/sunflower](http://capitalhealth.org/sunflower)  
OR fill in the form below and return this portion via mail.

Capital Health is proud to present the **SUNFLOWER AWARD** to recognize staff other than your doctors and nurses who help you during your hospital visit for their compassion and dedication.

Hospitals can be complex and confusing settings for those who are visiting for the first time or are otherwise not familiar. When physicians and nurses are busy at the bedside, many other staff members in the hospital help make your experience as comfortable and safe as possible.

This award allows patients, families, and colleagues to recognize the work of these exceptional medical professionals by nominating them for this achievement.



Nominee Name: \_\_\_\_\_  
first last

Campus:  Hopewell  Regional Medical Center  Off Site Location  
Department/Unit \_\_\_\_\_

Nomination Information:

In the space below, please detail your reason for nomination. Describe a specific situation when the nominee demonstrated exemplary skill and compassion in accordance with I CARE principles.

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Thank you for taking the time to recognize a Capital Health patient care assistant, nursing assistant or unit secretary. Please provide your contact information so we may notify you in the event of your nominee being selected for the award.

YOUR Name: \_\_\_\_\_  
first last

Contact Phone: \_\_\_\_\_

Email: \_\_\_\_\_