

ANNUAL COAST GUARD PHARMACY AWARDS PROGRAM

ESTABLISHED July 31, 2006

The Coast Guard Pharmacy Awards Program, established in 2006 as an annual program which recognizes a Coast Guard/Public Health Service Pharmacist and a Coast Guard Pharmacy “C” school trained Pharmacy Technician.

Enclosed is information on the annual Coast Guard Pharmacy Awards Program. Please note the nomination form is attached on the last page and may be electronically copied and sent as an email attachment.

The awards will be presented annually during the Joint Federal Pharmacy Seminar, which meets in the fall.

AWARDS: In order for the nomination and selection process to be completed by the required deadline, nominations should be submitted for receipt at CG HQ NLT 15 July.

Note: This is a firm suspense date-No exceptions. Please contact CDR Christopher Janik via email (Christopher.Janik@uscg.mil), for questions or concerns about the awards.

Nominations for each award category must be submitted separately with supporting documentation limited to one page in length. **A photograph or a digital image of the nominee must accompany the nomination.**

ANNUAL

**US COAST GUARD
PHARMACY AWARDS
PROGRAM**

**INFORMATION
PACKET**

**JOINT FEDERAL
PHARMACY SEMINAR**

COAST GUARD PHARMACY

ANNUAL AWARDS PROGRAM INFORMATION

Background: The Coast Guard Pharmacy Awards Program was established in 2006. The Coast Guard Pharmacy Awards Program is supported by the American Pharmacists Association (APhA) sustaining membership.

The Award Process

Nominations will be solicited through information packets sent to each clinic through E-mail notification, or OIX message. Nominations will require Command endorsement. Submission of nomination packets should be forwarded to the Coast Guard Pharmacy Program Coordinator/Chief no later than 15 July of each year. An award selection committee reviews and evaluates each nominee based on the merits of their **individual contributions and demonstrated commitment to pharmacy excellence**. One award recipient in each respective category is selected with awards presented during the annual DOD Joint Federal Pharmacy Seminar. NOTE: As a possible participant in the selection process, the Coast Guard Pharmacy Program Coordinator/Chief shall not be named as a nominee. Recipients of the respective awards within the last three years are not eligible.

The Awards

Coast Guard Pharmacist Award: This award recognizes excellence, leadership, and innovation in the practice of Coast Guard Pharmacy Operations and Administration and is presented for superior achievement in which either a Coast Guard leader's or the organization's vision was lifted to a higher standard above and beyond the status quo. Nomination eligibility criteria: A Coast Guard registered and licensed Pharmacist (Active Duty or civilian) EXCLUDING the Pharmacy Program Coordinator/Chief may be nominated for sustained excellence in leadership and innovation, or for a specific act within the last 12 months that has had a significant impact, in improving the standards of practice, patient care and outcomes, operational efficiency, cost-effectiveness, or other such worthy improvements in practice in support of Coast Guard Pharmacy operations. NOTE: Recipients of this award within the last three years are not eligible for nomination.

Coast Guard Pharmacy Technician Award: This award recognizes excellence in the practice of Coast Guard Pharmacy Operations and Administration by a "C" school trained Pharmacy Technician. Nomination eligibility criteria: An Active Duty Pharmacy "C" school trained technician, currently working at least 50% of the time in a Coast Guard pharmacy setting, may be nominated for sustained excellence, or for a specific act within the last 12 months that has positively improved patient care or the practice of Coast Guard Pharmacy operations. NOTE: Recipients of this award within the last three years are not eligible for nomination.

COAST GUARD PHARMACY AWARD NOMINATION FORM

DATE: _____

NAME OF NOMINEE: _____

PRACTICE SITE ADDRESS: _____

TELEPHONE NUMBER: _____

AREA OF AWARD (*Check appropriate practice area*)

Pharmacy Officer _____ Pharmacy Technician _____

SUBMITTED BY: _____

ADDRESS: _____

TELEPHONE: _____

COMMAND ENDORSEMENT: _____

(signature) (printed name) CONTACT INFORMATION: _____

NOTE: Attach supporting justification (*in narrative form*) **NOT TO EXCEED ONE PAGE IN LENGTH (Font: Size 12, Times New Roman, 1/2 inch margins)**. A photo **must** accompany each nomination. Concise documentation related to specific projects may also be attached, if applicable to the award. These should be limited to just those needed to describe the project. Nominations greater than one page in length will not be accepted.

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