## **About The DAISY Foundation**

The DAISY Foundation was established in 1999 by the family of J. Patrick Barnes who died of complications of the auto-immune disease Idiopathic Thrombocytopenia Purpura (ITP) at the age of 33. (DAISY is an acronym for diseases attacking the immune system.) During Pat's 8 week hospitalization, his family was awestruck by the care and compassion his nurses provided not only to Pat but to everyone in his family. So one of the goals they set in creating a Foundation in Pat's memory was to recognize extraordinary nurses everywhere who make an enormous difference in the lives of so many people by the super-human work they do every day.



The DAISY Award is an international program that rewards and celebrates the extraordinary compassionate and skillful care given by nurses every day.

Cook County Health & Hospitals System is proud to be a DAISY Award Partner, recognizing one of our nurses with this special honor four times a year.

To find out more about the program, including the growing list of Partners, please go to www.DAISYfoundation.org.



Cook County Health and Hospitals System 1901 West Harrison Street, Suite 5630 Chicago, IL 60612



## Nomination Form SHARE YOUR STORY!

## Say Thank You to a Nurse For **Extraordinary Care**

DAISY Award honorees consistently demonstrate excellence through their clinical expertise and extraordinary compassionate care. They are recognized as outstanding role models in our nursing community.

To learn more about DAISY at Cook County Health & Hospitals System, or to nominate an extraordinary nurse electronically, please visit our website at: www.cookcountyhhs.org/daisy

Stamp g here goes



Each DAISY Award Honoree will be recognized at a ceremony in her/his unit and	
will receive: a beautiful certificate, a DAISY	
Award pin, and a hand-carved stone sculpture entitled "A Healer's Touch". Everyone in the	
unit will celebrate with Cinnabon, cinnamon	
rolls – a favorite of Patrick's during his illness.	
How to Nominate an Extraordinary Nurse	
Patients, visitors, and CCHHS employees may	
nominate a deserving nurse by filling out this	
form and submitting it to any DAISY ballot	Thank you for taking the time to nominate an
pox. An electronic version of this nomination	extraordinary, compassionate nurse for this
form is available on the CCHHS website. This form can also be mailed directly.	award. Please tell us about yourself, so that
offit carr also be mailed directly.	we may include you in the celebration of this
Name of the nurse you are nominating:	award if the nurse you nominated is chosen.
	Your Name
Area where this nurse works:	I am a (please check one):
taulus .	
	Patient Family/Visitor Employee
	Other:
Please describe a <mark>specific</mark> situation or story That clearly demonstrates how this nurse made	Date of nomination
a meaningful difference in your care or the	Please tell us how we may contact you:
care you witnessed this nurse provide. Feel	
ree to use additional pages.	Phone
	Email
anento 3	Pager
	Please submit this nomination form in any
	DAISY ballot box located at a CCHHS site or
	by mail. Visit www.cookcountyhhs.org/daisy to
	submit a nomination electronically.
#     \	If you have any questions places as at at
	If you have any questions, please contact Cherice Tompkins at (312) 864-5015.
	Cheffee Tompkins at (312) 004-3013.
	A CONTRACTOR OF THE CONTRACTOR