NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES

POLICY AND PROCEDURE

SUBJECT: EMPLOYEE RECOGNITION

NUMBER: NN-HR-06

ORIGINAL DATE: 02/02/06

REVIEW/REVISE DATE: 9/18/08, 8/16/12

APPROVAL: Cody L. Phinney, Agency Director

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I. PURPOSE

To establish a fair and consistent process by which to recognize employees campus wide

II. POLICY

Northern Nevada Adult Mental Health Services (NNAMHS) shall recognize its employees for exemplary efforts to enhance the mission of the agency.

III. PROCEDURES

1. Employee of the Quarter (EOQ)
   a. Nominations for Employee of the Quarter may be completed by a co-worker, consumer, supervisor, or administrative staff.
   b. Nominations shall be submitted to the Personnel office via email or completed paper nomination form. The personnel representative shall bring all forms received in the quarter to the Employee Management Committee (EMC) meeting in the month following the end of the quarter (i.e. April, July, October, and January). If the personnel representative is unable to attend the EMC meeting, the EMC Chair will present the forms
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at the meeting. Absent an appropriately timed meeting, the personnel representative will send all nomination information to the EMC committee members via email.

c. The EMC shall review all the nomination forms and vote for two (2) EOQs as a regular agenda item in April, July, October, and January. All members of the EMC shall keep the proceedings of the EOQ selection confidential. The EOQ shall be selected by majority vote. The committee will consider the following three criteria in making their decision: outstanding service, exceptional attitude, and excellence in work performance beyond their specific job requirements. Additional consideration may be given for professional development, community service, academic involvement, or any other outstanding achievements. In the event of a tie, the EOQ will be selected by a random drawing.
d. If there are no nominations for the current voting quarter, there will not be an award for the current quarter (i.e., January – March, April – June, July – September, and October - December).
e. When a member of the EMC is nominated for EOQ, the EMC Chair or designee shall inform the EMC member prior to the meeting and the nominee will be required to refrain from voting on their nomination.
f. If there is only one nominated person, that person shall be the EOQ.
g. A nominated employee may receive EOQ one (1) time in a 12-month period (calendar year).
h. Recognition for the EOQ shall consist of:
    1) The Agency Director or their designee presenting the EOQ with a certificate of appreciation.
    2) The EOQ and nominees shall be acknowledged in the NNAMHS newsletter and a letter of recognition placed in each of their agency personnel jackets.

3) The EOQ's name shall be posted to the campus website for the quarter.
4) The EOQ shall receive movie tickets and a pin.

IV. ATTACHMENTS

NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES (NNAMHS)
EMPLOYEE OF THE QUARTER
RECOGNITION NOMINATION FORM

As part of the Employees Management Committee (EMC), the Employees Recognition Committee reviews nominations for outstanding classified employees on a quarterly basis and recognizes two employees each month. The purpose of the recognition award is to acknowledge and reward Northern Nevada Adult Mental Health Services Employees (NNAMHS) for outstanding service, exceptional attitude and excellence in work performance beyond their specific job requirements.

Additional consideration for professional development, community service, academic involvement or any other outstanding achievements will be considered. All NNAMHS employees, public served, or supervisors may submit nominations.

_____ _____

NAME OF NOMINEE (Print) LOCATION (Work Area)

Please check the area of recognition:

_____Duties/tasks performed which are above and beyond what is expected within the job duties.

_____Valuable contribution toward enhancement of professional work relationships.

_____Suggestion and implementation for increasing quality services and/or decreasing expense.

PLEASE EXPLAIN, IN DETAIL, THE AREA(S) CHECKED:

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Return completed and signed nomination form by the last day of the Quarter.
Mark as "*Confidential*"
NNAMHS Employee of the Quarter
c/o Personnel, Attn: EMC
480 Galletti Way, Bldg 1
Sparks, NV 89431

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Employment status verified by NNAMHS Human Resources: _____(Y) _____ (N) Updated 11/1/05

A. AMHS Employee of the Quarter Recognition Nomination Form