



*To develop and implement a comprehensive provincial strategy, which promotes and supports excellence in the prevention, promotion, and management of COPD and Asthma in Alberta.*

## **The COPD & Asthma Network Award of Excellence**

### ***Criteria***

The recipient of this award has demonstrated outstanding commitment to improving the health outcomes and quality of life for individuals with asthma and/or COPD. The recipient must also be actively involved in advancing or demonstrating goals of the COPD & Asthma Network of Alberta (CANANA). CANANA's relevant values and guiding principles are listed below:

### ***Values***

- Focus on meeting the needs of respiratory health care professionals and related clientele
- Promote an inter-disciplinary model of service provision
- Support community-based initiatives
- Promote evidence-based practice and research
- Promote lung health
- Promote the prevention of lung diseases
- Support patient self-care
- Operate in a transparent manner

### ***Guiding Principles***

1. To reduce the impact of COPD and Asthma within Alberta
2. To ensure programs and services demonstrate a coordinated action that serves the entire province of Alberta
3. To demonstrate collaboration amongst sectors, respecting multidisciplinary needs and opinions
4. To optimize resource utilization
5. To ensure accessibility

**COPD & Asthma Network Award of Excellence**  
**Nomination Form**

Nominee's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone (home): \_\_\_\_\_ (work): \_\_\_\_\_ e-mail: \_\_\_\_\_

On a separate piece of paper, please describe how the nominee has contributed to improving the health outcomes and quality of life for individuals with asthma, and how the nominee's efforts have helped to advance the goals of CANA.

Please attach a detailed copy of the nominee's resume.

Please provide the names of two individuals to act as referees for the nomination.

Name: Mr. Ms Mrs. Dr. \_\_\_\_\_

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

Relationship to nominee: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Name: Mr. Ms Mrs. Dr. \_\_\_\_\_

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

Relationship to nominee: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**The deadline for submissions is February 15, 2008.** All submissions will be acknowledged.

Please return 1) this form, 2) description of nominee's contributions and 3) nominee's resume to:

COPD & Asthma Network of Alberta  
c/o Eileen Gresl  
AB Asthma Centre, Rm 8334B  
3<sup>rd</sup> Flr, Aberhart Centre 1  
11402 University Avenue  
Edmonton, AB T6G-2J3  
Tel: 1-888-203-CANA  
Fax: (780) 407-3608  
Email: [egresl@shaw.ca](mailto:egresl@shaw.ca)

Thank you for your interest in the **COPD & Asthma Network of Alberta's Award of Excellence.**