Direct Support Professionals Association of Tennessee (DSPAT)

ABOVE AND BEYOND ANNUAL AWARD
Nomination Criteria and Form

The Recognition Program is funded by the State of Tennessee, Department of Intellectual Developmental Disabilities (DIDD.) The purpose of the Recognition Program is to recognize Direct Support Professionals (DSPs) who work hard and “go the extra mile” to support people with a disability in their community, with special emphasis on the values in the Code of Ethics for Direct Support Professionals.

Above and Beyond Awards will be given at presented annually at the Tennessee Disability MegaConference. This is DSPAT’s highest honor and we are seeking the best of the best. Nominations for the Above and Beyond Award will be accepted from January 1 through April 1. Winners will be notified by April 30.

If you need help completing this form, call 1-800-835-7077 and ask for Khesa.

DSP Code of Ethics

• PERSON-CENTERED SUPPORTS: As a DSP, my first allegiance is to the person I support; all other activities and functions I perform flow from this allegiance.
• PROMOTING PHYSICAL and EMOTIONAL WELL BEING: As a DSP, I am responsible for supporting the emotional, physical and personal well-being of the individuals receiving support while being attentive and energetic in reducing their risk of harm.
• INTEGRITY and RESPONSIBILITY: As a DSP, I will support the mission and vitality of my profession to assist people in leading self-directed lives and to foster a spirit of partnership with the people I support, other professionals and the community.
• CONFIDENTIALITY: As a DSP, I will safeguard and respect the confidentiality and privacy of the people I support.
• JUSTICE, FAIRNESS, and EQUITY: As a DSP, I will promote and practice justice, fairness, and equity for the people I support and the community as a whole. I will affirm the human and civil rights and responsibilities of the people support.
• RESPECT: As a DSP, I will respect the human dignity and uniqueness of the people I support. I will recognize each person I support as valuable and help others understand their value.
• RELATIONSHIPS: As a DSP, I will assist the people I support to develop and maintain relationships.
• SELF-DETERMINATION: As a DSP, I will assist the people I support to direct the course of their own lives.
• ADVOCACY: As a DSP, I will advocate with the people I support for justice, inclusion, and full community participation.

And:

• Take extra training to improve skills
• Have exceptional relationship(s) with person(s) supported
• Support the person(s) in special activities
• Have a good relationship with co-workers
• Have a genuine commitment to people with disabilities
Above & Beyond Annual Award Nomination Form

Please print—if you need help completing this form please call 1-800-835-7077 and ask for Khesa

Nominee Information:

<table>
<thead>
<tr>
<th>Name of Direct Support Professional (DSP)</th>
<th>DSP's Position/Job Title*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DSP’s Street Address, City, State, Zip Code</strong></td>
<td><strong>Number of years DSP has worked in the field</strong></td>
</tr>
<tr>
<td><strong>DSP’s Email</strong></td>
<td><strong>Nominated by (if we need to contact you):</strong></td>
</tr>
<tr>
<td><strong>DSP’s Phone Number</strong></td>
<td><strong>Your Name</strong></td>
</tr>
<tr>
<td><strong>DSP’s Employer, Address, City, State, Zip Code</strong></td>
<td><strong>Relationship to Nominee</strong></td>
</tr>
<tr>
<td><strong>Employer’s Human Resource Contact &amp; Phone Number</strong></td>
<td><strong>Your Street Address, City, State, Zip Code</strong></td>
</tr>
<tr>
<td><strong>Name of DSP’s Immediate Supervisor</strong></td>
<td><strong>Your Phone Number</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Your Email</strong></td>
</tr>
</tbody>
</table>

Why do you feel this DSP deserves special recognition? What makes them outstanding? What do they do differently? How does the person(s) they support feel about them? As you write, be specific and give actual stories to support your nomination, referring to the DSP Code of Ethics and nomination criteria listed on the preceding page. You may include additional supporting documentation/pictures/letters of recommendation to help make the case.

*Titles change from agency to agency. Be sure the person you are nominating provides direct support to people with disabilities.

Send completed form: Fax: 615-248-5879; Email: ksmiley@theartcn.org; or Mail: DSPAT, 151 Athens Way, Ste 100, Nashville, TN 37228