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PRUDENTIAL PRESENTS THE 2010 DAVIS PRODUCTIVITY AWARDS

NOMINATION FORM TO RECOGNIZE ADAPTATION AND IMPLEMENTATION OF A PREVIOUS AWARD OR OTHER STATE GOVERNMENT INNOVATION

DATE PREPARED BY NOMINATOR:

NOMINATION NUMBER: 2010- or # (Number assigned by Agency Awards Coordinator)

INFORMATION PERTAINING TO YOUR NOMINEE (Please use upper and lower case letters, not all caps.)

INDIVIDUAL ACHIEVEMENT

TEAM, WORK UNIT OR PARTNERSHIP ACHIEVEMENT

NAME OF TEAM, WORK UNIT, OR PARTNERSHIP (This name should be different from the achievement title below and it should end with the word "team" or "task force," etc. Maximum of six (6) words - Do not use acronyms):

NAME OF AGENCY/AGENCIES:

TOTAL NUMBER OF NOMINEES:

NOMINEE(S) ACHIEVEMENT TITLE (complete as stated below):

Note: The achievement title should be EIGHT (8) words or less; it MUST contain an ACTION VERB such as "Developed," "Reduced," "Implemented," etc.; and it should be understandable to people with no knowledge of your agency's operations. Sample Titles: Adapted/Implemented a Performance Evaluation System; or Adapted/Expanded a Professional/Consumer Dispute Resolution System; or Assisted others in Adapting/Implementing Telemedicine Services for Juvenile Diabetes Clinics

NOMINEE'S INFORMATION

Name: Please provide the name that an individual nominee would want on his/her award, or the name of a contact person for a team, work unit, or partnership nomination.

Agency: Please do not abbreviate

Title: Please do not abbreviate.

Address:

City:

State: Zip: -

Telephone Number: ( ) - Ext.

FAX: ( ) -

Email:

NOMINATOR'S INFORMATION

Name of Nominator:

Title:

Agency:

Address:

City:

State: Zip: -

Telephone Number: ( ) - Ext.

FAX: ( ) -

Email:

## NAMES OF TEAM, WORK UNIT, OR PARTNERSHIP NOMINEES

For nominations involving employees in multiple cities, please indicate the location where you prefer an award be presented, if applicable. (Choose only one location.)

Please provide the following information on up to four (4) state employee nominees who will be designated to receive award checks (if applicable) on behalf of all members and represent winning team, work unit, or partnership at an awards ceremony. If your nomination includes more than four (4) state employee nominees or non-state employees, please complete the "ADDITIONAL NOMINEES" section at the end of this nomination form. If you would like less than four (4) checks cut for your team (regardless of the number of team members), please only enter the information for the person(s) to receive the checks below, and enter the additional nominees at the end of this form.

<b>1. Name:</b>	Title:
Agency:	Division:
Bureau:	Address:
City:	State:                      Zip:                      -
Telephone Number: (    )                      -                      Ext.	FAX: (    )                      -
Email:	

<b>2. Name:</b>	Title:
Agency:	Division:
Bureau:	Address:
City:	State:                      Zip:                      -
Telephone Number: (    )                      -                      Ext.	FAX: (    )                      -
Email:	

<b>3. Name:</b>	Title:
Agency:	Division:
Bureau:	Address:
City:	State:                      Zip:                      -
Telephone Number: (    )                      -                      Ext.	FAX: (    )                      -
Email:	

<b>4. Name:</b>	Title:
Agency:	Division:
Bureau:	Address:
City:	State:                      Zip:                      -
Telephone Number: (    )                      -                      Ext.	FAX: (    )                      -
Email:	

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## **INFORMATION ON NOMINEE'S ACHIEVEMENT**

Please do not use unexplained acronyms for the names of organizational units, state or federal programs, or job titles.

Please respond to (1), (2), or (3) as appropriate:

(1) My nominee adapted and implemented a Prudential - Davis Productivity Award winning achievement. This achievement was recognized in (year) \_\_\_\_\_. The title of the previous achievement is \_\_\_\_\_. A brief description of the previous achievement is \_\_\_\_\_

(2) My nominee adapted and implemented a state government innovation that, to my knowledge, has not been recognized by the Prudential - Davis Productivity Awards program. A brief description of this innovation is \_\_\_\_\_

(3) My nominee, whose achievement was recognized by a Prudential - Davis Productivity Award in (year) \_\_\_\_\_, or my nominee, who is the author of an innovation that has not been recognized previously, assisted others in adapting and implementing the achievement by doing the following (please describe what your nominee did) \_\_\_\_\_

### **DATES AND HOURS**

(1) The beginning date of my nominee's efforts to adapt/implement, or help others to adapt/implement an achievement, was (month and year) (sample: September 2008) \_\_\_\_\_

(2) The completion date was (month and year) (sample: August 2009) \_\_\_\_\_

(3) The total number of hours that your nominee(s) spent on the achievement (*NOT the number of hours the nominees work each week*) between the beginning and completion dates of the achievement was \_\_\_\_\_ hours.

(4) The total combined number of hours that any consultants or contracted employees spent on the achievement between the beginning and completion dates of the achievement was \_\_\_\_\_ hours.

(5) The percentage of total hours spent on the achievement that required your nominee(s) to perform above and beyond job descriptions, day-to-day performance expectations and peers' efforts by using special skills and exerting extra effort, creativity and/or perseverance was approximately \_\_\_\_%. (If less than 50% of your nominees' efforts were within job expectations, please briefly explain why they deserve recognition.)

### **WRITTEN SUMMARY OF ACHIEVEMENT**

**Sample:** Adapting a Department of Transportation application, this team implemented a simplified and streamlined process which saves staff training time, printing and copying costs during each semi-annual personnel evaluation period. Enthusiastically accepted by employees agency-wide, the adapted process produced estimated added value of \$72,000 in 2007-08, with estimated recurring annual value of \$46,000.

Please draft your response as formatted above. Do not use program or agency acronyms or abbreviations without explanation. After responding to question #2 below, please copy your added value data to this summary. Worthy achievements are unlikely to receive the recognition they may deserve if numerical performance data are not provided. Any additional information you wish to provide should be included in the "Optional Information" section at the end of the form.

(150 words)

**SPEAKING SUMMARY OF ACHIEVEMENT**

**Sample:** Adapting and implementing a productivity award to the Department of Transportation, this team implemented a process which annually saves nearly \$50,000 worth of staff time on personnel evaluations. 2009 DLA-36

**Please provide your response as formatted above. The speaking summary should be a condensed version of your written summary, and it should include numerical performance data.**

(50 words)

**NET ADDED VALUE** (Please complete information requested in (a), (d), and (e), plus (b) and/or (c))

- a. The percentage of added value that resulted from adapting and implementing a previous achievement, and that was due entirely to the efforts of the nominee(s), is: \_\_\_\_%.
- b. The actual added value gained in 2008-09 from the nominee adapting and implementing a previous award winning achievement or other state government innovation, or from assisting an individual or team in adapting/implementing his/her/their achievement, was \$\_\_\_\_; **OR**
- c. The estimated added value from your nominees' achievement in 2008-09 is \$\_\_\_\_;
- d. The above added value accrues to (Input "100%" in the appropriate box if all value accrues to one source. Apportion percentages if value accrues to more than one source.)

- \_\_\_\_  State Government
- \_\_\_\_  Other level of Government
- \_\_\_\_  Specific Citizens
- \_\_\_\_  Private Sector

- e. Using the following sample as a guide, please explain how you calculated the cost savings, cost avoidance or additional revenue above.

**Sample:** It would have cost the Department of Children and Families approximately \$289,000 to purchase a case tracking database software system from a private vendor in order to track 30,000 plus cases in the 14 districts' Child Welfare Legal Services offices. After deducting state salary/benefits of \$50,213 for office labor hours required for adaptation and implementation of the Attorney General's Office legal system, a savings of \$239,587 was realized.

Each district would have required a fortress client/server license for 40 to 50 users at a cost of \$4,840 per district, plus individual user licenses at \$394 per user. This would have resulted in an estimated cost of \$20,600 per district multiplied by the 14 districts. The users for each district include the general counsel, district legal, and child welfare legal services staff. Additional licenses would need to be purchased if staffing were increased.

**Your response (150 words)**

## **SIGNIFICANCE OF THE ACHIEVEMENT**

Please respond to all of the following items that pertain either to (a) your nominee's adaptation and implementation of a previous Prudential - Davis Productivity Award-winning achievement or non-award winning state government innovation, or (b) your nominee's assistance that was provided to others to help them adapt/implement a previous award winning achievement or other innovation.

a. Resulted from a need to modernize operations, improve productivity, reduce costs, overcome an obstacle or impediment, meet a demonstrated need, or for another reason.

**Sample:** The Department of Children and Families legal office had seven months to redevelop, train, pilot, and implement the Attorney General's Office's data base system statewide. The first four months were used for redevelopment, training, and piloting. From March 1 to June 30 2006, the system went online statewide for implementation. To accomplish this, the team worked many hours beyond their regular schedule and job duties. After deducting state salary/benefits of \$50,213 for office labor hours required for adaptation and implementation of the Attorney General's Office legal system, a savings of \$239,587 was realized.

**Please explain how one or more of the reasons, listed above, prompted your nominee's adaptation and implementation of an achievement.**

b. Improved upon a previous a Prudential - Davis Productivity Award-winning achievement or other state government innovation in the following way(s)

**Please explain how a previous award winning achievement or other innovation was improved by your nominee.**

c. Is a quality improvement process that included process mapping and cut costs, markedly increased external and/or internal operations and/or customer service, or benefited citizens or the private sector.

**Your response**

d. Improved external and/or internal customer satisfaction.

**Please comment on the magnitude and impact of the improvement on fellow employees and/or citizens.**

e. Involved extra hours of non-compensated work from the beginning to the end of the achievement, in addition to the normal work week, that were not compensated by extra pay, time off, or leave credit. **This question applies to nominees who are exempt from the Fair Labor Standards Act that requires extra compensation for work beyond the normal 40-hour week.**

**Please fill in the blanks below using this sample:** Two of four members of a team are exempt from the FLSA. These two members worked a combined total of 50 uncompensated hours to adapt/implement an achievement, or to help a fellow worker or team to do so. The 50 hours equate to an average of 25 hours each during the three-month period of the achievement. Using this example, the correct responses on the lines below are 2, 50, and 25.

**Please fill in the blanks**

\_\_\_\_\_ number of nominees who are exempt from the FLSA

\_\_\_\_\_ combined total number of uncompensated hours worked by exempt nominees from the beginning date until the completion of the achievement

\_\_\_\_\_ average number of uncompensated hours worked by each exempt nominee

f. Adapting/implementing a previous achievement required the nominees to make a change in program policies or service delivery that required formulation of a new process or design of a new technological approach.

(1) Approximately \_\_\_% of the new process, technical approach, or new software should be attributed to my nominees and approximately \_\_\_% should be attributed to a consultant or a non-nominated state employee.

(2) The new process, technical approach, or software required approximately \_\_\_\_ hours to complete.

(3) The new process or technical approach or new software required my nominees to perform (please check one) \_\_\_minimally, \_\_\_considerably, or \_\_\_extraordinarily beyond their job expectations.

g. Overall assistance received in adapting/implementing a previous award winning achievement or government innovation. **Please fill in the applicable blank(s) with a percentage.**

(1) Approximately \_\_\_% of the nominee's adaptation/implementation of an award winning achievement or innovation achievement should be credited to the assistance of a previous award winner or innovator, and/or to the work of a consultant or non-nominee state employee(s).

(2) Approximately \_\_\_% of the nominee's adaptation/implementation of an award winning achievement or innovation achievement should be credited to additional funding, staffing, or purchase of equipment. For example, a budget appropriation was used to purchase needed equipment, and/or add one new position. **If more than 25%, please provide a comment on why the nominee deserves recognition.**

**Your response**

### **OPTIONAL INFORMATION**

Please provide any additional data, information or explanation that you think will assist evaluators and the Panel of Judges in understanding and appreciating your nominee's achievement.

### **NOMINATOR'S ENDORSEMENT**

I, \_\_\_\_\_, hereby recommend the above nominee(s) for a 2010 Prudential - Davis Productivity Award.

\_\_\_\_\_  
**Signature of Nominator**

**MANAGER'S COMMENT**

A bureau chief or higher-level manager **(NOT THE NOMINATOR)** who can verify the nominee(s) achievement is required to comment on why the nominee's achievement deserves an award, patterned after the following sample:

**Sample:** Statewide adaptation and implementation of a previous award enables the department to better manage its resources and to reallocate resources, as necessary, to better serve our clients. The accumulated savings of doing this project inhouse, without involving an outside information technology consultant, was enormous because the effort would have involved extensive travel and time. Adapting and implementing another state agency's system, versus purchasing a system from a private vendor, will save in future years by not having to purchase renewal licenses at a yearly rate of \$214 per user for an annual cost avoidance of \$149,800.

**Your response**

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**Signature of Bureau Chief or Higher Level Manager **(Other than Nominator)****

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Telephone Number: (    )    -    Ext.    Suncom:    -  
Email: \_\_\_\_\_

**AGENCY AWARDS COORDINATOR REVIEW**

I have reviewed this nomination for completeness and for compliance with the nomination guidelines.

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**Signature of Agency Awards Coordinator**

Print Name: \_\_\_\_\_

**ENDORSEMENT AND SIGNATURE OF AGENCY HEAD OR DESIGNEE**

The responses to the questions on this nomination form have been represented to me by the nominator and/or awards coordinator as accurate and complete.

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**Signature of Agency Head or Designee**

Print Name: \_\_\_\_\_

## **ADDITIONAL NOMINEES**

Please list all nominees not appearing on page two (2) of the nomination form. STATE employees should be listed first, followed by any NON-STATE employees.