



Thank you for nominating a Nurse or Midwife.

Once you have completed your
nomination form, please post it to:

Caroline Reid

Clinical Nurse Manager

3rd Floor Management Offices

Royal Aberdeen Children's Hospital

Westburn Road

Abedeen AB25 27G







This publication is also available in other formats and languages on request. Please call Equality and Diversity on 01224 551116 or 01224 552245 or email: gram.communications@nhs.scot

Ask for publication MVC 230179









Want to thank a Nurse or Midwife?

DAISY Award Nomination Form

If you would like to thank one of our Nurses or Midwives for providing excellent, compassionate care to you or a loved one, you can nominate them for a DAISY Award.

To nominate your Nurse or Midwife please complete this form or scan the QR code.









To find out more about the DAISY Foundation visit

www.nhsgrampian.org/DAISY



DAISY Award Nomination Form



The DAISY Award is an international recognition program started in memory of J. Patrick Barnes. Pat's family experienced first-hand the difference his nurses made in his care through clinical excellence and outstanding compassionate care. The family created The DAISY Award to express gratitude to registered Nurses and Midwives and want to enable other patients and families to thank and honour their special Nurse or Midwife.

Please visit **www.nhsgrampian.org/DAISY** to learn more about Pat's story and how The DAISY Award recognises extraordinary Nurses and Midwives.

	Your name	Your phone or mobile
Your email		
rour critair		
•	I am a: Patient	Family or visitor
•	Please contact me if my nominee is chosen as a DAISY Honouree so	
	that I may attend the celebration Yes No	if available.
Pri	ivacy Policy Information	
•	To view our privacy policy and fir	nd out how your information will
	be used and stored, please visit: www.nhsgrampian.org/about data-protection/data-privacy-notification Once you have read	
	policy and are happy to proceed,	•
	Yes No	
•	*	ct details being stored specifically
		ogram in NHS Grampian and for the etails will not be shared with third
	parties without your consent).	tails will not be shared with third
	Yes No	
•	I consent to my name and contac	ct details being shared with my
	nominee. Yes No	M
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