



**ആരോഗ്യവകുപ്പ് ഡയറക്ടറുടെ കാര്യാലയം**

**വഞ്ചിയൂർ.പി.ഒ., തിരുവനന്തപുരം. പിൻ - 695035**

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നം: DHS/4381/2025-EH2

തീയതി: 28-02-2025

സ്വീകർത്താവ്

എല്ലാ ജില്ലാ മെഡിക്കൽ ഓഫീസർമാരും

സർ,

വിഷയം:-ആവധ-സംസ്ഥാന നേഴ്സസ് അവാർഡ് 2024- അപേക്ഷകൾ ലഭ്യമാക്കുന്നത് സംബന്ധിച്ച്.

സൂചന:-1. ആരോഗ്യ കുടുംബക്ഷേമ (സി) വകുപ്പിൽ നിന്നും ലഭ്യമായ ഉത്തരവ് സ.ഉ.(സാധാ) നം.417/2025/H&FWD തീയതി, തിരുവനന്തപുരം, 13/02/2025.

2. ആരോഗ്യ കുടുംബക്ഷേമ (സി) വകുപ്പിൽ നിന്നും ലഭ്യമായ ഉത്തരവ് G.O(Rt) No.139/2024/H&FWD DATED : 22-01-2024

സൂചനയിലേയ്ക്ക് ശ്രദ്ധ ക്ഷണിക്കുന്നു. സംസ്ഥാന നേഴ്സസ് അവാർഡ് 2024 നായി അപേക്ഷകൾ/നോമിനേഷനുകൾ സമർപ്പിക്കേണ്ട സമയക്രമം നിജപ്പെടുത്തി സൂചന 1 പ്രകാരം ഉത്തരവായിരിക്കുന്നു. ആയത് പ്രകാരമുള്ള സമയക്രമം ചുവടെച്ചേർക്കുന്നു.

അപേക്ഷകൾ/നോമിനേഷനുകൾ സമർപ്പിക്കുന്നതിനുള്ള അവസാന തീയതി : 2025 മാർച്ച് 20.

ലഭ്യമാകുന്ന അപേക്ഷകൾ മെഡിക്കൽ കോളേജ്/ജില്ലാതലത്തിൽ പരിശോധിച്ച ശേഷം വകുപ്പ് ആസ്ഥാനത്ത് എത്തിക്കേണ്ട അവസാന തീയതി : 2025 മാർച്ച് 30

അപേക്ഷകൾ സർക്കാരിൽ ലഭ്യമാക്കേണ്ട അവസാന തീയതി: 2025 ഏപ്രിൽ 05

സംസ്ഥാന നേഴ്സസ് അവാർഡ് സംബന്ധിച്ച സൂചന 2 പ്രകാരമുള്ള മാർഗ്ഗ നിർദ്ദേശങ്ങൾ ഇതോടൊപ്പം ഉള്ളടക്കം ചെയ്യുന്നു. ആയത് പ്രകാരം യോഗ്യമായ

അപേക്ഷകൾ 2025 മാർച്ച് 30 നകം ഈ കാര്യാലയത്തിൽ ലഭ്യമാക്കേണ്ടതാണ്.

വിശ്വസുതയോടെ,  
Signed by Jayasree V  
Date: 28-02-2025 11:20:09

**ADDITIONAL DIRECTOR OF HEALTH SERVICES**

ഉള്ളടക്കം: സൂചന 1, 2 പ്രകാരമുള്ള ഉത്തരവുകൾ

പകർപ്പ്: ഫയൽ

"ഭരണഭാഷ- മാതൃഭാഷ"



കേരള സർക്കാർ

**സംഗ്രഹം**

ആരോഗ്യകുടുംബക്ഷേമ വകുപ്പ് - സംസ്ഥാന നഴ്സസ് അവാർഡ് 2024 - നോമിനേഷനുകൾ സമർപ്പിക്കേണ്ട സമയക്രമം നിജപ്പെടുത്തി ഉത്തരവ് പുറപ്പെടുവിക്കുന്നു

**ആരോഗ്യ കുടുംബക്ഷേമ (സി) വകുപ്പ്**

സ.ഉ.(സാധാ) നം.417/2025/H&FWD തീയതി,തിരുവനന്തപുരം, 13-02-2025

- പരാമർശം:-
1. സ.ഉ (സാധാ) നം. 139/2024/ആ.ക.വ തീയതി, 22-01-2024
  2. സ.ഉ (സാധാ) നം. 414/2025/ആ.ക.വ തീയതി, 13-02-2025

**ഉത്തരവ്**

പരാമർശം (1) ഉത്തരവ് പ്രകാരം സംസ്ഥാന നഴ്സസ് അവാർഡ് നിർണ്ണയത്തിനുള്ള മാർഗ്ഗരേഖ പുറപ്പെടുവിച്ചിരുന്നു. പരാമർശം (2) ഉത്തരവ് പ്രകാരം 2024- ലെ സംസ്ഥാന നഴ്സസ് അവാർഡ് നിർണ്ണയത്തിനായി സംസ്ഥാനതല കമ്മിറ്റി രൂപീകരിച്ചു. 2024- ലെ സംസ്ഥാന നഴ്സസ് അവാർഡിനായി അപേക്ഷകൾ/നോമിനേഷനുകൾ സമർപ്പിക്കേണ്ട സമയക്രമം ചുവടെ പട്ടികയിൽ ചേർത്തിരിക്കും പ്രകാരം നിജപ്പെടുത്തി ഉത്തരവ് പുറപ്പെടുവിക്കുന്നു.

അപേക്ഷകൾ/നോമിനേഷനുകൾ അവസാന തീയതി	സമർപ്പിക്കുന്നതിനുള്ള	2025 മാർച്ച് 20
ലഭ്യമാകുന്ന അപേക്ഷകൾ കോളേജ്/ജില്ലാതലത്തിൽ പരിശോധിച്ച ശേഷം വകുപ്പ് ആസ്ഥാനത്ത് എത്തിക്കേണ്ട അവസാന തീയതി	മെഡിക്കൽ	2025 മാർച്ച് 30
അപേക്ഷകൾ സർക്കാരിൽ ലഭ്യമാക്കേണ്ട അവസാന തീയതി		2025 ഏപ്രിൽ 05

(ഗവർണ്ണറുടെ ഉത്തരവിൻ പ്രകാരം)  
ശ്രീകല ആർ  
അണ്ടർ സെക്രട്ടറി

ആരോഗ്യ വകുപ്പ് ഡയറക്ടർ, തിരുവനന്തപുരം  
മെഡിക്കൽ വിദ്യാഭ്യാസ ഡയറക്ടർ, തിരുവനന്തപുരം  
എക്സിക്യൂട്ടീവ് ഡയറക്ടർ, State Health System Resource Centre (SHSRC).  
രജിസ്ട്രാർ, കേരള നേഴ്സസ് & മിഡൈവ്സ് കൗൺസിൽ  
ജോയിന്റ് ഡയറക്ടർ ഓഫ് നേഴ്സിംഗ് എഡ്യൂക്കേഷൻ, തിരുവനന്തപുരം  
അഡീഷണൽ ഡയറക്ടർ ഓഫ് നേഴ്സിംഗ്, തിരുവനന്തപുരം

വീവര പൊതുജനസമ്പർക്ക വകുപ്പ് (വെബ് & ന്യൂ മീഡിയ)  
കരുതൽ ഫയൽ / ഓഫീസ് പകർപ്പ്

Signed by Poojith G

Date: 13-02-2025 14:04:37

സെക്ഷൻ ഓഫീസർ



**GOVERNMENT OF KERALA**



**Abstract**

Health & Family Welfare Department - Guidelines for State Nurses Award - Orders issued.

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**Health & Family Welfare (C) Department**

G.O.(Rt)No.139/2024/H&FWD Dated, Thiruvananthapuram, 22-01-2024

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Read 1 G.O (Ms) No. 13/2019/H&FWD Dated 22.01.2019

2. G.O (Rt) No.1844/2023/H&FWD Dated 26.07.2023

**ORDER**

State Nurses Award is being presented on 12<sup>th</sup> May of every year as a mark of recognition of the meritorious service rendered by the Nurses in the Government sector. Clinical Nursing and Public Health Nursing are the two categories which constitute the award. As per the G.O read as 1<sup>st</sup> paper above, State Nurses Award under the category of 'Clinical Nursing' was renamed as 'Sister Lini Puthussery Award for the Best Nurse in the State' in honour of Sister Lini Puthussery, who lost her life while caring the first known Nipah virus infected patient in the State in the year 2018.

2. For ensuring a meticulous selection and give more transparency to the selection procedure, Government have decided to frame guidelines for the State Nurses Award. Accordingly, a Committee comprising of eight members was constituted for the purpose with the Principal Secretary, Health & Family Welfare as Chairman and the Executive Director, State Health System Resource Centre (SHSRC) as Convenor as

per G.O read as 1<sup>st</sup> paper above.

3. Government have examined the draft guidelines for State Nurses Award prepared by the Committee in detail and are pleased to approve the same as appended to this Order.

(By order of the Governor)  
A P M MOHAMMED HANISH  
PRINCIPAL SECRETARY

To:

The Director of Health Services, Thiruvananthapuram.

The Director of Medical Education, Thiruvananthapuram.

The Registrar, Kerala Nurses and Midwives Council,  
Thiruvananthapuram

The Executive Director, State Health Systems Resource Centre-  
Kerala, Thycaud, Thiruvananthapuram-14

The Additional Director of Nursing Services, Directorate of Health  
Services, Thiruvananthapuram

The Joint Director of Nursing Education, Directorate of Medical  
Education, Thiruvananthapuram

Public Relations (Web & New Media) Department

Stock file/Office copy

Forwarded /By order  
Signed by

Prijith G.

Date: 22-01-2024 14:44:21

Section Officer

Copy to:-

Private Secretary to the Hon'ble Minister for H&WCD

C.A to Principal Secretary, Health & Family Welfare Department

C.A to Joint Secretary, Health & Family Welfare Department



## GOVERNMENT OF KERALA

### HEALTH & FAMILY WELFARE DEPARTMENT

#### GUIDELINES FOR STATE NURSES AWARD

##### A. Background

The Department of Health and Family Welfare, Government of Kerala, with the intention of identifying and honoring the exemplary services of eminent members of the nursing fraternity, confers awards to 'The Best Nurses' in the state of Kerala in different categories each year. Nurses 'service becomes exemplary through their connectedness with the patients, their caregivers, the community they serve, and their colleagues. Their willingness to learn and keep learning, their passion to innovations, commitments to the betterment of the community and their adherence to ethical standards are what make them stand apart. In order to recognize such extraordinary service, the Department of Health & Family Welfare honors the best Nurses under the following categories every year.

##### 1. Table (A): Categories for Best Nurses Award

No.	Category	Amount
(a)	State Award for the Best Nurse under the Directorate of Health Services (Clinical)	15,000 INR
(b)	State Award for the Best Nurse under the Directorate of Medical Education (Clinical)	15,000 INR
(c)	State Award for the Best Nurse under the Directorate of Health Services (Public Health)	15,000 INR
(d)	District Level Award for the Best Nurse under the Directorate of Health Services and Directorate of Medical Education (All	8,000 INR

	categories)	
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**B. Who can be nominated**

1. Any Nurse belonging to any of the categories listed above can be nominated for the award in that particular category.
2. The nominated person should have a minimum service of 10 (TEN) years. [*Those with 5-10 years service may be nominated only if the services are considered extra ordinary and honoring the concerned Nurse is considered extremely important in public interest.*]
3. One Nurse can be nominated to only one category of Award.
  4. Only those Nurses who haven't received any of these awards in the preceding 5 years shall be eligible to be nominated.

**c. Who shall not be nominated**

1. A nurse who has been issued a memo of charges and final decision is pending or has been punished under disciplinary grounds in the past 10 years.
2. Nurse who is facing any charges of corruption/ misappropriation of government money.
3. Nurse who is facing criminal proceedings on any grounds.

**It shall be the duty of the district level scrutiny committee to ensure that such nominations are not forwarded to the state level under any circumstances.**

**D. Who can nominate**

Any of the following individuals/groups can nominate any Nurse for the awards in the concerned category.

1. Patients/ Patient organizations
2. Hospital Development Societies (HDS), Hospital Management Committees (HMC) or any member of the public
3. Self



#### **E. Method of nomination**

1. Any person/group listed above may nominate a Nurse to the award under the concerned category.
2. The nomination shall be submitted ONLY in the prescribed format as detailed below. The nominations shall be neatly typed on A4 size paper.
3. The nominations that fall under the **DHS category** shall be submitted to the concerned institution and then forwarded to the District Medical Officer (Health) of the concerned district. The received nominations shall be scrutinized by the district level scrutiny committee and the **best five nominations** as decided by the scrutiny committee shall be submitted to the DHS before the last date and time prescribed in the notification.
4. The nominations fall under **DME category** shall reach to the principals of the **concerned Govt Medical Colleges** and then forwarded to the Directorate of Medical Education before the last date and time prescribed in the notification.
5. Nominations submitted to the state level, directly or to any office other than the DMO (H)/DME shall be summarily rejected (*except under clause E.12*)
6. The person/group nominating the Nurse for the state award shall fill all the relevant columns of the nomination form and shall attach proof of all claims of exemplary performance. Claims without proof shall not be considered valid.
7. The person/group nominating the Nurse shall enter the marks under the relevant section (*subject to the maximum prescribed*) **in Column A**
8. They shall also submit a statement of achievement detailing reasons why they consider the Nurse is eligible for the award. The statement shall not exceed 1500 words.

9. The person nominating the Nurse (*or the authorized representative – if it is a group*) shall sign the completed application with date, complete name, complete and present postal address, mobile number, e-mail id, identity proof type and ID number. A self-attested copy of the identity proof concerned shall be attached along with the application form. If a Nurse nominates himself/herself/themselves for the state award, he/she may sign both the statements by himself/herself/themself.
10. The immediate Supervising Officer of the Nurse nominated for the state award shall add their mark (*subject to the maximum prescribed*) in **Column B**. After completing the entry of marks, the supervisor shall sign the statement of recommendation in the nomination form along with all details asked for.
11. Applications complete in all respects only shall be accepted during scrutiny at the district/Principals, Govt Medical College level.
12. The nominations of a state level officer can be submitted directly to the State Award Committee. The score card of such officers shall be filled up as follows.

*Column A : The person nominating the Nurse. Column B : The immediate supervisor Column C : The Director concerned.*

13. The person nominating a Nurse for the State award shall submit the nomination (*after filling up Column A*) to the head of the institution where the nominated Nurse is working. The remaining procedures shall be completed through the official channel. The person nominating the Nurse for the State award shall not be put to any hardship for the further processing of the nomination

**F. Recommendation by second level supervisor**

The marks in **column C** shall be entered by the second level supervisor of the Nurse as detailed below.

1. *Second level supervisor under DHS: Deputy DMO In charge of concerned institution*
2. *Second level supervisor under DME: Principal, Medical College/Medical Superintendent/Chief Nursing Officer*

**g. Scrutiny at District Level for DHS**

1. All applications received before the last date and time shall be scrutinized by a committee consisting of the following members.

Chairperson : Deputy DMO nominated by DMO

Convener : DNO/MCHO (Whoever is senior in service)

Joint Convener: DNO/MCHO

Members :

- a. DPHN nominated by DMO.
  - b. One senior nursing officer of high repute from DHS (Nominated by DMO)
  - c. One senior public health nurse of high repute (nominated by DMO)
2. The scrutiny committee shall scrutinize all applications received in detail. It shall be ensured that incomplete and late applications are not accepted. Any applications considered ineligible (*as per the clauses under Section C*) shall be summarily rejected.
  3. After detailed scrutiny of the applications under each category, the district level scrutiny committee shall shortlist a maximum of **5 applications** in each category and forward to

the Director of Health Services in a sealed cover accompanied by a copy of the minutes of the scrutiny committee meeting. The cover shall be superscribed “**Nominations for Best Nurse Award for State in the year:** (specify the year and district) **District**”. Inside the sealed cover, nominations under each category shall be placed in separate covers or bundled separately.

4. If the scrutiny committee is of the opinion that there are no nominations worthy of recommendation to the State, they may record the same in the minutes and refrain from forwarding any nominations under that category.
5. It is not mandatory that 5 nominations need to be forwarded under each category. Only nominations found eligible may be forwarded *subject to a maximum of five per category*.

#### H. Scrutiny at DME

1. All applications received before the last date and time shall be scrutinized by a committee consisting of the following members.

Chairperson : DME

Convener : JDNE

Members :

a. SAO, DME

b. AA, Establishment

2. The scrutiny committee shall scrutinize all applications received in detail. It shall be ensured that incomplete and late applications are not accepted. Any applications considered ineligible (*as per the clauses under Section C*) shall be summarily rejected.
3. After detailed scrutiny of the applications the scrutiny

committees shall shortlist a **maximum of 2 applications** per medical college and forward it to the Government.

4. If the scrutiny committee is of the opinion that there are no nominations worthy of recommendation from the institutions, they may record the same in the minutes and refrain from forwarding any nominations from a particular institution.
5. It is not mandatory that 2 nominations need to be forwarded from each medical college. Only nominations found eligible may be forwarded *subject to a maximum of two per college*.

#### **I. State Level Award Committee**

1. Nominations recommended by the DHS/DME shall be scrutinized by a **State Level Award Committee** consisting of the following members.

Chairperson : Principal Secretary (H&FWD), Govt of Kerala

Co-Chair : Director of Health Services, Kerala

Convener : Director of Medical Education, Kerala

#### **Members**

- a. Executive Director, SHSRC-Kerala
  - b. Joint Director of Nursing Education (O/o DME)
  - c. Registrar, Kerala Nurses & Midwives Council
  - a. Additional Director of Nursing Service (O/o DHS)
2. The State Level Committee shall scrutinize all nominations received category wise on merit. Each nomination shall be evaluated based on the documents submitted along with the nomination and the recommendations of the district level committee.

3. The Committee may, if it feels fit, seek the opinion of any external expert – whose opinion shall be taken as a written statement or through an online meeting and shall be recorded in the minutes of the meeting. The external expert shall only give the opinion asked for by the committee and shall not be allowed to be a part of the deliberations of the committee.
4. After detailed scrutiny, the State Level Award Committee shall unanimously recommend one Nurse from each category for the Best Nurse Award for the State in the respective year.

**J. Disqualification**

1. Any attempt to influence the members of the district level scrutiny committee/State level award committee through any means shall lead to immediate disqualification of the candidate.
3. If it is found that the nomination contains any false/fabricated information, the nomination shall be immediately disqualified.
4. Use of any unfair means shall result in immediate disqualification of the applicant.

## Annexure – 1



**GOVERNMENT OF KERALA**  
**DEPARTMENT OF HEALTH & FAMILY WELFARE**  
**BEST NURSES AWARD FOR THE YEAR.....**

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**NOMINATION FORM**  
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**PART A**

(To be filled up for all applicants)

Name of Person submitting nomination:

Category:(tick whichever is applicable)

- Patients/Patient organizations
- Hospital Development Societies (HDS), Hospital Management Committees (HMC) or any member of the public
- Self

1. Name of the Nurse :

2. Date of Birth :

3. Gender : Male  Female  Transgender

4. Educational Qualification :

<b>Course</b>	<b>Name of Degree</b>	<b>College</b>	<b>University</b>	<b>Year of passing</b>
a. Diploma				
b. Graduation				
c. Post graduation 1				
d. Post graduation 2				
e. Ph.D. in Nursing				
f. Other specialisations (if any)	1			
	2			
	3			
	4			

*(Copy of certificates- educational qualifications and KNMC registration to be attached)*

5. Details of service (start from the present institution and proceed backwards) :

<b>Name of Institution</b>	<b>Position/ Post held</b>	<b>From</b>	<b>To</b>




6. Date of declaration of Probation with order No:
7. Details of special achievements (if any) in their area of work:
8. Key performance indicators for DHS and DME Nursing Officer:

Col A: To be filled by the person nominating the Nurse.

Col B: To be filled by the immediate supervisor.

Col C: To be filled by the second level supervisor in case of DHS and by the Head of Nursing Division of the Medical college in case of DME (as in Sec F)

## PART B

(Total: 60 Marks)

(Common to all categories- To be filled up for all applicants)

Sl.No.	Indicators	Max Marks	Col A	Col B	Col C	Total
1.	Educational Qualification relevant to the field of work (Post graduation:4, Degree :3 Marks, Diploma :2 marks, for additional Certificate Courses :1 Mark each)	4				
2.	Satisfactory Completion of work assigned to present post	3				
3.	Punctuality and dedication to work assigned to present post	3				
	Interpersonal relations					

4.	Interpersonal relations, teamwork, and Professional relations	3				
5.	Client friendly approach	3				
6.	Effective utilisation of available resources for patient care/benefit of public	3				
7.	Skill in rendering Comprehensive and quality care to clients	3				
8.	Willingness to update knowledge, attend trainings and update skills	3				
9.	Effective utilization of new skills gained for the benefit of the public	3				
10.	Maintenance of records and registers	3				
11.	Willingness to work during emergencies and crisis situations	3				
12.	Willingness to shoulder additional responsibility in the interest of the patient/Client	2				
13.	Additional initiatives/responsibilities taken up such as quality improvement, infection control, team building etc.	2				
14.	Publication of scientific articles/Participation in research activities	2				
15.	Publication of articles in media/Presentation in conferences/leadership in public awareness campaign/Presentation in visual media (all the above related to health)	2				

16.	Willingness to train subordinate staffs, Colleagues, and Students	2				
17.	Involvement in Health education activities within and outside the institution	2				
18.	Extraordinary activity/Innovation which brings recognition to the institution/Improves patients Care	2				
19.	Discipline	2				
20.	Personal Hygiene	2				
21.	Approach to destitute and Vulnerable populations	2				
22.	Maintenance of equipment's under their custody	2				
23.	Proper and Judicious usage of proper infection control practices and protection equipment	2				
24.	Ensuring proper and scientific management of biomedical and other wastes	2				
	<b>TOTAL</b>	<b>60</b>				

1.

**PART C**

( Total : 40 Marks)

(To be filled up only for Nursing Officers)

Sl.No.	Indicators	Max Marks	Col A	Col B	Col C	Total
1.	Skill in administration of medicines	5				
2.	Skill in therapeutic Communication	6				
3.	Maintenance of nursing case	5				

3.	Management of nursing case sheets and patient care records	3				
4.	Skills in life saving techniques and handling of emergencies	6				
5.	Skills in patient education and conducting regular patient education activities	6				
6.	Providing Comprehensive nursing care to patients including general hygiene, oral care, special care including catheter care, Wound care, Prevention of bed swore, etc. as per need	6				
7.	Ensuring Supply of necessary materials to subordinate staff	3				
8.	Ensuring Supply of necessary PPE to subordinate staff and ensuring its proper and judicious usage	3				
	<b>TOTAL</b>	<b>40</b>				

### PART D

( Total : 40 Marks)

(To be filled for Senior Nursing Officers and above)

Sl. No.	Indicators	Max Marks	Col A	Col B	Col C	Total
1.	Leadership Qualities	4				
2.	Effective teamwork, and supportive Supervision	4				
3.	Problem Solving ability and crisis Management	4				

4.	Proper maintenance of records and supervision of records of subordinate staff	4				
5.	Incident reporting	1				
6.	Coordination between different categories of staff/different departments	4				
7.	Approachability for subordinate staff	5				
8.	Relationship with superior officers	3				
9.	Effective utilisation of supervisory powers with transparency	2				
10.	Planning for HR and other material resources	2				
11.	Proper and timely indents, ensuring adequate availability of supplies and proper distribution to subordinate staff	2				
12.	Ensuring proper cleanliness and maintenance of the area under their charge	2				
13.	Ensuring Supply of necessary materials to subordinate staff	2				
14.	Ensuring Supply of necessary PPE to subordinate staff and ensuring its proper and judicious usage	2				
	<b>TOTAL</b>	<b>40</b>				

**PART E**

(Total: 40 Marks)

(To be filled by JPHN ONLY)

Sl. No.	Indicators	Max Marks	Col A	Col B	Col C	Total
1.	Thorough knowledge of the field area and population covered	3				
2.	Good rapport with the public in the area	3				
3.	Conducting ward level clinics in all wards under the sub centre (as per .....	3				
4.	Completeness of immunisation coverage of children under the sub centre area	3				
5.	Completeness of early antenatal registration and antenatal care packages to pregnant women in the area	2				
6.	Conducting NCD clinics as per norms and completeness of follow up of diagnosed patients and reduction in default in treatment	2				
7.	Conducting regular activities for lifestyle modification (Occasional campaigns not to be considered)	2				
8.	Achievement in FW activities	2				
9.	Promptness in reporting	2				



Sl.No.	Indicators	Marks	A	B	C	Total
1.	Quality of Supportive supervision of Subordinate staff	4				
2.	Quality and frequency of concurrent supervision visits	4				
3.	Quality and frequency of Consecutive supervision visits	4				
4.	Leadership Qualities	4				
5.	Team building capacity	3				
6.	Interpersonal relationships with Subordinates, colleagues, and superiors	3				
7.	Involvement and leadership in panchayat projects-Preparation and implementation	3				
8.	Supervision of records and registers of subordinate staff	3				
9.	Quality of reports and analysis of review meetings	3				
10.	Regularity and quality of review meetings	3				
11.	Coordination with other line departments especially Women and Child Dept., Social Justice Dept. & Local Self Government Institutions	3				
12.	Leadership qualities in times of emergencies/Crisis	3				
	<b>TOTAL</b>	40				

### 9. Certificate

I/We certify that I/we have completed column A of the score card. I/we hereby certify that all the information given above are true to the best of my/our knowledge. I/we understand that submission of any false information shall result in summary rejection of the



nomination.

Date:

Signature

Name:

On behalf of (if representing a group):

Complete postal address:

Mobile No.:

e-mail ID:

**Identity proof type & number (please attach a self-attested copy)**

No.	ID Type	ID Number
1		

10. Statement of Achievement

(Please detail in not more than 1500 words, why the Nurse is considered eligible for the award)

To be filled by the person nominating the Nurse and to be attached to the nomination form (with name & dated signature)

11. Acceptance by the Candidate

I give my consent for being considered for the Best State Nurse Award for the year ..... under Directorate of Health Services, Kerala (Clinical/Public Health) / Directorate of Medical Education, Kerala (Clinical)

Date:

Signature

Name of Nurse:

Designation:

Official Address:

Mob No.:

e-mail ID:

12. Recommendation by the immediate supervisor

I certify that I have completed column B of the score card.

I ..... recommend  
..... for  
the Best Nurse Award.....(Specify the year) in the category for the  
reasons given below:

Date:

Signature:

Name:

Designation:

Official Address:

Mob No.:

e-mail ID: