

Patients for Patient Safety in Canada Workshop: Partnering to Advance Healthcare System Safety

Official Nomination and Application Form

October 17 to 19, 2006

The Sheraton Vancouver Wall Centre Hotel, Vancouver, British Columbia

Nominations must be submitted by emailing this completed form to sean@buksa.com. You will receive confirmation of receipt of your nomination within 48 hours. Please fill out the grey spaces on this form and **don't forget to save your changes** before submitting.

Name of Nominee: _____ Organization (If linked to patient safety) _____

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Title _____ First Name _____ Last Name _____ Position (If linked to patient safety) _____

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Address _____

City _____ Province _____ Postal Code _____

Phone _____ Fax _____ Email _____

Nominating Organization (if applicable):

Contact Title _____ First Name _____ Last Name _____

Contact Position _____

Contact Phone _____ Contact Email _____

Please complete the following questions:

1. Can you attend the workshop for its duration: October 17 to 19, 2006? Yes No

2. Other than English, in what language(s) are you proficient?

i. _____ Writing Reading Speaking

ii. _____ Writing Reading Speaking

3. Please indicate whether we can use the information you have provided in questions A to E (below) for developing our information and publicity materials or for public relations purposes:

Yes, I give my consent No, I do not give my consent

If yes, my information can be used:

i. Anonymously Yes No

ii. With my name Yes No

iii. I would also be willing to meet with media for an interview Yes No

4. I would be willing to give presentations or talk on my experience during and/or following the workshop:

Yes No

5. Please outline any special dietary requirements or physical support you need to attend the workshop:

Please go on to answer questions A to E on the following pages. Take as much room as you need.

A. Describe with some detail your experience with the healthcare system, government agencies, non-governmental organizations, the media or other organizations/individuals to help improve patient safety. Also describe the ways in which you partnered or tried to partner with others. What were your aims? How did you proceed? What progress or accomplishments have you made as a result of your efforts?

Response: (this field will expand as necessary)

B. What are the most important lessons you've learned during your experiences outlined in question "A"? How would these lessons inform other patients or consumers who want to contribute to patient safety, now or in the future?

Response: (this field will expand as necessary)

C. What are the biggest challenges you experienced in trying to be a change agent? Please tell us how you met those challenges.

Response: (this field will expand as necessary)

D. In your view, what are the most pressing issues in the healthcare system in Canada regarding patient safety? What actions do you think should be taken to improve patient safety?

Response: (this field will expand as necessary)

E. What do you hope to contribute during the Patients for Patient Safety in Canada Workshop? What are your expectations?

Response: (this field will expand as necessary)