What is the BEE Award?
The Being Extraordinary Everyday (BEE) Award honors non-nursing employees who demonstrate and exemplify excellence in their daily work. The winner receives $50 added to their paycheck, Applause points, framed certificate of recognition, t-shirt and BEE Award badge clip. The winner’s department enjoys cookies to remind staff how special and important they are in the work that we do, and a BEE award banner is displayed in their area.

All employees who are nominated receive a BEE badge clip and a letter recognizing their accomplishments.

Who is eligible for the BEE Award?
Any non-nursing employee who is dedicated to their work at Johns Hopkins All Children’s, helps inspire others, values different backgrounds, is an outstanding role model, great team member and embraces the unique skillsets and knowledge of others.

How can you nominate your extraordinary employee?
Complete a nomination form and drop it in a nomination box located throughout the hospital and Outpatient Care Centers. Nomination forms will also be available online.
The BEE Award is given each month to two extraordinary employees at Johns Hopkins All Children’s Hospital. An extraordinary employee must have these traits: commitment to exceptional quality and service by encouraging curiosity, seeking information and creating innovative solutions, inspire others to achieve their best and have the courage to do the right thing, embrace and value different backgrounds, opinions and experiences, and listen to understand and embrace others’ unique skills and knowledge.

TELL US WHY THIS EMPLOYEE SHOULD RECEIVE THE BEE AWARD.

Employee’s (first and last) name: ____________________________________________

What area of the hospital or Outpatient Care Center does this employee work? ___________________________________________________________

Write some detailed examples of what this employee has done to deserve the BEE Award:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Nominated by: ____________________________________________ Date: ________________

Please check □ Patient □ Family □ Physician
□ Employee □ Volunteer □ Other ________________________________

Nominations can be dropped in a nomination box located throughout the hospital and Outpatient Care Centers.