

SANTA CLARA COUNTY MENTAL HEALTH BOARD



Date: December 10, 2013
To: All Community Based Mental Health Providers, Family Members, Consumers, and Interested Parties
From: Llolanda Ulloa, Santa Clara County Mental Health Board Support
Subject: SCC Mental Health Board - Community Mental Health Awards

The Santa Clara County Mental Health Board (SCCMHB) is seeking nominees for its Community Service Awards. A nomination form is attached. Community Service Awards are made to community members in any area of expertise who have made an extraordinary difference in the lives of those people with “mental illness”. Recognition is given for mental health education of the general public, elimination of stigma, preventing or fighting housing discrimination, creation of new and innovative programs, recognition of fundraising for mental health activities, recognition of long-term financial support to mental health programs, provisions of community support activities emphasizing mental health, facilitating others through advocacy or intervention, or working for new mental health legislation. Our intent is to award five members of our community who are serving people with “mental illness” and improving the quality of their lives.

Awards will be presented to awardees at the Third Annual SCCMHB Community Service Awards Luncheon on **April 23, 2014. DEADLINE for award nominations is January 31, 2014; Nominations may be mailed, emailed as an attachment, or faxed to:**

Santa Clara County Mental Health Board – Luncheon Planning Committee

C/O: Llolanda Ulloa, Mental Health Administration

828 South Bascom Avenue, Suite 280

San José, CA 95128. Email: Llolanda.Ulloa@hhs.sccgov.org FAX: (408) 885-5788

Hero Award Categories are:

Agency: An agency whose services for individuals with a mental illness condition is consumer & family focused, professional, caring, compassionate, and innovative. The agency goes beyond standard services/treatment, demonstrating partnerships with families, schools, the workplace (for example) that support improvement of a consumer’s life.

Consumers: An individual who has received mental health services whose impressive personal achievements or knowledge has provided hope and inspiration to others facing similar challenges.

Elected Official: A key elected official who has provided extraordinary service and has helped to transform our system by advocating for greater access to mental health services, developing partnerships with mental health resources, contributing exceeding time to improving the lives of people with mental illness, or publicly giving voice to those with mental illness, helping to eliminate the stigma and stereotypes that surround the disease.

Family Member: An individual with a family member who receives mental health services and who has contributed to improving the lives of other families impacted by mental illness through advocacy, programs, or activities that have a positive impact on the services for others.

Mover and Shaker: A person who has recognized critical mental health needs in the greater community and has acted by creating and promoting collaborative innovative and creative programs, partnerships services that serve those in need.

Program: A mental health program that provides unique services that are above and beyond the standard mental health services. This program has had an extraordinary impact on consumers, family members and community.

Additional Award Criteria:

1. Nominations are preferred for recent activity, though may recognize long term activity or service.
2. Awards are for Santa Clara County residents or for nominees, who have provided activities or services, which must benefit persons with “mental illness” in Santa Clara County.

FOR FURTHER INFORMATION CONTACT: LLOLANDA ULLOA (408) 793-5677, MHB SUPPORT. THE SCC MENTAL HEALTH BOARD REVIEWS THE QUALIFICATIONS FOR THE NOMINEES; NOMINEE WITH MAJORITY VOTES WILL BE AWARDED. THERE WILL BE A SPECIAL AWARD PRESENTATION DURING “SCC MENTAL HEALTH BOARD 3RD ANNUAL LUNCHEON”. THANK YOU FOR YOUR PARTICIPATION.

NOMINATIONS FOR SANTA CLARA COUNTY MENTAL HEALTH BOARD COMMUNITY SERVICE AWARDS



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Maximum: ONE Category per page

- AGENCY HERO CONSUMER HERO ELECTED OFFICIAL HERO
- FAMILY MEMBER HERO MOVER AND SHAKER HERO PROGRAM HERO

Submitted by: _____
Name /contact information (include email address and phone number)

I BELIEVE THAT THIS INDIVIDUAL OR ORGANIZATION SHOULD RECEIVE AN AWARD: (GIVE BRIEF SUMMARY)

CATEGORY: _____

NOMINEE NAME: _____

EMAIL ADDRESS: _____

HOME ADDRESS: _____

PHONE: _____

ADDITIONAL INFORMATION REGARDING THIS NOMINEE CAN BE OBTAINED FROM THE FOLLOWING INDIVIDUALS:

NAME: _____

ADDRESS: _____

PHONE: _____

Email ADDRESS: _____

NAME: _____

ADDRESS: _____

PHONE: _____

Email ADDRESS: _____