**Governor's Award for Quality and Productivity Nomination Packet**

The Governor's Award for Quality and Productivity (GAQP) recognizes outstanding teams dedicated to making Missouri state government better. Projects must be a model of excellence in state government in the following categories:

**Customer Service:** Projects in this category demonstrate significant improvements in how Missouri state government meets the needs of its customers, stakeholders, and the public, including:

* **Clear communication:** Providing easy-to-understand information and updates through preferred channels.
* **Accessibility:** Making services and support readily available and user-friendly.
* **Responsiveness:** Addressing concerns promptly and efficiently.
* **Problem-solving:** Resolving issues effectively and with empathy.
* **Consistency:** Delivering reliable and predictable service experiences.

**Efficiency/Process Improvement:** projects in this category showcase innovative ways to achieve better results with state resources, including:

* **Cost savings:** Reducing spending or generating new revenue streams.
* **Operational efficiency:** Simplifying processes and improving workflow.
* **Quality enhancement:** Delivering higher-quality products and services.
* **Resource optimization:** Utilizing resources effectively and efficiently.

**Innovation:** projects in this category present groundbreaking approaches that add significant value to government services, including:

* **New offerings:** Developing entirely new processes, products, or services.
* **Enhanced solutions:** Significantly improving existing processes, products, or services.
* **Technological advancements:** Leveraging technology to deliver better outcomes.
* **Citizen benefit:** Providing tangible benefits to Missouri residents.

**Nomination Eligibility:**

Teams of 2 - 20 Missouri state employees, or teams collaborating with other organizations, can apply if their project:

* Makes a significant and measurable impact.
* Exemplifies excellence in service, efficiency, or innovation.
* Has the potential to be replicated elsewhere.

**Nomination Process:**

* Download the nomination packet and review all details.
* Clearly describe your project's challenge, solution, results, and impact in the 500-word Executive Summary.
* An optional 3-minute video summary can further highlight your achievements.
* Submit your completed nomination form through your agency/department GAQP coordinator.

**Key points to remember:**

* All nominations must be submitted electronically.
* Meet deadlines and provide thorough documentation.
* Secure agency/department endorsement before submitting.

**State of Missouri**

**Governor’s Award for Quality and Productivity**

**Nomination Checklist**

The Nomination Checklist is for your assistance to ensure you have completed all parts of the nomination package.

* Verify all team members are on the nomination form [maximum of 20 team members, of which the majority are state employees]. **Once the nomination is submitted, additional team members may not be added**.
* Include all team members' job titles, email, and agency/organization.
* The completed Executive Summary is attached to the **front** of the nomination form. The summary should include why this project is exceptional, why the citizens of Missouri should be proud of this team, and why the accomplishments are beyond regular responsibilities.
* **Video Summary:** A brief - no longer than three-minute - video summary may also be submitted via a link. ***Submission of a video summary is optional.***
* Confirm the point of contact and telephone number for the nomination.
* Review the nomination to ensure: - free of spelling and grammatical errors, that acronyms and technical terms are identified and understandable by the average reader, supporting documentation is provided, and measurement for the project (minimum of one year of results) has been included in the nomination.
* Forward the completed nomination packet to the agency coordinator for verification.

Show your commitment to excellence. Apply for the GAQP today!

Visit the GAQP website for more information and resources: <http://www.training.oa.mo.gov/erp/index.htm>

Contact your agency/department GAQP coordinator for assistance.

For more information or to answer questions, contact:

*GAQP State Program Coordinator*

*Julie Schlup*

*573-522-1336*

[Julie.Schlup@oa.mo.gov](mailto:Julie.Schlup@oa.mo.gov)

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| **Team Information** | | |
| **Project or Team Name:** | | |
| **Nominator/Point of contact information:** | | |
| Name: | | Phone Number: |
| Department: | Email: | |
| **Nominating Department:** | | |
| **Category:** | | |
| **Collaborating Departments/Agencies:** | | |

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| **Executive Summary:**  Executive Summary page must be 500 words or less, 12 point, Times New Roman font, and left justified. **Complete here or attach the Executive Summary to the front of the nomination.**  **Video Summary:** A brief video summary, no longer than three minutes, may also be submitted via a link. **Submission of a video summary is optional**.  Link here: |

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| **II. GENERAL INFORMATION** |
| **Department(s):** |
| **1. Project or team name:** |
| **2. List the names of all team members, email, job title, state department, and/or other organizations, including the public, private sector, or business.**  *(Please list alphabetically by last name – maximum 2 to 20 team members.)*   |  |  |  |  |  | | --- | --- | --- | --- | --- | | *Last name* | *First Name* | *Email* | *Job title* | *Dept./Organization* | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |

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| **3. Nomination Category**: *(Check only one.)*  **\_\_\_** CUSTOMER SERVICE **\_\_\_** EFFICIENCY / PROCESS IMPROVEMENT  **\_\_\_** INNOVATION |

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| **II. BACKGROUND** |
| **1. When did the team begin its work?** |
| **2. What date did the team initiate the project's implementation phase?** |
| **3. Is the project:**  **\_\_\_** Complete **\_\_\_** Ongoing |
| **III. PROJECT DESCRIPTION** |
| **1. Why was the project necessary?** *(50 words or less.)* |
| **2. What were the primary goals of the project?** *(150 words or less.)* |
| **3. Describe the project:** *(200 words or less.)*      **4. How long have there been measurable results?** |
| **5. Which of the following benefits are the result(s) of the project?** (Check all that apply and explain. (*150 words or less*)  **\_\_\_** Cost Reduction **\_\_\_** Time Savings **\_\_\_** Increased Effectiveness  **\_\_\_** Improved Process **\_\_\_** Other: Describe  **6. Explain the intended benefits:** |

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| **IV. RESULTS / MEASUREMENTS** |
| **1. Explain how the project's success was measured and what outcomes were achieved.** (*300-500 words*.) |

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| **2. What are the benefits derived from this project?** (Check only one.)  **\_\_\_** Recurring **\_\_\_** One-time |

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| **V. RECOGNITION / AWARDS** |
| **1. Has this project received any other awards or recognition? If yes, describe.**  **2. Has this project previously been nominated for the Governor’s Award for Quality and Productivity? If so, when?** |

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| **VI. SIGNATURES** | | |
| **Nominator:** | | |
| **Email Address:** | **Phone Number:** |
| **Signature:** | |
| **VII. DEPARTMENT COORDINATOR’S INFORMATION** | | |
| **Nominator:** | | |
| **Email Address:** | **Email Address:** |
| **Signature:** | |
| **VIII. DEPARTMENT DIRECTOR APPROVAL** | |
| **Department Director’s Name:** | | |
| **Signature:** | |

**THE DEPARTMENT DIRECTOR MUST APPROVE THE NOMINATION.**