## OKLAHOMA HOSPITAL ASSOCIATION 2023 EXCELLENCE IN QUALITY CEO/CNO Affidavit

Hospital Name				
Project Title				
Project Contact Name				
Project Contact Title				
Project Contact Email Address/ Telephone #				
The following must be	ead and signed b	y the Hospital C	EO or CNO:	
This award seeks to incre commitment to achieving participation in the award patient safety efforts and on safety and effectivene	optimal outcomes. s process both as r to assess their pro	Hospitals are urgrecognition of the	ged to consider ir quality improve	ment and
Descriptions of those sul Hospital Association to in organization-wide comm and spread successes. F information.	crease awareness ment to quality imp	of the importance or over and parts	e and impact of a atient safety, and	n to share
I certify the information in submitted information by purposes of promoting en Hospitals.	he Oklahoma Hos	pital Association	in publications or	for the
Name (please print			Date	
Signature		т	 itle	