



Date:

Submitted by: *(Name/Unit/Facility)*

Contact Information: *(Phone number/email)*

Description of Initiative: *(Brief description of the idea, alignment with principles, location etc.)*

Cost: *(If known)*

**If this is an equipment request, please follow the Standard Work for SHA COVID-19
Equipment Approval Process found here:**

<https://sharepoint.ehealthsask.ca/sites/saskhealthauthority/leader-resources/Pages/Financial-Information.aspx>

As front line staff and physicians you can help spread the word to grateful patients, families and others on how they can support you, our health care workers, our hospitals and health care facilities by donating to your local hospital or healthcare Foundation. Encourage people to go to the Foundation websites on how to donate or call for more information. Donations will increase funds available.

Please email the completed form to info@saskhealthauthority.ca.