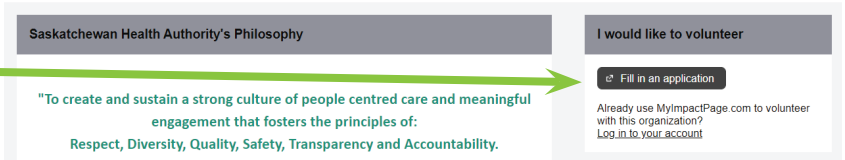


The following step-by-step guide will help you sign up for an SHA Better Impact Account. Here, you will learn about and gain access to Patient Family Partner opportunities provided by the SHA, and log any hours from meetings and events to claim Patient Partner honoraria, if applicable. For questions or further assistance, please contact Tammy Lutz at tammy.lutz@saskhealthauthority.ca.

How to Register

- [Click here to register](#)
- Click on **“Fill in an Application”**

Saskatchewan Health Authority - Patient and Family Centered Care



Saskatchewan Health Authority's Philosophy

"To create and sustain a strong culture of people centred care and meaningful engagement that fosters the principles of:
Respect, Diversity, Quality, Safety, Transparency and Accountability.

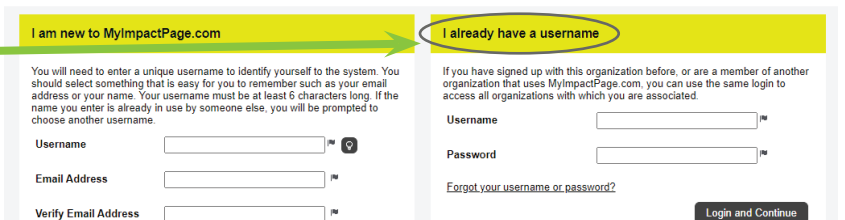
I would like to volunteer

[Fill in an application](#)

Already use MyImpactPage.com to volunteer with this organization?
[Log in to your account](#)

- Complete the box on the right: **“I already have a username”**
- Enter your Username and Password
- Click **“Login and Continue”**

Application Form - Patient and Family Centred Care



I am new to MyImpactPage.com

You will need to enter a unique username to identify yourself to the system. You should select something that is easy for you to remember such as your email address or your name. Your username must be at least 6 characters long. If the name you enter is already in use by someone else, you will be prompted to choose another username.

Username min

Email Address min

Verify Email Address min

I already have a username

If you have signed up with this organization before, or are a member of another organization that uses MyImpactPage.com, you can use the same login to access all organizations with which you are associated.

Username min

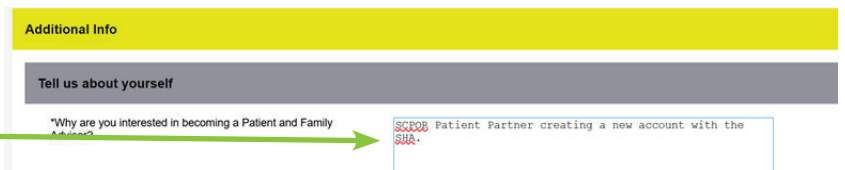
Password min

[Forgot your username or password?](#)

[Login and Continue](#)

- **Additional Information** - the following questions will be asked:
 - *Why are you interested in becoming a Patient and Family Advisor?*

• Indicate that you are a SCPOR Patient Partner creating a new account with SHA.



Additional Info

Tell us about yourself

*Why are you interested in becoming a Patient and Family Advisor?

SCPOR Patient Partner creating a new account with the SHA

- Describe any relevant professional or volunteer experience you have had
- Describe in general, any recent experiences you've had with the health care system, either as a patient or as a family member of a patient.
- Are you currently, or have you previously been an employee of the SHA?
- How did you learn about our program (will provide options)
- Emergency contact and health considerations
- Emergency contact name and phone number
- Please list any medical information/considerations that we should be aware of

- **Consent (yes) to receive emails from the SHA Patient and Family Centered Care Office (PFCC).** Note, your email will only be shared for events that pertain to advisors.

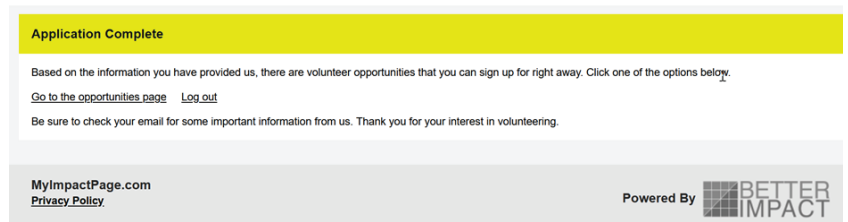


*Email Consent

*I consent to receive emails from the Patient and Family Centred Care Office

Yes min

- **Submit Application**
- Once the registration form is completed, you will receive an automatic email confirming your registration and next steps for registering for orientation.




Application Complete

Based on the information you have provided us, there are volunteer opportunities that you can sign up for right away. Click one of the options below.

[Go to the opportunities page](#) [Log out](#)

Be sure to check your email for some important information from us. Thank you for your interest in volunteering.

MyImpactPage.com
[Privacy Policy](#)

Powered By 

Once you have signed up for SHA Better Impact, you will receive additional forms that need to be completed to finalize your registration.