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**expression of interest – National model for spiritual care in health pilot**

### Thank you for your interest in piloting the co-designed national model for spiritual care in health. Please complete the Expression of Interest (EOI) form below. If you have any questions or to submit your form, please contact SHA via email: [quality@spiritualhealth.org.au](mailto:quality@spiritualhealth.org.au)

Closing date for EOI Friday 2nd June 2023.

|  |  |  |  |
| --- | --- | --- | --- |
| **A. Organisation details** | | | |
| Organisation name |  | | |
| Postal address |  | Phone |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **B. Contact for EOI** | | | |
| Your name |  | Position |  |
| Phone |  | Email |  |

|  |  |
| --- | --- |
| **C. Meeting the criteria for EOI** | |
| **Criteria** | **Yes/No**  **Comment (if required)** |
| 1. Executive Sponsor identified |  |
| 1. Identified role with responsibility for spiritual care |  |
| 1. Capacity to engage in-house research resources (e.g., allied health research lead) |  |
| 1. Ability to establish a multi-disciplinary project team   (3-4 people required. Project team will also include SHA member) |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **D. Executive Sponsor** | | | |
| Name |  | Position |  |
| Phone |  | Email |  |

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| **E. Reason for submitting EOI** |
| 1. Briefly explain why you are submitting an EOI for this initiative (please describe the current state of spiritual care in your health service and what you want to achieve through participation in this pilot). |
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