OSNAC Virtual Dietitian Coverage Back Up Plan Template





Date:	Home:
Signature:	
To be completed by Executive Director / Administrator or Delegate	
Staff Dietitian On Site Services	
In cRDCirc	services are provided on site at 30 minutes per resident per month as per FLTCA 2021. The ertain circumstances and with the approval of the Administrator / Executive Director, the will be permitted to work virtually if all other options have not been successful cumstances that would be considered for approval of virtual RD support (illness, lement weather, HR shortages)
1.	ck Up Plan for onsite support: RD to adjust scheduled on site days A secondary RD to support home staff RD absence a. Name of Coverage RD: b. Days/Hours On Site:
Virtual Dietitian Services	
0	nis plan of on site support is not successful, virtual RD support can be approved. RD Name: Scheduled virtual support period (specify dates/time frame):
0	Reason for inability to be onsite:
0	Authorizer (Administrator, Executive Director or Delegate):
• St. Ma • RD	rtual RD support will utilize video and/or phone consultation with staff of the home as quired if assistance with a resident is needed. aff contact for virtual RD support: onsite Registered Staff or delegate (i.e. Nutrition anager). Specify:
Additional Comments:	
When do chart no Virtual a	entation for Virtual Dietitian: ocumenting virtually, the RD should include the following statement at the start of each te: ssessment/review completed. RD collaborated with (note any staff member resident and/or family) on (date) to obtain required information and observations.