



## Diet Orders – Diet Changes (Virtual) Hand-in Package



Welcome to the virtual education session of Diet Orders – Diet Changes. The course is going to take approximately 20 minutes to complete. It needs to be completed in one sitting. **Your progress in the course is not saved, so if you close out of your browser while in the middle of the session, you will need to start from the beginning again.**

It is the expectation that the employees of Southern Health – Santé Sud complete the education session of Diet Orders – Diet Changes.

Before starting the virtual education session of Diet Orders – Diet Changes, please ensure you have the following:

- A distraction-free space
- A stable internet connection
- 15 minutes to dedicate to completing the course
- 5 minutes to dedicate to completing the Knowledge Check Quiz
- A personal device (computer, laptop, tablet or smartphone)
- Speakers or headphones for audio sections
- Hand-in Package

*Please connect with your facility's local education facilitator or designate to arrange a space and time at your facility to complete the virtual education session of Diet Orders – Diet Changes.*



## **Diet Orders – Diet Changes (Virtual) Agenda**

### **Diet Orders – Diet Changes**

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- **Diet Orders – Diet Changes Policy**
  - **Purpose of Diet Orders – Diet Changes Policy**
  - **Diet Change Form**
  - **Health Care Professionals Authorized to Write or Transcribe Diet Orders – Diet Changes**
  - **Procedure for Submitting Diet Orders – Diet Changes**
  - **Former Names of Diet Change Form**
  - **Appropriate Forms Used in Southern Health – Santé Sud to Communicate Diet Information**
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*You must return your completed Diet Orders – Diet Changes virtual education session Hand-in Package to your site's education facilitator or designate in order to have a record of completion of this education in your personnel file.*

*Please ensure that you complete this package in its entirety before handing it in.*



# Diet Orders – Diet Changes (Virtual) Checklist

Upon completion of virtual education session of Diet Orders – Diet Changes, check all sections that have been completed and sign below.

Please note that it is the expectation that staff complete all sections. This form will be retained in your personnel file.

Diet Orders – Diet Changes Education Session	
Diet Orders – Diet Changes Policy	<input type="checkbox"/>
Purpose of Diet Orders – Diet Changes Policy	<input type="checkbox"/>
Health Care Professionals Authorized to Write or Transcribe Diet Orders – Diet Changes	<input type="checkbox"/>
Procedure for Submitting Diet Orders – Diet Changes	<input type="checkbox"/>
Former Names of Diet Change Form	<input type="checkbox"/>
Appropriate Forms Used in Southern Health – Santé Sud to Communicate Diet Information	<input type="checkbox"/>

I have completed the above sections of virtual education session of Diet Orders – Diet Changes and agree to comply with the standards.

Employee’s Full Name: \_\_\_\_\_ Work Site: \_\_\_\_\_

Employee ID #: \_\_\_\_\_ Date: \_\_\_\_\_

Employee’s Signature: \_\_\_\_\_

Did you complete the virtual education session of Diet Orders – Diet Changes while on duty or off duty? \_\_\_\_\_



## Diet Orders – Diet Changes (Virtual) Sign-off

Please confirm that you have completed the virtual education session of Diet Orders – Diet Changes and submit the completed hand-in package in to your facility’s education facilitator or designate.

**I confirm that I have completed the following:**

- Diet Orders – Diet Changes Education Session
- Knowledge Check – Quiz

*\*Please note that all quiz results are collected for verification purposes. We will verify that the quiz has been completed so only check if the quiz has been done. Staff who has not finished the quiz will not be marked as completing the virtual education session until the quiz result has been received*

**Employee’s Full Name:** \_\_\_\_\_ **Work Site:** \_\_\_\_\_

**Employee ID #:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Employee’s Signature:** \_\_\_\_\_

**Did you complete the virtual education session of Diet Orders – Diet Changes while on duty or off duty?** \_\_\_\_\_

*To be completed by the education facilitator or designate*

I confirm that the above employee has handed in all necessary forms and paperwork to be marked for the completion of the virtual education session of Diet Orders – Diet Changes and I will:

- Complete the virtual education session of Diet Orders – Diet Changes completion form and submit it to Payroll or designate to enter into QHR
- Send this package to Payroll and/or Department Lead to enter into employee’s personnel file

**Educator/designate Name:** \_\_\_\_\_ **Facility:** \_\_\_\_\_

**Educator/designate Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



## Diet Orders – Diet Changes (Virtual) Evaluation

Please scan the QR code or click on the link below to fill out an evaluation for virtual education session of Diet Orders – Diet Changes. Your feedback is important!



[https://www.surveymonkey.com/r/Diet Orders Diet Changes](https://www.surveymonkey.com/r/Diet_Orders_Diet_Changes)

**Thank you for taking time to complete this survey, we value your input!**

Healthier **people**. Healthier **communities**. **Thriving** together.

Le mieux-être des **gens**. Le mieux-être des **communautés**. **Prospérons** ensemble.