



CONTINUING CARE – VOLUNTEER SERVICES
VOLUNTEER SHOPPER REFERRAL

Instructions:

- This service is only for residents who **do not** have family/friends to shop for them.
- To access this service for a resident, ask the nursing supervisor to initiate this referral. The nursing supervisor will forward this form to the care coordinator for approval.
- Note: volunteers are NOT permitted to purchase tobacco, liquor or cannabis products for residents.

Date	Nursing supervisor	Care coordinator
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Section 1: Resident information

Resident's name	House/unit
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The resident and or SDM agree with this referral? Yes No

Section 2: Reason for referral

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Section 3: Care coordinator approval

Request approved? Yes No Documented in electronic health care record

Comments

Section 4: Coordinator of volunteer services

Date received: **YYYY/MM/DD**

Resident's name added to approved shopper list? Yes No
 Provided copy of updated volunteer shopper list to admin. assistant? Yes No

Comments

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