



DAILY VISIT NOTE FORM / TIMESHEET

CLIENT NAME: _____

Employee: _____

| | | | | | | | | |
|-------------------------|---------------|--------|----------|---------|---------|--------|-----------|--|
| DAY | Noelani Barr | | | | | | | |
| Date | | | | | | | | |
| Time In | Yuri Cantrell | | | | | | | |
| Time Out | | | | | | | | |
| | Tuesday | Select | Saturday | Tuesday | Tuesday | Friday | Wednesday | |
| Bathing | 20 | 2 | 19 | 24 | 27 | 4 | 5 | |
| Dressing | 3 | 20 | 11 | 6 | 23 | 9 | 14 | |
| Toileting | 3 | 25 | 8 | 10 | 15 | 2 | 15 | |
| Standby assist | X | | X | X | | | | |
| Cleaning body | | | X | | | | | |
| Toweling off | | X | | X | | | X | |
| Laundry | | | | | X | | X | |
| Linen changes | | | | X | X | | X | |
| Make beds | X | X | X | | X | | X | |
| Floor care | X | X | | X | X | X | | |
| Tidy up kitchen | X | X | X | X | X | | X | |
| Meal Preparation | X | | | X | | X | | |
| Feeding | | X | X | | | X | X | |
| Vacuum | | | | | | | | |
| Empty Trash | X | | X | | X | X | | |
| Dust | X | X | | X | X | | | |
| Clean Bathroom | X | | X | | | X | | |
| Healthcare Appt. | | | X | X | | | | |
| Shopping | | | X | X | X | X | X | |
| Clutter Control | | | X | X | | X | X | |
| Read/play games | | X | | X | | X | | |
| Change incontinent wear | | X | | X | X | | | |
| Shampoo | | | X | X | | X | X | |
| Hair grooming | X | | X | | X | X | | |
| Oral hygiene | X | X | | X | X | X | X | |
| Give fluids | | | | | | | | |
| DAILY VISIT | X | | | X | X | X | X | |

TOTAL WEEKLY VISIT: _____

Employee Signature & Name: _____ Date: _____

Client Signature: _____ Date: _____

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02-Aug-1998
10-Feb-2021