

**EXCEL Home Care - Scranton**

In Home Non-Medical Care at its Finest

Weekly Time Sheet & Service Log

Fax: 1-570-227-0003

20\_\_

Scranton

Client Name \_\_\_\_\_  
 Caregiver \_\_\_\_\_  
 Please Print First & Last Names Above

Place an "X" in the column of each activity performed on that day

Date	Time In	Time Out	Hours Worked	Bathing Assistance	Hair Care	Dressing Assistance	Lotion/Ointment	Meal Preparation	Eating/Drinking	Laundry	Light Housekeeping	Shopping /Errands	Medication Reminder	Reading/ Writing	Managing Finances	Social/Leisure Activities	Telephone/Communication Devices	Securing Transportation	Appointment Scheduling	Caring for Personal Possessions	Obtaining Seasonal Clothing	Ambulating	Range of Motion	Supervised Walks	Supervision/Coaching/Cueing	Toileting	Bowel/Bladder Management	Transfers	Incontinence Care	
				Monday AM																										
Monday PM																														
Tuesday AM																														
Tuesday PM																														
Wednesday AM																														
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Thursday AM																														
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Saturday AM																														
Saturday PM																														
Sunday AM																														
Sunday PM																														
<b>Total</b>																														

**Additional Instructions:**  
 Personal Care Services should only be performed, *in the client's home*, if indicated by the office that these services are part of their Care Plan. **If your client is no longer at home (hospitalized, incarcerated or nursing home) PLEASE CALL THE OFFICE IMMEDIATELY AND REPORT IT!**

Signature of Consumer & Caregiver (PER SHIFT)

Scranton

TERMS & CONDITIONS:

The signatures above (either caregiver and consumer, or consumer's authorized agent) indicate agreement as to the number of hours worked for the week listed and indicate agreement as to the services performed as indicated. **Any person(s) who knowingly submit false, fraudulent information for the purpose of wage remuneration are committing a crime and may be subject to immediate termination as well as civil and criminal penalties.** We **MUST** receive your time sheet(s) that are signed by the client by 12pm each Monday.

**Please make copies of blank time sheet for future weeks!**