EXCEL Home Care

Home & Community Supports at their Finest

Weekly Time Sheet & Service Log

Fax: 1-888-548-8632 Email: ODP@excelhc.com

20__

ODP

Client Name _____

Direct Support Professional _____

Please Print First & Last Names Above

Service Provided (circle) w1726 w7060 w9798

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	Signature of Consumer & DSP (PER SHIFT)	
Monday AM																																	
Monday PM																																	
Tuesday AM																																	
Tuesday PM																																	
Wednesday AM																																	
Wednesday PM																																	
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Saturday AM																																	
Saturday PM																																	
Sunday AM																																	
Sunday PM																																	
Total																																	

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!***

ODP

TERMS & CONDITIONS: **Please make copies of blank time sheet for future weeks!**

The signatures above (either DSPs 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 renumeration 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.

rev. 12/16