

Client Care Schedule

One client per sheet. Share only with the people this client or their representative approved.



Client or care circle _____

Week of _____

Version updated _____

Agency coordinator _____

Coordinator phone or email _____

Designated family contact _____

DAY	DATE AND TIME WINDOW	CARE ACTIVITY OR VISIT	RESPONSIBLE CAREGIVER	FAMILY CONTACT OR BACKUP	LOCATION OR TRANSPORT	CARE-PLAN OR MED INSTRUCTION REFERENCE	STATUS AND NEXT HANDOFF
Monday							S P C Next:
							S P C Next:
Tuesday							S P C Next:
							S P C Next:
Wednesday							S P C Next:
							S P C Next:
Thursday							S P C Next:
							S P C Next:
Friday							S P C Next:
							S P C Next:
Saturday							S P C Next:
							S P C Next:
Sunday							S P C Next:
							S P C Next:

Weekly View and Change Log

Update both from the same master schedule. A printout without a current version date may be out of date.



Weekly View

DAY	VISIT WINDOW AND KEY ACTIVITY	ASSIGNED CAREGIVER	FAMILY-FACING CHANGE	STATUS
Monday				S P C
Tuesday				S P C
Wednesday				S P C
Thursday				S P C
Friday				S P C
Saturday				S P C
Sunday				S P C

Change Log

CHANGE RECORDED AT	WHAT CHANGED	COVERAGE CONFIRMED BY	CONTACT NOTIFIED, CHANNEL AND TIME	ACKNOWLEDGED? (N/R = NOT REQUIRED)	NEXT ACTION AND OWNER
				Yes No N/R	
				Yes No N/R	
				Yes No N/R	
				Yes No N/R	
				Yes No N/R	
				Yes No N/R	
				Yes No N/R	

Scheduled The intended plan.	Pending A change needs confirmation. Do not treat it as final.	Confirmed Coverage checked and the designated contact informed under the client's communication plan. Visit completion, payroll, and EVV records live in the agency's official system.
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