

Caregiving Daily Tasks

**MORE HOME HEALTH
TRAINING RESOURCES**



CAREGIVER NAME _____ DATE _____ TIME IN _____ TIME OUT _____

	Evaluate / Assist With	✓	Time	Notes
Nutrition	Breakfast			
	A.M. Snack			
	Lunch			
	P.M. Snack			
	Dinner			
	Liquids			
	Hygiene	Shower/Bath		
Brushed Teeth				
Combed Hair				
Clothing Changed				
Other				
House Cleaning	Laundry As Needed			
	Trash As Needed			
	Change Bed Linens			
	Dishes			
	Wipe Down Kitchen Surfaces			
	Wipe Down Bathroom Surfaces			
	Clean Floors			
	Clean Out Refrigerator			
	Clean Toilet			
	Tidy Up Living Space			
Health	Check Blood Sugar			
	Check Blood Pressure			
Exercise /Activity				

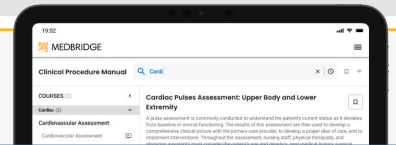
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