

2025 Task Sheet



Client _____
 Name _____
 Date _____
 Aide _____

Task Sheet

Personal Care Date	<u>Mon.</u>	<u>Tues.</u>	<u>Wed.</u>	<u>Thurs.</u>	<u>Fri.</u>	<u>Sat.</u>	<u>Sun.</u>
Ambulation assistance							
Transferring assistance							
Dressing assistance							
Hygiene Assistance							
Incontinence assistance							
Meal Preparation							
Feeding assistance							
Standby/Safety Assistance at all times							
Shower Assistance							
Full Bed Bath							
Assist to commode							
Empty BSC/Urinal							
Medication Reminders							
Home Care							
Make Client's Bed							
Change Bed linens							
Wash Client's dishes							
Laundry assistance							
Sweeping/Mopping							
Take out trash							
Floor clutter removal							
Client's bedroom (Tidy)							
	<u>Mon.</u>	<u>Tues.</u>	<u>Wed.</u>	<u>Thurs.</u>	<u>Fri.</u>	<u>Sat.</u>	<u>Sun.</u>

Keep Kitchen tidy							
Client's Bathroom (Tidy)							
Transportation							
Escort to medical appointments							
Escort to grocery store							
Short Errands (Limit 2 Errands)							

Additional Request from client: