1st Nurse Registry

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Companion Services Activity Log**  Companion/sitter services shall not include any personal or hands-on care. Companion/Sitter services include non-medical care, socialization and basic supervision to ensure a client’s safety and well-being. Companions may provide light housekeeping tasks, which are secondary to the care and supervision of the client | | | | | | | | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **Client Name**: | |  |  |  |  |  |  |  | **Client Reference #** | | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Month: | |  |  |  |  | Year: |  |  |  |  | Page: |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Enter Calendar Date** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Time In** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Time Out** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Employee Initials** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Client Initials** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **T=Total** | |  | **A=Assist** | |  | **S: Standby** |  |  | **R=Refuse** | |  |  |  |  |
| Providing companionship, friendship and emotional support |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Talking listening, sharing experiences |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Playing games/cards, reading to client etc |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Helping keep clients in contact with family, friends and the outside world |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Providing transportation to medical appointments, grocery store and errands |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Accompanying clients to recreational and/or social events |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Assisting with plans for visits and outings |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Writing or typing letters/correspondence |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Organizing and reading mail |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Planning local trips and out-of-town travel with clients |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Teaching/performing meal planning and preparation |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Performing light housekeeping |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Accompanying client on walks |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Reminding client to take medication |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Reminding client to start or finish meals |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Assisting with pet care |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| NOTE: Record additional information, observations, or changes on Multidisciplinary Notes. | | | | | | | | | | |  |  |  |  |  |