



Care Note Template

Clear. Consistent. Complete.



Good documentation shows the quality of care you provide.



2-HOUR VISIT TEMPLATE

Document the entire visit in one clear paragraph.

Example



Start of Visit

Arrived at the client's home at [Time]. Client was observed [client condition upon arrival]. Client was alert/oriented x3 / pleasant / resting / awake, and [any notable observation].

Arrived at the client's home at 8:00 AM. Client was observed resting comfortably in bed upon arrival. Client was alert and oriented x3 and in good spirits.



Care Provided

Assisted the client with [ADLs, bathing, dressing, grooming, toileting, ambulation, meal preparation, medication reminder, housekeeping, companionship, etc.].

Assisted the client with bathing, dressing, grooming, meal preparation, and medication reminder. Provided light housekeeping and companionship.



Client Response

Client [tolerated activities well / denied pain / participated appropriately / required cueing / declined assistance].

Client tolerated all activities well, denied pain, and participated appropriately.



End of Visit

Before departure, client was [comfortable/resting safely/left with all immediate needs met]. No falls, injuries, or significant changes in condition were observed during the visit.

Before departure, client was comfortable and resting safely. No falls, injuries, or significant changes in condition were observed during the visit.



4+ HOUR VISIT TEMPLATE

Document the visit chronologically and provide a brief update every 2 hours.

Example

Arrival

8:00 AM

Arrived at the client's home. Client was [condition upon arrival]. Assisted with [care provided].

Arrived at the client's home. Client was alert and oriented x3. Assisted with breakfast, hygiene care, and medication reminder.

Every 2 Hours

10:00 AM

Assisted with [care provided]. Client [response/observation]. [Any changes noted.]

Assisted with toileting and light housekeeping. Client denied pain and was in good spirits.

Every 2 Hours

12:00 PM

Assisted with [care provided]. Encouraged [hydration/nutrition/ambulation/etc.]. Client [response].

Prepared and served lunch. Encouraged fluids and social interaction. Client ate well and remained comfortable.

Every 2 Hours

2:00 PM

Continued providing [care/services]. Client [condition].

Continued providing companionship and safety monitoring. Client remained stable and pleasant.

End of Shift



Ensured client was comfortable before departure. All scheduled care was completed, medications/reminders were provided as applicable, and no falls, injuries, or significant changes in condition were observed unless otherwise documented.

Ensured client was comfortable before departure. All scheduled care was completed, medications were provided as scheduled, and no falls, injuries, or significant changes in condition were observed.

(Continue every 2 hours for longer shifts.)



Key Reminders

- ✓ Be clear, specific, and objective.
- ✓ Focus on what was seen, heard, and done.
- ✓ Document all care provided and client response.
- ✓ Report any changes in condition immediately.
- ✓ *If it wasn't documented, it didn't happen.*



Why Complete Care Notes Matter

- ✓ Shows the quality of care provided
- ✓ Protects both caregivers and the agency
- ✓ Supports accurate billing and compliance
- ✓ Helps ensure continuity of care for the client