HOURLY ADULT CARE
SERVICE LOG

SERVICE DATE

The date on which the hourly adult care services logged below were provided.

Service Date:

STAFFING & SERVICES

Document the minute of arrival and departure times for staff, residents, and participants in the corresponding hour block. Place an "X" in each intervening hour block. Staffing ratios must be at least one (1) staff to every four (4) residents and participants, combined.

	Staff Name:	Staff Name:	Staff Name:	Staff Name:	CFH Resident Name:	CFH Resident Name:	CFH Resident Name:	CFH Resident Name:	HAC Participant Name:	HAC Participant Name:	HAC Participant Name:	HAC Participant Name:	HAC Participant Name:	HAC Participant Name:	HAC Participant Name:	HAC Participant Name:
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