

OFFICE USE ONLY		
TRAIN/ORIENT	PSS/HM KM	TOTAL HOURS

OTTAWA WEST COMMUNITY SUPPORT:CSS TIMESHEET															
<b>CLIENT INFORMATION</b>															
Last Name							First Name								
<b>WORKER INFORMATION</b>															
Last Name							First Name								
Worker Signature															
<b>CHARTING LIST</b>															
<i>HOMEMAKING</i>	M	T	W	T	F	S	S	<i>PERSONAL SUPPORT</i>	M	T	W	T	F	S	S
DUSTING								BEDSIDE CARE							
VACUUMING								TUB/SHOWER							
KITCHEN COUNTERS								DRESSING/GROOMING							
MAKING/CHANGING BED								MOUTH/HAIR/NAIL CARE							
WIPE OUTSIDE OF FRIDGE								TOILETING							
WASHING DISHES								INCONTINENT CARE							
CLEANING BATHROOM								AMBULATION/EXCERCISE							
MEAL PLANNING/PREPARTATION								TRANSFERRING							
LAUNDRY								FEEDING							
								MEDICATION CUEING							
OTHER							OTHER								
<b>SHIFT INFORMATION</b>															
	DD	MM	YY	START	END	CANCELLATION			CLIENT SIGNATURE						
MON						<input type="checkbox"/> more than 24 hours	<input type="checkbox"/> less than 24 hours	<input type="checkbox"/> at door							
TUES						<input type="checkbox"/> more than 24 hours	<input type="checkbox"/> less than 24 hours	<input type="checkbox"/> at door							
WED						<input type="checkbox"/> more than 24 hours	<input type="checkbox"/> less than 24 hours	<input type="checkbox"/> at door							
THURS						<input type="checkbox"/> more than 24 hours	<input type="checkbox"/> less than 24 hours	<input type="checkbox"/> at door							
FRI						<input type="checkbox"/> more than 24 hours	<input type="checkbox"/> less than 24 hours	<input type="checkbox"/> at door							
SAT						<input type="checkbox"/> more than 24 hours	<input type="checkbox"/> less than 24 hours	<input type="checkbox"/> at door							
SUN						<input type="checkbox"/> more than 24 hours	<input type="checkbox"/> less than 24 hours	<input type="checkbox"/> at door							
<b>CHANGE IN SHIFT DURATION</b>															
DAY			REASON												

Timesheets due every Monday at noon: drop-off; fax to 613-728-3718; email to [accounting@owcs.ca](mailto:accounting@owcs.ca)  
 Originals needed for photo submission