



IN-SERVICE RECOMMENDATIONS

General Notes: There are general recommendations and not to serve as any form of medical order or required procedures. The specific needs and preferences of each client may vary, so always tailor your care to the individual.

- Regularly check for pressure sores, especially in bed-bound clients.
- Always communicate clearly and patiently, giving the client enough time to respond.
- Document any significant changes in behavior, alertness, or physical abilities and communicate them to the supervising nurse or the client's family.
- Maintain the client's dignity and privacy at all times.
- Stay updated on the client's medical history, medications, and any specific instructions or preferences they may have.

Assessment Questions:

- 1) Do you have a preference on how your care should be given?
- 2) Is there a priority on how these services should be given?
- 3) What do you need the most assistance with?
- 4) Are there any restrictions on how care should be given/received?

Time of Day	Tasks and Focus Areas	Observations and Recommendations
Morning	1. Greet the client and/or family warmly.	Client's feedback and willingness to engage.
	2. Assist with morning hygiene: brushing teeth, washing face, etc.	Alertness and mood.
	3. Help with dressing, if needed.	Any noticeable changes in physical ability or balance.
	4. Prepare or assist with breakfast.	Appetite and any difficulty in swallowing.
	5. Administer morning medications, if prescribed.	Any side effects or refusal to take medications.
	6. Assist with any exercises or physical therapy routines.	Client's comfort or pain during exercises.
	7. Say bye to client and/or family	Client's feedback and willingness to engage.
Afternoon	1. Prepare or assist with lunch.	Changes in appetite and any difficulty in swallowing.



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	2. Provide companionship (e.g., chatting, reading, games).	Any changes in cognitive abilities or memory.
	3. Assist with toileting or continence care, if required.	Skin condition, especially in areas prone to pressure sores.
	4. Offer snacks or hydration, ensuring the client is drinking enough fluids.	Any signs of dehydration or changes in urine output, appetite, and any difficulty in swallowing.
	5. Assist with afternoon nap or rest, if the client usually takes one.	Sleep pattern and duration.
	6. Facilitate any scheduled appointments or outings.	Mobility and ease of movement during these activities.
Evening	1. Prepare or assist with dinner.	Changes in appetite and any difficulty in swallowing.
	2. Engage in quiet activities or entertainment (e.g., watching TV, listening to music).	Fatigue or any changes in behavior.
	3. Assist with evening hygiene: washing up, brushing teeth, etc.	Client's feedback on how they feel.
	4. Administer evening medications, if prescribed.	Compliance with medications and any observable side effects.
	5. Assist the client in getting ready for bed.	Any difficulty in movement or positioning.
Night	1. Ensure the client is comfortable and safe in bed.	Pain, discomfort, and behavior.
	2. Check that nightlights and safety measures (like rails) are in place, if needed.	Restlessness or difficulty in sleeping.
	3. Respond to any calls or needs throughout the night.	Any nocturnal confusion or agitation.
	4. Periodically monitor for safety, especially if the client is prone to wandering.	- Signs of discomfort or pain.