# Client Sleep Log

Please complete log for your  client who is not sleeping at nights
This will help the agency to analyze to help the caregiver meet sleep requirements, and client sleep remediation
On average client bathroom breaks or snacks are 15 minutes intervals.

Caregiver Name _____ Client Name _____ Week Ending _____

| Date | Client Time Up | Client Time Sleep Return | Total Time | Task | Comments |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |