

Weekly Staff Time Study Worksheet

Employee Name _____

Week of: _____

For each date and time slot, write in the number that corresponds to the **primary** type of work being conducted; if you do more than one task during a time period, select the task on which you spent the majority of the time. Select from the following list of tasks (**note that this list should be modified depending on the tasks that you are interested in estimating for your cost analysis**):

- | | |
|--|--|
| 1. Preparing or planning for home visits | 5. Delivering home visits |
| 2. Completing paperwork | 6. Doing outreach to engage families (phone calls, emails, letters, etc) |
| 3. Traveling to/from home visits | 7. Conducting/scoring screening for eligibility |
| 4. Supervision | 8. Other tasks not covered above <i>[this can include time spent on any tasks that you are not interested in tracking for cost analysis]</i> |

Time [time slots can be modified to reflect home visitor's work schedule]	Monday	Tuesday	Wednesday	Thursday	Friday
	Enter ONE number corresponding to the primary type of work below:				
8:00-8:30 am					
8:30-9:00 am					
9:00-9:30 am					
9:30-10:00 am					
10:00-10:30 am					
10:30-11 am					
11-11:30 am					
11:30-noon					
12 :00-noon-12:30 pm					
12:30-1:00 pm					
1:00-1:30 pm					
1:30-2:00 pm					
2:00-2:30 pm					
2:30-3:00 pm					
3:00-3:30-pm					
3:30-4:00 pm					
4:00-4:30 pm					
4:30-5:00 pm					
5:00-5:30 pm					
5:30-6:00 pm					

