

Home Care Room Setup Workbook

A Step-by-Step Planning Guide for Family Caregivers

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Your parent is coming home, and you want to get this right. This workbook walks you through every decision — room by room, one section at a time — so you can set up a safe, comfortable home care space with confidence. Use it to plan, track, and personalize your setup before your parent arrives and in the weeks that follow.

What's Inside

- ✓ 8 guided planning sections
- ✓ Reflection prompts with writing space
- ✓ Room layout planning grid
- ✓ Equipment tracker and rental checklist
- ✓ Repositioning schedule and skin check log
- ✓ Daily caregiver schedule template
- ✓ Emergency information and care team organizer
- ✓ Appointment tracker and question prep sheets

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How to Use This Workbook

Read this page first

A note from Esther

I created this workbook because I know how overwhelming it feels to get a discharge date and realize you have days — sometimes hours — to prepare. Over the years as an occupational therapist, I watched families scramble, make expensive mistakes, and exhaust themselves doing things in the wrong order. This workbook is designed to change that.

Work through each section at your own pace. Some of it you will complete before your parent arrives. Some you will come back to in the first week as you settle into your routine and realize what is working and what needs to change. That is completely normal. The goal is not perfection on day one. The goal is a safe, dignified, sustainable situation for your parent — and for you.

Clinical note: The single most common mistake I see families make is focusing entirely on the patient and not at all on the caregiver's body and stamina. A caregiver who gets injured or burns out cannot provide care. This workbook addresses both.

When to use each section

When	Complete
Before your parent arrives	Sections 1, 2, 3, 4, 6 (Emergency Info)
Day of arrival	Section 4 (final within-reach setup), Section 3 (first skin check)
First week home	Section 5 (caregiver schedule), Section 7 (professional visits)
Ongoing	Section 3 (repositioning log), Section 8 (notes)

You will find writing lines, tables, and planning grids throughout. Print this workbook single-sided so you always have room to write. Keep it on a clipboard or in a folder in the care room.

1

Room Selection

Choosing the right space before anything else moves in

The room you choose will shape everything else — caregiver access, equipment fit, bathroom logistics, and your parent's daily quality of life. Take 15 minutes with this section before you start moving furniture.

Room Candidates — List the rooms you are considering

Option 1: Room or space being considered

Option 2: Room or space being considered

Option 3: Room or space being considered

Room Assessment — Answer for each room you are considering

Is this room on the ground floor?

Yes / No / Notes:

How far is it from the nearest bathroom?

Distance or description:

Can two people stand on both sides of a bed comfortably?

Yes / No — if no, can furniture be removed?

Do the doorways measure at least 32 inches wide?

Measure before equipment is ordered.

Does the room have a window with natural light?

Yes / No — which direction does it face?

What is the noise situation? (street, TV, foot traffic)

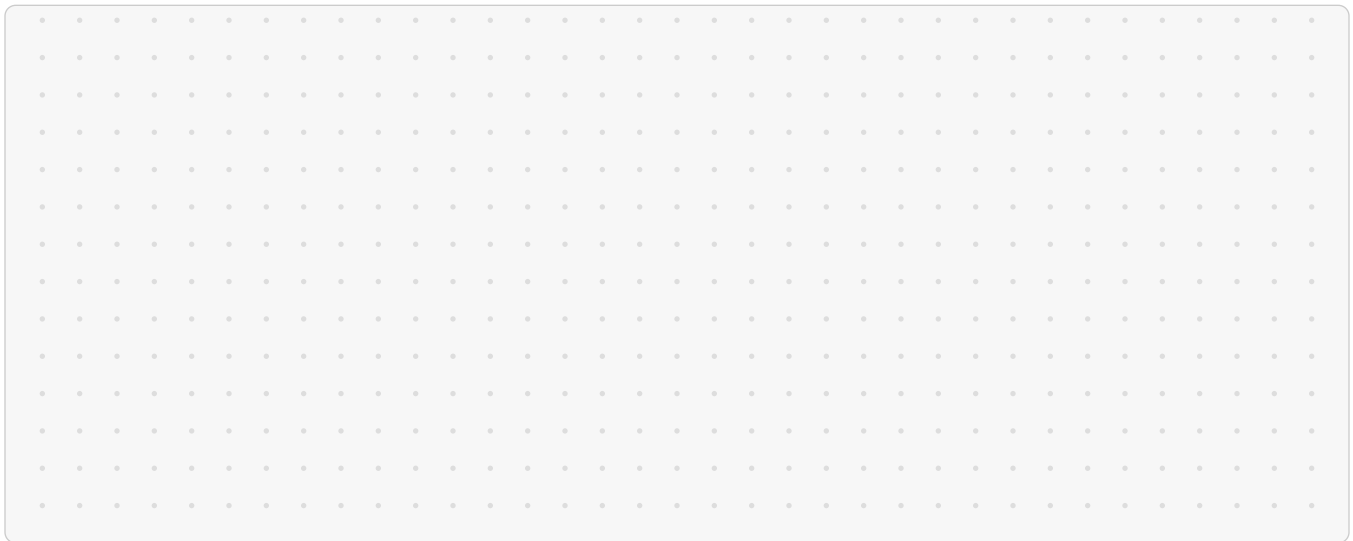
Describe:

Are there rugs, cords, or other floor hazards to remove?

List what needs to go:

Room Layout Planning Grid — Sketch your chosen room

Use the grid below to sketch the room layout. Mark the bed, door, window, commode, and supply cart. Make sure both sides of the bed are accessible before you finalize the arrangement.



Label: B = Bed D = Door W = Window C = Commode S = Supply cart T = Overbed table

My recommendation: When in doubt, choose the room closest to the bathroom, even if it is smaller than you expected. Distance matters more than square footage in a caregiving situation.

2

The Bed & Equipment

The most important purchasing and rental decisions

The bed is the center of a home care room. Getting this right — especially the mattress surface — will protect your parent's skin and protect your back. Use this section to plan before you order.

Bed Decision

What type of bed are you planning to use?

Full electric adjustable hospital bed (recommended) / Adjustable bed / Standard bed

Have you asked the hospital discharge planner about Medicare Part B bed coverage?

Yes / No — ask before you leave the hospital. Many families miss this.

What is the delivery date for the bed?

Make sure it arrives before your parent, not after.

Who is delivering and setting it up?

Name / Company / Phone:

Mattress Surface

What pressure-redistributing surface will you use from Day 1?

Options: Alternating pressure air mattress overlay / High-density foam overlay / Full replacement mattress. Do not use a standard foam topper — it is not rated for pressure redistribution.

Equipment Tracker

Use this table to track every piece of equipment needed.

Equipment Item	Ordered / Source	Expected Date	Cost / Insurance	Ready?
Adjustable hospital bed				
Pressure-redistributing mattress				
Padded half-rails or bed bolsters				
Overbed table				

Bedside commode				
Wheelchair or transport chair				
Transfer belt / gait belt				
Bed alarm sensor pad				
Baby monitor				
Medical alert device				
Heel protectors				
Positioning wedges / foam				
Supply cart or rolling dresser				

Important: Set the bed height to your hip level when providing care — roughly level with the top of your thigh. Lower it to near-floor height when your parent is resting. This one habit protects your spine every single day.

3

Skin Protection Plan

Start this protocol the day your parent arrives home

Pressure injuries can begin forming in as little as two hours on unrelieved pressure points. Older skin is thinner and heals more slowly. A consistent repositioning routine, started from day one, is the most effective thing you can do to prevent a serious wound.

My Repositioning Schedule

Fill in the times and position for each turn. Aim for every 2 hours while your parent is awake. Adapt times to your household routine — consistency matters more than perfection.

Time	Position	Who Does It	Notes
6:00 AM			
8:00 AM			
10:00 AM			
12:00 PM			
2:00 PM			
4:00 PM			
6:00 PM			
8:00 PM			
10:00 PM			
Overnight (if awake)			

Position Key

Back (supine)	Lying flat on back. Pillow under knees. Heels elevated off mattress.
Left side	Lying on left side. Pillow between knees. Wedge behind back for support.
Right side	Lying on right side. Pillow between knees. Wedge behind back for support.
Head elevated	Head of bed raised 30–45 degrees. Used for meals, respiratory conditions.

Weekly Skin Check Log

Check these pressure points at each repositioning. Circle any area that is red, warm, or does not blanch (skin does not briefly lighten when you press on it). Call your parent's nurse or physician if you find a non-blanching red area.

Date	Tailbone	Heels	Hips	Shoulder Blades	Back of Head	Notes / Action Taken
	OK / Concern	OK / Concern	OK / Concern	OK / Concern	OK / Concern	

	OK / Concern	OK / Concern	OK / Concern	OK / Concern	OK / Concern	
	OK / Concern	OK / Concern	OK / Concern	OK / Concern	OK / Concern	
	OK / Concern	OK / Concern	OK / Concern	OK / Concern	OK / Concern	
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	OK / Concern	OK / Concern	OK / Concern	OK / Concern	OK / Concern	

4 The Within-Reach Zone

Everything your parent needs without getting up

If your parent cannot reach something they need, they will eventually try to get it themselves. That is when falls happen. This section helps you build a personalized arm's-reach setup before your parent arrives.

Personalized Within-Reach Inventory

Think through your parent's specific habits and needs. What do they reach for most often? What would they need if you stepped out for 30 minutes?

Item	In Place?	Location / Notes
Call bell or baby monitor		
Water with straw		
Phone or tablet		
TV remote		
Bedside lamp control		
Medications (if appropriate)		
Tissues		
Snack or small food item		
Reading glasses		
Book, magazine, or tablet		
Pen and notepad		
Other:		
Other:		

Overbed Table Setup Notes

What will you keep on the overbed table, and how will it be organized?

Bedside Supply Cart — What to Stock

Your supply cart should hold everything you need to provide care without leaving the room. Check off what you have stocked and add anything specific to your parent's situation.

■ Disposable gloves (correct size)	■ Barrier cream / zinc oxide
■ Wet wipes / no-rinse cleansing cloths	■ Incontinence products (briefs, pads)
■ Spare fitted sheet	■ Spare waterproof mattress pad
■ Hand sanitizer	■ Small flashlight or headlamp for nighttime
■ Wound care supplies (if applicable)	■ Medication schedule printout
■ Positioning wedges / foam	■ Extra blanket or lightweight throw

5

Caregiver Schedule & Sustainability

Your health is part of the care plan — not separate from it

This is the section most caregivers skip — and it is the one that matters most for the long term. A burned-out, injured caregiver cannot provide care. Your schedule, your sleep, and your body mechanics need to be planned with the same care as your parent's.

My Daily Caregiving Schedule

Map out a realistic daily routine. Include care tasks, your own meals, rest, and anything you need to maintain outside the home. Build in transition time — caregiving tasks almost always take longer than expected.

Time Block	Care Task or Activity	Who	Notes
6:00 – 8:00 AM			
8:00 – 10:00 AM			
10:00 AM – 12:00 PM			
12:00 – 2:00 PM			
2:00 – 4:00 PM			
4:00 – 6:00 PM			
6:00 – 8:00 PM			
8:00 – 10:00 PM			
Overnight			

Caregiver Self-Assessment — Answer honestly

What is the biggest physical challenge you are anticipating with this caregiving role?

What time of day will be hardest for you? What can you do to prepare for it?

Who else can help — even occasionally — with repositioning, personal care, or overnight coverage?

What is your plan for a break during the day? Even 20 minutes matters.

Respite care is not a luxury — it is a medical necessity for sustainable caregiving. Research local respite options now, before you need them urgently. Ask the hospital social worker for a referral before your parent is discharged.

6

Emergency Information & Safety

Post this section in the care room — anyone entering should find it immediately

In an emergency, you should not have to think about where this information is. Fill out this section completely and post a printed copy on the wall or door of the care room.

Emergency Contacts

Name	Relationship / Role	Phone	When to Call
	Primary Caregiver		First contact
	Secondary Caregiver / Family		If primary unavailable
	Primary Care Physician		Non-emergency health questions
	Home Health Agency		Care coordination
	Home Health Nurse		Direct nurse contact
	Pharmacy		Medication questions
	Neighbor / Local Friend		Backup / emergency presence

Patient Medical Summary — For emergency responders

Patient full name:

Date of birth:

Primary diagnosis:

Secondary conditions:

Known allergies:

Blood type (if known):

Current medications:

(list on next page if more space needed)

DNR / Advance Directive in place?

Location of document:

Insurance:

Member ID:

Home Address for Emergency Responders

Full address including unit number and any access code:

Nearest cross street or landmark:

Post this completed page — or a clean copy of it — visibly in the care room. If a visiting nurse, aide, or neighbor ever needs to call 911, they should be able to read the address and patient information immediately without searching.

Your care team, appointments, and questions in one place

You do not have to figure any of this out alone. A strong professional support team around your parent — and around you — makes everything more manageable. Use this section to organize who is involved, when they are coming, and what you need to ask them.

Care Team Directory

Role	Name	Agency / Practice	Phone	Visit Frequency
Primary Care Physician				
Home Health Nurse (RN)				
Occupational Therapist				
Physical Therapist				
Home Health Aide				
Social Worker				
Wound Care Nurse (if applicable)				
Hospice Coordinator (if applicable)				

Appointment Tracker

[illegible]

Questions to Ask the Occupational Therapist at the Home Visit

An OT home visit — ideally before or within the first week of your parent's arrival — is one of the most valuable steps you can take. Write your questions here before the visit.

8

Medication Log

Keep this current and accessible to every caregiver

Every person who provides care for your parent needs access to an accurate, current medication list. Update this page whenever medications change. Keep a copy in the care room and one with the primary caregiver.

Medication Name	Dose	What It's For	Time(s) Given	With Food?	Prescribing MD

Allergy & Reaction Log

Substance / Medication	Reaction	Severity	Noted By / Date

Notes

Use this space for observations, changes, and questions

Notes (continued)

Use this space for observations, changes, and questions

You Are Not Doing This Alone

What you are doing for your parent takes more courage and love than most people will ever fully understand. Getting the room right is a form of that love — and so is asking for help, taking a break, and protecting your own health so you can keep showing up. This workbook is a companion to the free article and checklist available at [SeniorSafetyAdvice.com](https://seniorsafetyadvice.com). If you have questions about your specific situation, consider requesting an occupational therapy home visit or reaching out to an aging-in-place specialist through [AgingInPlaceDirectory.com](https://aginginplacedirectory.com).

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