

MENTALLY - How clear, focused, or overwhelmed do I feel?

EMOTIONALLY - How am I really doing?

☐ Other

How Much Time Am I Spending Caregiving?

Part of Day / Task	Approx. Time	Notes

What Has Changed in My Life?

Sleep

Work / responsibilities

Family and friends

Exercise / activity

Hobbies and personal time

The change that has been hardest for me

What signs tell me I'm carrying too much?

- ☐ I'm exhausted most days
- ☐ I'm not sleeping enough
- ☐ I'm neglecting my own appointments
- ☐ I rarely have time alone

- ☐ I'm increasingly frustrated
- ☐ I feel like everything depends on me
- ☐ I've stopped doing things I enjoy
- ☐ I don't know whom to ask for help

“I Should Be Able to Handle This”

What am I expecting myself to do?

Would I expect another caregiver to do all of this alone?

What could be shared?

What could wait?

What could be simplified?

Guilt & Taking Time for Yourself

What makes me feel guilty?

What do I think will happen if I take time away?

Who could provide help?

What would I do with two free hours?

What would I do with half a day?

Something I could ask for help with now:

Who Could Help?

Person / Resource	What They Might Help With	Contact / Next Step

Make the Request Specific

A specific request is often easier to answer than a general “I need help.”

Help I need

Who I could ask

How I could ask

When I could ask

Divide the Work

Responsibility	Me	Person Receiving Care	Someone Else / Service

- ☐ Pharmacy pre-sorted medication packaging
- ☐ Prescription delivery
- ☐ Automatic refill programs
- ☐ Grocery delivery
- ☐ Meal delivery

- ☐ Automatic bill payment
- ☐ Shared family calendar
- ☐ Transportation assistance
- ☐ Home-care services
- ☐ Household help

Call 211 from a cell phone or landline to ask about local services and caregiver resources.

Respite Is a Resource

Respite care is temporary caregiving assistance that may give the primary caregiver time for rest, appointments, errands, work, family, or personal needs.

What kind of break would help me?

How often?

Who might provide it?

What do I need to investigate?

My Own Healthcare Matters

Appointments I need to keep

Medications / routines I need to manage

Sleep / activity / nutrition

Health concerns I've postponed

Something about my own health I need to stop putting off

Physical Demands of Caregiving

This workbook does not provide unsupervised lifting or transfer techniques. Ask the appropriate professional for training.

What tasks are physically demanding?

What feels unsafe?

What equipment or training might help?

What should I ask a healthcare or rehabilitation professional?

Sleep & Overnight Care

How often is my sleep interrupted?

What responsibilities occur overnight?

Could responsibilities be shared?

Is there something healthcare professionals should know?

What could improve the nighttime routine?

My Life Outside Caregiving

Something that is mine

Something I miss

Something I want back in my week

A person or activity I want to reconnect with

My Support People

Person / Resource	How They Support Me	Contact

When the Current Arrangement Isn't Working

What's not working?

How long has it been difficult?

What cannot continue this way?

Who should be involved in the conversation?

What's the next step?

My Caregiver Support Plan

I Need Help With	Person / Resource	How Often	When I'll Ask

Weekly Caregiver Check-In

Mental

Physical

Emotional

What drained me?

What helped me?

What could someone else do?

What does the person I care for need?