|  |
| --- |
| Caregiving Checklist |
| Caregiving Task Hours Per Week Who Can Help |
| In-Home Supervision / Companionship |  |  |
| Meal Planning |  |  |
| Grocery Shopping |  |  |
| Meal Preparation |  |  |
| Dishwashing / Kitchen Cleanup |  |  |
| Bathing |  |  |
| Other Personal Hygiene (care of skin, mouth, hair, nails, etc.) |  |  |
| Scheduling Medical Appointments |  |  |
| Managing Medications |  |  |
| Coordinating In-Home Care |  |  |
| Hands-On Medical Treatments / Exercise |  |  |
| Medical Recordkeeping |  |  |
| Transportation for: |  |  |
| Medical Appointments |  |  |
| Support Groups and Counseling |  |  |
| Shopping and Errands |  |  |
| Rest & Relaxation / Recreation Activities for: |  |  |
| The person who is ill |  |  |
| The primary caregiver |  |  |
| Family members / visitors |  |  |
| Child Care |  |  |
| Elder Care |  |  |
| Pet Care |  |  |
| Laundry |  |  |
| House Cleaning / Trash Removal, etc. |  |  |
| Home Maintenance and Repairs |  |  |
| Yard Care & Gardening |  |  |
| Banking |  |  |
| Paying Bills and Financial Recordkeeping |  |  |
| Managing Insurance Claims |  |  |
| Handling Legal Matters |  |  |
| Securing Government and Community Services |  |  |
| Care Team Meetings / Dinners |  |  |
| **TOTAL HOURS PER WEEK:**  |

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