

RightConversationsSM Family Action Planner

Use the Family Action Planner to organize tasks that need to be delegated to either family members or to service providers.

Immediate Emergency Dial 9-1-1

Medical Emergency Contact Information

Dr.	Address:	
<input type="text"/>	<input type="text"/>	
City, State, ZIP Code:	Phone:	Email address:
<input type="text"/>	(<input type="text"/>) <input type="text"/>	<input type="text"/>

Hospital Contact Information

Hospital Name:	Address:	
<input type="text"/>	<input type="text"/>	
City, State, ZIP Code:	Phone:	Email address:
<input type="text"/>	(<input type="text"/>) <input type="text"/>	<input type="text"/>

Pharmacy Contact Information

Pharmacy Name:	Pharmacist:	Address:
<input type="text"/>	<input type="text"/>	<input type="text"/>
City, State, ZIP Code:	Phone:	Email address:
<input type="text"/>	(<input type="text"/>) <input type="text"/>	<input type="text"/>

Elder Law Attorney Contact Information

Name of Attorney:	Name of Law Firm:	Address:
<input type="text"/>	<input type="text"/>	<input type="text"/>
City, State, ZIP Code:	Phone:	Email address:
<input type="text"/>	(<input type="text"/>) <input type="text"/>	<input type="text"/>

Church Contact Information

Name of Pastor/Priest:	Name of Church:	
<input type="text"/>	<input type="text"/>	
Religious Denomination:	Address:	
<input type="text"/>	<input type="text"/>	
City, State, ZIP Code:	Phone:	Email address:
<input type="text"/>	(<input type="text"/>) <input type="text"/>	<input type="text"/>

Social Worker's Emergency Contact Information

Name:	Address:	
<input type="text"/>	<input type="text"/>	
City, State, ZIP Code:	Phone:	Email address:
<input type="text"/>	(<input type="text"/>) <input type="text"/>	<input type="text"/>

Geriatric Care Manager's Emergency Contact Information

Name:	Address:	
<input type="text"/>	<input type="text"/>	
City, State, ZIP Code:	Phone:	Email address:
<input type="text"/>	(<input type="text"/>) <input type="text"/>	<input type="text"/>

Needs Assistance With	Description of the Task to Be Performed	Primary Person	Back-up Contact
<p>Lawn Work</p> <p>Lawn work can include lawn care during the summer and winter months. If you are not able to perform this task yourself, perhaps you could locate resources to assist in this area.</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Name: _____</p> <p>Address: _____</p> <p>City, State, ZIP Code: _____</p> <p>Phone: _____ () _____</p>	<p>Name: _____</p> <p>Address: _____</p> <p>City, State, ZIP Code: _____</p> <p>Phone: _____ () _____</p>
<p>Financial Management</p> <p>Financial management can include balancing the household budget and making sure there are enough funds to cover expenses. If you are not able to perform this task yourself, perhaps you could locate resources to assist in this area.</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Name: _____</p> <p>Address: _____</p> <p>City, State, ZIP Code: _____</p> <p>Phone: _____ () _____</p>	<p>Name: _____</p> <p>Address: _____</p> <p>City, State, ZIP Code: _____</p> <p>Phone: _____ () _____</p>
<p>Meal Preparation</p> <p>Meal preparation can include planning meals and talking with a dietitian about the nutritional needs of your loved one. If you are not able to perform this task yourself, perhaps you could locate resources to assist in this area.</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Name: _____</p> <p>Address: _____</p> <p>City, State, ZIP Code: _____</p> <p>Phone: _____ () _____</p>	<p>Name: _____</p> <p>Address: _____</p> <p>City, State, ZIP Code: _____</p> <p>Phone: _____ () _____</p>
<p>Housekeeping</p> <p>Housekeeping can include assisting with household chores or cleaning and assisting with organizing the home. If you are not able to perform this task yourself, perhaps you could locate resources to assist in this area.</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Name: _____</p> <p>Address: _____</p> <p>City, State, ZIP Code: _____</p> <p>Phone: _____ () _____</p>	<p>Name: _____</p> <p>Address: _____</p> <p>City, State, ZIP Code: _____</p> <p>Phone: _____ () _____</p>
<p>Medications</p> <p>Assisting with medications can include organizing and keeping records of medications for your loved one. If you are not able to perform this task yourself, perhaps you could locate resources to assist in this area.</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Name: _____</p> <p>Address: _____</p> <p>City, State, ZIP Code: _____</p> <p>Phone: _____ () _____</p>	<p>Name: _____</p> <p>Address: _____</p> <p>City, State, ZIP Code: _____</p> <p>Phone: _____ () _____</p>
<p>Personal Care</p> <p>Personal care may mean that you assist with bathing, dressing and grooming -- everything involved in getting your loved one ready for the day. If you are not able to perform this task yourself, perhaps you could locate resources to assist in this area.</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Name: _____</p> <p>Address: _____</p> <p>City, State, ZIP Code: _____</p> <p>Phone: _____ () _____</p>	<p>Name: _____</p> <p>Address: _____</p> <p>City, State, ZIP Code: _____</p> <p>Phone: _____ () _____</p>
<p>Emergency Management</p> <p>This person would be responsible for emergency care or crisis management during times when action is required to manage caregiving-related crisis situations.</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Name: _____</p> <p>Address: _____</p> <p>City, State, ZIP Code: _____</p> <p>Phone: _____ () _____</p>	<p>Name: _____</p> <p>Address: _____</p> <p>City, State, ZIP Code: _____</p> <p>Phone: _____ () _____</p>