

# FAMILY & CAREGIVER TASK CHART

## Color Key:



**Independent**  
I can do this  
independently.



**Some Support**  
I may need help  
sometimes.



**Full Support**  
I need help  
every time.

Task / Activity	Green	Yellow	Red	Notes
Personal care (washing, dressing)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Preparing meals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Taking medication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Managing appointments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Transport/getting to places	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Household cleaning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Shopping for food/ essentials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Paying bills/managing finances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Using phone/computer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency situations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## How to Use This Chart

1. Review each task together and select the level of support needed
2. Add notes for clarity (e.g., "Needs help only with heavy lifting in shopping")
3. Revisit regularly as needs or circumstances change