OU2

What I Actually Do

A care handoff worksheet

This worksheet has two jobs, and the second one is the one people do not expect.

The first job is practical. If someone else is going to take over for a day, a weekend, or a week, they need to know what you know. Most of what you know has never been written down anywhere, because you learned it by living it.

The second job is recognition. One of the most common feelings in caregiving is *I do so much, and it is never enough.* Reassurance does not touch it. A filled-in page sometimes does, because it is the only place the whole of it exists at once.

> **How to use this**
>
> There is no right order and no need to finish it in one sitting. Many people fill it in over a week, adding things as they notice themselves doing them.
>
> Two columns appear throughout: why you do it that way, and whether someone else could. The first is where the skill lives. The second is where the help lives.
>
> Nothing is too small to write down. The small things are the point.

WHO THIS IS ABOUT

FILLED IN BY / DATE

SECTION 1

The Basics

What a substitute needs in the first five minutes, and what a paramedic needs in the first thirty seconds.

FULL NAME, DATE OF BIRTH, AND WHAT THEY LIKE TO BE CALLED

ADDRESS, AND ANYTHING ODD ABOUT GETTING IN (KEY, CODE, DOOR THAT STICKS)

CONDITIONS AND DIAGNOSES, IN PLAIN LANGUAGE

ALLERGIES AND ANYTHING THEY MUST NOT HAVE

PRIMARY DOCTOR AND PHONE

PHARMACY AND PHONE

INSURANCE, MEDICARE NUMBER, AND WHERE THE CARDS ARE

WHERE THE ADVANCE DIRECTIVE, POLST, OR DNR IS KEPT

WHO TO CALL FIRST, SECOND, AND THIRD

> **Medications**
> Most people already keep a list somewhere. Rather than copying it, note where it lives and whether it is current, then write down the part that is not on any list: the timing that matters, the one that has to be crushed, the one they will refuse if you hand it over the wrong way.

SECTION 2

A Day, Start to Finish

Walk through an ordinary day out loud and write it as it happens. Include the parts that feel too obvious to mention, especially those.

> **An example, so the “why” column makes sense**
>
> I check that the stove is turned off before I go to bed. Mom struggles with the knobs now, and the left one has always been hard to turn. It gives me peace of mind.
>
> That is not a chore and it is not anxiety. It is a working theory about a specific risk in a specific kitchen, and a countermeasure built around it. The why column is where that shows up.

MORNING

Time	What happens	Why it happens this way	Someone else?

AFTERNOON

Time	What happens	Why it happens this way	Someone else?

EVENING AND NIGHT

Time	What happens	Why it happens this way	Someone else?

NOT EVERY DAY

Weekly, monthly, and now and then. Bath day, pill sorting, the standing phone call, the refill, the appointment that repeats, the bill that comes due. These are the ones a substitute will miss entirely, because they did not happen on the day you explained things.

How often	What happens	Why it happens this way	Someone else?

SECTION 3

The Things Nobody Assigned Me

Not on the schedule. Not on any care plan. Things you started doing because you noticed something, and never stopped.

What I do	What I noticed that started it	Someone else?

Prompts, if the page is not filling: What do you check without thinking? What do you move, hide, unplug, or reposition? What do you say a certain way? What do you buy that nobody asked for? What do you watch for that would mean something is changing?

SECTION 4

When It Goes Sideways

The situations you have already learned to handle. Written down, they are the difference between a substitute who copes and one who calls you on your first afternoon off.

If this happens	What I do	Who to call, and when

THE THINGS THAT SETTLE THEM

A person, a song, a chair, a show, a phrase, a walk, a blanket, a time of day. Whatever reliably works.

THE THINGS THAT MAKE IT WORSE

Topics, names, noises, routines, times of day, and anything that reads as being managed.

SECTION 5

The Part That Is Not a Task

The work that never lands on a list because it does not look like doing anything. Tick what applies. Add your own at the bottom.

- ☐ I track medications, refills, and what runs out when.
- ☐ I schedule appointments and arrange how they get there.
- ☐ I sit in on appointments and translate afterward.
- ☐ I argue with insurance, or Medicare, or a billing department.
- ☐ I manage money, bills, or benefits that are not mine.
- ☐ I keep the household running: food, laundry, repairs, supplies.
- ☐ I watch for changes and decide what is worth a call.
- ☐ I decide, over and over, what to tell other family and how much.
- ☐ I absorb the moods, the repetition, and the same conversation again.
- ☐ I manage other people's feelings about what is happening.
- ☐ I plan ahead for things that have not happened yet.
- ☐ I hold the whole history in my head so nobody has to be told twice.
- ☐ I stay reachable, always, even when I am not on duty.
- ☐ I do not make plans I might have to cancel.

AND THE ONES THAT ARE ONLY MINE

> **If the substitute needs to know one thing from this page**
> Most of it cannot be handed over, and does not need to be for a few days. But tell them which of these you are still doing while you are away, so that you both know what "covered" actually means this time.

SECTION 6

Taking Stock

This is the part that is only for you. The substitute never needs to see it.

Things I do in a day	Things nobody assigned me	Things marked “someone else”

What surprised me about my own list

Something on here I have never told anyone I do

The one thing I would most want done my way while I am gone

Who I could actually ask, for which part

> **One last thing**
>
> If the list came out longer than you expected, that is the finding. Not that you should be doing less, and not that you have been doing it wrong. Only that the volume is real, it has never been visible from the inside, and it is now written down in your own handwriting.
>
> Caregiving is not a one-person job. It becomes one when nobody else can see what the job consists of.

OU2 is a caregiver support group from Religion Outside the Box. Meetings are the heart; the website is the archive. **ou2care.com**

Shared as a point of awareness, not a prescription. Use the parts that fit and ignore the rest.