

## **Exercise – Understanding Your Parents Needs and Preferences**

This exercise is designed to help you determine what you know and do not know about your parents needs and preferences. Determining this now will help you on the road of communicating more openly about your parents' future wishes to reduce your experience of burden, confusion, and guilt as a caregiver. Everyone has a different level of knowledge when it comes to the following information, so do not feel overwhelmed if you do not recall or have not addressed some of these areas with your parents.

### **Lifestyle: Personal Needs and Preferences**

1. What are your impressions as to what your parents desire for their lifestyle now and into the future? Do they wish to remain in their home? If so, are they willing and able to accept care and pay for it? Would they consider moving to a retirement or senior living community in the future?
2. Does one or both of your parents need help with personal care such as bathing, dressing, grooming, moving around the house, or eating?
3. Does one or both of your parents need assistance with household maintenance tasks such as cooking, cleaning, paying bills, or shopping?
4. Do your parents need assistance with heavy household chores such as mowing the lawn, shoveling snow, or washing windows?

### **Social Networks: Needs and Preferences**

1. Do your parents have visits by or go out to visit friends or relatives on a regular basis?
2. Are your parents involved in other social activities such as clubs, going out to dinner with friends, going to church, etc.?

## **Behaviors and Emotions: Needs and Preferences**

1. Has one or both of your parents experienced some loss recently (e.g., loss of a relative, friend; loss of physical abilities, etc.)?
2. Does one (or both) of your parents seem to be having memory changes such as forgetting information just told to him/her or repeating themselves?
3. Does one (or both) of your parents seem to be displaying behaviors that are different from usual behavior?

## **Medical Information**

Do you have a list of:

1. Your parents' physicians and contact information?
2. A list of their medical conditions and past surgeries?
3. A list of their current medications (including over-the-counter drugs) and drug/food allergies?
4. Your parents' advanced directives such as living wills?
5. Any special diet requirements due to medical conditions?

## **Financial and Legal Information**

1. Do you have a good understanding of your parents' financial status? Important areas include home ownership and value, income from various sources, savings, and other investments.
2. Do your parents have a will? Do you know the location of the will?

3. Do you have information about your parents' attorney, accountant, and insurance professional?
4. Do you know where your parents keep important documents such as social security numbers, insurance policies, financial information, house papers, safe deposit box information, and credit card information?
5. Who can pay their bills in an emergency? Who has a list of what's owned and what's due?

### **Current Services**

1. Are there any services currently being provided to your parents in their home?
2. What are those services being provided? How often are they provided? Is this help paid or unpaid?

### **Quality of Life**

1. Given what you know about your parents and their current situation, what is your general impression or opinion about their quality of life?
2. Is their current living arrangement safe?
3. Does it seem they need more care?
4. Do they seem to have access to social resources or do they seem isolated?