Navigate
Dementia Care

A 30-DAY PLAN FOR FAMILY CAREGIVERS

Start Here, Not Everywhere

Your first 30 days after a dementia diagnosis, or the signs of one.

ONE WEEK AT A TIME

1	2	3	4
Get answers and protect what can't wait	Medical access, money, and the daily plan	Bring the family in	Review, adjust, and keep going

You're not alone in this, and you don't have to solve everything today.

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For education only. Not legal, financial, or medical advice.

Start here

Something has changed with someone you love, and it's a lot to take in. You're not alone in this, and you don't have to solve everything today. This plan is the first step of the calm, confident caregiving pathway that begins with stability.

FROM MY FAMILY TO YOURS

For the last eight years, I've been a co-caregiver with my family for my father, who has Alzheimer's. Our first year was full of overwhelm, grief, scattered information, and zero help. A first 30 day guide like this would have made a real difference for us. So, from one caregiver to another: you don't have to tackle everything at once. I hope this helps ease the overwhelm, build your confidence, and give you a sturdy foundation for what's ahead.

In 30 days, you can go from "I don't know where to start" to a written plan, the right papers in place (or at least in motion), and help that doesn't all fall on you. And to keep you from becoming overwhelmed, **you do it one week at a time**.

This plan is for you if:

- Your loved one was just diagnosed with Alzheimer's or another type of dementia, or
- You're noticing changes (repeated questions, missed bills, getting lost, personality shifts) and there's no diagnosis yet.
- No diagnosis yet? Don't wait for one to start. Week 1 begins with getting a proper evaluation.

How to use it

- Work one week at a time. Each week has a few actions and a short check-in.
- Didn't finish something? Carry it into next week with a new date. Progress counts more than perfect.
- Share it. Give a copy to anyone helping so everyone works from the same plan.

BEFORE YOU BEGIN

This plan is for education only. It is not legal, financial, or medical advice. Use it to get organized and to prepare good questions for the professionals who can advise on your situation.

Legal: Power of attorney and healthcare directive rules differ by state. Talk with a licensed elder law attorney before anyone signs anything. **Money and benefits:** Medicare, Medicaid, and benefit rules change and vary by state. A free Medicare counselor (SHIP) or a qualified financial advisor can help. **Medical:** Every care decision belongs with your loved one's doctors and care team.

Your 30 days at a glance

Four weeks, a few actions each week. Here's what "done" looks like for each one.

1 **Get answers and protect what can't wait**
Done when the doctor visit is booked, legal papers are checked, and the biggest safety risk is handled.

2 **Medical access, the money picture, and the daily care plan**
Done when HIPAA forms are on file, the medication list is done, and the care plan is written down.

3 **Bring the family in**
Done when one task is handed off, and the first family or caregiver check-in is held.

4 **Review and adjust**
Done when you know what's in place, what's still open, and what's next.

WHAT CAN WAIT

- Choosing a memory care community
- Learning every stage of dementia
- Building a five-year budget

These all come later. You'll make those decisions better with this foundation in place.

Here's your next step: turn to Week 1 and book that doctor visit.

WEEK 1

Get answers and protect what can't wait

Some things have a closing window. Your loved one may be able to sign legal papers today and not in a few months. A good evaluation can also catch treatable problems that look like dementia. Start here.

1. Get (or confirm) the diagnosis

- **No diagnosis yet?** Book a visit with their primary care doctor and ask for a cognitive assessment. Medicare Part B covers a separate visit to assess memory and thinking, confirm a diagnosis, and build a care plan (medicare.gov).
- Ask the doctor to rule out treatable causes, such as medication side effects, thyroid problems, low vitamin B12, and depression (helpguide.org).
- Before the visit, write down three to five changes you've noticed, with an example and roughly when each started.
- **Already diagnosed?** Ask which type of dementia it is, start a conversation about possible medications that can change progression or mitigate symptoms, and what to expect over the next year. **NOTE**: Keep in mind there are multiple types of dementia, and they are not typically treated the same or have the same progression path.

IF THEY PUSH BACK ON GOING, TRY SAYING

"Let's get a checkup to rule a few things out. Many things affect memory, and some are easy to fix."

ONE EXCEPTION TO "TAKE IT SLOW"

If confusion comes on suddenly, over hours or days, get medical help right away. Sudden changes can be delirium, a medical emergency often triggered by an infection or a medication (ummhealth.org).

2. Check the legal papers while they still have a voice

These are the documents families most often review with an attorney. Which ones fit your family, and how they work in your state, is a question for that attorney.

Document	What it does	In place? Circle one
Durable financial power of attorney (POA)	Names who can handle money, bills, and accounts	Yes · No · Not sure
Healthcare POA	Names who can make medical decisions	Yes · No · Not sure
Advance directive (living will)	Records their wishes for medical care and end-of-life wishes	Yes · No · Not sure
HIPAA authorization	Allows doctors to share information with you and/or other authorized caregivers	Yes · No · Not sure
Will or trust	Says what happens to their assets and property	Yes · No · Not sure

Anything marked No or Not sure? An elder law attorney can tell you what applies in your state.

A GOOD FIRST QUESTION FOR THE ATTORNEY

"Can my loved one still make thoughtful decisions on their wishes, are they still capable of signing these documents, and how soon can we meet?"

GOOD TO KNOW BEFORE MONEY CHANGES HANDS

Timing matters, so it's worth speaking with an attorney first. In most states, Medicaid reviews five years of transfers when someone applies for long-term care, and gifts can delay coverage (medicaidlongtermcare.org).

3. Handle the biggest safety risk

Pick the one that worries you most right now. Take one concrete step on it this week. You don't have to fix everything at once.

☐ **Driving:** Ask their doctor if driving is still safe. It's a process, so start the conversation now.
☐ **The stove:** Remove or cover the knobs when it's not in use.
☐ **Medications:** Move all medicines to a secure spot and watch for missed doses.
☐ **Wandering:** Get an ID bracelet with your phone number on it. Apple AirTags are also helpful.
☐ **Scam calls and money:** Limit their access to credit cards and cash. Also, monitor cell phone calls.

Week 1 worksheet

Week of: _____

Fill this in as you go. Anything unfinished carries into Week 2 with a new date.

Action	Who's Responsible	Next step	Complete By	Done
Doctor visit or diagnosis follow-up				
Legal papers (Financial and Healthcare POAs, Advanced Directive, HIPAA, Will/Trust)				
Biggest safety risk				

Week 1 check-in

What got done this week?

What carries into Week 2, and by when?

Did anything change with my loved one that shifts my priorities?

How am I doing? Who or where can I get support from?

WEEK 2

Medical access, the financial picture, and the daily care plan

This week gets you the information you need and gets the daily routine out of your head and onto paper.

1. Make sure doctors can talk to you

- Give a signed HIPAA authorization to each of your loved one's doctors and their pharmacy. Ask the office to confirm it's in the chart or in the portal.
- Make one medication list: every prescription, over-the-counter pill, vitamin, and supplement, with doses. Keep copies in your phone, your wallet, and at both your and your loved one's home.
- Before the next appointment, write down the one question that must be answered. Bring the list of any physical, mental, or behavioral changes, with an example, and the general date you noticed the change.

IF AN OFFICE WON'T SHARE INFORMATION, TRY SAYING

"I'm not speaking for them. I need to be in the loop so I can help them follow the plan and ensure their safety."

2. Get a rough money picture

This week is about a rough picture: what's coming in, what's going out, and where the gaps are.

- **Know this early:** Medicare doesn't pay for long-term custodial care, the everyday help with bathing, dressing, and meals that dementia care eventually needs (medicare.gov). Most families pay for it out of pocket, through long-term care insurance, or through Medicaid.
- Find out if they have long-term care insurance, a pension, or veteran's benefits.
- Book a free call with a SHIP Medicare counselor to understand their coverage (shiphelp.org).
- Ask your local Area Agency on Aging about respite programs and Medicaid waivers in your state (HHS.gov state aging resources).

3. Write the daily care plan

Write down your loved one's normal day: meals, medications, appointments, driving, naps, exercise, bills, and who handles each. Mark every block where you're the only person who can cover that activity. Those blocks are where burnout starts, and they're what you'll bring to your family in Week 3.

Add one page about who your loved one is. Capture it with them while they can still tell you. Future aides, doctors, and family will rely on it.

Who they are

Name: _____

Daily routines

Favorite foods, activities, music, and their former job (if they worked)

What calms them

What upsets them

One habit to try this week: reassure or redirect instead of correct

Arguing facts usually leads to frustration on both sides. Try reassurance or redirection instead.

Instead of	Try
"Don't you remember?"	**"I'm here with you."**
"You already asked me that."	**"Good question. It's at 3 o'clock."**
"That's not true."	**"That sounds upsetting. Tell me more."**

Week 2 worksheet

Week of: _____

Fill this in as you go. Anything unfinished carries into Week 3 with a new date.

Action	Who's Responsible	Next step	Complete By	Done
HIPAA forms to each doctor and pharmacy				
Medication list				
Financial picture and calls with SHIP and/or local agency on aging				
Daily care plan and "who they are" page				

Week 2 check-in

What got done this week?

How many care blocks are mine alone? Which one could someone else take?

What carries into Week 3, and by when?

WEEK 3

Bring in the family

This is the week most caregivers put off. The tasks aren't hard, but the conversations are. If it feels awkward or contentious, that's normal. But a plan only you know about is still a plan only you carry.

You're sharing a structure that replaces an often unspoken, uneven arrangement. Clear asks help everyone, including family members who aren't sure how to help, because now they know what's needed.

NO SIBLINGS OR FAMILY WHO WON'T ENGAGE?
The same steps work with a friend, a neighbor, your faith community, or paid help. Your local Area Agency on Aging can point you to options nearby.

1. Share the plan

Send your care plan and the blocks only you cover to siblings or anyone else who should help. A call or video chat works better than a long text.

TRY SAYING
"I've written down everything Dad needs each week. No one can do all of this alone. Can you look at this and tell me which piece you can take?"

2. Hand off one thing

One specific task needs a clear owner. Good, easy first handoffs are: refilling prescriptions, paying a bill(s), a weekly phone call, or one appointment a month. People who live far away can still handle calls, paperwork, and research.

IF SOMEONE SAYS NO
"Okay. What could you do instead?" **Then stop and wait for an answer**.

3. Hold the first family check-in

Keep it to 20-30 minutes. Same three items every time: how your loved one is doing, what's coming up, and who's doing what by when. If you need to cover something else, either add it to the agenda or note it for next time.

4. Start a shared decision log

One shared note or document with the date, the decision, and who made it. It cuts down on repeat arguments and "nobody told me."

Week 3 worksheet

Week of: _____

Action	Who's Responsible	Next step	Complete By	Done
Share the plan with family				
Hand off one task (to whom?)				
First family check-in scheduled and held				
Start the decision log (where?)				

Week 3 check-in

What got done this week?

What pushback came up, and how did I handle it?

What carries into Week 4, and by when?

WEEK 4

Review, adjust, and keep going

You made it! There are no new tasks this week. Look back at the last three weeks, see what's in place, identify anything outstanding, and decide what comes next and when it will be completed.

Your 30-day review

Area	What's in place now	What's still open	Next step and date
Diagnosis and medical			
Legal papers			
Financials and benefits			
Daily care and safety			
Family and help			
Me			

Look at what's different

A month ago, you were running on worry and guesswork. Now you have answers in motion, papers in hand, a written plan, and at least one thing off your plate. Plus, if there's an emergency or urgent decision, you have the legal, financial, and healthcare documents ready. You did that alongside everything else in your life. That's real progress, and it's worth noticing.

The caregiving doesn't end at 30 days. But caring with a plan feels very different from caring on uncertainty and adrenaline.

Your monthly check-in

Month: _____

15 minutes, on the first of each month. Print a fresh copy of this page each time.

- ☐ Any changes in my loved one since last month?
- ☐ Legal or financial items to update?
- ☐ Upcoming appointments or medication changes?
- ☐ Does the daily care plan still work?
- ☐ Did the family check-in happen? Is the decision log current?
- ☐ Am I okay at this pace? If not, what's the one change that would help most?

Your contacts

Role	Name	Phone or best contact	Notes
Primary care doctor			
Specialist (neurologist, geriatrician)			
Pharmacy			
Elder law attorney			
Area Agency on Aging			
Home care or backup help			
Family member			
Family member			

Decision log is kept at: _____

Family check-in schedule: _____

Free help you can call this week

Alzheimer's Association 24/7 Helpline

800-272-3900

Questions about any type of dementia, care decisions, local programs, and emotional support. Any day, any hour.

Eldercare Locator

1-800-677-1116

Finds your local Area Agency on Aging for home care, respite, meals, and caregiver programs. eldercare.acl.gov

SHIP Medicare counseling

shiphelp.org

Free, unbiased help understanding Medicare coverage and costs.

Medicare cognitive assessment visit

medicare.gov

What Medicare covers for a memory evaluation and care plan.

Sources

- Medicare.gov, Cognitive assessment and care plan services: medicare.gov/coverage/cognitive-assessment-care-plan-services
- Medicare.gov, Long-term care: medicare.gov/coverage/long-term-care
- HelpGuide, What's causing your memory loss?: helpguide.org/aging/dementia/whats-causing-your-memory-loss
- UMass Memorial Health, What is delirium?: ummhealth.org/health-library/what-is-delirium
- MedicaidLongTermCare.org, Medicaid's look-back period: medicaidlongtermcare.org/eligibility/look-back-period
- Alzheimer's Association, 24/7 Helpline: alz.org/help-support/resources/helpline
- Eldercare Locator, Contact information: eldercare.acl.gov
- NCOA, State Health Insurance Assistance Program: ncoa.org/article/state-health-insurance-assistance-program

Phone numbers and program details checked October 2026. Confirm with each organization before you call.

Let's take this one step at a time.

More caregiver-first guides at navigatedementiacare.com

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