



# Caught in the Middle?

## A Maine Sandwich Generation Planning Worksheet

For families caring for aging parents while also supporting children, college students, or young adults.

Use this worksheet to identify what is already in place, what needs attention, and what conversation should happen next.

### 1. Who Are You Helping?

#### Aging Parent or Older Loved One

Name Phone Main Concern Right Now

Current concerns:

- Medical appointments
- Bills or finances
- Safety at home
- Medications
- Driving
- Memory changes
- Housing or long-term care
- Other: \_\_\_\_\_

#### Child, College Student, or Young Adult You Support

Name	Age	Support You Currently Provide

Examples: tuition, rent, transportation, insurance, college paperwork, first apartment, budgeting, medical coverage, or everyday expenses.

## 2. Key Documents to Check

For your aging parent or loved one, check what is already in place.

Document	In Place?	Location / Who Has Copies?
Health Care Power of Attorney / Advance Directive	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
Financial Power of Attorney	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
Will	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
Trust, if needed	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
HIPAA Release / Medical Information Authorization	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
Beneficiary Designations	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	

What needs to be found, created, or updated?

---



---



---

## 3. Who Can Step In if Help Is Needed?

Role	Name	Phone
Medical decision-maker		
Backup medical decision-maker		
Financial or practical helper		
Backup financial helper		
First emergency contact		

## 4. Conversation Starters

Choose one or two questions to begin.

Question	Ask This?
Where do you keep your important documents?	<input type="checkbox"/>
Who would you trust to make medical decisions if needed?	<input type="checkbox"/>
Who would you trust to help with finances if needed?	<input type="checkbox"/>
Would you want to stay at home as long as possible?	<input type="checkbox"/>
What kind of care would you want if your health changed?	<input type="checkbox"/>
Are there decisions you do not want family members to have to guess about?	<input type="checkbox"/>

**Best first question to ask:**

---

---

## 5. If Your Child Has Turned 18

Once a child turns 18, parents may still provide support, but legal authority changes.

Item to Consider	In Place?	Notes
Health Care Power of Attorney	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
HIPAA Release	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
Financial Power of Attorney	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
College information release / FERPA authorization	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
Emergency contact information	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	

**What may need attention?**

---

---

## 6. Do Not Forget Your Own Plan

If others rely on you, your own planning matters too.

Your Document	In Place and Current?	Notes
Health Care Power of Attorney	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
Financial Power of Attorney	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
Will or Trust	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
Beneficiary Designations	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
Emergency Contact List	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	

**If something happened to me, who would need to step in?**

---

---

## 7. Next Steps

Choose up to three priorities.

Possible Next Step	Priority?
Locate existing documents	<input type="checkbox"/>
Update old documents	<input type="checkbox"/>
Create or review powers of attorney	<input type="checkbox"/>
Review a will or trust	<input type="checkbox"/>
Review beneficiary designations	<input type="checkbox"/>
Talk with an aging parent	<input type="checkbox"/>
Talk with a young adult who has turned 18	<input type="checkbox"/>
Schedule a family meeting	<input type="checkbox"/>
Talk with an attorney	<input type="checkbox"/>

**My top three next steps are:**

1. \_\_\_\_\_
  2. \_\_\_\_\_
  3. \_\_\_\_\_
- 
- 
- 
- 
- 
- 
- 
- 

## **Need Help Planning Ahead?**

Aging in Maine helps families prepare for life’s transitions with practical, easy-to-understand legal planning.

**Call Aging in Maine at (207) 848-5600 to schedule a consultation.**

**Legal Disclaimer:** This material is for general informational purposes only and does not constitute legal advice. No attorney-client relationship is created by the use of this checklist. This checklist is not a substitute for legal counsel and should not be relied upon as a legal document.

Individuals seeking legally binding estate planning or incapacity planning documents should consult a licensed estate planning or elder law attorney in the State of Maine.