



# Home Safety Walk-Through

Walk each room slowly. Look down, not ahead. Tick each box once it is handled.

## Walkways and floors

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- ☐ Loose throw rugs removed, or taped flat on all edges
- ☐ Cords run along walls, not across walkways
- ☐ Clear lane from bed to bathroom and from chair to kitchen
- ☐ Nothing stored on stairs or floors (shoes, mail, baskets)

## Stairs and steps

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- ☐ Sturdy handrail on both sides, full length
- ☐ Light switch at the top and the bottom
- ☐ Edges of steps easy to see (contrast tape if needed)
- ☐ No loose carpet or worn treads

## Bathroom

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- ☐ Grab bars by the toilet and in the shower or tub
- ☐ Non-slip mat or strips in the tub or shower
- ☐ Night light on the route from the bedroom
- ☐ Towels and soap within reach without stretching

## Bedroom

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- ☐ Lamp or flashlight within reach of the bed
- ☐ Bed at a height where feet rest flat when sitting
- ☐ Phone within reach of the bed
- ☐ Clear path to the door



# Home Safety Walk-Through (continued)

## Kitchen

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- ☐ Everyday items between waist and shoulder height
- ☐ Sturdy step stool with a handle (no chairs)
- ☐ Spills wiped up right away
- ☐ Smoke alarm tested this month

## Entry and outdoors

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- ☐ Outside lights at every entrance
- ☐ Railings on outside steps
- ☐ Walkways clear of leaves, ice and hoses
- ☐ House number visible from the street for emergency crews

## You

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- ☐ Shoes or slippers with closed backs and non-slip soles
- ☐ Eyes checked in the last year
- ☐ Medicines reviewed with a doctor or pharmacist this year
- ☐ Stand up slowly and pause before walking

*Two things I would do first: tape down or remove loose rugs, and put night lights between the bedroom and the bathroom. — Alan*



# Home Safety: Tips and Fixes

Why it matters, what to fix first, and low-cost ways to do it.

## Why a walk-through is worth an afternoon

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About one in four adults 65 and older falls each year, and most falls happen at home, on ordinary days, doing ordinary things. The good news is that many of the causes are simple to spot and inexpensive to fix.

## Fix these first (biggest difference, smallest cost)

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- **Loose rugs:** remove them, or use double-sided rug tape on every edge. A curled corner is one of the most common trip hazards.
- **Night lights:** plug-in lights that switch on automatically in the dark, along the path from bed to bathroom.
- **Grab bars:** by the toilet and in the tub or shower. Towel bars and soap dishes are not built to hold your weight.
- **Clutter on floors and stairs:** give shoes, mail and baskets a home off the floor.
- **Stair rails:** a sturdy rail on both sides, running the full length.

## How to do the walk-through

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- Walk the route you actually take at night: bed to bathroom, chair to kitchen, front door to living room.
- Look down, not ahead. Most hazards are at floor level.
- Do it with a family member or friend. A second pair of eyes finds things you have stopped noticing.
- Tick each box only when it is done, and date the sheet. Repeat every spring and fall.

## Don't forget the person

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- **Shoes:** closed backs and non-slip soles, even indoors. Socks and loose slippers are slippery.
- **Eyes:** have your vision checked every year, and update glasses as needed.



# Home Safety: Tips and Fixes (continued)

- **Medicines:** some cause dizziness or drowsiness. Ask your pharmacist to review everything you take.
- **Get up slowly:** sit on the edge of the bed for a moment before standing.
- **Strength and balance:** gentle regular movement helps. Ask your doctor what is right for you.

**Help may be free or low-cost. Your local Area Agency on Aging can point you to home repair and safety programs. Find yours at [eldercare.acl.gov](https://eldercare.acl.gov) or 1-800-677-1116.**

*Sources and more help: CDC Older Adult Fall Prevention ([cdc.gov/falls](https://cdc.gov/falls)); National Institute on Aging ([nia.nih.gov](https://nia.nih.gov)); Eldercare Locator ([eldercare.acl.gov](https://eldercare.acl.gov)). This checklist is general information, not a professional home assessment. An occupational therapist can do a full assessment; ask your doctor.*