

APPENDIX G

HOME SAFETY CHECKLIST (ROOM-BY-ROOM)

Use this checklist to conduct a home safety assessment. Review every 3-6 months or after any fall or change in condition.

HOME SAFETY CHECKLIST

**Date of assessment:** \_\_\_\_\_

**Completed by:** \_\_\_\_\_

**ENTRYWAY AND HALLWAYS:**

- Rugs removed or secured with non-slip pads**
- Walkways clear of clutter, cords, and obstacles**
- Carpets and flooring in good repair (no curled edges or loose boards)**
- Adequate lighting (overhead lights and nightlights)**
- Light switches accessible at both ends of hallways**
- Handrails installed and secure (if needed)**
- Steps marked with bright tape (if applicable)**
- Entry doors are easy to open and close**
- Railing or grab bar near entry**
- Exterior steps are well-lit and have handrails**

**Notes/action items:** \_\_\_\_\_

**LIVING ROOM AND COMMON AREAS:**

- Furniture arranged for clear walking paths**  **Low tables and ottomans removed or relocated**

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- Furniture sturdy (no wheels)**
- Chairs the right height (not too low or soft)**
- Adequate lighting (lamps within easy reach)**
- Cords secured (not crossing walkways)**
- Phone or medical alert device within easy reach**
- Smoke alarms and carbon monoxide detectors are working**
- Fire extinguisher accessible**

Notes/action items: \_\_\_\_\_

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**BEDROOM:**

- Bed the right height (feet touch floor when sitting)**
- Bed rail or grab bar if needed**
- Clear path from bed to bathroom**
- Nightlight installed**
- Flashlight or lamp within reach of bed**
- Phone or medical alert device on bedside table**
- Rugs removed or secured**
- No clutter or cords between bed and bathroom**
- Chair available for dressing**

Notes/action items: \_\_\_\_\_

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**BATHROOM:**

- Grab bars missing**
- Grab bars installed in shower/tub (professionally installed)**
- Grab bar installed outside tub/shower**
- Grab bars installed next to the toilet**

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- Non-slip mat inside tub/shower**
- Shower chair or transfer bench (if needed)**
- Handheld showerhead**
- Raised toilet seat (if needed)**
- Water temperature set safely (not above 120°F)**
- Supplies within easy reach (no stretching)**
- Floor kept dry**
- Bath mat outside shower/tub**
- Nightlight installed**
- Door opens outward or can be removed easily**
- Medications stored safely (locked if needed)**

**Notes/action items:** \_\_\_\_\_

\_\_\_\_\_

**KITCHEN:**

- Spills cleaned immediately**
- Frequently used items within easy reach (no step stools needed)**
- Rugs removed or secured**
- Good lighting over work areas**
- Fire extinguisher accessible**
- Stove monitored when in use (or disabled if safety concern)**
- Cleaning supplies separated from food (locked if needed)**
- Expired food is discarded regularly**

**Notes/action items:** \_\_\_\_\_

\_\_\_\_\_

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**STAIRS AND OUTDOOR AREAS:**

- Handrails on both sides of the stairs**
- Stairs well-lit (switches at top and bottom)**
  - Step edges marked with bright tape**
- Rugs or runners removed or secured**
- Stairs free of clutter**
- Stairs in good repair (no loose boards)**
- Outdoor walkways are even and well-maintained**
- Walkways clear of ice, snow, leaves**
- Outdoor lighting adequate**  **Handrails on outdoor steps**
- Non-slip treads on steps**

**Notes/action items:** \_\_\_\_\_

**MEDICAL EQUIPMENT:**

- Equipment stored accessibly and safely**
- Equipment is clean and in good repair**
- Oxygen (if applicable) stored safely (away from heat, flames, secured)**
- Backup supplies available**

**Notes/action items:** \_\_\_\_\_

**EMERGENCY ACCESS:**

- Medical alert system installed and tested**
- Phone accessible in all major rooms**
- Important numbers programmed into phone**

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- Emergency information posted on refrigerator**
- House numbers visible from the street**
- Spare key with a trusted person**

**Notes/action items:** \_\_\_\_\_  
\_\_\_\_\_

**COGNITIVE SAFETY (if applicable):**

- Exterior doors locked or alarmed (if wandering risk)**
- Hazardous items locked up (firearms, chemicals, power tools)**
- Rooms and drawers labeled**
- Environment simplified (clutter reduced)**
- Stove disabled if unsafe**
- ID bracelet worn**

**Notes/action items:** \_\_\_\_\_

**SUMMARY:**

**Highest priority action items:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Next safety review date:** \_\_\_\_\_

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Follow the Laws of Protected Health Information (PHI)

45 CFR 160.103

**“Protected health information means individually identifiable health information transmitted or maintained in any form or medium.”**

