THE INSIDER'S HOME SAFETY CHECKLIST

The exact diagnostic tool and safety protocols used by professional Senior Care Specialists and Occupational Therapists.

A Message from Good Steward Senior Care

Most families believe home safety is about major, expensive renovations like installing chair lifts or widening doorways. In reality, over 80% of senior hospitalizations due to falls are caused by simple, overlooked everyday hazards that can be fixed in a single afternoon for less than $50.

This guide is designed to bypass the generic, obvious checklists you find online. It provides the exact, objective measurements and clinical insights used during our professional home safety consultations. By walking through your parent's home with this tool and a tape measure, you will identify hidden risks and create a structured, stress-free plan to keep them safe, independent, and comfortable at home.

How to Use This Walkthrough

1. Grab Clipboard & Tape

Do not guess. Walk through each room and physically measure bed heights, toilet heights, and walkway clearances.

2. Involve Your Parent

Complete this walkthrough with your parent present. Help them see physical hazards without feeling independence is threatened.

3. Priority Rating System

Mark each box status as:
[S] Safe - Meets standards
[N] Needs Attention - 1-4 weeks
[U] Urgent Risk - 48 hours

The Risk Level Priority Guide

When you finish your walkthrough, use this framework to triage your action items. Trying to fix 30 things at once causes caregiver burnout and parent resistance.

URGENT
Fix within 48 hours
Hazards highly likely to cause immediate fall/injury.
Examples: Loose rugs, dark stairs, loose grab bars, water >120°F.

HIGH
Fix within 2 weeks
Items that severely drain energy or cause constant strain.
Examples: Low toilets, soft deep sofas, overhead storage.

MEDIUM
Fix within 1 month
Upgrades that improve navigation & reduce strain.
Examples: Round knobs to levers, inadequate lighting.

LOWER
Plan for future
Major structural mods that can be budgeted.
Examples: Door widening for wheelchair, bedroom move.

INSIDER PRO-TIP: Bypassing Parent Defensiveness

The biggest obstacle isn't buying a grab bar—it's getting your parent to agree to use it. Change your language: **DO NOT** say *"I'm inspecting your house because I'm worried you'll fall."* **DO** say: *"A professional senior care specialist in DeSoto County shared this insider walkthrough. It's designed to make houses more energy-efficient and comfortable as we get older. Let's run through it together this weekend."*

LEGAL & ETHICAL DISCLAIMER: Good Steward Senior Care (a registered trade name of Good Steward Senior Solutions, LLC) is a non-medical consulting and care coordination service. We are not licensed occupational therapists, medical practitioners, or structural contractors. This checklist is an educational and informational planning tool, not a clinical diagnostic evaluation or medical/legal advice. All physical home modifications should be performed by a licensed, insured contractor to ensure safety and compliance with local building codes. The user assumes all liability for any physical changes made or not made to the residence.

ROOM-BY-ROOM WALKTHROUGH (BATHROOM & BEDROOM)

SECTION 1: THE BATHROOM

The bathroom is statistically the highest fall-risk location in the entire home. Over 80% of senior bathroom injuries occur during transfers (entering/exiting the shower or sitting/standing from the toilet).

- [ ] **The Inward-Swinging Door Check**

  Action: Does the bathroom door swing inward into the bathroom? Talk to a local contractor about installing double-acting hinges or reversing the door frame so the door swings outward into the hallway.

  > ***Professional Note:*** *If a senior falls, they collapse near the toilet/sink, wedging the door shut. Emergency rescuers won't be able to open the door without pushing against their body.*

- [ ] **The "Towel Bar Reflex" Pull Test**

  Action: Are there standard towel racks or toilet paper holders within arm's reach of the toilet, tub, or shower entry? Replace all standard towel bars and toilet paper holders with dual-purpose, weight-bearing grab bars rated for 250+ lbs, anchored directly into wall studs.

  > ***Professional Note:*** *In a slip, the brain instinctively grabs the nearest object. Towel bars are designed to hold 5 lbs of fabric, not a 150-pound adult.*

- [ ] **Grab Bar Placement & Weight-Bearing Integrity**

  Action: Are grab bars securely installed in key transition areas? Install vertical bars at shower/tub entrance; horizontal bars mounted 33-36 inches from floor inside shower; vertical or angled bars 6-8 inches from toilet front edge. Give them a firm, aggressive pull-test.

  > ***Professional Note:*** *Suction-cup grab bars are an extreme safety hazard. They can slide off tiled or textured surfaces without warning when weight is applied.*

- [ ] **Toilet Transfer Ease**

  Action: Measure toilet height. Is it between 17 and 19 inches? Can your parent stand without using arms or pushing off vanity? If under 17 inches, install a raised toilet seat with armrests (adds 3-5 inches, $30-$50) or replace with a comfort-height toilet.

  > ***Professional Note:*** *Low toilets put massive strain on weak knees, hips, and back muscles, leading to loss of balance.*

- [ ] **Flooring & Water Hazards**

  Action: Are there decorative, loose bath mats or rugs on the floor? Is water pooling after a shower? Remove all decorative bath mats. Replace with low-profile, non-slip rubber-backed mats taped down, or apply permanent high-traction non-slip adhesive strips.

  > ***Professional Note:*** *Throw rugs are the #1 physical cause of senior falls. Shuffling feet catch on the lip of the rug.*

- [ ] **Water Temperature & Scald Prevention**

  Action: Is the water heater set to 120°F or below? Test hot water for 1 minute at the sink. Check the thermostat dials on your parent's hot water heater and turn them down to exactly 120°F.

  > ***Professional Note:*** *Aging skin is thinner and loses temperature sensitivity. A senior can suffer severe third-degree burns in just 5 seconds in 140°F water.*

SECTION 2: THE BEDROOM

Most bedroom falls occur in the dark between 11 PM and 6 AM, when seniors wake up to use the bathroom while still in a semi-conscious, disoriented state.

- [ ] **The "Melatonin Meltdown" Nighttime Path**

  Action: Walk the path from bed to bathroom. Are there bright white or blue LED nightlights illuminating the path? Replace all standard nightlights with low-lying, motion-activated red or amber LED path lights plugged in near the floor.

  > ***Professional Note:*** *Blue/white light instantly stops melatonin production, waking up the brain and causing nighttime confusion (especially with dementia) and sleep disruption.*

- [ ] **Bed Transfer Height**

  Action: Measure bed height. Is it between 20 and 23 inches from floor to mattress top? Can they sit with feet flat on the floor and knees bent at a 90-degree angle? Adjust bed frame or mattress thickness as needed.

ROOM-BY-ROOM WALKTHROUGH (STAIRS, HALLWAYS & LIVING AREA)

SECTION 3: THE STAIRS

Stair falls are among the most dangerous. Even a single misstep can cause a life-altering injury. Ensuring proper lighting and high-contrast visual cues can prevent these accidents.

- ☐ **Handrail Continuous Extension**
  Action: Are there handrails on both sides of the stairs? Do they extend at least 12 inches past the top and bottom steps? Have a handyman install a second handrail so they can grip with both hands. Ensure handrails extend continuously past steps.
  > ***Professional Note:*** *Most stair falls happen on the very first or very last step because the senior loses their grip or thinks they have reached flat ground.*

- ☐ **The "Black Hole" Stair Edge Illusion**
  Action: Is there dark, patterned, or plush carpeting on the stairs? Apply a 1-inch strip of high-contrast, slip-resistant adhesive tape (black tape on light wood, or white on dark stairs) to the front edge of top and bottom steps.
  > ***Professional Note:*** *As eyes age, contrast sensitivity and depth perception decline. Busy carpet patterns make steps look visually flat.*

- ☐ **Stair Lighting & Visibility**
  Action: Are stairs adequately lit? Are light switches reachable at both top and bottom? Install bright overhead lighting and motion-sensor lights at top and bottom landings. Consider glow-in-the-dark or LED strip lighting on stair edges.
  > ***Professional Note:*** *Many seniors avoid stairs after dark or become disoriented. Good lighting is one of the highest-ROI safety investments.*

- ☐ **Stair Width & Obstructions**
  Action: Is the stairway at least 36 inches wide? Are there items stored on steps? Clear all clutter. Stairways must be completely free of any objects.
  > ***Professional Note:*** *36 inches is the minimum clearance required for safe navigation with a walker or for emergency responders.*

SECTION 4: THE HALLWAY

- ☐ **Hallway Width & Protruding Obstacles**
  Action: Is the hallway at least 36 inches wide? Are there side tables, floor plants, or frames protruding into the path? Remove all decorative furniture and floor plants. Walkways must be completely clear from wall-to-wall.
  > ***Professional Note:*** *36 inches is the minimum clearance required for a senior to navigate comfortably with a walker, wheelchair, or with emergency paramedics.*

- ☐ **Lighting Continuity**
  Action: Are hallways well-lit from end to end with no dark spots? Install continuous lighting or motion-activated lights that cover the entire hallway length. Add nightlights at both ends.
  > ***Professional Note:*** *Seniors often have reduced night vision. Dark hallways are a major source of disorientation and falls.*

SECTION 5: THE LIVING AREA

Living rooms are where seniors spend most of their daytime hours. Comfort must be balanced with structural support.

- ☐ **The "Rock-and-Roll" Sofa Check**
  Action: Are your knees positioned higher than your hips when sitting on the sofa? Do you have to rock back and forth to stand up? Ensure seating is firm, has sturdy armrests to push off of, and has a seat height of 18-20 inches (hips level with or slightly higher than knees).
  > ***Professional Note:*** *Deep, plush, soft sofas are 'transfer traps.' Hips drop below knees, eliminating leverage. Rocking causes loss of balance.*

Professional Assessment Guide

"What the Pros Look For That Families Miss"

As Senior Care Specialists, we look past the physical environment to observe behavioral patterns and environmental clues. These subtle indicators reveal when a senior's home is becoming unsafe long before a major fall occurs.

Mobility Red Flags (Behavioral Shifts)

- **"Wall-Cruising" or "Furniture-Holding":** Smudges/wear-marks on walls and doors showing they use walls for balance.
- **Unexplained Bruises:** Bruises on arms/legs indicate 'near-falls' or minor stumbles they are hiding.
- **The "Sofa Selection" Lock-In:** Avoiding low/soft chairs entirely because they lack the leg strength to stand.
- **Shuffling Gait:** Dragging or shuffling steps on hard floors. Tripping hazard on even tiny doorsills or rug edges.
- **Shift to Slip-Ons Only:** Swapping to loose slip-on shoes because bending to tie laces causes pain or dizziness.

Environmental Clues (System Declines)

- **Mail & Newspapers Piling Up:** Indicates difficulty walking to the mailbox safely, or cognitive overload from managing bills.
- **Spoiled or Expired Food:** Indicates they are struggling to cook, forgetting what they have, or experiencing sensory changes.
- **The "Shrinking World" Dust:** Heavy dust in unused upstairs/ guest rooms. They live in a shrunk footprint to avoid painful stairs.
- **Curtains Always Closed:** Seniors with cataracts or vision changes are highly sensitive to glare and close curtains.
- **Thermostat Anomalies:** Keeping house unusually hot (80°F+) or cold points to circulation issues or thermostat confusion.

When to Call for Professional Guidance

Identifying safety risks is step one. Taking action is step two. You should seek a professional consultation if:

1. Your parent has fallen two or more times in the past 6 months.
2. You identified eight or more "Needs Attention" or "Urgent" items during this walkthrough.
3. Your parent is recovering from a recent hospitalization.
4. You are a long-distance caregiver managing safety from out of state.
5. Siblings disagree on safety steps.

Schedule Your Free Senior Home Safety Consultation

Need expert guidance on your home safety assessment or senior living transition? We are here to help your family navigate the next steps with confidence.

- **Personalized Strategy:** Direct review of your walkthrough results with a Senior Care Specialist.
- **Actionable Guidance:** Tailored priority plan based on your family's unique situation and budget.
- **Zero Obligation:** Completely free, supportive advice for families in DeSoto County & virtually.

Claim Your Free Consultation Here

Action Plan & Emergency Ready Toolkit

YOUR PERSONALIZED SAFETY ACTION PLAN

Use this worksheet to assign responsibilities, track estimated costs, and set firm deadlines. Do not leave blank.

Priority Level	Room/Location	Required Action (The Fix)	Assigned To	Target Date	Est. Cost
URGENT (48 Hrs)	Bathroom	Remove loose rugs, turn water to 120°F	John (Son)	Saturday	$0.00
URGENT (48 Hrs)					
HIGH (2 Wks)	Stairs	Install second handrail, add contrast tape	Handyman	Oct 15	$150.00
HIGH (2 Wks)					
MEDIUM (1 Mo)	Doors	Swap round doorknobs to lever handles	John (Son)	Nov 1	$45.00
MEDIUM (1 Mo)					

THE "1-HOUR SATURDAY FIX" CHECKLIST (QUICK WINS)

- ☐ **1. The Water Heater Twist** (2 mins | Free): Locate water heater, turn dial down to exactly 120°F.
- ☐ **2. The Amber Light Swap** (5 mins | $15): Plug motion-activated amber/red nightlights in hall.
- ☐ **3. The Touch-Lamp Conversion** (5 mins | $10): Screw touch adapter in parent's bedside lamp.
- ☐ **4. The Stair-Edge Contrast** (15 mins | $12): Apply non-slip grip tape to top & bottom step edges.
- ☐ **5. The Rug Eviction** (10 mins | Free): Roll up all loose kitchen and hallway throw rugs and remove them.

EMERGENCY TOOLKIT: THE "VIAL OF LIFE" FRIDGE SHEET

First responders and EMTs are trained to look in one specific place for medical information during an emergency: the refrigerator door. Fill out this form, place it inside a clear Ziploc bag, and tape it to the front of your refrigerator.

Senior's Full Name: _____ **DOB:** _____

Primary Care MD: _____ **MD Phone:** _____

Preferred Hospital: _____ **Religion/Pref:** _____

Emergency Contact 1: _____ **Rel:** _____ **Phone:** _____

Emergency Contact 2: _____ **Rel:** _____ **Phone:** _____

Key Medical Conditions:

1. _____
2. _____
3. _____
4. _____

Current Medications & Dosages:

1. _____
2. _____
3. _____
4. _____

Known Drug Allergies: _____

Does this person have an active DNR order? [ ] YES [ ] NO