

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES  
PHOENIX AREA INDIAN HEALTH SERVICE  
OFFICE OF ENVIRONMENTAL HEALTH AND ENGINEERING  
DIVISION OF ENVIRONMENTAL HEALTH SERVICES

**FALL RISK SCREENING & HOME ASSESSMENT PROTOCOL**

**PURPOSE**

Injury is a major public health concern facing American Indian communities in the Phoenix Area Indian Health Service. Of particular concern are fall injuries among older adults (> 55 years). For American Indians/Alaskan Natives in the U.S from 1999-2018, falls account for 25% of the unintentional injury deaths among older adults (CDC WISQARS).

The Phoenix Area Injury Prevention program developed the following guidance documents to identify individuals at risk of falling, and to connect them to the appropriate services (e.g. preventative or clinical) and education.

**APPLICABILITY AND SCOPE**

This protocol is intended to provide Phoenix Area Division of Environmental Health (DEHS) staff and their tribal community partners with a tool to conduct fall risk screening and home safety assessments. It focuses on using CDC STEADI Fall Screening Questionnaire along with the Phoenix Area Home Safety Assessment Tool. An overview is depicted in the Home Fall Risk Assessment Process (APPENDIX A).

**PROCEDURES**

The Fall risk evaluation begins with a referral or request from a community partner or elder to DEHS staff or community partners involved with injury prevention. Once a referral/request is received, the following tools should be used:

**1. STEADI FALL RISK SCREENING**

- a. Conduct fall risk screening using the Home Fall Risk Assessment Tool (APPENDIX B). Screening can occur anywhere and by any method (i.e. phone, virtual or in-person).
  - i. Ideally, in-person at the home of the elder in combination with home safety assessment is encouraged.
  - ii. An optional on-line risk screening tool includes the National Council on Aging's Falls Free CheckUP: [https://ncoa.org/age-well-planner/assessment/falls-free-checkup?utm\\_medium=partner&utm\\_campaign=cdcfallsfree](https://ncoa.org/age-well-planner/assessment/falls-free-checkup?utm_medium=partner&utm_campaign=cdcfallsfree)
- b. Recommendation for preventative or clinical services are made depending on responses from the screening.
  - i. Elders At risk of falls, recommended to visit their medical provider for further assessment.
  - ii. Elders Not at risk of falls, recommend participation in local exercise gait and balance preventative services.
- c. A Home safety assessment is an available option for elders; it identifies recommended modifications in the home to reduce fall risk factors.
- d. A 30 – 90 day follow-up is recommended to assess progress of the assessed elder.

**2. HOME SAFETY ASSESSMENT**

- a. The Home Safety Assessment (APPENDIX B) is a service for the elders and caregivers; staff and tribal partners should make this service available as an option that identifies risk factors in the home that may lead to falls. It is also used to assign the level of risk in the rooms assessed. The assessment can be conducted by DEHS staff or tribal partners virtually or in-person (APPENDIX F). Assessments should be conducted at the elder's

home with consideration for community/elder preference and COVID transmission levels.

- b. The Home Risk Solutions List provides effective strategies to address area specific risk factors within the home. It should be provided to and reviewed with the homeowner, caregiver, elder, etc. (APPENDIX C).
  - i. Contact the appropriate tribal programs to discuss the findings and any potential funding for the identified solutions.

### **3. EDUCATION**

- a. The objective of the education is to increase awareness of fall risk factors, identify strategies to reduce the risks, and dispel some common beliefs about falls.
- b. The included materials can be shared with elders, caregivers and family members as a guide during fall risk screenings (APPENDIX D).

## **DATA SUMMARY AND REPORTING**

A letter should be developed to document findings and recommendations from the assessment. The letter should be provided to the appropriate tribal stakeholder(s). The areas in the home identified as higher risk should be referred to as a way for recipients and stakeholders to prioritize their mitigation efforts.

### **1. DATA SUMMARY**

- a. Enter findings into your District's fall assessment spreadsheet located on the O: Drive. Tribal partners using this protocol can either be provided a spreadsheet or provide the documentation to DEHS staff.

### **2. REPORTING**

- a. Results should be summarized and reported to Tribal stakeholders after the assessment. A template is included in this kit (APPENDIX E). Stakeholders may include:
  - Chairperson
  - Tribal Council
  - Housing Director
  - Health Director
  - Injury Prevention Program/Coalition
  - Elder Nutrition Program

## **GLOSSARY OF TERMS**

1. Good Repair – Stable and will not cause an individual to fall; maintained for intended purpose; or good condition
2. Transitions Strip – A metal, plastic or wood strip used to transition from one type of flooring to another
3. Slip Resistant – Material that does not allow a person to slip or fall (i.e, non-slip treads for decks or stairs, anti-slip paint additive, etc.)

# HOME FALL RISK ASSESSMENT PROCESS

## Referral/Request

Referral for screening may be provided by self, provider, or other program (i.e. Social Services, etc.)

### STEADI Screening Questions

1. Do you feel unsteady when standing or walking?
2. Do you worry about falling?
3. Have you fallen in the past year?
  - How many times?
  - Where have you fallen?

If NO to all of the screening questions

Screened NOT at Risk

**ASSESS** the home for fall risk.

- ✓ Conduct home assessment survey (optional)
- ✓ Identify home modification programs (if applicable)

**PREVENT** future risk by recommending effective prevention strategies.

- ✓ Exercise for gait and balance programs

**EDUCATE** to prevent falls.

- ✓ Provide fall prevention education

**FOLLOW-UP** to assess status.

- ✓ Conduct follow-up in 30-90 days

If YES to any of the screening Questions

Screened AT Risk

**ASSESS** the home for fall risk.

- ✓ Conduct home assessment survey (optional)
- ✓ Identify home modification programs (if applicable)

**Recommend** to see medical provider for additional screening that may include:

- ✓ Evaluate gait, strength, & balance
- ✓ Identify medication that increase fall risk
- ✓ Check blood pressure
- ✓ Vision assessment
- ✓ Foot check
- ✓ Assess vitamin D intake

**EDUCATE** to prevent falls.

- ✓ Provide fall prevention education

**FOLLOW-UP** to assess status.

- ✓ Conduct follow-up in 30-90 days

# Home Fall Risk Assessment Tool

## INSTRUCTIONS FOR SURVEYOR:

Introduce yourself to the homeowner. Describe the purpose of your visit and the assessment process. Once the General Information is collected and the STEADI Fall Risk Screening Assessment is complete, begin the Home Assessment by walking through the house with the resident(s) to identify risk factors. If a risk factor is identified, indicate if the statement accurately describes the situation in the room by placing a check mark in the box beneath the corresponding answer choice [Yes / No]. If you are unable to verify if a statement is accurate in the home, mark N/A in the comments box.

## General Information:

Participant Name:	Home Ownership		Date of Survey:
	Owner <input type="checkbox"/>	Other (i.e. Housing Authority, etc.):	
Physical Address:		Mailing Address:	

## STEADI FALL RISK SCREENING:

- 1 - Do you feel steady when standing or walking? \_\_\_\_\_
- 2 - Do you worry about falling? \_\_\_\_\_
- 3 - Have you fallen in the past year? \_\_\_\_\_  
 If yes, how many times? \_\_\_\_\_ Where did you fall? \_\_\_\_\_

## HOME SAFETY ASSESSMENT CHECKLIST:

	Yes	No	Comments
<b>Living Room/Common Room</b>			
Are pathways clear and free of trip hazards (i.e. toys, boxes, extension cords etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the home pet free (i.e. cat, dog)?	<input type="checkbox"/>	<input type="checkbox"/>	
Is furniture in good repair?*	<input type="checkbox"/>	<input type="checkbox"/>	
Is the flooring in good repair?*	<input type="checkbox"/>	<input type="checkbox"/>	
Is the flooring free of uneven surfaces throughout the room (i.e. transitions, rugs, carpet etc)?*	<input type="checkbox"/>	<input type="checkbox"/>	
Is the lighting sufficient for the room? (See table 1)	<input type="checkbox"/>	<input type="checkbox"/>	
Is the light switch accessible?	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Total Room Risk</b>			<b>Risk =</b>
<b>Kitchen</b>			
Are pathways clear and free of trip hazards (i.e. toys, boxes, extension cords etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	
Is furniture in good repair?*	<input type="checkbox"/>	<input type="checkbox"/>	
Is the flooring in good repair?*	<input type="checkbox"/>	<input type="checkbox"/>	
Is the flooring free of uneven surfaces throughout the room (i.e. rugs, carpet etc)?*	<input type="checkbox"/>	<input type="checkbox"/>	
Is the lighting sufficient for the room? (See table 1)	<input type="checkbox"/>	<input type="checkbox"/>	
Is the light switch accessible?	<input type="checkbox"/>	<input type="checkbox"/>	
Are items reachable on the shelves?	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Total Room Risk</b>			<b>Risk =</b>



# Home Fall Risk Assessment Tool

	Yes	No	Comments
<b>Bedrooms</b>			
Are pathways clear and free of trip hazards (i.e. toys, boxes, extension cords etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the furniture in good repair?*	<input type="checkbox"/>	<input type="checkbox"/>	
Is the flooring in good repair?*	<input type="checkbox"/>	<input type="checkbox"/>	
Is the flooring free of uneven surfaces throughout the room (i.e. transitions, rugs, carpet etc)?*	<input type="checkbox"/>	<input type="checkbox"/>	
Is the lighting sufficient in the room? (See table 1)	<input type="checkbox"/>	<input type="checkbox"/>	
Is the light switch accessible?	<input type="checkbox"/>	<input type="checkbox"/>	
Able to get in and out of bed without support?	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Total Room Risk</b>			<b>Risk =</b>

<b>Bathroom</b>			
Is the flooring in good repair?*	<input type="checkbox"/>	<input type="checkbox"/>	
Is the flooring free of uneven surfaces throughout the room (i.e. transitions, rugs, carpet etc)?*	<input type="checkbox"/>	<input type="checkbox"/>	
Is the flooring in the tub slip resistant?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the lighting sufficient in the room? (See table 1)	<input type="checkbox"/>	<input type="checkbox"/>	
Is the light switch accessible?*	<input type="checkbox"/>	<input type="checkbox"/>	
Able to get in and out of shower without support?	<input type="checkbox"/>	<input type="checkbox"/>	
Able to get on and off toilet without support?	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Total Room Risk</b>			<b>Risk =</b>

<b>Exterior Areas (front yard, back yard, and garage)</b>			
If needed, is ramp available? (mark N/A if not needed)	<input type="checkbox"/>	<input type="checkbox"/>	
Is ramp in good repair (i.e. slope, sturdy) (See table 2)	<input type="checkbox"/>	<input type="checkbox"/>	
If needed, are handrails available? (mark N/A if not needed)	<input type="checkbox"/>	<input type="checkbox"/>	
Are the handrails in <i>good repair</i> ?*	<input type="checkbox"/>	<input type="checkbox"/>	
Are the steps in the outdoor environment in good repair (i.e. evenly spaced, sturdy)? (mark N/A if not applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
Is the lighting sufficient in illuminating travel pathway?*	<input type="checkbox"/>	<input type="checkbox"/>	
Are the pathways around home free of trip hazards?	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Total Room Risk</b>			<b>Risk =</b>

## RISK INDEX CATEGORY

<b>Low</b> (2 or less "No" Responses)	<b>Medium</b> (3 - 4 "No" Responses)	<b>High</b> (5 - 7 "No" Responses)
Count the total number of "No's" in each room and determine the risk at the end of each section		
Living Room:	Kitchen:	Bedroom:
		Bathroom:
		Exterior Area:

## References

<b>Table 1: Room - Foot Candles Needed Guidance</b>	
Dining Room - 30-40	Bathroom - 70-80
Bed Room - 10-20	Garage - 80-100
Applicable section of the following references: Illuminating Engineering Society of North America Lighting Handbook, 9 <sup>th</sup> edition	

<b>Table 2: Ramp/Step Guidance</b>	
Stairs <sup>1</sup>	4 inch minimum and 7-3/4 inch max riser height with min 10 inch tread depth and min 36 inch stairway width
Ramp <sup>2</sup>	For every 1 foot of ramp length there will be 1 inch of rise for proper ramp incline slope
Applicable section of the following references: <sup>1</sup> Healthy Housing Manual Chapter 6: Housing Structure: <sup>2</sup> 2010 ADA Standards Chapter 4: Ramps and Curb Ramps	



# Home Risk Solutions List

**Instruction:** The Home Risk Solutions List provides effective strategies to address area-specific risk factors that correspond with findings from the home safety assessment. The Home Risk Solutions List may be consulted after conducting the home safety assessment. These effective strategies correspond to the fall risk factors found in areas in the home (i.e., exterior areas, living room, kitchen, bedroom, and bathrooms).

Citation: Rebuilding Together, 2020. [www.rebuildingtogether.org](http://www.rebuildingtogether.org)

**Note:** Ramps, handrails, grab bars, and other safety devices should be installed by licensed personnel to ensure proper and safe installation.

EXTERIOR AREA	
Risk Factors	Possible Solutions
Trip hazard	<input type="checkbox"/> Eliminate uneven surfaces or walkways, hoses, and other objects that may cause a person to trip walking from parking area to entry door. <input type="checkbox"/> Prune bushes & foliage well away from walkways & doorways. <input type="checkbox"/> No obstruction of view ahead or of view where feet will go on walkways during transition from parking area to entry.
Visibility (lighting)	<input type="checkbox"/> Make sure outside lighting is adequate. <ul style="list-style-type: none"> <li>○ Light sensors that turn on lights automatically as you approach the house may be useful.</li> </ul> <input type="checkbox"/> Make walkway as direct line path as possible.
Access (stairs/ramp/handrails)	<input type="checkbox"/> Remove scatter rugs and throw rugs. <input type="checkbox"/> Keep steps sturdy and textured to provide grip in wet or icy weather. <input type="checkbox"/> Mark edges of steps with bright or reflective tape for visibility. <input type="checkbox"/> Install modular ramp with handrails as alternative to steps. <input type="checkbox"/> Install beveled low profile, no step, no trip doorway threshold to entry. ie portable rubber threshold ramps (2, 3, or 4" rise)
BATHROOM	
Risk Factors	Possible Solutions
Sit to Stand posture	<input type="checkbox"/> Mount grab bars near toilets and tub/showers <input type="checkbox"/> Install toilet seat riser, or raise toilet height <input type="checkbox"/> Install bathing bench/shower chair <input type="checkbox"/> Install hand held shower wand for bathing <input type="checkbox"/> Reduce shower entry threshold if bathing abilities are limited
Slip risk	<input type="checkbox"/> Install non-slip strips in bath/shower <input type="checkbox"/> Install exhaust fan to reduce condensation forming
Visibility (lighting)	<input type="checkbox"/> Install/replace light fixture <input type="checkbox"/> Install nightlight <input type="checkbox"/> Replace light bulb <input type="checkbox"/> Provide flash light



# Home Risk Solutions List

Flooring	<input type="checkbox"/> Replace/repair floor <input type="checkbox"/> Secure rugs/carpet
<b>BEDROOM</b>	
<b>Risk Factors</b>	<b>Possible Solutions</b>
Trip hazard	<input type="checkbox"/> Widen or clear pathways within the room <input type="checkbox"/> Keep telephone near bed on night stand <input type="checkbox"/> Keep electric cords & wires near walls & away from walking paths
Sit to Stand Posture	<input type="checkbox"/> Use risers for bed or sitting furniture is sit to stand is a concern <input type="checkbox"/> Use side bed rail or chairs with armrests <input type="checkbox"/> Install vertical pole adjacent to chair and sofa to assist transition to stand
Visibility (lighting)	<input type="checkbox"/> Put night lights and light switches near bed and use bedside lamp as additional light source <input type="checkbox"/> Enlarge lamp switch or install touch-control lamp at bedside
Flooring	<input type="checkbox"/> Repair/replace floor <input type="checkbox"/> Secure rugs/carpet
General	<input type="checkbox"/> Keep emergency numbers in large print posted at night stand
<b>KITCHEN</b>	
<b>Risk Factors</b>	<b>Possible Solutions</b>
Accessibility	<input type="checkbox"/> Place things used often on the lower shelves (about waist high) <input type="checkbox"/> Install D-type cupboard door handles
Visibility (lighting)	<input type="checkbox"/> Adequate overall lighting <input type="checkbox"/> Task lighting additions
Flooring	<input type="checkbox"/> Repair/replace floor <input type="checkbox"/> Secure rugs/carpet
General needs	<input type="checkbox"/> Keep emergency numbers in large print posted on refrigerator or at a storage counter surface near telephone
<b>LIVING AREAS (i.e., living room, dining room, study/office, family room)</b>	
<b>Risk Factors</b>	<b>Possible Solutions</b>
Trip hazard	<input type="checkbox"/> Clear clutter from walking paths <input type="checkbox"/> Do not let pets trip you. Know where pet is whenever standing or walking <input type="checkbox"/> Keep electric cords & wires near walls & away from walking paths
Visibility (lighting)	<input type="checkbox"/> Good lighting with light switches at the top and bottom of stairs and on each end of a long hall
Accessibility	<input type="checkbox"/> Improve access to and from chairs by inserting risers under furniture legs <input type="checkbox"/> Use a "reach stick" for grabbing items
Flooring	<input type="checkbox"/> Repair/replace floor <input type="checkbox"/> Secure rugs/carpet
General Need	<input type="checkbox"/> Keep emergency numbers in large print posted at most common sitting chair or sofa end table



# 6 STEPS TO PREVENT A FALL

Falls are the **leading cause** of **injury** deaths for **American Indian** adults ages 55 and over.<sup>1</sup>

## FIND A GOOD BALANCE AND EXERCISE PROGRAM

Exercises that focus on balance and strength training can reduce the risk of falling.



## TALK TO YOUR HEALTH CARE PROVIDER

Ask for an assessment of your risk of falling. Share your history of recent falls.



## REGULARLY REVIEW YOUR MEDICATIONS WITH YOUR DOCTOR OR PHARMACIST

Make sure side effects aren't increasing your risk of falling. Take medications only as prescribed.

# PROTECT OUR ELDERERS

## KEEP YOUR HOME SAFE

Remove tripping hazards, increase lighting, make stairs safe, and install grab bars in key areas.



## TALK TO YOUR FAMILY MEMBERS

Get their support in taking simple steps to stay safe. Falls are not just an elders' issue.



## GET YOUR VISION AND HEARING CHECKED ANNUALLY

Your eyes and ears are key to keeping you on your feet.



## FALLS ARE PREVENTABLE AND DO NOT HAVE TO BE A PART OF AGING



### PHOENIX AREA INDIAN HEALTH SERVICE INJURY PREVENTION PROGRAM

40 N. Central Avenue; Suite 720  
Phoenix, AZ 85004 • 602-364-5130  
[www.ihsphoenix](http://www.ihsphoenix)

### INTER TRIBAL COUNCIL OF ARIZONA, INC., AREA AGENCY ON AGING, REGION 8

2214 North Central Avenue, Suite 100  
Phoenix, Arizona 85004  
602.258.4822 • Fax: 602-258-4825  
[www.itcaonline.com/aaa](http://www.itcaonline.com/aaa)



<sup>1</sup> CDC WISQARS 2018



# MYTH vs. REALITY

## FALLS PREVENTION

**Most falls can be prevented—and you have the power to reduce your risk.**

To promote greater awareness and understanding, here are 5 common myths—and the reality—about older adult falls.<sup>1</sup>

### MYTH 1:

Falling is something normal that happens as you get older.



**REALITY:** Falling is not a normal part of aging. Strength and balance exercises, managing medications, scheduling an eye exam and completing a home safety check are all steps to prevent a fall.

### MYTH 2:

If I stay at home and limit my activity, I will not fall.



**REALITY:** Strengthening the mind and body with social and physical activities will help to stay independent and remain active.

### MYTH 3:

Using walking aides will decrease my mobility.



**REALITY:** Walking aids, such as a walker or cane, improves mobility and balance. Talk with a physical therapist about using walking aids.

### MYTH 4:

Taking medication does not increase my risk of falling.



**REALITY:** Medications affect people in different ways. Talk to health care providers about potential side effects of medications.

### MYTH 5:

I am concerned about talking to family or a health care provider about falling. I do not want to lose my independence.



**REALITY:** Fall prevention is a team effort. Talk with your health care provider, family, or caregiver to reduce your risk of falling.

**LEARN MORE ABOUT FALLS PREVENTION AT**  
[www.ncoa.org/fallsprevention](http://www.ncoa.org/fallsprevention)



**PHOENIX AREA INDIAN HEALTH SERVICE  
INJURY PREVENTION PROGRAM**

40 N. Central Avenue; Suite 720  
Phoenix, AZ 85004 • 602-364-5130  
[www.ihs.gov/phoenix/](http://www.ihs.gov/phoenix/)

**INTER TRIBAL COUNCIL OF ARIZONA, INC.,  
AREA AGENCY ON AGING, REGION 8**

2214 North Central Avenue, Suite 100  
Phoenix, Arizona 85004  
602-258-4822 • Fax: 602-258-4825  
[www.itcaonline.com/aaa](http://www.itcaonline.com/aaa)



<sup>1</sup>Information obtained from <https://www.ncoa.org/article/debunking-the-myths-of-older-adult-falls>.



Indian Health Service  
Office of Environmental Health & Engineering  
Western Arizona District Office  
1553 West Todd Drive, Suite 104  
Tempe, AZ 85283

<Date>

John Smith  
<Insert Address>  
<Insert City, State>

RE: HOME SAFETY ASSESSMENT

Mr. Smith,

Office of Environmental Health and Engineering personnel conducted a home fall assessment at <insert address> on <Insert Date> at the request of the <Insert requestor>. The Home Fall Assessment is a checklist that identifies risk factors in the home that may lead to falls. According to CDC, for American Indians/Alaskan Natives in the U.S from 1999-2018, falls accounted for 25% of the unintentional injury deaths among older adults.

During the assessment, the <room(s)> were identified as high risk areas. Special attention should be placed on:

- <Issue; Room>
- <Issue; Room>
- <Issue; Room>
- <Issue; Room>
- <Issue; Room>

Consult with your medical provider if you have fallen, or are afraid of falling, or feeling unsteady rising to stand after sitting or when attempting to walk. Please contact the Office of Environmental Health and Engineering at <phone number> and/or <email address> with any questions concerning this assessment.

Sincerely,

<Insert Name>, REHS, MPH  
LT, USPHS, IHS  
Environmental Health Officer  
Western Arizona District

Cc: <Applicable stakeholders>

## Conducting Home Safety Assessments

### **Purpose**

To provide guidance on conducting home safety assessments to reduce fall risk factors in tribal communities while observing social distancing recommendations.

### **Scope**

This protocol applies to DEHS staff and tribal programs/partners that assist in home safety assessments. The focus is to describe options to conduct home safety assessments using either virtual and/or in-person methods. This document complements the Phoenix Area Fall Safety toolkit.

### **Methods**

The following describes the multiple methods available to conduct home safety assessments in the homes of individuals seeking to identify fall risk factors. There may be instances to combine both virtual and in-person home safety assessment methods to meet the needs of the community. DEHS staff and tribal partners should refer to local tribal guidance and CDC Community Levels (<https://covid.cdc.gov/covid-data-tracker/#datatracker-home>) prior to engaging in home safety assessments.

*Note: If COVID-19 community levels are in the green (low) or yellow (medium) an in-person home safety assessment may be conducted following COVID-19 safety precautions. If COVID-19 community levels are red (high) a **virtual** home safety assessment should be the preferred option.*

### **A. VIRTUAL HOME SAFETY ASSESSMENT**

The virtual home safety assessment should be conducted as an option when in-person home assessment is not feasible. The virtual assessment should occur at the home being assessed with the elder/caregiver. DEHS staff and tribal partners conducting the home safety assessment should ensure that educational materials and resources are available and the assessment video conference is scheduled.

\*Due to the rural setting of some communities, internet availability may be interrupted making it difficult for virtual application usage.

Resources needed:

- Device (i.e. Smartphones, tablets, and computers)
- Software application/video conference platforms (i.e. FaceTime, Skype, Zoom, and Google Duo, etc.)
- Virtual Home Assessment graphic (APPENDIX G)
- Educational materials (i.e., Fall prevention infographics)
- Additional accessories to consider (i.e., measuring tape, camera, etc.)

Prior to virtual home safety assessment:

- Contact elder/caregiver
  - Verify device and capability of virtual platform to be used during assessment
  - Schedule an appointment for virtual home safety assessment
  - Provide the following documents/education materials:
    - ✓ The virtual home assessment graphic

- Checklist should be completed by elder/caregiver prior to virtual home assessment
- ✓ The fall risk prevention education materials via email and/or postal mail
  - Fall Prevention Infographics (APPENDIX E)
  - National Council of Aging (NCOA): <https://ncoa.org/older-adults/health/prevention/falls-prevention>
  - NCOA Make Your Home Fall Free: <https://www.youtube.com/watch?v=waY8Nq4AJ6Q>
  - CDC STEADI Program: <https://www.cdc.gov/steady/patient.html>

During virtual home safety assessment:

- Activate video conference virtual meeting at the agreed scheduled date and time
  - Elder/caregiver must be at the home being assessed
- Review completed virtual home assessment graphic
  - Verify identified risk factors

Assessment Close-out

- Provide recommendations based on Home Solutions List (APPENDIX C)
  - Additional recommendations may include:
    - ✓ Visit medical provider
    - ✓ Participate in exercise for gait and balance programs if available and with medical clearance
- Recommend in-person home assessment, if feasible
- Review fall prevention educational materials
- Answer any questions or concerns
- Distribute close out letter

## **B. IN-PERSON HOME SAFETY ASSESSMENT**

An in-person home safety assessment should occur at the home being assessed for fall risk. Ensure that all precautions are followed. It is not recommended to conduct an in-home safety assessment if safety supplies **and** safety precautions cannot be met.

\*Check the community [COVID-19 community levels](#) rates before scheduling.

Safety supplies needed:

- Face covering (i.e. masks, face shield, etc.) for DEHS staff and tribal partners
- Hand sanitizer
- Disposable gloves
- Bag to discard gloves and wipes

Precautions:

- Follow social distancing requirements (6 feet apart)
- Avoid touching your eyes, nose, and mouth with unwashed hands
- Wash your hands often with soap and water for at least 20 seconds. This is especially important after blowing your nose, coughing, or sneezing; going to the restroom; and before eating or preparing food.
- Use hand sanitizer if soap and water are not available. Use an alcohol-based hand sanitizer with at least 60% ethanol (or 70% isopropanol), covering all surfaces of your hands and rubbing them together until they feel dry.
- Soap and water are the best option, especially if hands are visibly dirty.

- Recommend using personal protective equipment (PPE) i.e. gloves, face covering if COVID-19 community levels are at medium (yellow) level

#### Resources needed

- Home Safety Assessment (APPENDIX B)
- Assessment equipment identified on checklist (i.e. measuring tape, camera, light meter, etc.)
- Fall prevention infographics (APPENDIX D)

#### Prior to in-person home assessment

- Contact elder/caregiver
  - Schedule an appointment for in-person home safety assessment
- Provide fall risk prevention education materials to elders/caregivers via email and/or postal mail:
  - Fall Prevention Infographics (APPENDIX D)
  - National Council of Aging (NCOA): <https://ncoa.org/older-adults/health/prevention/falls-prevention>
  - NCOA Make Your Home Fall Free: <https://www.youtube.com/watch?v=waY8Nq4AJ6Q>
  - CDC STEADI Program: <https://www.cdc.gov/steady/patient.html>

#### During in-person home safety assessment:

- Meet at the previously scheduled date and time
  - Elder/caregiver must be at the home being assessed
- Conduct the assessment using the Home Assessment Checklist (APPENDIX B)
  - Offer the elder/caregiver to accompany you while conducting the survey

#### Assessment Close-out

- Provide recommendations based on Home Solutions List (APPENDIX C)
  - Additional recommendations may include:
    - ✓ Visit medical provider
    - ✓ Participate in exercise for gait and balance programs if available and with medical clearance
- Review fall prevention educational materials
- Review the fall risk index and home solutions list
- Answer any questions or concerns

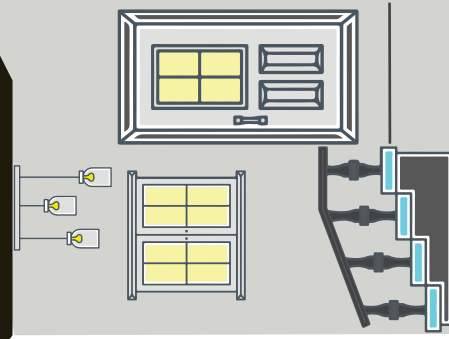
### **C. DATA COLLECTION**

- Findings should be captured in Fall Master Collection Tool

### **D. FOLLOW-UP**

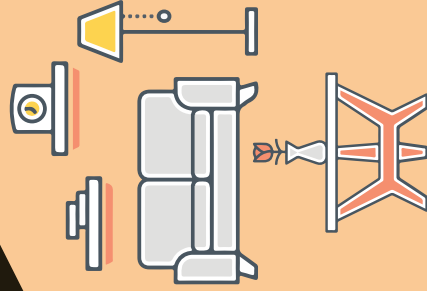
- Distribute home assessment letter (APPENDIX E)
- Follow-up communication in 30-60 days (i.e., phone call, email, or via virtual software application)

# ELDER FALL PREVENTION CHECKLIST



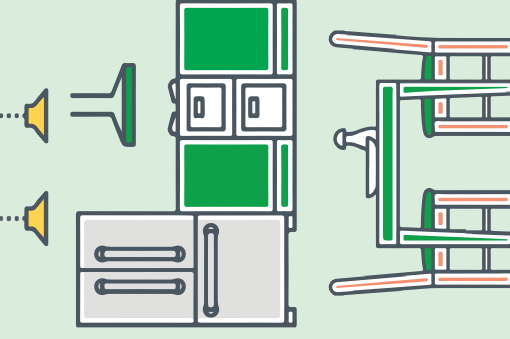
- Fix loose or uneven steps
- Install or fix handrails
- Ensure stairs are well-lit

## STAIRS



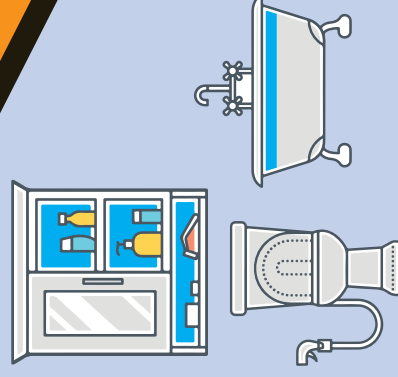
- Use nonskid rugs
- Coil or tape extension cords or wires
- Keep pathways clear
- Keep areas well-lit

## COMMON AREA



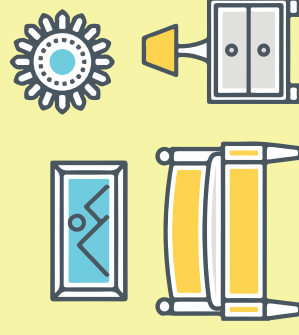
- Keep items in easy-to-reach places
- Never use a chair as a step stool
- Watch slip hazards that may be present on floors

## KITCHEN



- Install grab bars next to toilets and inside showers
- Use nonslip mats on floors and inside bathtubs
- Consider a shower chair if you have fears associated with falling

## BATHROOM



- Ensure lamps are easy to reach
- Plug in night lights
- Keep phones close in case of emergency

## BEDROOM

To schedule your home safety assessment call: