



FALL PREVENTION GUIDE

Practical steps for safer movement and a safer home

For older adults, clients, family caregivers, and home-care teams

Use this guide to identify common fall risks, make practical changes, and know when to ask a healthcare professional for help.

Many falls can be prevented.

Small changes in the home, regular strength and balance activity, medication review, and vision care can reduce risk.



Important

This guide provides general education and does not replace medical advice, a professional home-safety assessment, or an individualized care plan. Call 911 for a serious injury, loss of consciousness, severe pain, heavy bleeding, breathing difficulty, or when the person cannot safely get up.

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Start with the biggest risk factors

Falls usually result from more than one factor. A safer plan considers health, movement, medications, vision, footwear, and the home environment together.

✓	Area	Safety action
☐	Previous falls	Tell the healthcare provider about every fall or near-fall, even when there was no obvious injury.
☐	Dizziness or faintness	Rise slowly. Report new dizziness, fainting, or light-headedness—especially after standing.
☐	Medicines	Ask a doctor or pharmacist to review prescription medicines, over-the-counter products, and supplements for side effects such as sleepiness, confusion, or dizziness.
☐	Strength and balance	Ask which exercises are appropriate. Strength and balance training can improve stability.
☐	Vision and hearing	Keep eye and hearing checks current and use prescribed glasses or hearing devices correctly.
☐	Feet and footwear	Choose well-fitting, low-heeled shoes with nonslip soles. Avoid walking in socks or loose backless slippers.
☐	Walking aids	Use canes or walkers only when properly fitted and maintained. Ask a clinician or therapist for guidance.
☐	Urgency and nighttime trips	Keep the route to the bathroom clear and well lit. Discuss frequent or urgent bathroom needs with a healthcare provider.

A simple daily safety routine

- Keep frequently used items within easy reach.
- Wear supportive footwear before walking.
- Use prescribed mobility equipment every time it is needed.
- Keep a charged phone or alert device within reach.
- Pause at the edge of the bed or chair before standing.
- Ask for assistance instead of rushing or climbing on furniture.



Call • Share • Confirm

Talk to a healthcare professional promptly

Report new weakness, repeated near-falls, a change in walking, new confusion, fainting, numbness, severe dizziness, or a recent fall. These can signal a condition that needs assessment.

Home safety checklist

Walk through the home during both daytime and nighttime. Complete the checklist with the person who lives there and repeat it after a health change, hospital stay, or fall.

✓	Area	Safety action
☐	Walkways	Remove clutter, cords, low furniture, and other objects from normal walking paths.
☐	Rugs and floors	Remove loose throw rugs or secure them with nonslip backing. Repair uneven or damaged flooring.
☐	Lighting	Use bright, even lighting. Add night-lights or motion-sensor lights between the bed and bathroom.
☐	Stairs	Keep steps clear; install secure handrails, preferably on both sides; mark hard-to-see step edges.
☐	Bathroom	Install securely mounted grab bars by the toilet and inside/outside the tub or shower. Use nonslip surfaces.
☐	Bedroom	Keep a lamp, phone, glasses, and mobility aid within reach. Adjust bed height so feet can rest on the floor when seated.
☐	Kitchen	Store everyday items between waist and shoulder height. Never use a chair as a step stool.
☐	Seating	Use stable chairs with arms and a firm seat that is easy to rise from.
☐	Entrances	Repair uneven thresholds and pathways. Keep entrances dry, clear, and well lit.
☐	Pets	Reduce tripping risk from pets, feeding bowls, toys, and leashes in walkways.

Bathroom safety deserves extra attention

Wet surfaces, transfers, and urgent movement make bathrooms a common risk area. Grab bars must be properly installed into secure supports; towel racks are not designed to hold body weight.

- Use a shower chair or transfer bench when recommended.
- Keep soap, towels, and toiletries within easy reach.
- Use a handheld showerhead when it improves safety.
- Avoid locking the bathroom door when assistance may be needed.



Use Proper Support

No chairs • No towel racks

Never improvise

Do not use rolling chairs, unstable furniture, towel racks, or another person's walking aid as support. Equipment should fit the individual and be used as instructed.

Safer movement and caregiver support

Before standing or walking

- Check for dizziness, unusual weakness, pain, or confusion.
- Make sure footwear is secure and the floor is dry and clear.
- Place the walker or cane where it can be reached safely.
- Encourage the person to move slowly and avoid pulling on unstable furniture.
- Follow the care plan and any transfer instructions from a nurse, physical therapist, or occupational therapist.

For family and professional caregivers

A caregiver should support safe independence—not rush, pull, or use unsafe lifting techniques. When a transfer requires more help than one person can safely provide, follow the care plan and request the appropriate equipment or additional assistance.

Action	What it means
Observe	Notice changes in balance, walking speed, posture, attention, footwear, and use of assistive devices.
Prepare	Clear the route, turn on lights, position equipment, and explain the next step before movement begins.
Stay close	Provide the level of assistance allowed by the care plan without obstructing the person’s movement.
Document	Record falls, near-falls, new hazards, and changes in mobility according to agency policy.
Escalate	Report concerning changes promptly to the supervisor, family, or healthcare provider as required.

Strength and balance activity

Regular activity can help maintain strength, balance, and confidence. The right programme depends on health conditions and current mobility. Ask a healthcare professional which activities are appropriate before starting or changing an exercise routine.



Good options may include

Walking, supervised chair-rise practice, strength exercises, tai chi, or a physical-therapy programme when appropriate for the individual.

Medication safety

- Keep an up-to-date medication list.
- Ask about medicines that may cause drowsiness, dizziness, confusion, blurred vision, or low blood pressure.
- Do not stop or change a medicine without instructions from the prescriber.
- Review medicines after a fall, hospital visit, or major health change.

What to do if a fall happens

Call 911 immediately

Call for emergency help if there is loss of consciousness, a possible head/neck/back injury, severe pain, heavy bleeding, breathing difficulty, chest pain, a visibly deformed limb, sudden weakness, or if the person cannot safely get up.

1

Stay calm and do not rush

Encourage the person to remain still for a moment. Check responsiveness, breathing, pain, bleeding, and obvious injury.

2

Do not lift automatically

Moving or lifting someone after a fall can worsen an injury and may injure the caregiver. Follow emergency guidance and the person's care plan.

3

Get help

Call 911 when emergency signs are present. Otherwise, contact the appropriate family member, supervisor, nurse, or healthcare provider according to the care plan and agency procedure.

4

If there is no apparent injury

Only help the person rise when they can participate safely and the method is consistent with professional instruction. Stop if pain, dizziness, or weakness occurs.

5

Observe and report

Even when the person seems fine, report the fall. Watch for delayed pain, confusion, headache, vomiting, weakness, unusual sleepiness, or changes in walking.

6

Prevent the next fall

Identify what happened: a hazard, dizziness, footwear, rushing, medication effect, poor lighting, or a change in health or mobility.

Keep emergency information ready

- Full name, date of birth, and address
- Emergency contacts
- Current medication and allergy list
- Healthcare provider information
- Mobility and transfer instructions
- Advance directives or emergency documents, when applicable

Caregiver reminder: Report every fall or near-fall promptly so hazards, medical concerns, and care-plan changes can be addressed.

My fall-prevention action plan

Complete this page with the client, family, caregiver, and healthcare team as appropriate.

My top fall risks

Changes we will make at home

Who will review my medicines

My strength and balance plan

Mobility equipment and instructions

Who to contact after a fall or near-fall

Review date: _____ Next review: _____

Reliable information used for this guide

This guide was developed from public educational guidance from the following U.S. government health sources:

- Centers for Disease Control and Prevention (CDC), Older Adult Fall Prevention and STEADI resources cdc.gov/falls and cdc.gov/steady
- National Institute on Aging (NIA), “Falls and Fractures in Older Adults: Causes and Prevention” nia.nih.gov
- MedlinePlus, “Preventing Falls” medlineplus.gov



About Crown Caregivers

Crown Caregivers provides compassionate personal care services designed to support safety, dignity, and independence at home.

For service information, visit crown caregivers.com or call (702) 800-5805.

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