**Safety Tips for Caregiving at Home**

According to the U.S. Center for Disease Control, falls are the leading cause of fatal injury in older adults, and one-fourth of Americans [age 65+](https://www.ncoa.org/news/resources-for-reporters/get-the-facts/falls-prevention-facts/) fall each year. Safety for the elderly is one of the primary motivations for an in-home caregiver, and it is something that should be addressed immediately.

Seniors need to take extra precautions when mobile, as there are a variety of physical changes that can decrease their safety. Impaired vision, hearing, sense of touch, and the loss of bone density are just a few contributing factors as to why the elderly are at a greater risk of injury.

The good news is that the majority of injuries that independent seniors sustain can be prevented with a variety of necessary adjustments to the home and a well-detailed plan for safety.

Home Assessment

Any safety plan for in-home care—whether drafted by a professional or family member—should always start with a home assessment. An in-home care aide can do a walk-through to determine immediate safety hazards. They can also assess any risky behaviors that an individual may be prone to and carefully draft a plan on how to take all safety precautions in a variety of areas.

Physical Space

The first place to start with safety at home is in the physical space itself. Many times, an elderly individual’s home presents a variety of obstacles that pose too great of a risk to their safety.

Unlike a normal family home, when assessing the safety of the home of an elderly individual, there are some regular items that simply cannot work. The following are some tips to consider when creating a safe physical environment for the elderly:

**Entry:** There should be a zero-threshold entry to the house, which can be helpful for walkers and wheelchairs. Offset door hinges can be installed to make for wider doorways as well. Hallways should also be wide enough to accommodate medical equipment, and entryways should be well-lit at all times.

**Bathroom:** Handles and bathroom aids ought to be installed on all walls (next to the toilet and in the shower/tub). Any locks on the door should be accessible from either side. Skidproof lining must be installed in the tub, and any bath mats should have a non-slip bottom.

Cold and hot faucets need to be marked clearly. Bathing should really only be done when a caregiver is present, regardless of how much assistance is needed.

**Fire Safety:** There must be a fire extinguisher and smoke detector on every floor of the home. An escape plan should be well-drafted, with at least two separate means to exit the home in the case of an emergency.

Any appliances with frayed or damaged cords should be replaced, and a caregiver should never overload circuits. Any heaters in the home must be at least 3 feet away from anything that can catch fire, like curtains, furniture, or bedding.

**Reach:** If an individual is confined to a wheelchair, lights, switches, and countertops should all be within reach. Any and all stairs must have properly secured railings and efficient lighting. Handles and door knobs should be easy to use and, in some cases, levers may actually work better. Always use a step stool to reach for anything, rather than standing on a chair.

**Amenities:** All rugs in the house must be free from fray and the loose edges tacked or taped down. If this cannot be accomplished, the rug needs to be removed. Furniture may require rearrangement to allow adequate space for safe mobility throughout the house.

Habits In addition to a person’s physical space posing a safety risk, their behavior must also be assessed. The medical condition of certain individuals may put them at a greater risk for injury within their home. Once a level of need is assessed, it can be used to provide the proper care that encourages safe habits. The following are some tips on how to curb risky behavior:

**Attire:** Long sleeves need to be close fitting, rather than loose, to avoid spills or burns. Additionally, everyone (both the individual as well as the professional caregiver) should be wearing low-heeled, non-slip footwear. If an elderly individual is wearing slippers, the bottoms should be rubber.When a person is prone to falls already, it is important to consider asking them to wear a medical alert safety device around their neck at all times. That way, if they fall, they can simply press the button to alert emergency services.

**Smoking:** Safety for the elderly should never involve smoking, but it may be a habit that the person has had for years. Smoking must never happen around any oxygen tanks. Additionally, an individual should never smoke in bed or alone. It is best if the caregiver simply encourages them to quit.

**Cleanliness:** Any and all spills should be cleaned up immediately. When mopping floors, avoid slippery wax products. All floors must be uncluttered and clean at all times.

**Organization:** All closet doors and drawers should be kept closed to prevent tripping and/or bruising. Any and all walking aids must be within reach of an individual, and when it is near their bed, the assistive device should be placed next to a nightlight.

Sharp knives in the kitchen should be stored in a rack, and all heavier objects need to be stored at waist level. Hazardous items need to be kept away from food, and food should be items rotated and maintained on a frequent basis.

Although the elderly tend to have an older version of phones, they should at least be cordless to prevent tripping. A cell phone is the best investment, as people can keep them on their person at all times.

**Emergency:** There should be a list of emergency numbers next to every phone in the house. It should be written in large print in case the elderly individual is capable of calling themselves. The following is a list of possible numbers to consider (besides 911):

* Poison Control Center: (800) 222-1222
* The local fire department
* The local police department
* Any emergency contacts (i.e., family members or friends)
* The number for their healthcare provider

Safety for ADLs

* In addition to creating a secure environment with safe habits, it is equally important for a caregiver to practice safety when assisting an individual with activities of daily living (ADLs).
* A caregiver should be on hand at all times to assist with mobility, which can be the riskiest activity in which an elderly individual engages. A walker or cane must always be used if needed, as well as railings where necessary. If an individual has particular issues with mobility, they can ask their healthcare provider about a falls risk assessment to see what areas can be improved upon.
* During meal prep, it is important to keep all oxygen away from open flames, and all appliances should be in good, working order. A home should never be heated with an oven, stove, or grill because these can all emit dangerous carbon monoxide fumes.

Abuse

* A topic that is often rarely discussed when it comes to safety for the elderly, is protecting them from abuse. Part of a caregiver’s role is to ensure that all windows are secured properly, and doors locked at all times. If an individual is being pressured into signing a contract or making a purchase, it should be reported to their loved ones immediately.
* Strangers must never be allowed in while the professional caregiver is the only one home with an individual. Any and all suspicious activity should immediately be reported to police.

Safety For The Elderly

* Caregiving at-home involves assessing the risk for an individual. This sometimes requires thinking outside of the box, as it is not simply an issue of creating a safe physical space.
* Some risky behaviors may need to be relearned in the process of creating a safer environment. Bad habits can be hard to break, so it may just be about working around a challenging situation (i.e., smoking in bed). Cleanliness and organization are also key to minimizing the risk of an accident in the home. Injury can occur from a simple open drawer or cabinet.
* Caregivers should also be protecting an individual from abuse at all times. Overall, it is up to the caregiver to provide safety for the elderly individual. By assessing and altering the home, it allows a person to perform their ADLs in a safer and more efficient manner. Addressing safety in the very beginning mitigates unnecessary risk and allows a caregiver to focus on what they do best: give care.