

Home Safety Checklist

Living Room and Family Room

- | | Yes/No | Don't know/
Doesn't apply |
|--|---|------------------------------|
| 1. Can you turn on a light without having to walk into a dark room? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 2. Are lamp, extension or phone cords out of the flow of foot traffic? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 3. Are passageways in this room free from objects and clutter (papers, furniture)? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 4. Are curtains and furniture at least 12 inches from baseboard heaters or portable heaters? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 5. Do your carpets lie flat? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 6. Do your small rugs and runners stay put (don't slide or roll up) when you push them with your foot? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |

Kitchen

- | | | |
|---|---|-------|
| 7. Are your stove controls easy to see and use? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 8. Do you keep loose fitting clothing, towels, and curtains that may catch fire away from the burners and oven? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 9. Can you reach regularly used items without climbing to reach them? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 10. Do you have a step stool that is sturdy and in good repair? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |

Bedrooms

- | | | |
|--|---|-------|
| 11. Do you have working smoke detectors on the ceiling outside of bedroom doors? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 12. Can you turn on a light without having to walk into a dark room? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 13. Do you have a lamp or light switch within easy reach of your bed? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 14. Is a phone within easy reach of your bed? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 15. Is a light left on at night between your bed and the toilet? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 16. Are the curtains and furniture at least 12 inches from your baseboard heater or portable heater? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |

Bathroom

- | | | |
|--|---|-------|
| 17. Does your shower or tub have a non-skid surface: mat, decals or abrasive strips? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 18. Does the tub/shower have a sturdy grab bar? (not just a towel rack) | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 19. Is your hot water temperature set to 120° or lower? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 20. Does your floor have a non-slip surface or does the rug have a non-skid backing? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 21. Are you able to get off and on the toilet easily? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |

Community Education (cont.)



Stairways

- | | Yes/No | Don't know/
Doesn't apply |
|--|---|------------------------------|
| 22. Is there a light switch at both the top and bottom of stairs inside of the house? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 23. With the light on, can you clearly see the outline of each step as you go down the stairs? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 24. Do all stairways have sturdy handrails on both sides? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 25. Do handrails run the full length of the stairs, beyond the steps? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 26. Are all the steps in good repair (not loose, broken, missing or worn in places)? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 27. Are stair coverings (rugs, treads) in good repair, without holes and not loose, torn or worn | <input type="checkbox"/> / <input type="checkbox"/> | _____ |

Hallways and Passages

- | | | |
|---|---|-------|
| 28. Do all small rugs or runners stay put (don't slide or roll up) when you push them with your foot? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 29. Do your carpets lie flat? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 30. Are all lamp, extension and phone cords out of the flow of foot traffic? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |

Front and Back Entrances

- | | | |
|--|---|-------|
| 31. Do all entrances to your home have outdoor lights? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 32. Are walkways to your entry free from cracks and holes? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |

Throughout Your House

- | | | |
|---|---|-------|
| 33. Do you have an emergency exit plan in case of fire? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |
| 34. Do you have emergency phone numbers listed beside your phone? | <input type="checkbox"/> / <input type="checkbox"/> | _____ |

Pick 3 items where you answered "no" and list what you need to do:

1. _____
2. _____
3. _____

List any other hazard or unsafe areas you are concerned about: