

Fall Risk & Mobility Questions

Tour Evaluation Guide

Falls are a leading cause of injury and decline in older adults. Use these specific questions during tours to assess how a community handles fall prevention, mobility support, and responses to falls. The right community will have comprehensive strategies, not just vague promises.

Understanding Their Fall Prevention Program

- What is your community's fall rate? (Falls per resident per year)
- How do you assess fall risk for new residents?
- What specific fall prevention strategies do you use?
- How often do you reassess fall risk?
- Do you have a physical therapist on staff or on call?
- What training do caregivers receive in fall prevention?

Environmental Safety Features

- What grab bars and safety rails are installed in apartments and bathrooms?
- Are floors non-slip? How do you address spills?
- Is lighting adequate in hallways, rooms, and bathrooms?
- Are there call buttons in bathrooms and bedrooms? How quickly are they answered?
- How do you manage cords, rugs, and other trip hazards?

- Are beds and chairs the right height for safe transfers?

Mobility Assistance & Equipment

- Do you have walkers, canes, and wheelchairs available?
- How do you ensure assistive devices are being used properly?
- What happens if a resident refuses to use their walker?
- Do you provide gait belts for transfers? Is staff trained in their use?
- Are there mechanical lifts available if needed?
- How do you handle residents who are unsafe walking alone?

Supervision & Monitoring

- How often do staff check on residents who are at high fall risk?
- Do you use bed or chair alarms for residents at risk of falling?
- What is your policy on restraints? (Alarms are less restrictive than physical restraints)
- How do you balance independence with safety?
- Are common areas visible to staff at all times?
- How do you supervise residents during activities and outings?

Response to Falls

- What is your protocol when a resident falls?
- How quickly do staff respond to a fall?
- Who assesses the resident after a fall? (Nurse? Paramedics?)
- When do you send a resident to the ER after a fall?
- How do you notify families about falls?
- Do you document and track falls to identify patterns?

Medication Review

- Do you review medications that may increase fall risk? (Sedatives, blood pressure meds, etc.)
- Do you communicate with doctors about medication-related fall risk?
- How do you monitor for side effects that impact balance or alertness?

Transfers & Personal Care

- How many staff members assist with transfers for residents at risk?
- Are staff trained in proper body mechanics and safe transfer techniques?
- What happens during bathing and toileting to prevent falls?
- Do you have shower chairs, raised toilet seats, and other adaptive equipment?
- Can residents call for help during the night if they need to use the bathroom?

Physical Therapy & Exercise

- Do you offer strength and balance exercise programs?
- Is physical therapy available on-site?
- How do you encourage residents to stay active and mobile?
- Do you have walking programs or guided exercise classes?

Why This Matters:

Falls can lead to fractures, hospitalizations, and rapid decline in function and independence. A community with a comprehensive fall prevention program will proactively identify risk factors, modify the environment, train staff, and respond quickly when falls occur. Vague answers or dismissive attitudes about falls are red flags.

What to Observe During Your Tour

- Are residents using walkers or canes appropriately?
- Do you see staff assisting residents with walking and transfers?
- Are hallways clear of clutter and obstacles?

- Is lighting bright enough to see clearly?
- Are call buttons within easy reach in bathrooms?
- Do residents appear steady on their feet or at risk?

Red Flags to Watch For

- Cannot or will not tell you their fall rate
- Dismissive attitude: "Oh, everyone falls sometimes"
- No formal fall risk assessment process
- Residents walking unsupervised who appear unsteady
- Poor lighting or trip hazards visible during tour
- Staff don't know how to respond to fall-related questions
- No physical therapy or exercise programs available

Questions About Your Loved One's Specific Needs

- My loved one has fallen [X] times in the past year. Can you accommodate someone with this fall history?
- My loved one uses a walker/wheelchair. How will you ensure they use it safely?
- My loved one has [specific condition: Parkinson's, stroke, neuropathy]. What experience do you have with this?
- My loved one gets up frequently at night. How will you keep them safe?

National Care Planning Council

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