

The After Visit Reality Check

Is Your Parent Safe at Home?

A Checklist for Adult Children After a Worrying Visit

How to use this checklist: Check off anything you noticed during your visit. The more boxes you check, the more important it is to take action. Use Part 2 to guide your next steps.

PART 1 WARNING SIGNS — WHAT DID YOU NOTICE DURING YOUR VISIT?

Movement & Balance

- ☐ **Walking slower** — smaller steps, shuffling, or moving more cautiously than before
- ☐ **Holding onto furniture** — walls, or counters while moving through the house
- ☐ **Difficulty rising** — needed both arms, multiple attempts, or paused before standing
- ☐ **Sitting down too fast** — plopping rather than lowering in a controlled way
- ☐ **Unsteady at thresholds** — hesitating or gripping before steps, curbs, or doorways

Home & Daily Life

- ☐ **Clutter in walkways** — furniture moved for support, or pathways blocked
- ☐ **Dishes, mail, or trash piling up** — more than is typical for him/her
- ☐ **Spoiled food in the refrigerator** — or food she couldn't explain buying
- ☐ **Evidence of a forgotten stove** — burned pots, scorch marks, or food left out
- ☐ **Unpaid bills visible** — or signs that finances may not be managed well

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Esther Kane, OTR/L, CAPS, C.D.S. / Retired Occupational Therapist

This checklist is for information purposes only and does not constitute medical advice.

Always consult a qualified healthcare provider for medical decisions.

Weight & Nutrition

- ☐ **Noticeable weight loss** — clothes fitting differently or visible thinning
- ☐ **Refrigerator or pantry nearly empty** — or stocked with foods she can't easily prepare
- ☐ **Difficulty chewing or swallowing** — avoiding certain foods or eating very slowly
- ☐ **Loss of appetite** — mentioned not being hungry or skipping meals

Memory & Cognition

- ☐ **Repeated the same story** — more than once in the same conversation
- ☐ **Asked the same question multiple times** — within a short period
- ☐ **Confused about recent events** — who visited, what she did last week
- ☐ **Difficulty finding words** — long pauses, substituting wrong words, or trailing off
- ☐ **Confusion about time or day** — unsure what day it was or time of day

Medications

- ☐ **No system for medications** — scattered bottles, no organizer, or mixed-up pills
- ☐ **Can't name their medications** — or explain what each one is for
- ☐ **Pill organizer not being used** — or clearly behind by several days
- ☐ **Expired medications** — still in the cabinet or mixed with current ones

Social & Emotional

- ☐ **Stopped going out** — church, lunch, errands, or activities she used to enjoy
- ☐ **Mentioned not driving** — or seems to be avoiding driving
- ☐ **Seemed withdrawn or flat** — less engaged, less cheerful than his/her usual self
- ☐ **Unexplained bruises** — he/she couldn't explain how they got there
- ☐ **Mentioned feeling lonely** — or hasn't seen friends or family in a while

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PART 2 NEXT STEPS — WHAT TO DO AFTER A WORRYING VISIT

Take these steps in the coming days and weeks.

- ☐ **Write down what you noticed** — while it's still fresh — be specific about what you saw and when
- ☐ **Call his/her primary care doctor** — share your observations; you can give information without their consent
- ☐ **Schedule a follow-up visit sooner than planned** — one visit gives a snapshot; two give a comparison
- ☐ **Have a direct conversation with him/her** — start with what you observed, not what you've concluded
- ☐ **Check in on his/her medications** — ask their doctor about a medication review or pharmacist consultation
- ☐ **Look into a home safety assessment** — an occupational therapist (OT) can evaluate fall risks and recommend modifications
- ☐ **Ask about physical therapy (PT)** — especially if you noticed gait or balance changes
- ☐ **Research local support options** — home care aides, meal delivery, transportation services, senior centers
- ☐ **Talk to siblings or other family members** — get on the same page before having bigger conversations
- ☐ **Consider a geriatric care manager** — for an objective professional assessment of his/her overall situation

What Your Results Mean

1-3 boxes checked: Worth monitoring. Plan a follow-up visit within 4-6 weeks.

4-7 boxes checked: Time to act. Contact their doctor and schedule a more thorough assessment.

8+ boxes checked: Don't wait. He/she likely needs professional support now. Start with the doctor and a home safety evaluation.

SeniorSafetyAdvice.com

Expert advice for families navigating aging at home | Written by Esther Kane, OTR/L, CAPS, C.D.S.

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