

Fall Prevention Checklist for Businesses

The Tuscarawas County Health Department’s (TCHD) Fall Prevention Program has developed a simple checklist to assist your business in identifying effective ways to prevent falls among your staff, clients, and/or customers. Follow the instructions and answer the questions honestly and to the best of your ability.

Once complete, return the form in its entirety to the Fall Prevention Coordinator at the Tuscarawas County Health Department via one of the methods listed below. We will reach out to you and see how we may help address any improvement areas. You will also receive a follow-up survey on your experience with the checklist and to see if there have been any improvements or modifications to prevent falls.

Submit completed checklists to:

Abigale Rogers

Email: arogers@tchdnow.org

Alternate email: healthed@tchdnow.org

Phone: 330-343-5555 x.1110

Mail to: ATTN: Abigale Rogers

897 E. Iron Ave.

Dover, Ohio 44622

- I. Business Information—This information will be used to follow up with recommendations or to determine if modifications are needed. We may also send you free fall prevention education or help identify potential fall hazards.**

1. Industry/ Business Type (Manufacturing, Restaurant, Hospitality, Retail, etc.)
2. Zip code of business:
3. Do you have a current policy for fall prevention efforts? <input type="checkbox"/> Yes <input type="checkbox"/> No
4. In the last 2 years. Have any customers/clients/staff experienced a fall? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. Please provide the name, title, and contact information for the person we may follow up with and provide education (Manager, Owner, etc.):

Disclaimer: This is a no-obligation survey to assist with TCHD’s Fall Prevention Program service delivery goals. We are offering this as a free resource to businesses in Tuscarawas County.



897 E. Iron Ave.
Dover, OH 44622



(330) 343-5555
(330) 343-1601



www.tchdnow.org
director@tchdnow.org



Flooring – The following questions are intended to identify potential fall hazards on the floor or in the walkways inside your business.

<p>1. Are the walkways in your business clear and free of clutter (boxes, etc.)? <input type="checkbox"/>Yes <input type="checkbox"/>No (For example, if a walker cannot fit through a walkway, please select <i>no</i>.)</p>
<p>2. Are the following areas wide enough to accommodate a walker (ADA recommendation is thirty-six inches)?</p> <ul style="list-style-type: none"> ➤ Walkways or hallways <input type="checkbox"/>Yes <input type="checkbox"/>No ➤ Doorway or arches <input type="checkbox"/>Yes <input type="checkbox"/>No
<p>3. Are rugs or floor coverings secured to the floor? <input type="checkbox"/>Yes <input type="checkbox"/>No</p>
<p>4. Are there any of the following in places where customers, clients or staff walk:</p> <ul style="list-style-type: none"> ➤ Cords, extension cords, unsecured wires <input type="checkbox"/>Yes <input type="checkbox"/>No ➤ Unlevel/ damaged flooring <input type="checkbox"/>Yes <input type="checkbox"/>No ➤ Rugs <input type="checkbox"/>Yes <input type="checkbox"/>No ➤ Non-slip mats/weather mats <input type="checkbox"/>Yes <input type="checkbox"/>No
<p>5. Do you have a current policy, rule, or procedure for inspecting floors and walkways or cleaning up spills? <input type="checkbox"/>Yes <input type="checkbox"/>No <input type="checkbox"/>Unsure</p>
<p>6. Questions or other concerns regarding flooring or walkways:</p>

II. Stairs—The following questions are intended to identify any potential fall hazards on or around any stairs on the property.

<p>1. There is at least one step or one set of stairs on the property that the public or staff use (If not, please continue to IV. Bathrooms): <input type="checkbox"/>Yes <input type="checkbox"/>No</p>
<p>2. Are the stairs(s):</p> <ul style="list-style-type: none"> ➤ Free of clutter or loose objects <input type="checkbox"/>Yes <input type="checkbox"/>No ➤ Well-lit <input type="checkbox"/>Yes <input type="checkbox"/>No ➤ Uneven or narrow <input type="checkbox"/>Yes <input type="checkbox"/>No ➤ Carpeted <input type="checkbox"/>Yes <input type="checkbox"/>No <ul style="list-style-type: none"> ▪ If carpeted, is the carpet secured to the stairs? <input type="checkbox"/>Yes <input type="checkbox"/>No <input type="checkbox"/>Not applicable ➤ Painted with anti-slip paint, or with non-slip tread? <input type="checkbox"/>Yes <input type="checkbox"/>No
<p>3. Are there handrails present wherever there are stairs? <input type="checkbox"/>Yes <input type="checkbox"/>No</p>
<p>4. Questions or other concerns regarding stairs:</p>

IV. Bathrooms – The following questions are intended to identify any potential fall hazards in the bathrooms inside your business.

1. There is at least one bathroom on the property: <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, please skip section)
2. Are the bathrooms well-lit: <input type="checkbox"/> Yes <input type="checkbox"/> No
3. Are the walkways in the bathroom clear of clutter, spills, leaks, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No
4. The flooring is in good condition (not broken, cracked tile, or uneven): <input type="checkbox"/> Yes <input type="checkbox"/> No
5. Are there rugs or mats in the bathrooms? <input type="checkbox"/> Yes <input type="checkbox"/> No ➤ If yes, are rugs or mats secured to the floor on all sides? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
6. Are there grab bars near at least one toilet? <input type="checkbox"/> Yes <input type="checkbox"/> No
7. Are there wet floor signs available if needed? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. Questions or concerns regarding the bathrooms:

V. Exterior – The following questions are intended to identify any potential fall hazards around the exterior of your business.

1. Are sidewalks or walkways outside your business: ➤ Clear of clutter, debris, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No ➤ In good condition (even, no large holes or cracks, etc.)? <input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are there mats or rugs near the entrance/exit? <input type="checkbox"/> Yes <input type="checkbox"/> No ➤ If yes, are rugs or mats secured to the floor on all sides? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
3. Are there stairs to enter the building? <input type="checkbox"/> Yes <input type="checkbox"/> No ➤ If yes, is there a sturdy handrail? <input type="checkbox"/> Yes <input type="checkbox"/> No
4. Are the entrance and exit well-lit? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. Questions or comments regarding the exterior of your building:

For information about the importance of older adult fall prevention, the cost, and the risk of falling in Ohio, please visit one of the following resources:

- Center for Disease Control and Prevention: <https://www.cdc.gov/steady/index.html>
- National Council on Aging: <https://www.ncoa.org/article/get-the-facts-on-falls-prevention/>
- National Safety Council: <https://injuryfacts.nsc.org/home-and-community/safety-topics/older-adult-falls/>
- Ohio Department of Aging: <https://aging.ohio.gov/care-and-living/health-and-safety/fall-prevention/facts-aboutfallsinohio1#:~:text=One%20in%20three%20Ohioans%20age,and%2075%2C091%20emergency%20department%20visits.>

For use by the Tuscarawas County Health Department Fall Prevention Program only.

Received date:

Received by:

First attempt at follow-up:

Recommendations/Updates:

Second attempt at follow-up:

Recommendations/Updates:

Third attempt at follow-up:

Recommendations/Updates:

Comments:

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