

RED FLAGS TO SPOT WHEN VISITING AGING PARENTS

CHECKLIST



SAFETY

Okay

Needs
Attention

- | | | |
|--------------------------|--------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Are all door and window locks operational? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are there any loose rugs that could pose a trip hazard? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are all areas of the home well-lit, especially around stairs, in the bathroom and |
| <input type="checkbox"/> | <input type="checkbox"/> | Are cooling and heating systems working properly – especially important in cities |
| <input type="checkbox"/> | <input type="checkbox"/> | Have they sent out any checks or money in large amounts to suspicious recipients, which could mean they've become victims of financial fraud? |
| <input type="checkbox"/> | <input type="checkbox"/> | OTHER: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | OTHER: _____ |

HEALTH & HYGIENE

Okay

Needs
Attention

- | | | |
|--------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Is your parents' hair a little greasy or unkempt? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are their nails or toenails too long? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are all medications on hand or refills on order? |
| <input type="checkbox"/> | <input type="checkbox"/> | Is there a pile of dirty laundry getting taller? Are their clothes smelly? |
| <input type="checkbox"/> | <input type="checkbox"/> | Has the shower been used? |
| <input type="checkbox"/> | <input type="checkbox"/> | Is your parent collecting and hoarding seemingly useless objects, which could cause an infestation of bugs, mold, or other health hazards? |
| <input type="checkbox"/> | <input type="checkbox"/> | Have you noticed other changes in their physical appearance, such as weight loss or limping? |
| <input type="checkbox"/> | <input type="checkbox"/> | OTHER: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | OTHER: _____ |

FOOD

Okay

Needs
Attention

- | | | |
|--------------------------|--------------------------|----------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Is food growing mold in the refrigerator or elsewhere? |
| <input type="checkbox"/> | <input type="checkbox"/> | Does it appear that your parent is having take-out or fast-food more often than usual? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are they forgetting how to make meals they once knew well? |
| <input type="checkbox"/> | <input type="checkbox"/> | Have they left food burning on the stove? |
| <input type="checkbox"/> | <input type="checkbox"/> | OTHER: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | OTHER: _____ |

HOUSE MAINTENANCE

Okay

Needs
Attention

- | | | |
|--------------------------|--------------------------|----------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Is the trash or recycling overflowing? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are the leaves clogging the gutters? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are driveways or walkways icy or snow piled up well beyond the snow fall? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are there any holes in the roof or carpets that are fraying? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are there any bad or foul odors or signs of mold, which could pose respiratory issues? |
| <input type="checkbox"/> | <input type="checkbox"/> | OTHER: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | OTHER: _____ |

SOCIAL, MENTAL, AND COGNITIVE HEALTH

Okay

Needs
Attention

- | | | |
|--------------------------|--------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Have they been keeping up with their social activities, such as attending a local senior center, church, volunteer work, or pickleball match? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do they seem to have lost their motivation to do much except watch television? |
| <input type="checkbox"/> | <input type="checkbox"/> | Have they lost touch with close friends or family they used to connect with regularly? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are they having trouble using technology, like their smartphone, instant messaging, or video chat? (such tools can help reduce isolation) |
| <input type="checkbox"/> | <input type="checkbox"/> | Have they stopped engaging in their favorite hobbies at home, such as gardening, cross-stitch, or other crafts? |
| <input type="checkbox"/> | <input type="checkbox"/> | Have you noticed overdue bills lying around? |
| <input type="checkbox"/> | <input type="checkbox"/> | OTHER: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | OTHER: _____ |



COURTESY OF KAPOK AGING & CAREGIVER RESOURCES:

www.multiculturalcaregiving.net