

The Modified Falls Efficacy Scale

Name _____

Date _____

On a scale of 0 to 10, please rate how confident you are that you can do each of these activities without falling, with 0 meaning "not confident/not sure at all", 5 being "fairly confident/fairly sure", and 10 being "completely confident/completely sure".

Note:

- * If you have stopped doing the activity at least partly because of being afraid of falling, score a 0
- * If you have stopped an activity purely because of a physical problem, leave that item blank (these items are not included in the calculation of the average MFES score).
- * If you do not currently do the activity for other reasons, please rate that item based on how you perceive you would rate it if you had to do the activity today.

		Not Confident			Fairly Confident					Completely Confident		
	Activity	0	1	2	3	4	5	6	7	8	9	10
1.	Get dressed and undressed											
2.	Prepare a simple meal											
3.	Take a bath or a shower											
4.	Get in/out of a chair											
5.	Get in/out of bed											
6.	Answer the door or telephone											
7.	Walk around the inside of your house											
8.	Reach into cabinets or closet											
9.	Light housekeeping											
10.	Simple shopping											
11.	Using public transport											
12.	Crossing roads											
13.	Light gardening or hanging out the washing *											
14.	Using front or rear steps at home											

* Rate most commonly performed of these activities

Score/Item Rated= ____/____

Average= ____