

## Occupational Therapy's Role with Home Modifications

Occupational therapy provides clients with the tools to optimize their home environments relative to individual abilities and promote full participation in daily life activities. As the population of older adults continues to grow, home modifications are a key factor in enabling individuals to “age in place,” or live in the place or home of choice. An AARP (2010) study found that more than 85% of people older than age 50 want to age in their own homes for as long as possible. Home modifications also can benefit clients of all ages with health conditions, sensory or movement impairments, or cognitive disorders by supporting the performance of necessary and desired daily activities (occupations), safety, and well-being.

Home modifications are changes made to adapt living spaces to increase usage, safety, security, and independence. The home modification process includes evaluating needs, identifying and implementing solutions, training, and evaluating outcomes that contribute to the home modification. The results of this process may be recommendations for alterations, adjustments, or additions to the home environment through the use of specialized, customized, off-the-shelf, or universally designed technologies; low- or high-tech equipment, products, hardware controls and cues, finishes, and furnishings; and other features that affect the layout and structure of the home.

### The Role of Occupational Therapy in Home Modifications

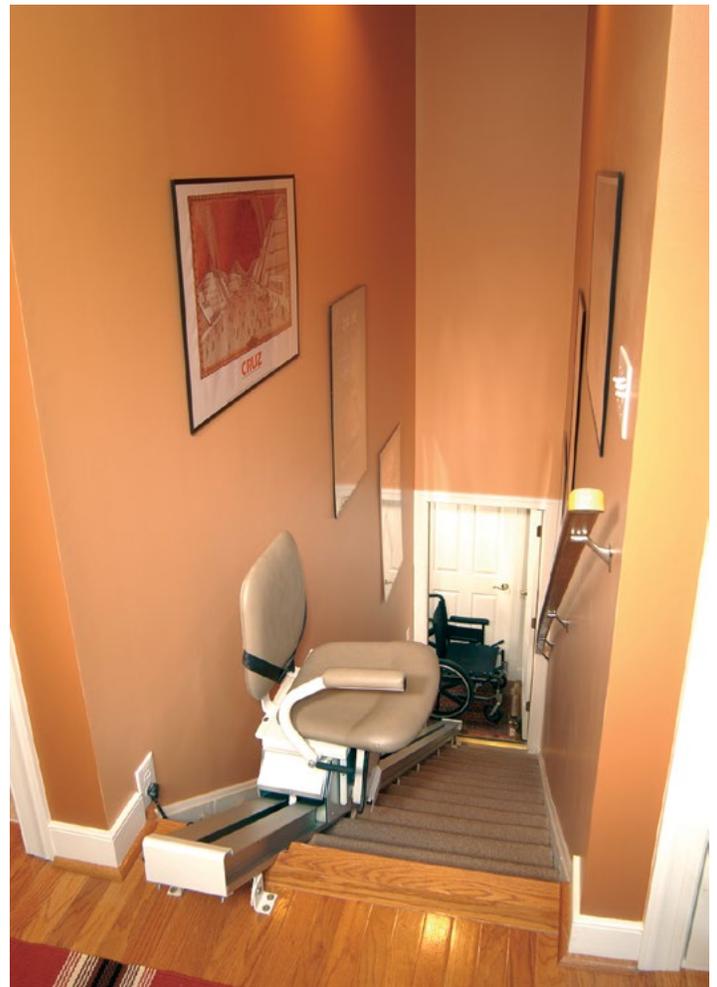
**Occupational therapy plays a key role in identifying strategies that enable individuals to modify their homes, thereby maximizing their ability to participate in daily tasks/activities.** Occupational therapy practitioners are skilled at

recognizing how the environment affects the ability to perform desired occupations. An occupational therapist evaluates balance, coordination, endurance, safety awareness, strength, attention, problem solving, vision, communication, and many other functions while the individual performs daily tasks. In addition to the individual's performance abilities, occupational therapists also evaluate the home environment to identify barriers to performance. For instance, features can be identified that increase the risk of falls (e.g., loose banisters) or present other hazards (e.g., overloaded electrical outlets). Occupational therapists also review aspects of the home that may require modification to facilitate performance. For example, secure upper-body supports such as handrails or grab bars can assist someone who has difficulty balancing during functional mobility and self-care activities. As part of the evaluation, occupational therapists analyze how a person interacts with the environment to complete a task or activity. Through this process, modifications and intervention strategies are selected to improve the fit between these elements, with a goal of



maximizing safety and independence in the home. The intervention plan may include but is not limited to strategies such as adaptive equipment, lighting, family caregiver training, or remodeling.

***Occupational therapy services can be provided directly to clients who are experiencing a decline in safety or independence, or are planning for future needs.*** Occupational therapy practitioners provide client-focused intervention to adapt the environment in order to increase independence, promote health, and prevent further decline or injury. For example, most falls occur at home, from home hazards in combination with declining physical abilities (NIH Senior Health, n.d.). One strategy to reduce the incidence of falls is to have an environmental assessment and recommendations for modifications completed by an occupational therapist. In this type of situation, the occupational therapist can observe and evaluate all occupations (activities) occurring at and around the home, from activities of daily living (ADLs; bathing, dressing, other self-care activities) to instrumental activities of daily living (IADLs; preparing meals, doing laundry, performing home maintenance chores) to play and/or leisure activities (playing cards, exercising, playing a musical instrument, entertaining friends, enjoying hobbies). Based on that evaluation, recommendations can be made for modifications or client training to promote safety in the home.



Occupational therapy services are available in many places in the community: hospitals, home health agencies, clinics, rehabilitation or community agencies, or through private practice. They may be reimbursable under Medicare and some private health insurance plans when coverage criteria are met, including a physician referral.

Occupational therapy practitioners provide a valuable perspective to a team of professionals (e.g., other health care workers, builders, architects), caregivers, and the client during the home modification process.

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## References

AARP. (2010). *Home and community preferences of the 45+ population*. Retrieved from <http://assets.aarp.org/rgcenter/general/home-community-services-10.pdf>

NIH Senior Health. (n.d.). *Falls and older adults: Causes and risk factors*. Retrieved from <http://nihseniorhealth.gov/falls/causesandriskfactors/01.html>

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Occupational therapy enables people of all ages live life to its fullest by helping them to promote health, make lifestyle or environmental changes, and prevent—or live better with—injury, illness, or disability. By looking at the whole picture—a client’s psychological, physical, emotional, and social make-up—occupational therapy assists people to achieve their goals, function at the highest possible level, maintain or rebuild their independence, and participate in the everyday activities of life.