

Providing Home Modifications

Disability-Competent Care Webinar Roundtable Series

Home modifications remove barriers and enable individuals with functional limitations to live in a less restrictive version of their home. They support safety and self-reliance, thereby minimizing the need for assistance and caregiver support. When implementing a home modification plan, it is important to ensure that the individual with disabilities, or “participant,” is involved in every step of the process.

Home modification involves five steps:

1. **Identify the need:** The need for home modifications may accompany a life change such as:
 - A decline in functional status;
 - A move;
 - A change in adaptive equipment; or
 - A caregiver is feeling increasingly challenged in meeting the needs of the participant.
2. **Conduct assessment:** Rehabilitation professionals (occupational and physical therapists) and contractors with expertise in design and structural modifications are best prepared to conduct an assessment. The assessment unfolds in three stages:
 - First, the assessor gathers information on the goals and scope of the assessment and the funding source for the potential modifications.
 - Second, the assessor meets the participant to understand his or her priorities, physical limitations, functional abilities, and equipment needs.
 - Third, the assessor evaluates the home to understand how it addresses the participant’s functional needs.
3. **Recommend and plan for modifications:** All involved parties (i.e., the participant, family, caregivers, care coordinators, and funders) discuss the recommended modifications and then negotiate a scope, pricing, and timeline.
4. **Implement the recommendations:** Implementation goes more smoothly when:
 - All affected individuals (participant, family members and care givers) are actively involved;
 - There is a realistic understanding of the timeline;
 - Limitations of the expected outcome are acknowledged;
 - Funding sources are secured; and
 - The participant is able to manage during the construction.

Home modifications vary from basic reorganization of space and minor additions to large-scale renovations. Examples include:

- Ramps
- Enlarged doorways
- Handrails
- Grab bars
- Lever faucets
- Higher toilets
- Wheel-in showers
- Roll-under or pull-out counters
- Cupboards and appliances that allow for better access

Orient user to modifications: It is critical that the participant thoroughly understands and is completely comfortable using the modifications. The assessor is responsible for reviewing all the modifications with the participant, without assuming that the client or caregivers already know what to expect or how to work with the changes. It may be helpful to refer the participant to another rehabilitation specialist that can continue working with him or her and caregivers long term to help them get used to the modifications.

Additional Resources

Please visit the *Resources for Integrated Care* website (www.resourcesforintegratedcare.com) for the “Training in Disability-Competent Care and Supports” webinar series, which served as the basis for this brief and for other Disability-Competent Care-related resources including an interactive self-assessment tool.