THE KITCHEN TABLE CHAT: NEGOTIATING HOME MODIFICATION RECOMMENDATIONS PART 1 & 2  
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Abstract

Home modification recommendations are an important role for the community based Occupational Therapist (Winfield, 2003). There is little in the literature to guide practice for the non senior clinical populations who require extensive modifications and have professional caregivers. This two part workshop will comprehensively review evidence based content of a comprehensive home assessment.

Introduction

Structuring a home modification recommendation is a complex process in which the occupational therapist functions as a physical access consultant and a catalyst for change within the environment of a child with physically complex need. The current academic preparation for students in occupational therapy spends scant time focused on home modification assessment. The literature provides little guidance to the clinician beyond the geriatric literature and is predominantly focused on the physical aspects of home modification (Gitlin, Schinfeld, Winter, Corcoran, Boyce, & Hauck, 2002; Iwarsson, 1999; Keysor, Jette, & Haley, 2005; Oliver, Blathwayt, Brackley, & Tamaki, 1993; Sanford, J.A., Pynoos, Tejral, & Browne, 2002) with little attention to analyzing the capacity of the caregivers and examining the environmental context of the client and ensuring an enduring modification which tolerates growth and changes in functional status (Green, 2006). Furthermore, when choices are limited by the funder’s mandates or caps the clinician must have a staged, long term approach.

Outcome Statement

Part A of this presentation is based on grounded theory research (Charmaz, 2006) which examined what factors elite clinicians (Hiss, MacDonald & Davies, 1978) were considering when they performed a home modification assessment and how they were synthesizing this information. It will provide a practical, clinically based framework from which to structure a home environmental assessment and is based on the International Classification of Functioning, Disability and Health (ICF) (WHO, 2001). Part B of the presentation will review an assessment template that demonstrates clinical reasoning as part of the documentation of the recommendation using a case study to illustrate the assessment process and use of the template.

Objectives

Part 1:

3. To identify and examine relevant environmental factors which must be considered in home assessments for populations requiring extensive physical home modifications.
4. To provide a “toolkit” for home assessments; necessary strategies and required items to perform the assessment.
Part 2:

2. To review an evidence-based assessment tool that guides clinical reasoning using a case study model.

Results/Practice Implications

This study provides the first comprehensive analysis of how OTs are currently structuring home modification recommendations and what factors are influencing the content of the recommendations. It suggests a caregiver-centred model of care in which the OT negotiates a sensitive outcome for all stakeholders. It gives clinicians working with any physically complex population a framework for structuring home modification recommendations.

References

17. Green, S.E. (2006). ‘We’re tired, not sad’: Benefits and Burdens of Mothering a Child with a Disability, Social Science and Medicine, 64, 150-163.

Speaker Bio

Tanya Glencross-Eimantas has been a practicing clinician for 20 years and currently works at ErinoakKids Centre for Treatment and Development as professional practice leader. Her graduate work has focused on home modification assessments and caregiver capacity evaluation. Over her career, Tanya has worked with many different client populations.