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Falling into Home Mods: Occupational Therapy’s Role in Keeping Older Adults Safe at Home

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Falling Into Home Mods:
Occupational Therapy’s Role in Keeping Older Adults Safe at Home

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Presented in Partial Fulfillment of the Master of Science in Occupational Therapy degree at Thomas Jefferson University

Objectives of Presentation:
1. Describe the most recent evidence pertaining to the efficacy of occupational therapy-based home modifications in reducing falls in community-dwelling older adults
2. Differentiate occupational therapy's role in home modifications from other health professions
3. Recognize home modification strategies that can be used in clinical practice

Clinical Question:
Does occupational therapy guided home modifications reduce the risk for falls and/or increase fall efficacy in the daily activities of well elders living at home?

Methods:
Keywords
• Population
  o Older adults, senior citizens, well elder
  o Home-dwelling, community-dwelling
• Intervention
  o Home assessment/modification, accessible
  o Occupational therapy
• Outcome
  o Falls, fall prevention, risk factors, fall efficacy, fear of falling
  o Fear, Activities of Daily Living, Instrumental Activities of Daily Living, safety

Databases searched
• CINAHL, MEDLINE, PsychINFO, Scopus, Cochrane, ERIC

Article Appraisal
• 10 articles included in final review
  o Each article critiqued separately by two individuals
  o Interpretation discrepancies discussed in person

Themes:
High Risk
• Home modifications are effective in the reduction of falls with individuals who are high risk
  o High risk factors include prior history of falls, functional decline, and comorbidities
  o History of falls was most prevalently mentioned as the high-risk population benefiting from home modifications

Adherence
• Individuals are more likely to adhere to recommendations if:
  o Intrinsic and extrinsic factors are considered for each modification
  o The home modifications are inexpensive

PEO-fit
• Interventions should be individualized, not one size fits all
• Modifications should be conducted by a health professional who considers the dynamic interactions between the person and environment
• Interventions incorporating the person, environment, and occupation decrease rate of falls

Inconsistencies
• Varied definitions of falls
• Lack of standardized measures and outcomes
  o Varied methods of recording falls
  o Difficulty isolating direct effect of home modification from multi-factorial approach

Future Research:
• Need for more studies in United States
• More research on fall efficacy needed-most research is based on risks, rate and number of falls
• Need for studies that differentiate between the role of an occupational therapist and other health professionals in home modifications
References


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