



# **The Home Modification Service-Delivery Model: A Transdisciplinary Team Approach**



## Executive Summary

**This model was generated through consensus by an interdisciplinary subcommittee of the National Home Safety and Home Modification Work Group and approved by the full Work Group. The subcommittee compiled this information reflecting evidence-based and best practices across members' experiences and discipline-specific perspectives.**

Designed for a broad professional audience, the Home Modification Service Delivery Model applies to a range of consumer home modification needs, from planning ahead to age in place to responding to acute functional changes. Its application encompasses relatively small and simple modifications to the more complex. The model reflects the ideal, but it is not intended to be prescriptive. The implementation process will be influenced by many variables including resource availability and funding source requirements. The intent is not to be exclusionary or unrealistic, but to share a service delivery model that addresses the complex factors influencing the home modification process.

### **The transdisciplinary team approach featured in this model requires:**

- Clearly defined roles
- Consensus decision-making
- Open communication
- Defining clear expectations
- Ongoing client-centered approach

The goal of this model is to expand access to optimal home modification interventions for older adults and people with disabilities. Its objectives are to improve: 1) knowledge of the complexity of the problem and the needs, and 2) awareness of the types of providers that can and should be involved across the phases of home modification to increase the likelihood that consumers will receive the right services at the right time delivered by the right professionals regardless of their point of entry to the process. Whether you are a health care provider or community-based organization, you have the potential to impact this process for consumers by leveraging this model.



## Introduction to the Team Approach

Home modification is a multidisciplinary field that involves professionals from the housing, disability, aging, and health care sectors. Older adults, people with disabilities, and their care partners should always be at the center of the home modification process.

### Descriptions of Professionals on the Home Modification Service Delivery Transdisciplinary Team

| PROVIDER TYPE                          | DESCRIPTION  |
|--|--|
| <b>Occupational Therapists</b>         | Licensed health care professionals who work with individuals to facilitate full participation in their daily activities by adapting the home environment to increase independence, promote health, and prevent further decline or injury. Advanced certifications in home modification can also be obtained from approved providers offering American Occupational Therapy Association (AOTA) continuing education units. Occupational therapy assistants may collaborate in this process. |
| <b>Physical Therapists</b>             | Licensed health care professionals who help people move more safely, with greater ease and less pain, to support independence. Specialty certifications include Board-Certified in Geriatric Physical Therapy from the American Physical Therapy Association (APTA). Physical therapist assistants may collaborate in this process.  |
| <b>Nonprofits</b>                      | Organizations that provide safe and healthy housing services including home modifications and repairs for low-income older adults. They oversee service delivery coordination and often serve as the client's main contact. Examples include Rebuilding Together, Habitat for Humanity, area agencies on aging.  |
| <b>Architects</b>                      | Conduct site visits to determine the feasibility of recommended modifications and produce scaled, stamped drawings to assist contractor in obtaining a building permit.  |
| <b>Contractors</b>                     | Licensed and insured; handle complex installations such as demolition for widening doorways and pulling up tile floors.  |
| <b>Care Managers</b>                   | Help individuals and their families to identify needs and find resources and services to meet those needs. Sometimes a licensed health care worker.  |
| <b>Primary Care Providers</b>          | Conduct Medicare Annual Wellness Visits, providing an opportunity to identify safety or falls risk concerns, address preventive needs, and provide necessary referrals.  |
| <b>Specialized Equipment Installer</b> | Specially trained technicians required by some manufacturers to install particular equipment (stair glide, ceiling track lift, elevator, etc.).  |
| <b>Handy Persons</b>                   | Trained, experienced, and affiliated with a home repair/home modification organization or aging service provider. Conduct simple home improvements such as installation of grab bars and offset hinges.  |



## Other Professional Qualifications to Consider

The following list describes additional characteristics that may enhance the success of home modifications for older adults to be considered alongside the above individual discipline contributions.

### TRAINING

- American Occupational Therapy Association (AOTA) provides approved provider status for multiple certifications in environmental modification
- Living in Place Institute Certified Living in Place Professional (CLIPP) Training
- National Home Builders Association Certified Aging in Place Specialist (CAPS)
- USC Leonard Davis School of Gerontology Executive Certificate in Home Modification (ECHM)
- American Physical Therapy Association (APTA) offers Board-certification in Geriatric Physical Therapy
- Center for Inclusive Design and Environmental Access Center offers courses on Universal Design

### EXPERIENCE

- Working with particular populations (older adults, people with disabilities)
- Types of modifications (entrance/exterior, bathroom, use of equipment, general lighting and flooring, new build with universal design)
- Working with other team members (contractor, occupational therapist, physical therapist, architect, service coordinators)

### INTERPERSONAL SKILLS

- Working in different environments/settings (home care, outpatient, acute rehabilitation, care coordination)
- Interested
- Easy to work with, easily understood when communicating
- Good listener
- Person-centered and takes a tailored approach to address each individual's specific needs
- Respects cultural preferences/differences
- Team collaborator that brings people together



## The Home Modification Service Delivery Process

The home modification service delivery process is not prescriptive, but rather fluid and nuanced based on individual need, preferences, and access to team members. The process may unfold differently for different individuals, but, ideally, comprehensive team approaches are the goal. This model represents the ideal approach based on evidence and expert perspectives. We recognize that many community partners may contribute to identifying home modification needs (e.g., area agencies on aging, senior center directors, non-profits, first responders, churches, neighborhood associations, and others).

### We have divided the process into four steps:

- 1. Intake:** The process of determining eligibility and need for services based on the provider’s perspective and requirements. The entity that conducts intake is typically the one the consumer contacts first and/or is available, or the agency to which the consumer is referred by another agency, consistent with the “No Wrong Door” approach to accessing long-term supports and services.
- 2. Assessment:** The exploration and determination of specific needs.
- 3. Completion of Home Modifications:** The conduct of the work to make the agreed-upon changes.
- 4. Follow Up:** The review of completed work and proper use and impact of the changes, which may lead to further adaptations. This should be conducted with the person who completed the initial assessment and other members of the team, as appropriate.

## The Transdisciplinary Home Modification Service Delivery Team

| INTAKE   | ASSESSMENT/<br>DESIGN                                     | COMPLETION<br>OF HOME<br>MODIFICATIONS   | FOLLOW-UP   |
|--|---|--|---|
| Occupational Therapist<br>Nonprofit<br>Primary Care Provider<br>Physical Therapist<br>Care Manager | Occupational Therapist<br>Physical Therapist<br>Architect | Contractor<br>Handy person/<br>Equipment installer<br>(e.g., stair glide, ceiling<br>track lift, elevator) | Occupational Therapist<br>Nonprofit<br>Referring Provider<br>Physical Therapist<br>Care Manager |

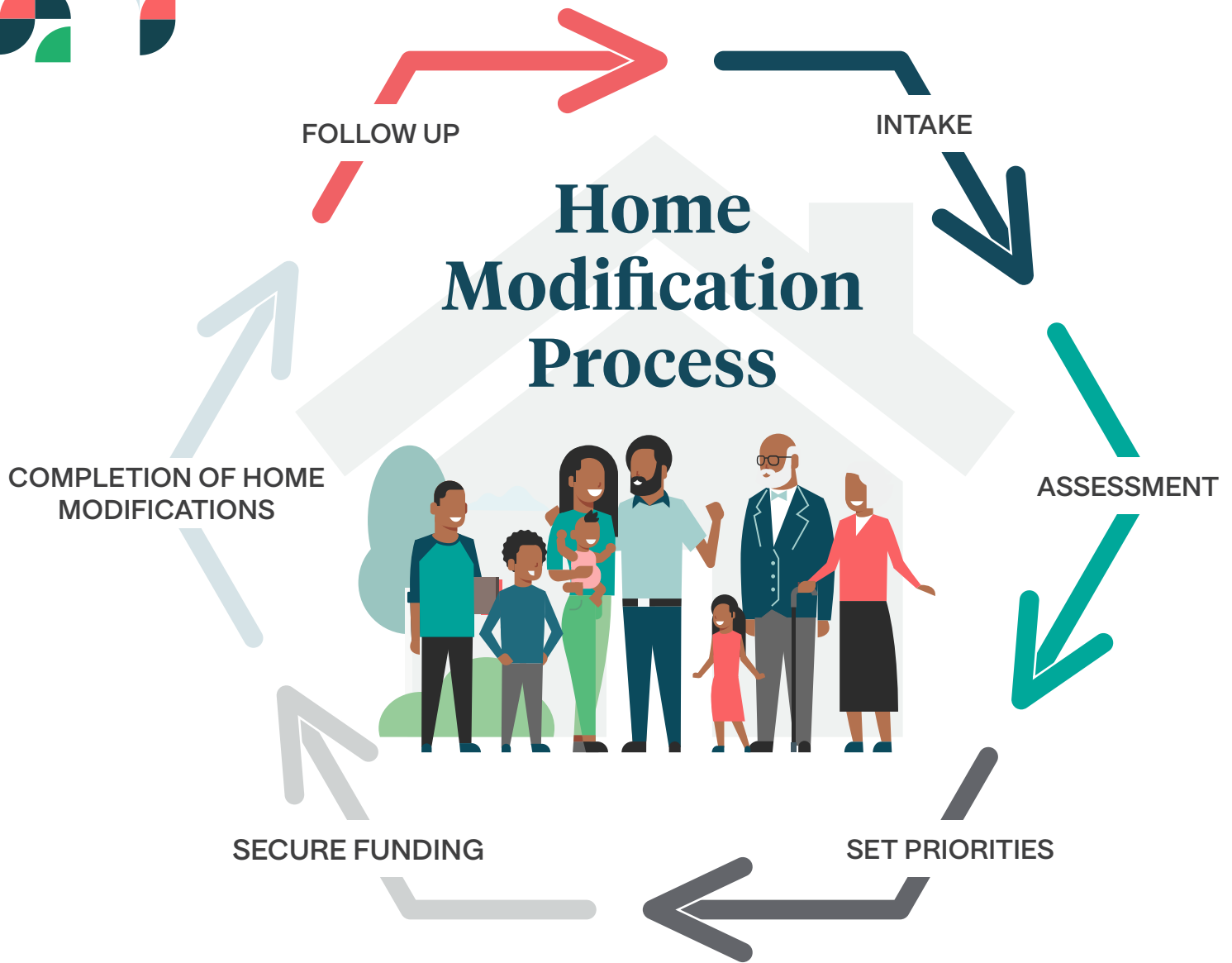


# Professional Group’s Role in Each Phase of the Home Modification Service Delivery Process

**Note:** The process is not prescriptive, but rather fluid and nuanced based on individual need, preferences, and access to team members. The process may unfold differently for different individuals, but ideally, comprehensive team approaches are the goal. This model represents the ideal approach based on evidence and expert perspectives.

| TEAM MEMBERS                            | ROLES   |
|---|---|
| <b>INTAKE</b>                           |   |
| <b>Occupational Therapists</b>          | Conduct intake and handle process, often upon referral by physician, health care provider, or aging network professional; often post-acute care episode or when potential risk is identified to prevent future injuries or loss of independence during rehabilitation after an injury, post-discharge from the hospital, or upon referral by physician or health care or aging network professional.          |
| <b>Nonprofits*</b>                      | Conduct intake or refer out, match funding sources to support project.  |
| <b>Primary Care Providers</b>           | Conduct Medicare Annual Wellness Visit, an opportunity to identify safety or falls risk concerns, and refer to specialists or programs as needed.   |
| <b>Physical Therapists</b>              | Conduct intake, often as part of the process of performing an evaluation, and determine what referrals are needed within the team to optimize the home modification.  |
| <b>Care Managers</b>                    | Conduct intake or refer out, match funding sources to support project.  |
| <b>ASSESSMENT/DESIGN</b>                |   |
| <b>Occupational Therapists</b>          | Perform a comprehensive evaluation of functional status based on a person's ability to do the things they want and need to do, and provides personalized recommendations to increase safety, ease, and ability now and in the future. Work with the individual to ensure the recommended changes to the home are consistent with their client's wants, and current and future needs, skills, and environment. |
| <b>Physical Therapists</b>              | Perform a comprehensive evaluation of a person's mobility status. This allows the physical therapist/client/caregiver team to determine the most appropriate plan of care to achieve the individual's goals. Can include home safety evaluation to minimize fall hazards while maximizing independence and optimal aging now and into the future.   |
| <b>Architects</b>                       | Conduct a site visit to determine feasibility of recommended modifications; take measurements, photos, and produce scaled, stamped drawings to assist contractor in obtaining a building permit. Ensure that modifications are structurally, feasible, sound, and to code.  |
| <b>COMPLETION OF HOME MODIFICATIONS</b> |   |
| <b>Contractors</b>                      | Handle complex installations such as demolition for widening doorways and pulling up tile floors.   |
| <b>Equipment Installers</b>             | Install certain equipment (stair glide, ceiling track lift, elevator, etc.) as required by the equipment manufacturer.  |
| <b>Handy persons</b>                    | Conduct simple home improvements such as installation of grab bars, offset hinges, aluminum ramps.  |
| <b>FOLLOW-UP</b>                        |   |
| <b>Occupational Therapists</b>          | Conduct a follow-up assessment, often with client education and training on the safe and proper use of adaptive equipment. Will also inspect the work to ensure it meets requirements and complete a work order for any necessary adjustments.  |
| <b>Physical Therapists</b>              | Conduct follow-up to ensure that any modifications implemented support the individual's performance level and promote optimal aging and independence in the home. Conduct annual re-checks to assure that continued needs are met.  |
| <b>Nonprofits</b>                       | If provided intake and oversaw service provision, conduct follow-up to ensure proper installation of home modifications and modifications meet the individual's needs.  |
| <b>Care Managers</b>                    | If provided intake and oversaw service provision, conduct follow-up to ensure proper installation of home modifications and modifications meet the individual's needs.  |

\*Examples include Rebuilding Together, Habitat for Humanity, area agencies on aging, and others



## Resources

**USC Leonard Davis**  
School of Gerontology

- National Council on Aging/National Falls Prevention Resource Center: <https://www.ncoa.org/professionals/health/center-for-healthy-aging/national-falls-prevention-resource-center>
- Fall Prevention Center of Excellence, USC Leonard Davis School of Gerontology: [www.homemods.org](http://www.homemods.org)
- American Occupational Therapy Association (AOTA): <https://www.aota.org/practice/practice-settings/home-modifications-key-community-partnerships>
- American Physical Therapy Association (APTA) Geriatrics: <https://aptageriatrics.org/>
- Habitat for Humanity: <https://www.habitat.org/volunteer/near-you/find-your-local-habitat>
- Home Modification Occupational Therapy Alliance: [www.hmota.net](http://www.hmota.net)
- Housing and Services Resource Center, U.S. Administration for Community Living: <https://acl.gov/HousingAndServices>
- IDEa Center at SUNY Buffalo: <https://idea.ap.buffalo.edu/>
- National Association of Home Builders (NAHB): [lists professionals](#) who completed their Certified Aging in Place Specialists program.
- Rebuilding Together: <https://rebuildingtogether.org/find-your-local-affiliate>
- Home Modification Funding Sources Inventory, developed by the National Council on Aging and USC Leonard Davis School of Gerontology: [USC.NCOA\\_FundingSourcesforHM.pdf](#) (secureserver.net)



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