Home Modification Programs and Practices

Following is a list of evidence-based programs, many of which are available across the country, and best practices at the national, state, and local levels related to home assessments and home modification.

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Categories and Criteria

- Evidence-Based Program Criteria (U.S. Administration for Community Living's highest level benchmarks for evidence-based programs): https://www.acl.gov/programs/health-wellness/disease-prevention
 - Demonstrated through evaluation to be effective for improving the health and well-being or reducing disease, disability and/or injury among older adults;
 - Proven effective with older adult population, using Experimental or Quasi-Experimental Design;* and
 - Research results published in a peer-review journal; and
 - Fully translated** in one or more community site(s); and
 - Includes developed dissemination products that are available to the public.

*Experimental designs use random assignment and a control group. Quasi-experimental designs do not use random assignment.

** For purposes of the Title III-D definitions, being "fully translated in one or more community sites" means that the evidence-based program in question has been carried out at the community level (with fidelity to the published research) at least once before. Sites should only consider programs that have been shown to be effective within a real-world community setting.

- 2. Best Practices Criteria (based on Creative Practices Home Safety Report Evaluation Criteria):
 - Addresses fall prevention programming as a strategic priority;
 - Is sustainable and has been operating at least one year;
 - Can measure performance and incorporates performance measures in a continuous improvement effort;
 - Has established and nurtured strategic partnerships that expand its reach and service delivery and sustainability;
 - Has established processes for referring participants to other services;
 - Is reaching those older adults in need; and
 - Demonstrates a vision and the capability to expand to meet demand.

These reflect the evidence regarding characteristics of successful home safety programs offered in the context of fall prevention:

- Professionals play an important role in promoting older adults' efforts to reduce fall risk in the home.
- Partnerships are established to link seniors to needed services.
- Observation of the older adult performance and function is included in the home assessment.
- Outcomes are evaluated with the feedback serving a continuous guality improvement function.
- 3. Innovations Criteria: these home modification efforts include outstanding components that distinguish them from basic home modification delivery services



Evidence-Based Programs with Home Modification – Information for Professionals

Program Name and Website	Goals, Target Audience and Description	Delivered By and Training Requirements	Program Costs	Published Articles about Program
A Matter of Balance https://mainehealth.org /about/healthy- communities/healthy- aging/matter-of- balance	 Goals: Reduce fear of falling Increase activity levels Target Audience: Adults 60+ who are ambulatory, able to problem solve, concerned about falling, interested in improving flexibility, balance and strength and have restricted their activities because of concerns about falling Description: 8 weekly or twice weekly sessions 2 hours per session 8-12 group participants Emphasizes practical coping strategies to reduce fear of falling and teach fall prevention strategies Structured group intervention activities: Group discussion Problem-solving and skill building Assertiveness training Videos Sharing practical solutions Exercise training 	 Delivered By: 2 coaches (volunteer lay leaders) teach the class to participants Guest therapist visit (1 session for 1 hour) Training Requirements: Master Trainers: 2-day training and on-going updates Coach/Lay leader training: 8 hours, attend annual 2.5-hour training update 	 Licensing Cost: Everything is included in the training fee Training Cost: Master Trainer session (includes all materials): \$1,500 per Master Trainer plus travel Group training available at an agency's location upon request Post-training Materials Cost: Coach Handbook: \$20 Participant Workbook: \$13 Guest Therapist Handbook: \$6 DVD (Fear of Falling and Exercise: It's Never Too Late): \$164.76/set A Matter of Balance DVD: \$11.00 A Matter of Balance Lay Leader Model CD-ROM for Coaches: \$2.00 Please visit the website for the most recent Matter of Balance cost information. 	 Tennstedt S, Howland J, Lachman M, Peterson E, Kasten L, Jette A. A randomized, controlled trial of a group intervention to reduce fear of falling and associated activity restriction in older adults. <i>J Gerontol B Psychol Sci Soc</i> <i>Sci. 1998 Nov; 53(6):P384- 92.</i> Healy TC, Peng C, Haynes P, McMahon E, Botler J, Gross L. The feasibility and effectiveness of translating a matter of balance into a volunteer lay leader model. <i>Journal of Applied Gerontology</i> 2008; 27 (1):34-51.



Program Name and Website	Goals, Target Audience and Description	Delivered By and Training Requirements	Program Costs	Published Articles about Program
CAPABLE: Community Aging in Place, Advancing Better Living for Elders https://nursing.jhu.edu/ faculty_research/resea rch/projects/capable/in dex.html	 Goals: To reduce the impact of disability among low income older adults by addressing individual capacities and the home environment Target Audience: Low income older adults Description: 5-month, client-led program Occupational Therapist provides up to 6 home visits, Registered Nurse (up to 4 home visits), handyman (full day's work of home mods, assistive devices, and repairs) Directly addresses all risk factors for falls: medications, low vision, decreased leg strength, safe ADL ability, and home safety risks Addresses participants' own goals, e.g., to get upstairs, take a shower, or walk out the front door—and barriers that interfere with achieving these goals 	 Delivered By: Occupational Therapist (OT) Registered Nurse (RN) Handyman Training Requirements: Training curriculum for Occupational Therapists and Nurses, including self- paced electronic modules and an interactive in- person or Skype-type training Follow-up support calls once clinicians start to implement CAPABLE Training manual for both Occupational Therapists and Nurses included 	Most costs are staff costs (RN, OT, and Handyman) Interventionist training time In-home visit duration Travel time Supervisory meetings Visit preparation time Care coordination time between OT, RN and handyman Non-staff time costs include: Supplies and labor for home modifications, repairs, and assistive devices) Program materials Mileage (for driving to participants' homes)	 Szanton SL, Thorpe RJ, Boyd C, Tanner EK, Leff B, Agree E, et al. Community aging in place, advancing better living for elders: a biobehavioral- environmental intervention to improve function and health- related quality of life in disabled older adults. J Am Geriatr Soc. 2011; 59(12):2314–20. Szanton, SL, Leff, B, Wolff, JL, Roberts, L & Gitlin, LN. Home-based care program reduces disability and promotes aging in place. Health Affairs 2016; 35(9):1558–63. doi: 10.1377/hlthaff.2016.0140
FallScape http://www.fallscape.or g/	 Goals: Increase falls prevention behaviors and falls self-management skills Improve recognition of fall threats and self-efficacy Enhance fall threat recognition and prevention behaviors with multimedia Prevent participant falls and reduce fall risk. 	 Delivered By: One to four trained facilitators Training Requirements: Interview, follow-up and telephone check-ins; multimedia training and evaluation can be 	 Licensing Cost: Included in training costs. Training Cost: FallsTalk training plus \$250 - \$490 depending on program components (1 or 2 days which must be taken separately from FallsTalk training and each other); Package includes training, 	Schepens SL, Panzer V, Goldberg A. Randomized Controlled Trial Comparing Tailoring Methods of Multimedia-Based Fall Prevention Education for Community-Dwelling Older Adults. <i>Am J Occup Ther.</i>



Program Name and Website	Goals, Target Audience and Description	Delivered By and Training Requirements	Program Costs	Published Articles about Program
	 Target Audience: Adults 50+ who have fallen or are experiencing regular loss of balance, and are at risk for falls or are concerned about falling Description: A 1-6 month personalized multimedia behavior change program delivered in 2 to 4 one-on-one sessions utilizing provided software that includes: a) evidence-based fall risk screening and standardized FallsTalk interview (10-20 minutes) which creates customized intervention components and reports; b) FallScape interactive multimedia training (one or two 15-30 min. sessions); c) fall-related log training (5-10 min.); and telephone check-ins (2-5 min. each); d) follow- up interview and log review (10-20 min.); e) FallScape interactive multimedia evaluation (10-15 min.) 	 delivered by separate facilitators One or two days which must be completed separately Two days of FallsTalk training and demonstration of competency are required before FallScape training can begin In-person training is mandatory to insure program fidelity; FallScape training is a pre-requisite for enrollment in Advanced FallScape (Day 2) Included software matches trainee's abilities Training is offered at various sites or can be delivered onsite for groups by request 	software, multimedia elements, support for one year, and required competency testing. • Annual Subscription Cost: Starts at \$600 including FallsTalk license. Fee is based on both the number of users on-site and program components (see website for details). Subscription provides on-going site support, software and multimedia element updates, as well as web-based training	2011 Nov-Dec; 65(6): 702– 709.
Home Hazard Removal Program (HARP) <u>https://starklab.wustl.e</u> <u>du/resources/harp/</u>	 Goals: To reduce falls for older adults at high risk of a fall by removing hazards from a person's home Target Audience: Community-dwelling older adults who have fallen or are worried about falling 	Delivered By: Occupational Therapist Training Requirements: Trainings will be available soon. If you are interested, please contact: peplab@wustl.edu.	On average, the home modifications cost less than \$200. Training manuals range from \$40- \$50 plus shipping and handling. Contact <u>peplab@wustl.edu</u> for information about training availability.	 Stark, S, Keglovits, M, Somerville, E, Hu, Y-L, Barker, A, Sykora, D, & Yan, Y. Home hazard removal to reduce falls among community- dwelling older adults: A randomized clinical trial. JAMA Network Open,



Program Name and Website	Goals, Target Audience and Description	Delivered By and Training Requirements	Program Costs	Published Articles about Program
	Description: Older adults receive 1-3 one-on- one visits over one month with an occupational therapist (OT) in the home. During the first visit, the OT completes assessments of the older adult's abilities and awareness of fall risk behaviors. Next, the older adult and the OT work together to identify hazards in the home that increase the older adult's risk of having a fall. Then, the OT and the older adult identify appropriate solutions to remove those hazards and increase safety in the home. HARP aids in removing the home hazards, providing simple modifications and education on fall risks and strategies to address fall risks. More complex modifications are addressed in future visits and may include a contractor for installation.	The occupational therapist provider manual is available for \$40 plus shipping and handling. Contact peplab@wustl.edu to order. The HARP implementation toolkit for delivery in congregate living facilities is available for \$50. Contact peplab@wustl.edu to order.		 2021 4(8), e2122044. Found on the internet at <u>https://jamanetwork.co</u> <u>m/journals/jamanetworkop</u> <u>en/fullarticle/2783628</u> Stark S, Somerville E, Keglovits M, Conte J, Li M, Hu YL, Yan Y. Protocol for the Home Hazards Removal Program (HARP) study: A pragmatic, randomized clinical trial and implementation study. <u>BMC Geriatrics</u>, 2017 17(1): p. 90.
Healthy Steps for Older Adults https://www.aging.pa.g ov/aging- services/health- wellness/Healthy StepsFallPrevention/P ages/default.aspx	 Goals: to prevent falls, promote health, and ensure that older adults can remain as independent as possible for as long as possible, Healthy Steps for Older Adults aims to increase knowledge and awareness, introduce steps to reduce falls and improve health and well-being, and provide referrals and resources. Target Audience: Adults age 50 and over, including adults with low health-literacy (ability to read, understand, and act on health information). Description: Two workshops lasting approximately two hours each held in the 	Delivered By: One to two certified instructors Training Requirements: Workshop Leaders are required to take 3 online courses prior to attending a 2-day classroom training. The online courses are approximately 45 minutes each and the 2-day workshop runs approximately 6.5 hours each day.	Healthy Steps for Older Adults workshops are offered at no charge through Pennsylvania's 52 Area Agencies on Aging. Other organizations and facilities outside of Pennsylvania's Area Agency on Aging network can purchase a license to train Workshop Leaders and to conduct workshops. For more information on costs, email <u>wellness@pa.gov</u> .	Albert SM, Raviotta J, Lin CJ, Edelstein O, Smith KJ. Cost effectiveness of a statewide falls prevention program: healthy steps for older adults, Pennsylvania. Am J Manage Care 2016; 22(10):638-44.



Program Name and Website	Goals, Target Audience and Description	Delivered By and Training Requirements	Program Costs	Published Articles about Program
	community (e.g., senior centers, health care organizations) within and outside of Pennsylvania. Both workshops can be held in one day or over a two-day period. The workshops address common causes of falls including: environmental safety; balance, strength, flexibility, endurance exercises; nutrition; foot health; sensory deficits (vision/hearing); side effects of medication; health status; social connectedness; mental and spiritual well-being. Referral and follow-up are important components.			
Program of All Inclusive Care for the Elderly (PACE) http://www.npaonline.o	Goals: Comprehensive and seamless service delivery system and integrated Medicare and Medicaid financing Target Audience: Eligible individuals are age	Delivered By: An interdisciplinary team, consisting of professional and paraprofessional staff	 Exploring PACE membership, \$3,000 per organization Prospective provider membership, \$11,400 	Wieland, D., Boland, R., Baskins, J., Kinosian, B. (2010). Five-year survival in a Program of All-Inclusive Care for the Elderly
rg/ National PACE Association	55+ and meet the clinical criteria to be admitted to a nursing home but choose to remain in the community	Training Requirements: For a health care organization to be approved	 Provider membership, \$15,000 per organization, plus additional fees based on organization's 	compared with alternative institutional and home- and community-based care. <i>The</i>
(703) 535-1565 info@npaonline.org	Description: An array of coordinated services is provided to support PACE participants to prevent the need for nursing home admission Interdisciplinary team assesses participants' needs; develops care plans; and delivers or arranges for all services (including acute care and, when necessary, nursing facility services),	as a PACE program, the State must elect PACE as a voluntary State option under its Medicaid plan. The prospective PACE organization and the State must also work together to develop the PACE provider	revenue	Journals of Gerontology: Series A Biological Sciences and Medical Sciences, 65 (7): 721-26. For more articles: http://www.npaonline.org/poli cy-advocacy/state- policy/research
	either directly or through contracts. PACE programs provide social and medical services, primarily in an adult day health center setting	application. On behalf of the prospective provider, the State submits the		



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	referred to as the "PACE center," and supplement this care with in-home and referral services in accordance with the participants' needs. Each participant can receive all Medicare- and Medicaid-covered services, as well as other care determined necessary by the team.	application to the Centers for Medicare and Medicaid Services with assurance of its support of the application. Each approved PACE program receives a fixed amount of money per PACE participant regardless of services they utilize.		
SAIL (Strategies and Action for Independent Living) https://www.sailfitness. org/	 Goals: Physical activity program that reduces fall risk factors by increasing strength and improving balance Target Audience: Community-dwelling adults 65 years and older with a history of falls. SAIL is able to accommodate people with mild mobility difficulty Description: SAIL is offered three times a week in a 1-hour class. The duration of the class is determined by the organization providing it. The recommended class size of 8-15 people. The class includes warm up, aerobics, mandatory balance exercises, mandatory strength exercises, stretching, and education, which includes the topic of home safety. The exercises can be done standing or seated. 	Delivered By: Fitness, exercise science, and healthcare professionals who have completed the SAIL Instructor training. Training Requirements: Instructors must complete online or in-person training. Experience working with and teaching physical activity to older adults is preferred, and current CPR and First Aid certification is recommended.	SAIL is a public-domain program. There are no initial site license fees and no yearly renewal fees for conducting SAIL classes. The program can be provided free of charge or for a small fee for seniors as an approved Administration for Community Act Title 3D funding requirement. Living evidence-based program that meets the Older Americans	 Shumway-Cook A, Silver IF, LeMier M, York S, Cummings P, Koepsell T. The effectiveness of a community-based multi- factorial intervention on falls and fall risk factors in community living older adults: A randomized, controlled trial. <i>Journal of</i> <i>Gerontology: Medical</i> <i>Science</i> 2007; 62(12): 1420-1427. York SC, Shumway-Cook A, Silver I, Morrison C. A translational research evaluation of the "Stay Active and Independent for Life" (SAIL): a community- based fall prevention exercise and education program, <i>Health Promotion</i>



Program Name and Website	Goals, Target Audience and Description	Delivered By and Training Requirements	Program Costs	Published Articles about Program
				<i>Practice</i> 2011; 12(6):832- 839.
Stepping On <u>https://www.ncoa.org/a</u> <u>rticle/evidence-based-falls-prevention-programs</u>	 Goals: Offer strategies and exercises to reduce falls and increase self-confidence in making decisions and behavioral change in situations where older adults are at risk of falling Target Audience: Community-residing, cognitively intact older adults who are at risk of falling, have a fear of falling or who have fallen 1+ times in a year Description: 7 weeks, 2 hours per week A home visit or follow-up phone call by the program leader to facilitate follow-through with preventive strategies and to assist with home adaptations 2-hour booster session after 3 months Format includes workshops; balance and strength exercises during sessions and at home; guest expert presentations on topics including exercise, vision, medication management, and community safety; fall risk self-assessments; and a display of items to prevent falls. 	 Delivered By: Trained leader Trained peer leader Training Requirements: 3-day training for Leaders 	 Licensing Cost: First 3-year license included in the training cost Training Cost: On-site Wisconsin training (includes Stepping On Manual, weights, toolkit, and one fidelity check by video per Leader): Wisconsin residents: \$250 Non-Wisconsin residents: \$1,500 for 1- 2 people; \$1,200 for 3+ people Off-site training: \$12,000 for up to 20 individuals plus travel and lodging. The local (other state) must provide: 20 Stepping On Manuals, copies of toolkit and other materials, room rental, snacks and lunches for 3 days, weights, guest expert physical therapist on first afternoon of 3- day training, A-V equipment, easels, flipcharts, nametags, table tent cards, and display items. 	Clemson L, Cumming RG, Kendig H, Swann M, Heard R, Taylor K. The effectiveness of a community-based program for reducing the incidence of falls in the elderly: a randomized trial. <i>Journal of the American</i> <i>Geriatrics Society</i> . 2004. DOI: 10.1111/j.1532- 5415.2004.52411.x

SOURCES: Evidence-based Programs: <u>https://www.ncoa.org/wp-content/uploads/Title-IIID-Highest-Tier-Evidence-FINAL.pdf</u>; <u>https://www.ncoa.org/healthy-aging/falls-prevention/falls-prevention-programs-for-older-adults/</u>; and program websites.



Best Practices In Home Modification

Name of Program and Contact Information	Summary	Eligibility/Process/Cost
FallProof! (Nationwide) http://csa.fullerton.edu/education/cert-prog- history.php	Group-structured exercise program conducted in community and retirement facilities with primary focus on balance and mobility training aiming to simulate the same types of balance challenges encountered in life and reduce risk factors for falls Includes a self- administered home assessment with a list of recommendations for home modifications and related agencies. Delivered by two coaches who complete a four-month certification program of a didactic online course with seven learning modules plus a final 3- day practical competency workshop and evaluation. Renewal of certification is required every 2 years.	Adults 65+ with issues with balance and mobility due to falls, older adults at moderate-to-high fall risk based on established program criteria in community and residential care
Farewell to Falls Stanford University Medical Center (California) <u>https://stanfordhealthcare.org/for-patients- visitors/farewell-to-falls.html</u>	Comprehensive process with home visits by registered occupational therapist who gathers information about health history and daily living skills, completes a balance and mobility assessment, gets a list of medications to be reviewed by Stanford pharmacist, does a complete home safety survey, recommends fall risk methods, install home modifications as needed, and introduces an exercise program. Follow up calls are conducted by a volunteer twice a month and a third visit will be made one year after enrollment.	Adults 65 years and older
Pitt County Council on Aging Falls Prevention and Home Safety Services (North Carolina) http://www.pittcoa.com/senior-services/injury- prevention/	Offers Home Safety Assessments, Balance and Falls Risk Screenings to help individuals identify risk factors and learn fall prevention strategies, Home Accessibility Modifications (e.g. widening doorways, removing tubs, grab bars, stair rails and installing shower stalls, and A <i>Matter of Balance</i> evidence- based group classes to help individuals decrease the fear of	Pitt County, North Carolina adults ages 55 and older.



Name of Program and Contact Information	Summary	Eligibility/Process/Cost
	falling, learn falls prevention strategies and exercises to help reduce falls risk.	
Neighborhood Health Agencies: Senior HealthLink (West Chester, PA) https://www.chestercountyhospital.org/services- and-treatments/home-care/community-outreach	The goal of Senior HealthLink is to allow older adults to age in place while maintaining optimum health for as long as possible. including a home safety program, it is a free outreach program that benefits people age 65+ who have multiple medical issues and whose family are caring for them. It serves a low-income community and reaches a broad audience of older adults that includes frail individuals, while providing valuable hands-on experiences for senior nursing students. Initial visits are made following the return home from the hospital or emergency room. The Senior HealthLink program, in collaboration with the Chester County Health Department, developed a Home Safety Survey that student nurses administer during visits to older adults' homes. In addition, NHA uses a Fall Risk Assessment Form it developed that includes medication side effects, home safety and environmental factors, existing medical conditions, inactivity and mobility, nutrition, and hydration. The home visits are continuous and the assessment is tied to the case manager process, which ensures that referrals and minor modifications are completed. The strategic partnerships of Senior HealthLink with the Chester County Department of Health, Random Acts of Kindness Everywhere (Project RAKE), Good Works, and others expands the service capability of this program.	SHL clients are older adults who have been recently discharged from home care or the hospital, have chronic diseases, or are no longer eligible for insured home care, but who still need occasional monitoring and educational reinforcement to maintain their independence. In addition, SHL serves low-income and Hispanic elderly individuals who have limited access to health resources and/or lack transportation.
VNA of Care New England: Steady Strides (Warwick, RI) https://www.vnacarenewengland.org/fall- prevention	VNA Steady Strides program offers a comprehensive fall risk assessment for a high-risk population of skilled home care recipients and their caregivers throughout Rhode Island. A physical therapist completes an assessment of fall risk factors and a team of medical experts will review the patient's assessment and create a plan specially tailored to each individual which may	To qualify for this program, patients must be referred by their physician and meet the criteria for skilled home care. For a patient who is not currently receiving home health care from VNA of Care New England, a doctor may



Name of Program and Contact Information	Summary	Eligibility/Process/Cost
	home health aide to the home to help patients develop the necessary skills to minimize their risk factors. VNA of Care New England will contact the doctor and patient after the initial plan is complete to inform the provider of the content and expectations. Ongoing plans will be discussed with the patient at each visit. Older adults are actively involved in the decision making process and in coordinating changes to their home. Recommendations for professionals to complete home modifications are provided to clients and family members, or referrals are made to private contractors. The VNA maintains a list of recommended providers who have a history of working with the organization. The therapists provide detailed recommendations for the installation of equipment. The length of the program depends upon the patient's unique risk factors identified at the initial assessment.	performed by calling the Intake Department at VNA of Care New England. For a patient who is already receiving home health care from VNA of Care New England, a nurse will contact the doctor to request permission to have the initial assessment completed. All home care services are covered by insurance or through private pay or co-pay.



Innovations in Home Modification

Name of Program and Contact Information	Summary	Eligibility/Process/Cost
Habitat for Humanity 50+ Repair Program	Funded by The AARP Foundation, Habitat for Humanity International developed the 50+ Repair Program model for	
(National)	replication on the national level. Seven Habitat for Humanity	
www.habitat.org	affiliates developed a new form of volunteer assistance to deliver home modification services.	
Rebuilding Together	This national non-profit volunteer organization of affiliates across the country helps low-income homeowners, particularly those who	Low-income homeowners; free of charge
(National)	are elderly, disabled, or part of a family with children, live in safe	
	and supportive homes. Volunteers help paint, fix leaking roofs,	
www.rebuildingtogether.org	replace rotten steps, and modify homes make them homes safe and secure. They positively impact the availability of home	
	modifications by over 10,000 projects annually. Many affiliates	
	consult with health professionals such as occupational therapists.	
AARP, Rebuilding Together, and American	This pilot project helps homeowners age in place in the following	Eligibility: For moderate-income
Occupational Therapy Association (AOTA)	states: CA, MO, VA, OH, CO, WI, IL, OK, PA, NE & MN. Based on Rebuilding Together's Safe at Home program, which provides free	homeowners. Cost: Free
Collaboration	home modifications to low-income homeowners, this pilot will	
(CA, MO, VA, OH, CO, WI, IL, OK, PA, NE, and MN)	reach moderate-income homeowners. AOTA offers insights into repairs that support aging-in-place.	
http://www.prnewswire.com/news- releases/rebuilding-together-and-aarp-join-		
forces-to-help-more-homeowners-age-in-place-		
in-safe-and-healthy-homes-198955131.html.		



Name of Program and Contact Information	Summary	Eligibility/Process/Cost
Mat Su Older Adult Fall Prevention Program (Wasilla, AK) http://www.wasillaseniors.com/wp- content/uploads/2014/12/Tri-Fold-final-1-23- Dec-14.pdf and http://dhss.alaska.gov/dph/Chronic/Pages/Injury Prevention/Falls/default.aspx	Operating with a grant from the Alaska Commission on Aging, this program has a diverse clientele of retired military, bush people, Native Alaskans and a Ukrainian population with great geographic dispersion and language barriers. Multi-factorial program with Fall Prevention, Exercise classes (Tai Ji Quan: Moving for Better Balance and SAIL) and Home Safety Assessment and reports. Also includes Fall Risk Assessment Clinics at all surrounding Senior Centers and communities by using volunteers (e.g., pharmacists, PT/OT's, Paramedics, nurses) to assess older adult's balance, medications, and all health profile which are offered to be sent to any of their providers for coordination. They offer interior home modifications (i.e., grab bars, 2 nd railings on stairs, toilet bowl rails, etc.)	
StopFalls Napa Valley (Napa Valley, CA) https://sharethecarenapavalley.org/stop-falls- napa-valley/	This non-profit program funded by grants offers free onsite home safety assessments, provides presentations on fall prevention and home modification, referrals for services and products, and products and devices for low income seniors.	<u>Process</u> : Call to request a home visit by an occupational therapist who will perform a home assessment and provide recommendations. Products and devices that are typically provided include handrails, grab bars. On average this program serves over 100 per year. If the client can pay they are expected to do so, however, this program has limited funding for low income clients (determined by an income of less than \$25,000 per year).



Name of Program and Contact Information	Summary	Eligibility/Process/Cost
Meals on Wheels Diablo Region Falls Prevention Program (Walnut Creek, CA) <u>https://www.mowdiabloregion.org/fall- prevention</u>	Meals on Wheels Diablo Region offers fall screening, education, evidence-based individual and group exercise classes, and home safety and modification services. Occupational Therapists conduct home assessments and recommend assistive devices and home adaptations. Typical items include bathroom grab bars, toilet frames, bed bars, stair and hand railings. Installation work in the home is then completed by their licensed, bonded contractors and the occupational therapist follows up to ensure that the changes are helping the consumer.	MOW Diablo Region serves all adults aged 60 and older living in Contra Costa County, giving priority whenever possible to individuals in isolated, underserved, and lower income communities. Services are free to eligible older adults.
Thrive for Life (Islands of Hawaii) https://www.thriveforlife.com	Thrive for Life is a private company founded by two occupational therapists serving the islands of Hawaii. They utilize a 7-step process that includes performing comprehensive home assessments after which draftsman, contractors, and designers are brought in to determine appropriate modifications. Thrive for Life guides their clients through the process including collecting contractor bids, filing for permits and conducting a post- construction assessment where they observe the client in their new space.	
Extended Home Living Services (Chicago, IL) https://www.ehls.com	EHLS was the recipient of two Small Business Innovation Grants from the National Institute on Aging to develop the Comprehensive Assessment and Solution Process for Aging Residents (CASPAR). CASPAR is a systematic process to collect information that can be used to specify the right modifications. CASPAR is used by professionals across the country. EHLS is the primary contractor for The City of Chicago's HomeMod Program, sponsored by Mayor Emanuel's Office for People with Disabilities. It also supports local charities such as United Cerebral Palsy of Greater Chicago's home modification program – Ramp Up as well as the Thornton Township's Home Modification Program.	



Name of Program and Contact Information	Summary	Eligibility/Process/Cost
Safe Strides Balance Program; Gentiva/Kindred at Home, Home Health Agency	This evidence-based program includes assessment of the home environment by a physical therapist who makes recommendations for immediate changes (throw rugs, cluttered pathways, dimly lit areas, crowded spaces etc.), followed by recommendations that	
(Louisville, KY) <u>https://www.kindredhealthcare.com/our-</u> <u>services/home-care/types-of-care/fall-</u> <u>prevention</u>	may require structural changes, such as grab bars, ramps, and widening doorways. It refers families to private and volunteer community resources. They use data to track patient outcomes that can then be used to promote effectiveness of the program.	
Project Mend-A-House	Project Mend-A-House, a non-profit, serves low-income residents, seniors, veterans and people with disabilities in Prince William	
(Prince William County, MD)	County, Maryland. They recruit volunteers and match them with people in need of minor home repairs and safety modifications.	
http://www.pmahweb.org/	They also loan out daily adaptive aids for in-home use and hold Fall Risk Assessment Screenings as part of a Fall Prevention Program that partners with the Northern Virginia Fall Prevention Coalition.	
Neighborhood of Affordable Housing, Inc.	The Neighborhood of Affordable Housing (NOAH) is a multi- service non-profit community development corporation. NOAH to	To qualify seniors must be over 62 years of age, live in Charlestown, East Boston,
(Boston, MA) http://noahcdc.org/programs/shs	achieve "a decent home and suitable living environment" for every family. One of its programs helps low- and moderate-income senior and disabled homeowners remain in their homes by providing affordable home safety repair services, including minor repairs, emergency repairs, and senior home rehabilitation. NOAH fulfills over 300 service requests annually. Over the years, it has completed 9,650 senior safety-related, emergency, and handicapped accessibility repairs.	or the North End or West End of Boston, occupy/own a 1-4 family property, and have incomes below certain limits.
ZeroStep (Michigan)	A project of Disability Advocates of Kent County, ZeroStep provides information to the public about the benefits of universal design and makes referrals to selected architects and builders.	



Name of Program and Contact Information	Summary	Eligibility/Process/Cost
https://www.dakc.us/zerostep/	ZeroStep also offers certification classes to architects and builders who want to learn more about universal design concepts.	
Independent Living Solutions (Grand Rapids, MI)	Headquartered at Disability Advocates of Kent County and a partner with the Area Agency on Aging, this program uses creative	Consumers 50+ in Kent, Ionia, Montcalm, Mecosta and Osceola Counties and other local counties who meet income guidelines.
https://www.dakc.us/occupational-therapy/	funding from a variety of sources including Kent County Senior Millage, Community Development Block Grants, Disabled American Veterans, and a private foundation. They assess the person, home, and environment to identify barriers to independent living. An Occupational Therapist assesses and implements a plan to make the home accessible through modifications and/or equipment. They also offer "Accessibility Consultation for New Construction or Remodeling" wherein they will review plans to ensure accessibility. They also have an Equipment Loan Program for DME and offer classes in Aging in Place Solutions.	
North Dakota Assistive Technology, Home First Program (Statewide) https://ndassistive.org/asdds/	Home First has a "real home" environment for consumers to learn about home modification, a "real home" IPAD app, and a YouTube channel where people can explore and try out different types of assistive technology devices to help them stay safe and active at home. They have a team of Certified Home Modification Specialists and assistive technology specialists to help identify needs and make recommendations. Home First allows individuals to try out the assistive technology through a rental program.	
Pennsylvania Accessible Housing Program (Statewide) http://www.sdhp.org/index.php/modifications- 2/pa-accessible-housing-program/	In Pennsylvania, 38 of the 67 counties have subscribed to this Program which provides grants to local entities to carry out home modifications. Each county collaborates with agencies to provide the manpower. The monies are provided to landlords who are current with real estate taxes and not in foreclosure. Renters must meet income eligibility requirements and provide written documentation for the changes.	



Name of Program and Contact Information	Summary	Eligibility/Process/Cost
Chester County Home Modification Program (CCHMP)	CCHMP is funded by a grant received from the Pennsylvania Department of Community and Economic Development's Keystone Communities Program. It provides a wide range of	Participants must have permanent disability that limits access to and use of the dwelling, be a homeowner, and
(Downingtown, PA)	adaptive modifications which include, but are not limited to, ramps, lifts, door and hallway widening, kitchen and bathroom	household income must not exceed 80% of the area's median income.
http://housingpartnershipcc.com/home- modification-program.html	modifications, visual doorbells, audio phones and visual phone signalers. Funding modifications is in the form of a grant and repayment is not required.	
United Disabilities Services (UDS) Foundation	The UDS Foundation, a non-profit, provides services to people	
(Lancaster, PA)	with disabilities of all ages, including Veterans and the elderly, throughout South Central Pennsylvania. Their home modification	
http://www.udservices.org/services/home- modifications/	program provides individual assessments, home evaluations, feasibility assessments, and full construction and installation to make homes more accessible and convenient, including ramps and door/hallway widening, accessible kitchens and bathrooms, bedroom and bathroom additions, and automatic door openers. They also operate a Home Accessibility eStore.	
One Step Ahead Fall Prevention Program	Headquartered at the King County Emergency Medical Services	Participants must be 50 years plus, have
(Seattle, WA)	Department, this program provides free home safety visits by a physical therapist or physical therapist assistant to address potential fall hazards, educate about staying safe in the home,	fallen or be at high risk of falling as assessed by a healthcare professional and live in King County.
http://www.kingcounty.gov/depts/health/emerge ncy-medical-services/community/fall- prevention.aspx	install fall safety devices, and inform about community resources. It partners with Rebuilding Together Seattle. The program started as a study in 2003 and grew to where over 2000 seniors have enrolled in the program.	
Safe at Home Program for District Seniors	District of Columbia Department of Aging and Community Living	Available to seniors ages 60 and older
(Washington, DC)	(DACL) and the Department of Housing and Community Development work with contractors through (CSBG) to offer Safe	and persons living with a disability age 18-59. Eligible households receive
https://dcoa.dc.gov/featured-content/safe-at- home	at Home. Administered by Home Care Partners, a DACL grantee, Safe at Home helps older adults and residents living with disabilities age in place. It provides preventative adaptations to	accessibility adaptation grants up to \$10,000 to cover equipment and labor costs. Staff located at Home Care



Name of Program and Contact Information	Summary	Eligibility/Process/Cost
safeathome@homecarepartners.org	reduce the risk of falls in the homes of qualifying seniors and adults with disabilities.	Partners assist applicants through the enrollment process. Participants receive an in-home assessment from Occupational Therapists to identify problematic areas and modifications and equipment. Home modifications could include: handrails, grab bars, bath tub cuts, shower seats, furniture risers, and stair lifts. Applicants who do not qualify for the Safe at Home program may receive referrals to other programs better suited for their needs.
Accessible Home Associates	This private company was founded by an occupational therapist and physical therapist who conduct comprehensive home	
(Washington, DC)	environment assessments. They are also involved in studies (e.g., CAPABLE), work with the DC Department of Aging and	
http://www.accessiblehomeassociates.com/	Community Living Safe at Home Program, and serve on the Fairfax County Building for All Committee.	

This resource was developed by the National Council on Aging (NCOA) with the University of Southern California (USC) Leonard Davis School of Gerontology as part of a series of projects to feature home modification and home safety programs, assessment instruments, and funding sources to provide resources for families and professionals.

For information on NCOA's National Falls Prevention Resource Center, visit: <u>https://www.ncoa.org/center-for-healthy-aging/falls-resource-center/</u>. For information on USC's Fall Prevention Center of Excellence and efforts in home modification, visit: <u>www.homemods.org</u>. If you have any updates or additions to the list below, please contact <u>homemods@usc.edu</u>.