

Name	Author	How to Get It	Literature	Summary	Target Assessor and Audience
ASSESSMENT TOOLS FOR USE BY PROFESSIONALS					
Comprehensive Assessment and Solution Process for Aging Residents (CASPAR)	Extended Home Living Services (EHLS) Wheeling, Illinois	Can be downloaded free at: https://www.ehls.com/national-grants/	1. Sanford, JA, Butterfield, T. (2005). Using Remote Assessment to Provide Home Modification Services to Underserved Elders. <i>The Gerontologist</i> , 45(3): 389-398. https://doi.org/10.1093/geront/45.3.389 2. Pynoos, J., Sanford, J., and Rosenfelt, T. A Team Approach for Home Modifications. <i>OT Practice</i> , April 8, (2002), 15-19.	EHLS received two Small Business Innovation Grants from the National Institute on Aging to develop the Comprehensive Assessment and Solution Process for Aging Residents (CASPAR). CASPAR enables practitioners to identify a client's aging in place needs by collecting information that can be used by building professionals and occupational therapists to specify the right modifications. This assessment considers the home environment, the resident's abilities and preferences, and the interaction between the two, combining the specific concerns of consumers, building professionals, and occupational therapists in performing home modifications assessments.	Assessors: professionals (e.g., aging service providers, building professionals, occupational therapists, physical therapists, care/case managers, social workers). Audience: Aging individuals living in a home setting.
Client-Clinician Assessment Protocol (C-CAP)	Laura N. Gitlin, Johns Hopkins University School of Nursing, Baltimore, MD	Contact the author: Laura N. Gitlin, Johns Hopkins University School of Nursing, Baltimore, MD	1. Gitlin L. N., Corcoran M. (2000). Client-Clinician Assessment Protocol (C-CAP). Philadelphia: Thomas Jefferson University. 2. Petersson I, Fisher AG, Hemmingsson H, et al. The client-clinician assessment protocol (C-CAP): Evaluation of its psychometric properties for use with people aging with disabilities in need of home modifications. <i>OTJR: Occupation, Participation and Health</i> 2007;27:140-148. 3. Szanton SL, Thorpe RJ, Boyd C, Tanner EK, Leff B, Agree E, Xue QX, Allen JK, Seplaki CL, Weiss CO, Guralnik JM, and Gitlin LN. Community Aging in Place, Advancing Better Living for Elders (CAPABLE): A Bio-Behavioral-Environmental Intervention to Improve Function and Health-Related Quality of Life in Disabled, Older Adults. <i>J Am Geriatr Soc</i> . 2011 Dec; 59(12): 2314-2320. doi: 10.1111/j.1532-5415.2011.03698.x	The C-CAP focuses on clients' self-reported perceptions of their abilities in daily life - their independence, difficulty, and safety in conducting activities in their home environment and the community (Gitlin & Corcoran, 2000). This self-report is combined with collaborative observation by an occupational therapist on 22 functional items as well as an assessment of the home environment (Szanton, et al. 2011).	Assessors: Occupational therapists along with the individual. Audience: People who are aging with disabilities.
Falls Behavioral Scale (FaB)	Lindy Clemson, Robert G. Cumming, & Robert Heard, The University of Sydney, School of Occupation and Leisure Sciences, Australia	Instruction Manual (includes scale at end): http://sydney.edu.au/health-sciences/staff/docs/lindy_clemson/FaB_manual_2003.pdf	1. Clemson, L., Cumming, R.G., & Heard, R. (2003). The development of an assessment to evaluate behavioral factors associated with falling. <i>American Journal of Occupational Therapy</i> , 57(4), 380-388. 2. Clemson, L., Bundy, A.C., Cumming, R.G., Kay, L., & Lockett, T. (2008). Validating the falls behavioural (FaB) scale for older people: A Rasch analysis. <i>Disability & Rehabilitation</i> , 30(7), 498-506.	The FaB evaluates behavioral factors that could potentially protect against falling. It includes 30 items within 10 behavioral dimensions related to falls: cognitive adaptations, protective mobility, avoidance, awareness, pace, practical strategies, displacing activities, being observant, changes in level, and getting to the phone. According to the instruction manual, it takes 5-10 minutes to complete, and has also been found useful as: a) An assessment in clinical practice. It can give a profile of the range of strategies people are using; b) A goal setting tool; c) A prompt to discuss behavioral factors and falls and as an aide in reflective learning; and d) A way of raising awareness of the broader focus of the therapist visit.	Assessors: Occupational therapists and other professionals. The FaB Scale can be self-administered by the older person or administered by interview. It can also be mailed to the person prior to a home visit. Audience: older adults living at home.

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<p>The Home Environment Assessment Protocol-Revised (HEAP-R)</p>	<p>Laura N. Gitlin, Johns Hopkins University School of Nursing, Baltimore, MD</p>	<p>Contact the author: Laura N. Gitlin, Johns Hopkins University School of Nursing, Baltimore, MD</p>	<p>1. Gitlin LN, Schinfeld S, Winter L, Corcoran M, Boyce AA, & Hauck W. Evaluating home environments of persons with dementia: interrater reliability and validity of the Home Environment Assessment Protocol (HEAP). <i>Disability and Rehabilitation</i> 2002; 24(1-3): 59-71. https://www.ncbi.nlm.nih.gov/pubmed/11827156</p>	<p>This home-based environmental assessment uses self-reporting and observation to help family caregivers of persons with dementia learn through education, skill-building, and environmental strategies. Domains assessed include hazards, adaptations, visual cues, clutter, and comfort in eight areas of the home.</p>	<p><u>Assessors:</u> Clinicians. <u>Audience:</u> Persons with dementia and their family caregivers.</p>
<p>Home Falls and Accidents Screening Tool (Home FAST) and Non-OT Home Falls and Accidents Screening Tool (Home FAST)</p>	<p>Lynette Mackenzie, University of Sydney, Discipline of Occupational Therapy; Julie Byles, University of Newcastle, Discipline of Public Health, and Nick Higginbotham, University of New Castle, School of Medicine and Public Health, Australia</p>	<p>Home FAST (see copyright information): https://ses.library.usyd.edu.au/handle/2123/14750 Non-OT Home FAST (see copyright information): https://ses.library.usyd.edu.au/handle/2123/15938</p>	<p>1. Mackenzie, L., Byles, J., & Higginbotham, N. (2000). Designing the Home Falls and Accidents Screening Tool (HOME FAST): Selecting the items. <i>British Journal of Occupational Therapy</i>, 63: 260-269. http://dx.doi.org/10.1177/030802260006300604 2. Mackenzie, L., Byles, J., & Higginbotham, N. (2002). Reliability of the Home Falls and Accidents Screening Tool (HOME FAST) for measuring falls risk for older people. <i>Disability and Rehabilitation</i>, 24, 266-274. 3. Mackenzie, L., Byles, J., & Higginbotham, N. (2002). Professional perceptions about home safety: Cross-national validation of the Home Falls and Accidents Screening Tool (HOME FAST). <i>Journal of Allied Health</i>, 31, 22-28.47. 4. Mackenzie, L., Byles, J., D'Este, C. (2009). A longitudinal study of the Home Falls and Accidents Screening Tool (HOME FAST) to predict falls in older community dwelling people. <i>Australasian Journal on Ageing</i>, 28, 64-69. 5. Vu, V., & Mackenzie, L. (2012). The inter-rater and test retest reliability of the Home Falls and Accidents Screening Tool. <i>Australian Occupational Therapy Journal</i>, 59, 235-242.</p>	<p>Home FAST is a home assessment tool designed to identify older people at risk of falling because of hazards within their home environment. The tool consists of 25 items that include a range of indoor and outdoor environmental and functional concerns. A dichotomous assessment, the user marks whether or not a hazard is present. A higher score indicates a higher risk of falling.</p>	<p><u>Assessors:</u> Occupational therapists and other health professionals. <u>Audience:</u> The Home FAST was developed as a screening instrument for use in a community preventive care trial for older people. The Non-OT Home FAST is an adapted version designed to be used by people without an occupational therapy background.</p>
<p>Home Safety Self Assesement Tool (HSSAT)</p>	<p>University at Buffalo, Department of Rehabilitation Science, Occupational Therapy Geriatric Group, Buffalo, NY</p>	<p>Can be downloaded free at: http://sphhp.buffalo.edu/rehabilitation-science/research-and-facilities/funded-research/aging/home-safety-self-assessment-tool.html</p>	<p>1. Development, psychometrics and use of Home Safety Self-Assessment Tool (HSSAT). Tomita M, Saharan S, Rajendran S, Schweitzer J. Nochajski S. (2014). <i>American Journal of Occupational Therapy</i>, 68 (6): 711-718. 2. Horowitz, B. P., Nochajski, S. M., & Schweitzer, J. A. (2013). Occupational therapy community practice and home assessments: Use of the Home Safety Self-Assessment Tool (HSSAT) to support aging in place. <i>Occupational Therapy in Health Care</i>, 27(3), 216-227.</p>	<p>With the aim of reducing falls among older adults, this self-assessment consists of a home safety assesment checklist and solutions, illustrations of common fall hazards and solutions in ten indoor and outdoor areas of the home, assistive devices and other recommended products to prevent falls, and "how to" home improvement instructions. In addition to assessing for risk factors, the HSSAT aims to raise awareness. For example, some users may not be aware that clutter is a fall risk until they see it on the list. By reviewing each risk item, users may be able to match the risks listed with identified risks in their own home environment. The HSSAT has been translated into several languages.</p>	<p>For community-dwelling older adults and their informal caregivers to help assess fall risks in their homes and guide them in improving their home environment.</p>

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The Housing Enabler (HE)	Susanne Iwarsson and Ake Isacson, Lund University, Sweden; concept developed by Edward Steinfeld, University at Buffalo, NY	Purchase online at: http://www.enabler.nu/	<p>1. Lien LL, Steggell CD, Slaug B, Iwarsson S. Assessment and analysis of housing accessibility: adapting the environmental component of the housing enabler to United States applications. <i>Journal of Housing and the Built Environment</i> 2016; 31(3): 565–580. doi:10.1007/s10901-015-9475-0</p> <p>2. Iwarsson, S. (1999). The housing enabler: An objective tool for assessing accessibility. <i>British Journal of Occupational Therapy</i>, 62(11), 491–497.</p> <p>3. Iwarsson, S., Haak, M., & Slaug, B. (2012). Current developments of the Housing Enabler methodology. <i>British Journal of Occupational Therapy</i>, 75(11), 517–521.</p> <p>4. Iwarsson, S., Nygren, C., & Slaug, B. (2005). Cross-national and multi-professional inter-rater reliability of the Housing Enabler. <i>Scandinavian Journal of Occupational Therapy</i>, 12, 29–39.</p> <p>5. Iwarsson, S., & Isacson, Å. (1996). Development of a novel instrument for occupational therapy assessment of the physical environment in the home—A methodologic study on “The Enabler”. <i>Occupational Therapy Journal of Research</i>, 16(4), 227–244.</p>	The HE instrument assesses a person's functional limitations and the home environment for physical barriers that may threaten accessibility. It includes a three-step assessment and analysis procedure: 1) a dichotomous assessment of a person's functional capacity (12 items on functional limitations and two items on dependence on mobility devices); 2) a dichotomous assessment of the physical environmental barriers in the home and the close exterior surroundings (161 items); 3) the calculation of an overall magnitude of accessibility problems score. Physical environmental barriers can also be rank-ordered based on their contribution to the total accessibility problems score (Iwarsson et al. 2012).	<u>Assessor:</u> Occupational therapists.
In Home Occupational Performance Evaluation (I-HOPE) and I-HOPE Assist	Susy Stark, Emily Sommerville, and John C. Morris, Washington University School of Medicine, St. Louis, MO	Purchase online at: https://starklab.wustl.edu/i-hope-kit/	<p>1. Stark, S. L., Sommerville, E.K., & Morris, J.C. (2010). In-Home Occupational Performance Evaluation (I-HOPE). <i>American Journal of Occupational Therapy</i>, 64(4), 580–589. http://dx.doi.org/10.5014/ajot.2010.08065</p> <p>2. Keglovits, M., Somerville, E., Stark, S. L. (2015). In-Home Occupational Performance Evaluation for Providing Assistance (I-HOPE Assist): An Assessment for Informal Caregivers. <i>Am J Occup Ther</i> 2015;69(5):6905290010p1-6905290010p9. doi: 10.5014/ajot.2015.015248.</p>	The In-Home Occupational Performance Evaluation (I-HOPE) targets activities performed in the home that are essential for aging in place. The purpose is to measure the effects of an incompatibility between a person's abilities and the environment or the “person-environment misfit” of older adults and their homes. The I-HOPE helps therapists measure clients' in-home activity performance and observe changes in person-environment fit before and after home modification interventions. It considers the client's perspective and satisfaction while recognizing the role of the environment on performance. It is a multistep assessment that is conducted in the home of an individual. It takes approximately 60 minutes to conduct. A kit includes all necessary materials to conduct the assessment's three steps: 1) An assessment of current in-home activities is conducted using a set of 44 cards of images depicting older adults participating in daily activities. An overall score for activity performance is then calculated; 2) Priority activities are identified for intervention and given a subjective performance and satisfaction score; 3) Performance-based rating of barriers' influence on performance. The I-HOPE yields four sub-scores that can be used individually or as a profile of performance (activity, performance, satisfaction, total barrier severity).	The I-HOPE is to be used by trained therapists. The I-HOPE Assist was developed for use by informal caregivers.
SAFER: Safety Assessment of Function and the Environment for Rehabilitation - Health Outcome Measurement and Evaluation (SAFER HOME)	Teresa Chiu, Rosemary Oliver, COTA Health, Toronto, ON, Canada	For background and contact information: http://approachestoaccountability.ca/TEAMGRANT/M-THAC%20Greatest%20Hits/M-THAC%20Symposium%20Materials/Posters/Teresa%20Chui%20SAFER-HOME.pdf	Chiu, T., & Oliver, R. (2006). Factor analysis and construct validity of the SAFER-HOME. <i>Occupational Therapy Journal of Research</i> , 26(4), 132-142.	SAFER HOME v3 assesses a person's ability to safely carry out functional activities in the home. It can also be used to evaluate the effectiveness of an intervention and changes following an intervention. Using interview and observation of client participating in activities, SAFER HOME assesses 74 items around the home divided into 12 domains. Level of safety concern is rated on a 4-point (0–3) scale.	<u>Assessors:</u> Occupational therapists. <u>Audience:</u> The tool was originally designed for older adults with physical rehabilitation or mental health needs. It has been expanded for use with younger adults with physical or mental health needs or developmental disabilities.

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Westmead Home Safety Assessment (WeHSA)	Lindy Clemson, The University of Sydney, School of Occupational Therapy, Australia	Can be downloaded free (and information on online training module can be found) at: http://www.fallspreventiononline.com.au/	1. Clemson, L. (1997). Home fall hazards: A guide to identifying fall hazards in the homes of elderly people and an accompaniment to the assessment tool, the Westmead Home Safety Assessment (WeHSA). WestHome Fall Hazards. West Brunswick, Victoria: Coordinates Therapy Services. 2. Clemson, L., Fitzgerald, M.H., & Heard, R. (1999). Content validity of an assessment tool to identify home fall hazards: The Westmead Home Safety Assessment. <i>British Journal of Occupational Therapy</i> , 62(4), 171-179.	The WeHSA targets falls risk specifically, providing a systematic and extensive list to identify potential hazards in and around the home. The hazards are organized by section (e.g., Internal/External Trafficways, Seating, Bedroom, Footwear, Medication Management) with 72 items within these sections (e.g., floor mats, doors, steps/stairs) that are expanded upon with further detailed descriptors (Clemson, Fitzgerald, Heard, 1999). It is available in a short and long form. An online training module is also available that provides background and guidance on how to use the WeHSA and conduct an effective fall prevention home assessment.	<u>Assessors:</u> Occupational therapists and other professionals. <u>Audience:</u> older adults

ASSESSMENT TOOLS FOR USE BY INDIVIDUALS AND FAMILIES

Name	Author	How to Get It	Literature	Summary	Target Assessor and Audience
Check for Safety: A Home Fall Prevention Checklist for Older Adults	Centers for Disease Control and Prevention	English: http://www.cdc.gov/HomeandRecreationalSafety/pubs/English/booklet_Eng_desktop-a.pdf Spanish: https://www.cdc.gov/steady/pdf/STEADI_CheckforSafety_brochure-esp-a.pdf Order free copies at: https://www.cdc.gov/steady/patient.html	N/A	This home safety checklist aims to help identify and eliminate fall hazards in the home. Organized by area of the home, it identifies common fall risks and recommendations to address them. The brochure also contains a section on Other Things You Can Do to Prevent Falls, including information on physical activity, vision, medications, and more.	N/A
A Consumer's Guide to Home Adaptation	Adaptive Environments Center	http://www.homemods.org/resources/pages/conguide.shtml To purchase hard copy, contact: 374 Congress Street, Suite 301, Boston, MA 02210 (617) 695-1225 ext. 0	N/A	This workbook is designed to make the home safer and more comfortable, and can be a reference throughout the home adaptation process. The self-administered survey asks the respondent to answer six categories of questions by indicating either "OK" or "needs work". It includes instructions that guide the individual to assess the various areas of the home. It also offers a planning worksheet for the construction phase, which provides details on how to choose a contractor and how to modify common problem areas of the home. Resources on financing home modifications, products, and home modification equipment are also included.	N/A

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Homefit Guide	AARP	http://www.aarp.org/content/dam/aarp/livable-communities/documents-2015/HomeFit2015/AARP%20HomeFit%20Guide%202015.pdf OR http://www.aarp.org/livable-communities/info-2014/aarp-home-fit-guide-aging-in-place.html	N/A	The AARP HomeFit Guide was created to help people stay in the home they love by turning where they live into a “lifelong home,” suitable for themselves and anyone in their household. The guide offers solutions that range from simple do-it-yourself fixes to improvements that require skilled expertise.	N/A
Rebuilding Together Safe at Home Checklist	Rebuilding Together, Administration on Aging (AoA), and American Occupational Therapy Association	Available free at: http://www.aota.org/~media/Corporate/Files/Practice/Aging/rebuilding-together/RT-Aging-in-Place-Safe-at-Home-Checklist.pdf	N/A	This list was developed to identify fall hazards, home safety, and accessibility issues for the homeowner and family members. Home safety, fall prevention, and accessibility modification interventions are included on the reverse side of the list.	N/A
Remodeling Today Guide: Design Ideas for the Kitchen and Bathroom	The Hartford Center for Mature Market Excellence	https://www.thehartford.com/sites/the_hartford/files/remodeling-guide.pdf	N/A	This guide provides smart ideas and solutions to help residents incorporate Universal Design into the kitchen and bathroom when remodeling so they may live comfortably and independently in their home. It is organized into two sections - Kitchen and Bathroom - with a checklist of universal design features to consider for inclusion when remodeling. It also includes resources on working with contractors and professionals.	N/A