Title:
Home Environment Evaluation for Individuals with Vision Loss: Evidence Guiding Best Practice

Speakers:
Beth Barstow, PhD, OTR/L, SCLV & Monica S. Perlmutter, OTD, OTR/L, SCLV

Abstract and References

Low vision is defined as permanent vision loss from a condition or disease that cannot be corrected by eyeglasses or medical intervention and interferes with completion of activities of daily living (NEI, n.d.). Adults age 80 and older account for nearly 70% of cases of low vision and blindness in the United States and the majority have at least one other chronic medical condition that also contributes to limitations in daily activities (Crews, Jones, & Kim, 2006; Congdon et al., 2004). This is significant because these individuals continue to have a strong desire to live independently in their own homes despite the synergistic interaction of vision loss and comorbidities increasing fall risk and decreasing safety and independence with completing daily activities (Chase, Mann, Wasek, & Arbesman, 2012; Girdler, Packer, & Boldly, 2008). Studies investigating home safety have identified that home assessments and subsequent home modifications reduce the risk of falls for older adults (Gillespie et al., 2012). There are many home assessments available that address the needs of various disability groups, however, few are designed to identify the specific needs of older adults with vision loss (Barstow, Bennett, & Vogtle, 2011). Thus, occupational therapists who work with older adults with vision loss are forced to choose non-standardized tools and may possess limited knowledge about the evidence supporting home assessment, the application of valid tools and the translation of results into intervention plans. This three hour workshop will address home assessment issues in low vision populations with an emphasis on the evidence base which supports best practice. Participants will gain experience with administering evidence based measures including the Low Vision Home Assessment (Barstow et al, 2012), the Home Environment Lighting Assessment (Perlmutter, Bhorade, Gordon, Hollingsworth, Engsberg, & Baum, 2013), and the LuxIQ lighting prescription system (Borden, Klein, Goodrich & Patten, 2014). Results from these assessments will be utilized to develop client centered goals and intervention strategies in a case based format.
References


