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PATIENT MONEY

## Making Home a Safer Place, Affordably

By LESLEY ALDERMAN

Stay put or sell?

That's the question many older people ponder as they move into their 70s and beyond.

Most older people settle on staying put, according to a recent survey by the Home Safety Council, a nonprofit organization dedicated to preventing home-related injuries. (From the source of the survey, you can see where this column is heading, right?)

Staying put makes economic sense. It is not only more comfortable to live out your life in your own home, it's much more affordable.

The average annual fee at an assisted-living facility — a place where older people live independently but also receive a host of services like medication monitoring and meals — is \$34,000. And in the nation's most expensive metropolitan areas, including New York, the costs may be closer to \$70,000.

But while home might be cozier and cheaper than a residential center, it's not always safer. Every year in this country about 7,000 elderly people die in home-related accidents, and millions are seriously injured. Falls are the leading cause of injuries, but the elderly are also at risk for being burned by the stove, scalded by hot water or drowning in the tub.

The home "environment can be a great support to independent living," says Jon Pynoos, professor of gerontology at the [University of Southern California](#). "Or it can be a health care hazard."

After Maryann Connelly's mother fell and hurt herself two years ago, Ms. Connelly considered moving her to an assisted-living facility.

But the mother, Catherine Fisher, who is in her 80s and has lived on her own for 18 years, had a two-word response — "No way!" — even though her [rheumatoid arthritis](#) made it difficult to walk up and down stairs and get in and out of chairs.

So Ms. Connelly and her siblings hired an occupational therapist to modify Ms. Fisher's two-story townhouse in Newton, N.J., to make it safer and easier for her to navigate. The therapist added, among other things, an electric stair lift and grab bars throughout the house. The total cost, for the therapist's fee, equipment and installation, was \$4,500.

As Ms. Connelly learned, an entire service industry is slowly taking shape around the goal of letting people age in

place. If you want to make your own home or an older relative or friend's home a safer, more supportive place to live, here are basic guidelines to the most efficient and cost-effective approaches.

**TAKING STOCK** Learn where the potential hazards lie and how you can reduce them. For starters, go to the Home Safety Council's site, [MySafeHome.net](http://MySafeHome.net), and take the house tour, which points out possible dangers room by room. Many of the changes the site suggests are simple and inexpensive, like removing area rugs and installing brighter bulbs in hallways.

[AARP](#) also has an interactive [home safety checklist](#) created with the National Association of Homebuilders.

**A PROFESSIONAL ASSESSMENT** If you have multiple medical issues, say [arthritis](#) and poor vision, ask your doctor for a referral to an occupational therapist — an O.T., as they're known — who specializes in home modifications. The O.T. can analyze your potential challenges and your home's shortcomings to come up with a plan that a contractor or handyman can easily follow.

"An O.T. is your best source for doing the right thing," said Professor Pynoos, who is also the co-director of the [Fall Prevention Center of Excellence](#), an organization supported by the Archstone Foundation, a non-profit organization in Long Beach, Calif., focused on issues related to aging. Gregg Frank, the O.T. who helped Ms. Connelly's mother, "was able to analyze my mother's needs in a way we never would have been able to," Ms. Connelly said.

Mr. Frank raised the height of Ms. Fisher's chairs to make getting in and out them easier, for example, and installed threshold ramps and railings at the front door to make it safer for her to leave and enter the house on her own.

An O.T. can also supply you with an invoice that lists the medical necessity of each improvement — a document that you might need to get reimbursed, say, from a long-term care insurer.

**LONG-TERM CARE COVERAGE** If you were far-sighted enough to have [such a policy](#), call your [insurance](#) agent and ask whether home modifications are covered under your plan and what documentation you need to be reimbursed. A policy will not pay for upgrades if you are still healthy.

In general, regular [health insurance](#) does not cover physical upgrades to the home, though it often will pay for an occupational therapist to come in and do an assessment

**TAPPING HOME EQUITY** If you want to make substantial changes to your home, but don't have the cash to pay for them, consider taking out a [home equity loan](#). For [information](#) on ways you can tap into your home equity, go to [LongTermCare.gov](http://LongTermCare.gov), a site run by the [Department of Health and Human Services](#).

While a home equity loan is your best option, if a bank won't give you such a [loan](#), another possibility is a [reverse mortgage](#). Available to people over 62, a reverse mortgage lets you convert the equity in your home into cash. But the fees can be substantial, so be sure to speak with a [financial planner](#) before taking out this type of [mortgage](#).

**WHEN MONEY IS SCARCE** Contact your local department of aging and inquire about home modification loans and services available to seniors. Use the federal government's [elder care](#) locator — [www.eldercare.gov](http://www.eldercare.gov) — to find your local office, or call 800-677-1116.

Some government agencies make low-interest loans to those with low or moderate incomes. In addition, get in touch with Rebuilding Together ([www.rebuildingtogether.org](http://www.rebuildingtogether.org), or 1-800-473-4229), a national nonprofit organization that helps people with low incomes improve their homes. The organization's Safe at Home program was created specifically to help older people do just that: stay safe at home.

*This article has been revised to reflect the following correction:*

**Correction: July 22, 2009**

*Because of an editing error, the Patient Money column on Saturday, about ways to make a home safer for elderly people, misstated the financial backing of the Fall Prevention Center of Excellence. It is an organization supported by the Archstone Foundation, a nonprofit group in Long Beach, Calif., focused on issues related to aging. It is not supported by the state.*

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