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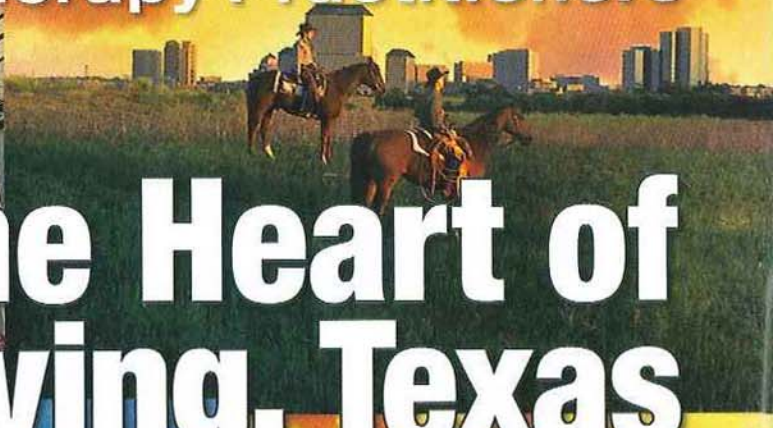
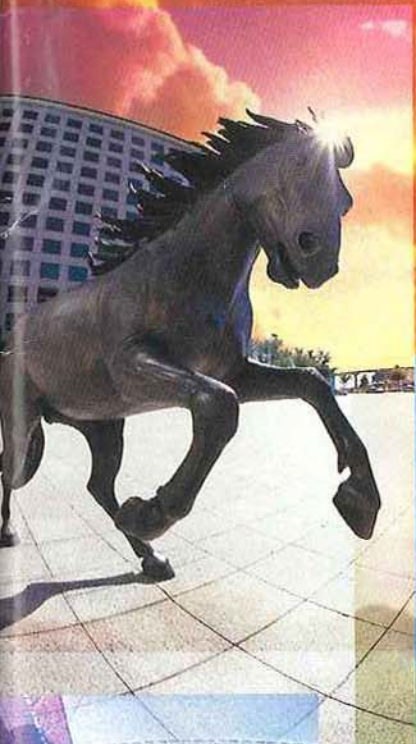
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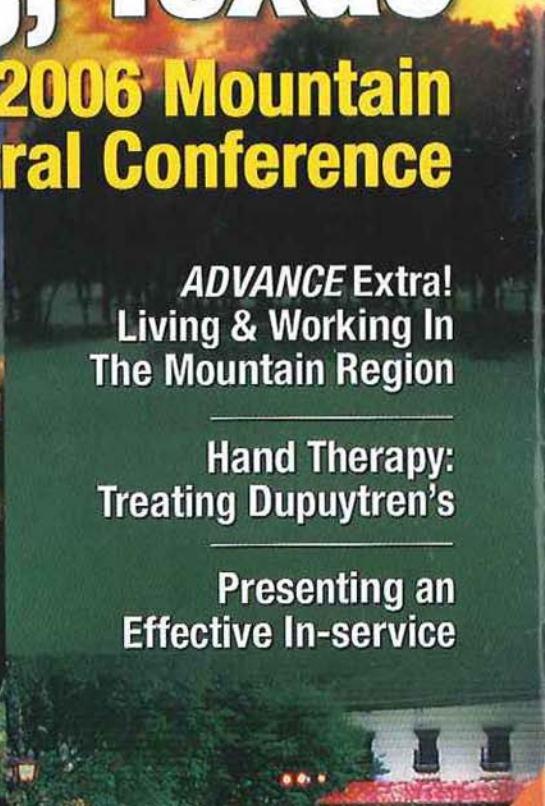
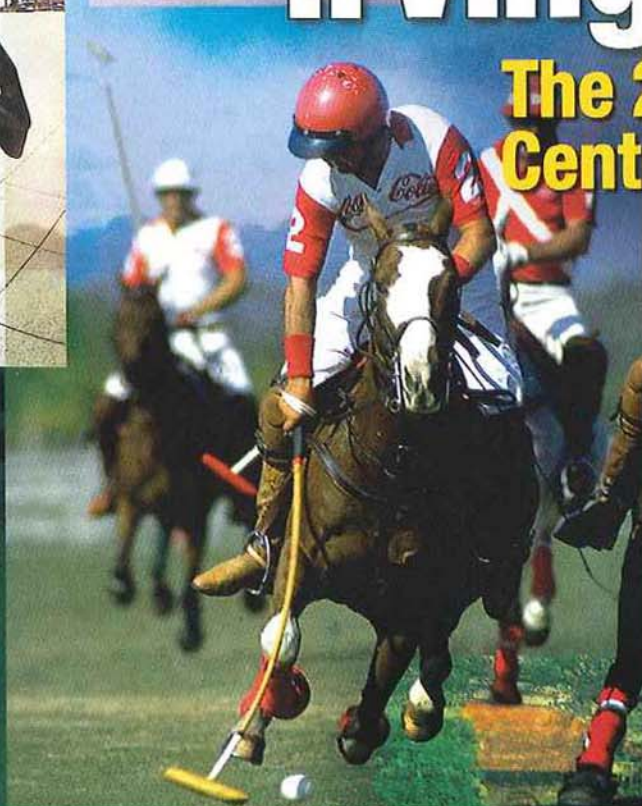
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**Conference  
Issue**

# Driving Home the Point

Fox Rehab tests the skills of older drivers who want to stay on the road

By E.J. Brown

**H**olly Alexander, OTR/L, CDRS, has a great job—most of the time. As director of the home-based driver rehabilitation program for Fox Rehab, headquartered in Cherry Hill, NJ, she tests the driving skills of older clients and helps them become safer on the road.

But the job can be tricky—and harrowing.

The Fox driving program opened last May in New Jersey, and Alexander's first client was a 93-year old woman who pleasantly surprised her therapist by doing really well on the clinical tests Alexander administered in the woman's home. Then they went out on the road, in a car supplied by the driver education school with which Fox Rehab affiliates. The car has dual controls.

The woman drove toward her beauty shop, where she reportedly went every Saturday. But she was driving 15 miles under the speed limit in the left hand-lane.

"I asked her to switch to the right-hand lane, and she almost brought the car to a complete halt," recalled Alexander. "When

she did decide to switch lanes, she started to pull over in front of a tractor trailer!"

Of course Alexander had to tell the woman she was no longer able to drive safely. She took it pretty well, but over the course of Alexander's 12 years of experience in driver rehab, there have been those who didn't.

"One man picked up his walker and threw it at me," she said ruefully. "I've had people say, 'I'm going to come back with a gun and kill you.'"

Obviously, losing driving privileges in the United States has staggering emotional repercussions. Public transportation is often hard to get to, too roundabout, and expensive. Without their cars, individuals have little real independence. Depression and helplessness can overtake an elderly person whose car keys are gone. These are outcomes that any OT would not want to see.

Yet Alexander's biggest responsibility must be to keep her clients, and those with whom they come in contact, safe. Most people who come to her, she said, really do want to know that they are safe drivers, and are willing to

give up the privilege if they are not.

Fox Rehab provides counseling and alternative transportation resource options for those who must get off the road.

The transportation issue was the major reason that Tim Fox, a physical therapist, opened Fox Rehabilitation in 1998.

As a physical therapy student, Fox was amazed at how the realities of aging seemed to be an afterthought in physical rehab. The frailest patients were often forced to find transportation to therapy appointments, only to find themselves in a cold, sterile environment that hardly resembled home. After he graduated from Thomas Jefferson University's PT program in 1995, it took Fox only three years to gain the experience and the opportunity to change all that.

Fox Rehab does all its therapy in patients' homes rather than in an outpatient clinic. But this is not a home-care practice; it's a full-service rehabilitation provider for older adults residing in central and southern New Jersey, southeastern Pennsylvania, northern Delaware and Manhattan, NY.

"We're a private practice under Medicare," Fox explained. "So we can treat anyone whose treatment is medically necessary. Our patients do not have to meet homebound criteria. They haven't had an acute medical illness, but they're not people who can easily access an outpatient clinic. A number of our referrals come directly from physicians."

Client Ernest Kaufman uses a reacher to close his car door, under the direction of Holly Alexander, OTR, CDRS, of Fox Rehab.



Below, left, the client tests his reaction time on a foot pedal attached to a monitor, right. Small lights that change from green to red signal when he should switch from 'gas' to 'brake.'



Fox Rehab has a strong community relations department to educate area doctors about its services.

"Our patients aren't strong advocates for themselves when it comes to wellness," Fox emphasized. "We push for them to get the rehab services they need."

Treating patients at home allows therapists to teach navigation techniques around the house, as well as dressing and undressing, and using the bathroom and kitchen. The company treats only geriatric patients (age 65 and over), so its 70 therapists, all of whom are full-time, salaried employees, are specially trained to meet the needs of the elderly population. They do have productivity goals, but the number of billable units therapists produce on any given patient is up to their professional discretion and is based on the skilled services provided and time spent.

"It's unethical for me to tell you, as a clinician, how many units you should be billing," Fox said. "I want to treat clinicians like the professionals we are trained as."

The home-based driver evaluation pro-

gram was something the staff had already been considering when the Alzheimer's Association contacted the company to see if it could test patients who came to the association wanting to know about the future of their driving skills. Fox Rehab now has a partnership with the Alzheimer's Association chapters in the region to do driver testing.

Alexander attended a Building Blocks workshop in Orlando, FL, put on by Adaptive Mobility Services. The course explained the process in setting up a driving program. "I had already had the experience of doing the testing and what to look for," she said, "but I had to make sure that our policies and procedures were top notch." Adaptive Mobility helped her find the best places to get her resources.

Now Alexander's car is her portable clinic. She sometimes wonders how she can fit into it everything she needs, but she does. That includes a portable reaction-time tester (a cube with a brake and gas pedal), a visual acuity chart, a test for depth perception, fixation balls for visual tracking, "a

bunch" of cognitive and visual perceptual tests and a dynamometer.

The driving program is currently available only in New Jersey, but is expected soon in New York, Delaware and Pennsylvania. As far as Alexander knows, it is the only home-based driving program in the region.

A lot of people who use the driving program live in rural areas. "Our goal is to keep these people safely on the road as long as possible," she told *ADVANCE*. "If we can provide some compensatory strategies or adaptive equipment, we do."

Doctors are now required by law to report to the state those people they believe are unsafe drivers. But a lot of physicians are leery about pushing it. When you have caregivers who don't want to be the people to take Mom's or Dad's car keys, we're the one they can come to. We can tell them, 'I'm sorry, but this is what the tests say.' They can't go back to their son or daughter and say, 'you took my keys.'" ■

*E.J. Brown is ADVANCE editor.*