

Complex and specialist needs: independent practice

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Context

Anava Baruch leads an independent housing occupational therapy service specialising in complex housing needs within the medico-legal sector across the UK. The service works primarily on a business-to-business (B2B) basis with solicitors and case managers, supporting individuals with catastrophic injuries who are involved in litigation following life-changing accidents.

Over the past 13 years, the service has evolved to fill a significant gap in the accommodation assessment process. Traditionally, accommodation assessments within litigation have been led by architects and surveyors. While highly skilled in design and construction, these professionals often lack the clinical training required to understand how complex medical conditions affect an individual's daily function, independence, sensory processing, cognition, and mental health. Housing OTs bring this clinical expertise into the accommodation process, ensuring that housing solutions are designed around the person rather than the diagnosis.

The company operates using a multidisciplinary model. In addition to housing OTs, the service includes in-house estate agents and project managers, enabling support across the entire accommodation journey. Clients are typically supported for three to five years, from initial housing needs assessments through to property identification, design, adaptation, and final sign-off of their long-term home.

The challenge

Professional dominance and gaps in expertise

Accommodation needs assessments in the medico-legal sector have historically been dominated by architects and surveyors. While these professionals design buildings using Part M of the Building Regulations, this framework focuses on accessibility standards rather than the complex realities of living with disability.

Architects are often required to design highly bespoke environments without detailed knowledge of:

- complex medical conditions
- care routines and manual handling requirements
- assistive equipment and its practical use
- sensory and cognitive impairments
- behavioural and mental health presentations.

As a result, designs may prioritise mobility alone, overlooking other critical impairments such as:

- upper limb function
- visual impairment
- sensory processing differences
- cognitive impairments
- mental health needs.

In many cases, designs are based on the assumption that people with the same medical condition

will require similar accommodation solutions. This generic approach fails to recognise how individuals' experience of disability varies, and often disregards a person's lifestyle, culture, identity, and family roles. This can lead to properties that are poorly designed for the individual and represent a significant misuse of client funds.

System inefficiencies

When accommodation design is not led by clinical expertise, significant inefficiencies can occur. Common issues include:

- equipment installed that does not support real care tasks
- equipment purchased but never used
- expensive adaptations that restrict rather than support independence
- ongoing servicing costs for equipment that is not required
- equipment that cannot be transferred between temporary and permanent homes.

Clients involved in litigation often move from temporary accommodation to a permanent home. Without appropriate planning, large amounts of equipment and adaptation costs are duplicated unnecessarily.

The role

Housing occupational therapists provide specialist expertise by translating medical complexity into practical housing design. Within the medico-legal setting, this includes acting as an accommodation expert under Part 35 of the Civil Procedure Rules, supporting the litigation team in identifying the client's accommodation needs and the associated financial implications.

The work ranges from small temporary adaptations to the design of fully bespoke homes, which may include therapy rooms, hydrotherapy pools, specialist rehabilitation spaces, and carer annexes.

Key aspects of the role include:

- Conducting comprehensive housing needs assessments addressing physical, sensory, cognitive, and mental health needs.
- Working with in-house estate agents to identify suitable properties.
- Assessing property suitability and collecting measurements.
- Producing floor plans and analysing spatial layouts.
- Providing detailed specifications for adaptations, including drawings and elevations.
- Leading the design process while architects implement technical specifications.
- Supporting clients through property viewings and purchase or rental decisions.
- Coordinating with project managers during building works.
- Conducting manual handling assessments.
- Signing off completed adaptations.
- Supporting clients throughout their entire litigation journey.

Benefits to the system

Housing benefits

When housing occupational therapists lead accommodation planning, properties are designed correctly from the outset.

This results in:

- reduced need for costly redesigns
- equipment specified appropriately for individual needs
- better use of housing stock through accurate adaptation feasibility assessments
- housing solutions that remain sustainable as the individual's needs evolve.

Health and social care benefits

Housing is a critical component of long-term health and wellbeing. A clinically informed design approach allows for:

- holistic assessments capturing the full impact of disability
- prevention of secondary complications through appropriate environmental design
- environments that positively support mental health
- barrier-free environments that promote independence and maximise rehabilitation potential.

This can also reduce long-term care costs, as individuals are better able to participate in daily activities within a supportive environment.

Financial impact

Housing OT involvement can lead to:

- major cost savings by avoiding inappropriate equipment provision
- reduced waste from duplicated or unused equipment
- more efficient use of litigation settlements
- targeted spending on adaptations that genuinely support independence.

Benefits to individuals and families

At its core, housing occupational therapy focuses on ensuring that a home supports the whole person, not just their physical condition. Housing becomes a foundation for recovery, identity, and family life, rather than simply a place where care takes place.

This approach allows for:

- bespoke design solutions reflecting personality, lifestyle, and culture
- incorporation of cultural and religious needs
- preservation of family dynamics and relationships
- housing choices that maintain access to community and support networks
- safety considerations for complex conditions such as frontal lobe injuries
- dignity and privacy balanced alongside care needs.

Developing the role: a practical guide

Setting up a housing OT service

Developing a housing OT role within the private market requires clear positioning. Key steps include:

- establishing a clear distinction between rehabilitation OT and housing OT roles
- building relationships with solicitors and case managers
- developing expertise in both high-budget and constrained accommodation scenarios
- creating systematic assessment processes covering all aspects of disability
- educating legal professionals about the value of housing occupational therapy.

Developing expertise in the built environment

Housing OTs require specialist skills beyond traditional clinical training, including:

- property measurement and floor plan creation
- understanding structural engineering principles
- knowledge of building construction
- familiarity with plumbing and drainage systems
- spatial visualisation and design thinking
- strong clinical reasoning for equipment specification.

Essential skills and knowledge

- Understanding of building regulations and Construction Design and Management requirements

- Ability to translate medical conditions into practical accommodation needs
- Knowledge of sensory integration and cognitive disability
- Cultural competence for diverse client groups
- Report writing skills for legal proceedings
- Confidence to challenge assumptions from other professionals.

Overcoming challenges

- **Challenge:** Resistance from architects who dominate the field.
- **Solution:** Ongoing education through networking, CPD training, and conference presentations.

- **Challenge:** Shortage of skilled housing OTs.
- **Solution:** Development of specialist training programmes, mentoring, and supervision structures.

- **Challenge:** Establishing professional credibility in legal settings.
- **Solution:** Providing detailed reports with clear clinical reasoning and strong evidence.

- **Challenge:** Architects dismissing OT expertise.
- **Solution:** Building an evidence base through successful cases and solicitor testimonials.

Demonstrating impact

- Track cost savings from avoided equipment waste
- Document successful property adaptations versus architect-only designs
- Measure time saved through correct design from the outset
- Record client satisfaction with bespoke solutions
- Evidence prevention of placement breakdowns
- Document repeat referrals from solicitors and case managers
- Demonstrate financial efficiency of OT-led accommodation planning.

Top tips for managers

- Recognise Housing OT as a distinct specialist field
- Invest in training around property measurement and building knowledge
- Position housing OTs to lead design decisions, with architects implementing technical drawings
- Build relationships with the legal and case management sectors
- Ensure OTs understand the client's full story, not just physical function
- Support OTs to confidently challenge other professionals when needed
- Create clear development pathways from basic to expert housing practice
- Value experience across both high-budget and constrained-budget housing scenarios.