

**CHARACTERIZATION OF SERVICE HOME VISIT POST-DISCHARGE IN HOSPITAL PATIENTS WITH NEUROLOGICAL DYSFUNCTION**

Daniel Marinho Cezar da Cruz<sup>1</sup>, Maria Teresa Augusto Ioshimoto<sup>2</sup>

<sup>1</sup>*Universidade Federal de São Carlos-UFSCar, São Carlos/São Paulo, Brazil,* <sup>2</sup>*Hospital Israelita Albert Einstein, São Paulo/ São Paulo, Brazil*

Introduction: current evidence on the effects of occupational therapy with neurologic patients in the hospital show an increase of independence in daily living activities. This role has expanded in monitoring post-hospital discharge for the purpose of adapting the environment to promote occupational performance. Objective: to characterize the service of home visits after hospital discharge of patients with neurological dysfunction. Method: The study was conducted in São Paulo, Brazil, during 2008, on the Division of Occupational Therapy of the Rehabilitation Center, Hospital Israelita Albert Einstein-HIAE. The participants were 32 adults with neurological disorders in preparation for discharge. The instrument used for the evaluation was the "Checklist for Home Visits," developed by occupational therapists from the hospital, consisting of items: diagnosis of the patient, environmental barriers and facilitators, based on the model of the International Classification of Functioning, Disability and Health (ICF) from the World Health Organization. As a supplement photos were made of the places (homes) visited. Data were collected from the completion of the "Checklist of Home Visits" and the photographic record of the environment barriers. The visits lasted about 50 minutes each and were accompanied by the presence of a relative or patient's caregivers. For data analysis, the analysis of mean and standard deviation was used. Results: the first tests showed the majority of patients had a diagnosis of stroke, spinal cord injury and followed traumatic brain injury. In all visits, the environment with the greatest number of changes was the bathroom. Despite the physical adaptations we also found the need to change or adapt the way they carried out activities which when presented at the visits shows the importance of education for patients and their caregivers to learn new ways of performing activities of daily life with safety and quality. Conclusion: The home visit is a procedure that approximates the occupational therapist to the patient's real daily living. In future, research to relate the environmental changes with the increase in the level of independence is required. This is in accordance with ICF, which highlights the importance of environmental factors in the domain of activity and social participation.