Gareth's guide to....

Making stairs safe for complex needs

The Stairclimber People

The number of children with complex needs or life-limiting conditions has increased by over 50% in a decade(1). Thus, occupational therapists are increasingly being faced with the situation of how to make the home safe for the child and the family, especially once they are too big to be carried around…

Managing the risk

In an ideal world, you'd adapt the home or re-house the family into somewhere more suitable. The reality is that takes time, if it's even possible, and you have a duty of care to manage the risk- whether for the short- or long-term.

I say even possible because the truth of the matter is that:
- 80% of the homes we need by 2050 are already built.
- 20% were built before 1919 and
- 50+% are conjoined (semi's or terraces).

Most homes are houses: they have stairs! Are they structurally suitable to be adapted- in their design, space, wall strength etc? Is there space outside for an appropriate extension? And we all know, all too well, the issues with social housing waiting lists.

From a practical perspective, the issue is complicated by the fact that often the children lack control over their bodies.

You have to take into account the likelihood of their thrusting arms or legs out, flailing, spasms and seizures.

You need a way to overcome the need to access up and down stairs, safely- for them, and for their care givers, who are trying to negotiate a dozen or more steps with the weight of the child in their arms -and trying to maintain balance with a child who most likely is not lying there quietly without moving.

The options

There are four core choices:
- move the child's bedroom downstairs,
- a stairlift,
- a through-floor lift,
- a stairclimber (stairclimbing wheelchair).

the choice is influenced by:

- Speed of delivery to manage the risk
- The house layout
- Staircase design
- The size of the child
- Safe access to the stairway by other members of the family

- Space within the home
- Ability of the child to safely use the equipment
- Ability of the care givers to use the equipment
- The type of home

If the child lives in a non ground-floor flat, or a house that is above street level, they still need to be able to go outside.
The issue of flats is growing: currently, some 20+% of UK homes are in multi-occupancy buildings. Many of the older homes have at least one step down to street level- if not more.

Moving the bedroom downstairs

It seems the logical option, as it instantly removes the issue. But it is dependant on the size and scope of the home.

There needs to be space to accommodate the child's bed and all their accoutrements. What about the impact this has on the child, and, as importantly, other member of the family in everyone's use of the home and daily activities? It also means the child's personal space and privacy is adversely impacted.

Many parents do not like their child being so far away at night, in case they are needed.

There needs to be at least a downstairs WC and ideally either an existing bathroom, or the scope to add one.

If these do not exist in the existing layout, often an extension (permanent or relocatable) is added, but again there needs to be the external space to accommodate that, plus access to drains, electricity etc.

The stairlift

The 'go to' conventional solution in adaptations- assuming the staircase design allows, and the structure is strong enough to bear the load. That requires a survey. That equals delay.

Today's versions are available with child accessories- seats, harnesses, foot rests etc. Remember, for a child to use it safely, they need mobility, sitting balance and control over their body movement. The child is sat perpendicular to the stairs, so you need to be sure there is no risk of them sticking out a leg or arm that may catch on the banister and newel posts, nor panicking.

It is a permanent fixture, physically attached to the building fabric, so therefore restricts unimpeded stairway access for others in the household.

The through-floor lift

Through-floor lifts, as their name implies, require a suitable space both upstairs and down- on average, 1m2 as a 'footprint', with a ceiling height of at least 2.1m.

They require cutting of a hole in the ceiling/floor.

They require a survey to assess the property's suitability.

Models can accommodate someone in a wheelchair and a carer. You have to be confident both can fit inside comfortably and safely, whether the child is in a wheelchair or being carried

The stairclimber

A battery-operated free-standing, portable, mobile unit that can be attached to the child's wheelchair or have an integral seat.

No structural survey to assess for weight-loading required.

No installation required.

Capable of climbing most common staircases, and then taking the child onwards to other rooms within the house without an additional transfer.

Can deliver a safe stairway transfer solution within days of assessment.

The child is transported in line with the stairs, slightly inclined backwards reducing risk of panic and the risk of arms, legs getting between newel posts. When not in use, it folds compactly away and can be stowed in a cupboard.

Most are available with seat and harness accessories, designed to ensure the child is comfortable, safe and secure when using the equipment.

The S-Max Sella stairclimber

Class 1 Medical Device certified, the Sella is the only stairclimbing wheelchair which is backed up by full, nationwide sales and service support and with a track record stretching back 20 years. It is the market leader, with more than 5000 units in use with Local Authority and NHS Trusts across the country.

It is also the only stairclimber with a bespoke, purpose-designed all-in-one paediatric seat- the Universal Back.

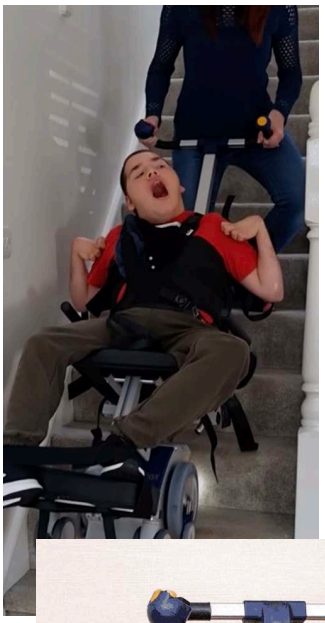
The Universal Back, developed with Occupational Therapists, features head, lateral and seating supports and harnessing. All elements can be precisely set exactly as each child needs for optimum comfort, postural support and alignment, and physical and emotional security. The supports are easily adjusted as the child grows.

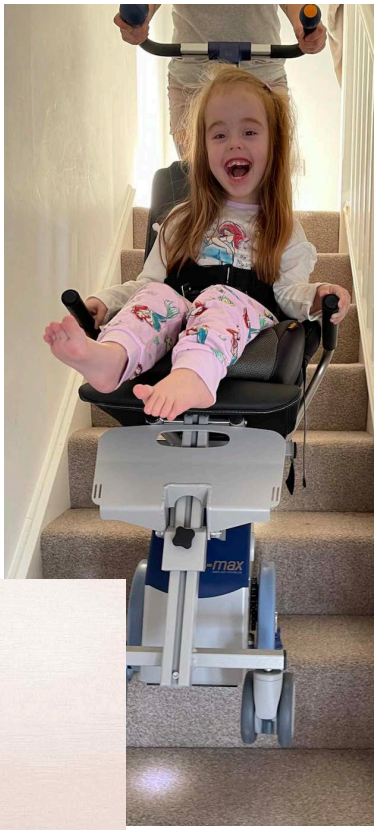
Help one child, help many....

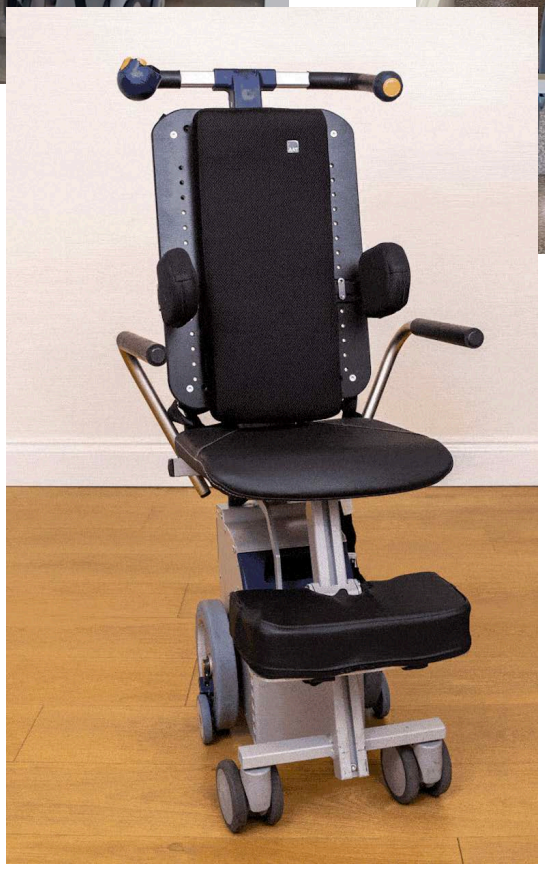
As/when the child no longer needs it, the S-Max Sella can be taken into Equipment Stores and re-issued/ recycled to manage the risk of stairs/ fall prevention for another person- child or adult. All that is needed is training by a qualified professional: AAT checks and services the Sella as part of the re-issue package.

There is none of the inevitable 'making good' of the home required with stairlifts, through-floor lifts.

Reference:
(1) https://councilfordisabledchildren.org.uk/resources/all-resources/filter/inclusion-send/understanding-needs-disabled-children-complex-needs







for further information, videos, testimonials and to book your free no obligation assessment:

https://www.aatgb.com/s-max-sella/

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