

# Supportive Housing: Accessing and Obtaining Housing Supports

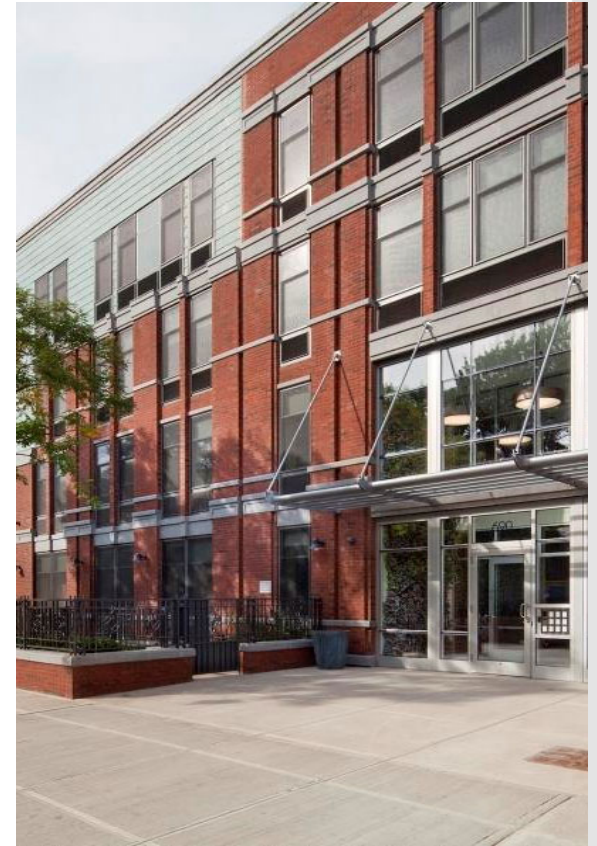
2018



Improve lives of  
vulnerable people



Maximize  
public resources



Build strong,  
healthy communities

Illinois Self-  
Advocacy  
Alliance

*Position  
Statement*

“We want Illinois to create a disability service system where supports and services are controlled by us – the individuals who receive them.

We want opportunities.  
We want freedom.  
We want choices.”



This product was developed under an investment from the Illinois Council on Developmental Disabilities.



# Why are we here?

STUDENT NAME: \_\_\_\_\_ DATE OF MEETING: \_\_\_\_\_

INDIVIDUALIZED EDUCATION PROGRAM (CONFERENCE SUMMARY REPORT)

DATE OF MOST RECENT EVALUATION: \_\_\_\_\_ DATE OF NEXT REEVALUATION: \_\_\_\_\_

**PURPOSE OF CONFERENCE (Check all that apply)**

Review of Existing Data     Reevaluation     IEP Review/Revision     FBA/BIP     C  
 Initial Evaluation/Eligibility     Initial IEP     Secondary Transition     Manifestation Determination     A S

**STUDENT IDENTIFICATION INFORMATION**

STUDENT'S ADDRESS (Street, City, State, Zip Code) \_\_\_\_\_ STUDENT'S DATE OF BIRTH \_\_\_\_\_

MALE    ETHNICITY \_\_\_\_\_    LANGUAGE/MODE OF COMMUNICATION USED BY STUDENT \_\_\_\_\_    CURRENT GRADE LEVEL \_\_\_\_\_  
 FEMALE

PLACEMENT (To be completed after placement determination)    DISABILITY(S) \_\_\_\_\_  
 Yes     No    Placement is in Resident School \_\_\_\_\_

RESIDENT DISTRICT \_\_\_\_\_ RESIDENT SCHOOL \_\_\_\_\_

**PLACEMENT**

SERVING DISTRICT \_\_\_\_\_ SERVING SCHOOL \_\_\_\_\_

**PARENT INFORMATION**

(1) PARENT'S NAME     EDUCATIONAL SURROGATE PARENT \_\_\_\_\_

(1) PARENTS ADDRESS (Street, City, State, Zip Code) \_\_\_\_\_

(1) PARENT'S \_\_\_\_\_

State of Illinois  
Department of Human Services - Division of Developmental Disabilities

**PERSONAL PLAN**

Please refer to the Person Centered Planning Policy and Guideline Manual prior to completing this form.

Name: \_\_\_\_\_

ISC Agency Name: \_\_\_\_\_

ISC Phone Number: \_\_\_\_\_

ISC Contact Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

ISC Email Address: \_\_\_\_\_

**Check type of Plan:**

Initial - No previous Plan developed for DD Waiver Services.

Annual - The annual Plan for individuals who are enrolled in services and currently have a Plan in place

Revision - A change in the individual's preferences, desires, abilities or support needs changed, therefore prompting a change in the Plan

State of Illinois  
Department of Human Services - Division of Developmental Disabilities

**DISCOVERY TOOL**

(Please refer to the Person Centered Planning Policy and Guideline Manual prior to completing this form.)

**Individual's Identifying Information**

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
Preferred Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**Current Service Providers (if this is an annual review of the Plan):**

\_\_\_\_\_

**General Information: (Check the applicable status)**

Initial Assessment - No previous Plan developed for DD Waiver Services.

Annual Review - The annual Plan for individuals who are enrolled in DD Waiver services and currently have a Plan in place.

Revision - A change in the individual's preferences, desires, abilities or support needs.

Parent/Guardian: \_\_\_\_\_

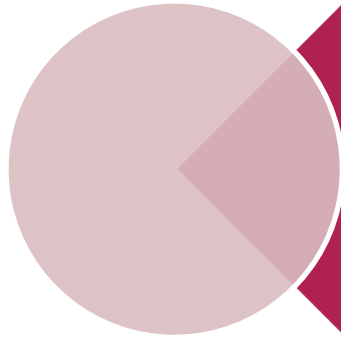
**If the person is seeking supports, please indicate type(s):**

<input type="checkbox"/> 24-Hour Stabilization Services	<input type="checkbox"/> Home Accessibility Modifications
<input type="checkbox"/> Adaptive Equipment	<input type="checkbox"/> Home Based Supports
<input type="checkbox"/> Adult Day Care	<input type="checkbox"/> Individual Service & Support Advocacy
<input type="checkbox"/> Assistive Technology	<input type="checkbox"/> Non-Medical Transportation (HBS only)
<input type="checkbox"/> At-Home Day Program	<input type="checkbox"/> Occupational Therapy
<input type="checkbox"/> Behavior Intervention and Treatment	<input type="checkbox"/> Personal Support
<input type="checkbox"/> Behavioral Counseling	<input type="checkbox"/> Physical Therapy
<input type="checkbox"/> Child Group Home	<input type="checkbox"/> Psychotherapy
<input type="checkbox"/> CILA - 24 Hour	<input type="checkbox"/> Self Direction Assistance (HBS only)
<input type="checkbox"/> CILA - Family	<input type="checkbox"/> Skilled Nursing (HBS only)
<input type="checkbox"/> CILA - Host Family	<input type="checkbox"/> Speech Therapy
<input type="checkbox"/> CILA - Intermittent	<input type="checkbox"/> Supported Employment
<input type="checkbox"/> Community Day Services	<input type="checkbox"/> Temporary Assistance (HBS only)
<input type="checkbox"/> Community Living Facility	<input type="checkbox"/> Training and Counseling Services for Unpaid Caregivers (HBS only)
<input type="checkbox"/> Emergency Home Response Services	<input type="checkbox"/> Vehicle Modification

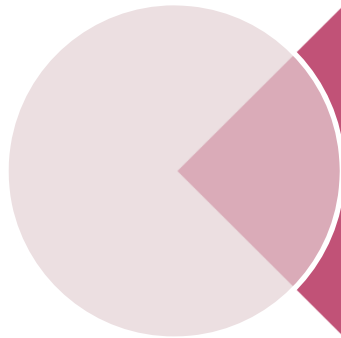




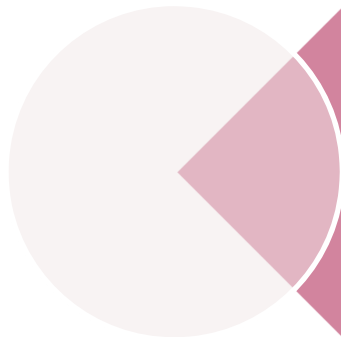
# Today's Time Together



Understand what supportive housing is and how to access it



Learn how transition programs are sharing this information with students



Know how to access Prioritization of Urgency of Needs for Services (PUNS), Division of Rehabilitation Services (DRS), Statewide Referral Network (SRN), and the Housing Authorities

# One Family's Story



**Phyllis, Tom and Frank**

**Link to the video:**

<https://www.youtube.com/watch?v=opgmyPX7rdI>

# Defining Quality Supportive Housing

# What is Supportive Housing?

Supportive housing is affordable and has services that help people live with stability, independence, choice, and dignity.





## Supportive Housing SEPERATES funding for housing from services.

- Must have a lease and be affordable
- In a neighborhood like anyone else
- Live alone or with someone they choose
- Must have services and collaboration
- It's a long term home

## Benefits

- Increased interdependence and choice
- Increases opportunities for a life like any other (neighbors, work, community)
- Retaining income

State of Illinois  
Department of Human Services - Division of Community Services

**PERSONAL PLAN**

Please refer to the Person Centered Planning process

Name: \_\_\_\_\_

ISC Agency Name: \_\_\_\_\_

ISC Phone Number: \_\_\_\_\_

Check type of Plan:

Initial - No previous Plan developed for this individual

Annual - The annual Plan for individual

Revision - A change in the individual's needs prompting a change in the Plan

If the person is seeking supports, please check the applicable services:

24-Hour Stabilization Services

Adaptive Equipment

Adult Day Care

Assistive Technology

At-Home Day Program

Behavior Intervention and Treatment

Behavioral Counseling

Child Group Home

CILA - 24 Hour

CILA - Family

CILA - Host Family

CILA - Intermittent

Community Day Services

Community Living Facility

Emergency Home Response Services

State of Illinois  
Department of Human Services - Division of Community Services

**DISCOVERY TOOL**

(Please refer to the Person Centered Planning process)

Individual's Identifying Information

Name: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Current Service Providers (if this is an annual review): \_\_\_\_\_

Additional Information: (Check the applicable status)  
 Assessment - No previous Plan developed for individual

## LEASE

1. I pay my rent on the 1st of the month.



2. I will keep my house clean. I will not break things in my home.



3. I will follow the rules in my building.



4. My visitors must go home.



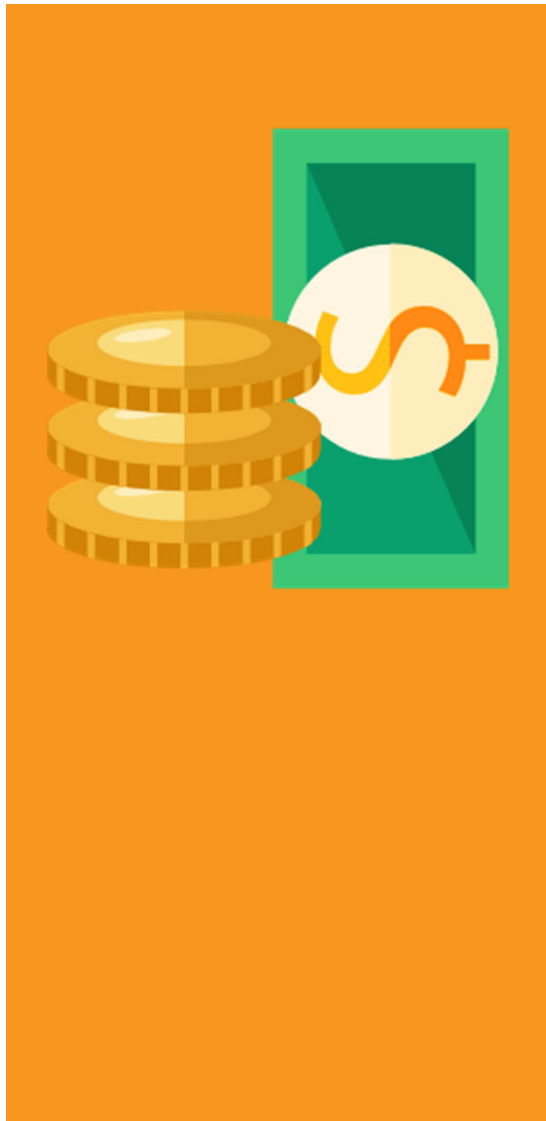
By signing below , I am agreeing to follow the rules.

Signature:

Date:

## Must have a lease

- Self-Advocate signs a lease and must follow rules
- Can live there for a long time
- Self-Advocate can live alone or with a roommate they choose

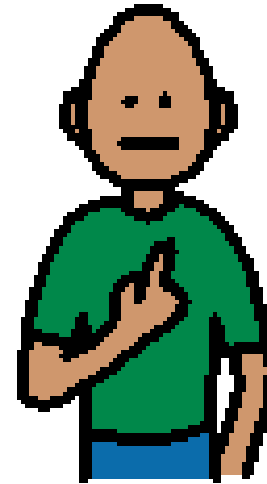


## Is Affordable



- Doesn't cost all of someone's money
- People in Supportive Housing pay 30% of their income in rent
- Example: someone has \$750 from SSI. How much is the rent?

## Must have Services



- Sometimes people need help with reminders, bills, medication, daily activities, or following rules of the lease
- Supportive Housing is for anyone who needs some help in their housing



# Related Services

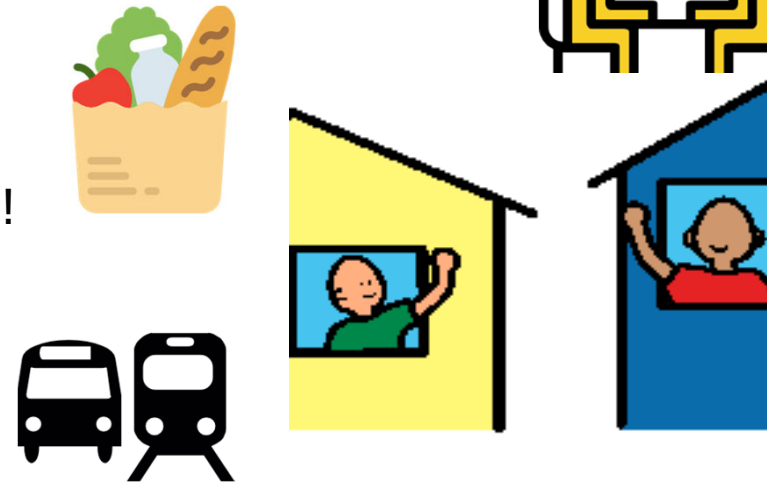
1. Self advocates have choices in what services they want. Services are Person-Centered and flexible.



2. The self-advocate, their family, their staff, and the landlord all talk to each other. Staff can help talk to the landlord.



3. Self-Advocates live in neighborhoods and go places just like everyone else!



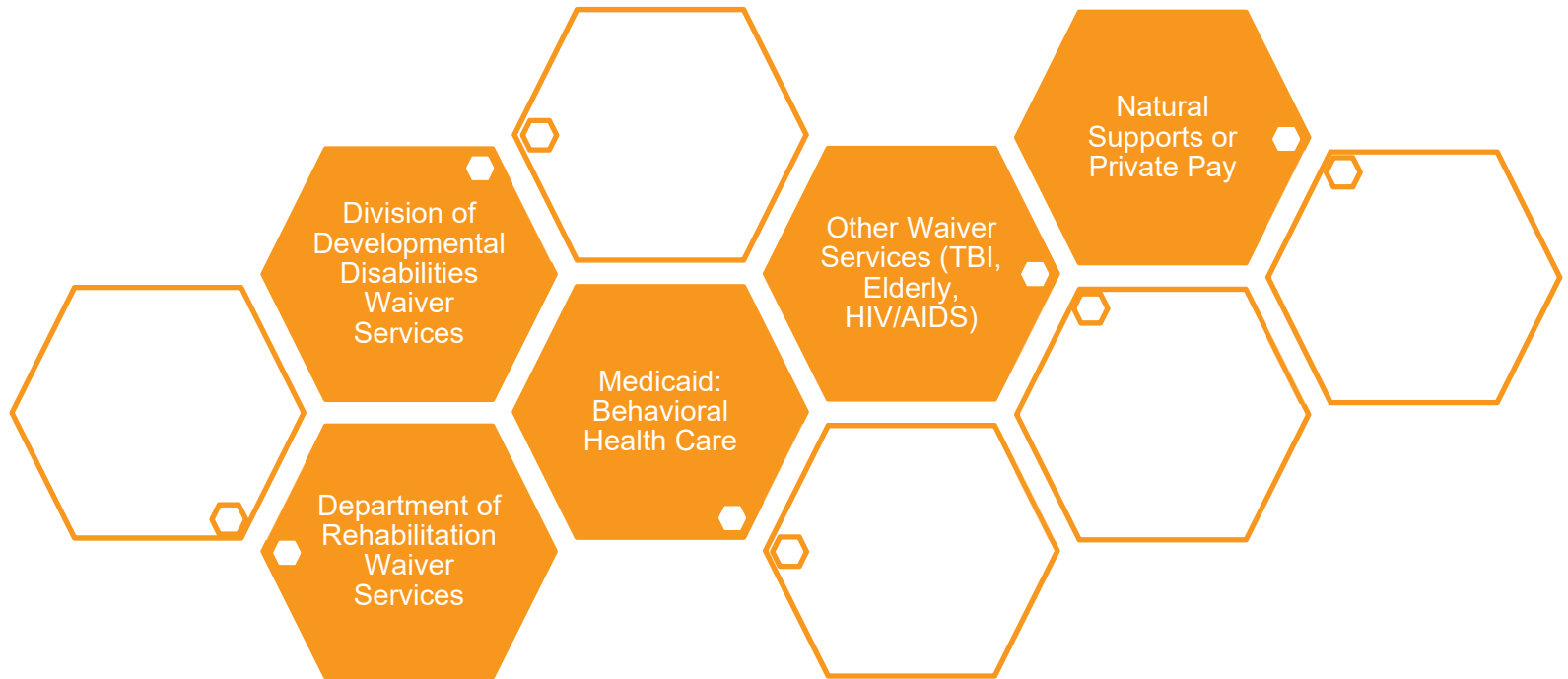
# Separating Housing and Services

# Getting the Services

<https://www.youtube.com/watch?v=BjT2N42h2h4&t=13s>



# Related Services: Making the Connection to Adult Services



## Advocacy

Arc of Illinois

Centers for Independent Living

NAMI



# Services for people with IDD

1. Division of Developmental Disabilities
  - A. Intermittent CILA
  - B. Home Based
2. Natural Supports
3. Private Pay

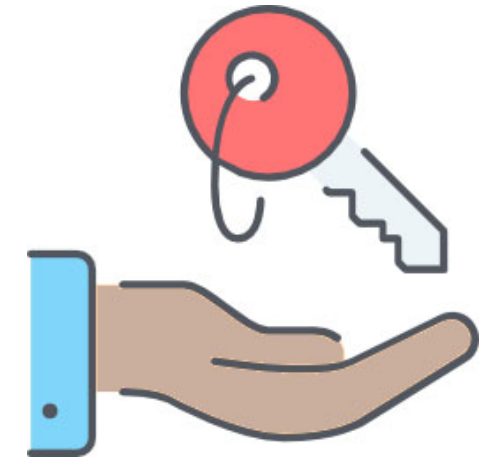
# Getting the Housing



# How Individuals Access Affordable Housing

Get on the Statewide Referral Network(SRN)

- Independent Service Coordination (ISC)
- Providers



**AND**

Apply through the local Public Housing Authority



**MAYBE**

Use <http://www.ilhousingsearch.org> to identify affordable housing in your area. (60% AMI, need higher income)



# Welcome to Edwardsville!

The May building was created through many efforts and collaboration of self advocates, families, Division of Developmental Disabilities, State Housing Coordinator Lore Baker, Madison County Housing Authority, Trinity Inc., Ligas Family Advocate Program and Developmental Disabilities Services Metro East!



**Let's watch a video!**

<https://www.youtube.com/watch?v=DnSif-yYqU>

# Welcome to Edwardsville!

**The Resident's Make Their Own Video:** While CSH had staff making the other video, the residents made their own:

**Let's watch their video!**

<https://cshcloud.egnyte.com/dl/ayofwSITjg>



# Annie's Home

Annie lives in Illinois. She is a self-advocate, and has been wanting a place of her own for a long time!

See Annie's Story!



Book 2: Everybody Worries About Me: [clicking here](http://www.csh.org/2016/10/everybody-worries-about-me/)  
Link: <http://www.csh.org/2016/10/everybody-worries-about-me/>





# Annie's Home

Annie learned a lot before moving to supportive housing. She learned about:

- Safety
- Having a lease
- What it was like to have less staff around all the time
- Asking for help
- Having more choices
- Paying bills

# Next steps

Awareness

Living arrangements after school

Long term commitment for long term desire

Supporting each family that wants this option

Visit!

Encouraging providers to increase availability

# Supportive Housing Coffee Talk

**Join a conference call to ask questions!**

Upcoming Call in Hours

Thursday , November 1  
3:00 PM to 4:00 PM

Saturday, November 3  
10:00 AM to 11:00 AM

Tuesday, November 13  
1:00 PM to 2:00 PM

Thursday, November 15  
7:00 PM to 8:00 PM

To join, call 1-866-840-0048

When you are asked for a conference code, enter the number  
2168105#.

Email Julie for future schedule! [Julie.nelson@csh.org](mailto:Julie.nelson@csh.org)



# Contact Information

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Senior Program Manager

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Email: [john.fallon@csh.org](mailto:john.fallon@csh.org)

# Resources

## VIDEOS

<https://www.youtube.com/user/CSHVidz/>

- Phyllis Gets Her Own Life, and So Does Her Son
- A Choice to Succeed
- Creating Choice
- Adam Cooper: Presentation at CSH Summit
- Tom's Journey: A life and home like any other
- Designer George Braddock: Creating Person Centered Homes Part 1 of 4 (entire series is on YouTube)
- An Option for Community Living

# Resources

## VIDEO

It's My Home!

Created By Open Future Learning

- <https://www.youtube.com/watch?v=lrXmOHadkU4>

## Digital Books

- Annie Gets Her Own Apartment
  - <http://online.flipbuilder.com/sjol/wrtd/#p=1>
- Everybody Worries About Me
  - <http://online.flipbuilder.com/sjol/uvkd/>

# Resources

## PDF Resources

Housing & People with Disabilities: Myth and Truth

- [https://gallery.mailchimp.com/d477f3e2e075003c9d2f335a3/files/3a1c5178-d321-4276-a1dd-a48ebce3a674/Myth\\_and\\_Truth.pdf](https://gallery.mailchimp.com/d477f3e2e075003c9d2f335a3/files/3a1c5178-d321-4276-a1dd-a48ebce3a674/Myth_and_Truth.pdf)

Supportive Housing for Persons with Intellectual and Developmental Disabilities

- <http://www.csh.org/wp-content/uploads/2016/10/IDD-September-2017.pdf>

Supportive Housing Models Integrated Toolkit

- <http://www.csh.org/supportive-housing-integrated-models-toolkit/>

Supportive Housing Workbook for Adults with Intellectual and Developmental Disabilities & their Families

- <http://www.csh.org/wp-content/uploads/2016/03/IDD-Family-Supportive-Housing-Workbook.pdf>