



FLORIDA DEVELOPMENTAL DISABILITIES COUNCIL

Alternative Residential Options Work Group

November 19, 2009 * 9:30 am – 4:30 pm

TALLAHASSEE COMMUNITY COLLEGE (TCC)
 Economic Development & Workforce Building * Room 207
 444 Appleyard Drive
 Tallahassee, FL 32304

MEETING NOTES NOVEMBER 19, 2009

Attendance Chart

NAME	REPRESENTING	ATTENDED	COMMENTS
WORKGROUP MEMBERS			
Bob Brown- Barrios	Governor's Office on Policy and Budget	Yes	
Bryan Vaughn	Governor's Commission on Disabilities	Yes	
Tom Rice (for Jim DeBeaugrine)	Agency for Persons with Disabilities (APD)	Yes	
Senator Altman		No	
Rachel Barnes and Representative Stargell		Yes	
Representative Bill Galvano		No	
Sheryl Soukup	Immokalee Non-Profit Housing	No	
Richard Chapman	Executive Director, ADAPT Florida	Yes	
Kingsley Ross (for Ven Sequenza)	Autism Society of Florida	Yes	
Lila Klausman	Parent Planning Program	Yes	
Tito Balduci	Home Choice Supporters	Yes	
Damian Gregory	Self-Advocate and former Support Coordinator	Yes	
Pam Kyllenon	Agency for Health Care Administration (AHCA)	Yes	
Suzanne Sewell	Florida Association of Rehabilitation Facilities	Yes	
Jack Kosik	Noah's Ark of Central Florida	Yes	
Betty Kay Clements	Family Care Council Florida	No	
Sylvia Smith	Advocacy Center	Yes	
Janice Phillips	Association of Support Coordinator Agencies	No	
Deborah Linton	ARC Florida	No	
Debra Dowds	FDDC	Yes	
NAME			
REPRESENTING			
PRESENTERS			
Molly McKinstry	Agency for Health Care Administration		
Tom Rice	Agency for Persons with Disabilities		
GUESTS			
Eugenie Amalfitano			
Rachel Barnes	Representative Stargell's Office		
Mary Beth Date	Governor's Office on Policy and Budget		
Susan Gold	Chair, Florida Developmental Disabilities Council		
Eugene Klausman			
Margaret McNutt			

Simone Tetreault	Statewide Coalition for Expanded Residential Options
Susan Thiele	Earthserve Village
Jim Whitaker	ARC Jacksonville
Leigh Meadows	Agency for Health Care Administration
FDDC STAFF	
Vanda Bowman	
Margaret Hooper	
Latarsha Williams	

Welcome and Introductions

The meeting was called to order at 9:40 a.m. Everyone present introduced themselves.

Overview of the Day and Agenda

Celeste Putnam, the facilitator, provided an overview of the work accomplished by the Workgroup to date. She then provided the members with the opportunity to discuss the Group's accomplishments over the last three meetings.

Lila Klausman expressed concern about comments made by the DD Council to CMS regarding proposed rule changes on the Home and Community Based Waiver. She indicated that the Group could not have an open dialogue about how to proceed without discussing this issue. The Group was given the opportunity to discuss the issue. The members of the Group and facilitator offered suggestions as to how to proceed. The Group decided to proceed with the agenda as planned to see if issues related to the CMS comments would be discussed as part of the meeting.

The facilitator asked Group members to raise their hands if they had also made comments to CMS on the proposed rule. Several Group members raised their hands and were asked to bring copies of their comments to the next day's meeting and be ready to discuss them if needed.

Beginning Activity – Discussion of Definitions

The facilitator discussed the shifting society norms for young adults, indicating that today, because of a variety of reasons, there are more multi-generational homes. Young adults are not truly on their own until much later (age 30) than in previous generations, when individuals left home at 18 years old and remained on their own. A discussion was held regarding the differential exercise from the last meeting. The facilitator said that, in reviewing the materials, she noted that the key area of differentiation was defining proximity of homes for persons with developmental disabilities. Other than that issue, the comments made by the Group in the last meeting indicated agreement on the other desired features of community living for persons with developmental disabilities. The facilitator asked the group to share their opinions on this issue.

Points Made

- Technology can and has made connections with others easier, even if they live apart.
- The value of one-on-one connections must not be lost.
- Even with technology, you need to have the ability to transport yourself to participate with others in events.
- The need for a definition of inclusion and choice was also discussed.

- Just because you are physically close to someone does not mean that you will be included or interact with others.
- Multiple models of community living are needed because of diverse levels of functioning, desires for certain life experiences, and the range of required assistance and supports.

Group Exercise

In the last meeting, the Group was asked to divide into two sub-groups, “those who were very committed to Planned Residential Communities for Persons with Developmental Disabilities” (the A subgroup), and those that were “Still learning more, or neutral on the issue” (the #1 subgroup). The subgroups were delineated in this way to generate discussion for the Differentiation Exercise in the last meeting. The goal of the November meeting was to reach as much consensus as possible regarding Planned Residential Communities. Therefore, to ensure that workgroups included members with a range of viewpoints, it was important for workgroups to be formed that included persons from the former A and #1 subgroups. The Group members were asked to first line up in the A and #1 subgroups, and then were separated into four workgroups that mixed members from the previous subgroups A and #1. The new workgroups were asked to move to the four corners of the room to spend time developing a workgroup name and identifying what they had in common with each other. A ‘Pictionary’-like exercise was conducted with each of three workgroups guessing the name of the other workgroup from a pictorial representation of the name. The names of the four workgroups represent the members’ common features and are listed below:

- the Confident Beach Bums,
- the Free Sailing,
- the Diplomatic, and
- the Florida Transplant.

Prior to the November meeting, members of the Group requested definitions of some of the ‘hot button’ words. The Group decided to develop these definitions together. Each of the four workgroups was given a hot button word to define and was asked to work together in one of the four breakout rooms. The workgroups were informed that, because we needed to accommodate Molly McKinstry’s tight schedule (AHCA licensing representative), we would break from the workgroups to enter into a discussion with her as soon as she arrived.

Working Lunch

Members continued to meet while eating lunch. Each workgroup continued to discuss the definitions of their assigned words. Molly McKinstry arrived right after lunch. The discussion on the 1,000 foot rule and how it impacts licensure for Assisted Living Facilities (ALFs) is summarized below.

Discussion of the 1,000-Foot Rule and Licensure

Molly McKinstry from AHCA made a presentation (see Handout).

The definition of an ALF (Handout, p. 4) was discussed. The local zoning authority can give a variance to Chapter 419, F.S. It should be noted that you can get a variance of the 1,000 foot rule through local land management officials if the ALF has six beds or less. There is no limitation on the number of facilities that can be included. The local government is responsible for approving or denying the variance. If all other licensure requirements are met, AHCA will license the facility as an ALF. Also, it was noted that Medicaid Waiver services can be provided to persons living in an ALF. Therefore, communities already have the ability to develop Planned Residential Communities if they are able to obtain local zoning variances. Another important point discussed was that the local zoning authorities are very unlikely to ever relinquish their local authority to approve building projects and land use. The decision to permit building or formation of a Planned Residential Community will likely remain with local government.

Rule 65G-2.015 Siting

Tom Rice began the discussion. APD is responsible for making sure that what is approved does not conflict with Chapter 419, F.S. For six (6) beds or less that are sited greater than a 1,000 foot radius apart, the APD requirement is to notify the local community of the plan to license a particular house as a group home. The APD rule 65G-2.015 states that even if the provider obtains a variance from the local authorities, APD will not grant a license for facilities within a radius of 1,000 feet, and furthermore will not permit more than three homes to be situated on a single parcel of land unless a road or water mass provides a natural separation of the land. However, it was noted that a provider can seek an Administrative Hearing to challenge the interpretation of the rule.

It was also pointed out that any home must be licensed if, through its operation and/or management, it provides services to more than one non-relative. An extensive discussion was held regarding requirements for licenses and the differences between licenses, weighing the pros and cons of the multiple license approach (such as Lambs Farm) and the single license approach (Camphill; New York developed a special licensure category for Camphill). Discussion was held regarding the values of rules and regulations. State government is required to have rules, but the people have opportunities to provide feedback to state officials.

Tom reported that group homes are market-driven (in terms of availability and interest); if there is no interest, then a home will have lots of vacancies. Other constraints to receiving residential services were discussed. Suzanne Sewell stated that the tiers will impact what people can do. Comments indicated that most people on the Waiver are getting less than \$15,000 in supports (and this does not cover residential costs). The facilitator stated that the bottom line is that very limited state/federal funds are available to support persons with developmental disabilities if they need financial supports. More importantly, they must also be on the waiver. If these conditions are not met, access to residential supports for persons without other financial means is no more likely in

Planned Residential Communities than it is for group homes. It should be noted that the letters received through the "Tell Your Story" request showed that families and individuals felt they need more residential options (such as a Planned Residential Community); most also needed state/federal financial supports.

Additional Discussion of the 1,000-Foot Rule

- Debra suggested that maybe it is really not the 1,000-Foot Rule that is the issue/barrier that should be addressed, since the local community has the final authority on their land use.
- Lila said that people think that the 1,000-Foot Rule is the issue. It is a state/institutional bias.
- Susan Thiele said this really is a funding issue, and the state really should work to make it easier for people to live in Planned Residential Communities.

After the 2:20 pm break, the four groups presented their definitions:

INCLUSION

Inclusion is the opportunity for individuals to choose to be apart of the community. People with disabilities have the opportunity to choose where to live, work, study, plan and worship. The term "Inclusion", used with respect to individuals with disabilities, means the acceptance and encouragement of the presence and participation of individuals with disabilities by individuals without disabilities in social, educational, work and community activities. Individuals with disabilities have the same rights and freedoms as every other citizen in the United States

COMMUNITY INTERGRATTION

The term is used with respect to individuals with disabilities; means exercising the civil and equal rights of individuals with disabilities to access and use the same community resources (and interact with others who share mutual interests) as used and available to all individuals.

COMMUNTIY

The number of people who live within reasonable proximity; varying levels of interdependence; common resources that the people living there use; opportunities for interaction and fellowship; common identity.

INSTITUTION

A facility that provides housing and treatment for persons with special needs. Institutions must have all or most of the following: (1) provides a full range of services including work, treatment, medical care and housing. (2) Residents live with limited contact with the broader community. (3) The individual has limited control over their daily routines. Choice is limited to whatever the facility offers. (4) People are not able

to choose with whom they live and how they live and whether they want to live with them. (5) Moving out is not solely controlled by the individual. (6) Daily routines are set by the facility and follows specific schedules such as assigned mealtimes and bedtimes...etc. (7) Paid staff provide direct support and work on a shift basis. (8) Entry/exit of the facility is limited and controlled by the organization. (9) Medicine and other supports are provided or arranged by the organization.

SEGREGATED COMMUNITIES

The policy or practice of supporting and/or restricting people of different races, classes, characteristics, disabilities or ethnic groups as it relates to education in schools, housing and public or commercial activities and facilities through laws, rules, regulations or policies and practices, especially as a form of discrimination.

The facilitator provided an overview of co-op housing options, distributing copies of this information to the members.

Public Comment

There was no public comment from the room or over the telephone.

Adjournment

The meeting was adjourned until 9:00 am the following morning.



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Debra Dowds	FDDC	Yes	
NAME			
REPRESENTING			
PRESENTERS			
Tom Rice	Agency for Persons with Disabilities		
Casey Stewart	Self-advocate		
GUESTS			
Eugenie Amalfitano			
Deb Blizzard	Agency for Persons with Disabilities		
Susan Gold	Chair, Florida Developmental Disabilities Council		
Eugene Klausman			
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Simone Tetreault	Statewide Coalition for Expanded Residential Options		
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Opening Activities

The meeting started at 9:15 am. The facilitator reviewed the agenda with the Group and discussed some of the changes in service delivery for persons with Developmental Disabilities throughout the nation. She referenced the content of the National Association of State Directors for Developmental Disabilities Programs (NASDDDS) 2008 Annual Conference. This conference was entitled, "Constructing the New Paradigm." The topics included discussion of the demographic and economic realities facing states; finding better ways to support families; and examining new types of living arrangements (such as Lifesharing Communities and Cooperatives) to provide long-term supports. The fact that this conference addressed the same issues discussed in our Group illustrates that Florida is not alone in facing the issue of providing long-term, sustainable living supports for persons with developmental disabilities.

The facilitator also discussed the implications of the recent (June) proposed rules changes published by the Center for Medicare and Medicaid Services (CMS). One section of the proposed changes suggested that CMS intends to ensure that programs receiving Waiver services are in fact "community based services." The language included in the proposed rules stated that, "Through this ANPRM, we are announcing our intention to propose to affirmatively identify expectations for characteristics of home and community-based settings. ... Therefore, we are planning to propose adding to 42 CFR subpart G a requirement that individuals receiving HCBS waiver services must reside in the home or community, in accordance with either of two criteria enumerated below:

- Resides in a home or apartment not owned, leased or controlled by a provider of any health-related treatment or support services; or
- Resides in a home or apartment that is owned, leased or controlled by a provider of one or more health-related treatment or support services, and that meets standards for community living, as defined by the State and approved by the Secretary."

The facilitator discussed with the Group the possible implications of this rule change. Facilities operated directly by a provider that owns and controls services will be under increased scrutiny. Programs with several of the characteristics listed above under 'institutions' may not meet the guidelines for community-based services. Should this occur, the persons living in those settings would not be able to receive Waiver services. The Group discussed how important it will be for developers of Planned Residential Communities to be aware of these requirements when they design their community living programs if they intend to have people living in the homes who need Waiver services. It was noted that small is always better and that configurations of homes operated by one provider that are adjacent to one another consisting of a total of more than 16 beds often are considered 'institutional' settings by researchers and by some federal definitions of institutions.

Additional discussion was held regarding the definitions that were developed the previous day and how they might relate to the proposed rule.

- Any policies/practices that you put in place to allow for freedom and choice will help move you away from the institutional model.
- AHCA looks at the ratio of staff to consumers when determining whether a license can be granted for programs that they license.

Question: How is 16 beds interpreted?

- Under one roof criteria?
- Under one license?
- 16 beds or 30 beds?

Presentations

PowerPoint Presentation by Casey Stewart

Members watched a presentation by self-advocate Casey Stewart. This presentation provided an excellent example of one person's desire for self-determination and individual freedom while simultaneously receiving the necessary supports to live safely and with others. The PowerPoint illustrated the progression of services from institutions to group homes to supported living, highlighting how each subsequent program attempted to address the shortcomings of the previous model. The presentation did not dispute the need for group homes or supported living programs, but instead showed the need for some type of co-housing approach that would avoid the restrictiveness often inherent in group homes yet provide for social connections and safety that has proven to be a challenge for some people in supported living environments.

Activity: Design a Planned Residential Community

The same four workgroups established the previous day continued to work together. Each workgroup was asked to create an example of a 'Planned Residential Community' to illustrate their common vision of how such a program could be designed and operated. Each of the workgroups went to a separate breakout room that was equipped with a large piece of white paper, cut outs of houses, trees etc., construction paper, crayons, markers, and scissors. They used these art materials to illustrate their common vision of a Planned Residential Community. The workgroups ate lunch in their breakout rooms as they developed their plans. The facilitator had to prompt them several times to finalize their pictorial representations of the community. Each group was then asked to present their design.



Workgroup designs for Planned Residential Communities

Confident Beach Bums

- All homes (except group homes) would be available to people with and without disabilities, with background checks required.
- Community is a mix of all options, and could include duplexes and/or a facility.
- Supports and services would be provided, with a service debit card that would cover transportation and all services.
- Funding sources for construction would come from land developers and self-advocates.
- Required government actions: money follows the person and the elimination of the 1,000-Foot rule and the rule concerning three homes together.
- Payments for services would be based on a sliding income scale for individuals, and Waiver services would also provide supports for persons with developmental disabilities.
- Patterns of entrance and exit would be that people could come and go as they pleased and also freely move from place to place within the community.
- A business/economic model like that of Southwood or Celebration would be adopted.
- Issue: would medical care needs be added or addressed, and should onsite support be provided?

Presentation – Free Sailing

- People would share a community that was designed be organic and evolving.
- Homes would be bought in an existing neighborhood.
- A human services co-op would be developed and responsible for providing services and socialization for the people; the co-op would own the homes, which would be designed with lots of parent involvement and input.
- The community would include a mix of options, such as supported living, group homes and foster homes.
- The vision is that of a regular neighborhood with nearby shopping.
- Three or four people with disabilities would live in each home; the inclusion of people without disabilities still remains to be decided, coming up with a percentage to keep a workable mixture.

- Services would be provided by the co-op, which would set up a neighborhood watch.
- Financing would be through the formation of a fund-raising foundation.
- Legislation is needed concerning the application of the sexual predators rule to persons with disabilities.
- Another issue for consideration would be the development of a homeowners association.

The Diplomatic Group's Village

- Land would be made available through a gift or community land trust.
- Residents would be mixed, both with and without disabilities; try to attract students (low income rent) or possibly Seniors.
- It would not be gated, but there would only be one way in or out, with a pathway system behind the homes (people could walk, ride or use golf carts).
- Home types would include single-family, apartments and group homes (some clustered, some spread out).
- It would have some retention ponds with fencing.
- For safety concerns, the village would be pedestrian oriented. All homes will have security systems and sprinkler systems. The village would have some type of nighttime security, perhaps provided by volunteers.
- It will have some type of recreational and social activities that will be available to all community members (want to add activities for Seniors).
- It would include a community garden, incorporating solar power and solar energy.
- Concerning affordability, costs would be limited to 25% of individual income, with incentives for people who provide services and want to live in the community (perhaps offering incentive housing for college students).
- Concerning transportation, bus stops should be no more than four blocks away; an attempt would be made to have a bus stop at the community center.
- Neighbors will provide a backup transportation system. Golf carts would also be available (a community van would be the option of last resort).
- Concerning supports, need to work out licensing fee similar to ALFs and group homes. Will also have supported living and foster homes (house parent to help with support in each home, similar to Lifesharing models).

- Employment would be available via café opportunities; landscaping needs would also generate employment opportunities.
- People would also have work opportunities in the broader community.
- It would include a non-denominational chapel.
- It would provide recreation in the form of a pool area, theater, clubhouse and a café (an ATM machine would also be provided).
- Its funding would come through faith-based donations, grants, and possibly a trust (stimulus money, Florida Trust Financing Corporation).
- Government action would be needed to encourage seniors to relocate (perhaps a larger senior homestead exemption for those living in the village).
- Apartments would have one, two or three bedrooms.
- Duplexes would help bring the housing density up.

Florida Transplants

- Privately-owned businesses should be developed near the front of the neighborhood. A homeowners association would be desirable.
- There should be between 60 and 75 people in the neighborhood, which would include an elder-focused ALF and one DD-focused ALF.
- Between 10% and 20% of housing must be offered to people without disabilities (this would be a cap).
- There should be no congregate dining and no structured employment (they would hope people could get jobs at some of the business in the neighborhood).
- An amphitheatre should be included, one that anyone could use.
- There should be some kind of screening of people applying to live in the community.
- The community should be a mix of single-family, duplex, and apartment housing (specifics need to be discussed).
- No discussion was held on the delivery of services or how socialization needs would be addressed.
- Government action would be needed in the form of another Medicaid Waiver housing option.
- Another issue that needs to be discussed is whether cars and golf carts could share the same roadway.

- Neighborhood businesses should be situated at the entrance to allow the businesses to get revenue from people outside the neighborhood.
- If possible, businesses should be limited to those operating during daylight hours (so that there would be fewer people hanging around at night).
- Residential supports should be provided, ranging from ADLs to shopping. These could be delivered in an apartment, at a single-family home (basically, anywhere in the community).
- Another question to be addressed is how much supported living can be located in the neighborhood; and what if the site does not have other living options?

Presentation by Tom Rice, APD

Tom Rice clarified that even if a provider obtained a variance from the local government, APD would probably not license the home based upon Florida Administrative Code Rule 65G-2.015. This rule states that only one facility may be sited on a single parcel of land (no specifications regarding the size of the parcel of land). If the parcel of land is separated by a body of water or limited access highway, the Department Director may grant a variance. However, the rule goes on to state that no more than three homes can be constructed within a radius of a 1,000 feet.

Comments made about screening possible community members prompted Mr. Rice to discuss the problem of neglect and exploitation with persons with developmental disabilities. Their need for personal care and assistance makes them particularly vulnerable for abuse and victimization.

He made the following comments:

- Perpetrators are usually not strangers; sadly, the research indicates that caregivers are the ones most likely to abuse/exploit people with disabilities.
- Social isolation is the main risk factor leading to increased exploitation.
- Having a general background screening is not enough; this just means that the perpetrator has not yet been caught.
- Caregivers really need to be screened carefully.
- APD believes that education is needed, both for the persons with disabilities and their families.
- The state attorney's office is responsible for prosecuting people; we need to make them more aware of this problem.

Discussion Session: Organizing for Inclusion

The Group discussed how inclusion could be achieved in the communities. Issues discussed included:

- how people join and leave the community;
- how decisions are made (personal choice);
- meaningful careers and interactions with others at the workplace;
- family and friends to provide support throughout life;
- economic interchange with the wider community; and
- reciprocal relationships in all aspects of community life.

Group Comments: Free Sailing

- If the co-op owns the home, then supported living offered by the co-op will be a challenge because you then have a provider owning the facility, which brings you under the current rules and licensure requirements. If the homes were going to be licensed by APD and not AHCA, the applicable APD rule would have to be amended. This would require either willingness on the part of APD or legislative changes.
- Another issue to consider is that of safety concerns in bad neighborhoods (will the home be safe enough).
- More socialization and recreation opportunities will be needed.
- Need to make more opportunities for individuals with disabilities to have a voice at the table when decisions are made.
- Pre-planning needs to be further defined, as well as a description of the envisioned community.
- This type of community may not be what was intended by last year's legislation regarding Planned Residential Communities because it is not new construction and pre-planned prior to construction.

Confident Beach Bums

- They have concerns about the mixture of people within the community. What will the percentages be? How would proportions be set? How would they be enforced? How would the market drive the proportions?

The facilitator interrupted the discussion to allow for Public Comment at the designated time, but there was no one on the conference call line who wished to make comments.

Discussion continued on the different models.

Diplomat's Village

- The whole community is considered one parcel of land, so you will need to get a variance from the local governing body if you want to have four (4) group homes.

- If group homes are used, they will have to be licensed by AHCA as ALFs.
- How do you entice people without disabilities to live in the community (and what ratio of people do you want)?

General Comments:

- There was discussion about the amount of outside businesses to be brought in, and the need to determine ways to attract business to the community.
- It is important to develop business opportunities to get the people to come in (need to develop a design).
- The amount of landscaping and maintenance required (who will be responsible).
- The number of group homes in the model should be limited.
- Part of the intentional community assumes that, where people live, the governance will be provided by the same entity that is in charge of, and takes the lead in, planning.
- We have to be specific concerning governance.
- We need to ensure that an attempt is made to get a mixture of residents (persons with and without disabilities).
- Need continued commitment to accommodate people with challenges (at varying levels).

Approaching Consensus

In reviewing the four designs, there appeared to be many common features. These include:

- Limited entrance and exit by neighborhood streets.
- Not busy main streets.
- Business to serve the broader community.
- Restaurants and some shopping for basic supplies.
- Unconfined access to the broader community.
- Expectations that services such as medical, supports, etc. will be obtained from the broader community.
- Expectation that many people will work in the broader community.

- A mixture of types of homes, including single family residences, apartments, duplexes, and group homes-licensed by AHCA (some may be APD homes if the rule is amended).
- Small homes with live-in staff, such as in the Lifesharing models.
- Fairly broad use of the supported living model.
- Common places to socialize and share in recreational activities.
- No central dining room or workshop on the grounds.
- People will establish their own personal schedules based on their daily events and requirements.
- Special safety features for security.
- Roads safe for golf carts and bikes.
- All but one design was based upon new construction.
- Assume that there will be people with disabilities who have independent means to cover living costs, and others who will need state and federal support through the Waiver.
- People will apply to live in the community, but they will not be “admitted to a program”. Instead, they will select their home and supports individually.
- The cost of construction or buying homes will be covered through private dollars, grants, community fundraising, etc.

After the presentations, there was still one key remaining difference. All the designs included people without disabilities living in the community. However, none of the designs included provisions for the proportion of persons with and without disabilities in the community. Most of the group members thought that it was important to be clear that the Planned Residential Community *intended* to have incentives to promote persons without disabilities to live in the community, but there was no agreement on whether there should be a set goal or requirement for proportions. Also, some members felt strongly that it should be permissible for Planned Residential Communities to only have persons with developmental disabilities living in the community. This issue is basically the only remaining area in which consensus was not reached.

All the Group members embraced the need for persons with disabilities to live near their friends and have opportunities to informally socialize and have recreational opportunities with the people they chose to be with. The need for safety and social connections was fully understood by all members. Also, the group realized that the only issue that prevented the licensure of APD group homes that were within 1,000 feet of one another is the APD rule on siting. No other constraints exist, since local government can provide variances to the 1,000 foot rule. The Group also

acknowledged that, like it or not, local governments will likely maintain their ability to regulate local land use including the development of Planned Residential Communities. The Group also discussed that the real intent of the “1,000 foot rule” was to allow the operation of group homes of six beds or less within a residential community without zoning constraints. The original intent of the language was to provide special consideration for these ‘homes’ and to be permissive, not exclusionary. However, many Group members believe that it establishes an inappropriate expectation that people with disabilities should not live close to one another and believe that it continues to be an impediment to the development of such communities.

At the end of the meeting, the Group members stated that the meetings had been very beneficial and wanted to be able to continue some sort of discussion. The Group members want to continue to address the need for more living options for persons with disabilities, including Lifesharing, co-housing, intentional communities and services and supports provided through co-ops managed by families and persons with developmental disabilities. All the Group members understand the financial crisis that the State is facing and know that a new way of providing services must be developed for sustainable long-term supports to be possible.