

## VII. Community Housing

Living in and being a member of one's community requires housing. Decent, safe, affordable, and accessible housing is the foundation of inclusive communities. Living in a community leads to education, employment, relationships, and active participation.

The emphasis of this chapter will be on the availability and sources of affordable and accessible housing for people with disabilities, particularly those with low to moderate incomes. In Virginia and nationally, citizens are being priced out of the housing market. This situation is even more frequent for individuals with disabilities who often have low incomes. Many people with disabilities can and wish to live independently with or without supports if they have access to affordable, accessible housing options—and if given the opportunity to gain access to that housing.

Before describing publicly funded community-housing programs in Virginia, an overview of data from *Priced Out in 2006* and the National Low Income Housing Coalition's *Out of Reach 2005* report illustrates the scope of the housing problem for persons with low or moderate income. Under current federal guidelines, housing is considered to be affordable for low-income households when the cost of monthly rent, including any tenant-paid utilities, does not exceed 30 percent of monthly household income. According to the *Priced Out in 2006* report, for the first time, in 2006 national average rents for both one-bedroom and efficiency units were more than the entire monthly income of an individual relying solely on Social Security Supplemental Security Income (SSI) income. As growth in the cost of modest rental housing continued to outpace cost-of-living increases in SSI payments, the national average rent for a one-bedroom apartment rose to 113.1 percent of monthly SSI—up from 109.6 percent in 2004.

These two national reports provide a vivid picture of the housing challenges faced by Virginians, with and without disabilities, who have low-to-moderate incomes in the Commonwealth:

- Using the federal affordability guidelines described above, in 2006, a Virginia household with an extremely low income (\$20,162, which is 30 percent of the State Median Income of \$67,205) could afford monthly rent of no more than \$504. This is considerably less than the state's 2006 Average Fair Market Rent of \$891 per month for a two-bedroom unit.
- In order to afford the Fair Market Rent of \$891 per month without paying more than 30 percent of income on housing, a household must earn \$2,968 monthly or \$35,622 annually. Assuming 40 hours per work week, 52 weeks per year, an hourly wage of \$17.13 is required to afford a two-bedroom unit at the Average Fair Market Rent. This figure is referred to as the "Housing Wage."
- A worker earning the minimum wage of \$5.15 per hour can afford monthly rent of no more than \$268. This employee would need to work 127 hours per week at that wage to afford a two-bedroom unit at the state's Average Fair Market Rent.

- A SSI recipient receiving \$603 per month can only afford monthly rent of no more than \$181, which is 30 percent of that monthly SSI benefit, while the Fair Market Rent statewide for a one-bedroom unit is \$774. In 2006, 79,961 non-elderly adults with disabilities received SSI benefits in Virginia.

*Priced Out in 2006* further points out that the situation is worse in Virginia than in most other states, and is worsening. Nationwide, SSI benefit increases have not kept up with rising housing costs. Virginia ranked among the ten lowest states in average income for a person with a disability receiving SSI. The situation is more severe in Virginia's rapidly growing urban areas than in the state as a whole.

Worthy of recognition are the positive steps that the Commonwealth has made since 2006 and will continue to be making with respect to the planning and coordination of housing resources and policies for individuals with disabilities. Virginia's *Comprehensive Cross-Governmental Strategic Plan to Assure Continued Community Integration of Virginians with Disabilities* was adopted on August 2, 2007, by the Community Integration Implementation Team and the Community Integration Advisory Commission pursuant to Governor Timothy M. Kaine's Executive Directive 6. The Comprehensive Cross-Governmental Strategic Plan includes the following housing expectations:

- "Housing will be accessible for people leaving institutions or at risk of becoming institutionalized.
- Housing will be affordable for people leaving institutions or at risk of becoming institutionalized.
- Housing will be available and appropriately located."

The Community Integration Implementation Team has been, and will continue to be, involved in a wide variety of interagency activities to implement those goals. As noted earlier in this report, implementation of major system reform for various services across state agencies is underway as part of two federally funded initiatives administered by the Department of Medical Assistance Services: Money Follows the Person demonstration project and the Systems Transformation Grant. Information on these activities may be found at the Web site [www.olmsteadva.com](http://www.olmsteadva.com).

Other activities are also occurring within the housing arena with support from the Virginia Board for People with Disabilities (VBPD), the Virginia Housing and Development Authority (VHDA), the Virginia Department of Housing and Community Development (DHCD) and the Disability Commission. The 2007 Virginia General Assembly voted to expand the existing Home Modifications Tax Credit program to include new construction and to move its administration from the Department of Taxation to DHCD. Virginia also expanded its \$500 "visitability" tax credit; the credit has been renamed the Livable Home Tax Credit and now also applies to new homes that meet specific universal design/visitability requirements. Additional details on the Livable Home Tax Credit are included later in this chapter. Dovetailing with the

expansion of the Livable Home Tax Credit is the establishment of an EasyLiving Home program in Virginia. EasyLiving Home<sup>cm</sup>, pioneered in Georgia, is “the nation’s first voluntary certification program that specifies criteria in everyday construction to add convenience to a new home so all friends, family, and visitors regardless of age, size, or physical ability can be welcomed.” Virginia’s program has been established through the work of a coalition of public and private organizations to encourage the voluntary inclusion of key features that make a home cost effective, accessible, and convenient for everyone.

Complementary goals and activities to improve housing options as well as planning and coordination are also found in the 2008–2010 Statewide Plan for Independent Living developed by the **Virginia Statewide Independent Living Council (SILC)**. The SILC, created by the *Code of Virginia*, §51.5-25.1, is an independent planning body that promotes community inclusion, participation, and access for all Virginians with disabilities. Recognizing the need for disability advocates to participate more effectively in housing policy discussions and to influence the allocation and use of federal housing resources, the SILC Strategic Plan set specific goals and activities, including a commitment of financial resources, regarding housing needs. The plan’s goals specific to housing, which are carried out by local Centers for Independent Living, include the following:

- “Work with the Office of Community Integration and the Money Follows the Person (MFP) Housing Task Force to determine local housing capacity needs and develop and pursue strategies to address those local housing needs with appropriate local, state and federal policymakers.
- Support development of the Money Follows the Person Operational Protocol to identify means of informing residents of institutional settings of community living options and assist them in becoming better self-advocates when they make the transition into the community.
- Improve housing policy on the local and state levels by ensuring that the housing needs of people with disabilities moving from institutions to the community are included in local plans and planning processes.
- Enhance the knowledge of HUD and local housing authorities on the housing/community living needs and preferences of people with disabilities.
- Create a mechanism to track local changes in public policy and relate ongoing needs/solutions to statewide and national housing funding agents and authorities.”

Local government involvement in statewide planning efforts is of critical importance if housing capacity for Virginians with disabilities is to be increased. The Comprehensive Cross-Governmental Strategic Plan acknowledges this critical link and the SILC goals demonstrate a coordinated effort to work toward positive solutions and outcomes.

## A. What Is Community Housing?

In 2000, the Virginia Housing Development Authority (VHDA) report *Study of Funding for Housing Serving People with Disabilities* identified four broad levels of community housing need:

- **Supportive Housing:** Independent living arrangements where all support services are brought to the consumer's home or provided at community facilities.
- **Supervised Housing:** Residential settings such as apartments where limited in-home support services are provided on- or off-site by "supervisory" staff.
- **Intensive Housing:** Controlled residential settings, such as group homes, where treatment and training services are provided by on-site staff, usually in traditional single-family structures.
- **Highly Intensive Housing:** Controlled residential settings, such as Intermediate Care Facilities where in-home treatment and training services are provided by a 24-hour on-site staff, usually in special-purpose congregate structures.

Each of these residential environments differs with regard to housing structure, ownership, management and operating costs. As a result, each requires a different approach to development and funding. Information provided in this chapter will concentrate on the first three of these levels of housing that enable individuals with disabilities to reside in communities with their families and friends and to avoid more-structured, restrictive "institutional" environments. Intermediate Care Facilities and nursing facilities, which are the principal kinds of highly intensive housing for people with disabilities in Virginia, are described in the Institutional Supports chapter of this report.

Multiple governmental and private nonprofit and for-profit entities are involved in funding, developing, and providing community housing and related services. A brief introduction to several key public agencies and their responsibilities follows.

The Virginia **Department of Housing and Community Development (DHCD)** works in partnership with local governments, state and federal agencies, nonprofit groups, and others to make Virginia's communities safe, affordable, and prosperous places in which to live, work, and do business. Each year, DHCD invests more than \$100 million in housing and community development projects throughout Virginia. The majority of these projects are designed to help low-to-moderate-income persons and are explained in greater detail later in this chapter. In addition, DHCD works to ensure safe buildings and homes by administering Virginia's building and fire codes as well as by training and certifying the state's building officials. DHCD is also the lead agency of the Virginia Inter-Agency Council on Homelessness (VIACH), which implements the state's plan to end homelessness by addressing the housing needs of the "chronically homeless," who by the U.S Department of Housing and Urban Development's (HUD) definition have a disabling condition.

The **Virginia Housing Development Authority (VHDA)** is the state’s mortgage finance agency. Created in 1972 by the Virginia General Assembly, the VHDA’s mission is to “help low- and moderate-income Virginians attain quality, affordable housing.” As an independent public authority, VHDA receives no state appropriations for its operations and is fully self-supporting from revenues generated by its programs. VHDA has an Advisory Board of People with Disabilities that represents individuals with disabilities and organizations that support them, provides guidance to the VHDA on housing matters that affect them, and ensures that VHDA’s homeownership and rental programs promote choice and independence. Together, DHCD and VHDA provide the “bricks and mortar” of access to affordable housing in Virginia. They administer a range of federal grant funding and tax incentives for housing and community development projects and programs.

Two of those programs have particular significance for people with disabilities. **Low-Income Housing Tax Credits**, administered by VHDA, support the development of affordable rental housing. VHDA also administers **Housing Choice Vouchers** on behalf of localities that either lack the capacity or do not wish to administer them directly. VHDA further provides mortgage financing for developers of affordable, accessible, and safe-housing options as well as offers flexible mortgage financing for the purchase of homes by individuals with low and moderate incomes. These programs increase the inventory of accessible, affordable housing and expand opportunities and choices for persons with disabilities to live independently. For example, people with disabilities who are able to find housing through a Housing Choice Voucher, but who are also in need of other services and supports to live in the community and are eligible for those services, can work with their service provider to develop the “wrap-around services” they need to stay in the community.

**Group homes**, licensed by the **Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS)** and **Assisted Living Facilities (ALFs)**, licensed by the **Department of Social Services (DSS)**, provide two additional opportunities for persons with disabilities to live in somewhat less structured community settings. **Group homes** are congregate residences that provide 24-hour staffing and support in a community-based, homelike dwelling. They typically provide assistance and training for residents in activities of daily living as well as provide counseling and other services where appropriate. **ALFs** are non-medical residential settings with 24-hour supervision that provide or coordinate personal and health-care services for four or more adults who are aged, infirm, or disabled. Neither group homes nor ALFs are the same as nursing facilities, which are regulated by the Virginia Department of Health (VDH) and provide nursing and other health-related services for the treatment and inpatient care of two or more unrelated individuals. More information about nursing facilities can be found in the Institutional Supports chapter.

## **B. Who Is Eligible for Community Housing?**

In September 2003, the National Disability Institute Development Corporation (NCIDC) and Technical Assistance Collaborative, Inc. (TAC), published the *Analysis of Means and Alternatives for Expanding Affordable, Accessible Housing for Persons with Disabilities and*

*Frail Elders Statewide* report. In this report, four core principles that should be integrated into all housing strategies are identified:

- **Affordability:** Under current federal guidelines, housing is considered to be affordable for low-income households when the cost of monthly rent, including any tenant-paid utilities, does not exceed 30 percent of monthly household income.
- **Independence:** Individuals have choice and flexibility to identify location and type of housing and a service and support system that meets individual needs and preferences.
- **Accessibility:** Individuals with disabilities are recognized as comprising a diverse target population with varying needs.
- **Integration:** Separate single-purpose housing, that is housing targeted exclusively to one group of people such as people with a specific type of disability or disabilities in general, may not be the housing model preferred by many persons with disabilities.

With respect to Virginia, this report identified key factors contributing to a growing gap between the state's supply of and demand for affordable, accessible housing. Despite the current efforts of state and local agencies and other providers, limited resources and the aging general population are expected to widen this gap.

- According to the American Community Survey and Census Bureau's Population Estimates Program, in 2006 Virginia's population included 950,842 individuals with a disability who were age 5 and older and estimates that there were 886,014 Virginians age 65 or older of which 334,984 had a disability.
- The 2006 annual statistical report on the Social Security Disability Insurance Program reports that 244,079 Virginians received Social Security, federal Supplemental Security Income (SSI), or both. For individuals, regardless of age, who rely on SSI benefits as their major or only source of income, the cost of housing makes it virtually impossible to afford decent, safe housing in their local community. Virginians receiving SSI benefits are at extreme levels of poverty and are currently facing a housing crisis.
- The annual cost of operating one unit of affordable housing funded by the Virginia Housing Development Authority (VHDA) can range from \$3,000 to \$5,000 per unit, before factoring in debt service or mortgage payments. People with disabilities receiving SSI can only afford to pay 30 percent of their income in housing costs, which is about \$181 per month or \$2,172 per year, based on federal affordability guidelines. Therefore, in order to make affordable housing available to people with disabilities and to those who are elderly, an ongoing rent subsidy is needed to ensure that all of the operating costs can be covered.

Eligibility information for publicly funded efforts to address this affordable, accessible housing gap, organized by provider, follows. Additional information on the services themselves can be found in later sections of this chapter.

**Department of Housing and Community Development (DHCD):** The majority of projects funded by the DHCD are designed to help low-to-moderate-income persons through an array of housing and community development projects and programs. Individual programs address preservation of housing stock as well as housing for targeted groups such as the homeless and persons diagnosed with HIV/AIDS, first-time home buyers, and others. Eligibility requirements are complex and vary among the many projects and programs making it impossible to cover them adequately within the limited framework of this report. Detailed information may be obtained through the agency's Web site or by contacting it directly.

The 2007 Virginia General Assembly voted to expand the existing home modifications tax credit program to include new construction. This tax credit is now known as the **Livable Home Tax Credit Program** and its administration moved from the Department of Taxation to the Department of Housing and Community Development (DHCD). Based on input from public comment forums held throughout Virginia, DHCD developed guidelines for the expanded tax credit, which became effective on January 1, 2008, and posted them to its Web site at **[www.dhcd.virginia.gov](http://www.dhcd.virginia.gov)**.

This expanded \$500 "visitability" tax credit now also applies to new homes that meet three key requirements: (1) has at least one zero-step entrance approached by an accessible route on a firm surface no steeper than 1:12 slope proceeding from a driveway or public walkway; (2) has an accessible bathroom (can be a half bath/powder room) on the same floor as the zero-step entrance; and (3) has doors with at least 32 inches of clear width and hallways/passageways of at least 36 inches of clear width to the accessible bathroom and eating area. The tax credit also continues to apply to retrofitting of existing residential units to make them more accessible, regardless of whether an owner or resident has a disability requiring these visitability features and without income considerations.

**Virginia Housing Development Authority (VHDA):** VHDA's educational programs and financial services target individual home buyers or renters as well as developers and builders of a wide range of housing options. As with DHCD above, programs addressing the needs of individuals with low to moderate incomes, such as the Housing Choice Voucher and home loans, have income and affordability restrictions. Programs for developers and builders may require the building of a certain number of affordable housing units for funded projects. Complete information on current eligibility requirements for each of these programs can best be obtained from the VHDA Web site or by contacting the agency directly.

In 2004, with support from the Virginia Board for People with Disabilities, VHDA created **Access Virginia** ([www.accessva.org](http://www.accessva.org)), a Web site containing a comprehensive collection of information to help people find accessible apartments and to learn more about accessibility requirements and "Universal Design" principles. Universal design is a term used when referring to items or home features that are usable by most people regardless of their level of ability or disability. Many accessible and adaptive features are universally usable. For example, round doorknobs are not usable by people with limited use of their hands, but lever handles are usable by almost everyone, including people who have no hands. Universal design addresses the scope of accessibility and promotes making all elements and spaces accessible to and usable by all

people to the greatest extent possible. While this Web site is a positive step forward, in order for it to reach its potential as a resource and maximize its benefits, ensuring that it is kept current is an ongoing need.

**DSS Licensed Assisted Living Facilities (ALFs):** Local departments of social services determine eligibility for admittance to an Assisted Living Facility licensed by the **Department of Social Services (DSS)**. Although persons with intellectual disabilities (mental retardation, MR) and/or other developmental disabilities may reside in such facilities, persons with mental illness typically are the primary ALF residents. Eligibility determination is based on the results of a completed **Uniform Assessment Instrument (UAI)**. The UAI gathers information for the determination of an individual's care needs and eligibility and for planning and monitoring care across multiple agencies and services. The UAI has been used since July 1994 by local departments of social services and of health, Area Agencies on Aging, the Department of Rehabilitative Services, Medicaid-funded long-term care service providers, and Medicaid nursing facility preadmission screening teams.

The **DSS Auxiliary Grant Program** is an additional income source for recipients of Supplemental Security Income (SSI) benefits or for those who would qualify for SSI benefits, according to the criteria below, except for "having income in excess of set limits." Recipients must reside in ALFs licensed by DSS or in adult foster care homes approved by local departments of social services. Not all ALFs, however, accept Auxiliary Grant recipients.

Eligibility for benefits is determined by the Virginia city or county department of social services where the individual last lived outside of an institution or an adult foster care home. Any records or statements can be used to determine residency. If residency cannot be determined or if the individual is from out-of-state, residency is based on where the individual is living at the time of application. To be eligible, an individual must:

- ✓ Be blind, have a disability, or be age 65 or older;
- ✓ Reside in a licensed assisted-living facility or approved adult foster care home;
- ✓ Be a citizen of the United States or an alien who meets specified criteria;
- ✓ Have a non-exempted (countable) income less than the total of the auxiliary grant rate approved for the assisted living facility (ALF) plus the personal needs allowance;
- ✓ Have non-exempted resources less than \$2,000 for one person or \$3,000 for a couple; and
- ✓ Have been assessed and determined to need assisted-living facility care or adult foster care placement.

The DSS Adult Services Annual Survey, based on data provided by local departments of social services, reports that 5,317 residents of ALFs and 16 residents in adult foster care received Auxiliary Grants in Fiscal Year 2005. The state DSS reports that in FY 2007 the average monthly number of persons in ALFs receiving these grants was 5,485; and for those in adult

foster care, 11. Since most local agencies report only aggregated data, DSS does not have data on recipients by disability category, i.e., whether recipients are blind, have a disability, or are age 65 or older.

**DMHMRSAS-Licensed Group Homes:** As described in earlier chapters, local **Community Services Boards (CSBs)** are the single point of entry for all publicly funded services to persons with intellectual disabilities (mental retardation), including residential placement in a group home licensed by the **Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS)**. While there are some individuals who reside in a group home whose services are funded through state General Fund dollars that flow through CSBs, the primary source of funding for residential placement of people with intellectual disabilities in a DMHMRSAS group home is the Medicaid Home and Community Based Mental Retardation (MR) Waiver.

Eligibility for residential supports requires that the person has a diagnosis of mental retardation (MR); the CSB determines and documents that the person's functional needs can be met by, and are appropriate for, group home placement; and the individual chooses to receive services through the Mental Retardation (MR) Medicaid Waiver rather than institutional services. The appropriate level of residential supports is based on each person's needs and his or her natural supports. Under the MR Waiver, moreover, options for residential supports and services may include those delivered to an individual in his or her home. It is important to note that similar support for congregate residential services is not available through the Individual and Family Developmental Disabilities (DD Waiver); however, the DD Waiver does provide support for individuals residing in their own home or apartment and does allow for shared residences that are not considered congregate.

Eligibility for the MR Waiver is based on diagnostic, functional, and financial criteria. Federal regulations specify that once an individual has been determined to be eligible for Medicaid by his or her CSB case manager, he or she must be offered a choice between institutional or MR Waiver services. The case manager is also responsible for informing the individual and family of the full range of MR Waiver services and for documenting the individual's choice of MR Waiver or institutional services. (More information on the MR, DD, and other Home and Community Based Waivers, including eligibility and availability, may be found in the Community Living Supports chapter of this report.)

DMHMRSAS tracks the "static capacity" for MR residential services by level of service. Static bed capacity refers to the number of beds for which a facility is licensed and staffed or the number contracted for during the contract period. The table below provides a comparative measure of the capacity of CSB provided or contracted residential services for persons with intellectual disabilities (MR) in state fiscal years (FY) 2005 and 2008: Between FY 2005 and FY 2008, the total static capacity for MR residential beds increased by 28, or 2 percent.

**CSB STATIC CAPACITY FOR MR RESIDENTIAL SERVICES, FY 2005 AND FY 2008**

Type of Residence	Number of Beds		Amount of Change
	FY 2005	FY 2008	
<b>Supervised</b>	505	465	<b>-40</b>
<b>Intensive</b>	768	779	<b>11</b>
<b>Highly Intensive</b>	88	145	<b>57</b>
<b>Total</b>	<b>1,361</b>	<b>1,389</b>	<b>28</b>

\*Source: FY 2005 data are from the DMHMRSAS 2006 *Overview of Community Services Delivery in Virginia*. FY 2008 data are from the DMHMRSAS Office of Mental Health Services.

**C. How are Community Housing Services Accessed and Delivered?**

**Department of Housing and Community Development (DHCD):** Funding and services provided by DHCD are channeled through state and local governmental agencies, nonprofits, and other intermediaries who provide direct services to consumers. DHCD is not a direct service provider to individuals with disabilities. For access to DHCD funding, organizations respond to Requests for Proposals or submit grant applications in accordance with program requirements and established deadlines. Depending on the funding opportunity, awards are made either competitively or on a first-come, first-served basis. Eligibility and application details for funding opportunities may be obtained from the DHCD Web site or by contacting the agency directly.

**Virginia Housing and Development Authority (VHDA):** Recipients of VHDA educational and financial services include individuals and families, state and local agencies, nonprofit organizations, and commercial builders and developers. Initial inquiries can be made through the VHDA Web site or by contacting VHDA directly. Beyond that, access and delivery procedures vary widely between programs and are too complex and numerous to detail in this report.

Federally funded **Housing Choice Vouchers** are available through a network of VHDA voucher agencies and Public Housing Agencies (PHAs). There are 42 HUD-direct PHAs that administer the vouchers and determine eligibility, which takes into account family size and annual gross income. VHDA oversees an additional 41 local agencies statewide that administer the voucher program. A complete listing of all voucher programs is available on the VHDA Web site.

Voucher funding is limited in nature as there is not sufficient voucher rental assistance to assist all applicants. Each housing agency will have a waiting list of applicants. As of November 1, 2007, VHDA had 6,633 applicants on the waiting list. Of VHDA's 41 local agencies, only 18 at that time were taking applicants and waiting lists at the others were closed.

When a voucher becomes available and is issued to an individual or family, the voucher holder must find a rental unit and a willing landlord. The unit must be inspected by the agency administering the voucher; and the rent requested must be reasonable for the market area. The housing assistance payment authorized by the voucher is paid by VHDA directly to the landlord. The individual or family pays the difference between the actual rent charged by the landlord and the amount subsidized under the voucher.

The Quality Housing and Work Responsibilities Act (QHWRA) of 1998 established a requirement that public housing authorities maintain a Public Housing Agency (PHA) Plan. The *Priced Out in 2006* report notes that this 1998 Act “gave PHAs more flexibility and control over how federal public housing and Section 8 Housing Choice Voucher program funds are used in their communities. Along with this flexibility and control were new requirements, including the creation of a five-year comprehensive planning document known as the Public Housing Agency Plan (PHA Plan).”

The PHA Plan outlines the policies, programs, and strategies that the public housing agency will implement in order to meet local housing needs. There are two parts to the plan: the Five-Year Plan, which is updated every fifth year; and the Annual Plan, which is updated on a yearly basis. In consultation with a Resident Advisory Board, each PHA is required to complete a PHA Plan that describes the agency’s overall mission for serving low-income and very low-income families and the activities that will be undertaken to meet the housing needs of these families. Under federal law, the PHA Plan should also be consistent with the Consolidated Plan (ConPlan) for the jurisdiction.

Like the ConPlan, the PHA Plan includes a statement of the housing needs of low- and very low-income people in the community and describes how the PHA’s resources—specifically federal public housing and the Section 8 Housing Choice Voucher program—will be used to meet these needs. For example, through the PHA Plan, local housing officials could decide to direct more Housing Choice Vouchers to people with disabilities receiving Supplemental Security Income (SSI) benefits.

**DSS Licensed Assisted Living Facilities (ALFs):** Following determination of eligibility and level of care needed by their local department of social services, an individual with a disability typically works with his or her case manager to select an Assisted Living Facility (ALF). The state Department of Social Services (DSS) Web site lists contact information for approximately 580 licensed assisted-living facilities in Virginia.

At admission, based on the results determined through the Uniform Assessment Instrument (UAI) and other relevant information, the individual receives a service agreement and a preliminary service plan. Standards allow up to 45 days for completion of a final service plan, so that the facility can obtain a more accurate picture of the needs and capabilities of the resident. This is helpful for individuals who may have been in some degree of crisis at entry and/or needed time to adjust to the new residence. The admissions director of the ALF, or other appropriate employee, reviews the UAI with the individual and explains how the facility can meet his or her needs through the service plan.

**DMHMRSAS-Licensed Group Homes:** After an individual is determined to be eligible for the Mental Retardation (MR) Waiver and selects a community (versus institutional) residential option, his or her Community Services Board (CSB) case manager submits the required enrollment information to the **Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS) Office of Mental Retardation Services (OMRS)**. If no MR Waiver “slot” is available to the CSB, the individual’s name is placed on a waiting list until a slot becomes available. The CSB case manager is responsible for notifying the individual or family of placement on the MR Waiver Waiting List in writing within ten days of notification by OMRS. Notification of appeal rights and processes must also be given to the individual or family. Once an individual receives a MR Waiver slot, the individual can choose a residential services provider. Detailed information on MR Waiver Waiting List policies and procedures may be found in the Community Living Supports chapter of this report.

## **D. What Community Housing Services Are Available?**

**Department of Housing and Community Development (DHCD):** DHCD programs target low-to-moderate-income Virginians in general and, in some cases, individuals with disabilities in particular. Regardless of their emphasis, collectively these programs play a significant role in making safe, affordable, accessible housing available to persons with disabilities. Additional information on the programs described below can be found at the DHCD Web site or by contacting them directly.

**Housing Opportunities for Persons with AIDS (HOPWA)**, a program funded by the U.S. Department of Housing and Urban Development (HUD), provides funding for the acquisition, rehabilitation, new construction, leasing, and operation of housing facilities for persons with low incomes who have been diagnosed with HIV/AIDS and their families. It also provides rental and mortgage assistance, utility payment assistance, housing information, resource identification, technical assistance, and supportive services. Recipients of HOPWA funding actually are local government housing agencies, public housing authorities, and health and human service agencies. These agencies, in turn, provide direct services to individuals and families who have applied through and have been found eligible by local AIDS Services Organizations, which also coordinate service delivery.

The **Weatherization** program supplies funds to reduce heating and cooling costs for low-income families to ensure their health and safety. Households whose members include children, the elderly, and persons with disabilities are especially targeted. Services are delivered through a statewide network of community-based organizations that screen for eligibility, conduct energy audits, and install energy efficient measures in the home.

Individuals at imminent risk of homelessness caused by a crisis situation can receive temporary rental and mortgage assistance through the **Homeless Intervention Program (HIP)**. Individuals and families who are already homeless can receive assistance with security deposits and temporary rent payments to secure housing. These applications are submitted to local HIP administrators who determine eligibility and coordinate services.

Several programs address housing rehabilitation. Federal **Community Development Block Grants (CDBGs)** provide funding to eligible local governments for projects that address crucial community needs, such as housing, infrastructure, and economic development. Each project that utilizes CDBG funding must meet one or more national objectives. Funding through the **HOME Investment Partnership** is used to develop and rehabilitate transitional and permanent housing that serves low-income and special needs households and is available to government, nonprofit, and for-profit organizations. The **Emergency Home Repair Program** improves housing conditions and opportunities for low- and very low-income Virginians. Repairs that will remove imminent health and safety hazards or eliminate barriers to habitability are covered by these funds. Assistance provided through local nonprofit agencies to housing occupants can include plumbing, structural, electrical, and roofing repairs as well as wheelchair ramps, accessible appliances, and other critical accommodations for people with disabilities.

The **HOMEownership Program** makes purchasing a home more affordable for low-to-moderate-income individuals and families by assisting eligible borrowers with down payments and closing costs. The funds used for down payment and closing costs are administered through local partnerships with governmental entities, nonprofit housing service providers, and mortgage lenders across the Commonwealth. Currently, a statewide network of administrators is under contract with DHCD to offer housing counseling and intake services for prequalification screening for eligibility. The funds are provided on a first-come, first-served basis. The program structure promotes equitable access to the fund by entitlement and nonentitlement communities and is based on income and credit criteria.

Individuals lacking both the financial literacy skills and assets to achieve their goals of homeownership can obtain assistance through the **Virginia Individual Development Account (VIDA) Program**. This special savings program, typically offered through local governmental and nonprofit agencies, provides financial skills training, which includes assistance with the application process by local administrators. In addition, the VIDA program matches each dollar saved by the participant with two dollars. The combined savings can be used to purchase a home, start a business, or pursue postsecondary education.

**Virginia Housing Development Authority (VHDA):** Like DHCD, VHDA's activities target low- to moderate-income individuals and families and VHDA may provide services both directly and through intermediaries. Some of VHDA's programs are also targeted directly to individuals with disabilities. These include the **Access Virginia** Web site already mentioned as well as outreach and training for developers and builders on the Americans with Disabilities Act accessibility requirements and concepts of "Universal Design." Other key VHDA programs are described briefly below.

**VHDA Homeownership Loan Programs** are designed to remove barriers to buying a home as well as to meet the changing needs of low- and moderate-income persons. VHDA home mortgage loans, usually originated by private lenders, are available for both first-time and repeat homeowners. Two traveling vans serve as **Mobile Mortgage Offices** to process and approve loans in the Southwest, Southside, and Eastern Shore of Virginia, areas that are not adequately served by traditional lenders. Since 1993, VHDA has also offered **Homeownership**

**Education Classes** throughout the state to help Virginians learn the process of buying a home and maintaining it over the long-term. Classes are conducted in English, Spanish, and American Sign Language.

**Multifamily Rental Loan Programs** assist both large and small developers in purchasing, rehabilitating, and renovating apartments and other rental properties for low- and moderate-income Virginians. **Federal Low-Income Tax Credits** are also available to encourage property owners to develop affordable rental housing.

VHDA's **REACH Virginia** program uses the Authority's net revenues to subsidize an array of targeted homeownership and rental funding programs. To qualify, Virginians must have incomes at or below 50 percent to 60 percent of the median income for the area in which they reside (percent varies by area).

The **Housing Choice Voucher** is the latest name for the federal government program that assists low-income families, the elderly, and individuals with disabilities with rental expenses. (Previous versions of this federal funding used the terms "Certificates," "Section 8," or "Section 8 Existing.") The Housing Choice Voucher is a "tenant-based" program, that is, rental assistance is tied directly to the tenant and not to a property or structure. VHDA's 41 local agencies and the 42 local Public Housing Agencies (PHAs) receive funds from the U.S. Department of Housing and Urban Development (HUD) to administer the voucher program. Together, these entities serve 112 counties and cities across Virginia. As of November 2007, there were 46,453 vouchers available for use statewide. VHDA administers approximately 20 percent of the vouchers; and the remaining 80 percent of the vouchers are administered by the local PHAs.

Virginia Housing Development Authority (VHDA), in conjunction with the Department of Housing and Community Development (DHCD), The Fannie Mae Foundation, and the Christopher Reeve Paralysis Foundation has \$50,000 in grant funds available to pay for modification work needed on rental units to make them accessible. These **Rental Unit Accessibility Modification** funds are available to persons earning 80 percent or less of the area median income. The grant funds will be available on a first-come, first-served basis, up to \$1,500 per dwelling unit. Funds can be used for any work needed to make the unit accessible for a disabled individual. The application form for these funds is available on the VHDA Web site.

**Granting Freedom** is a grant program that pays for modifications to make living spaces more accessible for servicemen or -women who sustained injury during service in a combat theater of operations. These funds can be used to widen doorways and add ramps to make a home wheelchair accessible, to install grab bars in a bathroom, or to make other modifications that help eligible recipients feel more at home. VHDA partners with the Department of Housing and Community Development, Community Housing Partners, and other community groups in order to make the Granting Freedom program available to Virginia servicemen and -women injured while serving our country. Currently, more than \$1 million of funding is available to pay for modifications to houses and apartments.

**DSS-Licensed Assisted Living Facilities (ALF):** The state Department of Social Services (DSS) **Auxiliary Grant Program** ensures that recipients of Supplemental Security Income (SSI) residing in either an ALF or an approved adult foster care home are able to maintain a standard of living that meets a basic level of care. The Auxiliary Grant covers two main services at those residences: Room and Board; and Maintenance and Care:

- Room and Board includes: a furnished room in a building that meets all required fire safety codes; housekeeping services appropriate for the resident's needs; complete meals, snacks, and special diets, if necessary; and clean linens and towels as needed and at least once a week.
- Maintenance and Care services include: minimal assistance with personal hygiene and grooming, including provision of personal supplies; administration of medications as required by licensing regulations; minimal assistance with the care of personal possessions and personal funds, if requested by the recipient and allowed by the facility; minimal assistance with telephones and correspondence; securing health care and transportation when needed; making appointments and arranging transportation; provision of social and recreational activities as required by licensing regulations; and general supervision for safety.

**DMHMRSAS Residential Services:** The Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS) licensure regulations describe residential services as a category of service providing 24-hour care in conjunction with treatment or training programs in a setting other than a hospital. Living arrangements vary from highly structured and intensively supervised environments to settings that provide for relative independence, requiring a modest amount of staff support and monitoring.

Examples of residential services include, but are not limited to: residential treatment, group homes, supervised living, residential crisis stabilization, community gero-psychiatric residential, community Intermediate Care Facilities for Mental Retardation (ICFs-MR), sponsored residential homes, medical and social detoxification and substance abuse residential treatment for women and children. More specific information on services covered under the MR Waiver can be found in the Community Living Supports chapter of this report. Detailed information on public and private ICFs-MR can be found in the Institutional Supports chapter.

## **E. Cost and Payment for Community Housing**

**Department of Housing and Community Development (DHCD):** In Fiscal Year 2007, federal funding for all DHCD programs providing services to both individuals with and without disabilities totaled \$60,684,247. Virginia provided \$17,093,355 in additional funds for these programs. Specific DHCD expenditures for services to individuals with disabilities are not available.

**Virginia Housing Development Authority (VHDA):** Specific expenditures by VHDA for service to individuals with disabilities are not available. VHDA receives no state support and is financially dependent on federal sources, bond sales, and net revenues from its operations.

For the **Housing Choice Vouchers**, recipients are typically required to pay no more than 30 percent of their monthly rent, depending on the specific subsidy program. Federal funds administered by VHDA are used by VHDA and other local administrators to pay landlords directly for the balance of the contracted monthly rent. Additional federal funds may be used to subsidize the cost of building affordable apartments by private developers, who can then charge lower monthly rents. As of November 30, 2007, 29 percent of the households served by VHDA were headed by people with disabilities.

**DSS-Licensed Assisted Living Facilities:** State funds constitute 80 percent of **Auxiliary Grant Program** resources, and local funds make up the remaining 20 percent. The Virginia Department of Social Services (DSS) is responsible for dispersing state funds to local departments of social services, which make direct payments to recipients. Recipients, or a payee acting on their behalf, are responsible for making payments to their Assisted Living Facility (ALF) or adult foster care providers. The maximum rate for Auxiliary Grants is determined by the General Assembly and is adjusted periodically.

Auxiliary Grants cover both costs for services provided by an ALF or adult foster care and for a personal allowance to the recipient. Personal allowances are used by residents to cover medical expenditures such as co-payments, prescriptions not covered by Medicaid, dental care, eyeglasses, and nonprescription over-the-counter medications. They can also be used for local and long-distance telephone service, personal transportation, clothing, toiletries and other personal expenditures, and other needs outside of what are offered by the ALF or adult foster care provider. Regulations prohibit use of the allowance funds for recreational activities, administration of accounts, debts owed to the ALF for basic services, or laundry charges of more than \$10 per month.

In addition to Virginia, 44 other states provide a variety of monetary supplements to federal Supplemental Security (SSI) payments that are tied to the various types of residential settings that may serve persons who are disabled. Virginia's Auxiliary Grants are only available to residents of ALFs or adult foster care and, unlike in some other states, do not provide supplemental funds to individuals living independently. As a result, Auxiliary Grants, the only state-guaranteed housing assistance available to most Virginians with disabilities, are restricted to those residential settings that are congregate and more institutional in nature.

According to the *State Assistance Programs for SSI Recipients, January 2004, SSA Publication 13-11975*, Virginia is one of only five states offering SSI supplements that require local matching funds. The 20 percent local match requirement in the Auxiliary Grant program can dampen local expansion of the program to housing options other than assisted-living facilities. This disincentive toward less-intensive care may encourage greater use of nursing facilities or other institutional settings that do not require local matching funds.

**DMHMRSAS Licensed Group Homes:** Mental Retardation (MR) Waiver residential services providers licensed by the Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS) are reimbursed by Medicaid for services provided that are consistent with an approved plan of care. MR Waiver reimbursement for services is based on an hourly rate for an approved number of hours of service per month. Reimbursement rates are set by the Department of Medical Assistance Services (DMAS) with the approval of the Virginia General Assembly. Medicaid does not pay for room and board for community-based residential services. It only reimburses for actual services that are provided by the residential staff according to the Individualized Services Plan. Group home residents are typically assessed a client fee by their service provider. The client fee often is a large percentage of the client's income, which in the majority of cases is limited to Supplemental Security Income (SSI).

**Federal Initiatives in Virginia:** Every year, the U.S. Department of Housing and Urban Development (HUD) offers community- and faith-based organizations, local governments, and housing authorities nationwide the opportunity to compete for nearly \$2 billion in grants for housing-related projects. The following grants, categorized by program area, were awarded in Virginia from 2005 through 2007.

**Section 202, Supportive Housing for the Elderly** grants to nonprofit organizations enable the income-eligible elderly to live independently. Funds cover capital expenditures for new construction or rehabilitation as well as rental assistance. Although Section 202 grants are competitive, the amount for each jurisdiction is determined by a fair share formula. In 2005, \$5.8 million in capital advances and \$1.2 million in rent subsidies was awarded for a 73-unit elderly housing complex in Vinton as well as \$1.5 million in capital advances and \$299,500 in rent subsidies for a 67-unit elderly housing complex in Kilmarnock. A total of \$9,400,000 was provided in capital advances and \$2,111,000 in rent subsidies to three different organizations: Virginia United Methodist Housing, Bay Aging, Inc., and the John Wells Foundation.

**Section 811, Housing for Persons with Disabilities** grants to nonprofit organizations enable people with disabilities to live independently by expanding the supply of affordable housing with supportive services. As above, funds are advanced for capital construction or rehabilitation as well as for rental subsidies; and, although grants are competitive, they are distributed across jurisdictions using a fair share formula. In 2005, a total of \$1.2 million in capital advances and \$221,000 in rent subsidies for a 15-unit complex for persons with disabilities in Exmore was awarded; and an additional \$376,700 in capital advances and \$95,000 in rent subsidies for a 6-bed group home for persons with traumatic brain injuries in Buena Vista was also awarded.

**Resident Opportunities and Self-Sufficiency** grants are awarded competitively to assist residents of public housing in becoming economically self-sufficient and to help the elderly and people with disabilities to live independently. In 2005 and 2006, a total of \$2,898,478 was awarded to housing and redevelopment authorities and other agencies to provide public housing residents with education, job training, employment services, and homeownership counseling to promote self-sufficiency and to establish or expand ROSS Neighborhood Network computer technology centers.

**HOPE VI Revitalization of Public Housing** grants are awarded competitively to housing authorities to assist them in meeting capital costs associated with the replacement or major rehabilitation of severely distressed public housing complexes. Approximately 22 HOPE VI grants are awarded nationwide each year. In 2005, Danville Redevelopment and Housing Authority received a \$175,000 Mentoring Grant under this program.

**Family Self-Sufficiency** grants are awarded competitively to housing authorities for coordinators who help public housing residents with child care, job training, and job placement. The Virginia Housing Development Authority and 18 local housing authorities received awards totaling \$1,286,535 in 2005 and \$1,305,717 in 2006.

**Housing Counseling** grants are awarded competitively to HUD-approved housing counseling agencies for free prepurchase, postpurchase, default, and reverse mortgage counseling. In 2005 and 2006, \$696,001 was competitively awarded in Virginia. In addition, between 2005 and 2007 Catholic Charities USA in Alexandria was competitively awarded \$2,954,946 in housing counseling funds as a national intermediary organization.

**Continuum of Care (CoC)** grants are awarded competitively to local partnerships of governmental agencies and nonprofit organizations that help homeless families and individuals find housing and supportive services. In 2005, \$20.9 million was awarded to Virginia CoC programs; and of that award, DHCD received more than \$900,000, the largest amount ever received. In 2006, \$21 million in grants was awarded competitively to local governments and nonprofit organizations associated with continuua of care.

**Fair Housing Initiatives Grants** are competitively awarded to nonprofits for education and outreach activities promoting the Fair Housing Act. In 2004, a total of \$105,033 was awarded to two organizations: the Piedmont Housing Alliance in Charlottesville and the Newport News Office of Human Affairs. In 2005, the latter organization received another \$318,506.

## **F. Monitoring and Evaluation of Community Housing**

**Virginia Housing Development Authority (VHDA):** As an independent state public authority, VHDA is subject to oversight by the Governor and the General Assembly. The Governor appoints its eleven-member governing Board of Commissioners, which is required to submit an annual report to the Governor on its operating and financial status. VHDA annual financial statements are also subject to review by the state Auditor of Public Accounts.

**Department of Social Services (DSS):** The DSS **Division of Licensing Programs** has responsibility for protecting children and vulnerable adults in day- and residential care settings. Its regulatory responsibilities cover licensed family day homes, independent foster homes, child-placing agencies, and children's residential facilities, as well as voluntarily registered family day homes that are not required to be licensed. It is also responsible for licensing assisted-living facilities and adult day care centers.

DSS **Adult Protective Services (APS)** investigates reports of abuse, neglect, and exploitation of both adults age 60 and older and incapacitated adults older than 18 years of age. APS initiates protective measures when warranted by the results of their investigations. DSS **Child Protective Services (CPS)** has equivalent responsibilities for children age 18 and younger. Reports of abuse, neglect, and exploitation are directed to local departments of social services who handle investigations and initiate protective measures. The goal of protective services is to safeguard life, health, and property without loss of liberty. When this is not possible, assistance is provided with the least disruption of lifestyle and with full due process, protection and restoration of the person's liberty in the shortest possible period of time.

The *Code of Virginia* (§63.2-1728) specifically requires DSS to establish a toll-free telephone line for complaints and to investigate all complaints received regarding the operations of assisted living facilities, adult day care centers, and child welfare agencies, regardless of whether the program is subject to licensure. The toll-free hotline numbers are as follows: Adult Protective Services, 888-832-3858; Child Protective Services, 800-552-7096; and Division of Licensing Programs, 800-543-7545.

Complaint investigations may include: on-site visits to inspect activities, services, records, and facilities; and interviews with a facility's employees and agents and any person within its custody or control. If the facility is found to be noncompliant, DSS must provide notice to the operator and may then take appropriate action as provided by law to ensure corrective action. Additional statutes (§ 63.2-1808) detail the rights of residents of assisted-living facilities, the responsibilities of their operators, and requirements for an annual review of residents rights.

#### **Department of Mental Health, Mental Retardation and Substance Abuse Services**

**(DMHMRSAS):** The regulatory and oversight of responsibilities of DMHMRSAS for public and private facilities and services that it licenses or funds are covered extensively in the monitoring and evaluation section of the Community Living and Institutional Supports chapters of this report. These chapters also include information on the **Office of the Inspector General (OIG) for Mental Health, Mental Retardation and Substance Abuse Services**. Information on the **DMHMRSAS Office of Human Rights**, including a specific listing of statutory rights, can be found in both the Community Living Supports and Advocacy Information and Resources chapters.

**Landlord and Tenant Rights:** The Department of Housing and Community Development (DHCD) publishes a handbook containing the current **Virginia Residential and Landlord Tenant Act**, which specifies the rights and responsibilities of tenants under a rental agreement. It also provides information on sources of legal assistance specializing in landlord and tenant issues. The **Virginia Office of Consumer Affairs** also provides assistance on matters covered by the Landlord and Tenant Act.

**Virginia Fair Housing Office (VFHO):** The Virginia **Fair Housing Office (VFHO)**, which is part of the **Department of Professional and Occupational Regulation**, is responsible for public awareness and enforcement of the state's fair housing law. Virginia's first fair housing law was

enacted by the General Assembly in 1972. Initially similar to the fair housing provisions of the national Civil Rights Law of 1968, amendments over time have extended its coverage to protect additional classes of individuals and is now broader than the federal law. Virginia's fair housing law prohibits discrimination on the basis of race, color, religion, national origin, sex, familial status, handicap, and "elderliness." Elderliness refers to anyone who is older than age 55 and is not covered by the federal fair housing law. VFHO staff members investigate allegations of discrimination and, whenever possible, attempt to resolve disputes through conciliation.

Action by the General Assembly in 2004 created an eleven-member **Fair Housing Board (FHB)** as a distinct entity from the existing nine-member Real Estate Board (REB). The FHB is authorized to hear fair housing complaints that do not involve a licensed real estate professional or their agents or employees. It is also charged with establishing a fair housing certification program applying to nonlicensed property managers, leasing consultants, and homeowners who are involved in selling or renting dwellings. The REB continues to hear complaints involving licensed real estate professionals.

Individuals who feel that they have been discriminated against or that the Fair Housing Law has been violated report complaints directly to the VFHO. As a part of its investigation, the VFHO interviews complainants, the respondents, and relevant witnesses; and reviews appropriate records and other documents. Once the investigation is complete, a final report is submitted that summarizes the evidence obtained. That report is reviewed and the evidence is presented to the FHB at its next regularly scheduled meeting. Following its review of the evidence, the FHB may issue a "no reasonable cause" finding, issue a "reasonable cause" finding, or accept a conciliation agreement. If the finding is of no reasonable cause, both parties will be notified in writing and no further action will be taken. If there is a finding of reasonable cause, the charge is immediately referred to the state Office of the Attorney General for further action and both parties involved are notified accordingly in writing.

During the investigative process, VFHO will attempt to resolve the complaint through conciliation. Conciliation is a voluntary process in which the parties attempt to come to a mutually acceptable agreement. If conciliation is successful, the investigation is suspended. If one or both parties reject conciliation or if conciliation is unsuccessful, the investigation continues until it is complete. In fiscal year 2007, VFHO investigated and closed 132 cases. Conciliation was successful in approximately 20 percent of these cases, resulting in awards to complainants of approximately \$62,000.

In addition to investigating and settling complaints, VFHO conducts outreach and training on Virginia's Fair Housing Law. These activities range from distribution of handouts to sophisticated interactive presentations by the VFHO staff to state and local officials, housing providers, and consumers. This training is offered free and is tailored to meet the specific needs of its recipients.

As mentioned at the beginning of this chapter, 2007 was a year marked both by undeniable housing challenges faced by Virginians with disabilities and by the targeted efforts

being made for better collaboration and coordination of housing resources and policy on the state and local levels. The advocacy community is a critical link in moving the system forward. Citizen participation and monitoring are necessary ingredients if we are to have a positive impact on change and experience concrete outcomes.

## **G. Areas of Concern for Community Housing**

The chapter detail provides information on the breadth and depth of housing services, supports, and resources in Virginia. Cited throughout the chapter are important statistical data regarding program activities and cost-of-living and income barriers. The chapter detail also provides information on areas in which the system and services have improved and describes improvement activities and outcomes. Section G focuses on the specific areas in which further improvements may be needed to move the system forward and increase affordable and accessible housing capacity and choices. The Virginia Board for People with Disabilities (VBPD) identified the issues and concerns below through a variety of mechanisms, including: (1) review and analysis of the numerous source documents referenced within and listed at the end of this chapter, (2) public comment received via VBPD's six public forums held throughout the state in the spring of 2007, and (3) written comment and information provided and verified by state agencies in their reviews. The issues below are not all-inclusive, but represent those that VBPD has identified as important to systems improvement.

- 1. Need to Separate Housing and Support Services:** When housing and support services are tied together, individuals are vulnerable to funding changes and other pressures affecting the agency providing support. For example, those who provide both housing and services may choose to drop certain services. If the service they provide is required for the individual to reside successfully in that living environment, the individual can be evicted from the place of residence with no resource or appeal available to the person. In addition, with housing and services combined, persons with disabilities are not as free to change the providers from whom they receive services if they are dissatisfied with those services. In 2000, the President's Committee for People with Intellectual Disabilities stated: "People should have stable homes while fully exercising their right to choose the agencies who enter their homes to provide supports. Federal and local policy should affirm the separation of all programs specifically funding services or housing."
- 2. Lack of Coordinated Housing Planning:** The need for coordinated planning has been acknowledged by both the disability and housing communities. While there has been some progress, and strategies have been developed to address the need for greater understanding and education, the lack of coordination, consistent and effective influence, and integration of system change strategies that will have a positive impact on housing opportunities and options for people with disabilities in state planning processes and policies remain significant. Advocates and the disability community do not have a clear understanding of how the four housing planning activities by which disability advocates can influence the use of federal housing resources (the Consolidated Plan, the Public Housing Agency Plan, the Continuum of Care, and the Qualified Allocation Plan) operate on the local and state level.

They are not sure what agencies prepare these strategic housing documents, how often they are prepared, and how to be a part of the planning process and develop positive relationships.

3. **Lack of Housing Options:** The lack of community resources for housing and other housing issues are a statewide concern and are well-documented by both the Virginia Housing Development Authority (VHDA) and the Department of Housing and Community Development (DHCD). These concerns illustrate a significant lack of housing options for people with disabilities (see Chapter detail). This lack of options exists for both properties that provide service coordination and supports for residents and properties that are heavily subsidized for low-income individuals with disabilities. To date, efforts to establish a Housing Trust Fund in Virginia have been unsuccessful. Increased efforts are needed to obtain a commitment of resources to support integrated housing options and choices. This is particularly important as we concurrently explore our long-term care system and needed changes to rebalance Virginia's allocation of resources from institutional settings to community settings.
4. **Inadequate Compliance with Fair Housing Practices:** Public comments indicate widespread landlord bias against low-income persons with disabilities and a reluctance to rent to persons whose primary source of income is Supplemental Security Income. Data from HUD's Office of Fair Housing and Equal Opportunity reinforce this concern. According HUD's 2006 Annual Report on Fair Housing: "In FY 2006, for the second consecutive year, disability was the most common basis for housing discrimination complaints filed with FHAP agencies. There were 2,851 such complaints filed, which accounted for 38 percent of the total complaints filed."
5. **Growing Demand Combined with Lack of Affordability:** The demand for affordable housing among people with disabilities will continue to rise rapidly because of the increase in life expectancy among people with disabilities and the advanced age of many family caregivers. As a Money Follows the Person (MFP) Demonstration Project recipient, Virginia has committed to support and lead rebalancing initiatives moving from an institutionally biased system to one that supports community inclusion, which further increases demand. Meeting this need will be difficult because of the very low incomes of many people with disabilities. Any substantial increases in their income will likely occur gradually, over time. Meanwhile, a large share of people with severe disabilities will continue to require deep subsidy assistance in order to find access to suitably located housing that is adequate to meet their needs. Exacerbating this situation is the trend of rising housing and rental costs statewide coupled with general increases in cost of living that further widen the gap between personal resources and need.
6. **Need for Transportation to Be Aligned with Housing:** The full inclusion of people with disabilities in their communities can only be accomplished by improving transportation and housing opportunities as a part of an interdependent system with unique needs and overlapping interests. Planning for improving the infrastructure and choice of accessible,

affordable, and safe housing and transportation options in Virginia has been identified as a need by both transportation and housing entities. A lack of coordinated planning as well as inefficiencies in data collection and analysis on the housing and transportation needs of persons with disabilities on the local level creates a significantly impact on the assurance of consideration of these needs in planning processes. This coupled with an increased need/demand for community-based accessible and affordable housing and transportation creates a barrier to community inclusion and citizen participation.

7. **Continued Community Resistance:** There continues to be an overall lack of accessible and affordable housing that is integrated into local communities. Compounding the issue is resistance in many localities to the development of housing options for people with disabilities, in large part caused by misconceptions, attitudes, and stereotyping. As recently as 2007, a neighborhood in Central Virginia expressed significant opposition to a group home located in their neighborhood. Issues of NIMBYism (Not In My Back Yard), in spite of Fair Housing protections, remain.
8. **Lack of Awareness of Universal Design and Visitability:** While progress has been made, there remains a broad lack of awareness across the housing spectrum (e.g., homeowners, builders, landlords, local and state officials, and operators of congregate living facilities) about the importance and benefits of universal design and visitability. Notable progress includes a coalition that developed in 2007 to bring EasyLiving Home (ELH), a voluntary certification program for new construction that meets key features of accessibility/visitability, to Virginia. In order for a home to be certified as an ELH, the home must contain the following features: (1) one zero-step entrance; (2) all main floor interior doors—including bathrooms—having 32 inches of clear passage space; and (3) at least one maneuverable half bath (preferably a full bath), bedroom, and entertaining area on the main floor. These features enable a person with a disability to *get in and out of the house and be able to use the bathroom*—the essentials for visiting, and for remaining at home with a temporary or long-term disability. Further promoting the importance of universal design and visitability, the 2007 General Assembly renamed the Home Modifications Tax Credit to the Livable Homes Tax Credit and expanded its use to new construction that meets the three key features of visitability. While these steps are positive, increased awareness and outreach education efforts across the housing spectrum are still needed.
9. **Philosophical Differences Regarding Community Housing versus Institutional Living:** Philosophical differences, such as those that surround institutional living versus community integration and group home living versus supported living and independent living, are still unresolved and present a barrier to progress. A vigorous debate continues among individuals with disabilities, family members, advocates, service providers, and officials on the strategies that would increase housing options. As we continue to promote culture-shifting from a medical model of services and supports toward that of inclusion and self-determination, it will become increasingly important to engage in discussion on these differences of philosophy, opinion, and expectation. Strategies need to be designed to implement change in a long-term and well-managed process.

## H. Board Recommendations for Community Housing

There are many individuals with disabilities who, if given the opportunity, would choose to live independently in their own residence, with or without supports. For this option to become a reality, people with disabilities need to be provided viable choices for accessible and affordable housing options. The availability of adequate housing is also a significant issue with respect to the Commonwealth's ability to comply with the Supreme Court decision on *Olmstead v. L.C.* The Virginia Board for People with Disabilities (VBPD) offers the following recommendations to improve community housing available to Virginians with disabilities.

1. **Increase Knowledge of and Planning Based on Alternative Housing Models:** To create more housing that is affordable for people with disabilities, housing officials must be better educated about both the residential preferences of this population and the financing of subsidized housing that facilitates community integration. The types of housing preferred by some people with disabilities are independent apartments and homes or alternative housing that is integrated into the community rather than housing targeted either to persons with disabilities or more restrictively to persons with a specific type of disability.

The most creative and successful strategies require service agencies to think “outside of the box”—using all available housing resources and not just those targeted to the broad “special needs” populations. For example, in some states housing officials have combined mainstream Low-Income Housing Tax Credit funds and Shelter Plus Care subsidies to create new supportive housing for very-low-income homeless people with disabilities.

Housing models are, and will continue to be, needed that separate housing and services, allowing for choice in where and with whom a person lives. Separation of housing from services in community-based settings has been both a successful formal policy and standard practice in a number of states, such as Wisconsin, Michigan, Rhode Island, and Illinois. Individualized budgeting is one mechanism being used to promote such models, and it results in greater flexibility and independence in selecting housing and a service provider. VBPD recommends that the accomplishments and strategies used in other states be reviewed, discussed, and used to develop a framework for action in Virginia.

All entities and individuals with a vested interest in increasing housing opportunities and choices—state, regional, and local agencies, nonprofit and private organizations, advocates, and individuals with disabilities and their families—need to develop or strengthen collaboration and coordination of efforts. VBPD recommends development of training and other educational opportunities that will equalize knowledge, dispel myths and misinformation, promote common ground, and create a common vision.

2. **Provide and Prioritize Rental Assistance to Persons with Disabilities:** An effective way to create affordability and choice in rental housing is to prioritize people with disabilities for rent subsidies that enable access by very-low-income people with disabilities to a broader array of nonsegregated housing opportunities throughout local communities. VBPD

recommends that Public Housing Authorities (PHAs) review their PHA Plans to determine if the needs of very low-income people with disabilities are adequately addressed and to add a priority in their plan for people with disabilities.

Another effective mechanism to promote housing is through Auxiliary Grants (AG). A 2007 report by the Secretary of Health and Human Resources conducted under the 2007 Appropriations Act, Item 278 C, *Auxiliary Grant Portability: A Report on the Feasibility of Restructuring Auxiliary Grants for Certain CSB Case Management Consumers*, includes the following findings:

- Federal regulations allow for more flexibility in Virginia's AG program, which does not need to be limited to Assisted Living Facilities and Adult Foster Care.
- With current rates, the AG could be used as rental assistance, thereby making one-bedroom apartments affordable in most localities and two-bedroom shared apartments affordable in all localities.

VBPD recommends that the Commonwealth revise Auxiliary Grant statutes to allow seniors and people with disabilities who are found eligible for or are currently receiving Auxiliary Grants as rental assistance to choose to use the AG SSI supplement in housing types other than assisted-living facilities and adult foster care residences. This revision would be an important step forward in supporting choice, self-determination, and inclusion for individuals with disabilities.

3. **Ensure Coordination of State Housing Activities:** A Money Follows the Person Housing Task Force, created by the Secretaries of Health and Human Resources and Commerce and Trade in 2007, will develop a housing action plan in the spring of 2008 and will update it annually thereafter. This Task Force encompasses a diverse membership, including federal, state, local, and private partners. The Task Force was developed in response to the Commonwealth's MFP initiative, and, while the activities associated with this initiative are focused on rebalancing the service system from one that is institutionally biased to one that focuses on community living, the Task Force is well-positioned to have greater impact beyond the scope of MFP. VBPD recommends that this Task Force take the lead in facilitating improved, comprehensive, and coordinated strategic planning and actions across human service agencies and secretariats to reshape the structure and scope of supports to persons with disabilities statewide so that they can have choices of affordable, accessible housing that fosters independence and community inclusion.
4. **Increase Disability and Advocacy Community Participation in Planning:** To influence more successfully the use of federal housing resources, the disability community should become more actively involved in the significant state housing-planning activities such as the Consolidated Plan, the Public Housing Agency Plan, the Continuum of Care, and the Qualified Allocation Plan. To facilitate this process, more user-friendly information should be provided to the disability community both on the planning processes and on how specific housing programs are accessed and operated. For example, many federal housing programs

cannot be targeted to a subpopulation of people with disabilities (e.g., people with mental illness, people with intellectual disabilities, or other specific types of disability).

VBPD recommends that individuals with disabilities who are assisted by a Public Housing Authority (PHA) participate in housing planning and discussions by being a member of a PHA's Resident Advisory Board (RAB), which provides the PHA and the residents with a forum for sharing information about the Agency's Annual Plan. Section 511 of the U.S. Housing Act and other regulations (24 CFR Part 903) require that PHAs establish one or more RABs as part of the PHA Plan development process. The RAB's role is to assist the development of the PHA Plan and to make any significant amendment or modification to the Plan. Individuals with disabilities and the advocacy community should discuss this opportunity with their local PHA.

5. **Improve Coordinated Financing for Housing:** To promote the creation of deeply subsidized housing needed for extremely poor individuals with disabilities who cannot find access to housing otherwise, the disability community will have to challenge housing officials to improve the coordination of housing financing and possibly to change the method for allocating and distributing housing funds. For example, state housing agencies that control federal housing resources—such as Low-Income Housing Tax Credit, HOME funding, Section 8 Housing Choice vouchers, etc.—can develop a uniform application for funding that includes incentives for housing developers to combine resources and to target new housing units for people with disabilities. Some states currently require that developers that receive Low-Income Tax Credits set aside a certain percentage of new units for people with disabilities; and to ensure that these units are affordable for people with disabilities who have extremely low incomes, they encourage Public Housing Agencies (PHAs) to use Section 8 project-based vouchers to help subsidize the rents.

VBPD continues to recommend and support the development of a Virginia Housing Trust Fund using an existing, dedicated stream of state revenue. Thirty-eight states—including Maryland, North Carolina, and West Virginia—have established housing trust funds to alleviate the rising cost of housing.

6. **Amend Fair Housing Statute:** To put an end to discrimination against persons with disabilities using Housing Choice Vouchers, VBPD recommends reintroduction and passage of House Bill 1085, introduced during the 2008 session of the General Assembly, to expand the state's fair housing law to include the consideration of source of income as an unlawful discriminatory practice. In House Bill 1085, "Source of income" is defined as "*any lawful income used by a person to meet his obligation to pay for the purchase or lease of a dwelling, including payment with (i) federal funds received pursuant to public housing or Section 8 programs of the United States Housing Act of 1937, as amended; (ii) funds received from assistance made available under Chapter 1.2 (§ 36-55.24 et seq.) of Title 36; (iii) proceeds from a bequest, life insurance policy, annuity, or other like source; or (iv) funds received from child or spousal support payments.*"

## Community Housing Sources Referenced in This Chapter

### Web Sites:

AccessVA, Virginia's Accessible Housing Resource: [www.accessva.org](http://www.accessva.org)

EasyLiving Home: [www.easylivinghome.org](http://www.easylivinghome.org)

National Low Income Housing Coalition: [www.nlihc.org](http://www.nlihc.org)

Opening Doors (newsletter): [www.tacinc.org/Pubs/ODpubs.htm](http://www.tacinc.org/Pubs/ODpubs.htm)

U.S. Department of Housing and Urban Development: [www.hud.gov](http://www.hud.gov)

Virginia Department for the Aging: [www.vda.virginia.gov](http://www.vda.virginia.gov)

Virginia Housing Development Authority (VHDA):  
[www.vhda.com/vhda\\_com/front\\_page/default.asp](http://www.vhda.com/vhda_com/front_page/default.asp)

Virginia Department of Housing and Community Development (VDHCD):  
[www.dhcd.virginia.gov](http://www.dhcd.virginia.gov)

Virginia Department of Medical Assistance Services: [www.dmas.virginia.gov](http://www.dmas.virginia.gov)

Virginia Department of Mental Health, Mental Retardation and Substance Abuse Services  
(DMHMRSAS): [www.dmhmrzas.virginia.gov](http://www.dmhmrzas.virginia.gov)

Virginia Department of Professional and Occupational Regulation:  
<http://www.dpor.virginia.gov/dporweb/dpormainwelcome.cfm>

Virginia Department of Social Services (DSS): [www.dss.virginia.gov](http://www.dss.virginia.gov)

Virginia Statewide Independent Living Council (SILC): [www.vasilc.org](http://www.vasilc.org)

Virginia Olmstead Initiative: [www.olmsteadva.com](http://www.olmsteadva.com)

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