How I want to live and be supported

Information about a range of accommodation supports available to people with disability support funding in Western Australia



Contents

- Overview
- 1 Who is this booklet for?
- 2 Disability Services Commission Accommodation Client Transition
- 3 Accommodation options
- 3 Transition Pathway
- 4 Talking to a Provider
- 4 National Disability Insurance Scheme
- 5 Shared and Self Management
- 6 Nigel's Story
- 8 Vanessa's Story
- 10 Paul's Story
- 12 Robert's Story
- 14 Dictionary
- 15 Comparison Table
- 19 Questions



Overview

The booklet has:

- Information for people transitioning from Disability Services Commission accommodation services to non government providers.
- Information about accommodation options for people with Disability Services Commission funding.
- Information to think about when talking to and choosing a provider.
- A table of accommodation types and short description of the supports available.
- A dictionary with some of the common words and terms used by providers and government when describing support and services for people with disability.
- Some questions you may like to think about asking when talking to providers.
- A section where four people living in different types of accommodation share their stories.



Who is this booklet for?

This booklet is for people with Disability Services Commission accommodation support funding, their families and carers, wanting to explore the range and type of accommodation and supports available in Western Australia.

This booklet is written for the person thinking about the type of home they want to live in and the support they may need.

Disability Services Commission Accommodation Client Transition

If you are reading this booklet as you or a family member are moving from Disability Services Commission accommodation services, the following information may be helpful.

The Disability Services Commission is transitioning close to 60 per cent of people who are living in and are supported by their accommodation services, to non government providers. This started in 2014 and will be a gradual process.

The Disability Services Commission has a team of people available to talk to you and your family or carers about the transition and the steps involved.

The Disability Services Commission Transition Team will send letters and emails, will make phone calls and will meet with you and your family and carers, if you are changing to a non government provider. The Transition Team will explain the process in more detail when they meet with you and your family or carers.

If you are moving from Disability Services Commission accommodation, there are two key decisions that you and your family and carers will need to make:

- Do I want to stay in my current home with my current housemates, or do I want to explore other accommodation options?
- Who do I want to provide my support services in the future?

These are big decisions to make and the Disability Services Commission does not want to rush you during this time. The Transition Team will support you and your family and carers and help you explore the range of living options and providers available to you.

The Transition Team may be contacted by phoning (08) 9426 9200 or 1800 998 214 and asking to speak to Sue Cannell, Neil Paynter or Luke Doyle, or emailing dsc@dsc.wa.gov.au

There is more information about the accommodation transition and a list of accommodation providers, on the Disability Services Commission website: www.disability.wa.gov.au

The Transition Team may be contacted by phoning (08) 9426 9200 or 1800 998 214 and asking to speak to Sue Cannell, Neil Paynter or Luke Doyle, or emailing dsc@dsc.wa.gov.au

Accommodation Options

The table starting on page 15 has information on some of the different types of accommodation available in Western Australia to people with funding from the Disability Services Commission. The table is a guide only and does not show all the possible options.

There are a lot of different living options to choose from. The range of living options and ways you may be supported are as unique and individual as you are and can change over time to meet your needs. The decision you make today does not have to stay the same in the future. Your funding moves with you if you choose to change providers or accommodation option.

Your wishes, type of support you need, the assistance available from your family, friends and carers and your funding package will help you decide what type of accommodation and support will work best to meet your needs.

"There are a lot of different living options to choose from."

The table shows you some of the words and terms used to describe different models or types of accommodation and what each type may look like. It is important to know that not all providers offer the whole range of accommodation options.

This booklet is designed to aid your decision making but it is also important to talk to providers to better understand the details and what the accommodation option may look like for you with your support needs.

Please be aware that the terms in the table may have different meanings depending on the provider you are talking to. This is because the terms are defined by each provider. You may notice the same term used to describe two or more different types of accommodation. This can be confusing at times which makes it important to check your understanding with that of the person and provider you are speaking with.

Transition Pathway

Once the Disability Services Commission Transition Team has made contact with you and your family or carer, and you have made the decision to either remain living with same people in the group home (house pathway) or to try a new type accommodation support (individualised pathway), you will follow one of the following two pathways:

House Pathway	Individualised Pathway
Accommodation transition process, supported by the Disability Services Commission Transition Team	Supported by the Disability Services Commission Options Exploration Process Team
You will be given a list of providers that are registered (preferred provider) with the Disability Services Commission to provide accommodation support. You and your family and carers will look through the list and choose a few providers to talk to about your needs and desires.	You will be supported by the Options Exploration Process Team in the Disability Service Commission to contact some registered (preferred provider) providers to talk to about your needs.

 $oxed{3}$

Talking to a Provider

Once you have decided to talk to a provider, it is important to make clear the type of accommodation and the support you would like now and what you may like to try in the future. For example if you would like to live in a group home now but think that in a few years time you may like to try living by yourself with some paid support, it is important to find out if that provider can offer that type of accommodation or if you will need to change providers at that time.

It is very important when you are talking to a provider that you check all the details with them to make sure you both have the same understanding. For example what one provider calls individualised support may have a different meaning to you or another provider.



Either your Transition Team or Options Exploration Process Team in the Disability Services Commission will assist you with more information about this process and will assist to arrange meetings with providers of your choice.

Once you have spoken to a few providers about how they may meet your support needs with your available funding, the next step is usually to choose a provider and start your service planning with that provider.

National Disability Insurance Scheme

The National Disability Insurance Scheme (NDIS) is being trialed in Western Australia under two models. Both models are new ways of providing individualised support for eligible people with permanent and significant disability, their families and carers. There is a focus on planning supports and services with more choice and control directed to people with disability, their families and carers.

The NDIS is being trialled in Western Australia in the following locations:

Model	Date	Commencing
WA NDIS NDIA*	Perth Hills region	1 July 2014
WA NDIS My Way	Lower South West	1 July 2014
WA NDIS My Way	Cockburn-Kwinana	1 July 2015

^{*}NDIA - National Disability Insurance Agency

"A focus on services with more choice and control directed to people with disability."

For more information regarding My Way please refer to the Disability Services Commission website: www.disability.wa.gov.au Look for WA NDIS My Way button

For more information regarding the NDIS please see the fact sheet. www.ndis.gov.au Look for 'Supports the NDIS will Fund in Relation to Housing and Independent Living' fact sheet.

Shared and Self Management

Another point to consider when choosing a provider is if you would like to have more responsibility for managing part or all of your accommodation service. This is commonly known as Shared Management but the provider may also refer to it as Self Management, or Consumer Directed services. Not all providers offer self or shared management as an option.

You have input into
the planning and delivery
of your services, how your funding
is used and choice over how much
control you would like.

It is important to note that even though a provider may not offer shared or self management, a person purchasing services from a provider is the driver of those services. This is often referred to as Self Directed Services. This means that you have input into the planning and delivery of your services, how your funding is used and choice over how much control you would like. Self Directed Services is a principle that all providers in Western Australia are expected to use. For more information on Self Directed Services, please refer to www.dsc.wa.gov.au and search for 'self-directed supports and services conversations that matter'.

The following is from the Disability Services Commission Shared Management Policy 2011 and helps explain what Shared Management is:

"Shared management refers to the agreed sharing of funding management and service management responsibilities between the individual and/or family and the Organisation."

Shared management enables individuals and/or families to undertake responsibility for activities related to the management of the individual's supports and funding, according to the individual's and/or family's capacity and preferences. This can include activities such as staff recruitment, staff training, employment of staff and payment of staff. Individuals and/or families can choose what activities they want to be involved in, how much involvement they would like and which activities they would prefer the Organisation to manage.

Where the individual and/or family elects to take on responsibility for management of aspects of their funding and/or supports, negotiation occurs between the individual and/or family and the Organisation to enable each party's requirements, expectations and responsibilities to be clearly established and subsequently documented in a signed shared management agreement (Agreement)."

The Disability Services Commission funded WA's Individualised Services (WAIS) to develop a Shared Management guide. The guide provides details on what shared management is and how to implement a shared management approach.

It may be found at **www.waindividualisedservices.org.au** and search for 'self and shared management guide'.

Did you know many providers offer shared or self management of your funding? This is where you can choose to have even more say in how your service is delivered and managed.

(4)

Nigel lives in his own home with support staff visiting

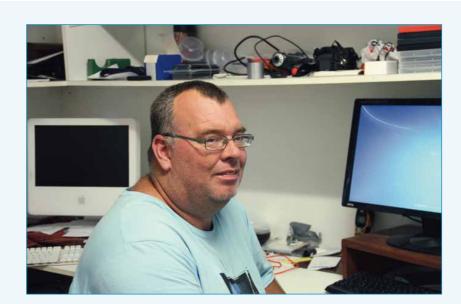




Nigel has been living in his own villa for 15 years. The villa was fitted out to meet Nigel's needs including higher benches in the kitchen.

A well known handyman in his neighbourhood, Nigel is a busy man going to the gym five days a week with his personal trainer, working, holidaying with his friends, taking on handyman and lawn mowing jobs and he is an avid gamer.

Nigel is supported by a team of different people who visit to assist him with some of his day to day activities like housework, bill paying and shopping.



"I have more freedom and look after myself.

I cook and wash up for myself and I couldn't do this where I use to live.

I can have friends over when I want and it's ok."

Nigel is a man who knows what he likes and has a zest for life. A welcoming character, who is well known in his neighbourhood for his friendliness and willingness to lend a hand.

Nigel has his own handyman business undertaking lawn moving, gardening and reticulation jobs in his neighbourhood and has just started a job delivering newspapers. When he is not working or tinkering with his tools, Nigel is a keen gamer and competes online. Nigel also loves to use Facebook to keep in contact with his friends and family.

Nigel has not always lived by himself. After moving out of his parent's home, Nigel moved into a group home with other people with disability. Realising that there may be a different accommodation option that would work to Nigel's strengths, Nigel and his family started investigating what else was possible.

"You can do what you want to when you want to and don't have to fit in with other people in the house."

Before moving into his own villa, Nigel moved to a transition accommodation setting which focused on developing his cooking, cleaning and other independent living skills. Once his villa was ready, Nigel moved into his new home with his brother who provided support and worked with Nigel to further develop his skills to enable him to live by himself. After his brother moved out, one of Nigel's mentors from the disability support organisation moved in with him to provide support.

A warm host, Nigel is ready with stovetop coffee to offer his guests and is up for chat. Since moving in, Nigel has made approved improvements to his home and has shown ingenuity in trading some of his time and talents for those of other trades people.

"Nigel now lives happily by himself with assistance from his team who visit regularly and spend time with him."

"You can do what you want to when you want to and don't have to fit in with other people in the house. I can listen to the music I like when I like and I'm not told what time to go to bed. You work towards your goals and have an opportunity to prove yourself. I have more freedom and look after myself - I cook and wash up for myself and I couldn't do this where I use to live. I can have friends over when I want and it's ok."

"I can listen to the music I like when I like and I'm not told what time to go to bed. You work towards your goals and have an opportunity to prove yourself."

Nigel's support organisation works with him to offer a balance of support to meet his needs and ensure that he is well safeguarded in his villa and neighbourhood. For instance Nigel looks after his own medication with the support organisation checking with Nigel if he has taken it. Should Nigel need them, there is a list of emergency numbers attached to the cupboard door. Nigel also has a close relationship with his neighbours who hold spare keys and emergency contact information for him.





Vanessa moved into her carers home



Vanessa first moved from her mother's house into her own house with support from rostered care staff. As Vanessa thrives on the company of others, this was not the ideal solution for her.

Vanessa's provider worked with her to find an arrangement that would bring out her strengths and found that she would like to live with others.

Vanessa has now lived with her key carer Kathy and her family for the last eight years. It is clear that Vanessa is very happy and is living a full life.

Vanessa is a lady with many talents, including running a small business - 'Happiness Hairclips'. She understands a number of languages including English, Macedonian, Makaton signs and Compic signs, is a keen gardener and a social butterfly. Vanessa is also a technology lover, having recently started using Proloquo2Go (a communication tool) on the tablet, Vanessa has found an extra way of communicating.

"Ness makes herself understood" says Kathy, Vanessa's primary carer.

Vanessa has been living with Kathy and her family for the past eight years. It is very clear that Vanessa and Kathy have a great relationship built on mutual respect and trust.

Vanessa came to live with Kathy and the rest of the family, after moving into a purpose built house. Living by herself, with carers providing support on a rostered basis, was not the most suitable arrangement for Vanessa who is a people person and loves company.

"Since moving into Kathy's house, Vanessa's physical ability to move around has improved."

Working with her service provider, another living option was found that has worked out well for Vanessa and Kathy's family.

Vanessa leads a busy life, working two days a week, swimming each Wednesday, attending dance classes and catching up with friends, all whilst fitting in the making of the hairclips on the side.

Since moving into Kathy's house, Vanessa's physical ability to move around has improved. Vanessa no longer needs the assistance of a hoist to move from her bed to her wheelchair and she now propels herself around in her wheelchair instead of using an electric one.

Keeping an eye on Vanessa's diet and medications, Kathy knows that wholesome home cooking has seen an improvement in Vanessa's health and has enabled her to maintain the best possible wellbeing to keep up her busy schedule of activities and community engagement.

"Even though Ness lives with us and is part of the family, she has her own family that she loves to see and spend time with and we do not replace her family. Ness talks on the phone to her mum regularly and sees her family when she can."

Vanessa's moving out of her family home into one of her own and then to live with us, is like what any person in their 20s does. It's a natural progression. In Ness' situation, it's just that she didn't enjoy living by herself, so living in a home where she has some company and help with her day to day living suits her needs."

Kathy is very clear that she is not there to replace Vanessa's family but it is her role to care for and support Vanessa.

A team of workers also support Vanessa and they are recruited based on their skills and connection with Vanessa. Kathy is involved in the selection process of the workers along with the provider who oversees the process. People with skills in certain areas may be advertised for, for example someone who enjoys swimming and is a Personal Trainer works with Vanessa in the pool. Often people come to work with Vanessa through word of mouth.

"Even though Ness lives with us and is part of the family, she has her own family that she loves to see and spend time with and we do not replace her family."

"The natural connection with Ness needs to be there from the start - in the first meeting. If that's there, we then arrange some 'buddy shifts' where they will accompany Ness and her worker and we take it from there. Some of the people who use to work with Ness are now her friends who she keeps in contact with, often via Facebook, and meets up with them."

As Vanessa's key carer, Kathy takes on the role of assisting Vanessa with her daily personal care, arranging her appointments, providing transport, planning and cooking her meals and developing her skills around the home as well as providing other support. Others on the support team have different roles and responsibilities including supporting Vanessa in her community activities and with her hairclips business.

When Kathy and her family go on holidays sometimes Vanessa will accompany them. If Kathy and her husband travel without Vanessa, it is arranged for people on Vanessa's support team to provide her care in Kathy's absence.

Kathy has been a carer working in the area for a number of years and understands Vanessa's needs and how to meet them with the support of the provider. Should any issues arise that Vanessa or her family would like to discuss about her care, Kathy and the provider are there to provide support.



Vanessa's

Story



"It is very clear that Vanessa and Kathy have a great relationship built on mutual respect and trust."

 $egin{pmatrix} 8 \end{pmatrix}$

Paul lives in his own home



Paul lives in his own house in the Fremantle area. A housemate shares the rent and household bills.

Paul's support team are clear when looking for a suitable housemate, that the person will want to spend time with Paul and include him in some aspects of their life. This might be going to the pub to see a band play or just having dinner together at home.

Paul's housemate is not his carer. Paul has a team of workers who take on various roles in caring for Paul. Paul's family are also close by and provide a guiding hand to Paul and his team.

In 2006 Paul, his family and some friends came together and spoke about what it may take and look like for Paul to have a 'good life'. A plan was developed that has Paul at the heart. One of the key focus areas of the plan was for Paul to live in a place of his own.

The journey for Paul and his family took over four years, until a suitable house and support network were found and Paul was settled into his own home.

Paul's journey included a few months trial in a group home that did not work out for him. What did work, was for Paul's parents to be supported by other families now known as Youniverse. They gathered in a small group that included a paid worker who knew Paul. When undertaking planning, the group drew on Paul's strengths and enabled him to make decisions about where he wanted to live, how he wanted to feel and what he would like it to look like. The group also provided good emotional support when Paul's Mum felt overwhelmed.

Part of the journey of moving in to his own home included Paul moving to the granny flat at the back of his parent's home for a period of time. This gave Paul more freedom and helped him to feel what it was like to have his own place to live in.

"When undertaking planning, the group drew on Paul's strengths and enabled him to make decisions about where he wanted to live, how he wanted to feel and what he would like it to look like."

Along the way to working out what type of support would be needed for Paul to live in his own home, a group of Paul's siblings friends where asked for their thoughts on what they would see as important factors if they were living with someone like Paul. It was helpful to find out that two bathrooms would be a key success factor to allow Paul his privacy and also to draw a key boundary between that of housemate and Paul's support staff.

Once a suitable house was found that met Paul's needs including being in the area where Paul has established routines and places he knew, Paul, started to visit his new home just a couple of times to do things he enjoyed - baking cakes, listening to music or having some friends around. At the same time, a housemate was found through word of mouth and she moved in.

Despite the well considered gradual transition plan, Paul had clear intentions of what he wanted. "We took Paul to his new house for dinner, and we gave him the choice to either stay in his new home, or come back with us to the granny flat. He got up and walked into the room and started taking his boots off to get ready for bed. The following evening, we again had an evening meal in the villa and gave him the same choice. He made the same decision. He clearly wanted to be in his own house and has continued to exercise that choice ever since" says Paul's mum Jenny.

Jenny says "Since then, Paul's original housemate has moved on and Paul now has housemate number three living with him. There have certainly been some issues and speed humps along the way, but on the whole it has worked pretty well for us and really well for Paul."

Jenny reflects that Paul's family have learnt "that in order for Paul to have as 'normal' a life as he can, it is better if his housemate has a job other

than as a carer of some sort, pays something towards rent and bills, and is not paid any money to be his housemate. We are aware that other people have established arrangements that are set up differently to this and many of these seem to work well too. As such, we are not at all dictatorial in saying that this is how it should or must be (Paul's first housemate was paid a small amount and paid no rent so we have tried a few arrangements). Work out what will work in your situation and build in some opportunities for reflection and review, including opportunities to change the arrangement.

Paul's

Story

We currently have a system where the housemate pays half the rent and half the household bills. They still have cheaper than market rate accommodation to offset the intrusion of Paul's support crew coming and going (though this is often enjoyable and sociable). Equally they are free to move on if their relationship with Paul doesn't work out.

More importantly, we do have an explicit expectation that Paul's housemate will be someone who wants to spend some time with Paul on a regular basis and who will make some effort to include Paul in aspects of their life. So sometimes Paul goes out to the pub for music gigs with his housemate or just has a quiet dinner at home with them. We also encourage them to connect to Paul's support team members and to join in some of team meetings and group dinners that Paul hosts.

Paul's paid support team - 'Paul's People' play an active role in welcoming, orientating and facilitating the relationship between Paul and his housemate. We do not recruit housemates in the same way we recruit paid team members but we do some informal advertising through networks and social media. There is a collective approach that includes Paul when making such decisions. This is an important safeguard for Paul.

While moving out of home has been great for Paul, there are many other things happening concurrently to improve Paul's life. We worked intentionally at improving the paid support team processes such as recruitment and training. Team culture has improved a lot.

Paul now has a microboard (a small, incorporated association of at least six unpaid friends that exists only to benefit Paul). Over the next few years, The Paul Jay Experience Inc. will grow into overseeing Paul's good life, ensuring that his future care is secure even if something happens to us.

We have gradually learnt from other families and from Paul that despite his diagnoses and labels, Paul is more intelligent than we used to think. We now talk to him as though he is indeed a thinking and understanding 26 year old young man. We are getting better at conversing with him and finding out his thoughts and opinions on all sorts of things. Paul has relaxed so much over the past three years and he has really thrived with people who start from different assumptions and intentionally include him. He is communicating more and more all the time and is exercising greater choice and control in his life. You would have to agree that he is a relaxed and happy young man!"



"Paul had clear intentions of what he wanted.

We took Paul to his new house for dinner, and we gave him the choice to either stay in his new home, or come back with us to the granny flat. He got up and walked into the room and started taking his boots off to get ready for bed."

(10) (11)

Robert shares his house with his carers



After 40 years of living in a group home, Robert moved to his own home.

"It's unreal - I have freedom now."

Robert shares his house with a couple who provide support and care for him. It's clear that Robert and his carers have a great relationship and respect for each other.

Robert is focused on increasing his independence and has just gained his first paid job.

From the first moment you meet Robert you can tell he has a love for life and his new home. A budding artist with a flair for bright colours, Robert's taste in decoration matches his sunny personality.

Moving to his new home in January 2014, after living in a group setting for 40 years, was a dream fulfilled for Robert, who first moved into a group living environment at the age of seven.

Robert shares his house and life with Claire and Barry who live with him and provide carer support including, personal care, transport, meal preparation, exercise help and company. Claire and Barry have every second weekend away while Robert is supported by other carers.

"Since moving here, Rob has made some great improvements with his mobility, is starting his first paid job, he is making new friends in the community, learning new skills to develop independence and is enjoying working on his art. Rob is so excited to be able to make his family Christmas presents for the first time!" says Claire.

It is clear that Robert and his carers share a strong connection and that they are all focused on Robert's goal of increasing his independence. One of the key success factors in Robert's life has been the positive impact that Claire and Barry are having with Robert. A careful matching process was undertaken by Robert's support organisation to find carers who genuinely connected with Robert and to ensure that Robert would be well supported and safeguarded in his new home.

"A careful matching process was undertaken by Robert's support organisation to find carers who genuinely connected with Robert"

The move to Robert's own home was not always smooth sailing. There was a mixture of excitement and fear for Robert and his family as this was such a big change. Robert was granted a purpose built house under the Community Disability Housing Program that took into account Robert's need for an accessible home. The move to Robert's new house was planned and with the support of his carers Robert has been learning new skills to develop his independence in his own time.

Robert celebrated the move to his new house with a combined house warming and birthday party.

Claire knows that Robert has many skills and talents and she is working with him to develop those. Forming an art team - Claire draws on the canvas and Robert colours them in.







"I love to garden and it's my job to check the mailbox, I love being closer to my family too."

"Rob is so well known at the local art supply store that they've put him on their web page. We're also going through the alphabet and the art is a great way to learn the letters. A lot of what we do together is working towards Rob's goal of greater independence. We have put in this shelf with Rob's DVD collection on it so he can choose his own DVD and put it onto play."

"I love to garden and it's my job to check the mailbox," Robert delights. "I love being closer to my family too."

Robert has a raised vegetable garden and a handle has been fitted to the letterbox so he can open it easily. Robert is also thrilled to be closer to some of his family .His family were also instrumental in helping Robert to fulfil his dream of living in his own home.

Asked what he would tell people who maybe considering moving out of a group home and into their own Robert was quick to express his enthusiasm.

"It's unreal! I'm freerer - I'm happier. I have my own bus, I have my own carers, I eat when I want and I help with the shopping and cooking. I butter my own toast now and make my own milo. I couldn't do this where I use to live. I choose my own clothes which are more comfortable to wear and don't give me heat rash and it's easier to go to the toilet by myself. I'm working on my independence. Things are now my choice for my future."



"It's unreal! I'm freerer. I'm happier.

I have my own bus, I have my own carers, I eat when I want and I help with the shopping and cooking.

I'm working on my independence.
Things are now my choice for
my future."

(12)

Dictionary

Below are some common terms that are used by government and providers when describing services provided to people with a disability.

Attendant care

Personal care - assistance with showering, feeding etc activities of daily living

Drop in support

Usually describes a paid support worker providing time limited assistance

DSC

The Disability Services Commission

Individual

Person with Disability Services Commission accommodation funding

Informal or In-kind support

Assistance provided through natural networks of family and friends and is not paid

Life skills

Can include but is not limited to cooking, cleaning, gardening, independent travel, budgeting, bill paying

Model

Option, type of service

Natural support

Assistance provided through natural networks of family, friends and community and is not paid

On call support

Assistance usually offered as a part of a safeguard where the individual can phone a person and request help

Paid support

Assistance provided by support workers. This can be on a rostered basis. It does not need to be provided by a disability support worker but can be eg if the person was learning to surf the paid support would be a surf instructor

Person centred planning

A process that asks the person with disability what their goals are and develops a plan around the person's skills and abilities to achieve the goals



Personal care, personal hygiene

Assistance with showering, toileting, eating, transferring

Provider

Often a disability sector organisation or disability service provider that specialises in proving services to people with a disability but is not limited to disability specific providers

Quality evaluation

The Disability Services Commission process where service providers are evaluated against the Disability Service Standards on a three yearly basis

Resident

Person with DSC accommodation funding

Safeguard

Measures put in place to protect or guard against a harmful situation

Self care

Includes but is not limited to eating, dressing, preparing food, toileting

Self management

Where individuals and/or families take responsibility for activities related to the management of the individual's supports and funding, according to the individual's and/or family's capacity and preferences

Service provider

See provider

Shared management

See self management

Sleep over shift

Paid support staff sleep during the night but are available to check on residents and if there is need for urgent support

Support

Assistance for the person with disability, it may take many and varied forms

	Accommodation type & key characteristics	What can this look like?	May also be called	Dwelling type maybe:	Who lives there with the Individual with Disability Services Commission funding?
DISPERSED / INDIVIDUALISED ACCOMMODATION	Independent Living (individual lives in own or rents home with occasional support)	See Paul's story on page 10 and Nigel's story on page 6 for examples of what this can look like.	 Supported community living Individualised living/ Individualised accommodation option Drop in support Visiting support Maybe part of a 'key ring' support group 	 House Townhouse Villa Unit Granny flat Portable home	The individual may live by themselves. A housemate with or without disability may also live here but the nature of their tenancy does not include support for the person beyond that of a usual housemate arrangement.
	Shared Living (individual's home) (carer moves into individual's home. May include paid and unpaid support)	See Robert's story on page 12 for an example of what this can look like.	 Live-in support Co-residency Housemate Home sharer Companion Co-tenancy Live in carer Co-share 	 House Townhouse Villa Unit	 The owner/lease holder is the individual with disability and they choose a housemate who will assist them with their day to day living and also provide some companionship in return for cheaper or free rent. If the person with disability is living with another person with disability and the carer moves into support both people, paid support staff may also provide extra support on top of the support from the resident carer.
	Shared Living (carer's home) (individual lives in carer's home)	See Vanessa's story on page 8 for an example of what this can look like.	 Alternate care model family support Host family Adult fostering Home share Homestay Companion Co-residency 	 House Townhouse Villa Unit Granny flat Portable home	The individual moves into an alternate care model which may include living in the home of a couple, family, or individuals who share common interests.
CLUSTERED/ GROUPED ACCOMMODATION	Cluster Accommodation (village type, closely located units, houses or a block of units, on the same site or within a few streets)		 Villages Cluster accommodation Hostel Duplex Co-located Link supports Intentional community Congregate living Co-housing Neighbourhood network 	 A grouping of units Complex of villas Cluster of homes closely located within a few streets Village 	An individual may share their home or live by themselves with access to support that may be shared with other residents in the 'village'.
	Group Home (generally four to eight people living in a house or duplex in the community, with rostered support staff)		 Group accommodation Shared accommodation Duplex Co-share Co-located 	House Duplex villa or house	 Depending on the arrangement, up to eight people with disability could live in the one home/duplex with paid support staff rostered to provide support. Usually each person has their own bedroom and will need to share facilities including bathrooms, kitchen, lounge room.

			Self/Shared Management
	Level of Independence	Support available	Please be aware that not all providers offer shared or self management regardless if the model allows for it. See page 5 for further information and the difference between the self directed services (principle/approach) and self/shared managed services.
INDEPENDENT	High level of independence experienced by the individual.	 Drop in support where a paid person provides time limited assistance and does not reside with the individual. In kind support may also come from the individual's network of supporters eg neighbours, family and friends. 	Very often the providers that offer this option also offer self/ shared management but it is important to check with each provider.
SHARED LIVING (individuals home)	The person is the driver of what they would like and need support with.	 A co-resident will move into the home. In return for cheaper rent, will provide assistance with daily living tasks. Visiting or rostered support depending on the individual's arrangement. Paid support staff may have a live in arrangement on a rotating basis eg week on week off. Paid support staff permanently live with the person and support is provided flexibly and is defined in the planning process. A 'home sharer' arrangement has different working arrangements and the 'home sharer' may provide support and companionship up to 10 hours per week. 	 Dependent on the level of interest from the individual and their family and carers and if the provider offers this option. Very often the providers that offer this option also offer self/shared management but it is important to check with each provider.
SHARED LIVING (carer's home)	Dependent on the individual but generally the supporters work with the individual to enhance their independence.	 Some support may be provided by the housemate eg cooking, cleaning while other support like day time assistance or personal care may be provided by an employed support person. This is an arrangement that is often flexible and the level of support offered by each party is defined in the planning process. 	 Dependent on the level of interest from the individual and their family and carers and if the provider offers this option. Very often the providers that offer this option also offer self/ shared management but it is important to check with each provider.
CLUSTER ACCOMMODATION	 Depending on the individual's desire, support needs and living arrangement, this option can provide a greater level of independence than a group home. 	 Depending on the arrangement, paid rostered support, on a 24 hour per day basis or support during the day with onsite support available at night may be available. Support will vary depending on the provider and needs of the individuals. 	 Depends on the arrangement and if the provider offers shared management. If an individual has their own unit, and shares a component of their funding to cover communal resources, shared and self management may be possible.
GROUP HOME	Dependent on the individual's ability and desires and the provider and staffing values will impact how people are supported and their skills and independence is encouraged.	 Rostered support, often on a 24 hour per day basis to provide personal care and support. Allied health care and clinical staff may be employed within the support organisation. Depending on the needs of the individuals in the house, night support – may be a sleep shift or an awake shift. 	 Even though funding is allocated to each person, it is often difficult to arrange a self managed service when there several people sharing resources. How much involvement each person has in overseeing their service will depend on the individual's desire and the provider's ability to personalise service delivery.

	Safeguards re staff/ housemate selection.	Safeguards re living arrangement	
INDEPENDENT	 A screening process and police checks take place with people who will provide support. If a housemate will be moving in, a robust matching process is key to the success of this option. 	 Depending on the living arrangement and the supports required by each individual, will depend on the level and type of safeguards needed. Examples may include an on call arrangement, use of technology support, circles of support. A careful recruitment and matching process (between the person and their support) occurs to give every chance for a successful arrangement. The individual is often involved in selecting their carers. The managing provider ensures regular contact with the person and their supporters. 	
SHARED LIVING (individuals home)	 A screening process and police checks take place with people who will provide support. A robust matching process with the key carer is key to the success of this option. 	 If the person does not want the lease in their own name, the lease of a rental property can often be held by an provider on behalf of the individual with funding if the individual chooses. A careful recruitment and matching process (between the person and their support) occurs to give every chance for a successful arrangement. The individual is often involved in selecting their carers. The managing provider ensures regular contact with the person and their supporters. 	
SHARED LIVING (carer's home)	 A screening process and police checks take place before an individual moves into a carer's home. A robust matching process with the key carer is key to the success of this option. 	 A careful recruitment and matching process (between the person and their support) occurs to give every chance for a successful arrangement. The individual is often involved in selecting their carers. Shared interests of the housemates is usually a key area of selection. The managing provider ensures regular contact with the person and their supporters. 	
CLUSTER ACCOMMODATION	 Providers are expected to undertake police screenings of staff and ensure that adequate training is put in place for each staff member. Some providers stipulate that a First Aid certificate and a Certificate III in Disability are minimum requirements for new staff. If a person is sharing a unit, during the planning process, matching of housemates is usually undertaken where individuals support needs are considered with the skills of staff. 	 Depending on the accommodation it may be owned by the individual (eg owner of a unit) or the provider (eg a village or complex of units or villas), leased though a community housing provider or directly through the Department of Housing. In some cases the support provider may also be the housing provider. Further safeguards are dependent on the provider and arrangement but may include being part of a neighbourhood network. 	
GROUP HOME	 Providers are expected to undertake police screenings of staff and ensure that adequate training is put in place for each staff member. Some providers stipulate that a First Aid certificate and a Certificate III in Disability are minimum requirements for new and existing staff. During the planning process, matching of housemates is usually undertaken where individual's support needs are considered with the needs of the other residents in the house and the skills of staff. Some providers will also consult family and carers of the housemates already living in the house regarding compatibility of potential new housemates. 	 Houses are in local communities. Natural relationships with community are expected. The house is often leased though a community housing provider or directly through the Department of Housing. In some cases the support provider may also be the housing provider. Further safeguards are dependent on the provider. 	

	Planning process	Cautions	Benefits
INDEPENDENT	This is a highly individualised approach and each individual will need to contribute to the planning process and make their desires known to the provider to enable a successful accommodation option.	 If not well set up and if the individual is not well linked into community, there is a risk of loneliness. Until community support and natural supports are established, there may be a heavy reliance on paid support. If connections are not made with the local community there is the risk that the person will be in the community but not part of the community. This model usually relies on some support from family, carers and friends to provide in kind support. 	 Highly individualised and totally based on the persons goals and needs. Highly flexible and responsive to changes in needs.
SHARED LIVING (individuals home)	This is a highly individualised approach and each individual will need to contribute to the planning process and make their desires known to the provider to enable a successful accommodation option.	 The matching process is critical to the success of this option. Clear expectations need to be established by the person and the supporters. Clear communication is needed to ensure that misunderstandings are limited on both sides. If the person is not well connected in the community and there is not a natural connection with the supporters, the person is at risk of becoming isolated. Until community support and natural supports are established, there may be a heavy reliance on paid support. 	 Companionship. Opportunity to make new friends in an expanded shared personal network. Support is targeted to the individual's needs. This model is owned by the individual and is tied to their goals and desires.
SHARED LIVING (carer's home)	This is a highly individualised approach and each individual will need to contribute to the planning process and make their desires known to the provider to enable a successful accommodation option.	 The matching process is critical to the success of this option. Clear expectations need to be established by the person and the supporters. Clear communication is needed to ensure that misunderstandings are limited on both sides. If the person is not well connected in the community and there is not a natural connection with the supporters, the person is at risk of becoming isolated. 	 Companionship. Opportunity to make new friends in an expanded shared personal network. Support is targeted to the individual's needs. The person often forms part of the family and is included in household activities.
CLUSTER	 Each provider has a planning process. Some providers use a person centred planning approach It is expected that inline with new Disability Services Commission shift to outcome reporting that planning is undertaken with each individual at least annually. 	 If the person is living alone and is not well linked into their community, there may be a risk of loneliness. If the person lives in a village arrangement, there can be the risk of being in community but not part of the community. If the person is sharing support with others in the same complex or house, their needs may need to wait being attended to as their housemates are being supported. 	 Depending on an individual's desire for independence and ability, this support may work well to enhance their skills, friendship networks and independence. Opportunity to make real friendships and link into the community. Resources can sometimes be pooled to maximise the funding eg specialist support.
GROUP HOME	 Each provider has a planning process. Some providers use a person centred planning approach. It is expected that inline with new Disability Services Commission shift to outcome reporting that planning is undertaken with each individual at least annually. 	 Generally individuals need to compromise some elements to live in a share setting. If housemates do not get along, it can be a lengthy process to move houses. If work is not done with the local community there is the risk that the house will be in the community but not part of the community. As in all share situations, communal resources need to be shared eg the TV in the lounge room, the oven, bathrooms, transport etc so compromise is often needed. 	 There is opportunity to make real friendships with housemates. The sharing of resources can mean that sometimes people can access a level of care that supports their needs eg if a person has significant medical support needs. Support staff are trained to assist people to meet their individual goals and to assist residents to realise their independence as much as possible. Staff are usually there on a 24/7 basis to provide support.



Questions

Below are some example questions you may like to think about asking the provider you are speaking with, to help you make a decision about which provider to choose.

There are planning guides available that go into more detail about questions you may like to ask and the process of choosing a provider. See the Resource section for more information.



About the provider

- What are the values of the provider?
- Has the provider had to improve the accommodation support as the result of a Disability Service Commission Quality Evaluation?
- What is the management structure especially the accommodation support side of the provider?
- How many houses in total does the provider intend on taking on during the transition?

About the accommodation support

- How long has the provider been providing accommodation support to people with a disability?
- What accommodation supports/approaches/strategies does the provider offer?
- Does the provider offer the whole range of accommodation models in case I change my mind about how I want to live and be supported in the future?
- What safeguards does the provider offer?
- How will the provider meet my cultural needs?
- What locations does the provider offer support in?
- How are support staff selected?
- What screening processes are undertaken with potential support staff?
 (eg police checks)
- What level of training is expected to be held by support staff? (eg first aid certificate)
- What training is offered to support staff?
- Can I be involved in the selection of support staff?
- If I have not been involved in choosing new staff, how will they be introduced to me?
- What are the staffing levels in the house?
- Are there clear expectations for each staff on shift?
- Has the provider supported people to move between different models of support?
- How often do support staff leave the provider?
- How are vacancies in the home allocated?
- How long is the trial process for a new person moving in?
- Does the provider support the Positive Behaviour Framework?
- Does the provider use the Voluntary Code of Practice to reduce restrictive practices?
- What skills development is available?

Planning my service

- How does the provider undertake planning for my needs and goals?
- How often does planning happen?
- Who can be involved in my planning?
- What happens if my needs change?
- How is my plan communicated to my family and carers?

How my support is delivered

- How are support staff going to support me?
- Will it be different on weekends and public holidays?
- How can I expect to be treated by support staff?
- How many people are expected to live with me?
- What if I am sick and can not go out to my usual activity or work what will happen?
- How will my medication be managed?
- How will my taste in food be managed? What are some meals I can expect to eat?
- Who do I talk to if I want to change support staff?
- What will the impact on my service be if I want to change support staff?
- If I live I live by myself or do not have staff with me all the time and have an urgent request for support on the weekend or outside of business hours, who would I call and what support can I expect?
- Who would my support staff report to?
- How is information about me delivered to staff starting a new shift?
- What can I expect my support staff to assist with?
- How will my holidays happen?
- When my family and carers visit me is there a process they need to follow?
- If I go to hospital, what is the process?
- How will my family and carers be updated?

Managing my service

- Does the provider offer shared or self management?
- How much will my plan cost?
- How are costs worked out?
- Does the provider expect to use some of my Disability Support Pension?
- How does the provider split up my accommodation support funding?
- How are food, utilities and rent worked out?
- How are special costs like medication in a webster pack or continence equipment worked out?
- How will any special equipment I need be paid for?
- Will my mobility allowance be used to pay for transport?
- What costs are involved in the management of my service?
- If I am not happy with your service, who would I talk to and what will happen my service?



How are costs

worked out?

Resources

Along with this booklet, the following resources may assist you to explore accommodation options.

Individual Supported Living Manual

Professor Errol Cocks, Monique Williamson, Dr Stian H Thoresen:
© Copyright 2011 All Rights Reserved Centre for Research into Disability and
Society, School of Occupational Therapy and Social Work

http://otsw.curtin.edu.au/local/docs/ISL_Manual_2011.pdf

A guide to developing personalised residential supports (PRS) for adults with developmental disabilities and their families. Errol Cocks, Ross Boaden; The Centre for Research into Disability and Society, Curtin Health Innovation Research Institute, School of Occupational Therapy and Social Work, Curtin University of Technology. Produced by the Personalised Residential Supports Project June 2009 http://healthsciences.curtin.edu.au/local/docs/PRS_Guide_to_decision-making.pdf

Housing Support for Younger People with Disabilities Transitioning to Independent Living: Elements for Success in the Design and Implementation of DisabilityCare Australia, A National Disability Insurance Scheme. Authors: Dr. George Taleporos, David Craig, Mark Brown, Cath McNamara and Sarah Forbes. Youth Disability Advocacy Service (YDAS) published June 2013.http://www.ndis.gov.au/sites/default/files/documents/YDAS_PDF_Project.pdf

My Life, Your Life, Our Life; A Guide for Flat-mates, Homesharers & Co-Residents http://waindividualisedservices.org.au/wp-content/uploads/2014/05/WAIS0002_My-Life-Your-Life-Our-Life-3.pdf

WA Individualised Services (WAiS)

Mission is to Influence and develop innovative, individualised, self directed, supports and services. http://waindividualisedservices.org.au/

Developmental Disability WA

As the peak advocacy organisation in WA for people with intellectual and other developmental disability and their families. http://ddc.org.au/our-story/

Supported Living

http://www.supportedliving.org.au/

Resourcing Families

http://www.resourcingfamilies.org.au/fact-sheets-resources/



Thanks must go to the following people and organisations for their input:

- Disability Services Commission Transition Team
- Leanne Pearman CEO WA's Individualised Services
- Nigel and Tom
- Paul and Jenny
- Robert and Claire
- Vanessa and Kathy

This booklet has been compiled by Therapy Focus with grant funding from the Disability Services Commission.



If you have any feedback regarding the content of this resource, please email the Disability Services

Commission

dsc@dsc.wa.gov.au

