Autism Commission

Housing Sub-Committee meeting Minutes

January 16, 2019 11:00am–1:00pm

500 Harrison Avenue – Boston, MA

Members present: Dan Burke (co-chair), Bronia Clifton (co-chair), Carolyn Kain, Chris Supple, Dianne Lescinskas, Victor Hernandez, Janet George, Cathy Boyle, Nan Leonard and Lea Hill

Members accessing the meeting remotely: Joseph Vallely

Dan Burke called the meeting to order and welcomed the members to the meeting of this Sub-Committee. Mr. Burke stated that the meeting was subject to the Open Meeting Law and that the Sub-Committee members present would need to vote to approve the remote participation of some members because of their geographic location, whenever any members were utilizing video and/or tele-conferencing. Remote access was approved unanimously. The minutes from the last meeting in October were reviewed, and with a few minor changes, approved unanimously. Dan also welcomed Bronia Clifton from DHCD, who will be taking Ayana Gonzalez’s position as the co-chair for the Housing subcommittee of the Autism Commission.

**Discuss and Develop Plans for Committee Goals**

*Goal #11 – Design Guidelines*

Bronia Clifton provided subcommittee members with two documents – 1.) Architectural drawing of Cape Cod Village Group Residence in Orleans, MA and, 2.) A Summary of Program Design Requirements for DDS Community Residences. She discussed that this project is a first for DDS for this population (ASD) and it is a duplex designed with 16 units. They are in the early stages of understanding best practices in group homes for ASD and asked this subcommittee to review and give feedback.

* Bedrooms are large and positioned to reduce social interactions and help minimize conflicts
* Everything is on one level and universally designed
* Closets have nice design features that include shelving for clothing (clients can see the clothing and could opt to eliminate a dresser that could potentially get knocked over)
* Floor drains in bathrooms but not sure if there are shut off valves in clear site
* The kitchen has a pantry which could be helpful if someone has food restrictions
* There is a basement and that could make an additional common space (depending on height of ceilings)
* Not sure if there is special soundproofing or reinforced walls – did not see them in the specs. but the specs. included solid core doors
* The shared bathrooms are a little far from the bedrooms
* There is not a sprinkler system
* There is a vaulted ceiling in the dining room that could possibly negatively impact the acoustics and could be a problem for individuals that jump – 10 ft. ceilings would be better
* Questions arose on the design of the outside of the building (unknown) and if there was a walking loop and a fence.
* Some individuals may drive and have a car – was that considered in the design – is there a garage
* Technology will play an important part in new designs – to control lighting, heat etc. Also, the use of technology to support individuals in their home (DDS funding is limited for some individuals and the technology, used for supportive living, could be cost effective)

Further discussion on design guidelines focused on considering multiple levels of designs. Start with all being universally designed and then have different units with different types of design features to meet the needs of individuals with more severe behavior issues. The square footage of each room could be the same but the features will look different.

766 schools were discussed and there are questions as to what they are doing for their residential students and design of living space. Carolyn Kain will reach out to Melmark, as they have a relatively new home for their students. Nan will reach out to John Randall and Lauren Selater on this topic as well.

Mr. Supple discussed the design of Higashi School – dorm style living with 60 students and 15 staff. He feels that this is a good model for some young adults (serving more severely impacted individuals) and there is a “spirit of community with the staff”. NECC has a similar model and staff ratio and training is key to the success

*Goal #12 - Outreach and Data for Homeless Population*

Ms. Kain discussed her outreach to Linn Torto and the idea of working a pilot program – possibly Pine Street Inn for the adults and Bridge Over Troubled Waters for children. Ms. Kain reviewed a report from Ms. Torto and it did not mention ASD and homelessness. The Autism Commission office has already met with individuals from Pine Street Inn and proposed training for staff – Ms. Kain will reconnect with them. She has also connected with Bridge Over Troubled Waters.

* Ms. Boyle has connected with Health Care for the Homeless – they do more outreach and see people who are on the street and not in shelters
* HUD questionnaire – Ms. Kain will set up a meeting to ask about including questions on ASD and disability.
* The Statewide Point In Time homeless, Victor Hernandez stated that they were doing the annual count of the homeless this weekend so we would need to ask about the HUN questionnaire for next year.
* ILC’s – reach out to MRC to ask if they collect data on ASD and homelessness – and if not, would they have the capacity to do so
* Ms. Kain discussed that this is the beginning stages of collecting data and looking at barriers to housing for individuals and challenges of homelessness – we need to first connect with agencies and then start to gather information on this population
* Mr. Sarkissian discussed looking at the list of barriers now and then the solutions on how individuals receive help
* Christine Barber (house) and Bruce Tarr (senate)  are sponsoring a housing bill with some language on accessory units and zoning issues

*Goal #13 – DDS and collecting data on the number of individuals who have been admitted to the Emergency Stabilization Unit at Hogan from Group Homes*

DDS reported that Hogan is not able to collect data on whether any support services or facility modifications could have prevented the reason for admission. It was asked if the language on the recommendation could be changed to include a “discharge plan” – this information could include; How long have they been in Hogan – this may be helpful to then go back and ask further questions. The subcommittee agreed to revise the recommendation to include “length of stay” and delete the portion regarding whether or not anything could have been done to avoid the admittance.

* There was discussion on families that have reported individuals being in Hogan for more than 18 months and that there was a refusal to add modifications to the group home so it made it difficult for the individual to go back to the group home (staff ratio was one requested modification)
* Ms. Kain told subcommittee members that DDS has hired an Ombudsman and if families have individual have concerns on this issue and others, they can reach out directly the DDS ombudsman.

Victor Hernandez gave updates on issues affected by the government shutdown. Section 8 – the DTA had frontloaded funding that allowed two months’ worth upfront - some issues that may occur with payment will be dealt with by the individual Housing Authority.

811 – New development and rental – these could be delayed. DHCD has some reserve to cover one month but were told they may not get reimbursed.

The next meeting of this subcommittee will be on March 20th at 11:00 a.m. – 1:00 p.m.