



ALTERNATIVE RESIDENTIAL OPTIONS

PPP's RESPONSE TO FDDC's POWER POINT PRESENTATION AND POSITION ON INTENTIONAL COMMUNITIES

Re: Power Point Presentation:

1. Agreement on the characteristics of a Planned Residential Community

PPP: This raises an alert to FDDC's prescription for a residential community. While standards of excellence should be monitored by APD and other licensing entities as well as Family Care Councils and appointed government agencies, individual initiative and freedom to "define" one's own choice of environment is fundamental to the American way of life. A government-supported agency should not interfere with that right. Florida zoning regulations encourage Planned Unit Developments (PUD's) subject to the approval of local zoning. This provision must include our special needs population. Any other position contradicts FDDC's stated mission to "promote initiative and choice in daily living."

2. Should persons have a choice to live in a community where only persons with developmental disabilities reside?

PPP: Of course they should have such a choice. It should not be the function of the FDDC to question whether people with developmental disabilities should have a choice of the type of community in which they would like to reside. This question contradicts the very basic tenet of personal choice regarding services and supports that FDDC espouses.

3. Should a percentage of integration be required?

PPP: A quota system is discriminatory. If a planned residential community (intentional, co-housing, assisted living facility, gated community, 55+, etc.) is designed to serve people with special needs, it should not be predicated on a requirement that the general public must be a part of that community. Additionally, a planned residential community designed to meet the special needs of persons with developmental disabilities would realistically not attract the general public, whose NIMBY mentality has traditionally rejected association with "those people." If the objective is simply affordable housing, it would expose the most vulnerable special needs citizens to abuse by those who would find them easy prey.

4. FDDC wants to find a way to:

- work constructively with proponents of Planned Residential Communities,
- find ways to work with all stakeholders to expand residential options.

PPP: We suggest that this can be achieved in the following ways:

- Support legislation to exempt community residential homes (group homes) from the Thousand Foot Rule, F.S 419.001.
- Develop consensus to respect flexibility of design.
- Encourage Planned Unit Developments which offer innovative design for creative opportunities and supports: education, training and employment within as well as outside the PUD.
- Avoid rules which favor "independence" at the expense of more dependent people.
- Support CHOICE: Allow people to choose their own lifestyle, supports and providers with opportunity for a full range of services

Re: Intentional Communities

PPP recognizes the attempt by the FDDC to deny traditional Med Waiver services based on the location in which they are provided. Many types of accommodations have to be considered for the wide range of disabilities. In attempting to limit access to services such as training and dining, FDDC is doing a disservice to the more seriously disabled who cannot prepare their own meals or enjoy the companionship of friends in "family style."

The inherent discrimination becomes even more apparent when we examine the loneliness of people in Supported Living Arrangements who eat breakfast, lunch and dinner alone. The many diverse intentional communities that we have investigated and which were represented in the Work Group such as Camphill Communities, Lamb's Farm and Bishop Grady Villas, among others, with their rich opportunities for developing social connections, work skills, training, and employment for profit as well as participation in the support of their own communities, have been ignored.

With a rigid position regarding life style, activities of daily living and educational opportunities, FDDC would deny Med Waiver funds ostensibly to prevent segregation and serve the cause of "community inclusion."

Segregation is a false argument since choice is the principle at stake. Ironically, the FDDC supports the kind of segregation mandated by the 1,000 ft. rule in F.S. 419.001.

Inclusion should be a goal only if people can choose where they want to be included, rather than where they are forced to be included.

The broader view of "community" by FDDC's own definition is social connection, not location.

FDDC is not protecting the values of CMS, by setting policies which create obstacles to grassroots initiatives.

In conclusion, the attempt to direct the flow of Med Waiver funding to a pre-approved setting or location is misuse of Federal funding intended to extend the notions of community and freedom that other citizens enjoy.

Lila Klausman, Pres.
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