

## **ACCESSIBLE SPACE, INC. (ASI)**

### **ORGANIZATIONAL HISTORY AND MAJOR PROGRAMS**

The mission of Accessible Space, Inc. (ASI) is to provide “housing with care” for persons with physical disabilities and brain injuries, as well as seniors and veterans. This mission is accomplished through the development, management and ownership of accessible, affordable housing, assisted living and rehabilitation services.

ASI is a Minnesota-based, 501(c)(3) nonprofit organization incorporated in 1978. ASI has grown from serving 30 adults with mobility impairments in five settings to providing accessible, affordable housing, property management, rehabilitation and supportive living services to 4,068 very low-income individuals in 26 states. Services are provided in 162 homes and apartment buildings in the Minnesota and 25 other states.

ASI currently provides accessible, affordable housing and a broad range of assisted living and supportive care services to very low-income adults with severe physical disabilities and brain injuries. ASI serves individuals with spinal cord injuries resulting in quadriplegia and paraplegia, traumatic brain injury, amputation, multiple sclerosis, cerebral palsy, spina bifida, congenital deformities, stroke, ataxia, post-polio, muscular dystrophy and other orthopedic, neurological and muscular disorders. Annually ASI serves over 4,200 consumers and provides extended services plus referrals to over 4,500 individuals and family members.

ASI is unique nationally in that it offers very low-income adults with traumatic brain injuries, mobility impairments and physical disabilities a viable alternative to institutionalization or total independent living. Physical, economic, vocational and social independence, self-reliance and integration are encouraged as part of ASI's programs. Residents who are capable of rational decision-making are included in the hiring and supervision of over 250 Resident Assistants employed by ASI in Minnesota and Nevada. By offering resident-directed services and independent housing, ASI promotes self-reliance and personal growth for adults with brain injuries, mobility impairments and physical disabilities.

The core of ASI's philosophy is self-reliance. ASI believes its residents with mobility impairments and physical disabilities are best able to judge, direct and manage the services they need. Individuals with brain injuries participating in ASI's Assisted Living Program, Community Residential Services and Nevada Community Enrichment Programs are supported in their efforts to achieve greater self-sufficiency and independence.

ASI exists as a cost-effective alternative to long-term institutional care for adults with traumatic brain injuries, mobility impairments and physical disabilities, as well as veterans, seniors and frail elderly, who require supportive care services. The philosophy of ASI is based on the belief that many adults with traumatic brain injuries, mobility impairments and physical disabilities are capable of participating in the management of the supportive care services they require. This commitment to self-reliance is demonstrated through ASI's nationally recognized resident-driven management system, empowering ASI residents in the daily management of the services provided in their homes and apartments. The commitment to self-reliance is also evidenced by the operation of ASI's Assisted Living and Independent Living programs in integrated housing to adults who have achieved more significant levels of self-reliance and independence.

ASI has 14 assisted living settings which are located in Blaine, Bloomington, Brooklyn Park, Champlin, Coon Rapids, Duluth, Grand Rapids, Minneapolis, Mounds View, New Brighton, Rochester, Roseville and Saint Paul, Minnesota. All 14 sites provide supportive care services on a 24/7/365 basis to very low-income adults with physical disabilities and/or traumatic brain injuries. ASI has six (6) comprehensive care licenses to provide Assisted Living Services in Minnesota.

Using the State of Minnesota Department of Health home care licensing standards, the Department of Human Services (DHS) current PCA-to-Waiver initiative, ASI transitioned its innovative shared service delivery system that it pioneered in 1980 to an assisted living model in 2007. ASI's "Assisted Living Plus Project" represents a new model of community-based services that incorporates ASI's nationally-recognized, shared service delivery system with the current assisted living model supported by the State of Minnesota's Personal Care Assistant (PCA) to Waiver Initiative.

This represented the first application of Minnesota's assisted living model serving very low-income adults and seniors with physical disabilities and/or brain injuries. Within this unique assisted living model, ASI continues to provide 24 hour access to supportive care services that includes personal care, independent living skill training, medication assistance, socialization, monitoring, weekly housekeeping, laundry services and transportation assistance to all interested ASI residents.

ASI residents with mobility impairments and/or brain injuries or similar cognitive disabilities have access to on-site Resident Assistant staff 24 hours per day. Services are directed by the resident and may include service coordination, help with activities of daily living, medication set up and administration, housekeeping, laundry, meal preparation, essential shopping, activities and behavior management. Residents with brain injuries or similar cognitive disabilities have access to additional supportive services.

Residents choosing Assisted Living/Customized Living Service enjoy increased independence and greater flexibility utilizing staff availability on a 24/7/365 basis to assist with scheduled and intermittent cares. The services are supervised by a Site Nurse who works with the resident to develop an individualized care plan and coordinated by a Site Supervisor who works with the resident to implement the care plan.

Applicant eligibility for services is based on the admission criteria, suitability for the services offered, and qualification for Assisted Living/Customized Living Service. Additionally, applicants must meet low-income guidelines established by the U. S. Department of Housing and Urban Development (HUD). Qualifying households pay 30% of their adjusted gross monthly income for rent. Funding for payment of service is available to eligible individuals through Medicaid waivers, including Community Access for Disability Inclusion (CADI) Waiver, Brain Injury (BI) Waivers or Elderly Waiver (EW). Private payment arrangements may also be made directly with ASI.

Seventy-five percent (75%) of previous residents in ASI's two largest programs have moved to living situations allowing greater independence. ASI has received funding for 162 accessible, affordable housing developments totaling 4,068 units in 31 states and over \$599 million in funds to construct the developments and maintain their affordability for very low-income seniors and adults with disabilities. These developments are funded via HUD 811/202 Programs, Low-Income Housing Tax Credits (LIHTC) and local programs. ASI received more Section 811 Project funding by HUD than any other nonprofit sponsor in the nation during the program's operation between 1991 and 2011 when it had 2,279 units of accessible, affordable apartments funded through 111 developments in 30 states.

ASI service locations in Minnesota and Nevada currently provide supportive services in 35 locations to 294 individuals. ASI's Minnesota service locations provide 24/7/365 supportive care to 124 individuals in 20 locations. In Minnesota, ASI also provides Independent Living Services to adults with traumatic or acquired brain injuries. These services are provided as necessary and are not on a 24/7/365 basis. A total of 66 persons receive Independent Living Services with 20 of these residents also receiving ASI's Assisted Living Services.

ASI's Nevada Supportive Housing Services (NSHS) provides services in both Northern and Southern Nevada. In Northern Nevada 40 persons in their own residences receive supportive living services. In Southern Nevada (Las Vegas/Clark County) 86 persons in ten locations receive supportive living services. Southern Nevada has a mix of ASI residents with those receiving services in their own residence.

The assisted living model of service for ASI's very low-income residents with physical disabilities, as well as seniors, has allowed the organization to provide the most cost-effective services possible to its residents for the longest period of time. ASI's desire and commitment to its residents to have significant input in the determination and direction of the care they receive emphasizes the presumption that residents living

independently in community-based settings are competent to make care decisions. Embracing resident empowerment and input into decisions regarding their care, enhances the efficacy of the assisted living services and mirrors the current trend in national health care to create “self-directed” models.

### **Assisted Living Services**

ASI serves two populations of very low-income adults with disabilities. Though the population served are in two categories, ASI’s population can often exhibit impairments in both Assisted Living Service focus areas.

Persons with mobility impairments/physical disabilities are the first population served. The effects of extreme mobility impairment generally result in the need of some form of daily care for the remainder of these individuals’ lives. Based on the personal needs of individuals with mobility impairments are met with a level of dignity and self-respect. ASI provides accessible, subsidized housing with private bedrooms and shared common living areas, accessible subsidized apartments, personal assistance and housekeeping/chore services, resident directed services at each location, access to transportation services and information/ referral. ASI’s Assisted Living Services Program has provided integrated housing throughout the Twin Cities Metropolitan area since 1980 when it opened its first five cooperative housing sites in Minneapolis-Saint Paul, Minnesota as “Mobility Impaired Services (MIS).” ASI has also provided accessible, affordable housing and supportive services for very low-income adults with disabilities in the Las Vegas Metropolitan Area and the State of Nevada since 1994.

The second population are persons with traumatic or acquired brain injuries. Services are provided to very low-income adults dealing with the effects of a brain injury. These individuals are cognitively and, in some cases, physically impaired due to accidents or sports/work-related injuries. Cognitive limitations prevent a return to a fully independent lifestyle for these individuals and special alternative supports are necessary. The Assisted Living Services Program provides subsidized apartment housing, supervision, personal assistance and housekeeping services, independent living skills training, case management, information/referral, and access to transportation services. Many of the sites where the Assisted Living Services Program operates are integrated buildings that include families and elderly individuals, as well as ASI consumers. Operating Assisted Living Services in integrated buildings allows ASI to further assist its consumers with brain injuries in returning to an independent lifestyle, achieving higher levels of self-sufficiency and becoming more socially involved in the community.

### **Independent Living Skills Services**

ASI also provides an Independent Living Skills (ILS) component. ILS was developed for adults with traumatic brain injuries who have progressed to higher functional levels and who, as a result, require less than 24-hour supportive care services. ASI has offered ILS to consumers since 1987, offering services to high-functioning adults with brain injuries who may not require the 24-hour access to services provided in the Assisted Living

Services Program. These individuals live in their own integrated housing and receive case management support, assistance with shelter needs, training in independent and daily living responsibilities, vocational guidance and community support. As stated earlier, since independent living services are provided in housing of the consumer's choice, many very low-income clients receive services in integrated housing.

### **Community Residential Services**

ASI has extended the continuum of care established by the Assisted Living Services and Independent Living Programs through Community Residential Services (CRS) which it began in 1990 as the Shared Living Program. The CRS Program serves individuals with brain injuries with significant cognitive disabilities and concurrent behavioral issues which represent barriers to living in settings that allow for greater independence and community integration. The CRS Program operates six (6) Licensed Corporate Adult Foster Care Homes in the Twin Cities Metropolitan Area, utilizing housing that is fully integrated into the community, which allows residents to take advantage of the resources available through the community.

### **Independent Apartments**

ASI provides property management services and integrated, independent apartment living through 120 nonprofit subsidiaries in 25 states. Apartments serving very low-income adults with physical disabilities, as well as seniors, are available in ASI's developments in Alabama, Arkansas, Arizona, California, Colorado, Hawaii, Idaho, Illinois, Kansas, Minnesota, Missouri, Montana, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Tennessee, Texas, Virginia, Washington, Wisconsin and Wyoming.

On-site services provided by ASI in these apartments are limited to the standard property management services that support integrated independent apartment living for seniors, veterans and very low-income adults with physical disabilities and/or brain injuries. The availability of these affordable units with project-based subsidies has been an important asset in the fight to prevent homelessness for vulnerable populations, in this case very low-income adults with physical disabilities and/or brain injuries, as well as seniors and veterans.

## **Nevada Community Enrichment Program, Nevada Supportive Housing Services and Northern Nevada Supportive Housing Services**

The Nevada Community Enrichment Program (NCEP) represents ASI's response to the need for community-based residential and day treatment services for individuals with traumatic brain injuries in Nevada. This program serves individuals from Las Vegas and Greater Nevada at The Loux Center, its program site in Las Vegas. The Loux Center is located on the campus of the College of Southern Nevada on West Charleston Boulevard. NCEP opened on May 2, 1992 and relocated its services to The Loux Center in 2004.

A second location, on the southeast side of Las Vegas, is NCEP's Spencer Street Campus which is currently under construction. The Spencer Street Campus will have 40 single room occupancy units offering 24/7/365 services, as well as rehabilitation and office space. The first phase of construction is anticipated to be completed in December 2020. The second phase should be completed in January 2021.

Utilizing a milieu approach to therapies and services for individuals with traumatic brain injuries, participants are provided with a range of activities and services that are designed to promote their return to the community as active independent participants. Additional services provided to residents include assistive technology services, an assistive technology loan program, chemical dependency services, independent living services, and information/referral.

NCEP's residential sites, Hastings House, Casa Norte and Stepping Stone Apartments are fully integrated into the community allowing residents full access to community resources and opportunities.

Nevada Supportive Housing Services (NSHS) and Northern Nevada Supportive Housing Services (NNSHS) are supervised by the Director of NCEP. These services provide Personal Care Attendant (PCA) Services, Homemaker and Independent Living Services to persons with mobility impairments/physical disabilities and acquired or traumatic brain injuries. Southern Nevada sites are located in Las Vegas/Clark County. Northern Nevada sites are located in Carson City and Reno.

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