



CLP Urban Village Concept Plan

August 2009

The story so far ...

The ACT Community Living Project Inc (CLP) is a voluntary organization, comprised of parents and community members, who are seeking supported accommodation and life opportunity solutions for young people with significant intellectual and other disabilities, including autism.

In early 2008 a group of parents met to discuss their frustration about the lack of assistance available to them as they care for these young people at home and the lack of any supported accommodation options for their children in the future when families can no longer care for them - particularly as parents are ageing.

CLP was formed to find positive solutions to address these problems and after much consideration it was decided an environment similar to the best practice retirement villages that many older Australians currently enjoy could be ideal for this group of people with a disability.

In July 2008, over 100 people attended a public meeting organised by CLP to gauge the need and level of public support for the proposal. The meeting endorsed the plan to work towards establishing an intentional community where young people with a disability could live with respect, support, safety and loving care, and where families and other people with or without disabilities could share activities and access the services available there.

A “think tank” of parents and key community representatives was formed under the guidance of **Annette Ellis MP**, Member for Canberra, to provide support and assistance with future planning of the concept. From this initial group a Steering Committee was formed which has met regularly over the past 12 months.

This Concept Plan for an Urban Village is a result of the ongoing work of the Steering Committee, a survey conducted in early 2009 which gathered definitive information about the families’ needs and aspirations, and research completed by a number of CLP members.



We hope that the CLP Urban Village concept will be embraced by government as an exciting and innovative project that can be funded as a pilot in Canberra, and ultimately rolled out into communities elsewhere, providing further choices and support for people with disabilities and their carers.

Esther Woodbury
President
ACT Community Living Project Inc

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Behind the Concept ...



The Inspiration behind the concept is not based on any religious or ideological group. It is inspired by the **experiences of families and friends living with and loving people with severe intellectual and other disabilities.**

The Aim of the CLP Urban Village is to provide supported accommodation for people with significant intellectual and other disabilities, in a village-style setting in an urban location in Canberra. It will be a community environment which can build upon the natural supports already established with family and friends, **facilitating personal growth and independence**, including work programs and lifestyle support.

The People represented by CLP will always need support to live their lives in the community. All have an intellectual disability with most **needing significant help with communication**, self care and daily living skills. The majority need **help in developing and maintaining their social networks** and few would be able to use public transport independently. Many have limited reading and writing skills and most do not have the ability to use sophisticated technology. A large number have health and/or medical problems, including seizures that require ongoing management.



The Supported Accommodation needed would depend on the abilities of the individual and the level of help and supervision they may need. This may include help with meals, cleaning, personal hygiene, safety checks, and monitoring or giving medication. In the proposed Village, the aim is to provide assistance which supplements or collaborates with what the individual is able to do for themselves, promoting as much independence as possible.



The Village concept will be a small community of about 100 people with a range of abilities and attributes (including some without significant disabilities), living in a variety of accommodation styles with a commercial centre of cafe, health care, gym and pool, in a landscaped setting, allowing residents to have easy access to the Canberra community for meaningful work opportunities, social events and everyday interactions with the wider community.

Executive Summary ...

1. Supported Accommodation

The CLP Urban Village will create a number of long term and respite supported accommodation places for people with disabilities, including those with intensive or complex needs for whom there is currently no alternative other than to be cared for at home.

The need

It is estimated that **there are over 5000 people in the ACT who are under 65 years old and who have an intellectual disability with severe to profound core limitations in one or more areas of daily living, ie. self care, mobility or communication.** (AIHW report 2008). A very small percentage of these people are currently living in designated supported accommodation, the vast majority live at home with their families providing all their care needs.

The CLP survey of families found that many were currently seeking supported accommodation, and a further number would be seeking it during the next 5 years.



CLP guiding principles

- The Village will provide a range of accommodation options to suit individual care needs - allowing for independent living through to full residential care.
- All buildings and facilities will be of environmentally sustainable, universal design, conserving energy and water, reducing waste, using healthy and sustainable materials.
- The architectural design will take into account the particular needs of people with physical and intellectual disabilities, and the physical layout will be designed to maximise this and provide a safe and secure environment for residents.

The Urban Village proposal

The Village will consist of a variety of separate buildings or residences, including hostel type units for people with high level needs which will have the capacity to provide respite care as well; a number of dwellings where people who are more independent will live with appropriate levels of care and supervision and smaller units for more independent residents including couples. In addition there will be a number of freestanding units/houses for purchase or rental by community members without disability. The design of these would be the same as in any other residential suburb.

Provision will also be made for families to “sleep over” at the Village.

Altogether the Village will have about 100 residents including people with and without disabilities, family members, carers and support staff.

2. Social Inclusion



The CLP Urban Village will **increase the number of social contacts for people with disabilities in the ACT, including residents, people who attend day programs and casual visitors with disabilities, and their carers.** The disability-sensitive design of the facilities at the Village, which will be open to the general public, will attract people from throughout Canberra and the wider Australian population who have disabilities and other frailties and their companions.

The need

Social support is important to the health and happiness of any individual. For people with disabilities, social contacts are also an important way of monitoring whether the individual is receiving adequate care and is not subject to abuse. In the most common scenario, where the person with a disability lives with a parent or other family member in the community, the social life of both the carer and care recipient depends on the carer's ability to facilitate both social lives, and this is made all the more difficult by fatigue, low morale and/or age of the carer. Fatigue and low morale are themselves exacerbated by loneliness and lack of social support, creating a vicious cycle. Social networks are also diminished according to the individual's difficulties with communicating, social skills, difficulty travelling and lack of supportive venues in which to socialise.



CLP guiding principles

- **The Village will provide a robust social network for its residents.**
- The Village will promote interaction between residents and their family and friends.
- Like any village, the CLP Village will engage with the wider community through business and culture.
- The Village will be designed in a way that non-residents can also benefit from the inclusive facilities.

The Urban Village proposal



The Village will provide residents with regular contacts with a variety of people – those who are involved in helping them with daily tasks, those who help with their personal planning, neighbours (with or without disabilities), and those who run and participate in work programs. A commercial kitchen will provide nourishing meals at which residents may share the company of their family, other residents, and staff.

The “Village Green”, hall, lounge areas and other recreational areas will provide space

for community events and opportunities to invite families and members of the general public to join residents in village life.

The public face of the Village could look like a small “commercial” strip of shops with a cafe, pool, medical centre and other facilities available to the wider community as well as residents. These facilities, as they are designed for people with mobility and intellectual disabilities, will be likely to attract other similar businesses over time, so becoming a hub for people seeking such services.

The Village will establish partnerships with **local groups who would like to share skills and experiences with the residents** (eg gardening groups, **dance groups**). There will be a chapel which, as well as providing a quiet place for spiritual support and personal reflection, will be a place for community worship and inter-faith celebrations. There will also be a hall large enough to accommodate community functions.



The Village will also provide social outreach to people with disabilities and carers in Canberra as a whole, not just residents. The Village will have a playground and become a place of networking, moral support and role-modelling for parents of children with disabilities, who face many fears and loneliness regarding the circumstances for their children.

3. Health of people with disabilities

The CLP Urban Village will facilitate health care and **healthy lifestyles for people with disabilities in the ACT**, thereby reducing health care costs and social costs in the longer term.





The need

People with an intellectual disability have significantly higher rates of morbidity and mortality than the general population. While some of the health issues are due to the individual's specific disabilities (especially when they are not receiving adequate treatment for these), other health problems arise from inadequate treatment of simple medical conditions and lack of participation

in preventative health screening. The individual may not recognise that they have a symptom of concern, may have difficulty communicating or even feeling pain or discomfort, and may have difficulty maintaining healthy routines (such as personal hygiene, and the timing of medication).

CLP guiding principles

- The Village will collaborate with each resident in monitoring his or her well-being and organising health care as needed.
- The Village will facilitate access to health care, including preventative screening.
- The level of health care given to residents must reflect the standard that the rest of the community would expect for similar medical needs.
- **The Village will promote healthy lifestyles for residents.**



The Urban Village proposal

Some health care staff will be employed in the Village, and all carers will receive first aid training. In addition, the CLP will seek to establish a business partnership for a medical centre to be located at the Village, and will assist residents in monitoring and planning their own health care.

The location of the medical centre will create an opportunity for it to develop expertise in dealing with clients with significant disabilities.

Partnerships will be developed with a range of specialist health providers to supervise the complex needs of residents and work with GPs, visiting consultants and nursing staff to provide quality and timely care. The Village will supply nutritious food, and help residents to regulate

the quantity as well as quality of their diet from day to day. Research has shown that quality food can have a dramatic impact on behaviour problems as well as promoting good health.



The Village will also adopt a positive prevention program, promoting healthy lifestyles for its residents and day-visitors, thereby helping to reduce the risk of diabetes and other chronic illnesses. Village life will create more opportunities for exercise as residents move from place to place, participate in activities and **enjoy the pool** and social events.

Health of carers

The CLP Urban Village will reduce the burden on carers, thereby improving the physical and mental health of carers.

The need

Carers have the lowest wellbeing scores for any group in Australia, being far more likely to suffer chronic health conditions and depression than the rest of the population. Without adequate support for families and the people they care for there is evidence that there is a greater incidence of family breakdown, mental illness and increasing dependence on government handouts.

CLP guiding principles

- The CLP Village seeks to integrate with, not replace or undermine, the role of family members and other carers in the lives of people with disabilities.
- The CLP recognises the important contribution made by carers, and the economic, emotional and physical toll of caring for a person with disabilities.
- The CLP Village can play a role in the life of all carers, whether by providing alternative accommodation and activities for the person with disabilities, or simply by providing a place where carers bring their care recipient for outings and form social links.



The Urban Village proposal

The Village, in providing accommodation and/or work away from home for people with significant disabilities, will allow their families and carers to have a break from the exhausting full-time care that they have undertaken for many years.

It will give carers time to get well, for families to heal and everyone to enjoy the realisation that the Village is caring for their loved ones. Access to regular, professional respite, and a suitable venue for social outings, will provide significant benefit and assistance to many families enabling them to continue their caring role with renewed energy.



4. Training and Employment

The CLP Urban Village will increase the number of training and work places available for people with disabilities in the ACT. The construction and staffing of the Village will create jobs and training opportunities for Canberrans. The provision of supported accommodation and work programs for people with disabilities may also enable some carers to re-enter the workforce.

The need

People with intellectual disabilities are much less likely than others of the same age to be in the labour force or to be working full time, with an overall rate of **only about one in five people with intellectual disabilities being in paid employment**. This need must be considered in addition to the ongoing need to create jobs for Canberrans as a whole, and the need to maintain a maximal workforce as a greater proportion of the population reaches retirement age.



CLP guiding principles

- The CLP recognises the different abilities of each person, including the ability to give companionship.
- The CLP aims to maximise the independence of people with disabilities through learning skills and having opportunities to work.

- **The CLP recognises the benefits of work** as a source of fulfilment, companionship and income for all, including people with disabilities and their carers.



The Urban Village proposal

Work programs will be organised by Village staff for residents and day visitors based on their range of abilities and interests, and their individual training needs. **Employment opportunities will be sought both within the Village and in the wider Canberra community.**

The running of the Village itself will create work in a number of areas including meal preparation, cleaning, gardening and laundry. Additional activity programs will be made available to teach new skills, and allow residents and non residents who attend day programs at the Village to **exhibit their work with pride.**





Village residents would be encouraged to seek paid employment; training or volunteer activities within the wider Canberra Community and jobs within the Village could be made available to non residents therefore maximising social interaction opportunities for all and expanding work force options for people with disability.

The construction and staffing of **the Village will create jobs for the Canberra community as a whole,** and the Village can become a locus for high quality training of care staff. Partnerships will be sought with educational or training bodies in Canberra who would like their students to have placements or training at the Village.

In many cases, the Village will free up the working week of a carer, by providing supported accommodation or a work placement for a person with disabilities, enabling the carer to recuperate and contribute to the community in other ways, according to his or her skills and aspirations.



Drawing upon other models ...

Deinstitutionalisation

The deinstitutionalisation movement took place in the last decades of the twentieth century in countries including Australia, Canada, the UK and the USA. It saw the demise of large hospital-style or impersonal supported accommodation blocks for people with disabilities in favour of dispersed community living. This shift led to some overall improvements of quality of life for residents, but the effects appear to have plateaued and there are still **large shortcomings in the quality of life for people with disabilities, especially in the areas of social networks and work opportunities.**



Dispersed community housing

There are many ways in which people with disabilities may live dispersed in the normal residential community, including living at home with a carer, sharing a home with someone with complementary needs (co-residency), living independently with drop-in support, or living in a supported group home. In some cases, new suburbs or housing blocks have been developed to provide a small fraction of the housing to a particular group of people with special needs.

Persistent problems with dispersed community homes include dependency on the individual carer or group home manager for the quality of care, lack of work and social opportunities, and lack of systems for monitoring or promoting health care.



Cluster communities

Cluster communities are communities created by providing some dispersed community housing within one area, such as a suburb, in addition to some form of social and/or work programs for the residents. Examples include some Camphill communities, some L'Arche communities, and some other providers of multiple services for people with disabilities.

These communities provide a combination of lifestyle support and accommodation support while being integrated in a normal urban environment. Unlike the CLP Urban Village, however, they **do not offer the complexity of supports needed for people with a disability who fall within the moderate to profound core limitation range that is proposed for the CLP Village.**

Purpose-built villages

The idea of building a village for the well-being or convenience of the people who live in it has been around for centuries and contemporary Australian life includes many examples of purpose-built villages including retirement villages, university campuses, ecovillages, defence force facilities, villages for mine-workers or construction workers, and holiday resort villages.

Throughout the world, there are many examples of villages which have been built specifically for people with disabilities. These include villages run by the Camphill Foundation and inspired by the philosophy of Rudolph Steiner, and other life-sharing villages including some which are run by both Christian and secular groups.

A full report on a wide range of overseas examples is included in the Report at Attachment 1.

Analysis of overseas examples

Research has found such villages to have strengths when compared with both residential campuses and dispersed community housing.

Strengths include more extensive social networks, greater satisfaction with friendships and social relationships, more support from family and friends, less exposure to crime and verbal abuse, and a longer working week than found in dispersed community homes.



In contrast to most of these examples that are in rural areas, many retirement villages have been developed within an urban setting. They are similar in some ways to the proposed CLP Village – for example, in the need to provide a variety of levels of accommodation and support, and



consideration of the security, social needs and transportation needs of the residents. In contrast, however, the CLP Urban Village aims to promote training and work opportunities and personal growth of the residents, and to provide work and social opportunities for visitors.



Conclusions

Compared with other models of supported accommodation, the CLP Urban Village has particular practical advantages for those with limited mobility and who lack the intellectual ability to steer their own lives, by combining accommodation with urban integration, family integration, work and lifestyle opportunities on a single site.

According to research, there is no objectively superior model for supported accommodation, and there is certainly no argument that the government should roll out village-style living for all people with disabilities. Evidence suggests that the most important factors in determining quality of life for people with disabilities are not the exact features of the accommodation, but the maintenance of quality management, family values and person-centred practices.



Village Design ...

Principles for the design of the Village have been developed through CLP Committee and Think Tank discussions and are summarised here.

Guiding Principles

These Community Village Guiding Principles lay the foundation of what the Village will be. The Village will be designed and managed around the diverse needs of its members, and these principles will be used to continue this vision into the future.

1. The dignity and self-worth of each person will be respected, upheld, and remain the overarching purpose of the Village.
2. The long-term health and well-being of all members is of paramount importance and is supported by providing good quality food; timely and appropriate medical and dental services; activities to promote fitness; and skilled and **appropriate support for emotional, spiritual and psychological health.**



3. There will be sufficient resources to allow flexibility in the way **residents choose to use their leisure time in ways which support their interests and encourage development towards greater independence.**
4. Meaningful, and ongoing interactions and connections with the wider community are skilfully promoted and fostered by all participants in the life of the Village.
5. A high level of family involvement is encouraged and welcome, but the Village will continue to provide the same quality of life for residents regardless of parental input and presence.

6. Residents, families and guests are supported by knowledgeable and professional staff and an administrative structure that maximises independence and promotes quality of life.
7. The Village will be a clear '**employer of choice**' for staff who value the career structure and opportunities to work in a centre of excellence, and a benchmark for other employers.



8. The Village is designed sustainably with the aim to reduce environmental impacts, and to create healthy environments.
9. Environmentally Sustainable Design needs to underpin the health and well-being of village members, and ensure the financial and social longevity of the Village itself.
10. The Village will become an 'environmental showcase' and demonstrate best practice in sustainability.



Quality Assurance ...

Several measures will be used to ensure that the Village provides a high-quality, non-institutional environment which does not disintegrate over time.

A physical environment which promotes individuality and socialising

The architecture and furnishing of the Village will be selected to promote individuality, and to promote the social life of residents. Adequate spaces will be created for residents to mix socially and to receive visitors, whether for meals, chatting in a garden, or for a family member to sleepover. These physical provisions will help ensure the original ethos of the Village is maintained over time.



Presence of non-disabled residents

A proportion of residents will not have significant disabilities. The presence of non-disabled residents provides a body of people who can act as role models and neighbours for those with disabilities, and gives those with disabilities the opportunity to live in a diverse neighbourhood. Moreover their presence will ensure that there are people with adequate communication skills to advocate for the ongoing quality of the Village.

Routine contact with several people

Residents with disabilities will have several regular contacts within the Village including their personal planner, those who support the resident with personal and domestic care, neighbours,

colleagues in work programs, and companions at meals and social events. This far exceeds the number of social contacts which many people with disabilities have, living at home with a single carer and without work activities. As well as promoting the resident's happiness, this variety of social contact is important for monitoring the quality of the person's life, and reducing the risk of abuse.





Person-centred planning

A person-centred care plan, including **measures for personal development and variety**, will be maintained and regularly reviewed for each resident with disabilities. The value of these plans will depend on the training and supervision of staff to ensure that the plans are developed with sensitivity and sincerity, and are effectively carried out.

The size of the **resident's social network and lifestyle options** at the Village will mean that the plan can be put together with a reasonable awareness of the individual's preferences, **in spite of whatever communication difficulties** he or she has.



Staff training and regular evaluations

Good staff training and management is crucial to maintaining the principles of the Village.

Partnerships will be sought with educational and training bodies who can collaborate in training staff. The Village can be evaluated regularly against criteria for services for people with disabilities

(eg World Health Organisation criteria, 2000), and using quality of life measures suitable for people with intellectual disabilities (eg CQL). Partnerships with other bodies such as educational institutions and businesses will help to maintain the professionalism and accountability of the Village.



Attachment I

CLP Urban Village

Concept Plan - Extended Report

August 2009

Aim & Definitions

The Aim of the CLP Urban Village is to provide supported accommodation for people with significant intellectual and other disabilities, in a village-style setting in an urban location in Canberra. It will be a community environment which can build upon the natural supports already established with family and friends, facilitating personal growth and independence, including work programs and lifestyle support.

Choosing the right words

Finding the right words for this kind of complex proposal is a challenging task. It is a multi-faceted proposal, concerning a spectrum of disabilities, and contains the proviso that whatever is proposed must ultimately be adjusted to suit the individual.

In choosing words, there is also the risk that the proposal will be too strongly likened to other models which use similar words. The proposal has been inspired in different ways by retirement villages, Camphill villages (described in the section *Drawing upon other models*), the deinstitutionalisation movement and community-building schemes (such as Circles of Support), but in the end we have developed a proposal which appears to be unique because it focuses on a large range of intellectual disabilities AND a combination of lifestyle issues AND a geographical and sustainable solution AND urban integration AND family integration AND social inclusion.

What is CLP?

CLP is the ACT Community Living Project Inc. It is a group of Canberran parents and carers who are investigating options for supported accommodation for their children who have significant intellectual and other disabilities. A voluntary organization, CLP is registered as an incorporated association, founded in early 2008.

What do we mean by “a village-style setting”?

“Village” here refers to a small community, (say of between 50 and 150 people), which includes a bit of every aspect of life – people with a variety of abilities and attributes (including some without significant disabilities), a variety of accommodation, gardens, meaningful work to do, social events, health care, facilities such as a shop and a gym, and many interactions with the wider world.

What do we mean by “a central urban location”?

It is important that the members of the Village are not disadvantaged in their access to family and friends, public transport, shops, medical care, or the wider community in general. Therefore the Village is proposed for a non-peripheral part of suburban Canberra.

What do we mean by “people with disabilities”?

CLP was primarily founded to develop solutions for people with intellectual disabilities. The Village is proposed for people with a moderate to severe intellectual disability, including those with autism who may or may not have any other disability.

Intellectual disabilities include a wide range of difficulties, including difficulties in learning and applying knowledge, difficulties in adjusting to changed circumstances and unfamiliar environments, and difficulties in making decisions – either major life decisions or everyday decisions such as how much food to buy or cook, or what to do if an appliance malfunctions. Almost 60% of people with intellectual disability have severe communication limitations. Even those who can function relatively well in familiar routines may still have difficulty managing emotions and relating to other people. (AIHW, 2008)

Intellectual disability often co-exists with physical disabilities or medical problems. As a result of one or more of their intellectual or physical disabilities, about 1.8% of the ACT population under 65 years, or just over 5,000 people, have an intellectual disability with severe to profound core limitations in one or more areas of daily living, ie. self care, mobility or communication. (AIHW, 2008)

The people with a disability represented by CLP will always need support to live their lives in the community. Most of them need significant help with communication, self care and daily living skills. The majority needs help in developing and maintaining their social networks and few would drive or use public transport independently. Many have limited reading and writing skills and do not have the ability to use sophisticated technology. A large number have health and/or medical problems which require ongoing management.

What do we mean by “supported accommodation”?

“Supported accommodation” means accommodation plus some degree of assistance to live in that accommodation. The exact kind of assistance given depends on the abilities of the individual, and may include such diverse tasks as providing help with meals, cleaning, personal hygiene, safety checks, and monitoring or giving medication. In the proposed village, the aim is to provide assistance which supplements or collaborates with what the individual is able to do for themselves, promoting as much independence as possible.

What do we mean by a “community environment”?

The community environment sought by the proposal is an environment of interacting with and getting to know the people who live nearby or work in the Village, having an opportunity to collaborate or just give company, and having managers who promote friendliness, respect and sharing.

Social links are important to anyone’s health and happiness, and for those with intellectual disabilities, the presence of people who understand your needs and abilities can be crucial to your safety and your ability to engage in the world.

Society has struggled to find ways to promote social contact for people with disabilities. The condensed form of social network provided by the CLP Village is proposed as a way of overcoming social obstacles such as difficulties with transport, finding like-minded people, and finding venues which offer sufficient support for people with intellectual disabilities.

Moreover, CLP believes it is important that the community within the Village includes and builds upon whatever relationships the individual has outside the Village. For example the Village needs to be built in such a way that there are spaces where visitors enjoy meeting with those they have come to visit, with the capacity for sleepovers, and visitors can participate in meals and social events at the Village.

An important part of developing social networks will be to foster relationships with neighbours in the suburb, to participate in ACT wide events and to hold functions where members of the general public can share time and experiences with people with disabilities. Social barriers can be broken down as genuine relationships develop.

What do we mean by “facilitate personal growth and independence”?

The journey of life typically includes regular changes and challenges, as an individual leaves school, develops independence, and tries a variety of jobs, homes, relationships, hobbies and holidays. For people with intellectual disabilities, however, the typical path is much more limited due to lack of sufficient supported opportunities, in spite of the individual’s capacity to learn or enjoy new experiences, and the importance of pride and variety to their well-being.

People with intellectual disabilities vary in their capacity to develop independence, to make choices about their path in life (even to conceive the idea of choice), and their ability to pursue a path which they might choose. It is proposed that at the CLP Village, the resident will be well enough known that the staff can facilitate the individual’s personal growth, promoting independence where possible, and helping to create opportunities which, it is understood, that person prefers.

What do we mean by “work programs”?

“Work programs” refers to paid or unpaid work, or training for work, conducted at the Village and other Canberra locations.

Some residents might also participate in work that is not co-ordinated by the Village, and non-residents can visit the Village to participate in work or day programs.

Work programs could include the work needed to help run the Village, such as meal preparation, cleaning, laundry and gardening, or other forms of meaningful work, having a potential market outside the Village. Work programs can be designed to provide an extension of the work skills developed by students at Canberra’s two special secondary schools – Black Mountain School and The Woden School.

What do we mean by “lifestyle support”?

“Lifestyle” refers to a wide range of patterns and preferences in one’s life, such as hobbies, leisure activities, and exercise. People with intellectual disabilities often need support to engage in these activities. With people who have difficulty making choices and/or making themselves understood, it is particularly important that the support comes from people who know the individual well and who are strongly motivated to support the person’s individuality, rights and well-being. At the CLP Village, management will be charged with the responsibility to ensure that this kind of sensitive support is maintained at the Village in all aspects of lifestyle.

Values behind the CLP Village

The inspiration

CLP is not based on any religious or ideological group. It is inspired by the experiences of living with and loving people with intellectual disabilities.

The expressed wish of families

The Village proposal is based on the expressed wish of a large number of ACT families who are currently caring for a family member with a disability. In early 2008 a group of parents met to discuss their ideas of creating an intentional living environment in which people with and without a disability could live together within the wider community in interdependent relationships. In early 2009, CLP conducted a survey of families caring for people with disabilities and found that the vast majority of the 250 respondents were interested in their child being able to living in an environment similar to the best aspects of successful retirement communities, supporting their safety, yet engaging in the wider ACT community and using facilities enjoyed by all Canberrans.

It is widely recognised in the disability and social inclusion policies of today, that it is important for disadvantaged individuals to have a choice of assistance, accommodation and lifestyles, and for their expressed wishes to be heard (eg Australia's *Social Inclusion Policy*; ACT's *Challenge 2014*). Where people with a disability are unable to make informed decisions about these overarching values their parents/guardians should express that choice on their behalf.

Drawing upon research

CLP aims to be informed by the documented needs of people with disabilities, and the pros and cons of other models for supporting people with intellectual disabilities. These are discussed in the sections on *Benefits* and *Drawing upon other models*.

Collaborating with the wider Canberra

The proposal seeks to draw upon families, business, charity and government providers to develop a collaborative model which is aware of the needs and design of Canberra as a whole.

In July 2008, CLP held a public meeting to gauge the need and level of public support for the proposal. Over 100 people attended the meeting and from there Annette Ellis, MP, proposed a number of local politicians and business leaders join her on a "Think Tank" to investigate ways of developing the project. Since then CLP has conducted numerous consultations and is continuing to seek partnerships with stakeholders.

CLP recognises the value of Canberra as a leader in social planning and a promoter of principles of environmental sustainability.

Disability and Inclusion policies

The CLP proposal is in line with Australia's *Social Inclusion Policy* and the ACT's *Vision and Values* for people with disabilities. Students at Canberra's Black Mountain School participate in a community atmosphere with skills training and personal development, but upon graduation they have the prospect of a lonely future with little chance of work or accommodation outside their parents' home.

How the CLP Village values look in detail

A detailed expression of the values of the CLP Urban Village is provided at Attachment 2: *Integrity Statement and Design Criteria*.

Choice and Intellectual Disabilities

The importance of choice and control to the well-being of the individual has been recognised by psychologists, others in the health field, and humanitarians for a long time. Not surprisingly then, the vision from the ACT's DHCS *Challenge 2014* policy is that:

"All people with disabilities achieve what they want to achieve, live how they choose to live, and are valued as full and equal members of the ACT community."

Unfortunately, many people with intellectual disabilities have difficulty making or expressing choices, due to difficulties in comprehending choices, evaluating choices, and/or discerning or communicating their own preferences. Parents and other carers of people with intellectual disabilities learn to encourage the individual to make decisions on matters where their choices are safe, adaptive and communicable, while stepping in to make more complex and riskier decisions on the individual's behalf, much as a parent would do for a child. Keeping the balance between the individual's autonomy and the leadership of the carer is a delicate matter of knowing the individual well, understanding their preferences and how they communicate these, respecting the person and valuing their autonomy, safety and well-being. One of the aims of the CLP Village is to create an environment where the individual is well known by several people, and respected and valued, so that their choices might be implemented as much as possible.

Benefits of the CLP Urban Village

In the following pages, the benefits of the CLP Village for Canberra are summarised under the following headings, along with a discussion of the needs in each area.

Supported accommodation

Social inclusion

Training and Employment

Health

■ of people with disabilities

■ of carers

Facilities for all

Profile for Canberra

Supported Accommodation

The CLP Urban Village will create more supported accommodation places for people with disabilities in the ACT, including both long-term places and respite places, and including places for those with intensive or complex needs.

It is estimated that there are over 5000 people in the ACT who are under 65 years old and who have an intellectual disability with severe to profound core limitations in one or more areas of daily living, ie. self care, mobility or communication. Yet, in 2006/07 only 318 people in the ACT accessed full-time or part-time supported accommodation services. (AIHW, 2008)

There is no register of the number of people in the ACT who would prefer to find supported accommodation outside the carer's home if suitable supported accommodation was available. It is known, however, that there is a large shortfall in the funding for supported accommodation compared with the number of applications (ACT Auditor-General's Office, 2009). The degree of unmet demand applies to both respite care and long-term accommodation. There are even substantial delays in finding places for those whose families become unable to care for them, essentially making the person homeless.

In May 2009 when the CLP Survey was collated 240 surveys had been returned, 70% being under 19 years of age. The under-representation of adults with a disability in the survey is a problem in pointing to the immediate need for supported accommodation. However, from the 240 respondents 30 families are currently seeking supported accommodation for their family member. 60% identified that the person that they care for will need supported accommodation as their child reaches adulthood. The remainder indicated that, although their child had significant disability, they are uncertain about the future because of the young age of their children.

The CLP survey results showed 85% of people needing moderate, high or one-on-one supervision and 81% would need moderate, high or one-on-one assistance in everyday living tasks. 72% of respondents indicated the person they care for would need moderate, high or one-on-one help with communication, in either making themselves understood or in understanding others.

The incidence of carers becoming unable to care for family members with disabilities is going to increase with the ageing of the population (*ACT 2020 Glimpse of the Future*). Elderly carers may become too frail to provide adequate care, or may have simultaneous responsibilities for caring for their frail partners and/or siblings, as well as the likelihood of becoming unavailable due to death. With the small size of families (*ACT 2020 Glimpse of the Future*), the person with disabilities may not have siblings ready to take on the caring role.

Even if a family member is available to provide care, there are many reasons for helping people with disabilities to live independently from their family of origin. There is substantial evidence that carers experience a greater incidence of poverty and poor mental and physical health because of their caring role (Edwards et al, 2008; Saunders, 2006). There is also enormous economic wastage in the present

system, where a carer often stays out of the workforce to provide help to their family member, who has little or no outlet outside the home and who may do less to help around the home than they are able to do. Given the opportunity to live in a supported community, many care recipients could function with a much lower care ratio than they receive in their family home, perform more tasks of daily living or other work, have more fun, and free up their carer for other meaningful and productive pursuits. Perhaps most importantly, it is often the personal wish of the carer or the care recipient to seek alternative accommodation, if suitable accommodation is available, and it is certainly desirable for them to have a choice of how to live.

Social Inclusion

The CLP Urban Village will increase the number of social contacts for people with disabilities in the ACT, including for both residents and casual visitors with disabilities, and for carers.

Social support is important to the health and happiness of any individual [Centre for Developmental Disability Studies, 2008]. For people with disabilities, social contacts are also an important way of monitoring whether the individual is receiving adequate care and is not subject to abuse.

In spite of these needs, people with disabilities typically have much smaller social networks than other people. Lemay (2009) reports that one study of people with disabilities found the average number of social contacts was 5, with a median (most common situation) of only 2 contacts. This included staff and family, and there was no significant difference between those living in an institution and those living in the normal community. Another study found a larger number of people in the social networks of people with disabilities, but 43% of the contacts were staff (Lemay, 2009). People with intellectual disabilities are much more likely to have never married compared with the general population (67% vs 39% never married) (AIHW, 2008).

In the most common scenario, where the person with a disability lives with a parent or other family member in the normal community, the social life of both the carer and care recipient depends on the carer's ability to facilitate both social lives, and this is made all the more difficult by fatigue, low morale and/or old age of the carer. Fatigue and low morale are themselves exacerbated by loneliness and lack of social support, creating a vicious cycle. Social networks are also diminished according to the individual's difficulties with communicating, social skills, difficulty travelling and lack of supportive venues in which to socialise.

In the Urban Village, residents will have regular contacts with a variety of people – those who are involved in helping them with daily tasks, those who help with their personal planning, neighbours (with or without disabilities), and those who run and participate in work programs. Meals can also be taken in a communal dining room, and regular social events will be run at the Village. Visits to and from family and friends will be encouraged.

The Village will also provide social outreach to people with disabilities and carers in Canberra as a whole, not just residents. The public face of the Village – the cafe, pool, other facilities and social events – will attract non-residents with disabilities and their carers or families, creating social opportunities for these visitors and helping them to feel less alone with their experiences. This kind of “social outreach” function of the Village could be extended to include a website, newsletter, or other services for interested non-residents. The Village as a place of socialising, networking, moral support and role-modelling may be of special value to parents of children with disabilities, who face many fears and loneliness regarding the circumstances for their children.

Training and Employment

The CLP Urban Village will increase the number of training places and work places available for people with disabilities in the ACT.

The construction and staffing of the Village will create jobs and training opportunities for Canberrans.

The provision of supported accommodation and work programs for people with disabilities will also enable some carers to re-enter the workforce.

People with intellectual disabilities are much less likely than others of the same age to be in the labour force or to be working full time, with an overall rate of only about one in five people with intellectual disabilities being in paid employment (AIHW, 2008).

Canberra has two high schools which help students with intellectual disabilities to develop skills for work, including skills in hospitality and horticulture, but when these students leave secondary school there is a severe shortage of suitable work opportunities. Approximately 36 young people with a moderate to profound intellectual disability leave high school each year in the ACT.

The Urban Village will provide a variety of work programs suitable for people with intellectual disabilities, including training to perform the work. The running of the Village itself will create work in meal preparation, cleaning, gardening and laundry. Additional work programs can be created, with the variety depending on the number of residents and non-residents involved, the kinds of small scale businesses which Canberra needs, and the kinds of business partnerships which can be formed.

In addition to the need to create work opportunities for people with disabilities, there is an ongoing need to create jobs for Canberrans as a whole, and the need to maintain a maximal workforce as a greater proportion of the population reaches retirement age (ACT 2020 Glimpse of the Future).

The construction and staffing of the Village will create jobs for the wider Canberra community, and the Village can become a locus for high quality training of care staff. Partnerships will be sought with educational or training bodies in Canberra who would like their students to have placements or training at the Village.

By providing accommodation and/or work programs to many people with disabilities, the Village will give many carers the opportunity to re-enter the workforce. This will mean less wastage of carers' workplace skills, improved incomes for these people, less isolation and more career fulfilment. A large number of non-employed carers of working age express a desire to be in paid employment (Edwards, 2008).

Health

The CLP Urban Village will facilitate health care and healthy lifestyles for people with disabilities in the ACT, thereby reducing health care costs and social costs in the longer term.

The Village will reduce the burden on carers, thereby improving the physical and mental health of carers.

Health of people with disabilities

People with an intellectual disability have significantly higher rates of morbidity and mortality than the general population (Office of the Public Advocate Qld, 2008). While some of the health issues are due to the individual's specific disabilities (especially when they are not receiving adequate treatment for these), other health problems arise from inadequate treatment of simple medical conditions and lack of participation in preventative health screening. The individual may not recognise that they have a symptom of concern, may have difficulty communicating or even feeling pain or discomfort, and may have difficulty maintaining healthy routines (such as personal hygiene, and the timing of medication).

A set of 15 targets have been developed by the *International Association for the Scientific Study of Intellectual Disabilities* for the health care of people with intellectual disabilities, based on evidence that there are a number of conditions which are highly prevalent among these people, while being easily detected and easily treated (Office of the Public Advocate Qld, 2008). This set of targets, reproduced in the box below, includes physical (including dental) and mental health screening, vaccinations, and promotion of exercise.

1. Dental Health should be assessed ideally every six months or at least annually.
2. Assess hearing and vision at regular intervals throughout life, especially in childhood and older age.
3. Assess nutritional status regularly by weighing and measuring height.
4. Prevent and treat chronic constipation.
5. Epilepsy treatment should be kept up to date, with frequent review of anticonvulsant drugs by a specialist trained in epilepsy management.
6. Screen for thyroid disease at original assessment and at reasonable intervals thereafter, especially in people with Down syndrome.
7. Identify and treat mental health problems.
8. Identify and treat gastro-oesophageal disease and helicobacter pylori infection.
9. Identify and treat osteoporosis, prevent if possible.
10. Review medications at frequent intervals, ideally at least every three months.

11. Ensure full vaccination status, including influenza and pneumococcal vaccinations for the frail.
12. Provide exercise opportunities. Ensure moderate exercise for at least 30 minutes per day.
13. Organise and offer regular comprehensive physical assessment and review by a medical practitioner.
14. Refer to a genetic clinic any patient without a definitive aetiological diagnosis and arrange review at intervals until diagnosis emerges.
15. Arrange mammography and Papanicolaou (PAP) smears as for the general population.

The supported accommodation at the Village will include staff with medical training, but CLP will also seek to establish a business partnership for a medical centre to be located at the Village, and will assist residents in monitoring and planning their own health care. The location of a medical centre at the Village will create an opportunity for the medical centre to develop expertise in dealing with clients with intellectual disabilities.

The Village will also help to promote healthy lifestyles for its residents and day-visitors, thereby helping to reduce the risk of diabetes and other illnesses related to lifestyle. Village life will create more incidental exercise as residents move from place to place in the Village, participate in work, enjoy the pool and social events such as dances. Dedicated exercise routines, which are enjoyable and sociable, can also be provided. The Village will also supply nutritious food, and help residents to regulate how much they eat from day to day.

Health of carers

The health benefits of the Village also extend to carers, by reducing the burden on carers and giving them more social opportunities.

Research has found that almost twice as many carers are in poor physical health when compared other members of the population, and they have a higher rate of depression. They have the lowest overall well-being scores of any groups in Australia, and are more likely to suffer chronic health conditions. (Edwards, 2008)

The village, in providing accommodation and/or work away from home for people with significant disabilities, will allow their families and carers to have a break from the exhausting full-time care that they have undertaken for many years. It will give carers time to get well, for families to heal and everyone to enjoy the realisation that the Village is caring for their loved ones. Even access to regular, professional respite, and a suitable venue for social outings, will provide such a relief to many families that they are able to continue their caring role with renewed energy.

Facilities for all

The CLP Urban Village will include a centre of facilities which are open to the general public, including a cafe, indoor pool, hall and medical centre, all of which – because of their disability-sensitive design – can attract people from throughout Canberra who have disabilities and other frailties (such as the elderly) and their companions.

As the number of elderly and disabled people in Canberra increases, there is a growing need for public facilities which are geared up for people who have difficulties with mobility, communication and/or cognition. A facilities centre including a cafe, which has been specifically designed to include people with disabilities, will be a very welcome addition to the community.

The shortage of indoor pools in Canberra means that a public indoor pool at the CLP Village will be well patronised. The pool will be suitable for people with mobility problems, and therefore of special interest to groups of elderly visitors.

Having these facilities, in addition to the medical centre and hall suited to those with mobility and intellectual disabilities, is likely to attract other businesses which cater for people with disabilities and frailties, such as foot-care, specialised footwear, massage, pharmacy, hairdressing, and a specialised gym. Other possibilities for the public face of the Village include a playground and art gallery.

The advantages of locating a group of facilities and businesses at the Village go both ways. The businesses will become accustomed to dealing with people with disabilities and frailties, and therefore will develop reputations for expertise and new innovations for this niche market. At the same time, customers – many of whom have difficulties with transport - will benefit from being able to meet several needs in one place.

Profile for Canberra

The CLP Urban Village will add to Canberra's profile as a compassionate and progressive centre of planning.

The planning issues faced by Canberra are faced throughout Australia – how to find environmentally sustainable ways of building the community as a whole, how to address the outstanding needs of those with disabilities, and how to maintain a positive profile in order to attract skilled workers and tourists to the city.

By embracing the CLP Urban Village proposal, Canberra can maintain its edge as a centre of excellence, forward-thinking and social justice.

Drawing upon other models

The CLP Urban Village proposal has been inspired in different ways by retirement villages, Camphill villages, the deinstitutionalisation movement and community-building schemes (such as Circles of Support), but in the end we have developed a proposal which appears to be unique because it focuses on a large range of intellectual disabilities AND a combination of lifestyle issues AND a geographical and sustainable solution AND urban integration AND family integration AND social inclusion.

In this section, we discuss the strengths and weakness of other models and their implications for the CLP Urban Village. The discussion draws on recent reviews of supported accommodation, including results of meta-analyses of supported accommodation (Centre for Developmental Disability Studies, 2008; Emerson et al, 2000; Family Advocacy, 2007; Lemay, 2009).

Deinstitutionalisation

The deinstitutionalisation movement took place in the last decades of the twentieth century in countries including Australia, Canada, the UK and the USA. It saw the demise of large hospital-style or impersonal supported accommodation blocks for people with disabilities in favour of dispersed community living. This shift led to some overall improvements of quality of life for residents, but the effects appear to have plateaued and there are still large shortcomings in the quality of life for people with disabilities, especially in the areas of social networks and work opportunities.

In the UK, some hospital-style institutions were replaced by “residential campuses”, where residents were still grouped together on an area of urban land, for example in groups of buildings of 7-10 residents, with shared facilities. A study by Emerson et al (2000) found that these residential campuses provided a poorer quality of life on several indicators than dispersed community homes or purpose-built villages.

It is noted that any aggregation of people with disabilities can mean a risk of depersonalisation over time. Safeguards against this process are discussed in the section entitled *Quality Assurance*.

Dispersed community housing

There are many ways in which people with disabilities may live dispersed in the broader community, including living at home with a carer, sharing a home with someone with complementary needs (co-residency), living independently with drop-in support, or living in a supported group home. In some cases, new suburbs or housing blocks have been built in order to provide a small fraction of the housing to a particular group of people with special needs (eg Deohako in Canada, Derwenthorpe in the UK).

In all examples of dispersed community housing, the supported accommodation needs to be supplemented by efforts to create social opportunities and work opportunities for the individual, in order to prevent social isolation and stagnation. “Circles of Support” is one strategy for helping to create a network of resourceful people who can facilitate the lifestyle of the person with disabilities. For many individuals, however, there may not be sufficient resources, support people, suitable transport, motivation or mental stamina in their home network in order to form the necessary links.

Government-supported community homes may vary significantly in the quality of care given and the degree of institutional treatment that a person receives within the home (Cross, 2002). Group homes may be lacking in pastimes for the residents, lack flexibility if residents are not compatible with each other, and typically do not include spaces where residents can receive visits.

Persistent problems with dispersed community homes include dependency on the individual carer or group home manager for the quality of care, lack of work and social opportunities, and lack of systems for monitoring or promoting health care. Research has found that people with disabilities living in community homes typically have very narrow social lives (Family Advocacy, 2007; Lemay, 2009), often with only 2-5 social contacts, including carers, staff and family.

Cluster communities

Cluster communities are communities created by providing some dispersed community housing within one area, such as a suburb, in addition to some form of social and/or work programs for the residents. Examples include some Camphill communities (eg Taurus Crafts in the UK; Sophia Creek in Canada), some L’Arche communities (eg L’Arche Genesaret in Canberra), and some other providers of multiple services for people with disabilities (eg Inala in NW Sydney).

These communities provide a combination of lifestyle support and accommodation support while being integrated in a normal urban environment. Unlike the CLP Urban Village, however, they still provide the challenge of travelling between sites for work or social opportunities, and do not offer the complexity of supports proposed for the CLP Village.

Purpose-built villages

The idea of building a village for the well-being or convenience of the people who live in it has been around since at least the nineteenth century, when some manufacturers built villages for the health of their employees. Contemporary Australian life includes many examples of purpose-built villages including retirement villages, university campuses, ecovillages, defence force facilities, villages for mine-workers or construction workers, and holiday resort villages. Ironically, in spite of their needs for a ready-made community, most of these villages are unsuitable or overly challenging for people with disabilities.

Throughout the world, there are many examples of villages which have been built specifically for people with intellectual disabilities. These include Camphill villages,

which are run by the Camphill Foundation and inspired by the philosophy of Rudolph Steiner (eg Mourne Grange in Ireland; Botton Village in England), other anthroposophical villages (that is, inspired by Steiner but not run by Camphill; eg Community Homestead in Wisconsin), and other life-sharing villages including some which are run by Christian groups (eg Brockwood in Texas) and some secular examples (eg Marbridge in Texas; Solheimar in Iceland; Innisfree in Virginia).

Many of these villages are well established, appear to offer a vibrant life and a variety of meaningful activities for residents, including agricultural work, cottage industries such as soap-making, candle-making and weaving, and shopfronts (especially cafes, bakeries and gift shops). There are some award-winning examples: Botton Village in the UK is home to 280 people, 130 with special needs, and received special recognition in the Prime Ministers Awards for Sustainable Communities in 2005; Solheimar in Iceland is home to 100 residents, including 42 with special needs, and has been awarded a trophy by the Global Village Institute for outstanding achievement in ecological design for human habitats; Annandale Village, near Atlanta in the US, has about 130 residents and won a business award in the small non-profit business category.

Overseas examples of villages for people with disabilities have a number of shortcomings. They are typically rural, meaning they have ample land and agricultural work opportunities, but also meaning segregation from normal urban life. Rather than integrating with the individual's community of origin, they create an alternative community which may be difficult for family and friends to visit.

Moreover these villages typically exclude people with severe intellectual disabilities or who are not independently mobile. Like all forms of supported accommodation, these villages have the potential to lack personalisation or variety (eg Emerson et al, 2000) if this is not consistently promoted.

Nevertheless, research has found such villages to have some strengths when compared with both residential campuses and dispersed community housing (Emerson et al, 2000). Strengths include more extensive social networks, greater satisfaction with friendships and social relationships, more support from family and friends, less exposure to crime and verbal abuse, and a longer working week than found in dispersed community homes. This particular UK study also found villages to be cheaper than dispersed community housing.

In contrast to these rural villages, many retirement villages have been developed within an urban setting. They are similar in some ways to the proposed CLP Village – for example, in the need to provide a variety of levels of accommodation and support, and consideration of the security, social needs and transportation needs of the residents. In contrast, however, the CLP Urban Village aims to promote training and work opportunities and personal growth of the residents, and to provide work and social opportunities for visitors.

Conclusions

Compared with other models of supported accommodation, the CLP Urban Village has particular practical advantages for those with limited mobility and who lack the intellectual ability to steer their own lives, by combining accommodation with urban integration, family integration, work and lifestyle opportunities on a single site.

According to research, there is no objectively superior model for supported accommodation, and there is certainly no argument that the government should roll out village-style living for all people with disabilities. Evidence suggests that the most important factors in determining quality of life for people with disabilities are not the exact features of the accommodation, but the maintenance of quality management, family values and person-centred practices. The maintenance of quality is discussed in the section entitled *Quality Assurance*.

Moreover the CLP Urban Village will provide another choice for people with disabilities in Canberra. The varied wishes of families can be seen in the use of the school system by parents with disabled children. While some parents embrace opportunities for their children to be in a specialised school with children of similar abilities, other parents are keen to arrange places for their child to be integrated in the mainstream. These differences will depend on both the needs and preferences of the children and their carers.

At present there is a severe lack of any choice of supported accommodation outside the home. There is both a shortage of places and a lack of variety. The CLP Village will help to rectify both of these shortfalls, while building upon the lessons learned from research in the field of supported accommodation.

Village Design

Guiding Principles

CLP has developed a document entitled *Integrity Statement and Design Criteria* to define the principles according to which the Village would be designed. The main Guiding Principles for the design of the Village are summarised on pages 3-4 of this document, which may be found at Attachment 2.

A design which teaches everyone

It is important to bear in mind that this village is much more than a type of housing. The basic concept is not just to put roofs over heads, but to support disabled residents, visitors and carers in achieving a more balanced way of life than they currently achieve in the general community.

In doing this, the Village will provide a kind of community structure and healthy setting to which all of us might wish to belong. It is a case of positive discrimination, in which the best in social and environmental planning is offered first and foremost to those who most need a more sensitive world in which to live.

While planning the Village, therefore, we can consider not only how to best serve the needs of disabled individuals, but also the ways in which this village can teach us all how to live in a better way.

A model of environmentally friendly design

The Village will incorporate the latest in environmentally-friendly urban design. As well as meeting existing ACT environmental standards, government and non-government bodies may wish to collaborate with the Village to showcase some more innovative energy-saving technology. The portion of the Village consisting of small independent homes could make a good display of minimal impact design for ACT homes.

Environmental sustainability needs to underpin the health and well-being of Village members, and ensure the financial and social longevity of the Village itself. Environmentally sustainable design will not be an added luxury to the Community Village, but an integral way of achieving two important goals of the Village: providing the best possible living for its residents; and creating an ecologically, socially, and economically sustainable Village.

More details of the environmentally friendly design criteria can be found in Attachment II, *Integrity Statement and Design Criteria*.

A model of Canberra-appropriate gardening

The gardens of the Village are an important way of enhancing the quality of life of people with disabilities, and are a place of meaningful work. The gardens can be used to demonstrate the types of fruit and vegetables which can be grown organically in Canberra, and demonstrate attractive xeriscape gardens. Government, research and gardening groups may be interested in assisting the Village with these goals.

A model of how to share as a community

The Village may also serve as a role model to the rest of Canberra in how small sections of the community can live more collaboratively. The Village will need to incorporate a kind of exaggerated “neighbourhood watch” to help residents live in safety and comfort. Some of this will grow out of the shared understanding of the residents, rather than relying entirely on paid supervisors. Residents will also have opportunities to come together to share festivals and other cultural events. Residents will be able to share equipment and facilities such as cars or minibuses, gardening equipment such as mowers and mulchers, household items such as carpet cleaners and guest beds, and recreational items such as tennis racquets, books and DVDs.

A model of quality of life for those with disabilities

Systems for supporting people with disabilities are in a dynamic state both throughout Australia, and the UK and USA, with many different models of supported accommodation co-existing, and many complaints of unmet need. Done well, the CLP village will attract interest from other Australian state governments and may well attract attention from overseas providers. The Village can also be a source of inspiration for local, interstate and foreign families on the quality of life that may be achieved for their loved ones in spite of disabilities.

Physical Features

The following physical features are proposed for the Village:

Accommodation – a variety of accommodation types, to suit individual care needs, allowing for independent living through to full residential care.

Central “Village Green” area - providing open space for community events and will provide opportunities to invite families and members of the general public to join residents in Village life.

Smaller green spaces - which allow residents to sit in peaceful surroundings and enjoy the company of family and friends, and/or be where equipment is provided to enhance physical interaction with the environment.

Flower and vegetable gardens - for aesthetic reasons and to provide work and leisure opportunities. The gardens will also provide composting and worm farming facilities to reduce waste.

Landscaping – including wheelchair-friendly paths and incorporating native species to support biodiversity in the local area.

Commercial kitchen and dining room - providing nourishing meals for residents, cooked from quality ingredients, without preservatives and additives. It is envisaged that all residents will be able to access the kitchen/dining room for their meals. Food may be eaten in the dining room or taken to the residents' room/unit if they are sick or have visitors. Food will be available for family and community members to access on a fee for service model. The kitchen will also provide work opportunities for residents and day visitors.

Commercial Laundry Facilities – which perform washing and ironing for residents who are unable to look after their own clothes, while providing work for residents and day visitors.

Community hall – large enough to accommodate community functions and provide a venue for commercial activities and social/recreational opportunities for developing relationships with people from the broader ACT community.

Chapel - providing a quiet place for spiritual support and personal reflection, and a space for community worship and inter-faith celebrations.

Health Facilities – including medically trained staff and a medical centre established by business partnership.

Cafe – which is sensitive to the needs of people with disabilities (eg wheel-chair access; food can be chosen by sight rather than a written menu; options available for special dietary needs). The cafe can also provide work opportunities for residents and day visitors.

Pool – a hydrotherapy pool would provide much needed exercise to people with limited mobility, and an attractive form of exercise to all residents; the pool will also be open to the public, catering for example to groups of visitors from retirement villages or other groups who would like to take advantage of the disability sensitive environment.

Other exercise facilities – such as a specialised gym, table tennis, pool table, bike path, outdoor fitness equipment

Programs

A number of programs need to be designed for the Village, including individual planning programs, health promotion, training and work programs. The design of each of these will be developed in consultation with people who have expertise in the disability sector, and through partnerships with organisations which may wish to collaborate with the Village in the long term.

Work programs and on-site businesses – Collecting Ideas

A number of “Canberra-friendly businesses” could be run at the Village, employing both residents and day visitors. These enterprises can be ones which have a real market in the Canberra community and make a real contribution to Canberran life. An urban Canberran site will probably not lend itself to market gardening, nor is there a shortage of craft markets and gift shops in Canberra (these are typical work programs in rural villages for people with disabilities), but the Village could be an ideal place to establish businesses along the theme of “The art of being a community”. A few ideas are given below to stimulate discussion.

IDEA #1 – A Sensitive Cafe

A cafe is a natural extension of village life, an ideal place for residents to mix with each other and the wider community. Designed to be accessible to people with wheelchairs and intellectual disabilities, the cafe will also be particularly suitable to people with other frailties and cognitive impairments (eg there will be sufficient room for wheelchairs at tables, and customers can choose food by sight rather than reading menus). Moreover, having room for prams and strollers, the cafe could tap into the large “mums’ cuppa”. This could be further promoted by placing the cafe within view of a playground. As the Village caters to the dietary sensitivities of its residents, the Cafe may also become known for its additive-free foods and special diet options (eg gluten free, grain free, non-dairy options).

IDEA #2 - Playgroup supplies and ready-made playgroups

The Village may wish to host playgroups in order to have some children visiting the Village, to raise awareness of the Village among parents, and to create opportunities for children with disabilities. The Village could adopt a playgroup formula similar to the cooperative playgroups well-known around Canberra, but offer the advantage of having all materials and food prepared in advance by workers from the Village. That is, village workers could be responsible for preparing morning tea supplies, craft materials (eg cutting up coloured paper, putting out glue etc), making play dough, and demonstrating the crafts and action songs.

IDEA #3 - Children’s party venue

Pre-made children’s parties are popular with Canberran consumers, and children are often repeatedly invited to the same few venues. The Village hall could provide an alternative. Village workers could be responsible for decorations (balloons,

streamers, themes), finger food (specialising in additive free and/or special dietary requirements), activities for younger children or a DJ for older children. It would be an ideal venue for parties for children with disabilities or special dietary needs.

IDEA #4 - Banner making and tile craft

The CLP village could become part of the urban beautification process which has been taking place in Canberra, and can be clearly seen in the number of artistic details which are now present throughout Civic for example. An art studio at the Village could be responsible for simple, sturdy urban arts, such as dying or printing cloth banners for outdoor use (eg for Floriade, shopping centres, even sports events), creating idiosyncratic textured clay bricks or tiles for walls or nooks of paving (an example of an outdoor tile mural, hand-made by primary school children can be seen at Turner School) and mosaicing. The same arts could be used to decorate the Village to add to its aesthetic value for residents and visitors.

IDEA #5 - Guest house

A village with disability-friendly accommodation and disability friendly facilities could make Canberra a destination of choice for travellers with disabilities and their carers. Given that so many of Canberra's tourist attractions can be seen spectacularly from a car, without traffic congestion (from lakeside monuments to kangaroos and gumtrees) and many attractions have disabled access, Canberra could achieve status as a holiday destination for people with disabilities.

Quality Assurance

Several measures will be used to ensure that the Village provides a high-quality, non-institutional environment which does not disintegrate over time.

A physical environment which promotes individuality and socialising.

The architecture and furnishing of the Village will be selected to promote individuality, and to promote the social life of residents. For example, the design will avoid having rows of identical units or bedrooms, or identical furnishings. Adequate spaces will be created for residents to mix socially and to receive visitors, whether for meals, chatting in a garden, or for a family member to sleepover. These physical provisions will help to ensure that the original ethos of the Village is maintained over time.

Presence of non-disabled residents

A proportion of residents will not have significant disabilities. The presence of non-disabled residents provides a body of people who can act as role models and neighbours for those with disabilities, and gives those with disabilities the opportunity to live in a diverse neighbourhood. Moreover their presence will ensure that there are people with adequate communication skills to advocate for the ongoing quality of the Village.

In Camphill villages, for example, about half of the residents are non-disabled. For the CLP Village, the proportion of people with disabilities has yet to be determined by further research and analysis. Non-disabled residents could conceivably include other people with a need for low income housing or for community living (such as single mothers at risk of isolation), as well as those who would appreciate living in the Village as a lifestyle opportunity (such as semi-retired couples and post-graduate students in the social sciences).

Routine contact with several people

Residents with disabilities will have several regular contacts within the Village including their personal planner, those who support the resident with personal and domestic care, neighbours (both incidentally and through a kind of neighbourhood watch system), colleagues in work programs, and companions at meals. This far exceeds the number of social contacts which many people with disabilities have, living at home with a single carer and without work activities. As well as promoting the resident's happiness, this variety of social contact is important for keeping tabs on the quality of the person's life, and reducing the risk of abuse.

Person-centred planning

A person-centred care plan, including measures for personal development and variety, will be maintained and regularly reviewed for each resident with disabilities.

The value of these plans will depend on the training and supervision of staff to ensure that the plans are developed with sensitivity and sincerity, and are effectively carried out. The size of the resident's social network and lifestyle options at the Village will mean that the plan can be put together with a reasonable awareness of the individual's preferences, in spite of whatever communication difficulties he or she has.

Staff training and management

Good staff training and management is crucial to maintaining the principles of the Village. Partnerships will be sought with educational and training bodies who can collaborate in training staff.

Regular evaluations

The Village can be evaluated regularly against criteria for services for people with disabilities, and using quality of life measures suitable for people with intellectual disabilities.

Partnerships with other bodies

The Village will establish partnerships with other organizations such as educational institutions and businesses, who will have a vested interest in the ongoing quality of village life. For example, external bodies will be involved in helping to run the cafe, pool, chapel, other facilities, and recreational and social activities such as crafts and dances. These links will help to maintain the professionalism and accountability of the Village.

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CLP Urban Village

**INTEGRITY STATEMENT AND DESIGN
CRITERIA**

November 2008

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2 WHAT THE VILLAGE IS ABOUT

Philosophy, purpose and design criteria

The ACT Community Living Project will be a community for all; residents, family members, staff, volunteers, and visitors. All the residents of the Community Village will be able to share in, and benefit from the inclusive spirit of vibrant Village life. This inclusive spirit of the Village is important in enabling the development of meaningful relationships between all Village Community members.

The Village will provide a home for its residents with all the attributes that the wider Australian community gains from having a home:

- Ongoing and meaningful relationships;
- Cooperation;
- Doing things together;
- Caring and goodwill;
- Understanding and acceptance;
- Personal property, and personal space; and,
- Security.

A positive attitude to life will be fostered at the Village, with sufficient physical and emotional support for residents to live life to the full. Strong links with an extended peer group will be fostered through participation in a wide range of community activities.

Residents will be provided with a level of support that allows them to lead as satisfying and as independent a life as can reasonably be achieved in the context of their abilities.

Community Village Guiding Principles:

These Community Village Guiding Principles lay the foundation of what the Village will be. The Village will be designed and managed around the diverse needs of its members, and these principles will be used to continue this vision into the future.

1. The dignity and self-worth of each person will be respected, upheld, and remain the overarching purpose of the Village.
2. The long-term health and well-being of all members is of paramount importance and is supported by providing;
 1. good quality food;
 2. timely and appropriate medical and dental services;
 3. activities to promote fitness; and
 4. skilled and appropriate support for emotional, spiritual and psychological health.
3. There will be sufficient resources to allow flexibility in the way residents choose to use their leisure time in ways which support their interests and encourage development towards greater independence.
4. Meaningful, and ongoing interactions and connections with the wider community are skilfully promoted and fostered by all participants in the life of the Village.

5. A high level of family involvement is encouraged and welcome, but the Village will continue to provide the same quality of life for residents regardless of parental input and presence.
6. Residents, families and guests are supported by knowledgeable and professional staff and an administrative structure that maximises independence and promotes quality of life.
7. The Village will be a clear 'employer of choice' for staff who value the career structure and opportunities to work in a centre of excellence, and a benchmark for other employers.
8. The Village is designed sustainably with the aim to reduce environmental impacts, and to create healthy environments by
 - Selecting low impact, non-toxic, sustainable materials for construction, fixtures, and furnishings;
 - Maximising natural daylight in effective ways;
 - Maximising fresh air and cross ventilation;
 - Significantly reducing energy use and demand;
 - Reducing potable water use and demand;
 - Providing high quality communal outdoor areas which encourage interaction between residents, staff, visitors, and healthy natural environments.

3 WHO THE VILLAGE IS FOR

The Village will be designed around the needs of its residents

The Community Village will provide for a range of residents who wish to participate in a vibrant, community-rich village lifestyle and enjoy its lifestyle choices.

The Village is for people with a range of disabilities, with particular focus on those with a moderate to severe intellectual disability, including those with autism who may or may not have an intellectual disability.

The Village will also cater for a range of accommodation and work/enrichment opportunities - from those who may work outside the Village and live semi-independent lives whilst joining in its community life, to those with higher medical and physical care needs who need much more supervision and support to live their lives.

The Village will balance the diverse needs of residents from those with low support needs and those with higher support needs. This balance will be maintained over time and where appropriate, this diversity will be an integral part of the vibrancy and cohesiveness of the Village.

The vision is for everyone to participate harmoniously in the activities of the Village, whether actively, or in quiet enjoyment of each other's company, and be provided with the level of support commensurate with needs.

Residents would be expected to engage in daily group activities, with behaviours that would not ordinarily put themselves or others at risk.

It is accepted that people with moderate to severe intellectual disabilities may vary in their ability to conform to group behaviours on some days.

Some residents may not be able to join in group activities on some days due to medical or other stresses. Alternate activities would then be provided to suit their changed needs (e.g. seizures needing varying levels of care before resuming normal activities).

Flexibility, understanding, skilled professional care, and access to friends and family will be the strengths of the Village

4 WHO WE ARE

The Village will be designed around the needs of the residents, but as a whole will recognise, support, and draw on the diversity of people within it.

4.1 VILLAGE MEMBER WITH A DISABILITY

- I will be recognised first for myself and my capabilities.
- I will live my life like other people of my own age – with opportunities for employment, social interactions with my peers, recreation and relaxation, personal relationships, and contribution to the wider community.
- I will be able to access health care which is responsive to my individual needs in the same way that non-disabled community members do.
- I will have access to appropriate and sufficient medical care as required by my individual health needs.
- I choose to live in the Village and participate in its community life.
- The Village is a place I can call home for as long as I choose.
- I share the facilities and activities offered within the Village with a range of disabled and non-disabled people, including staff, other residents, and visitors accessing the Village facilities and programs.
- I can access the equipment and therapy that I need within community and Village facilities to develop or retain as much ability and independence as possible.
- I can go to visit my family and friends outside the Village and stay overnight or go away for a holiday if I want to.
- I can maintain my family and social networks so that there is no loss of previous lifestyle by choosing to go and live in the Village.
- I have access to further educational opportunities if I choose to do so.
- I can access training, skills development and work experience.
- I can participate in sport, recreation and other community activities outside the Village.
- I can fulfil my need for intimate relationships and enjoy a loving relationship with a partner if I wish to do so.
- My cultural heritage and religious beliefs will be respected and upheld throughout my lifetime.
- I access culturally appropriate responses to my needs which have been developed in partnership with people from my cultural background.

4.2 FAMILIES, CARERS AND SIGNIFICANT OTHERS

- I have the unimpeded freedom to visit my family member with a disability as often as is needed or desired
- I am able to engage in Village activities.
- I am able to share a meal at a nominal cost with the Village community or individually with my family member.
- There is a “sleep over” facility so that I can stay overnight with my family member if needed or desired.
- I can include my family member in any extended family function outside the Village.
- I work collaboratively with staff to work out a care plan for my family member with a disability.
- My input towards community life is encouraged and respected.
- My family’s personal, religious and cultural values are respected and activities within the Village support their inclusion in the daily living plan.
- I am listened to and issues that are of concern will be dealt with in a respectful, inclusive and timely way.
- I am able to discuss issues without any fear of retribution to myself or my family member.
- I have peace of mind and a sense of optimism that my child will be happy and in a home and community environment so that when I am not there their quality of life will not be diminished.

4.3 NON-DISABLED MEMBERS

- Other members of the general community are encouraged to consider buying into and living within the Village.
- Entry criteria and the proportional mix of residents’ care needs will have to be satisfied.
- People who choose to live at, work in or come to the Village as guests or volunteers should share the values of the Community Village and enjoy interacting with the disabled community members.
- By joining in the activities and ethos of the Village, non-disabled members will act as role models and help to break down the barriers that exist in the wider community.

4.4 STAFF MEMBER

- I am a role model for the people with a disability in the Community Village.
- I am in a position of influence and will use my energy to drive positive changes for people with a disability and their families.
- I respect the primary role of family, friends and significant others in the lives of people with a disability.
- I will achieve and maintain my awareness of the care needs of the people with a disability living and working in the Village who I have responsibility for supporting.
- I am flexible in my role as a staff member and will respond appropriately in any unexpected situation to any member of the community, regardless of whether they are my direct responsibility or not.
- I am responsive and committed to innovation and creativity in program design and implementation.
- I am well-informed and communicate responsibly.
- I understand, uphold and promote the human rights of all members of the Village.
- I focus on strengths and support the self-determination of members of the Village.
- I cooperate, support and coordinate well with other staff members.
- I am accountable for my actions.
- I will have a positive attitude towards the Village and will take any concerns I have to administration in a timely manner.
- I will conduct myself in a professional way at all times.
- I will take advantage of professional development opportunities to enhance and upgrade my skills and knowledge.

4.5 ADMINISTRATION

- I understand, uphold and promote the human rights of people with a disability, focus on their strengths and support their self-determination.
- I cooperate and coordinate well with government, other community services professionals and health care providers to ensure that people with a disability are not excluded or segregated from mainstream services and life choices.
- I work cooperatively with families to develop person-centred, flexible supports for people with a disability and relevant care plans.
- I will establish clear procedures for staff input and will respond to issues, complaints and suggestions for improvement in a respectful and timely manner.
- I promote a clear and transparent process of addressing problems raised by residents or their families, which achieves results for the person with a disability, and develops trust and understanding between us.
- I will recruit staff who will interact positively with all members of the community and contribute to the inclusive ethos of the Village.
- I will work with other staff to ensure we have transparent processes in the daily management of the Village.
- I will develop partnerships with health care professionals, including psychiatrists and specialists.

- I will seek out programs that can be run to address the needs of people with a disability to help them be more functional in the wider community.
- I will actively pursue day programs/activities that develop the life skills of people with a disability that promote self-esteem and self-worth.
- I will assist residents (both disabled and non-disabled) to plan towards life transitions.
- I will provide appropriate support for people with a disability when they face personal challenges or times of crisis in their life.
- I will encourage families to be involved in planning future directions for the Village and its residents.
- I will try to find appropriate specialist services when existing community services do not address the needs of residents.
- I ensure that people with a disability who come from indigenous or culturally or linguistically diverse backgrounds are able to take their own place comfortably within the Village.
- I build confidence in people with a disability and their families that the supports they require will be available when they need them.
- I will champion the rights of people with a disability both within the Village and in the ACT community.
- I will build links with people of influence within the community to inform, educate and encourage them to better meet the needs of people with a disability.
- I ensure that there is a positive commitment to developing and maintaining a healthy lifestyle which includes providing good quality healthy meals, regular exercise and enjoyable activities.

4.6 BUSINESS MANAGEMENT (Employment Officer)

- I will seek employment opportunities for residents with a disability who wish to work in the wider ACT community.
- I will organise jobs in the Village for residents and non-resident people with disabilities.
- I will seek opportunities for disabled residents and non-residents to contribute to the ACT community through volunteer work on a full-time or part-time basis.
- I will establish and maintain links within the business sector and promote positive attitudes to people with a disability and their skills.
- I will work with people with a disability and their families to plan the ways in which the goals they choose can be pursued.
- I will work to ensure that our Village workforce is valued and respected.
- I will work to establish a system of business management that is highly respected for its expertise, innovation, commitment and accountability
- I will ensure that all staff have opportunities to increase their skills and knowledge to provide the best possible support for residents and families.

5 WHAT WE DO

The Village will be an enriching, opportunity-filled well-serviced community experience.

5.1 ENRICHMENT AND EMPLOYMENT OPPORTUNITIES

As an integral part of a vibrant Village community, residents who can further their education will be encouraged and supported to do so. Active contributions to the wider community could be pursued through volunteer work, within and outside of the Village. Residents will be able to participate in organised activities in the wider ACT community, as well as organised activities within the Village, and this will include opportunities for non-residents to come to the Village for day activities.

Health and fitness activities will be available to all residents, and to provide this in a structured way, ongoing training and social skills development will be provided. For example, links will be developed with special education and mainstream schools for joint participation in day activities where appropriate.

A key aspect of the Village will be that it will provide employment and training options within the Village (for example in the commercial kitchen) for residents, with certification and recognition processes available. Employment and training options shall also be made available to other members of disabled community who live at home or in other residential locations

5.2 COMMUNITY INVOLVEMENT

The life and vibrancy of the Village will benefit from interactions with the wider ACT community – through activities within the Village, and Village residents being involved in wider community activities.

- Family involvement is encouraged in all aspects of Village life – but facility infrastructure should maintain residents regardless of parental input.
- Family and friends can share meals with residents on a cost recovery basis.
- Members of the wider ACT community should be encouraged to attend social and recreational activities organised at the Village.
- Outings to a wide variety of venues and community events will be organised with an atmosphere that encourages participation and enjoyment. Wider community can *choose* to participate on a cost recovery basis as a truly integrated activity.
- Community groups would be actively canvassed to include residents in their leisure, hobby and learning groups in return for reduced hall rental cost.

5.3 SERVICES

- **Health and Fitness**

The medical and nursing care needs of the core residents are significant and must be proactively addressed to prevent long-term chronic conditions that are increasingly debilitating for residents and financially draining on the ACT health system.

While it is possible to address some of these needs through access to doctors in general practice, more complex medical needs must be treated by specialists in a range of fields.

Hydrotherapy facilities will provide enjoyment, exercise and therapeutic care for the residents. These facilities could be made available to the wider community to facilitate integration opportunities. Similarly, gym facilities offer a range of fitness programs which are available to residents and community members.

Residents who wish to also access other community facilities will be supported to do so.

- **Pastoral Care**

The emotional and spiritual impact on families with children with a moderate to severe intellectual disability with or without a physical disability is enormous and this service is essential for parents and family members. Pastoral care will be provided for all members of the community, including residents, families and staff.

6 FACILITIES WE ENJOY

A sustainable, comfortable, and healthy environment which is interactive and educative

The following design criteria will provide for a new model of Village which delivers high quality care services and facilities in and through economically, socially, and ecologically sustainable infrastructure.

6.1 LOCATION

- Location of the Village within the ACT community is critical to its success. It needs to be within a suburban, residential area, close to amenities including shops, public transport and community facilities.
- To maximise community acceptance and willingness to become involved with Village life and the opportunities we wish to make for residents, families and members of the general public, a comprehensive neighbourhood connection program will be initiated when the final site is determined.

6.2 FACILITIES

- The Village as a whole will maximise environmentally sustainable design to conserve energy and water, reduce waste, use healthy and sustainable materials, minimise pollutants and improve occupant health and comfort.
- The Village is primarily designed to cater for people with a moderate to severe intellectual disability who may or may not have a physical disability and the architectural design will take their needs into account.
- We will provide a safe and secure environment for residents and the physical layout and work practices will be designed to maximise this.
- **Accommodation Types**
 - A range of accommodation options to suit individual care needs - allowing for independent living through to full residential care, including:
 - independent units;
 - semi-independent living;
 - assisted living; and,
 - higher physical/medical care needs (dependent on appropriate funding).
 - Graduated accommodation:
 - all buildings and outdoor facilities will offer universal design;
 - smaller units for couples or family/friends who want to live together;
 - options for families/individuals to buy or rent places (similar to existing aged-care facility models) – this could also include people who did not have a disability;
 - accommodation to include “sleep over” facilities for family members if desired.
 - Accommodation at the Village offered to non-disabled people would be subject to availability and respect priority need for people with disabilities.

- The **central “Village Green” area** provides open space for community events and will provide opportunities to invite families and members of the general public to join residents in Village life.
- **Smaller green spaces** will allow residents to sit in peaceful surroundings and enjoy the company of family and friends, and/or be where equipment is provided to enhance physical interaction with the environment. Landscaping is to incorporate native species to support biodiversity in the local area.
- **Community hall** – will be large enough to accommodate community functions and provide a venue for commercial activities and social/recreational opportunities for developing relationships with people from the broader ACT community.
- **Chapel**
 - The chapel provides a quiet place for spiritual support and personal reflection.
 - The chapel provides a space for community worship and inter-faith celebrations.
- **Commercial kitchen**
 - Research has shown that quality food can have a dramatic impact on behaviour problems as well as promoting good health.
 - The kitchen will provide nourishing meals for residents, cooked from quality ingredients, without preservatives and additives.
 - It is envisaged that all residents will be able to access the kitchen/dining room for their meals.
 - Healthy food choices will be promoted to residents and families.
 - Food will be available for family and community members to access on a fee for service model.
 - Food may be eaten in the dining room or taken to the residents’ room/unit if they are sick or have visitors.
 - The kitchen should cater for all on site activities as a source of revenue.
 - Kitchen appliances will be selected for their water and energy efficiency. All appliances are to have either the highest, or second highest energy or water star rating available in Australia.
- **Gardens - flowers, vegetable, life**
 - Provided for aesthetic reasons for community members to enjoy and be fully accessible.
 - Provide work and leisure opportunities.
 - Organic food is available for the kitchen and can be sold if there is a surplus.
 - Members of the wider ACT community can share their skills, knowledge and love of gardening with the residents.
 - Provide composting and worm farming facilities to reduce waste.
- **Commercial Laundry Facilities**
 - Work opportunities can be provided for residents.
 - Washing and ironing can be done for residents who are unable to look after their own clothes.
 - May offer opportunities for commercial development / workplace training.

- Washers and dryers appliances to be selected for their water and energy efficiency. All appliances are to have either the highest, or second highest energy or water star rating available in Australia.
- Provide clothes lines to minimise the energy usage and costs associated with dryers.
- **Health Facilities**
 - Minimal staffing infrastructure within the Village should include:
 - full-time nurse;
 - on call general practitioner / locum service;
 - regular dental services; and
 - access to other allied health services.
 - The level of care given to residents must reflect the standard that the rest of the community would expect for similar medical needs. This includes invasive or complex procedures being performed by trained and qualified staff.
 - A business partnership will be sought to locate a medical centre within the Village to provide direct services to residents and the wider community.
 - Partnerships will be developed with a range of specialist health providers to supervise the complex needs of residents and work with GPs and nursing staff to provide quality and timely care.
 - 'Visiting Consultant' rooms will be provided within the Village to allow regular clinics to be held on site.

7 ENVIRONMENTALLY SUSTAINABLE DESIGN

Environmental sustainability needs to underpin the health and well-being of Village members, and ensure the financial and social longevity of the Village itself.

Environmentally sustainable design will not be an added luxury to the Community Village, but an integral way of achieving two important goals of the Village:

- Providing the best possible living for its residents;
- Creating an ecologically, socially, and economically sustainable Village, which will be able to provide the best possible living for its residents through good design, good management, and good integration with the community.

The Village will:

- Become an 'environmental showcase' and demonstrate best practice in sustainability.
- Utilise smart design and appropriate technology to be energy efficient, or if appropriate, energy neutral;
- Meet all potable water efficient requirements through rainwater capture;
- Process all organic waste for reuse on site;
- Use recycled, rapidly renewable, and non-toxic materials;
- Introduce no pollutants into the environment;
- Enhance the local habitat and promotes biodiversity;
- Provide a healthy and comfortable space for residents, staff, friends and family;
- Recognise, preserves, and promotes local heritage;
- Develops 'social capital' within the community;

Energy

- Maximise the use natural lighting will be wherever possible. Where artificial lighting is required all lighting shall be high efficiency lamps (no incandescent or halogen) with electronic ballasts. The variable use of the building(s) will require flexible switching covering small areas and an automated lighting control system to avoid energy wastage.
- All hot water applications are to be solar boosted (both DHW and heating). Building integrated renewable energy systems are to be investigated (noting that Village-wide systems could achieve good financial and energy savings).
- Energy efficiency of building fabric by designing building fabric in such a way to reduce the need for energy use in heating, cooling, ventilation and lighting. A thermal simulation must be undertaken of the building design and demonstrate a 50% improvement on BCA section J

Water

- Water use will be reduced significantly through efficient fixtures.
 - Where appropriate, dual flush toilets can reduce the average water use per flush.
 - Where appropriate, waterless urinals can be used and provide long term financial and environmental benefits

- Flow-regulated hand basin taps with aerators and automatic shut off (sensors) can substantially reduce water use. Cost-benefit of the automated systems would need to be considered as water use in hand basins is generally very small.
- Install water sub-meters on major use areas and the connection of these to a Building Management System for leak detection.
- Use rainwater or recycled water for landscape irrigation or the installation of a high efficiency system including subsoil drippers with automatic timers and soil moisture sensors.

Waste

- Reuse or recycle at least 80% of all construction and demolition waste (by weight). Achieving a high recycling rate for a purely construction project is problematic. The material produced is varied, produced by a range of contractors, and is not all produced at the same time. This requires the installation of comprehensive recycling infrastructure for the life of the project and the training of all contractors on how it is to be used. Even so, the majority of this material can be cost-effectively separated and recycled.
- During the life of the Village, significant waste savings can be achieved through the use and purchase of appropriate consumables, and also the establishment of organic composting systems. These activities and initiatives can have meaningful environmental benefits (in reducing resource consumption, embodied energy of products, and the amount of waste sent to landfill) but can also be valuable educational and community-building activities. For example, appropriate (i.e. recyclable or compostable consumables will enable a successful composting system to be established and maintained. A successful composting system can help support Village gardens, which will provide interaction, exercise, learning, as well as fruit and vegetables. Successful fruit and vegetable gardens can be integrated into the food requirements of the Village or become a source of financial independence for the Village.

Materials

- Material selection has a far-reaching environmental impact from obtaining the initial raw product, manufacturing, transport, usage and final disposal.
- The use of recycled materials helps to 'close the loop' and further encourage the recycling process. Construction projects have the ability to create significant market demand for recycled products and help to support the recycling industry. The following criteria should be applied to material selection in the project.
- Material selection to include:
 - Post-consumer recycled materials preferred over post-industrial;
 - Recycled aggregate in concrete mix and maximum feasible amount of cement substitutes (fly ash and slag) in concrete mix dependent upon application;
 - Timber to be recycled or sourced from sustainably managed plantations (Forest Stewardship Council certified);
 - Majority (90% by weight) of steel from post-consumer recycled sources;
 - Bulk landscaping materials (fill, road base, gravel etc) to be recycled materials;
 - Materials to be assessed on their basic lifecycle impact (raw material source, manufacturing process, use and disposal);
 - Reduced use of materials through design and appropriate application;
 - Low embodied energy (over the effective life of the material);
 - No significant habitat damage from resource extraction;

- Natural and rapidly renewable products that have been derived from natural renewable sources and harvested in a sustainable manner;
- Durable and repairable products (thus reducing lifecycle impacts) will be preferred;
- Design and installation for ease of disassembly, reuse and recycling;
- Locally produced products will be preferred to reduce transport impacts as well as support local industries;
- Minimise the use of PVC;
- Minimise use of ozone depleting chemicals;
- Minimal and recyclable packaging ; and,
- Preference for companies with independently certified environmental management systems (e.g. ISO 14001).

Pollution

- All stormwater and sewage leaving the building site will be treated/filtered so that it has no detrimental impact on local waterways;
- All external lighting shall be designed so that there is no spill of light into the sky.

Ecology

- Integration of appropriate habitat into the building and landscape that helps to enhance the local biodiversity – the Village should be integrated with the landscape and make a positive contribution to local habitat and biodiversity. An assessment of local habitat and biodiversity should be used to inform the landscape and layout design.

Health and Comfort

- Significant reduction in the release of Volatile Organic Compounds (VOCs) from building materials and furnishings. VOCs are chemicals that are released by materials into the work environment (e.g. paint, carpet, adhesives, sealants, composite wood, loose furniture). They are irritants and can also cause headaches and nausea. All materials used within the building should be assessed for their VOC levels and preference will be given to low or no VOC products that meet the required performance characteristics.
- All regularly inhabited areas will be provided with natural ventilation to provide fresh air and remove any indoor air pollutants.
- Thermal comfort and user influence of space conditioning systems. The maximum summer design temperature for a naturally ventilated building would be 30 degrees C with a maximum of 5% (30 hours) of summer active living hours (8am till 6pm) above 26 degrees C. Buildings must provide a degree of user control/interaction with internal comfort systems without compromising the overall performance (e.g. energy).
- Natural lighting and views without glare and heat gain. Natural lighting is widely recognised as a major contributing factor to user comfort and productivity. It also has the potential to substantially reduce energy use in artificial lighting. Care must be taken in the design to ensure that the use of natural light does not create unmanageable internal heat gain or glare.

Community

- Develop a Users Guide to accompany the Village and its building(s) to ensure that staff, residents, and family can operate facilities in the Village as intended. The guide needs to be user friendly, widely available and included in new staff induction. The document does not need to be large – just a few well written pages with relevant information.

8 FUTURE PLANS

8.1 RESPITE

- The provision of respite care beds would be considered in a Stage 2 development of the Community Village.
- This would have a two-fold purpose:
 - to provide respite services for those who continue to live at home
 - to provide a transition experience so that adults living at home could gradually become accustomed to Village life.
- An on-line “Quick Beds” booking system should be pursued to allow flexible use of respite beds where vacancies arise unexpectedly –
 - beds are categorised by level of care needs
 - vacancies would be advertised on a web site
 - parents can book in on line for overnight or short stays
 - casual/weekly rates would apply.

8.2 CENTRE OF EXCELLENCE - OUTREACH FACILITIES

- Skills and expertise gained by staff at the Village may be used to provide programs for non-residents or younger children with disabilities in off site locations.
- Access by non-residents to day programs at the Village.
- Professional links with staff at other ACT facilities for people with a disability would be established to share knowledge and training.
- Opportunities would be sought for staff to transfer to other locations for periods of time so they can gain further experience and share their skills and knowledge.

Attachment 3

CLP Urban Village

Summary of Parent/Carer Survey

May 2009

The survey was collated on 31 May 2009 to enable the Steering Committee to be advised about the needs of families. There were 240 returns at this point. Further responses have been received since that time and CLP is committed to keeping the survey open so that all families and views can be presented to government. The survey will continue to be offered to families who would like to register an expression of interest in the project.

The Group

Of the surveys returned, 152 care-recipients were males, 87 females and 1 was not stated. All families had at least one person with a disability, but there were 13 families who have 2 or more children with a disability.

The Respondents

- **52%** of the carers were aged over 45 years, with 7 of these being over 65 years and 8 over 75. It is believed that these figures would be much higher if the group of people with a disability over 20 years of age were better represented.
- Almost all care recipients are still living in their family home.
- None of the surveys were filled out by care recipients.
- The age range of the care recipient was between 3 - 57 years.
- The biggest group of care recipients is under 20 years.

The Need

- There were 30 people who stated they are currently seeking accommodation options for the care recipient.
- Within the next 10 years a further **60%** of respondents will be seeking supported accommodation for the person they care for. The rest were unsure as to what the future will hold as their children were still quite young.
- Over half were specifically seeking an option identical or similar to the Village concept.
- **40%** were unsure and asked for more information, as they had not previously heard of CLP and most were families of the younger children.

- All care recipients had an intellectual disability/developmental delay with a “core limitation” in at least one of the following areas - self care, mobility or communication – many also had medical challenges.
- The survey results show that there is a high level of supervision needed for most care recipients in this group with **85%** of people needing moderate, high or one-on-one supervision.
- In all areas of everyday living tasks **81%** of the people surveyed stated that the person they cared for would need moderate, high or one-on-one assistance.
- **72%** of respondents indicated the person they care for would need moderate, high or one-on-one help with communication, in either making themselves understood or in understanding others. Many respondents indicated the effectiveness of the spoken language was determined by the situation and the levels of stress the person was under at the time.

The Vision

QUESTION 11 asked: *What is important to you about long-term accommodation for your person with a disability?*

In their responses, almost all families indicated that it would be “good”, “very good” or “essential” for the person with a disability to:

- be an active member of the Canberra Community **93%**
- associate with people other than just carers and people with a disability **97%**
- live in a community of people with a disability that would ensure their safety **87%**
- live in a community of people with a disability as that would increase their social and community interactions **86%**
- use general community facilities **98%**
- live in an environment similar to the best aspects of successful retirement communities **95%**