Housing & Environment

About this Domain (Housing & Environment)

Where and how we live is important to life satisfaction. Having a place to call home contributes to our sense of well-being, security, community, and autonomy. Home is where you can be yourself, engage in your preferred routines, come and go from, invite others into or, close others out from.

Many individuals we work with reside in settings where others decide their routines and place limits on their autonomy. In some cases, this has been determined as necessary for their health and safety. But for others, a less restrictive environment is appropriate and preferred.

In this domain, capture your interview specific to housing or the person’s living environment. Learn about any required restrictions to the person’s choice, freedoms, or access before you start this section of the assessment conversation. Within that context, discover the person’s preferences for where and how they want to live. Listen for concerns and desires related to where the person lives or prefers to live. Include goals for addressing concerns and/or searching for alternative living environments in the person’s plan.
Assessment Domains

Housing & Environment

Select setting that describes person’s current housing

- Resides in own housing
- Resides in community-based congregate setting
- Resides in institution
- Resides in correctional facility
- Homeless – including shelters, motels, hotels, cars, couch hopping, on street, etc.
- Other

_________________________ (Displays when ‘Other’ is checked)

If ‘Resides in own housing’ was selected, the following question will be displayed:

Type of "own" housing:

- Alone
- With immediate family
- With extended family
- With friends
- Other

_________________________ (Displays when ‘Other’ is checked)

If ‘Resides in community-based congregate setting’ was selected, the following question will be displayed:

Type of community-based congregate setting:

- Board & Lodge
- Community residential setting/Corporate Foster Care
- Family Foster Care
- Housing with services (not apartment)
- Other

_________________________ (Displays when ‘Other’ is checked)
If ‘Resides in institution’ was selected, the following question will be displayed:

Type of institution:
- ○ NF, including Boarding Care
- ○ ICF
- ○ Hospital
- ○ Regional Treatment Center
- ○ Other time-limited treatment program
- ○ Other
  ______________________ (Displays when ‘Other’ is checked)

Does the home and community-based services (HCBS) provider own the home or have their name on the lease with the landlord?
- ○ No
- ○ Yes
- ○ Unsure

At this time person is:
- ○ Not wanting or planning to move from current environment
- ○ Wanting or planning to move from current living environment

If ‘Not wanting or planning to move from current environment’ was selected above to the 1st question ‘Status of employment’, the following questions will be displayed:

Adapt your interview with respect to the person’s current living situation. Discover if person has recently moved. If person is homeless – discover prior housing history as to preferences, successful experiences, and current barriers. Learn about & understand preferred living choices, needs, and concerns. Listen for concerns that require mitigation or follow-up in the support plan; referrals. For those interested or open to finding another place to live, discover known or feared barriers to moving.

Use comment boxes to capture key points and summarize what you have learned or discovered regarding the topic.

Describe the things that are liked about where they live:

________________________________________________________________________
Assessment Domains

Describe what they wish were different or better about where they live:

________________________________________________________________________

Describe reported or observed safety or sanitation concerns. Make appropriate referrals and/or include in support plan.

________________________________________________________________________

Discussion notes for how concerns are or will be addressed. Make appropriate referrals and/or include as goal in support plan.

________________________________________________________________________

Discussion notes for exploring options for alternative housing. Make appropriate referrals and/or include as goal in support plan.

________________________________________________________________________

Informed choice decision:

- Yes - would like to begin process for finding an alternative living environment, and needs assistance – create housing goal in plan
- Yes - would like to begin process for finding an alternative living environment; prefers to do on own or with family/friends – create housing goal in plan
- Yes - willing to learn more about options or process before they decide about moving - create housing goal in plan
- No - Is not interested in moving; would like to work on resolving concerns - create housing goal in plan to address concerns
- No - Is not interested in moving; wants to continue to live where they are
Barriers to moving:

- None
- Can’t meet income requirements
- Concerns for health & safety by legal rep/team
- Credit history
- Criminal history
- Drug/alcohol use
- History of evictions or Unlawful Detainers
- Lack of affordable housing
- Lack of rental history
- Needs housing access assistance
- Personal safety concerns related to available locations
- Security deposit/first-month’s rent
- Tobacco use
- Transportation access / public transportation
- Other ______________________ (Displays when this option is checked)

Preferences/Needs:

- None/Prefers not to share
- Accessibility to home and all areas of home
- Accommodates desired routines and preferred schedule
- Accommodates my cultural preferences or needs
- Alcohol and/or tobacco use
- Availability of public transportation
- Have a pet
- Location - concerns for personal safety
- Location - to family/friends
- Location - to leisure/entertainment activities
- Location - to shopping, school, doctors, etc.
- Location - to work or jobs
- Own apartment/home
- Roommate(s)
- Space/room for caregiver
- Other ______________________ (Displays when this option is checked)
If ‘Wanting or planning to move from current living environment’ was selected above to the 1st question ‘Status of employment’, the following questions will be displayed:

Adapt your interview with respect to the person’s current living situation. Discover if person has recently moved. If person is homeless – discover prior housing history as to preferences, successful experiences, and current barriers. Learn about & understand preferred living choices, needs, and concerns. Listen for concerns that require mitigation or follow-up in the support plan; referrals. For those interested or open to finding another place to live, discover known or feared barriers to moving.

Use comment boxes to capture key points and summarize what you have learned or discovered regarding the topic.

Discussion notes for exploring alternative living environments:

• Status of planning or search efforts
• Note options that have been explored and/or considered
• Include comments about what is going well (with effort/progress)

Identify persons or agencies assisting individual. If needed, make appropriate referrals.

Describe concerns, barriers or issues with effort/progress. Indicate how concerns will be addressed.

Concerns with current environment that need to be addressed until move. Including reported or observed safety or sanitation concerns. Make appropriate referrals and/or include in support plan.
**Informed choice decision:**

- Yes - relocation goal with assistance is in current plan – retain housing goal in plan
- Yes - relocation goal with assistance is in current plan and alternative supports are needed to address concerns/barriers – update housing goal in plan
- Yes - relocation goal with assistance is needed/preferred – create new housing goal in plan
- Yes - relocation goal without assistance is preferred - create new housing goal in plan
- No – deciding to not seek alternative housing in coming year; suspend search effort; no longer a goal to move

**Barriers to moving:**

- None
- Can’t meet income requirements
- Concerns for health & safety by legal rep/team
- Credit history
- Criminal history
- Drug/alcohol use
- History of evictions or Unlawful Detainers
- Lack of affordable housing
- Lack of rental history
- Needs housing access assistance
- Personal safety concerns related to available locations
- Security deposit/first-month’s rent
- Tobacco use
- Transportation access / public transportation
- Other _____________________ *(Displays when this option is checked)*
Preferences/Needs:

- None/Prefers not to share
- Accessibility to home and all areas of home
- Accommodates desired routines and preferred schedule
- Accommodates my cultural preferences or needs
- Alcohol and/or tobacco use
- Availability of public transportation
- Have a pet
- Location - concerns for personal safety
- Location - to family/friends
- Location - to leisure/entertainment activities
- Location - to shopping, school, doctors, etc.
- Location - to work or jobs
- Own apartment/home
- Roommate(s)
- Space/room for caregiver
- Other ______________________ (Displays when this option is checked)

If ‘Resides in own housing’ OR ‘Resides in community-based congregate setting’ OR ‘Other’ was selected above to the 1st question ‘Select setting that describes person’s current housing’, the following questions will be displayed:

Rate (1-3) person's satisfaction with where they live and:

Access to community activities they prefer

- (1) Dissatisfied
- (2) Neither dissatisfied or satisfied (not discernable)
- (3) Satisfied

Access to community activities they prefer

- (1) Dissatisfied
- (2) Neither dissatisfied or satisfied (not discernable)
- (3) Satisfied

Access to community activities they prefer

- (1) Dissatisfied
- (2) Neither dissatisfied or satisfied (not discernable)
- (3) Satisfied
Person has moved in last 12 months?
  ○ No
  ○ Yes

*If ‘Yes’ was selected above the following questions will be displayed:*

**Indicate improved satisfaction with:**

**Access to community activities they prefer**
  ○ (1) Dissatisfied
  ○ (2) Neither dissatisfied or satisfied (not discernable)
  ○ (3) Satisfied

**Access to community activities they prefer**
  ○ (1) Dissatisfied
  ○ (2) Neither dissatisfied or satisfied (not discernable)
  ○ (3) Satisfied

**Access to community activities they prefer**
  ○ (1) Dissatisfied
  ○ (2) Neither dissatisfied or satisfied (not discernable)
  ○ (3) Satisfied

**Notes/Comments:**

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**Housing and Environment has been reviewed and updated?**
  □ Yes
Assessment Domains

Referrals & Goals (Housing & Environment)

What the person values and wants for their life

Support Plan Implications for meeting the person’s identified needs

Referrals Needed:

- Advocacy Services
- Assistive Technology Evaluation
- Disability Linkage Line® (1-866-333-2466)
- Environmental Accessibility Consultation
- Follow-Up to Safety Concerns of Lease
- HOME Line [https://homelinemn.org/](https://homelinemn.org/)
  (612-728-5767 or 866-866-3546)
- Home Maker Assistance
- Housing Access Services
- Housing Benefits 101 (HB101-mn.hb101.org)
  – information about housing
- HousingLink [https://www.housinglink.org/](https://www.housinglink.org/)
- Lead Agency Environmental Health Services
- Minnesota Department of Health
- Occupational Therapist
- Pest Control
- Protective Services
- Senior Linkage Line® (1-800-333-2433)
- Other
- Other

Referrals & Goals (Housing & Environment) has been reviewed and updated?

- Yes

Last update: 6/12/2017