The background of the document is a photograph of the Rhode Island State Capitol building. The building is a large, classical-style structure with a prominent central dome and several smaller domes. The architecture features columns and ornate details. The sky is a clear, bright blue. The text is overlaid on the right side of the image.

Meeting the Housing Needs of Rhode Island's Older Adults and Individuals with Chronic Disabilities and Illnesses

Adopted by the LTCCC on April 26, 2023

LONG TERM CARE COORDINATING COUNCIL

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SUBCOMMITTEE ON HOUSING ACCESS AND AFFORDABILITY

Report to the Long Term Care Coordinating Council

April 2023

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LONG TERM HEALTH BEGINS WITH SAFE, AFFORDABLE, AND ACCESSIBLE HOUSING

HOUSING AS HEALTH. The availability, affordability, and accessibility of housing is widely recognized as a “key social determinant of health,” and an important long term care concern. This is especially true for older adults and individuals with chronic disabilities and illness. State and local policies can make it easier, or more difficult, for the long term care population to remain in community-based housing, without sacrificing safety and access to services.

This report recommends new policy initiatives to address critical housing needs for the state’s older adults and individuals with chronic disabilities and illnesses, including both homeowners and renters, while incorporating existing policies which have been successful, but should be revised or expanded to meet current conditions and needs.

THE LONG TERM CARE POPULATION IN RHODE ISLAND. Rhode Island’s cities and towns are home to more than **200,000** older adults (65 years or older) of whom **38,000** are living with disabilities.

Approximately **111,000** additional Rhode Islanders younger than 65, including **13,000** minor children, are living with disabilities or chronic illnesses. More than **4,500** adults with intellectual or developmental disabilities live in the state; about **2,300** of them are living with their families, in community settings.

These are the people who comprise our long term care population and they, as well as the caregivers who support their daily lives and health, are the focus of this report.



Midjourney AI / ADA

Letter of Transmittal

To : Lieutenant Governor Sabina Matos
Chair, Long Term Care Coordinating Council (LTCCC)

From : Dr. Tony Affigne
Chair, LTCCC Subcommittee on Housing Access and Affordability

Date : March 22, 2023

Subj : Report on Meeting the Housing Needs of Rhode Island's Older Adults and Individuals with Chronic Disabilities and Illnesses

The search for safe, affordable housing is a challenge facing many Rhode Islanders, but for our state's older adults and individuals with chronic disabilities and illnesses, who are still living in community settings (and not in nursing homes), housing needs are especially urgent, risking their health and jeopardizing their continued independence. Cost is a major obstacle. At the beginning of 2023, more than **43,000** of Rhode Island's 115,000 elderly households are housing cost burdened, paying **more than 30% of monthly income** for rent, mortgage, and other shelter costs.

Excessive housing costs impact both homeowners and renters. More than **32% of our elderly homeowners**, and more than **51% of our elderly renters**, are housing cost-burdened. For adults of all ages who have disabilities or chronic illnesses, housing cost burdens are even more daunting, as nearly **30% of Rhode Islanders with disabilities**—nearly **42,000** people—have incomes below 150% of the poverty level—more than double the incidence of poverty among the population without disabilities. For all of these individuals, each month brings the dilemma of paying either for housing, or for other necessities including health care, food, medications, clothing, and transportation. This cost crisis is not sustainable.

The financial cost of housing, however, is just one of the housing challenges confronting Rhode Islanders whose age, illness, or disability qualify them for long term care services. Housing which is accessible, and appropriate to these individuals' physical and medical needs, is becoming more difficult to find, as the state's shortage of low- and moderate-income housing becomes more acute, and as an already aged housing stock grows antiquated and in need of upgrades. Homes and apartments which might have once been safe and accessible may no longer be so, without expensive repairs or additions including access ramps, accessible bathrooms, and the like.

In addition, our long term care population often requires housing that offers reasonable access to services and facilities, onsite or in nearby locations—but homes like these are also in short supply. We face a critical shortage of supportive housing for individuals with behavioral or developmental challenges; family-friendly, accessible (and affordable) homes for parents with disabilities who care for minor children; transitional and permanent housing, for individuals with long term care needs who are currently experiencing homelessness; and housing options for adults with disabilities who are currently living with aging parents or guardians, facing uncertain futures when those caregivers are no longer able to provide either care or housing.

There are solutions for all of these challenges, and some are currently available, but they are under-resourced and have limited supply. For example, aging adults who find it increasingly difficult to live fully independently, but do not need the extensive support provided by skilled nursing facilities, could live comfortably and safely in shared living quarters (sometimes called “Golden Girls” homes), or in accessory dwelling units attached to, or on the grounds of, the homes of family or friends, or in assisted living communities which provide shared meals and activities, while allowing residents substantial independence. Yet these options are only available to a small number of potential residents.

To address these needs, our subcommittee has worked diligently for nearly a year reviewing programs and data, and respectfully offers the attached report and recommendations for areas of critical need, suggestions for future initiatives, and information about partner agencies who share our concerns. We hope that with the endorsement and support of the full LTCCC, our recommendations will be adopted by the General Assembly and the Department of Housing, as elements of the State’s response to our ongoing housing crisis, in which older adults and those with disabilities are particularly at risk.

Members of the Subcommittee

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THE STATUS OF HOUSING FOR OLDER ADULTS AND THOSE WITH DISABILITIES

The State of Rhode Island needs to increase its investment in housing for our growing population of older adults and persons with disabilities, as it allocates public funds to address the various housing needs in our state. There exists a critical shortage of safe and affordable housing for low-income older adults and persons with disabilities, especially in congregate settings where waiting lists can exceed a year or more. We need to ensure that there is access to housing for these individuals, most of whom live on fixed incomes. Sustainable affordable housing for older adults and persons with disabilities is a key part of the aging services continuum. Indeed, numerous State commissions and work groups over the years have identified the lack of affordable housing in the community as a primary obstacle to rebalancing our long-term care system.

According to HousingWorks RI, 28% of households 55 and over are renters, 54% of renter households are housing cost burdened (e.g. paying more than 30% of their income for housing), and 26% are severely cost burdened (paying more than 50% of their income for housing). This is an important factor because research has shown that the lowest income older adults who spend more than half of their incomes for housing spend 50% less on food and medicine than their non-housing cost burdened peers. For comparison, in 2022 the wage required to pay rent for a typical two-bedroom apartment in Rhode Island was more than \$24 per hour—but the state’s minimum wage this year is \$13.00 per hour. The housing cost crisis will continue for the foreseeable future.

KEY RECOMMENDATION : MAKE HOUSING FOR OLDER ADULTS AND PERSONS WITH DISABILITIES THE STATE’S TOP HOUSING PRIORITY

Because safe, affordable, and accessible housing is so crucial for continued health, for the state’s older adults and individuals with chronic disabilities and illnesses, including both homeowners and renters, we strongly recommend that meeting critical housing needs of this population be defined as the State’s highest housing priority. We recommend that the General Assembly incorporate this priority in State policy; that the governor, general treasurer, and attorney general direct their offices to take appropriate steps to implement this priority; and that the Department of Housing, Housing Resources Commission, and Rhode Island Housing conduct a joint review to determine which existing policies have been most successful for the LTC population, and which should be revised or expanded to meet current conditions and needs.

Rhode Island desperately needs sustained investments to create and preserve safe, healthy and affordable homes for our older adults and persons with disabilities. A recent national study “Housing America’s Older Adults” by the Joint Center for Housing Studies at Harvard University found that under current trends, the country needs to add 50,000 units of affordable housing units every year for older individuals just to meet the demand of our aging population. While there is not a specific projection for Rhode Island, our demographics certainly indicate the need for additional affordable housing units. Plus it is clear that housing is a critical economic development issue and an important social determinant of health and community well-being. Having affordable and safe housing allows older adults and persons with disabilities in Rhode Island to live in the community and avoid more expensive settings. Any expansion of housing options will immediately help erase and / or shorten the existing waiting lists, suppress the continued increase of homelessness

experienced by older adults, and also help position our state to meet future demands for care and services for this population.

Fortunately, Rhode Island is in a good position to make investments in such housing, and supportive services, through the following revenue streams.

- The federal Department of Housing and Urban Development (HUD) operates the Section 202 senior housing program. This is the primary federal program to support the construction of new housing specifically designed for the frail older population and help them remain independent, as well as supporting Resident Service Coordinators who help residents connect to a wide range of needs including housekeeping, transportation, and more. As new tranches of funding become available from HUD, Rhode Island should ensure that it aggressively pursues these opportunities.
- Rhode Island passed another housing bond in 2021 of \$50 million for the Building Homes Rhode Island program. This program has been in existence for several years, based on successive bond enactments, but a small portion has gone to senior housing developments. This bond, and future ones, can be a critical resource to help support the development of senior housing and housing for those with disabilities.
- The SFY 2023 budget allocated \$250 million in ARPA funding for a wide range of important housing initiatives. A dedicated portion of this funding should be used to address the housing needs of our older population by supporting new development or the redevelopment of existing properties, such as nursing homes that have closed or are underutilized.
- Rhode Island has established a permanent revenue stream, based on a fee from real estate transactions, focused on housing needs. This revenue stream can support both construction / renovation, and also the concept of housing with services. The housing with services model incorporates a wellness nurse, a case manager, and other supports in a congregate setting. One example is the SASH model, established in Vermont, and is expanding in Rhode Island through Saint Elizabeth Community. But it is currently grant-funded and needs a consistent funding source.
- Rhode Island's Low Income Housing Tax Credit (LIHTC) program provides developers an incentive to create properties for low-income individuals and households, including older adults and persons with disabilities. It is a primary funding source for such properties and increasing the use of these tax credits for addressing the housing needs of older Rhode Islanders is a great resource.

It is complicated to piece together different funding streams to create affordable housing for older adults and persons with disabilities, but it can be done with commitment, coordination, and collaboration by developers, State agencies and other funding sources, and committed stakeholders. Rhode Island is at a critical juncture in addressing its housing needs, and we recommend that the aforementioned resources be utilized in a detailed and planful manner to ensure that sufficient funds are used to create housing for our older adults and persons with disabilities.

SUPPORTIVE HOUSING FOR INDIVIDUALS WITH BEHAVIORAL AND DEVELOPMENTAL CHALLENGES

Supportive Housing for individuals with behavioral health (mental health and substance use disorders) and intellectual/developmental disabilities is an evidence-based practice that allows individuals to live in the least restrictive setting in the community. Supportive Housing can be any affordable housing coupled with supportive services.

Supports may include treatment, housing stability services, employment and training opportunities, community connections and other community-based programs.

In Supportive Housing, the fluidity of service provision is important so that the intensity can quickly correspond to any changing symptoms and needs of the individual.

Supportive Housing Shortage. There is a serious shortage of housing options for individuals with behavioral health and intellectual/developmental disabilities. This forces individuals to live in far more restrictive living situations than is necessary, including institutions, group homes, or with family members, when their preference is to live independently in the community.



Getty Images/iStock

These individuals potentially end up homeless, living on the streets or in shelters.

KEY RECOMMENDATION : PROMOTE PUBLIC HOUSING PARTNERSHIPS TO BUILD 500 UNITS OF SUPPORTIVE HOUSING

To rapidly increase production of supportive housing units for individuals with behavioral and developmental challenges, the State should accelerate its partnerships with local public housing authorities, to expedite planning, approval, and development of at least 500 additional units before 2030, including a sufficient number of units which are physically accessible, using best principles of universal design.

Detailed Recommendations

Rhode Island needs an innovative approach to expand affordable housing development, establish a State voucher system, ensure the availability of supportive services, and address the workforce shortages and address the need for parity in rates for the provision of services.

Supportive Housing has been proven to be cost effective by reducing the use of expensive emergency services such as emergency departments, inpatient hospitalizations, and prisons.

Detailed Recommendations (cont'd)

- *Increase Production of Supportive Housing Units*
- *Explore with the Center for Medicaid/Medicare Services the use of Medicaid funds to support the creation of supportive housing.*
- *Collaborate with municipalities to address existing zoning and land use barriers.*
- *Partner with public housing authorities to build additional units.*
- *Develop and Expand Subsidy Programs*
- *Create a State-funded bridge subsidy*
- *Establish landlord incentives*
- *Establish a landlord mitigation fund*
- *Increase the number of community-based organization that are certified to provide Home Stabilization Services (Medicaid billable service).*
- *Expand training and technical assistance options for providers on housing retention supports.*
- *Create formal partnerships between housing developers and property management companies and community-based service providers.*
- *The supports that are provided to the SMI/SPMI population in supportive housing must be designed to be fluid; in other words, the intensity of services must easily increase or decrease depending upon individual needs. As each individual's symptoms may improve or possibly worsen, the services must quickly respond to this change to maximize that chances that the person may receive treatment at home in a timely fashion.*
- *All providers should include housing options counseling during in-take and discharge.*

An Olmstead Plan for Rhode Island

Rhode Island is one of a few states that has not invested in an Olmstead Plan and this committee recommends establishing a cross sector workgroup to develop an Olmstead Plan. This type of planning provides states with a roadmap towards inclusive community-based living, in the least restrictive setting, across the lifespan and for all disabilities.

KEY RECOMMENDATION : ADOPT AN OLMSTEAD PLAN

To better coordinate short-, medium-, and long-term planning, for inclusive, community-based living, for all disabilities, the General Assembly and Administration should take all necessary steps, to expedite adoption of an "Olmstead Plan" for Rhode Island, bringing together State agencies, advocates, providers, and individuals with disabilities to prioritize their needs across state government.

OPTIONS FOR ADDRESSING HOMELESS LONG TERM CARE POPULATION NEEDS

Rhode Island can end homelessness by providing deeply affordable housing coupled with supportive services, an approach which has been proven to be cost effective, and to solve other complex social challenges facing states across the nation. The experience of homelessness should be rare, brief, and non-recurring. Rhode Island's small size works in its favor and should be leveraged as a strength. The number of individuals experiencing chronic homelessness are not so intractable that we can't successfully house all. As a community we can end homelessness through collaborations with municipalities, State government, faith-based communities, business leaders, philanthropy, community-based service providers, community members and – most importantly - with individuals and families experiencing homelessness at the center of the solution.

KEY RECOMMENDATION : 600 NEW UNITS OF PERMANENT SUBSIDIZED HOUSING

Because the most successful policy to relieve homelessness is the most direct—the provision of affordable housing choices—we recommend an urgent State initiative to rapidly increase the supply of permanent housing, affordable for residents with very low incomes, using deep subsidies from federal and State resources, to create 600 such units over the next three years, including an adequate number of units which are physically accessible, using best principles of universal design.

Detailed Recommendations

- *Fund Diversion and Housing Problem Solving Programs- develop flexible resources to support Housing Problem Solving efforts to divert people from the shelter system.*
- *Increase the supply of and access to permanent housing that is affordable to very low income households—create 600 units of deeply subsidized housing using federal and State resources over the next three years. In order to develop supportive and affordable housing to scale across the state, strategies are required to address zoning, land use, and NIMBY (Not In My Backyard) challenges that can often present as barriers.*
- *Ensure that all newly constructed affordable housing includes an adequate number units which are physically accessible, using best principles of universal design.*



Midjourney AI / ADA

Detailed Recommendations (cont'd)

- *Increase access for people experiencing homelessness to public housing resources (e.g. Housing Choice Voucher Program, HCVP). Develop a State operating subsidy/ Including Rental Assistance. Mandate 20% of all housing units created are supportive housing by including the above mentioned operating subsidy in tax credit deals*
- *Increase leadership, collaboration and civic engagement - Develop a line of accountability to Opening Doors by re-establishing the Interagency Council on Homelessness (ICH) and creating a common set of outcomes for the ICH/Housing Resource Commission/State departments contributing to homelessness.*
- *Develop communications plan to increase awareness, and develop a plan to impact municipal zoning and land use at a state level to increase the number of developments across the state.*
- *Increase health and housing stability by implementing the Housing First service philosophy; train staff with Critical Time Intervention (CTI), Motivational Interviewing (MI), and Trauma Informed Care (TIC); ensure systemic barriers to housing are eliminated; increase capacity of community based service providers to implement Home Stabilization Services; implement the Pay For Success program for frequent users of the homeless system, including Department of Corrections, and Medicaid; ensure mainstream resources are collaborating with the homeless system to offer housing retention/stabilization services.*
- *Increase the number of Recovery Housing beds available statewide.*

HOUSING OPTIONS FOR COST-BURDENED LTC OWNERS AND RENTERS

Burdensome housing costs for Rhode Island's working class and very low income residents, including the LTC population, have always been a problem, growing only more severe after the "Great Recession" of 2007 and ongoing turmoil in private housing markets in the years since. The supply of affordable rentals has shrunk, while rising costs for home financing, building materials, utilities, and taxes have made homeownership more difficult for low- and increasingly, middle-income elders and persons with disabilities. As the cost of housing rises, other financial impacts are severe, making it more difficult for older adults and persons with disabilities to pay for necessities including health care, food, medications, clothing, and transportation.

Property Tax Relief. In response, Rhode Island's state and municipal governments, sometimes with federal resources and support, have enacted some policies to relieve costs and facilitate home improvements. Some municipalities have instituted property tax exemptions for older adults and persons with disabilities who are homeowners. For example, Providence currently offers such exemptions, ranging from \$307 to \$921 annually. East Providence exempts property tax assessments by \$27,900 for elderly homeowners. Cranston and Westerly have similar provisions. In addition, the State recently added \$4 million to the FY23 state budget, to increase a "Circuit Breaker Tax Credit" available to low-income seniors and adults with disabilities, raising the state's property tax credit to \$600.

Home Modifications. For both renters and homeowners, the Rhode Island Livable Home Modifications grant program, administered by the Governor's Commission on Disabilities, will pay 50% of the cost of adding accessibility features to existing homes and apartments, up to \$4,500. Eligible modifications include ramps, accessible bathrooms and kitchens, and similar improvements to improve the safety and usability of private residences in the community.

KEY RECOMMENDATION : MAKE IMPROVEMENTS TO EXISTING PROGRAMS TO RELIEVE COST BURDENS FOR OWNERS AND RENTERS

We recommend expansion of State and municipal property tax relief for owner-occupants who are older adults and persons with disabilities; increased cost-sharing percentages and maximum grant levels for the Livable Homes Modification program; more generous cost-sharing for low-income residents through LIHEAP and other energy assistance programs; adoption by the State of new appliance efficiency incentives, to supplement federal incentives; State financial and legal support for more effective municipal enforcement of residential building codes and minimum housing standards; and State support, financial and legal, for more effective enforcement of employment and antidiscrimination protections, for older adults and persons with disabilities who are able and willing to work.

Energy and Utilities Assistance. Other programs provide help with utility bills and home weatherization, such as the Low Income Home Energy Assistance Program (LIHEAP), administered by the Department of Human Services (DHS), and the Low Income Household Water Assistance Program (LIHWAP), Heating System Repair and Replacement Program (HSRRP), and Weatherization Assistance Program (WAP), which are managed by local community action agencies. Because these are means-tested programs, low-income older adults and persons with disabilities (as well as others with low incomes) are eligible to apply for assistance.

Lead Paint Remediation. Rhode Island Housing offers forgivable loans to cover the costs of lead paint remediation, for homes built before 1978, while Providence and Woonsocket offer similar programs for homes with children under six. These programs pay for replacement of windows and doors, interior and exterior painting, and removal of contaminated soil. In addition, a Residential Lead Abatement Income Tax Credit, up to \$5,000 per unit, is offered by the RI Division of Taxation.

Limited Impact. These state and local programs were designed to address many of the housing cost issues confronting homeowners who are older adults and persons with disabilities, and provide some benefits to renters. Indeed, reducing energy costs, help with safety and accessibility barriers, property tax relief, and lead hazard abatement are important steps towards relieving housing cost burdens. Unfortunately, these existing programs, while assisting many individuals in need, have barely impacted the overall affordability crisis. In 2020-21, for example, the LIHEAP program provided partial heating cost support for only about 26,000 households—of the estimated 45,000-50,000 cost-burdened households of older adults and persons with disabilities in the state. In 2021-22, just 690 homes received weatherization program assistance.

As a consequence, even with these programs in force, there remain more than 43,000 elderly households—including more than half of all elderly renters—who are currently paying more than 30% of their monthly incomes for housing, a number widely expected to grow in coming years.

Incomes Falling Further Behind Rents. In fact, the situation is already dire. For about a quarter of all Rhode Island renters in 2020, monthly rents were more than 50% of income; between January 2017 and January 2022, rents nationally rose from an average \$1,054/month, to \$1,322/month—a 25% increase in just 36 months—far outstripping any increases in fixed income sources including Social Security, SSI, and typical wages paid to low income workers who are older adults and persons with disabilities. In 2021, for example, of the approximately 42,000 workers with disabilities who were employed in Rhode Island, more than 13,000 earned less than \$15,000. In the same year, Zillow reports that RI’s median one-bedroom rents were \$1,600 per month, \$19,200 annually. This is clearly not sustainable.

The continuing, even worsening, mismatch between incomes and rents, should be addressed directly, through effective enforcement of fair housing, antidiscrimination, and labor law; through State advocacy for increased federal benefits (including increased Social Security and SSI payments); through elimination of State income taxes on federal benefits; and through government-wide support for higher minimum wages and broader access to living-wage employment opportunities, for Rhode Island’s older adults and persons with disabilities who are able and willing to work.

Detailed Recommendations

- *We recommend the expansion of existing State and municipal property tax relief programs for owner-occupants who are older adults and persons with disabilities, and their adoption in cities and towns where they do not currently exist; homes built before 1940, and before 1978, should qualify for more generous exemptions.*
- *To accommodate rising costs for building materials and assistive technology, we recommend additional improvements to the Livable Home Modifications Program, increasing the cost-sharing percentage to 75% and the maximum grant to \$7,500.*

Detailed Recommendations (cont'd)

- *Current energy and utilities assistance should be increased to cover a larger proportion of low-income residents' expenses for utility bills and weatherization, and should be expanded to supplement federal energy program assistance, for a wide range of energy efficiency improvements, including home appliances, smart thermostats, and similar enhancements.*
- *State financial support for more frequent municipal building inspections, and more effective enforcement of minimum housing standards, should be included in any housing-related legislation; renters who are older adults and persons with disabilities are frequently the victims of unscrupulous landlords who flout laws protecting tenants from unsafe conditions.*
- *Enforcement of antidiscrimination and employment protections for older workers, and those with disabling conditions, should be improved with greater resources and public visibility for the Rhode Island Commission on Human Rights and RI Commission on Prejudice and Bias, and initiatives to expand public awareness of workplace rights, including fair labor laws, should be implemented.*
- *Government officials at all levels in Rhode Island, should recognize the critical importance of closing the gap between low-earners' incomes and rising rents and other housing costs, and should support across the board, increased federal benefit levels, higher state and federal minimum wage, and more extensive fair wage protections for Rhode Island's older adults and persons with disabilities who are able and willing to work.*

ASSISTED LIVING COMMUNITIES

Assisted living (AL) is an important residential option for older adults and persons with disabilities who can live semi-independently and do not require the onsite medical and therapeutic resources of a skilled nursing facility. Such individuals and couples benefit from the 24-hour safety, prepared meals, transportation, flexible visiting, and leisure services typically provided in assisted living communities, allowing them to forestall or avoid altogether the very expensive and often restrictive environment of a skilled nursing facility. However, the cost of private-pay assisted living is too high for most individuals who may otherwise qualify. High cost limits access, and also limits demand for assisted living units, making it more difficult to justify owners' investment in expansion or construction of new AL communities.



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KEY RECOMMENDATION : CREATE SLIDING SCALE, COST-SHARING VOUCHERS FOR ASSISTED LIVING

We recommend that the State of Rhode Island establish a new cost-sharing voucher program, to make assisted living options affordable, on a sliding-scale, for older adults and persons with chronic disabilities and illnesses, whose income and/or assets are too high to qualify for Medicaid support, but too low for direct pay access. Alternatively, this could be modeled after the Office of Healthy Aging @Home Cost Share program.

Assisted living's social, health, and quality-of-life benefits for semi-independent older adults and persons with disabilities, and potential cost savings to the State and federal government, through reduced demand for Medicaid-funded nursing home beds, offer strong arguments to expand State support for publicly-funded assisted living.

Detailed Recommendations: The Challenge of Access and Affordability

- *We propose to significantly increase the share of existing assisted living units which house low-income, Medicaid-funded residents.*
- *We propose to establish sliding scale/tiered housing choice vouchers to support middle income residents whose income and assets are too low for private-pay, and too high for Medicaid.*
- *We propose new State incentives for developing, renovating, and building new and expanded assisted living communities, to serve the increased population of publicly-funded residents.*

Detailed Recommendations: The Challenge of Diversity

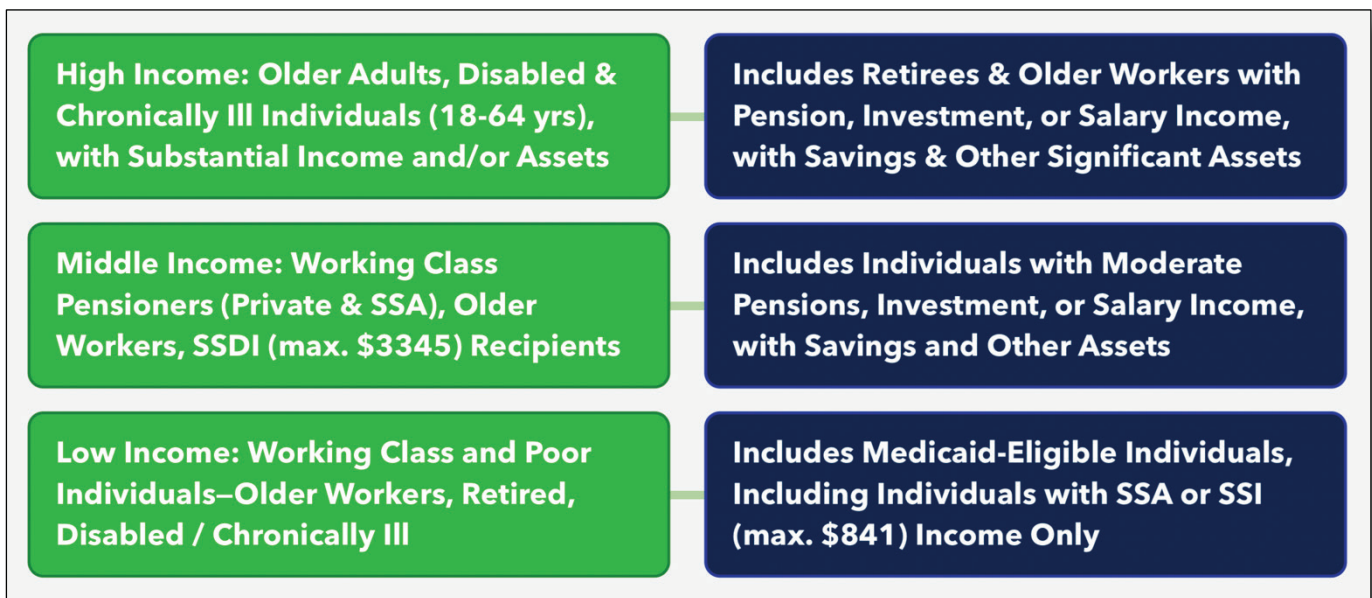
Because existing assisted living facilities in Rhode Island tend to serve private-pay, higher-income retirees who can afford \$3,000-9,000 per month, expanding access to more ethnically and economically diverse residents may pose challenges of culture, language, and social inclusion.

- *We propose new, State-supported educational and training programs for residents, staff, and facilities managers, located in the Department of Housing, designed to address cultural, language, and other challenges, and to support the continued diversification of assisted living communities.*

The Coming Housing and Care Crisis for Middle-Income Seniors

The population of potential assisted living community residents, i.e. older adults and persons with disabilities whose physical health remains robust enough for substantially independent life, but who need more support than fully independent living in the community can provide (even with home and community based services), includes some persons whose relatively high incomes and assets can support direct-pay rents, without public assistance; others with very low incomes and virtually no assets, who are likely to qualify for Medicaid support; and a large, rapidly growing middle-income group whose income and/or assets, while still modest, are too high to allow public support under existing programs, but too low to afford an average \$5,500 per month for direct-pay rents and medical costs (see the illustration). Our proposal for a new, State-funded sliding-scale housing voucher program is meant to open the assisted living option to a wider range of middle-income residents, a group which by 2033 is expected to comprise 16 million seniors nationally, 56 percent of whom will have mobility limitations and 54 percent of whom will have three or more chronic health conditions. Even including housing equity assets, an estimated 39 percent of those seniors will not have sufficient financial resources of their own, to pay for the level of care provided in senior housing, whether semi-independent or assisted.

Assisted Living Residents – Income Tiers and Public Support



ACCESSORY DWELLING UNITS

We know from surveys by AARP and others that a majority of Americans prefer to live in walkable neighborhoods that offer a mix of housing and transportation options and are close to jobs, schools, shopping, entertainment and parks. These preferences — coupled with the rapid aging of the United States’ population overall, the decrease in households with children and the national housing shortage — will continue to boost the demand for smaller homes and affordable, quality rental housing. As small houses or apartments that exist on the same property lot as a single-family residence, accessory dwelling units — or ADUs — play a major role in serving a national housing need. This traditional home type is reemerging as an affordable and flexible housing option that meets the needs of older adults and young families alike.

KEY RECOMMENDATION : EXPAND INCENTIVES FOR ACCESSORY DWELLING UNITS

State housing policy should offer appropriate and expansive incentives for municipalities to allow, and homeowners to create, significantly more accessory dwelling units in Rhode Island; should include a program of generous, targeted incentives to increase the number of ADUs available to adults with intellectual/developmental disabilities (I/DD) and to individuals with other disabilities; and should ensure that new ADU units are physically accessible, using best principles of universal design.

Policies Governing Accessory Dwelling Units

Since ADUs make use of the existing infrastructure and housing stock, they’re also environmentally friendly and respectful of a neighborhood’s pace and style. An increasing number of towns, cities, counties and entire states have been adapting their zoning or housing laws to make it easier for homeowners to create ADUs.

Current Provisions

The Rhode Island General Assembly passed legislation in 2017 that established a “by right” designation for ADUs created and utilized by family members 62 and older and family members with disabilities. In 2022, the Rhode Island General Assembly passed another piece of legislation on ADUs. This legislation (House Bill 7942 Sub B) amended the definition of an accessory dwelling unit (ADU) to provide a consistent, statewide framework and efficient process for the approval and permitted use of these units. The act would also permit ADUs to be counted towards low- and moderate-income housing requirements, if income and other limitations are met.



California Department of Housing and Community Development

Future Improvements

The law passed in 2022 was “enabling” legislation that allows municipalities to adopt the new statewide standards. However, this legislation does not mandate these standards on municipalities. Major changes to ADU law, as result of the 2022 legislation, include:

- Allowing the rental of ADUs to anyone, not just family members.
- Allowing installation of detached ADUs.
- “By Right” status for ADUs in municipalities with 20,000 sqft minimum lot requirements.
- Easing of zoning requirements in areas such as utilities, parking, and setbacks.
- Allowing inclusion of ADUs in municipality goals of 10% affordable housing.

The 2022 revisions are a step forward, but the state’s growing population of long-term care eligible residents, and the continuing shortage of appropriate housing, makes clear that further expansions are required. We propose the following steps:

Detailed Recommendations

- *We recommend that State housing policy should incentivize municipalities, encouraging them to allow more ADU production.*
- *We recommend that homeowners should also be provided with incentives to create ADUs on their properties.*
- *State law should include detached ADUs in the definition of accessory dwelling units, along with attached extensions, to allow production of units which are physically accessible using best principles of universal design.*
- *We recommend that ADUs be included in financial provisions of the Medicaid “Money Follows the Person” program.*
- *We recommend targeted incentives to increase the number of ADUs available to adults with intellectual/developmental disabilities (I/DD), and to other individuals with disabilities.*
- *We recommend an automatic State and federal rent subsidy qualification “by right” for ADUs serving low income LTC individuals,*
- *We recommend removal of the familial tenancy requirement from “by right” status.*
- *We support restrictions on the use of ADUs as short-term rental properties.*

FUTURE HOUSING OPTIONS FOR INDIVIDUALS WITH DISABILITIES WHO ARE NOW LIVING WITH AGING PARENTS

The State of Rhode Island offers long-term services and supports for older Rhode Islanders and individuals with disabilities. Many persons with disabilities remain living with family, parents or others, well into their adult years. For example, individuals with intellectual/developmental disabilities (I/DD) often live in their family home with aging parents who are in need of similar supports to assist them as they age in the community. Parents who require support to age in place often become eligible for various services functionally like those of their adult children. Conversely, many individuals with I/DD seem to age more quickly than the general population and could benefit from the expertise that is available in the system that serves older adults. Currently, services to the parents come through one State department and those of their adult children from another. The existing system all too often silos these services based on the department from which the services are contracted.

KEY RECOMMENDATION: PROVIDE TRANSITIONS AND OPTIONS FOR ADULTS WITH DISABILITIES, FOR LIVING BEYOND FAMILY CAREGIVERS

We recommend that all responsible State agencies should, with some urgency, identify which, and how many, individuals receiving Long Term Services and Supports, are facing the challenge of living beyond aging parents or other family caregivers; the entire long term care community should make future housing needs, and housing transition planning, a regular component in the Individual Support Plan process, and in any other services planning they manage for individuals with disabilities.

The result of these dually eligible families that deal with different State departments and programs is often confusing and stressful with overlapping or duplicative services provided by two different systems. This occurs despite the fact that the funds for the services may come from the same pool of State and federal dollars. In addition, because the funding and the service provision is coming from different places, often the support personnel also come from different places. There is a critical statewide shortage of these direct care providers that might be addressed and create greater efficiency if they could provide similar homemaker or home health supports to both generations in need.

Adults with Disabilities Living with Family Members

At present, nearly 2,000 Rhode Islanders with intellectual/developmental disabilities, aged 18-40, are currently living with their families. There are 468 additional I/DD individuals older than 40, still living with parents or other family members. Several hundred additional adults with other disabling conditions, including deafness, blindness, cognitive difficulties, ambulatory, self-care, and independent living difficulties, are also known to be living with family members—but the exact number is not known. For all of these groups, many of the family caregivers are themselves becoming aged and less able to provide care and support.

Rhode Island Individuals with I/DD Challenges, Living with Family, by Age Group

Age Groups	Count
40-49	269
50-59	116
60-69	69
70+	14
Total	468

Without intervention by the state's long term care community, and public policies to address this growing challenge, we fear that increasing numbers of semi- or barely-independent adults with disabling conditions, may suddenly find themselves struggling to find the housing and support they currently receive from loving, but aging, family members. We propose to address this growing concern with a number of policy and program changes.

Detailed Recommendations

- *We recommend that Rhode Island's Long-Term Services and Support's (LTSS) System adopt as a priority, person-centered approaches which ensure access to a range of supports that allow individuals to age in place in the community. This approach should include a household-level planning process, especially when multiple individuals within the same household are eligible for LTSS.*
- *The state's long term care community and advocates should prioritize new and expanded partnerships with development corporations, in order to incentivize the design and development of multi-generational community-based settings. These should address specific needs of individuals with intellectual/developmental disabilities, and their aging parents. If this type of community became available, it would allow adult children with I/DD, and their parents, to live together in the least restrictive setting and remain within an established community.*
- *The State should with some urgency identify which, and how many, individuals receiving Long Term Services and Supports, are facing this coming challenge.*
- *We recommend that the State prioritize and incentivize development of publicly subsidized, cost-sharing, sliding scale assisted living communities that specialize in providing housing and support services for family members who are aging, and their intellectually/developmentally disabled adult children, with a program design that allows services and supports to expand or contract as any of the individuals' needs require.*
- *We recommend that the State establish partnerships with, and provide incentives for, developers willing to create mixed income, multigenerational, enriched service housing communities, able to meet the service and support needs of Rhode Islanders who are elderly or have chronic disabilities or illnesses. This would allow individuals and families to remain in the community.*

Detailed Recommendations (cont'd)

- *We recommend that the State establish a family-centric approach to providing support services both across disabilities, and for older Rhode Islanders, by adding housing needs and residential transition planning to the Individual Support Plan or other services planning document, especially for individuals who receive LTSS through the person-centered options counseling program.*
- *As the long term care community develops new models to address the intergenerational needs of individuals with I/DD and other disabling conditions, who are living with aging family members, we strongly recommend a focus on consistency, and on prioritizing the ability to age in place to the greatest extent possible. The loss of a family member coupled with the loss of one's home is overwhelming and traumatic.*
- *The care community should create housing support models along a continuum ranging from intergenerational assisted living, to accessory dwelling units on the parent's property, to allow some independence for adult children remaining in their family home—with appropriate supports.*

SHARED LIVING ALTERNATIVES FOR LTC INDIVIDUALS AND CAREGIVERS

As more Rhode Islanders live longer and struggle to remain at home, there is increasing interest in alternatives to nursing homes and traditional assisted living residences. For people with high level of care needs who qualify for long-term care (LTC) assistance, shared living arrangements can simultaneously address social isolation, changing financial circumstances, and home maintenance challenges. This section will consider co-housing opportunities, adult foster care, and regulations impeding sharing living.

What exists in Rhode Island?

Co-housing - Rlte@Home is a program from EOHHS designed for individuals requiring considerable assistance with the activities of daily living and cannot live alone. Typically, the individual in need of care moves into the home of his or her “caregiver.” Eligible caregivers are relatives and friends, but not spouses. Caregivers are required to provide all personal care services and be on call 24/7, though it is not expected they provide 24/7 care.



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Caregivers are paid for their efforts and provided with training, nursing support, respite, and monitored for the quality of care they provide. Care recipients are expected to pay their caregiver for room and board from their SSI or Social Security checks. RI Medicaid does not pay for room and board.

Adult foster care - Single resident adult foster care is also covered through Rlte@Home. Rhode Island considers any home providing care for two or more adults to be an assisted living residence. What many people elsewhere think as adult foster care, the State considers to be assisted living. Rhode Island’s Global Consumer Choice Compact Waiver covers assisted living including small group homes.

When comparing adult foster care and assisted living, a point of differentiation is access to awake staff. In adult foster care, 24-hour access to assistance is available but the staff does not necessarily have to be awake, just available. In assisted living, there will be 24-hour awake staff. 16 states (including Massachusetts and Connecticut) offer financial assistance to relatives for adult foster care from sources other than their Medicaid programs. These are sometimes called nursing home diversion programs. Some of these programs are intended specifically for adult foster care. Others are not but have no legal language that precludes them from being used to pay for adult foster care.

KEY RECOMMENDATION: ADOPT CREATIVE NEW APPROACHES TO SHARED LIVING

We recommend that Rhode Island Medicaid rules be changed, to allow adult foster care to two or more individuals, without invoking assisted living regulations; and that State and local rules governing “rooming houses” be relaxed, to allow broader adoption of cooperative, shared living approaches, in which a small group of unrelated older adults and persons with disabilities and, when appropriate, caregivers providing support services, could live together in a home or apartment.

Adults with disabilities caring for children with disabilities - In Rhode Island, a parent’s disability can no longer be the sole basis to deny or restrict their rights in matters involving a child’s welfare, foster care, family law, guardianship, or adoption. Nor can it be used as the sole basis for an investigation. A new law (SB 56 and HB 5394) protects the best interests of children who have parents with disabilities by establishing procedural safeguards, including the education of hospital, child protective services and judicial staff in the equal protection rights of parents with disabilities in with regard to child welfare, foster care, family law and adoption.

Parents will be entitled to supportive services if keeping the family intact is judged to be in the child’s best interests.

Detailed Recommendations

- *Most state Medicaid programs that cover adult foster care do so through a HCBS waiver. Rhode Island should consider changing shared living/adult foster care regulations to allow adult foster care to two or more individuals without having to operate under assisted living regulations. Developing regulations for the Adult Supportive Care Residence Law could allow for such adult foster care.*
- *Amend RI General Laws, Housing Maintenance and Occupancy Code § 45-24.3- 12 - Rooming house regulations need to be updated and consistent throughout the state. – A home is considered a “rooming house” when a group of unrelated persons live together. This could be as few as three people and is set by local ordinance. The “Golden Girls” concept of shared living among a small group with supports in an individual home could be a helpful solution for many.*

HOUSING OPTIONS FOR FAMILIES: PARENTS AND GUARDIANS WITH DISABILITIES WHO ARE CARING FOR MINOR CHILDREN

Many disabled parents and guardians in Rhode Island are caring for children, and those individuals require appropriate housing and transportation to perform their parental duties. At present, there are 65.9 million parents in the United States, and nearly 7% of them, approximately 4.4 million persons, are living with a disability. *Moreover, parents with a disability experience higher rates of poverty than parents without a disability.*

National data show that 27% of parents with a disability experience poverty, nearly three times the 11% of parents without a disability who live in poverty.

Housing and Transportation Needs

Affordable family housing. Because parents with disabilities experience higher rates of poverty, finding accessible, affordable housing can be a significant barrier to health and wellbeing, for themselves and their children. This is particularly true for parents of minor children who rely on the Supplemental Security Income (SSI) program as their primary financial resource. In 2019, for example, SSI recipients on average received just \$1,234 per month, far less than the state's average 2 bedroom rent of \$1,771 per month.



KEY RECOMMENDATION: ACCOMMODATE PARENTS AND GUARDIANS WITH DISABILITIES, WHO ARE CARING FOR MINOR CHILDREN

The State should address housing needs of parents and guardians with disabilities who care for minor children, by setting minimum accessibility rules for new housing; expanding home modification financing; incentivizing adaptive vehicles and vehicle modification; incentivizing accessible transit routing; providing adaptive equipment and services for disabled parents.

This is a critical national problem. In a national survey of parents with disabilities, 64% encountered challenges related to securing appropriate housing. Unaffordability, inaccessibility, lack of sufficient space, and lack of child accommodations were often cited among these challenges. Of those who were able to secure housing, 60% reported that they had to make home modifications and 84% reported that they had to pay for the modifications themselves. Of those who were unable to make modifications to their home, 60% attributed that decision to lack of funds.

Accessible family housing. Virtually all of Rhode Island's older housing stock, and even much of that built in recent decades, offers few accessibility and parenting amenities for families in which parents with disabilities—especially physical and mobility challenges—are raising minor children.

Only a very limited number of new houses and apartments are designed with universal access in mind, with respect to both physical accessibility of the units, and proximity to accessible transportation. Fewer still combine accessible units with adjacent, accessible, age-friendly playgrounds, parks, and other recreation.

Adaptive parenting strategies. The National Research Center for Parents with Disabilities reported in 2019 that mothers with disabilities use creative, adaptive parenting strategies when caring for their babies and toddlers. They used adaptive baby care equipment, for example, including custom-made cribs that are modified to suit their needs. The report also found that personal care aides, while available to help with activities of daily living for the mother with a disability, were not permitted to assist with parenting activities.

Accessible family transportation. There is an equally challenging gap between parents with disabilities, and parents without disabilities, in terms of access to adequate transportation. Parents with disabilities face a significant transportation barrier. Approximately one-third (34%) of parents with disabilities have inadequate transportation, compared to just 16% of parents without disabilities. Lack of adequate transportation impacts a parent’s ability to reliably get to work and participate in their child’s education. This problem affects parents who are able to drive, when adaptive vehicles are too expensive to buy, and those without cars, when accessible public transit is too distant or too infrequent to meet family needs.

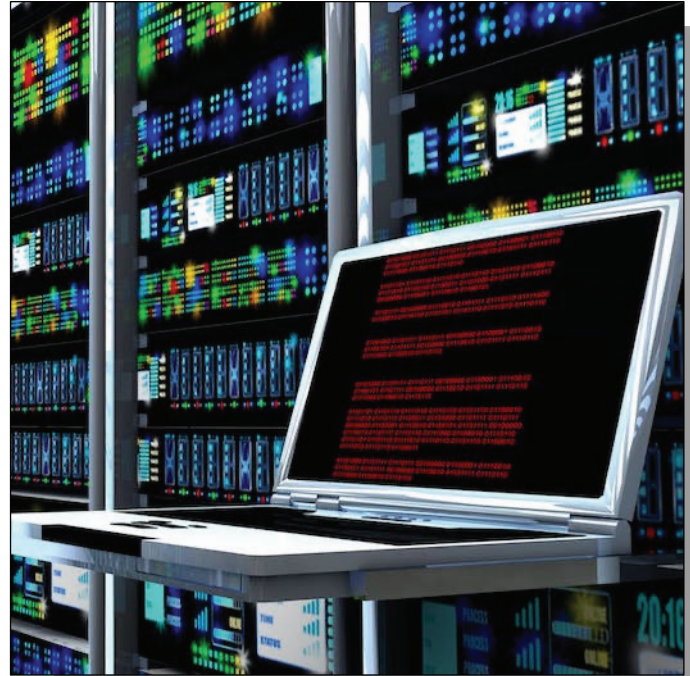
Detailed Recommendations

- *All new multi-unit housing in Rhode Island which requires permitting by state or municipal agencies, should be required to include ground-floor entry or elevator accessible, universal design units, equivalent to no less than 5% of the total number of permitted units. Public support for such developments, whether in-kind, infrastructural, or financial, should be contingent on confirmation of compliance with these requirements.*
- *State and municipal housing officials should ensure that all private landlords are given information about, and access to, home modification financing, to improve accessibility for their tenant families with disabilities.*
- *The State Department of Transportation should establish a sliding-scale cost-sharing program for the purchase of adaptive vehicles, and adaptive vehicle modifications, through small grants to buyers, or financing incentives for dealers and vendors.*
- *Developers of multi-family housing, and the Rhode Island Public Transit Authority, should be eligible for State incentives to encourage siting of accessible developments near bus routes, and to ensure that existing routes are modified as needed for proximity to accessible housing developments.*
- *Rhode Island should identify policies and legislation in those other states, including Idaho, Kansas, Massachusetts, Nebraska, South Carolina, Minnesota, and Vermont, which provide adaptive equipment and support services for parents and guardians with disabilities, who are caring for minor children.*
- *Rhode Island should amend its Medicaid policies to ensure that adaptive baby care equipment is included in the list of Medicaid-eligible durable medical equipment.*

COMPREHENSIVE AND ACCESSIBLE STATEWIDE HOUSING DATA

Our review has revealed a fragmented and somewhat opaque housing data environment in Rhode Island. Housing data are collected and analyzed by numerous public and private agencies, which focus their efforts on their own distinctive missions. No single agency takes responsibility for gathering and sorting housing-related data in its totality. Most users rely on publicly available data from the U.S. Census Bureau, but these samples can be limited in detail and are subject to margins of error.

Individual public and private agencies may collect data from their own client or consumer populations, but these are rarely shared beyond the collecting agency. Others, like HousingWorksRI, collate significant public data from many sources, to depict municipal and statewide conditions, but without neighborhood, family, or individual detail. State and municipal agencies who have statutory access to such finely-grained data are unable to share them for other than mission-centered purposes.



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KEY RECOMMENDATION : ESTABLISH STATEWIDE HOUSING DATA AGENCY

We recommend that the State establish a permanent statewide housing data collection and analysis agency, to collate and analyze comprehensive housing-related data from multiple federal, State, municipal, and private sources, and to make these data available to elected officials, public agencies, housing advocates, researchers, and the general public.

As a consequence, important descriptive and cross-tabulated data cannot easily be incorporated into housing planning and analysis. Public and private agencies, elected officials, and advocates are unable to track real-time changes in housing needs and conditions, must often rely on best-guess estimates, or must wait for another agency to complete its own analysis. We propose to address this problem through the creation of a permanent statewide housing data collection and analysis agency, housed in a regular department, with a professional staff of trained and experienced researchers and data analysts. Such an agency could safeguard potentially private information using best practices of data stewardship, could use legal and administrative authorities to obtain otherwise-embargoed data from State and local agencies, consistent with privacy practices and requirements, could collaborate with other public agencies, advocates, and private interests, in developing mechanisms for requesting, collecting, analyzing, and disseminating information for diverse housing-related uses, and develop an online portal where public releases of housing data analyses, downloadable data sets, and requests for data can be made available.

FUTURE FOCUS CONCEPT: ACCESSIBLE, MIXED-INCOME, TRANSIT-ORIENTED DEVELOPMENTS

For older adults and individuals with chronic disabilities and illnesses, an ideal urban environment includes a nearby neighborhood with accessible food, recreation, and medical services; easy access to mass transit; and public spaces which welcome visiting family and friends. All of these can add to the healthful value of the home and make continued health and happiness more likely. Unfortunately, “affordable housing” developments often neglect the need for a supportive surrounding community, and are sometimes located away from services and public transportation. Their sites may be selected because land, financing, and in some cases, abandoned industrial buildings, are available—not because nearby services and amenities would make living there safer and more appropriate. To meet Rhode Island’s future need for affordable housing, employment, sustainability, and social development, we envision a different approach, one which serves multiple populations and achieves a variety of social and economic goals.

Transit Oriented Developments. The style of urban design known as Transit Oriented Developments, or TODs, builds an entire neighborhood around proximity to a new or existing mass transit stop or station. Residential, service, commercial, and transit features are combined, at a



Landon Bone Baker Architects and Moody Nolan

location where entrepreneurs establish businesses, families locate households, and public agencies place offices and officials to serve local needs. In cities in the U.S. and elsewhere in the world, these communities are designed primarily for their environmental and economic advantages—creating new construction jobs and revenue opportunities for development corporations, minimizing the need for automobiles, parking, and public roadways, concentrating energy and resource-intensive activities in smaller spaces, and incorporating small-scale renewable energy systems and energy efficient designs. These are all valuable features which make TODs attractive mechanisms for economic development and, in some places, intentional gentrification.

Yet such TODs can become socially and economically exclusive, when they are initially planned as elite residential and commercial neighborhoods with high rents, boutique restaurants and shops, tourist attractions, and designs with little to offer families with children, elderly individuals and couples, or persons with disabilities. For example, at Hudson Yards in New York, typical modest one-bedroom apartments, built between 2017 and 2019, now rent for \$4,000-7,000 per month.

Mixed Income Transit Oriented Developments. In response, an architectural, political, and cultural shift towards mixed-income TODs, or MITODs, has lately taken root in places where more

inclusive politics and social diversity are the norm. These communities are specifically designed, from the beginning, to be welcoming spaces for low- and moderate-income residents, without neglecting the higher income groups who were TODs' first target populations. MITODs typically include substantial numbers of subsidized or otherwise affordable residences, a focus on age-friendly public spaces and recreational sites, and at some locations, the strategic placement of public services and government offices to serve diverse, mixed-income populations. The most extensive designs may also incorporate supermarkets, medical offices, and child care facilities, in addition to the gyms, restaurants, and shops which are common to all forms of TODs. Unlike the conventional, unrestricted TODs, developers of MITODs are obligated to provide many below market rate apartments, typically 20%-50% of total units, for low-income tenants. One such MITOD in Chicago's Bronzeville neighborhood, 43 Green, is scheduled to open Summer 2023, with half its 99 apartments set aside for low-income tenants, for whom one- to four-bedroom apartments will be available for \$956 to \$1140 per month (see the picture, above). Yet even with MITODs, the needs of older adults and individuals with chronic disabilities and illnesses can be an afterthought at best, or at worst, are not incorporated at all into the developments' social planning and physical design. We envision a better approach.

KEY RECOMMENDATION: ENGAGE STATE-SPONSORED PLANNING TO DEVELOP ACCESSIBLE MIXED INCOME TRANSIT ORIENTED DEVELOPMENTS

We recommend that State officials responsible for housing policy convene a site review, design, and development planning process, to solicit federal support, and coordinate private and public initiatives to build one or more innovative Accessible Mixed Income Transit Oriented Developments (AMITOD). These are designed to meet the affordable housing needs of older adults and individuals with chronic disabilities and illnesses—and non-disabled, non-elderly residents as well—while creating mixed income, multi-purpose, sustainable communities, featuring a wide range of amenities and services for individuals, couples, and families, adjacent to bus or rail stations, and financed through a mix of public and private sources.

Accessible Mixed Income Transit Oriented Developments (AMITOD). Numerous potential development sites around Rhode Island are adjacent to busy RIPTA routes, and in Warwick as well as Pawtucket/Central Falls, near MBTA stops as well. We envision a state-managed review and planning process, to identify potential AMITOD locations, solicit developer interest, and coordinate State and local planning and permitting to facilitate completion. In November 2022, the Federal Transit Administration awarded \$13.1 million in planning grants to 19 projects in 14 states, to “help organizations plan for transportation projects that connect communities and improve access to transit and affordable housing.” The projects we envision would combine all the best features of MITODs with a clear commitment to meeting the needs of Rhode Island’s older adults and their families, as well as individuals with chronic disabilities and illnesses and their families. This calls for designing comprehensive communities which are financially and physically accessible, setting aside at least 50% of rental units at below-market, subsidized rates; apartments with bedroom capacities to serve individuals, couples, and families; best-in-class accessibility features including mobility, communication, safety, and security amenities; social service, recreation, early childhood education, medical, therapy, and community spaces; convenience and grocery stores, pharmacies, restaurants; a full suite of sustainability and energy efficiency elements including onsite solar energy production, passive and active heating and cooling; and abundant green space.

FUTURE FOCUS CONCEPT: ONE-STOP HOUSING INFORMATION PORTAL, DROP-IN, AND CALL CENTER FOR LTC INDIVIDUALS AND FAMILIES

In the course of our subcommittee’s work, we have become painfully aware of challenges facing older adults and persons with chronic disabilities and illnesses, in their search for accessible, affordable housing. They must rely on information from case managers, family, and friends who may or may not be familiar with housing options. They must navigate local, State, and federal agencies, nonprofit organizations, and private housing management companies. Reliable, up-to-date information about financial options is difficult to locate. Waiting lists can be incomplete, inaccurate, or nonexistent. And, the situation is in constant flux, as housing units come online or are removed from the market, rent increases and evictions are increasing, and entire neighborhoods are undergoing profound transformation, in which the needs of residents who are older adults and persons with disabilities are barely considered. Even housing professionals find this fragmented, constantly changing system to be a perennial challenge. It’s true that finding and keeping an affordable place to live is a problem facing many thousands of Rhode Islanders, not just the LTC population. But we believe the particular health and safety needs older adults and persons with disabilities call for a special effort to simplify and expedite the flow of critical and timely information.



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KEY RECOMMENDATION: CREATE STATEWIDE HOUSING INFORMATION CENTER FOCUSED ON NEEDS OF OLDER ADULTS AND PERSONS WITH DISABILITIES.

We strongly recommend creation of a one-stop housing information center serving the needs of older adults and persons with disabilities, with a web portal, drop-in location, and call center, where individuals, family members, caregivers, case managers, officials, advocates, and others, can find accurate and timely information about housing accessibility and affordability options.

A professional staff trained to interact with the LTC public and their advocates, with immediate and easy access to interpreting services as needed, and 24-hour availability, would fill an essential need and prevent needless risk, delay, and confusion. A dynamic, interactive web portal where Information Center staff, and the public, can find updated information, should be developed and maintained. We recommend assigning joint responsibility for staffing and managing the Center, to the Office of Healthy Aging and the Governor’s Commission on Disabilities, to clearly indicate the Center’s focus on these populations, and to ensure that the two agencies’ networks are full engaged with the Center’s operations.

SUMMARY OF KEY RECOMMENDATIONS

MARCH 2023

R.I. Long Term Care Coordinating Council - Subcommittee on Housing Access and Affordability

KEY RECOMMENDATION : MAKE HOUSING FOR OLDER ADULTS AND PERSONS WITH DISABILITIES THE STATE'S TOP HOUSING PRIORITY

Because safe, affordable, and accessible housing is so crucial for continued health, for the state's older adults and individuals with chronic disabilities and illnesses, including both homeowners and renters, we strongly recommend that meeting critical housing needs of this population be defined as the State's highest housing priority. We recommend that the General Assembly incorporate this priority in State policy; that the governor, general treasurer, and attorney general direct their offices to take appropriate steps to implement this priority; and that the Department of Housing, Housing Resources Commission, and Rhode Island Housing conduct a joint review to determine which existing policies have been most successful for the LTC population, and which should be revised or expanded to meet current conditions and needs.

KEY RECOMMENDATION : PROMOTE PUBLIC HOUSING PARTNERSHIPS TO BUILD 500 UNITS OF SUPPORTIVE HOUSING

To rapidly increase production of supportive housing units for individuals with behavioral and developmental challenges, the State should accelerate its partnerships with local public housing authorities, to expedite planning, approval, and development of at least 500 additional units before 2030.

KEY RECOMMENDATION : ADOPT AN OLMSTEAD PLAN

To better coordinate short-, medium-, and long-term planning, for inclusive, community-based living, for all disabilities, the General Assembly and Administration should take all necessary steps, to expedite adoption of an "Olmstead Plan" for Rhode Island, bringing together State agencies, advocates, providers, and individuals with disabilities to prioritize their needs across state government.

KEY RECOMMENDATION : BUILD 600 UNITS OF PERMANENT SUBSIDIZED HOUSING

Because the most successful policy to relieve homelessness is the most direct—the provision of affordable housing choices—we recommend an urgent State initiative to rapidly increase the supply of permanent housing, affordable for residents with very low incomes, using deep subsidies from federal and State resources, sufficient to create 600 such units over the next three years.

KEY RECOMMENDATION : MAKE IMPROVEMENTS TO EXISTING PROGRAMS TO RELIEVE COST BURDENS FOR OWNERS AND RENTERS

We recommend expansion of State and municipal property tax relief for owner-occupants who are older adults and persons with disabilities; increased cost-sharing percentages and maximum grant levels for the Livable Homes Modification program; more generous cost-sharing for low-income residents through LIHEAP and other energy assistance programs; adoption by the State of new appliance efficiency incentives, to supplement federal incentives; State financial and legal support for more effective municipal enforcement of residential building codes and minimum housing standards; and State support, financial and legal, for more effective enforcement of employment and antidiscrimination protections, for older adults and persons with disabilities who are able and willing to work.

KEY RECOMMENDATION : CREATE SLIDING SCALE, COST-SHARING VOUCHERS FOR ASSISTED LIVING

Serving the “missing middle.” We recommend that the State of Rhode Island establish a new cost-sharing voucher program, to make assisted living options affordable, on a sliding-scale, for older adults and persons with chronic disabilities and illnesses, whose income and/or assets are too high to qualify for Medicaid support, but too low for direct pay access.

KEY RECOMMENDATION : EXPAND INCENTIVES FOR ACCESSORY DWELLING UNITS

State housing policy should offer appropriate and expansive incentives for municipalities to allow, and homeowners to create, significantly more accessory dwelling units in Rhode Island; should include a program of generous, targeted incentives to increase the number of ADUs available to adults with intellectual/developmental disabilities (I/DD) and to individuals with other disabilities; and should ensure that new ADU units are physically accessible, using best principles of universal design.

KEY RECOMMENDATION: PROVIDE TRANSITIONS AND OPTIONS FOR ADULTS WITH DISABILITIES, FOR LIVING BEYOND FAMILY CAREGIVERS

We recommend that all responsible State agencies should, with some urgency, identify which, and how many, individuals receiving Long Term Services and Supports, are facing the challenge of living beyond aging parents or other family caregivers; the entire long term care community should make future housing needs, and housing transition planning, a regular component in the Individual Support Plan process, and in any other services planning they manage for individuals with disabilities.

KEY RECOMMENDATION: ADOPT CREATIVE NEW APPROACHES TO SHARED LIVING

We recommend that Rhode Island Medicaid rules be changed, to allow adult foster care to two or more individuals, without invoking assisted living regulations; and that State and local rules governing “rooming houses” be relaxed, to allow broader adoption of cooperative, shared living approaches, in which a small group of unrelated older adults and persons with disabilities and, when appropriate, caregivers providing support services, could live together in a home or apartment.

KEY RECOMMENDATION: ACCOMMODATE PARENTS AND GUARDIANS WITH DISABILITIES, WHO ARE CARING FOR MINOR CHILDREN

The State should address housing needs of parents and guardians with disabilities who care for minor children, by setting minimum accessibility rules for new housing; expanding home modification financing; incentivizing adaptive vehicles and vehicle modification; incentivizing accessible transit routing; providing adaptive equipment and services for disabled parents.

KEY RECOMMENDATION : ESTABLISH STATEWIDE HOUSING DATA AGENCY

We recommend that the State establish a permanent statewide housing data collection and analysis agency, to collate and analyzed comprehensive housing-related data from multiple federal, State, municipal, and private sources, and to make these data available to elected officials, public agencies, housing advocates, researchers, and the general public.

KEY RECOMMENDATION: ENGAGE STATE-SPONSORED PLANNING TO DEVELOP ACCESSIBLE MIXED INCOME TRANSIT ORIENTED DEVELOPMENTS

We recommend that State officials responsible for housing policy convene a site review, design, and development planning process, to solicit federal support, and coordinate private and public initiatives to build one or more innovative Accessible Mixed Income Transit Oriented Developments (AMITOD). These are designed to meet the affordable housing needs of older adults and individuals with chronic disabilities and illnesses—and non-disabled, non-elderly residents as well—while creating mixed income, multi-purpose, sustainable communities, featuring a wide range of amenities and services for individuals, couples, and families, adjacent to bus or rail stations, and financed through a mix of public and private sources.

KEY RECOMMENDATION: CREATE STATEWIDE HOUSING INFORMATION CENTER FOCUSED ON NEEDS OF OLDER ADULTS AND PERSONS WITH DISABILITIES.

We strongly recommend creation of a one-stop housing information center serving the needs of older adults and persons with disabilities, with a web portal, drop-in location, and call center, where individuals, family members, caregivers, case managers, officials, advocates, and others, can find accurate and timely information about housing accessibility and affordability options.

APPENDIX A : MISSION AND GOALS OF THE SUBCOMMITTEE

RATIONALE FOR SUBCOMMITTEE

Formed in response to Lieutenant Governor Sabina Matos's concern that many individuals who are older adults, or have chronic disabilities and illnesses, may have insufficient access to affordable, accessible, supportive, and appropriate housing options.

OBJECTIVES - GATHER DATA FOR POPULATIONS, HOUSING NEEDS, CURRENT OPTIONS, AND ALTERNATIVES

- Estimate overall housing need for LTC service-eligible population (individuals who are older adults or have chronic disabilities and illnesses), with respect to availability, accessibility, and cost
- Estimate number and location of currently unhoused LTC service-eligible population
- Calculate estimates for the total current number of units/beds in each housing category (nursing home, subsidized rental, unsubsidized private home, assisted living, etc.)
- Estimate the number and location of prospective units/beds under construction, development, or in planning, by category
- Identify alternative, innovative LTC housing options, with examples from other states

INFORMATION SOURCES

- Data from federal, state, and municipal housing agencies
- Meet with full LTCCC for input from all members
- Host public subcommittee meetings with customers, advocates, housing providers, and developers
- Solicit advice from AARP-RI, HousingWorksRI, Age Friendly Rhode Island, Rhode Island Coalition to End Homelessness, members of state and local senior citizens' councils and advocacy/interest groups, and long term care organizations and associations
- Solicit advice and information from departments, boards, and agencies of the state, documentary and otherwise, that may be necessary or desirable to facilitate the objectives of the subcommittee.

OUTCOMES

- Report findings to the full LTCCC, for possible inclusion in the LTCCC annual report to the governor and the general assembly, setting forth recommendations for the betterment of long-term housing access and affordability, for the elderly and adults with chronic disabilities and illnesses.
- Report findings and recommendations to the full LTCCC, for transmittal to appropriate state agencies as needed.

APPENDIX B: KEY DEFINITION: WHAT ARE “CHRONIC DISABILITIES AND ILLNESSES”?

There are many definitions in law, program standards, and agency practices, for the term “disability.” The definition varies depending upon the context in which the term is used. For the purposes of the LTCCC Subcommittee on Housing Access and Affordability, we recommend that following definition of “disability” be used:

Recommended Definition of Chronic Disability and Illness

- *A “Disabled or chronically ill” person is any individual who lives with one or more mental or physical impairments that substantially limit one or more major life activities.*
- *An individual who lives with a “mental or physical impairment” may have, for example, blindness or a vision impairment or low vision; deafness or hard-of-hearing; mobility impairment; HIV infection; intellectual/developmental disabilities; substance use disorder; chronic fatigue; traumatic brain injury; and mental illness. The term major life activity may include seeing, hearing, walking, breathing, performing manual tasks, caring for oneself, learning, speaking or working.*

More significant than the definition of disability or chronic illness is the determination of whether the individual meets the level of care for the service that is sought.

The goal of this subcommittee is to create recommendations for increasing access to community-based housing opportunities for older Rhode Islanders and people across disabilities to ensure:

1. That services are available to assist in obtaining and retaining housing;
2. That housing is physically accessible to individuals who have or are likely to develop mobility impairments;
3. That accommodations are readily available to create a safe environment for those with blindness or a vision impairment or low vision; deafness or hard-of-hearing; or a dysfunctional sensory system (e.g., sensory integration disorders in autism);
4. That housing is available for individuals who can live in an independent setting with the assistance of a live-in aide, thus requiring units that have an extra bedroom; and,
5. That, when appropriate, affordable assisted living is available.

Because we are a subcommittee under the LTCCC, the LTSS program requirements are necessary to review, as well, as they will provide the resources that support independent living, for example, home health services, homemakers, environmental modifications, special medical equipment, and case management.

Programmatic Requirements, Long-Term Services and Supports (LTSS)

Publicly funded long-term services and supports (LTSS) are available for people with chronic illnesses or disabilities who need a certain level of care and meet the eligibility criteria. What follows are several portions of Rhode Island regulations that pertain to LTSS and non-LTSS, non-I/DD

adults with disabilities. Chronic illnesses and disabilities that meet the functional/clinical level of care may be eligible for LTSS.

Eligibility (as of February 2023)

People must meet both the financial and functional/clinical “level of care” need to qualify for Medicaid Long Term Care. In addition, a person’s resources (cash, savings, etc.) must be less than \$4,000. Please note: if a person’s monthly income is over a certain amount, they may have to pay towards the cost of their LTSS services.

The type of services one receives depends on one’s level of care needs (from, EOHHS.gov).

In “Medicaid Long-Term Services and Supports: Functional/Clinical Eligibility” (210-RICR-50-00-5), functional disability is defined as:

“Functional disability” means a deficit or deficits in the capacity to perform the activities of daily living and/or the instrumental activities of daily living of sufficient magnitude that alone, or in conjunction with certain health conditions, constitutes a need for the level of care LTSS typically provided in an institutional setting.

APPENDIX C : ABOUT THE SUBCOMMITTEE MEMBERS

Tony Affigne, Chair

Dr. Tony Affigne is a professor of political science and public policy at Providence College. Over the past 40 years he has served on or chaired numerous public boards including, for example, the Mount Hope Neighborhood Land Trust, Fox Point Neighborhood Housing Corporation, Parents' Advisory Committee for Special Education, Community Development Block Grant Citizens Review Board, Coastal Resources Management Council, and RI Latino Civic Fund. He lives in Providence.

David Bodah

David Bodah is executive director of the Rhode Island Assisted Living Association, where he represents the interests of assisted living residences by advocating for the highest level of independence and quality of life for aging individuals and those with disabilities.

Tom Boucher

Tom Boucher serves as the Chief of External Affairs for PACE-RI, a health care provider and insurer for older adults with complex medical needs who wish to remain living at home. In this position, he is responsible for community and government relations, grant writing, and contributing to the organization's business development and strategy.

Michelle Brophy

Michelle Brophy is Associate Director at the Rhode Island Department of Behavioral Healthcare, Development Disabilities & Hospitals (BHDDH) where she focuses on inter-departmental relations for vulnerable populations. She is the "Chair at Large" of Rhode Island's Continuum of Care, the policy, planning, and funding body for addressing homelessness, and serves on the Medicaid Home Stabilization Certification Review Committee. Prior to state service she was Rhode Island Director of the Corporation for Supportive Housing (CSH) from 2003-2013, and was previously Family Self Sufficiency Coordinator and Supportive Housing Program Administrator at RI Housing.

Deb Burton

Deb Burton, MS is Executive Director of RI Elder Info and creator of rielderinfo.com. RI Elder Info maintains the most comprehensive, expert-curated, multilingual, Federal, State and Local resources for Seniors, Caregivers and the Professionals who serve them.

Ruth Feder

Ruth (Ruthie) Feder is on the staff of the Division of Behavioral Healthcare and works within the Planning, Program Development and Implementation Unit. Her work is extremely varied but she focuses much of her time on regulations, certification standards, and legislation. She co-chairs the Department's Equal Opportunity Advisory Committee. In her community, Ruthie is the co-chair of the local housing authority and is the president of its affiliated non-profit affordable housing development entity.

Carrie Miranda

Miranda is the executive director of Looking Upwards, a Middletown based nonprofit providing services to children and adults with intellectual disabilities and other challenges. She has served in this role for the past 19 years. She is also the current board secretary of the Community Provider Network of Rhode Island, the Rhode Island representative for ANCOR (the national trade association for providers of residential services for individuals with disabilities). Carrie has partnered on creative housing initiatives with Church Community Housing Corporation and SWAP. She lives in Portsmouth.

Matt Netto

Matt Netto is the Associate State Director of Advocacy and Outreach for AARP Rhode Island. Over the past 17 years Matt has held positions at several local and national not for profit organizations. He currently sits on the Governor’s Commission on Aging and several other committees and commissions. Matt lives in Cumberland.

James Nyberg

James Nyberg is the executive director of LeadingAge RI, a trade association that represents nursing homes, assisted living residences, senior housing providers, adult day centers, home health agencies, and the PACE program in RI. In this role, he engages in advocacy, member services, education planning, and other activities.

Tina Pedersen

Tina Guenette Pedersen is a motivational speaker who currently is CEO, Founder and People Connector of her own national non-profit, RAMP (Real Access Motivates Progress). She works with all businesses, professions, and first responders on all areas of communication and best practices for working to include the disability community. She sits on the Governor’s Commission on Disabilities as Vice Chair, and Chair of the Awareness committee. She is a community member of many commissions, businesses, and organizations to ensure all people—no matter their ability—are included in the conversation.

APPENDIX D : PARTNER AGENCIES

HomesRI <https://homesri.org>

Housing Network of Rhode Island <https://housingnetworkri.org>

HousingWorksRI at Roger Williams University <https://www.housingworksri.org>

RI Coalition to End Homelessness <https://www.rhomeless.org>

RI Elder Info <https://rielderinfo.com>

RI Governor's Commission on Disabilities <https://gcd.ri.gov/>

RI Housing Resources Commission <https://ohcd.ri.gov/housing-resources-commission>

RI Office of Healthy Aging <https://oha.ri.gov>

RI Office of Housing and Community Development <https://ohcd.ri.gov/>

U.S. Department of Housing and Urban Development, Rhode Island Field Office
https://www.hud.gov/states/rhode_island/offices

APPENDIX E : DATA SOURCES

U.S. Census Bureau. 2021. *American Community Survey 5-Year Estimates*. "Table S1810 Disability Characteristics." Access online at <https://data.census.gov/table?t=Disability&g=0400000US44>

U.S. Census Bureau. 2021. *American Community Survey 5-Year Estimates*. "Table S1811: Selected Economic Characteristics For The Civilian Noninstitutionalized Population By Disability Status." Access online at <https://data.census.gov/table?q=S1811>

U.S. Census Bureau. 2021. *American Community Survey 5-Year Estimates*. "Table S2502: Demographic Characteristics for Occupied Housing Units." Access online at <https://data.census.gov/table?q=S2502&g=0400000US44&tid=ACSST5Y2021.S2502>

U.S. Census Bureau. 2021. *American Community Survey 5-Year Estimates*. "Table DP05: ACS Demographic and Housing Estimates." Access online at <https://data.census.gov/table?t=Older+Population&g=0400000US44&tid=ACSDP5Y2021.DP05>

APPENDIX F : LINKS AND CONTACTS FOR FURTHER INFORMATION

Health Home Community Resource Guide <https://www.sumhlc.org/resources/community-support-and-resource-guides/health-home-resource-guide/>

Rhode Island Housing (Low & Moderate Income Housing By Community) <https://www.rihousing.com/low-mod-income-housing/>

Rhode Island Housing (Owners) <https://www.rihousing.com/owners/>

Rhode Island Housing (Renters) <https://www.rihousing.com/renters/>

Rhode Island Kids Count <https://www.rikidscount.org/Data-Publications/Data-Publications-Overview>

RI Housing Rental Resource Guide https://www.rihousing.com/wp-content/uploads/Rental-Resource-Guide_2022-1.pdf

U.S. Department of Housing and Urban Development. 2023. "Housing Resources for Seniors: Rhode Island." Access online at https://www.hud.gov/states/rhode_island/homeownership/seniors

U.S. Department of Housing and Urban Development. 2023. "Rental Help: Rhode Island." Access online at https://www.hud.gov/states/rhode_island/renting

Rhode Island Governor's Commission on Disabilities (Livable Homes Modification Grant Program) <https://gcd.ri.gov/ri-livable-homes-modification-grant>

APPENDIX G : EXTERNAL REPORTS AND REFERENCES

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Aurand, Andrew, Dan Emmanuel, Matthew Clarke, Ikra Rafi, and Diane Yentel. 2022. *Out of Reach: The High Cost of Housing*. National Low Income Housing Coalition. Access online at <https://nlihc.org/oor>

Austin, Mason, Allison Brooks, Winston J. Dong, Jr., and Robert Hickey. 2017. *The Mixed-Income Housing TOD Action Guide*. The Center for Transit-Oriented Development for The Great Communities Collaborative. Access online at https://www.nlc.org/wp-content/uploads/2017/03/Guide_Mixed-Income-TOD-Action-Guide.pdf

Cromwell, Molly. 2022. "Renters More Likely Than Homeowners to Spend More Than 30% of Income on Housing in Almost All Counties." U.S. Census Bureau, December 8, 2022. Access online at <https://www.census.gov/library/stories/2022/12/housing-costs-burden.html>

Culhane, Dennis, Dan Treglia, Thomas Byrne, Stephen Metraux, Randall Kuhn, Kelly Doran, Eileen Johns, Maryanne Schretzman. 2019. *The Emerging Crisis of Aged Homelessness*. University of Pennsylvania (AISP). Access online at <https://aisp.upenn.edu/wp-content/uploads/2019/01/Emerging-Crisis-of-Aged-Homelessness.pdf>

Department of Housing, City of Chicago. 2021. "New Mixed-Income, Transit-Oriented Development in Historic Bronzeville Community." News release, September 14, 2021. Access online at <https://www.chicago.gov/city/en/depts/doh/provdrs/renters/news/2021/july/43-green--tax-increment-fund-multi-family-loan-low-income-housi.html>

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- HousingWorksRI. 2022. *Housing Fact Book*. Access online at <https://www.housingworksri.org/>
- Joint Center for Housing Studies of Harvard University. 2019. "Housing America's Older Adults 2019." Cambridge: Harvard University. Access online at https://www.jchs.harvard.edu/sites/default/files/reports/files/Harvard_JCHS_Housing_Americas_Older_Adults_2019.pdf
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- Schaeffer, Katherine. 2022. "Key Facts about Housing Affordability in the U.S." Pew Research Center. Access online at <https://www.pewresearch.org/fact-tank/2022/03/23/key-facts-about-housing-affordability-in-the-u-s/>
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- U.S. Department of Transportation, Federal Transit Administration. 2022. "Transit Oriented Development." Access online at <https://www.transit.dot.gov/TOD>
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