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The Design and Build of 'Special Needs' Housing for Developmentally and Physically Disabled Persons

Major Study

Robert Aquino
April, 1993

MAJOR STUDY

THE DESIGN AND BUILD OF 'SPECIAL NEEDS' HOUSING FOR DEVELOPMENTALLY AND PHYSICALLY DISABLED PERSONS

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DEDICATED TO:

RALPH VOLPI
As a Source of my Inspiration

ACKNOWLEDGEMENTS

The preparation of this Major Study is attributed to the contribution of a number of people. Each having a unique influence on my views of 'Special Needs' Housing, the building industry in Ontario and my self esteem. Accomplishing this task of preparing a Major Study represents a great achievement in my education. Therefore, I would like to take this opportunity to extend my gratitude to these key individuals who have encouraged my efforts and guided me through this study.

Beginning with my two advisors, Ms. Pamela Cluff of Associated Planning Consultants Inc., and Ms. Anne Dundas of Dundas and Garrick Associates Inc. Both advisors have extended their knowledge and imported their resources into the preparation of this report.

A special thanks is owed to my faculty coordinator Professor Maurice Lerman, who has been instrumental in guiding me through my research and analysis of this topic.

To my family, I owe a debt of gratitude for their patience and understanding. The work that felt as though would never end has been completed and I would like to extend thanks to everyone who has contributed.

Finally, I would like to express my appreciation for the assistance of a close and special friend. Her contribution cannot be summed up in words alone. I do not believe that words can even begin to express my gratitude for her encouragement and guidance during the preparation of this major study.

Robert Aquino

TABLE OF CONTENTS

1.0 INTRODUCTION:

1.1	The Purpose of This Study	1
1.2	The Problem Statement	1
1.3	The Role of 'Special Needs' Housing	2
1.4	The History of 'Special Needs' Housing	3
1.5	The History of Group Homes	6

2.0 CONCEPT/NEEDS OF USER:

2.1	Demographic Considerations	8
2.2	Definition of User Needs	15
2.3	Planning According to the Clients Specific Needs	17
2.6	Future Projections/Economy	19

3.0 PLANNING CONTEXT:

3.1	Existing Projects	20
3.2	Requirement of New Facilities	23
3.3	Community Concerns	24

4.0 SUPPORT SERVICES:

4.1	Personal Assistance Programs	26
4.2	Need for Transitional Skills Training Program	29

5.0 ORGANIZATIONS INVOLVED:

5.1	Charitable Organizations	31
5.2	Ministry of Housing	32
5.3	Ministry of Community & Social Services	34
5.4	Service Delivery Agencies	38

6.0 DESIGN PROCESS:

6.1	Introduction to Design Issues	39
6.2	Design Criteria for Spaces/Accommodation	40
6.3	Other Considerations	53
6.4	Implementation	57

7.0 REGULATORY FRAMEWORK & COMMUNITY INTERACTION:

7.1	Zoning & Planning Requirements	59
7.2	Metropolitan Toronto Draft Official Plan	62
7.3	Building By-Laws	62
7.4	Fire Safety Requirements	64

8.0 MANAGEMENT PROCESS:

8.1	Project Development	67
8.2	Conceptualization	67
8.3	The Project Planning Stage	70
8.4	Construction	72
8.5	The Operation Stage	74
8.6	Economy of Scale	75

9.0 CONCLUSIONS:

9.1	Summary of Findings	76
9.2	Concluding Statement	78

10.0 BIBLIOGRAPHY & REFERENCES:

APPENDIX A -- Typical Case Study: "Group Home in North York".

APPENDIX B -- Questionnaire: Client Information Profile.

APPENDIX C -- Problem Identification Matrix.

APPENDIX D -- Group Homes, Metropolitan Toronto, 1987.

APPENDIX E -- Group Home Operator's Neighbourhood Dialogue Guidelines.

APPENDIX F -- Solicitor's Certificate #1.

APPENDIX G -- Initial Project Submission "560".

APPENDIX H -- Project Application "1414".

APPENDIX I -- Standard Budget Package (Ministry of Community & Social Services).

APPENDIX J -- Design Illustrations.

APPENDIX K -- Metropolitan Toronto Draft Official Plan; Policies.

APPENDIX L -- Management Plan (City of Toronto Fire Department).

APPENDIX M -- Housing Types.

1.0 INTRODUCTION:

1.1 The Purpose of This Study
1.2 The Problem Statement
1.3 The Role of 'Special Needs' Housing
1.4 The History of 'Special Needs' Housing
1.5 The History of Group Homes

1.0 INTRODUCTION:

1.1 THE PURPOSE OF THIS STUDY:

During the course of my studies at Ryerson Polytechnical Institute, I have been intrigued by the application and use of management skills in the field of project management. In this study, I have had the opportunity to apply the knowledge that I acquired to a different segment of our field, a segment that involves helping handicapped persons in our community. Awareness of this subject is very important to our profession because disabled persons in our society have become a recognized group that is in need of our assistance. I have learned in my years at Ryerson, that we must work with the environment not against it, and that we should build what is needed. This major study is an opportunity to reflect on the insight I acquired from my program and to explore another area within the construction process.

1.2 THE PROBLEM STATEMENT:

'Special needs' housing is fundamental for independent living of disabled persons. This particular kind of accommodation may vary according to the client's specific needs. The housing project will differ in accordance to the type of disability that must be accommodated. Therefore, the objective of this study is to develop an understanding of 'special needs' housing for developmentally and physically handicapped persons as a basis for determining appropriate criteria, such as those administered by the Ministry of Housing and the Ministry of Community and Social Services, in order to facilitate the proper development of such projects.

The contents of this paper shall be structured to evaluate the current status of 'special needs' housing in Ontario. In particular, my major study will focus on group homes which is one example of 'special needs' housing. Group homes serve as a model example because of their generic applicability to all other areas of 'special needs' housing.

As a whole, I have undertaken extensive research on the topic by consulting: governmental agencies that are involved in the administration and regulation of 'special needs' housing, disabled persons themselves and those organizations that represent their interests, as well as professional consultants that work directly in this field of study, and a lengthy list of academic texts, materials and statistical reports.

1.4 THE HISTORY OF 'SPECIAL NEEDS' HOUSING:

The Canadian Constitution (The British North America Act, 1867) states that it is the responsibility of the province to provide health and social services, rather than the Federal Government of Canada.[1] Under the Constitution, the Government of Canada was given jurisdiction over special classes such as war veterans, Indians, and prisoners in penitentiaries. After Confederation, during the colonial period, public welfare was the responsibility of the municipalities, under the provision of poor law and municipal statutes. Municipalities had to make provisions for the poor of all classes, while the provincial government did little other than operate jails and asylums. By the end of the 19th century, there was a need for special services and the provinces began to enact legislation to provide institutions for the "Feeble minded", disabled, and aged.[2] These facilities were locally operated by municipalities, and private agencies, with some provincial financial support.

Elizabethan-type Poor Laws were practiced during the colonial period in the Atlantic provinces. Development of residential institutions was influenced by the English Workhouse. Many of these institutions were established in Nova Scotia and New Brunswick, where the population was much less such as in New Foundland and P.E.I. they established central institutions administered by the provincial government. The predominate pattern of organization, up until 1961, included public congregate facilities expanded by voluntary institutions.[3]

Quebec was influenced by France and particularly by the traditional system of monastic institutions, where specialized and congregate facilities were included under private charity, and religious support. When the Quebec Public Charities Act which provided public support for institutional care was passed, it was extended to outside social agencies by interpreting them as "institutions without walls".

In Canada up until 1961, the model was mainly private charitable institutions, that were the churches and state responsibility. Ontario was not influenced by Europe as much as Quebec. In 1830 legal provisions were made to establish houses of industry by the Municipalities. In the larger centres voluntary institutions began to develop. These types of institutions became eligible for grants and subsidies from the province in 1874. Ontario began to develop public and voluntary institutions. A wide range of legislative measures governing institutional care in Ontario were administered by the province or by mature policies of support.[4]

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[1] Ministry of National Health and Welfare. Disabled Persons in Canada. Ottawa: 1981, p.68

[2] Ibid., p.68

[3] Provincial Gerontologist (1975 - 1987). Mr. Lawrence Crawford.

[4] Canada Mortgage and Housing Corporation. Municipal Role in the Supply and Maintenance of Low Cost Housing, The: A Review of Canadian Initiatives. Ottawa: Prepared by the Centre for Human Settlements, 1990, p.11

Canada during the post-war period had a variety of specialized institutions and services, both for hospital care and for sheltered special care. The three main categories of special care facilities, provided by residential institutions were supervisory, personal and nursing home care. There also existed three main types of hospital care, starting with acute care, convalescent care and chronic care and treatment, as well as allied special hospitals, such as rehabilitation centres, children hospitals and mental hospitals. As a result these special institutions now receive improved public support, control and supervision. Since 1956 the Federal Government has contributed half of the assistance cost to residents of the special care institutions, under the Unemployment Assistance Act and Canada Assistance Plan (1966). Under the Hospital Insurance and Diagnostic Services Act (1958) and the Medical Care Act (1966), the assistance together with the insured services program, have provided federal funds on a cost-sharing basis, for those who receive care in health and welfare institutions.[5]

In 1946 Canada Mortgage and Housing Corporation (CMHC) was established as a Crown Corporation. It was responsible for administering the National Housing Act. CMHC did not at that time introduce special programs for disabled people as part of its general policy, but did incorporate this aspect formally into its policies in the 1970's. It did, however, develop housing and environments that favoured disabled persons. The promotion of barrier-free design, and modifications to programs resulted in dwellings accessible by disabled people. Generally accessibility was promoted by CMHC through designs for elevator accessed apartments, provided by private developers seeking assistance under insured lending programs.[6]

To help fund systematic market research CMHC established a "start-up" grant for housing sponsors to ensure that they had adequate funds to develop designs, and operating systems. The sponsor was also required to provide market research to illustrate such housing was needed, and general statistics on those interested in occupying the accommodation. Experience has shown that before a non-profit group can go ahead with construction or purchase, the process may take several years.

Canada Mortgage and Housing Corporation has generally sponsored accommodation with private or shared residents bedrooms, plus some modest space to deliver support services. One apartment building, known as 1010 Sinclair includes such amenity space to deliver support services to the residents, and is used for persons who want to live on their own after coming out of an institution. Within these apartment projects there are people known as co-ordinators, some of whom are from local social agencies who help liaise with the building owners to ensure that they are prepared for wheel chair users. The sponsoring group provides the initial force, and is responsible for appointing consultants and maintaining continuity including ongoing operations.

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[5] Ministry of National Health and Welfare. Disabled Persons in Canada. Ottawa: 1981, p.70

[6] Ibid., p.72

Sponsors can alter existing housing making it accessible to disabled persons with low income. By the 1980's, CMHC's prime object was to provide Capital Grants to disabled home owners, and to alter their own facilities. Loans were also made available to public or municipal non-profit sponsors, while others were designed for private charitable non-profit groups (for example the Canadian Paraplegic Association and Cheshire Homes), that were specifically involved with the special housing needs of handicapped persons.

In 1986, the administration of all social housing programs in Ontario was turned over to the Province. From 1986 until the present, the Province of Ontario has funded the vast majority of social housing units with the exception of a small number of units developed each year under the Federal/Provincial Program. Under the Federal/Provincial Program, capital and operating costs are shared by the two levels of government. CMHC continues to insure the mortgages for all social housing in Ontario.[7]

Supportive housing for persons with 'special needs' is typically achieved through a process whereby non-profit groups apply for funding for the shelter component from the Ministry of Housing and for support service funding from the Ministry of Community and Social Services or the Ministry of Health depending on the nature of the disability. Once the group receives funding approval from both ministries, they are responsible to continue the project by approaching consultants in order to develop the housing project according to the approved proposal. [8]

The capital costs are mortgaged through private sector, lenders and amortized over a period of 35 years. Once the housing is occupied, the Ministry of Housing provides a monthly subsidy cheque to cover mortgage payments and operating costs, further detail to how both Ministries function is discussed in section five.

Money is always a problem in these projects, and social service support programs are generally co-opted to assist at some point, with financing provided by either the provincial or municipal government. CMHC, as of 1992 has discontinued its co-op housing program, but the province heavily subsidizes co-ops. A co-op housing program differs primarily from private or municipal non-profit in that it is member driven i.e. residents are expected to be "members" of the co-op and therefore to share in the responsibilities of running it. Whereas non-profit housing projects are owned by the non-profit corporation. Awareness of the needs of disabled persons is still growing, and today we are seeing more resources being allocated to research which is reflected in the change that is occurring to our existing facilities (i.e. subways). This topic has not been widely discussed in the past, but is definitely a critical issue for today. What we will be looking for in the future are suitable housing units which also have personal support services for disabled persons, (i.e. a total service and shelter package).

---

[7] Dundas and Garrick Associates Inc., Anne Dundas (Development Consultant, Principal).

[8] Dundas and Garrick Associates Inc., Anne Dundas (Development Consultant, Principal).

1.5 THE HISTORY OF GROUP HOMES:

Historically in Ontario, institutions have been used to house those who were unable to care for themselves. Until the 1950s, people with 'special needs' or disabilities were seen as an embarrassment to society and frequently sent away to live in institutions. After 1950, other alternatives were being considered and different types of housing were made available for those with special needs. The change was initiated by the growing awareness of people, that those who were labelled as "mentally retarded" often had much more potential than what was previously recognized.[9]

A group care model, which was provided to orphans, had been established in Austria and Yugoslavia, and later this model was used in Ontario. Almost immediately, group homes proved to be very successful as residential care facilities. Although originally intended for children, they also gained widespread popularity as a form of accommodation for adults. Heightened awareness in this country and elsewhere alerted the general public and families to the fact that institutions were isolating. This led people to believe that institutions were no longer the appropriate facility for those with 'special needs', or disabilities. This change in attitude was largely the result of the provincial government's shift in attitude towards institutional care, which occurred as a consequence of the work of advocacy groups. Once this awareness was felt by government, de-institutionalization became the common policy by the mid 1960's, based on the belief that, if placed in a more homelike setting, and given the appropriate support service, those who lived in institutions could live more humane and productive lives.

This idea was then given a trial run, by moving small groups of people out of institutions and into residential neighbourhoods. After a period of time, these new settings appeared to have beneficial results, which allowed the idea to spread to countries throughout the world. By the mid 1970's, the group home process began to pose certain problems for the municipalities, such as: problems of how group homes should be defined, and under which zoning by-laws they could be covered. The Government of Ontario defines a group home as;

> "a single housekeeping unit in a residential dwelling in which three to ten persons (excluding supervisory staff or receiving family) live as a family under responsible supervision consistent with the particular needs of its residents. The home is licensed or approved under provincial statutes and in compliance with municipal by-laws."[10]

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[9] Jennifer Wilson. Group Homes in Ontario. Toronto: Thompson Educational Publishing Inc., 1991, p.3

[10] Ibid., p.6

This definition of a group home simply shows that anything less than three persons or more than ten, would not be considered a group home. The character and growth of communities are controlled through the use of zoning by-laws which specify the purposes for which land in each area of a municipality may be used. Zoning restrictions can lead to the inappropriate placing of group homes, for example in light industrial areas which certainly does not lend itself to social integration of the residents. In 1978 the provincial government introduced a policy of encouraging municipalities to permit group homes in all residential areas. This provincial policy contained guidelines in an information package for all municipalities, and recommended that municipal group-home policies:

1. provide a definition for group homes;

2. establish group homes as a permitted use in all residential designations;

3. prevent undue concentration by requiring reasonable distances between facilities (or some other device to the same end);

4. provide for the continuation of any existing group homes not meeting the requirements of the zoning by-laws; and

5. provide for the municipal registration of group homes.[11]

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[11] Ministry of Community and Social Services. Community Residential Services: for Developmentally Handicapped People. Toronto: 1982, p.12

2.0 CONCEPT/NEEDS OF USER:

2.1 Demographic Considerations
2.2 Definition of User Needs
2.3 Planning According to the Clients Specific Need
2.4 Future Projections/Economy

2.0 CONCEPT/NEEDS OF USER:

2.1. DEMOGRAPHIC CONSIDERATIONS:

People who are disabled would like to control their own lives, as independently as possible. They want to contribute to their society as full working citizens, but they also want autonomy to chose what they feel is best for their lives, including where and how they live.

If a person with a disability wants to have this level of independence, they will continue to demand a greater range of housing options. They need shelter options which will help them maintain, or help them develop an independent life style. Research has shown that more and more persons with disabilities do not want to live in institutional - care facilities, but rather they wish to be a part of the community. The only way they can fulfil this type of lifestyle is to have suitable housing to live in, adequate support services, accessible transport networks and a barrier free community in which to work or play. In order for these needs to be satisfied, government and the housing industry must promote different ways of building or approaching housing, and must also overcome specific accommodation problems and to be sensitive to the type of housing needed by disabled persons. For this to occur people in the housing industry must be well informed.

For the purposes of differentiation of the different types of functional disability, the following definitions are used by HALS and Statistics Canada in the 1986 Census:

Mobility -- Limited in ability to walk, move from room to room, carry an object for 10 metres, or stand for long periods.

Agility -- Limited in ability to bend, dress or undress oneself, get in and out of bed, cut toenails, use fingers to grasp or handle objects, reach, or cut own food.

Seeing -- Limited in ability to read ordinary newsprint or to see someone from four metres, even when wearing glasses.

Hearing -- Limited in ability to hear what is being said in conversation with one other person or two or more persons, even when wearing a hearing aid.

Speaking -- Limited to speak and be understood.

Other -- Limited because of learning disability or emotional or psychiatric disability, or because of developmental delay.

Unknown -- Limited but nature not specified.[12]

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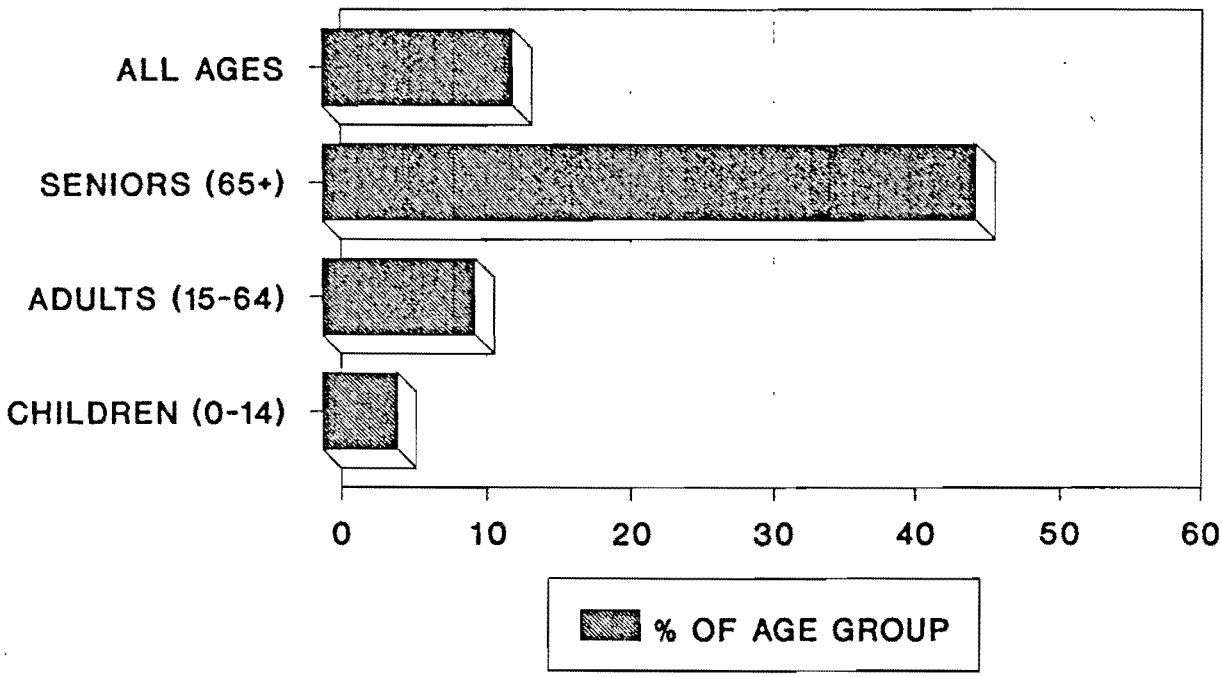
[12] Ministry of Citizenship, Office for Disabled Person. "Statistical Profile of Disabled Persons in Ontario: Volume II". Toronto: 1990, p.3

The results from the HALS survey indicated that the total disabled population of Canada is 3.3 million persons. This represents about 13 per cent of the total population of Canada. (as seen in Figure 2.1). This survey shows that disability increases with age, therefore there will be people who are not yet disabled but who may eventually become so. According to the survey, 5.2 percent or 277 400 children 14 years and under, 10.6 percent, or 1 817 adults between 15 and 64 years and 45.5 percent, or 1 221 900 seniors aged 65 and over had some difficulty in carrying out one or more of the Activities of Daily Living (ADL). Due to the rapid growth of the 75 years and over age group , the rate of disabilities is expected to increase, over the next 40 years.[13]

FIGURE 2.1
PERCENTAGE OF CANADIANS WITH DISABILITIES, BY AGE GROUP



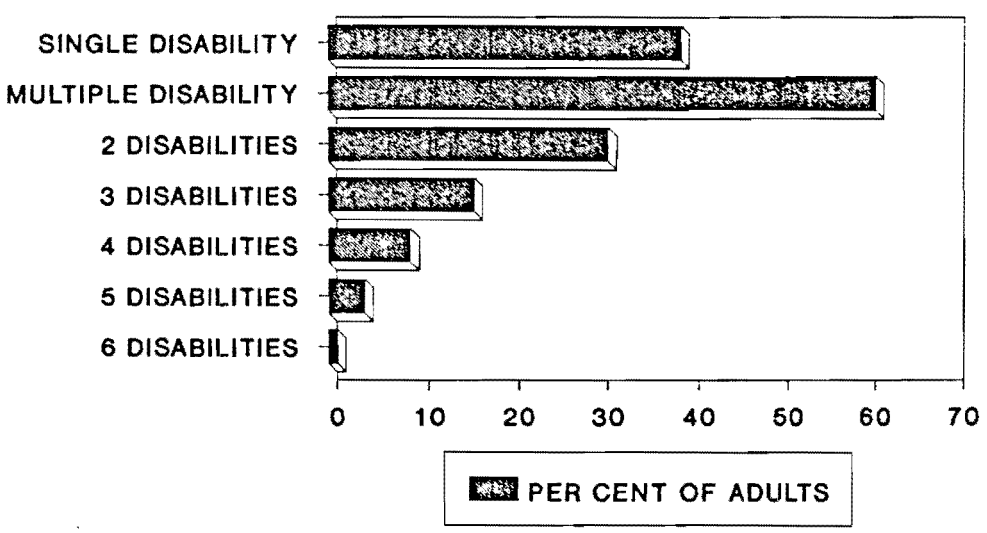
SOURCE: CMHC. HOUSING CHOICES FOR CANADIANS WITH DISABILITIES. 1992, P.3

[13] Canada Mortgage and Housing Corporation. Housing Choices for Canadians with Disabilities. Ottawa: 1992, p.3

Research on accommodation arrangements from the Health and Activity Limitations Survey (HALS) and the 1986 Census of Canada, estimates that 91.5 per cent of the disabled people live within the community and only 8.5 per cent live in institutions. There are differences in the type of accommodation for disabled people and for those without a disability (i.e. people with a disability are most likely to be living in an apartment, rather than in an inaccessible house). Over 15 per cent of severely disabled persons live alone, compared with 8 per cent of non-disabled persons. They want their independence. The largest concentration of disabled Canadians is in the province of Ontario, which had 1.263 million disabled persons in 1986. This represents approximately 38 per cent of all disabled persons in Canada.

In Canada, disabled persons with "mobility" and "agility" limitations are the largest groups. Sixty-five per cent of the disabled adults living in households and institutions are mobility disabled and 58 per cent are agility disabled. Within a household setting, 49 per cent had mild disabilities, 32 per cent were moderately disabled, and 19 per cent were severely disabled. As for those who live in an institutional setting, 77 per cent were severely disabled, 17 per cent were moderately disabled, and 6 per cent were mildly disabled. According to Figure 2.2 there also exists more persons with multiple disabilities than there are with single disabilities. The figures show 1.867 million (or 61 per cent) with multiple disabilities, compared to 1.172 million (or 39 per cent) with single disabilities.[14]

FIGURE 2.2
DISABLED CANADIAN ADULTS BY NUMBER OF DISABILITIES, 1986

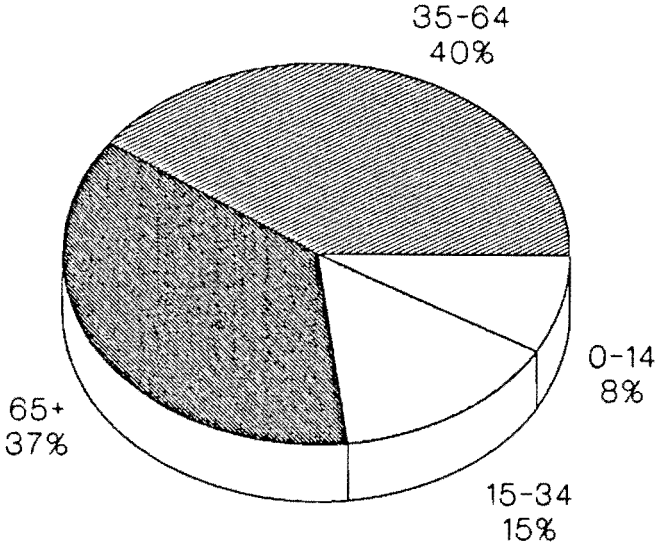


SOURCE: CMHC. SOCIAL DEMOGRAPHIC PROFILE OF CANADIANS EXPERIENCING HEALTH OR ACTIVITY LIMITATIONS. 1991, P.8

[14] Canada Mortgage and Housing Corporation. Socio-Demographic Profile of Canadians Experiencing Health or Activity Limitations, A. Ottawa: Prepared by TEEGA REsearch Consultants Inc. 1991, p.8

There are more female disabled persons in Canada (1.7 million) than male disabled persons (1.6 million), but this difference is probably mainly attributable to the higher life expectancy of females. In Figure 2.3 these percentages have been projected to show the estimated number of disabled adults and children by age groups. Both for females and males, children make up the relatively smallest group of disabled persons. Only 7 percent of disabled females are children and 10 per cent of disabled males. Interestingly the group that makes up the largest proportion(40 per cent) of the total disabled population is the 35 to 64 age group. This is probably due to the "baby-boom" phenomenon. [15]

FIGURE 2.3
PERCENTAGE OF DISABILITY PERSONS BY AGE GROUPS



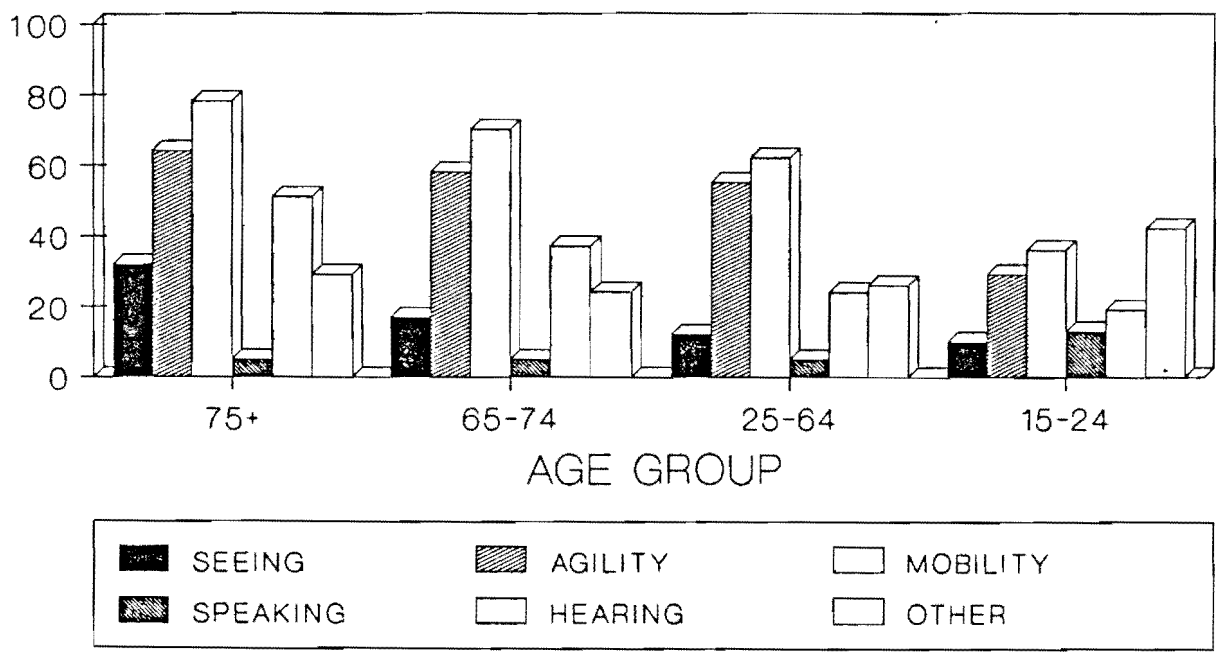
ESTIMATED TOTAL NUMBER OF DISABLED: 3,316,870

SOURCE: CMHC. SOCIAL DEMOGRAPHIC PROFILE OF CANADIANS EXPERIENCING HEALTH OR ACTIVITY LIMITATIONS. 1991, P.12

[15] Canada Mortgage and Housing Corporation. Socio-Demographic Profile of Canadians Experiencing Health or Activity Limitations, A. Ottawa: Prepared by TEEGA Research Consultants Inc. 1991, p.12

The following Figure 2.4, identifies all of the disability types, except for the speaking and "other" categories, the highest relative percentage of disabled adults is represented by the group aged 75 years or more. Of all disabled who are 25 to 64 years old, 12 per cent are visually disabled, 55 per cent are agility disabled, 62 per cent are mobility disabled, and 13 per cent are speaking disabled. Only 24 per cent of disabled persons aged 25 to 64 years are hearing disabled, and this compares to a relatively high proportion of 51 per cent of disabled persons aged 75 years or more.[16]

FIGURE 2.4
DISABLED ADULTS LIVING IN HOUSEHOLDS BY AGE AND TYPE OF DISABILITY

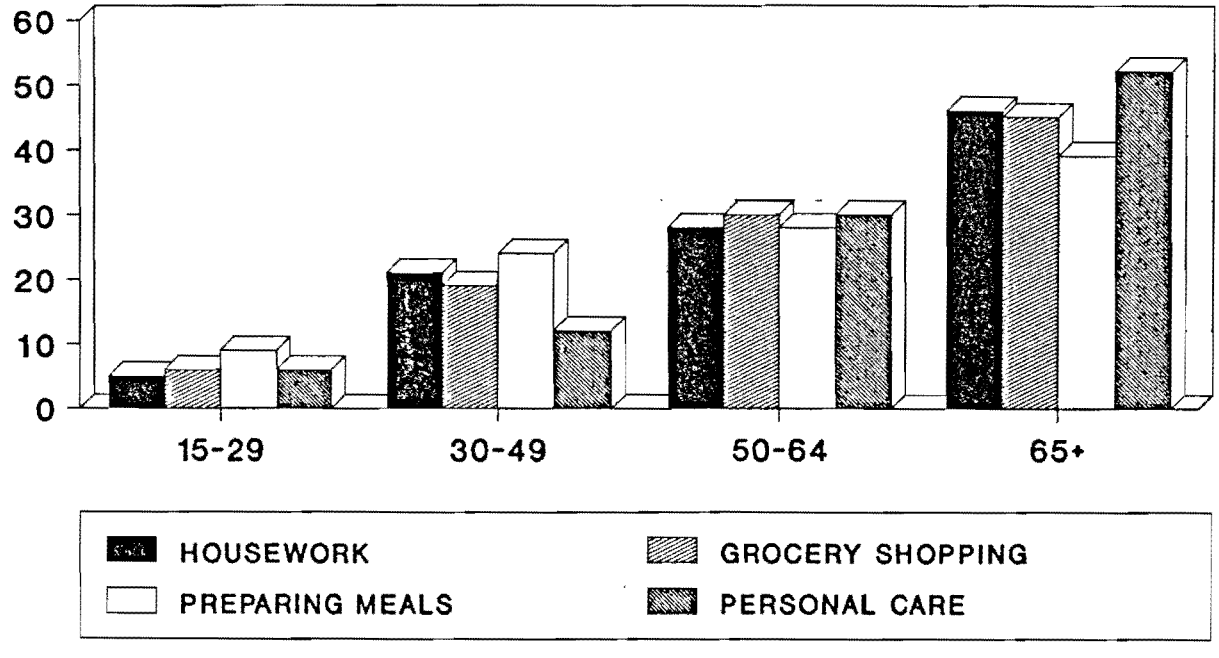


SOURCE: CMHC, SOCIAL DEMOGRAPHIC PROFILE OF CANADIANS EXPERIENCING HEALTH OR ACTIVITY LIMITATIONS. 1991, P.15

[16] Canada Mortgage and Housing Corporation. Socio-Demographic Profile of Canadians Experiencing Health or Activity Limitations, A. Ottawa: Prepared by TEEGA Research Consultants Inc. 1991, p.15

Factors affecting independent living often include the amount of personal assistance needed and the number of special features required to enter or leave the place of residences. The vast majority, 97 per cent of HALS respondents reported that they did not use special features (such as ramps) to enter or leave their residences. Of the 3 per cent who did, almost half were 65 years of age or over, and more than 60 per cent were severely disabled. Another small percentage, 2 to 3 per cent of respondents reported that they needed some type of feature to enter or leave their building, that they did not currently have. In terms of personal assistance needed, only a small portion of non-institutionalized HALS respondents required assistance with tasks of everyday living. In terms of what type of assistance was required, 13 per cent reported that they needed help with housework, 12 per cent with grocery shopping, 7 per cent with preparing meals, and 4 per cent with personal care. As you can see in Figure 2.5 the age group of 65 years or more, said they needed more help on most of their activities.[17]

FIGURE 2.5
TYPES OF HELP NEEDED BY NON-INSTITUTIONALIZED ADULTS

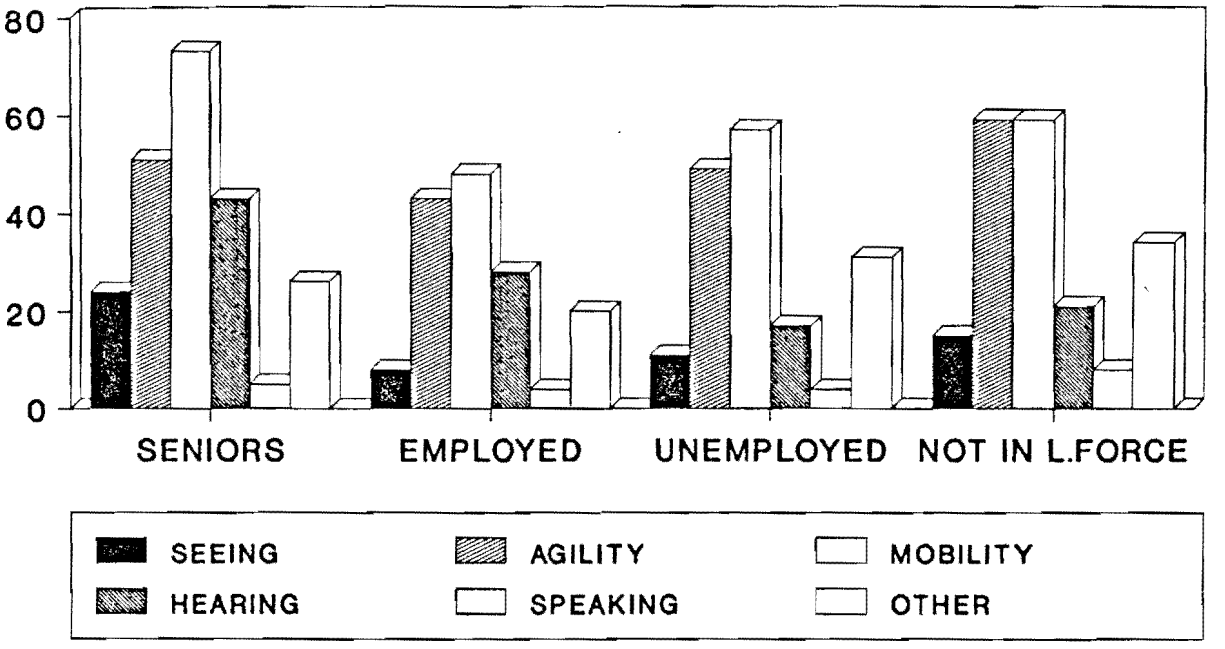


SOURCE: OFFICE FOR DISABLED PERSONS.
"STATISTICAL PROFILE OF DISABLED PERSONS
IN ONTARIO: VOLUME II". 1990, P.11

[17] Ministry of Citizenship, Office for Disabled Persons. "Statistical Profile of Disabled Persons in Ontario: Volume II". Toronto: 1990,p11

According to HALS and the 1986 Census, disabled persons make up a large number of the labour force, 712 thousand persons in 1986. On the other hand, there are even more persons with health and activity limitations who are not in the labour force, 896 thousand in 1986. Figure 2.6 below shows that a larger proportion of the disabled who are not in the labour force and who are not senior citizens, provide the highest relative representation in mobility, agility, visually, and speaking disabilities. In these categories, generally, the unemployed make up the next highest relative representations, followed by the employed. The seniors are separated from the "not-in-labour-force" category, to distinguish differences due to age.[18]

FIGURE 2.6
DISABLED ADULTS LIVING IN HOUSEHOLDS BY LABOUR FORCE STATUS & TYPE OF DISABILITY



SOURCE: CMHC. SOCIAL DEMOGRAPHIC PROFILE OF CANADIANS EXPERIENCING HEALTH OR ACTIVITY LIMITATIONS. 1991, P.16

[18] Canada Mortgage and Housing Corporation. Socio-Demographic Profile of Canadians Experiencing Health or Activity Limitations, A. Ottawa: Prepared by TEEGA Research Consultants Inc. 1991, p.16

The housing adaptation requirements for independent living, is based on HALS and the Census data on the disabled, prepared by Statistics Canada. Some conclusions regarding the magnitude of the housing problems of disabled persons in Canada, are that "the vast majority (98 per cent) of HALS respondents reported that they did not use special features (such as ramps) to enter or leave their residences. Of the three per cent who did, almost half were sixty five years of age or over, and more than sixty per cent were severely disabled".[19] Although of the 3.3 million disabled persons (according to HALS), not all require special housing, only 30 per cent of these do.

2.2 DEFINITION OF USER NEEDS:

According to the demographics, the age group that makes up the largest proportion of the total disabled population is the 35 to 64 age group. Identifying the clients' needs is relatively easy if you know who the client is. Once one has identified the client, you may interview them directly or their families depending on how skilled they are. Disabilities may also change, depending on age, so the process of aging should be taken into consideration. The level of autonomy that can be achieved may also vary. While disabled persons may be living independently, in that they live alone in the community, they may need special personal care, to assist them with some of their difficulties. One's disability should, therefore, be considered to identify whether indeed there is a functional disability, such as how is one limited; can they get out of bed, or can they bath, or can they dress, etc. To understand the typical physical barriers encountered, one should understand the generic spectrum of functional disabilities:

1. Mobility Problems (eg: for wheelchair users, canes, walkers)
2. Sensory Problems (eg: sight, hearing, smell etc)
3 Coordination Problems (eg: persons with cerebral palsy, arthritis)
4. Strength and Endurance Problems (eg: heart conditions, breathing problems)
5. Comprehension Problems (eg: developmental disabilities)
6. Situationally Disabled (eg: because of age, size, weight, culture or language or other temporary condition, the individual is handicapped in some way).[20]

The last group, (i.e. situationally disabled), maybe include someone who is temporarily, or permanently, at a disadvantage, in how they may be accommodated in their present situation.

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[19] Ministry of Citizenship, Office for Disabled Persons. "Statistical Profile of Disabled Persons in Ontario: Volume II". Toronto: 1987, p.10

[20] Association Planning Consultants Inc., "Barrier Free Design Seminar: Understanding Accessibility". Ottawa: February 18, 1993, p.3

Most developmentally and physically handicapped persons are capable of setting life goals. Even though they may not verbally communicate they may, if given the opportunity, select their own preferences and alternatives. For the developmentally and physically handicapped persons certain housing objectives can be considered such as:

1. To reduce the incidence and severity of developmental retardation.

2. To increase the extent of normal living opportunities by the provision of community based accommodation options which allow community living for those persons now in institutions and for those in the community who are not receiving appropriate service.

3. Those objectives are based upon fundamental principles which include normalization and integration.

4. The successful application of normalization requires that integration is possible and that generic community services are available.[21]

The normalization principle deals with how one should live in one's environment. As a society, we should not categorize people with a disability, but rather deal with them as persons with a right to be fully integrated within our community, in the same way as everyone else. The normalization principle responds to this situation by promoting a policy that persons with developmental handicaps be allowed to live a life as close to normal as possible. Some of the major implications of normalization for residential facilities are as follows:

1. The location of activities, school or work place should be elsewhere than at home. Recreation should take place in normal facilities.

2. The adult should live as independently as possible.

3. The choices and wishes of individuals are respected with regard to activities, and furnishings and decoration of his own private area.

4. Buildings should be located within communities rather than in isolation and should not be too different in appearance from the rest of the community.[22]

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[21] Ministry of Solicitor General. "Guidelines: Designing Residences for Developmentally Handicapped Adults". Toronto: 1982, p.1

[22] Ibid., p.1

2.3 PLANNING ACCORDING TO THE CLIENTS SPECIFIC NEEDS:

Before designing a barrier-free home, one must prepare a list of specific performance goals that are unique to the client. One must also understand how successful the client may be in performing certain tasks, under the following three broad activity areas:

1. SELF-CARE - grooming, hygiene, toileting, feeding, dressing, bathing, mobility, transferring, driving.

2. WORK - play for children, school, work, homemaking.

3. LEISURE - hobbies, pet care, games, recreation, sports, clubs, groups, community involvement.[23]

Once you have an understanding of what exactly your client can perform, you will also need to have an understanding of the condition, or disease, that has disabled your client. Many organizations and agencies that serve the disabled are available to provide a clearer understanding of specific health or client's disabling condition. In order to gather more specific information about your client, a questionnaire might provide you with precise information about your client's functional abilities. "If you are to design an environment that is truly barrier-free, you must address your design not to the disabling condition but to the client himself - to the client's unique array of functional strengths and limitations".[24] If one intends to conduct a questionnaire (refer to Appendix B), similar to the one from the barrier-free design centre, one of the best ways in which to accurately assess your client's requirements, is by observing them in their own home (or work environment). The first part of the questionnaire deals with the 'physical function' checklist, which basically determines whether they can carry out various activities independently, with equipment, with assistance, or not. The second part of the questionnaire deals with specific measurements that relate to a client's 'ability' (Appendix B). When analyzing a clients limitations, it is also important to assess, not only the client's current level of disability, but also any changes which may occur in the future.

For the purpose of this study, the client could be anyone with a 'physical' or 'developmental' disability. "The environment should be designed to compensate for functional deficits".[25] Some of the methods and strategies that one could take according to planning for their client would be to enrich the environment. There are several distinct methods on how one may enrich the environment, these include improvements in:

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[23] Barrier-Free Design Centre. Source Book, The. Toronto: 1987, p.10

[24] Ibid., p.10

[25] Associated Planning Consultants Inc., Pamela Cluff, (FRAIC, FRIBA, President).

1. Mobility around the environment;
2. Redundant Cueing: eg. in alarm systems;
3. Interior Design: eg. use of texture and equipment selection;
4. Environmental Systems: eg. heating, lighting and ventilation; and
5. Communication Systems and Signage.[26]

Communications is likely to be an important link even if the client is just physically disabled (in a mobility sense) i.e. when they experience a problem they need to be able to contact someone.

In order to distinguish between what communications are needed, it is important to understand your clients capabilities. Communications involves a two way process, i.e. if the telephone is ringing, one must know that it is ringing, and also be able to communicate with the caller. Circumstances in which communications are essential include, social opportunities, care opportunities, and emergencies. It is therefore important to recognize that not only the deaf and blind are in great need of communication links, but so are other disabled persons. (refer to Appendix C).

Another method of enriching the environment is by including redundant cues. 'Redundant cueing' includes objects in the environment which can recall a certain time or place for an individual. This could be as simple as the smell of cooking in the kitchen, to being able to see a parrot in a cage which could represent the front door, or lights flashing and ringing bells representing a fire alarm. The use of redundant cueing for sensory impaired persons, can enrich the environment by allowing the client to be autonomous in their own dwelling. Research on varying applicability of redundant cueing was done by Lee Pastalan (Ann Arbor: Michigan). The studies of Lee Pastalan show how significant and useful redundant cueing is, not only for disabled persons, but for everyone. Another method of enriching the environment, is by colour, texture, light and signage. These factors are all significant in their own ways. All of them, if well utilized, would allow optimum functioning of any individual in any space.

According to Appendix C, the problem identification matrix outlines the various difficulties pointed out by the client. The matrix covers eight different issues affecting individual clients, they are:

1. Entrances, Exits and Doorways;
2. Interior Circulation Paths;
3. Communications;
4. Space Clearances;
5. Controls and Operable Hardware;
6. Storage and Work Surfaces;
7. Supports; and
8. Plumbing Fixtures.

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[26] Associated Planning Consultants Inc., Pamela Cluff, (FRAIC, FRIBA, President)

Depending on the type of difficulty that each one has, a different planning approach, may be necessary. Other design considerations that affect the client, are discussed later in section six, for specific design criteria. The design criteria should take into consideration intergenerational programs. This program would allow disabled people to live in a family type environment, where different sex, age group and disability would exist. This program is beneficial not only for the clients, but also for the neighbours of the group home.[27]

2.4 FUTURE PROJECTIONS/ECONOMY:

Essential components that are necessary in determining the future directions of special needs housing include the changing demographics of disabled persons as well as their changing preferences. For the moment, the public has pre-conceived notions of how social housing should exist. However, such notions will not remain static. As time progresses, new priorities will evolve as far as what disabled person's should be entitled to.

There are problems associated with the expectation that the family will assume the function of providing assistance to a disabled family member. Society has changed over the years, and today many families are two-income or single-parent units. Economic problems and expenses associated with disability can put an unreasonable burden on the family and lead to family breakdown. Mistreatment and inappropriate institutionalization may be the result of this type of extended family stress.[28]

According to professor David Scott, it is critical to have a general image of the future to determine a set of parameters for design. "We cannot predict the future with accuracy and we therefore cannot design physical facilities to accommodate that future with precision. What we can do is examine trends, identify issues and prepare a general image of the future as a set of parameters for design, within which the facility must respond flexibly to change".[29]

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[27] Associated Planning Consultants Inc., Pamela Cluff, (FRAIC, FRIBA, President).

[28] Ontario Advisory Council for Disabled Persons. "Independent Living: The Time is Now". Toronto: 1988, p.4

[29] David H. Scott, Project Management Readings. Toronto: Ryerson Polytechnical Institute, Revision 2, p.3

3.0 PLANNING CONTEXT:

3.1 Existing Projects
3.2 Requirement of New Facilities
3.3 Community Concerns

3.0 PLANNING CONTEXT:

3.1 EXISTING PROJECTS:

The distribution of residential care facilities within Metropolitan Toronto is relatively equal (Figure 3.1). While there is some clustering in the City of Toronto, in areas such as High Park, Riverdale and the Annex, these areas are not described as "ghettoes".[30] The number of group homes in 1987 were 148: 23 for Children's Mental Health Centres, 17 for Children and Youth Institutions, 29 for Developmentally Handicapped, 13 for Children's Boarding Homes, 14 for Ministry of Correctional Services, and the remaining 52 were for the Ministry of Health. According to Key Facts (1992) issued by Metropolitan Toronto Planning Department, the number of group homes in Metropolitan Toronto has increased by fifty five per cent (Figure 3.1) to a total of 267 group homes relative to those in 1987 (refer to Appendix D)

For the purpose of this study, it would be appropriate to analyze (through the Ministry of Community and Social Services), the amount of funding available to accommodate persons with special needs. The 'services to the disabled' unit, is responsible for funding and administrating benefits to individuals, and families of individuals, with either developmental or physical disabilities. The Community and Social Services for the City of Toronto has provided a total of $67,655,900 in resources for developmentally disabled persons (Table 3.1), and $10,503,900 for physically disabled persons (Table 3.2). The total resources for both developmentally and physically disabled persons had a sum of $ 78,159,800 in resources from the Ministry of Community and Social Services. [31]

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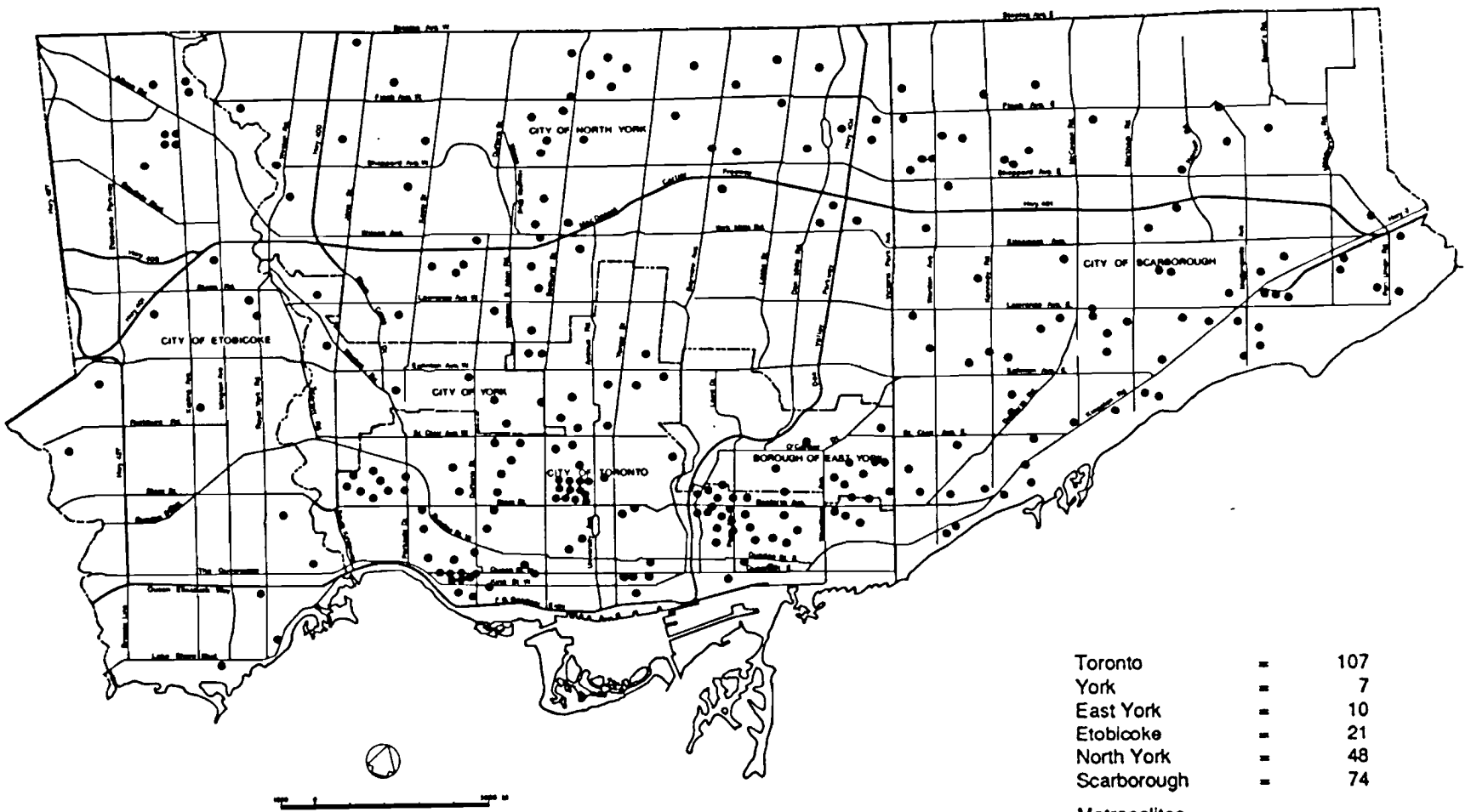
[30] Metropolitan Toronto Planning Department. Errol Chapman (Planner).

[31] Ministry of Community and Social Services. Frank R. Cummings (Program Supervisor).

FIGURE 3.1

GROUP HOMES, METROPOLITAN TORONTO, 1992



Source: Metropolitan Toronto Planning Department. "Metropolitan Toronto Key Facts". Toronto: 1992, p.6.14

TABLE 3.1

SERVICES FOR DEVELOPMENTALLY DISABLED PERSONS

	AGENCIES	PROGRAMS	RESOURCES	UTILZATION
ACCOMMODATION				
CHILDREN	7	18	$13,474.10	218 SPACES
ADULTS	16	79	$17,924.50	492 SPACES
COMMUNITY SUPPORT				
CHILDREN	14	27	$13,467.20	VARIABLE
ADULTS	12	15	$8,934.50	VARIABLE
LIFE SKILLS	9	16	$7,947.70	393 PERSONS
PROTECTIVE SERVICES	5	5	$1,015.90	550 PERSONS
SHELTERED WORKSHOPS	1	8	$4,892.00	915 SPACES
TOTAL	64	168	$67,655.90	

SOURCE: MINISTRY OF COMMUNITY & SOCIAL SERVICES. FRANK R. CUMMINGS (PROGRAM SUPERVISOR).

TABLE 3.2

SERVICES FOR PHYSICALLY DISABLED PERSONS

	AGENCIES	PROGRAMS	RESOURCES	UTILZATION
ATTENDANT CARE AND O.I.C.	18	24	$8,176.60	255 UNITS
ATTENDANT CARE OUTREACH	5	6	$1,115.40	142 PERSONS
HEAD INJURED	2	3	$661.40	33 PERSONS
INTERPRETORS	1	1	$287.70	3000 PERSON
INTERVENORS	1	1	$262.80	56 PERSONS
TOTAL	27	35	$10,503.90	

SOURCE: MINISTRY OF COMMUNITY & SOCIAL SERVICES. FRANK R. CUMMINGS (PROGRAM SUPERVISOR).

3.2 REQUIREMENT OF NEW FACILITIES:

The development of a new group home must also meet local municipal requirements, which may differ, according to the municipality, (i.e. the City of Toronto, compared to the City of North York has different requirements and policies, in addition the City of Toronto are more lineate and supportive towards the development of group homes). More and more today, we are noticing that acquisition and rehabilitation has occurred more often than new construction for the development of new group homes. The requirements for an acquisition or rehabilitation project are met much more easily, than the development of new construction, for a group home. The major restriction to the development of a new group home, is budget constraints. Such budgetary constraints and developmental guidelines are set out in detail by the two Ministries, dealing with the physically and developmentally disabled (i.e. the Ministry of Housing, and the Ministry of Community and Social Services).

Other than the municipal and budget requirements, four other requirements play an important role in the development of a new group home, they are:

1. Location; including access to nearby community facilities
2. Public Transit; to allow access to needed services etc.
3. Local Amenities and Services; available to residents etc.
4. Safety/Security: i.e. the nature of the adjacent community [32]

Evidence from some of the most successful housing developments for disabled persons suggests that the location of the site and the nature of the community may be the most important aspect.

While land may be plentiful and inexpensive in outlying areas, the effects of reduced or limited access to the community, may be a critical factor in choosing a location. As for public transit, it is offered in most regions of Metropolitan Toronto. Many developmentally handicapped persons are quite able to use public transit, that is the higher functioning ones. Public transit is also important for some of the staffing in a group home. When the public transit is insufficient for the client population, and they need wheelchair accessibility, then Wheel-Trans or other special transit services may be necessary.

The location of the group home should also be close to all necessary amenities, such as shopping malls, recreation facilities, banking, libraries, doctor offices, hospitals, community centres, etc. "People with a disability are full members of our society, and neither wish nor deserve to be excluded from the mainstream of social and community activity".[33]

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[32] Associated Planning Consultants Inc., Pamela Cluff, (FRAIC, FRIBA, President).

[33] National Advisory Council on Aging. Housing an Aging Population. Ottawa: 1987, p.6

The final requirement of safety/security, should simply be regarded as a fact, i.e. certain neighbourhoods are not as safe as others. But one of the main security issues the disabled persons seek, is assurance that if illness, accident or other emergency should occur, a clear plan of action will be put into effect. The feeling of security can actually extend the disabled person's capacity for independent decision-making in the use of leisure time and the formation of new friendships.

3.3 COMMUNITY CONCERNS:

The primary purpose of a group home is to provide an environment in which people with special needs or disabilities may gain or regain the capacity for full or partial independence. If the group home and its residents are not accepted by the community then the purpose of independence within the community is not achieved. While this section is primarily directed towards group homes, in respect to any social housing programme, experience has shown that most community concerns are the same. [34]

Some of the typical problems, complaints and attitudinal stances that the community may present against the development of a group home are as follows:

1. Why is government spending money on this?

2. This type of project will decrease value of property.

3. It will increase traffic flow, in the neighbourhood.

4. Why can't it be built somewhere else? ie: NIMBY ("not in my back yard")

5. My children/family/friends may be 'at risk' because of the nature of the tenants in the group home.[35]

The general public in the community are unaware that the government provides funding for these projects. Most people once they become aware of the proposed project, tend to resist it, particularly now the status of the economy in general, is not good.

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[34] Dundas and Garrick Associates Inc., Anne Dundas (Development Consultant, Principal).

[35] Dundas and Garrick Associates Inc., Anne Dundas (Development Consultant, Principal).

One of the second major issues, is that many people believe, that once a group home appears in their community their property value will be diminished. Several case studies have been conducted in Canada and the United States in an effort to determine whether property values decline as a result of group homes being established in residential neighbourhoods. "Each of these studies concluded that there was no evidence to demonstrate that property values or marketability were adversely affected by the establishment, or presence of, group homes in residentially zoned areas".[36]

Communities also believe that the arrival of a group home in their community will bring increase traffic flow. This would simply mean various types of nuisance in the community, i.e. more noise, more people, more cars, etc. They also feel that their children will be effected by people who are not what they (the neighbours) consider to be normal.

When people become upset, they will try anything to stop the development of a group home. Most citizen action is in the form of "not in my back yard" (NIMBY). Often this public reaction is unjustified, and can be a serious barrier towards the development of a group home. With the NIMBY action, most community members tend to contact their local politicians, at every level. If that doesn't work they then go to the city to see if the group has obtained a building permit for the project. As people become more determined to stop a group home they may also go to the Ministry of Housing or to the media. Fortunately, this does not occur very often, but many ordinary community residents can become extraordinary vicious towards the development of a group home in their immediate community.

In most cases to avoid the extreme conflicts built by the community, most group homes have developed a consultation process with the community. For instance, the non-profit organizations appear before the neighbouring houses, and provide neighbours with written and oral material on who the housing is for, and what the issues are. Thus, most community questions can than be answered, i.e. when the non-profit organization go from door to door. In many situations, it may also be necessary or desirable to conduct a neighbourhood meeting. Careful planning of such meetings is important. A community meeting will also give the client or advocacy group an opportunity to reassure local residents that the group will be responsive to their concerns and would welcome ongoing community involvement. The Planning and Development Department from the City of Toronto has issued a "Group Home Operator's Neighbourhood Dialogue Guidelines" (refer to Appendix E) so that group home operators may undertake voluntarily.

Once the group home is occupied they usually hold an 'Open House' day. They invite the community in, to see how the people are living. They then can become familiar with the individuals living in the group home, and hopefully accept them as part of the community. Experience has indicated that most of the opposition goes away after the 'Open House'. As usual, people are most fearful of the unknown.

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[36] City of Toronto Planning and Development Department, and Ontario Secretariat for Social Development. "Group Home Primer for the City of Toronto". Toronto: 1984, p.19

4.0 SUPPORT SERVICES:

4.1 Personal Assistance Programs

4.2 Need for Transitional Skills Training Program

4.0 SUPPORT SERVICE:

4.1 PERSONAL ASSISTANCE PROGRAMS:

There are many ways in which disabled persons can obtain independent living assistance in Ontario. However, most sources focus primarily on the condition of personal care and do not provide enough of other types of assistance that are necessary for independent living. These services do not ensure total independence for the consumer, due to the amount of control and structure in each program. The principle means of obtaining assistance includes:

A. The Family;
B. Institutional Settings;
C. Group Homes;
E. Support Service Living Units; and
F. Outreach Attendant Care.

A. The Family

Personal care would not be complete without special attention being paid to the role of the family. Traditionally, most assistance delivered to disabled persons in Ontario had been provided by family members -- most frequently parents, spouses or significant others. The figures show that 65 per cent of clients were receiving assistance from family members. It is believed that the high percentage is due to a number of people on waiting lists for some other type of support service program. There are also numbers of unidentified people living in areas of the province in which support services are either currently unavailable or are lacking adequate service co-ordination. It can therefore be assumed that the family still plays an active and important role in the provision of services to disabled persons.

B. Institutional Settings

For many years, a large number of individuals who, in need of personal assistance, were placed in institutions such as nursing homes, chronic care and even psychiatric hospitals. There were various reasons that attempted to justify such action. Disabled persons were treated as though they had to be protected, and that they could never be productive or be responsible enough to assume their place in society. Over the years, these negative attitudes have been moderated in Ontario and the integration of persons with disabilities into the community has been the new focus of social policy.

This new attitude is what everyone wants to achieve, though there are still many disabled persons who live in institutional settings where funding is provided by the Ministries of Health and Community and Social Services. The institutional setting, because of its size, provides services to its patients on a medically oriented setting which obviously does not give the disabled person any independence.[37]

C. Group Homes

Group homes were seen as necessary for those disabled children and adults who had lived in institutional settings for most of their developmental years and whose life skills were not given the chance to develop to a level which would allow them to function independently. Group homes may therefore need different settings, depending on the needs of the users. Whether as a transitional or permanent living setting, group homes are extremely important for many individuals, including developmentally disabled persons. A group home for some, may be the most suitable setting and many individuals are productive and happy in such environments.

D. Support Service Living Units

A Support Service Living Unit (S.S.L.U.) is organized by a non-profit community group or "agency". The agency would take certain responsibilities, in order to see that the disabled adult receives the basic support for daily living, in order that he/she may live as independently as their disabilities permit. Accommodation may be in private apartments or in shared residences. Support services for projects are generally designed for physically disabled persons who are:

-18 years of age and over;

-capable, or potentially capable, of directing their own care;

-in need of assistance with the activities of daily living;

-able to obtain their medical needs in the community; and

-unable at present to obtain the required care from home support programs.[38]

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[37] Ontario Advisory Council for Disabled Persons. "Independent Living: The Time is Now". Toronto: 1988, p.5

[38] Ibid., p.12

According to the Ministry of Community and Social Services, they will only fund certain independent living activities, they include: mobility, transferring and positioning, meal preparation, eating, clean-up, rising, dressing, undressing, going to bed, washing, grooming, shampooing, toileting including bowel and bladder procedures, physical body control, and essential communication. In addition to these activities, laundry, housekeeping, and cooking help may be provided. No services are provided under the program outside the individuals home, and services are only available in the residence, the resident cannot choose the staff person designated to assist him/her.[39]

E. Outreach Attendant Care

The Outreach Attendant Care Program is mainly supported by the Ministry of Community and Social Services. Its purpose is to provide personal care services, on a visitation basis (maximum of 90 hours per month), to physically disabled adults living in their own homes. The program is designed to preform three functions:

1. To support families caring for physically disabled adults at home;

2. to complement existing community services; and

3. to facilitate low to moderate care persons who were in a Support Service Living Unit to move into the community.[40]

The major services provided under the program are assistance with transferring (bed to wheelchair and vice-versa), assistance with bowel and bladder care, bathing and washing and meal preparation. The services offered under the program are only available at home and exclude such places as the workplace and school. One of the main problems with the Outreach program are the lack of services between midnight and 6 a.m., and the difficulty in co-ordinating Outreach with other services such as housekeeping and nursing.

The information that was provided was a brief description of many ways in which disabled persons currently receive personal assistance in Ontario. Also noticeable was the different levels of independence that each person had according to the program described. In reviewing existing methods of providing personal care to disabled persons in Ontario, one may notice that problems with all the programs do exist, according to these design flaws:

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[39] Ibid., p.12

[40] Ibid., p.14

-Lack of portability - programs are strictly home-based.

-Geographic restrictions -not all programs and services are universally available across the province.

-Inequality in the provision of services in different locations.

-Lack of flexibility, vis-a-vis hours of service and scheduling.

-Lack of consumer control. In most cases the client must fit the program rather than the program must change to accommodate the client's needs.

-Since dollars are finite, consideration of individual needs is downgraded.[41]

4.2 NEED FOR TRANSITIONAL SKILLS TRAINING PROGRAM:

Many consumers of independent living services have not had much opportunity to obtain the skills which relate to directing and managing the individuals providing their support services. Interpersonal skills are required in any employer/employee relationship and particular sensitivity is needed on both sides when dealing with personal and intimate services. These skills are needed in addition to daily living skills such as budgeting and managing one's business affairs. Everyone needs to become fully aware of all the rights and responsibilities they have as consumer or employer.[42]

There are many ways in which persons can become familiar with the responsibilities of being both a consumer and an employer. Transitional Living Centres are one way of receiving this kind of education. Some of the facilities offering such programs include: Bloorview, Bellwoods and the Gage Transitional Living Centre in Toronto. The goal of the Gage Transitional Living centre is to facilitate adults with physical disabilities and to make the transition from living in an institutional setting to independent living (with attendant services) in their own home and community. At the Gage, life skills training is provided at various levels before the resident moves out into the community. Education is offered at three levels:

Level 1 - Selfcare, cooking and housing skills;
Level 2 - Recreation and vocational skills;
Level 3 - Integration Skills.[43]

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[41] Ibid., p.15

[42] The Gage Transitional Living Centre. Hazel Self (Community Services Co-ordinator).

[43] Ontario Advisory Council for Disabled Persons. "Independent Living: The Time is Now". Toronto: 1988, p.35

In addition to the skills mentioned above, many other issues have to be addressed when individuals are preparing to deal more directly with their independent living assistance needs. Other topics which should be offered are: assertiveness training, selection and interviewing procedures including identification of specific needs, definition of rights and responsibilities of client and attendant, hiring procedures, defining duties, training attendant, time management, money management, record keeping, paying an attendant, evaluation procedures, and job incentives to keep good attendants. [44]

It is important that there is a time frame for which an individual is expected to obtain such life skills education. It is clearly understood that individuals will be able to move on to independent living in the community, where appropriate housing and services will be made available to them. Transitional skills training program is a suitable way for disabled persons to become familiar with the responsibilities and challenges that are associated with independent living assistance. My personal thoughts towards transitional skills training program is that educational programs, designed to enhance the ability of individual consumers to direct and manage their support services be made available across the province in transitional living centres, independent living centres or community colleges.

[44] Ibid., p.36

5.0 ORGANIZATIONS INVOLVED:

5.1 Charitable Organizations
5.2 Ministry of Housing
5.3 MInistry of Community and Social Services
5.4 Service Delivery Agencies

5.0 ORGANIZATIONS INVOLVED:

5.1 CHARITABLE ORGANIZATIONS:

The Charitable Institutions Act has been used in the past to fund homes for the socially disadvantaged, those with emotional problems, and substance abusers. Some of the well known organizations that operate under this legislation would be, MTACL (Metropolitan Toronto Association for Community Living), Reena Foundation, Chesire Homes Foundation and charitable homes for the aged. In order for the charitable organizations to receive funding from the Ministry of Housing they are required to have a non-profit housing incorporation. They all require very specific incorporation documents, which meet the Ministry's non-profit housing incorporation objectives.

In many cases, these organizations utilize their "umbrella organization" as the formal charitable designation and then establish their housing corporation as a separate legal entity, and run it autonomously from their "umbrella organization".

A charitable organization would have to supply a solicitors certificate #1 (refer to Appendix F), whenever a request for proposal is sent to the Ministry of Housing. The document indicates that the charitable organization is incorporated and that they meet the Ministry's guidelines. In order for the group to receive funding from the ministry, the housing project must serve predominately lower and middle income persons. The corporation also must indicate on the solicitors certificate #1 that if they wish to dissolve their charitable organization, then they must direct their assets towards another charitable non-profit organization. The solicitors certificate #1 is also usely accompanied by letters of support, to ensure that the organization is truly community based.[45]

A charitable status can only be granted by the Federal Government, which provides the group with a charitable registration number as a non-profit organization. This charitable registration number allows the organization to issue receipts for income tax purposes, under the Income Tax Act of Revenue Canada. This formal registration attracts more donations to these causes, because they are then recognized as legitimate entities to receive donations, which is a definite benefit for the fund raisers.

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[45] Chesire Homes Foundation, Cindy Kinnon (Director of Development).

5.2 MINISTRY OF HOUSING:

The Ministry of Housing took over the delivery of Social Housing from the Federal Government in 1986, prior to this CMHC handled the whole procedure. Special needs housing is dealt with in the same manner as social housing, by the Ministry. The primary difference is that special needs housing will involve another Ministry throughout the process, which in certain cases creates more complications. Other Ministries, which are involved in the process for physically and developmentally disabled persons are the Ministry of Community and Social Services, and at times the Ministry of Health. "The Ministry very heavily subsidizes 'special needs' housing, its a very large financial commitment over thirty five years".[46]

The Ministry of Housing will supply what they refer to as "The Bricks and Mortar", and the Ministry of Community and Social Services simply supply the layer on top of the bricks and mortars, which is usually referred to as 'support care funding'. Often there is a shared facilities agreement, which means the non-profit housing corporation would have to contact the Ministry of Community and Social Services and be assured that they will receive support care funding. The Ministry of Housing will not proceed with the allocation of a project unless they are aware that the support care dollars will be provided by the other Ministry. So normally when a group approaches the Ministry with a proposal, on-going discussions will occur between the two Ministries. The two Ministries also need to assure themselves of the reliability of that sponsoring group, which is determined by past history, and/or the proven level of need and community support committed to the group.

There are two major documents that are required by the Ministry of Housing in order for them to approve and allocate the funding for special needs housing, a "560" form and a "1414" form. The "560" (refer to Appendix G) is usually known as the initial proposal form and serves as a significant document for the non-profit housing corporation. At certain times throughout the year the Ministry of Housing issues public proposal calls. Everyone is required to hand in their submissions at a specific time period, to each Request for Proposal (i.e. for new construction, or for an acquisition and rehabilitation project). The response to the request for proposal contains an array of information that is relevant, in order to ensure an allocation from the Ministry. The response to the proposal includes information on: who the group is, why they want to do what they want to do, what particular client group they are serving, and how they see their initiative working with the Ministry of Community and Social Services. Once all the submissions are reviewed by the Ministry, and depending on the proposals, only a certain amount of money may be designated by the Ministry 'special needs' housing. Therefore, not all proposals are accepted or receive an allocation, and approval to proceed, from the Ministry of Housing.[47]

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[46] Ministry of Housing. Sylvia Patterson (Program Manager).

[47] Ministry of Housing. Martha McBurnie (Program Co-ordinator).

Once the group actually receives an allocation, they may proceed to place an offer to purchase on a property or site. An appraiser and inspector representing the Ministry of Housing, may determine the amount of work that is necessary for renovation and whether it can be done within budget. The majority of group homes at this time, are acquisition and rehabilitation projects. This process, where the group acquires a residential building and then undertakes the necessary renovations (i.e. to meet the current building code, fire safety and clients needs) is generally less expensive than new construction.

The other major document that is required by the Ministry of Housing is a "1414". The "1414" is a financial document that outlines two major components. Firstly, it outlines the capital budget that is basically "the bricks and mortar"budget. This capital budget sets out the amount of mortgage necessary for thirty five years. There are thirty five line items on a "1414" (refer to Appendix H), it covers a number of items such as the purchase price to transfer tax, construction costs, architectural costs, building permits costs, municipal fees etc, as well as insurance costs and CMHC charges for the mortgage.[48]

The second component to the "1414" is the operating budget. Once the building is occupied, the group home will have many on-going expenses, such as property taxes, heat & hydro, property insurance, maintenance expenses (i.e. the removal of snow and landscaping), etc. For a group home, the Ministry of Housing provides the non-profit housing corporation with a monthly cheque to cover its share of operational costs. Since group home residents are currently classified under the neediest category, they generally only contribute a small portion of their income. Usually the neediest category should not be paying more than 25 per cent of their income towards their shelter costs. Therefore, once the non-profit housing corporation receives their monthly cheque from the Ministry plus the rent from the tenants, they place the total amount in the bank and pay the mortgage and their shelter expenses for that project.

The annual operating budget of the group, is reviewed by the Ministry of Housing. The Ministry reviews this to ensure that the group are not generating a huge surplus in the bank. They want to ensure that all their bills are being paid, and that there is a suitable on-going monitoring process, covering the operating budgets of the various groups. The Ministry is also involved intermittently with the groups when mortgage renewals have to be reaffirmed every five years. Historically, the groups individually recalled the lender and renegotiated a deal on their own. However, "at the present moment the Ministry in order to receive good interests rates is renegotiating the mortgages in bulk". [49]

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[48] Ministry of Housing. Martha McBurnie (Program Co-ordinator).

[49] Ministry of Housing. Martha McBurnie (Program Co-Ordinator).

The whole process, is a lengthy one for the non-profit housing corporation. All of the social housing in Ontario undergo a lengthy process, because an enormous amount of money that is being paid out of tax payers dollars. Since the Ministry issues cheques every month, their presence in the process, is noticeable. Without the cheques from the Ministry, the groups basically cannot operate, although most of them have very active fund-raising groups, which offset any operating deficits.

5.3 MINISTRY OF COMMUNITY & SOCIAL SERVICES:

Most of the adult group homes, at the present moment, are also funded by the Ministry of Community and Social Services. Their role applies primarily to homes for the developmentally and physically disabled under the Homes for Retarded Persons Act and under the Developmental Services Act as well a few others. The Ministry of Community and Social Services, as mentioned earlier, simply supply financial support for the layer on top of the bricks and mortars. It is usually referred to as 'support care funding', which primarily involves staffing dollars (i.e. the primary function for the Ministry of Community and Social Services is to provide funding for the operational side of a project). Although the Ministry of Community and Social Services also provides more than just funding for operating expenses, eg: it also provides and supports for:

-Developmentally and physically handicapped persons by providing community living opportunities.

-Those currently unable to live in the community, (eg: services through both directly-operated, and agency-operated facilities.

-Establishing and maintaining Individual Program Plans for facility residents.

-Supported employment (sheltered workshops), life skills and other services to adults.

-Programs such as infant stimulation, behaviour and home management, and parent relief to children and their families.

-Special services for children in facilities, community residences and their own homes.

-Developmental and related programs to developmentally and physically handicapped children and adults in Nursing Homes and Residential Homes for Special Care.[50]

[50] Ministry of Community and Social Services. Frank R. Cummings (Program Supervisor).

To receive operating dollars from the Ministry of Community and Social Services each non-profit housing corporation must complete an annual budget package, that consists of ten different forms, these are:

1. REVENUE/SUBSIDY/UNITS OF SERVICE WORKSHEET

   -Accommodation
   - Homes for Retarded Persons Act
   - Developmental Services Act
   - Child and Family Services Act

   -Workshops and Adult Community Support Programs

   -Day Nurseries Program

2. REPAIRS AND REPLACEMENT WORKSHEET

3. SALARY SCHEDULE

4. CENTRAL ALLOCATED ADMINISTRATION COSTS SCHEDULE

5. CENTRAL ALLOCATED ADMINISTRATION COSTS DISTRIBUTION (Worksheet)

6. CENTRAL ALLOCATED ADMINISTRATION COSTS DISTRIBUTION (Summary)

7. EXPENDITURE WORKSHEET

8. BUDGET SUMMARY

9. PURCHASE OF SERVICE

   -Includes all programs - excluding workshop/lifeskills.

10. PERSONAL NEEDS OF RESIDENTS WORKSHEET

    -Accommodation
    - Homes for Retarded Persons Act
    - Developmental Services Act
    - Child and Family Services Act[51]

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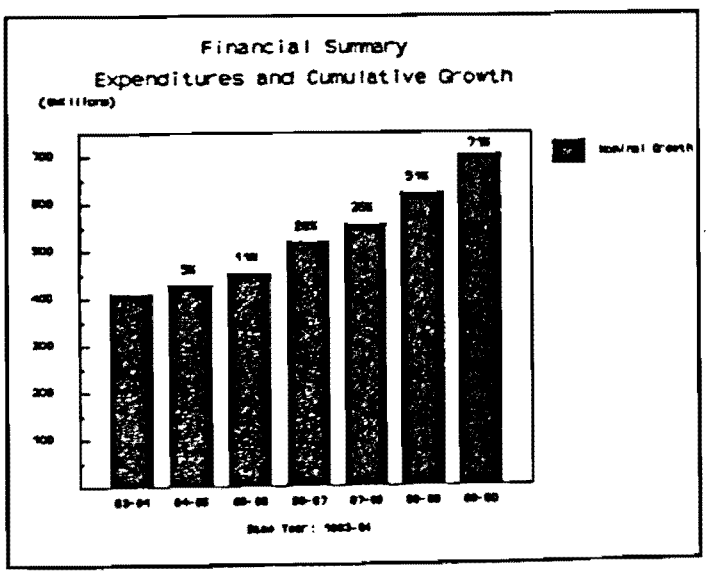
[51] Ministry of Community and Social Services. Instructions to Complete the Budget Forms. Toronto: 1987/1988, p.1

These forms (refer to Appendix I) once completed by a non-profit organization have to be submitted annually in order to receive their funding for the following year. The operating dollars from the Ministry of Community and Social Services is much more difficult to obtain than the capital dollars from the Ministry of Housing. At times, even though one has approval from the Ministry of Housing, the Ministry of Community and Social Services may not approve it's share. One needs the approval of both ministries in order to ensure comprehensive allocations. While the Ministry of Housing has been in position to fund the shelter component of the non-profit housing corporation it is frequently found that there is a real scarcity of funding from either the Ministry of Community and Social Services or the Ministry of Health, which in essence constrains the use of potential funds from the Ministry of Housing.

The Ministry of Community and Social Services has issued a financial summary of their commitments for the years of 1989/90 as seen in Table 5.1. In Table 5.1, the Ministry concluded that a total of $705, 583, 200 was expended on developmental services, towards adults' and children for the year 1989/90. This includes salaries and wages, transportation and communications, sheltered workshops, protective and other supportive services. The financial summary for the ministry indicated a 10 per cent increase from 1987/88 to 1988/89 and a 12 per cent increase from 1988/89 to 1989/90. Even though table 5.1 indicates 1989/90, the figures can still be utilized to relate to 1992/93 figures, but would need to be increased, by approximately 20 per cent (for escalation and an increase of people being served). As for funding, group homes receive 80 per cent of their operating budget from the Ministry of Community and Social Services and the remaining 20 per cent is provided by the residents family.

TABLE 5.1 -- FINANCIAL SUMMARY

1989/90 ESTIMATES	DESCRIPTION	1988/89 ACTUAL	1988/89 ESTIMATES	1987/88 ACTUAL	1986/87 ACTUAL
196,053,300	Salaries & Wages	188,356,365	179,124,600	183,067,084	173,968,130
31,491,500	Employee Benefits	32,411,265	29,037,100	32,559,705	27,943,013
3,826,400	Transportation and Communications	4,207,291	3,176,200	3,609,110	4,289,388
13,262,100	Services	9,490,935	12,506,200	8,852,328	7,432,542
20,727,600	Supplies and Equipment	22,587,009	19,933,400	22,096,460	28,335,803
6,000,000	Acquisition/Constr. of Physical Assets	1,103,651	6,000,000	0	0
	TRANSFER PAYMENTS:				
14,778,000	-Capital Grants	19,370,757	13,900,000	14,152,297	16,038,409
202,660,100	-Residential Serv. and Community Resource Centres	162,600,642	166,138,400	145,286,595	128,978,640
214,419,100	-Shelterd Workshops, Protective and Other Supportive Services	181,746,210	182,821,400	147,387,264	132,913,315
511,100	-Payments In Lieu of Taxes	369,862	511,100	388,850	265,434
432,368,300	Transfer Payments Total	364,087,471	363,370,900	307,215,006	278,195,798
(146,000)	Recoveries from Other Ministries	(144,043)	(140,000)	(168,162)	(71,622)
0	Bequests and Scholarships	10,967	1,000	14,943	340
703,583,200		622,110,911	613,549,400	557,246,474	520,093,392
$ 92,500,000	REIMBURSEMENT OF EXPENDITURE				



Source: Ministry of Community and Social Services. Program and Resource Summary. Toronto: 1989-1990, p.83

5.4 SERVICE DELIVERY AGENCIES:

The Ministry of Community and Social Services feels that persons in care need on going assistance and current service agencies are finding it difficult to meet the demands that have been brought about by the increased focus on community service provision. Service Agencies are therefore playing a strong role in trying to persuade the Ministry to change existing legislation, and programs, to complement the increasing expectations of the multi-year service programmes and policies.

Within the Greater Toronto Area there are two major agencies providing service to people who are labelled developmentally handicapped, they are Metropolitan Toronto Association For Community Living (MTACL) and The Reena Foundation. They deliver direct services to as many as 3,300 people, and operate group homes, sheltered workshops, life skills programs, and supported employment. Both of these organizations have active parent support/involvement opportunities for the purposes of advice, advocacy, mutual support (self-help), monitoring of services, and public education. One of the specific services that MTACL provides is adult living services, which focuses on adults who are developmentally handicapped. The program is designed to encourage growth and independence of there adults within the community. Some residents of these group homes master sufficient skills needed to move on to the Association's Apartment Program or to other more independent settings.[52]

"Most agencies providing direct care receive funding support from the Ministry of Community and Social Services as well as from fund-raising which they undertake and some feer-for service arrangements with individual clients."[53]

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[52] Metropolitan Toronto Association for Community Living. Carolyn Clyke-Gardiner.

[53] Associated Planning Consultants Inc., Pamela Cluff, (FRAIC, FRIBA, President).

6.0 DESIGN PROCESS:

6.1 Introduction to Design Issues
6.2 Design Criteria for Spaces/ Accommodation
6.3 Other Considerations
6.4 Implementation

6.0 DESIGN PROCESS:

6.1 INTRODUCTION TO DESIGN ISSUES:

In order for any new housing to blend in with the surrounding community, it should relate to characteristics of the neighbouring buildings. However as an alternative to new construction, "much of the existing housing stock can be adapted to enable people with disabilities to live independently, and with dignity, in their own communities. Not only have people themselves instigated the modification of their homes, but governments and community-based organizations around the world have also introduced home adaptation initiatives that promote choice and support independence".[54]

The design issues for either rehabilitation or new construction are similar so, eg: site selection.

SITE SELECTION:

In general, the selection of a site and the analysis of a site is considered one of the most crucial steps, when designing a home for a disabled person. The site selection and analysis must address the following issues:

- Location
- Size
- Zoning and other site constraints
- Neighbourhood context
- Site amenities
- Topography and special features
- Soil conditions
- Orientation
- Site services
- Roads and access
- Transportation, public and other
- Cost
- Sub-surface conditions
- Environmental impact analysis

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[54] Canada Mortgage and Housing Corporation. Housing Choices for Canadians with Disabilities. Ottawa: 1992, p.15

The majority of site selection and analysis activities should address these points from the point of view of the anticipated clients or tenants. Consideration should be given especially to, sites that are within walking distance of local shopping, library, recreational centres, churches and other focal points of community life. Some of the most successful sites are those that allow a visual and physical interaction with the community. According to the support care service that is needed, as discussed in section 4.1, it is also desirable that the outdoor space around the building be suitable for the residents' activities, without making observation difficult, for staffing.

The amount of parking required, will largely depend on the amount of visitors allowed, the number of staff members working, and the number of residents that drive. The sites should also be chosen with the travel distance for visitors and staff in mind. The amount of walking distance that a disabled person can manage and the availability of public transportation in all weather conditions, are critical. Even though the selection of a site may be strongly influenced by land cost, one should not replace all other criteria for this alone.

6.2 DESIGN CRITERIA FOR SPACES/ACCOMMODATION:

In the course of this study, a number of sources were interviewed and consensus reached, around the following issues, or design principles and details, suitable for buildings in which disabled persons are expected to live more comfortably. In interviews with Pamela Cluff, Susan Fredrick, and through the sources such as The Source Book form the Barrier-Free Design centre, Housing Disabled Persons from CMHC, Technical Guide for Special Projects With Care Facilities from the Ministry of Housing and Nursing Homes and Hostels With Care Services for the Elderly: Design Guidelines by CMHC, the following information represents consensus reached, on design guidelines and design principles.

The following design criteria in addition to the selection criteria for a site, provides a list of ideas for consideration in developing a group home, or an apartment building, suitable for disabled persons, ie:

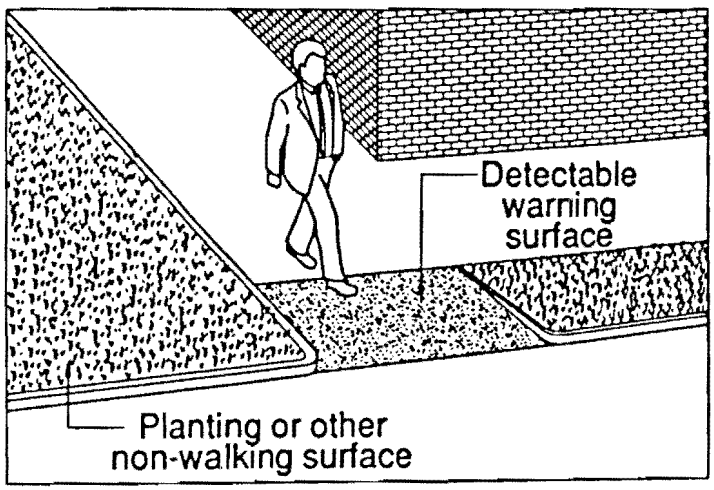
1. Landscaping, Gardens and Terraces;
2. Entrances to the Building;
3. Circulation and Corridors;
4. Service Facilities;
5. Elevators;
6. Public Stairs and Ramps;
7. Heating, Cooling and Ventilation;
8. Fire Safety; and
9. Alarm Systems.

1. LANDSCAPING, GARDENS AND TERRACES

Exterior areas of the site should be planned and landscaped to encourage a variety of outdoor activity, for groups or individuals. A garden or any other outdoor recreation area is desirable to provide a positive atmosphere for residents and visitors. A greenhouse or an indoor planting area may also provide this positive atmosphere for countries with colder climate. A garden may contain a variety of flowers, trees and shrubs. These should be planted to allow movement around the garden, and accessible to anyone. The use of prickly and/or toxic plants should be avoided in all areas because the garden may also be used by blind persons.

The surface of a path is also important and it should be firm and even. Paving blocks with large joints and gravel or mud paths are not suitable. The edges of pathways should be marked by paving or edging materials of contrasting texture and colour. The use of curbs and other raised or depressed features should be minimized, unless they are clearly marked or provide a special amenity. eg: a raised planting bed, or pool, or a raised wall to provide a seal (refer to Figure 6.1).

FIGURE 6.1



Curb Ramp with Returned Curb

Source: Canadian Standards Association. Barrier-Free Design. Toronto: 1990, p.34

Any exterior hose connections and electrical outlets should be placed 600 to 1200 mm above the ground and should be accessible from a paved area. Trees, posts, lamps or other objects, should not produce into normal walking areas. Finally, any fencing, screens and planting should reflect those that are already used in the neighbourhood. This will assist in providing both privacy and security where needed.

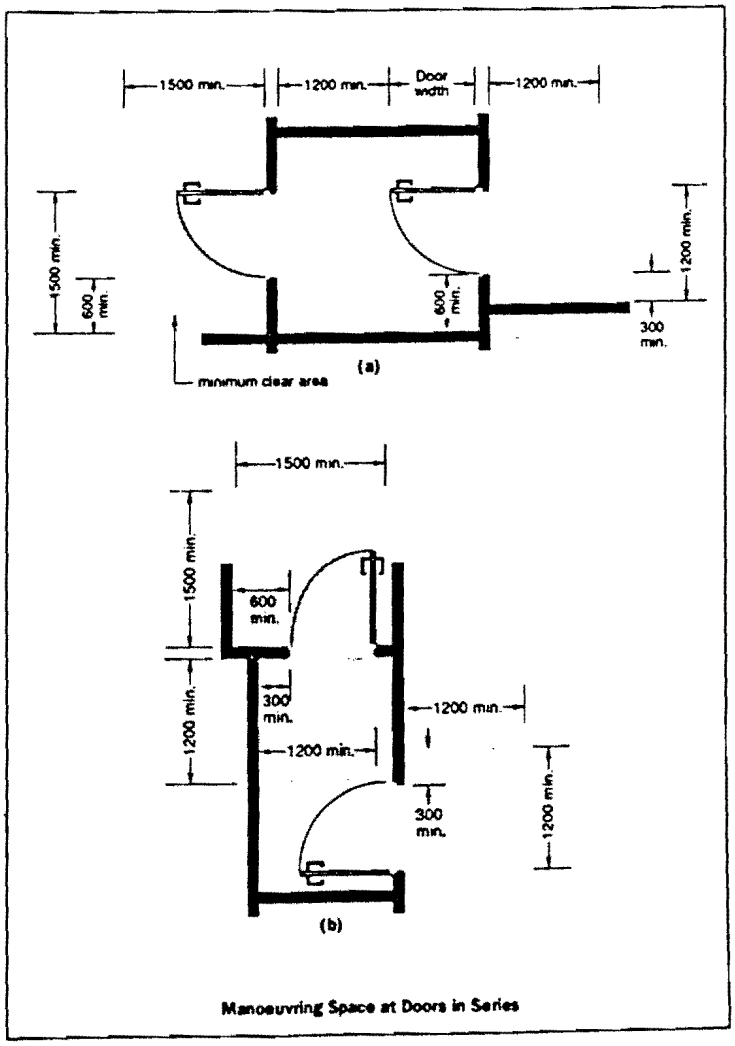
2. ENTRANCES TO THE BUILDING

Entrances should be accessible from street level. Where this is impractical, ramps should be provided. Once an individual approaches an entrance, it should be wide enough to permit access by those in wheelchairs. A minimum of 810 mm clear space between the open door face and the door jamb is required. In many cases, the door would probably be the initial problem, but where a vestibule exists, space must be provided to permit wheelchair manoeuvrability. If the doors are opposite to each other, then the dimension between doors in sequence should be a minimum of two metres (refer to Figure 6.2). The door opening pressure should be low enough so that those with limited arm strength can manage. Not only would the door opening be at a low pressure, but delayed action door closers should be provided, permitting the door to remain open for a minimum of five seconds before beginning to close. The closure of the door should be adjusted so that the door will close in a minimum of three seconds from an open position of 70 degrees.

Where revolving doors are provided, an alternative accessible entrance door should be placed immediately to one side of the revolving door.

The entrances of any exterior or interior door should be level for a distance of 1.5 m from the door in the direction of the door swing and extend 300 mm beyond each side of the door. Finally, any door mats or grills should be level with and firmly secured to adjacent floor surfaces.

FIGURE 6.2



Manoeuvring Space at Doors in Series

Source: Canadian Standards Association. Barrier-Free Design. Toronto: 1990, p.24

3. CIRCULATION IN PUBLIC AREAS

The main design consideration for any circulation space is that accessibility may be achieved for those in wheelchairs (adequate space allowance for manoeuvring). "Corridors are the horizontal circulation component in most residential care facilities. Generally, corridors form part of a circulation pattern linking lobbies, communal spaces and such vertical components as stairs and elevators. In a facility for a disabled person, ease of mobility and length of travel are the two criteria that must be satisfied. In addition, consideration must be given to accessibility, internal orientation and safety".[55] In addition According to Housing Disabled Persons, by CMHC, the three basic design principles are as follows:

1. Changes in level should be avoided, but where they are necessary, ramps should be provided as well as stairs.

2. Space should be provided in corridors and other areas to permit wheelchairs to make a complete turning circle of 1500 x 1500 (refer to Appendix J; illustration #1).

3. There must be adequate clearance for the wheelchair user to open a door without being positioned within the arc of the door swing. A minimum space of 600 mm at the handle side of the door swinging toward a wheelchair, and an access area of at least 600 x 1500 mm, will satisfy this requirement. This area can sometimes be reduced, depending upon the direction of access.[56]

In designing the corridors, they should form logical routes from the point of entry to all usable public areas within the building. Basically studies have shown that people react negatively to public corridors that are long and narrow (as seen in Figure 6.3). Doorways that are leading into a separate living unit should be distinguished by colour and number and should be brightly illuminated. An institutional effect can be avoided through the sensitive use of colour, texture, lighting and through some windows that would allow for some natural outdoors viewing.

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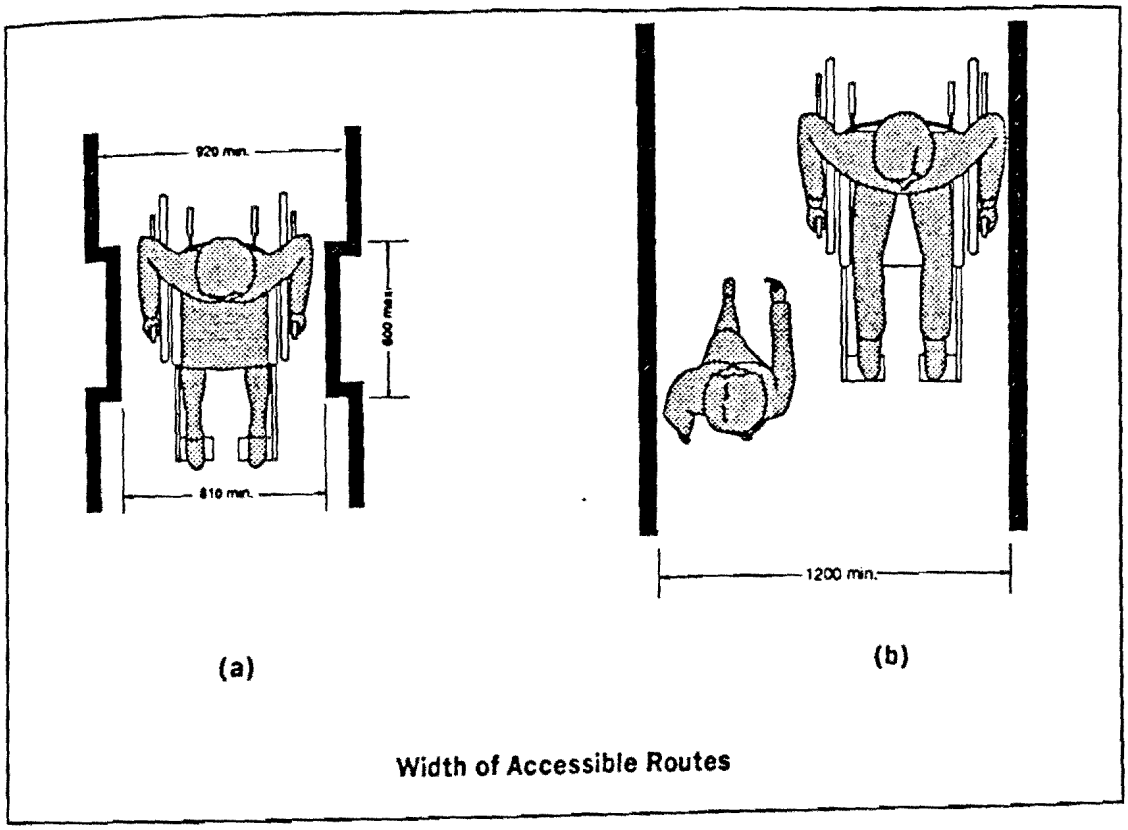
[55] Canada Mortgage and Housing Corporation. Nursing Homes and Hostels with Care Services for the Elderly: Design Guidelines. Ottawa: 1990, p.28

[56] Canada Mortgage and Housing Corporation. Housing Disabled Persons. Ottawa: 1990, p.19

FIGURE 6.3

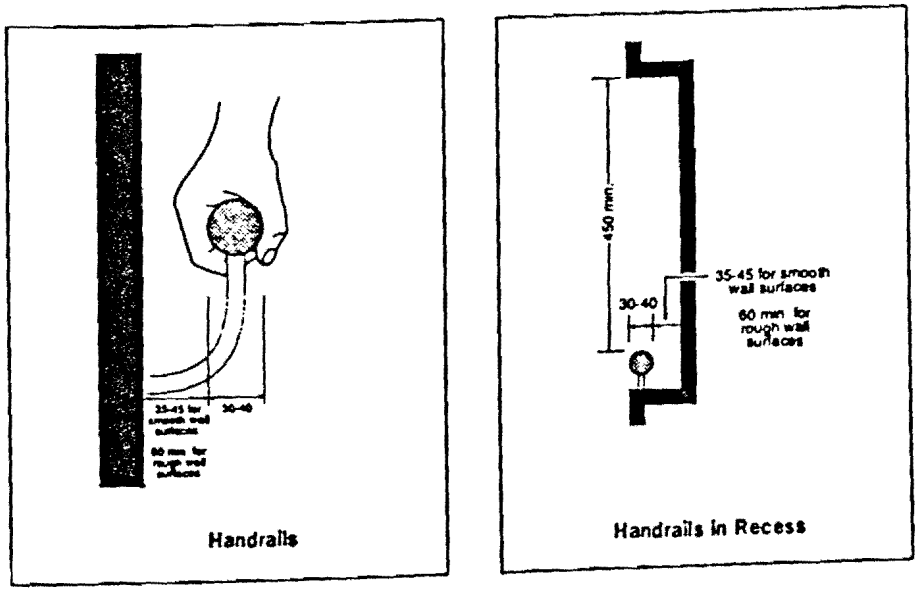


Source: Canadian Standards Association. Barrier-Free Design. Toronto: 1990, p.18

Handrails are also provided, and are mounted on both walls of the corridor, so that a person with a right or left hand can use the support of either side. The handrails would be textured so that an individual may have a firm grip (as seen in Figure 6.4a and 6.4b).

FIGURE 6.4-a

FIGURE 6.4-b



Source: Canadian Standards Association. Barrier-Free Design. Toronto: 1990, p.42

Finally, in many buildings special features may also be taken into account. In some cases these special features may be incorporated to serve as a guide for blind persons. Blind persons may detect textures on wall and floor surfaces to familiarize themselves with the different spaces in a living unit, or facility (refer to Appendix J; illustration #2a and #2b). For example, where two corridors meet, the floor covering may be changed from carpet to wood; similarly, the end of a corridor may be indicated by a break or change in surface material. Although one who is partially blind may only need assistance from large, brightly coloured directional signals placed along the walls to serve the same purpose.

4. SERVICE FACILITIES

In modern residential buildings, we are familiar with certain service facilities such as: a mailbox area, an intercom system, a garbage chute and a laundry room. If the building is to be large in scale, accessible telephones and public washrooms should also be provided as a service facility. The design of these features should meet the needs of people in wheelchairs, or with other disabilities, eg: the visually and hearing impaired.

The mailboxes and call buttons for the intercom system should be placed no lower than 600 mm and no higher than 1400 mm from the floor. In addition an audible intercom system alone may not be appropriate, for a deaf person who, may need a flashing light in addition, to announce that there is a visitor (Redundant Cueing as mentioned in Section 2.3).

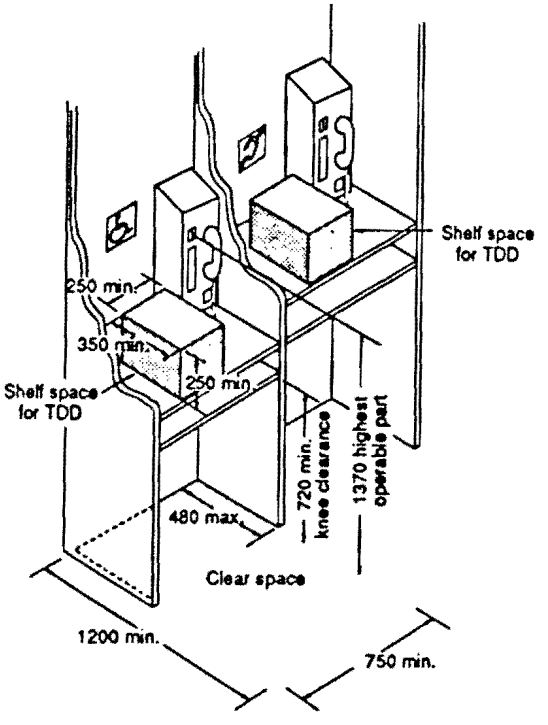
The garbage chutes should have a minimum floor area of 600 x 1500 mm, if it is located in a separate room, or should have easy accessibility if not located in a separate room. Also needed there should be enough space in the laundry room, so that turning movements of a wheelchair are allowed. The laundry machines that are most desirable are the side-hinged, front loading doors, simply because of the easy access from a wheelchair and controls should be easy to reach and use.

In many cases accessible public telephones should be provided for use by persons in wheelchairs, as well as the visually and auditory impaired. The telephones may be mounted on walls, free standing pylons, or in enclosures without doors, at a height no higher than 1200 mm. A shelf may be desirable at a height of 840 mm to hold telephone directories or to support purses etc. Aids to visually impaired persons should be provided, by way of raised numerals, (or electronic devices). An adjusted volume control should also be provided on at least one telephone, in most public buildings and facilities, or in areas with a demonstrated need, to serve the hearing impaired (as seen in Figure 6.5).

FIGURE 6.5

Many deaf and hard of hearing persons use a Telecommunication Device for the Deaf (TDD) with the standard telephone for communicating visually via the telephone system.

Persons using TDDs often carry their own unit and require shelf space for it beside or beneath the telephone.

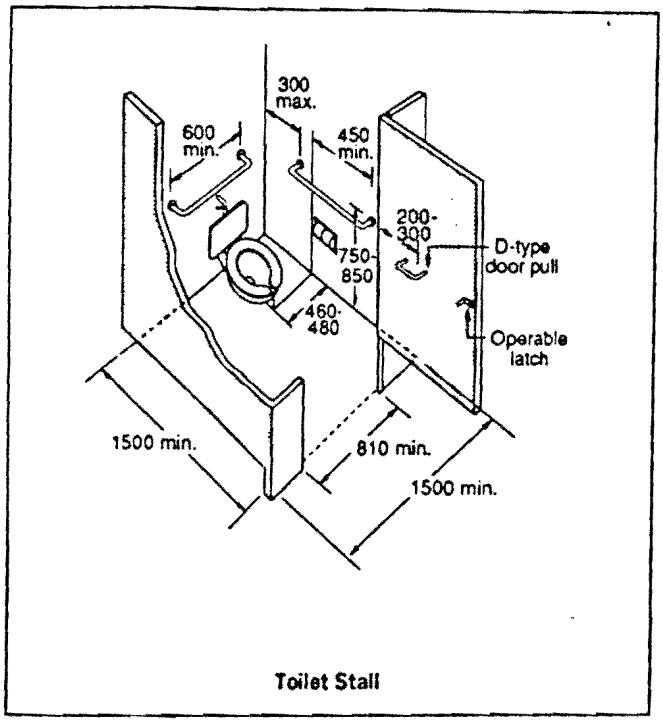


Height of Telephone and Shelf Space for TDD

Source: Canadian Standards Association. Barrier-Free Design. Toronto: 1990, p.62

Finally, the public washrooms are also seen as a service facility that must meet the need of the public. An accessible and properly designed washroom should include an approachable vanity and washbasin; urinals should be floor mounted and level with the floor of the washrooms. Public washrooms should provide a minimum of one water closet that is accessible to wheelchair. Such a stall should be a minimum of 1.5 m wide and 1.5 m deep with the doors at least 810 mm wide and opening outward. Grab bars should be provided and conform to suggested design criteria (as seen in Figure 6.6). In most cases the grab bar on the adjacent wall should be positioned approximately 400 mm from the centre of the water closet. Also soap dispensers, towels, sanitary napkin containers, shelving and other projections should be located so that they will not create a hazard for the blind and with a dispensing height of approximately 1 m from the floor, for wheelchair users (further details, Appendix J; illustration #3a and #3b).

FIGURE 6.6



Toilet Stall

Source: Canadian Standards Association. Barrier-Free Design. Toronto: 1990, p.47

5. ELEVATORS

Elevators are generally the primary mode of vertical circulation in buildings of more than one storey, serving disabled residents. They must be designed so that anyone can operate them conveniently and safely. Safety and reliability are more important than speed. One aspect of great concern is the safety of disabled persons if a fire occurs. Since the elevators are the first item to shut down in the situation of a fire, dependency on an elevator, for the evacuation of disabled persons from upper floors, is of concern, unless alternatively accessible routes are available. For this reason, at least one elevator should be designed in accordance with section 3.2.6.4 of the 1980 National Building Code.

In an interview with Pamela Cluff, it seems that a number of design guidelines exist for the design of an elevator. In general, we can conclude that elevators should be accessible to and serve all major areas and floors of the building. All elevator entrances on every floor should be provided with appropriate floor designations on the door jamb, suitable for the visually impaired. The signalling system should also include visible and audible signals to indicate an approaching car and direction of travel, and:

1. the centre line of the visible signal should be a minimum of 1.8 m from the lobby floor;

2. arrow shapes for directional indication, consistent with the direction of travel, should be used;

3. each symbol shall be 60 mm high, and shall be visible from the proximity of the lobby call buttons;

4. the colour white should be used for the "up" symbol, and the colour red should be used for the "down" symbol;

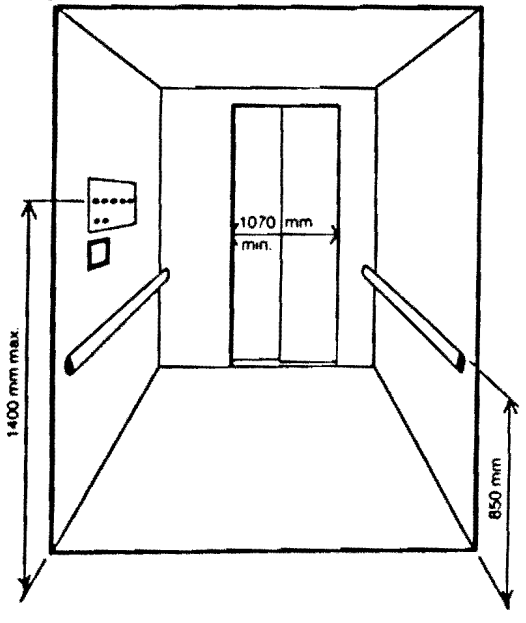
5. audible signals shall sound one for the "up" elevator, and twice for the "down" elevator; and

6. the use of in-car lanterns are acceptable; they should be visible from the area in front of the call button.

7. No controls or emergency call systems should be mounted higher than 1400 mm.[57]

In terms of accessibility by persons in wheelchairs, all call buttons in lobbies should also be no more than one meter plus or minus from the floor surface, and the floor of the cab should be large enough (1500 mm x 1500 mm) and should have door openings no less than 810 mm clear. Elevator doors should open and close by automatic means, and should be provided with a re-opening device which would re-open a car door when the door is obstructed by an object or person. Standard symbols should be used to identify controls. The highest floor button should be no higher than 1.4 m form the floor to the centre of the button and the lowest button no lower than 750 mm (as seen in Figure 6.7). Consideration should be given to the use of braille signage on the control panels, to the right of all standard figures.

FIGURE 6.7



Source: Canada Mortgage and Housing Corporation. Housing Disabled Persons. Ottawa: 1990, p.22

[57] Associated Planning Consultants Inc., Pamela Cluff, (FRAIC, FRIBA, President).

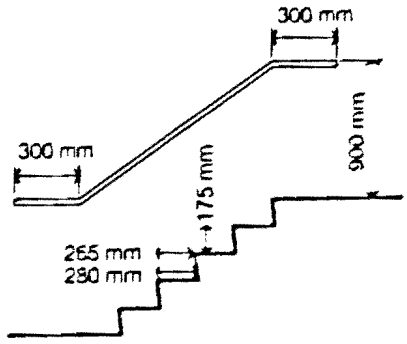
Both a visual and audible cue of floor numbers should be provided. A visual cue may also be necessary to advise persons with hearing disabilities when the emergency call is being received. Finally, handrails should be provided on all sides of the elevator cab and should satisfy handrail design criteria, eg: these should be positioned 810 to 900 mm from the floor and the rail should be mounted 40 mm from the wall.

6. PUBLIC STAIRS AND RAMPS

Where a change of level is unavoidable, a ramp or stair may be used. Even though many elderly and disabled persons do not prefer or need to use ramps, both stairs and ramps should be provided. To satisfy the special needs of disabled persons, it is recommended that both staircases and ramps meet the prevailing codes and standards (see Ontario Building Code).

"The stairways should consist of a start, straight flight, with a minimum of three risers and a maximum of ten risers per flight".[58] In addition, attention should be given to provision of non-slip trends and nosings. Where nosings extend beyond the riser, these should be rounded and should be designed to minimize the possibility of tripping by disabled persons going up the stairs using walking aids or with walking disabilities. For other stair finishes, treads and risers should contrast in colour to eliminate visual confusion. Open risers or projecting treads are not advised. Steps shall also have suitable handrails on either side and be no wider than one metre between handrails (as seen in Figure 6.8).

FIGURE 6.8 Recommended stair details



Source: Canada Mortgage and Housing Corporation. Housing Disabled Persons. Ottawa: 1990, p.23

[58] Canada Mortgage and Housing Corporation. Housing Disabled Persons. Ottawa: 1990, p.23

Ramps should be provided in addition to steps because of the requirement for all disabled persons in wheelchairs, or other disabled limitation. Such ramps should have a maximum slope of 1:12 and a maximum run of 9 m. If long ramps are required, horizontal intermediate landings of 1.5 m are required. Ramps should be wide enough to accommodate a wheelchair but not so wide that handrails or either side cannot be used as an assist. The ramp should be no wider than 1100 mm; with handrails on either side. Although ramps where a volume of wheelchair traffic is expected may have wider ramps of about 1.7 m, these should not exceed 5 m. in length. Also an important feature in the design of ramps, are the addition of guardrails or curbs at the sides, to prevent the front wheel of the wheelchair from rolling over the edge of the ramp (refer to Appendix J; illustration #4).

Lightening should be provided over all major access paths, ramps and steps to ensure safe travel at night. The proper lightening should highlight any changes in level or direction. Ramps and steps should also be protected from water, snow and ice accumulation.

7. HEATING, COOLING AND VENTILATION

Some of the special needs that disabled persons experience, include the proper amount of heating, cooling and ventilation. It is important that disabled persons can control the temperature, ventilation and humidity in their own home. "The heating system should be capable of operating at a normal temperature of 24 degrees Celsius, rather than the usual 22 degrees Celsius".[59] In regions where summers are hot, a proper air cooling system should be provided, particularly for small apartment units that have poor ventilation. The method of cooling a room should not be by opening a door or window, but rather should be a built-in HVAC system. Also important is the enclosure of radiators and heating pipes where temperatures exceed 44 degrees Celsius because many disabled persons lose the sensitivity of their skin to direct heat, and are subject to burns.

[59] Canada Mortgage and Housing Corporation. Housing Disabled Persons. Ottawa: 1990, p.24

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8. FIRE SAFETY

As mentioned earlier, "safety from fire is especially important for disabled persons because they are unable to move quickly and freely and maybe unable to use normal escape routes".[60] Some of the more critical issues regarding fire are related to safety in high-rise buildings, eg: where the elevator system shuts down, or if smoke infiltrates into emergency stairwells. Part three of the National Building Code of Canada contains requirements for fire safety in certain types of buildings. These are not the only fire safety requirements, one must also meet the fire and life safety code requirements and allow for inspection by the local fire department. Further detail according to what specific requirements the fire department requests will be discussed in section 7.3 of the report.

Some elements that are crucial to life-safety for disabled persons, housed on floors above the first storey, according to the publication set out by CMHC, Housing Disabled Persons, are:

1. Under the National Building Code, section 3.2.6.9, a voice-communications system is required in residential buildings that are more than 36 m in height. Where many disabled persons are expected to be housed, this requirement is recommended to include residential buildings with more than one floor above ground level.

2. Balconies should be used as a supplementary refuge area and as an escape point where fire-truck ladders can be provided. Equipment limitations restrict the usefulness of this measure to a maximum of about nine floors.

3. Smoke and heat detectors should be installed to comply with local fire regulations and bylaws. Smoke detectors should be provided in each unit, connected to a central alarm terminal.[61]

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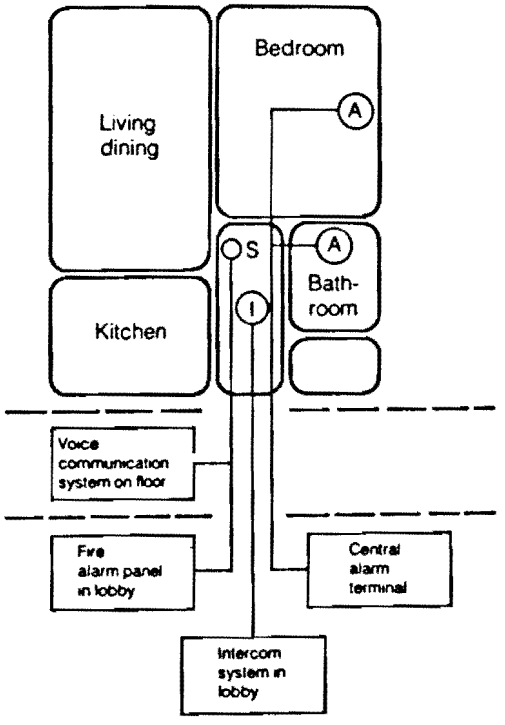
[60] Canada Mortgage and Housing Corporation. Housing Disabled Persons. Ottawa: 1990, p.24

[61] Ibid., p.25

9. ALARM SYSTEMS

An alarm system is most practical when an individual may fall, hurt themselves, or become ill and helpless without anyone knowing. When a disabled person is living on their own the need for an alarm system may be practical, because of higher rates of sickness and accidents among disabled persons. A typical alarm system is recommended (as seen in Figure 6.9), linked to a central response terminal, connected to all the dwelling units. It is also suggested that the bathrooms as well as living rooms be linked, because of the many accidents that occur there. Most emergency alarm systems include a mechanical push-button or pull cord, but alternatives also include a whistle carried by the disabled person, which can trigger the alarm system. For other types of emergency, the dwelling unit, eg: for a deaf person may also have a flashing light that would operate, when the fire alarm system is triggered. At night-time, that person could also receive a vibrating signal inside the bed, as a warning that the fire alarm has been triggered.

FIGURE 6.9



S — Smoke detector

A — Alarm system

I — Intercom

Source: Canada Mortgage and Housing Corporation. Housing Disabled Persons. Ottawa: 1990, p.25

6.3 OTHER CONSIDERATIONS:

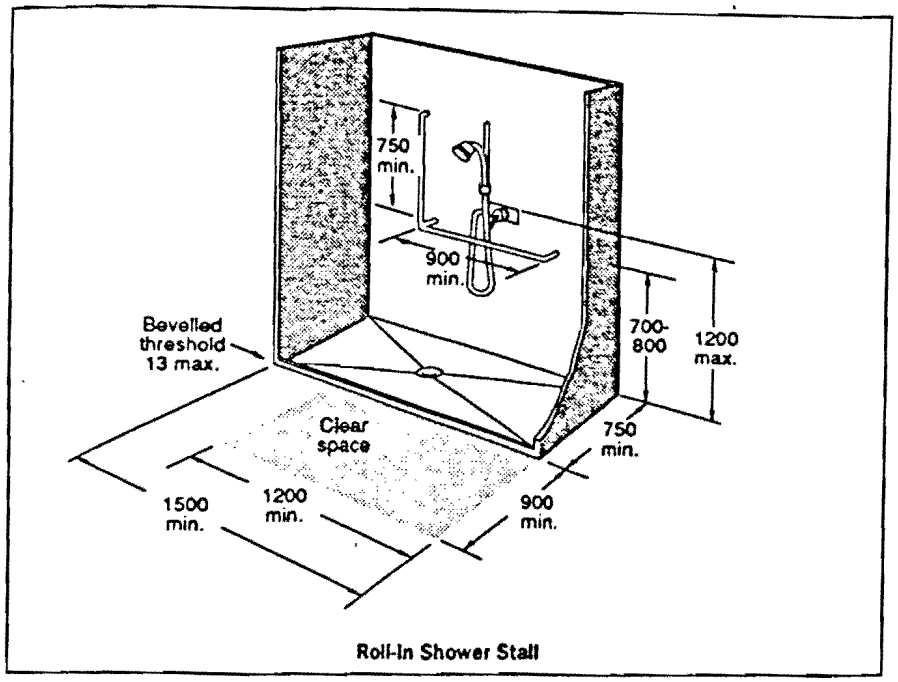
When designing the interior areas of a group home (refer to Appendix A), easy access and comfortable use by persons with a wide range of disabilities should be considered. Within a group home a number of possible spaces should be taken into consideration, such as: entrance; reception/administrative office; lounge area (passive recreation); activity area (active recreation); dining room; kitchen; kitchen dry food storage; laundry; mud room/service entrance; bedrooms; bathrooms and washrooms; housekeeping supplies; linen storage; staff accommodation; mechanical/electrical; storage; and ground and maintenance equipment. When designing for disabled persons, the three major spaces that require the most consideration are; bathrooms, kitchens, and bedrooms. In the course of the study, a number of sources outlined these particular guidelines, such as Housing Disabled Persons by CMHC and The Source Book from the Barrier-Free Design Centre. General consensus was reached on the following uses of bathrooms, kitchens, and bedrooms.

1. THE BATHROOM

When designing for accessibility, no location in the home is more important than the bathroom. It is often the first and only room to need modification. The appropriate goal is to provide what the client needs in order to function. The bathroom is a prime location for household accidents. The combination of water and soap can easily create conditions that are hazardous to the frail, the elderly, the disabled, or anyone in that residence. The bathroom functions may be subdivided into four different components, they are: showering, bathing, toileting, and washing at a sink. All the water faucets in a bathroom should include pressure compensation valves and the thermostatic controls, set no higher than 43 degrees Celsius, to reduce the risk of scalding.

The shower should have an adjustable-height shower head mounted on a vertical track. The shower head and controls should be mounted within easy reach. A bench or a folding shower seat allows someone in a wheelchair to transfer and use the shower. The flooring should be of non-slip material and the disabled person must be able to test water before stepping in, since they will not be able to avoid spray very quickly. The most appropriate shower should be curbless, so that anyone may use it, not only those in a wheelchair. Depending on the amount of space available, the client should be able to wheel right into the stall (as seen in Figure 6.10). This will also determine whether grab bars and/ or a folding seat will be necessary.

FIGURE 6.10



Roll-In Shower Stall

Source: Canadian Standards Association. Barrier-Free Design. Toronto: 1990, p.94

When designing a bathing facility the essential factor is safety. A non-slip surface and frequent handholds should be provided. Also in terms of safety, an emergency call system should be provided. A hand held shower head that is reachable from a sitting position should also be available to facilitate rinsing-off and hair washing from a sitting position. A space should also be provided so that the client can gather the items necessary for bathing. If a disabled person finds it difficult to raise or lower themselves, grab bars, tub stools, or tub lifts may be needed. An alternative bathing unit could be a deck-mounted tub with faucets mounted on the side. The client should be able to sit safely when testing the water, with the faucets within easy reach (refer to Appendix J; illustration #5).

When using a toilet, certain provisions would make it easier for someone with a disability. One should provide a wheelchair park space at the appropriate location for the desired type of transfer. Some wheelchair users can achieve an independent transfer without grab bars. A firmly mounted shelf, counter, ledge, or reinforced towel rack may be sufficient. Grab bars are generally not necessary in a private home, but may be placed according to the client's requirements.

Finally, in determining the mounting height of the sink and/or counter, it may be necessary to limit sink depth in order to provide adequate clearance underneath. Even if the clients balance and reach are good, he or she may still need to get their knees under the sink. If the disabled person's balance is poor and his reach is restricted, it may be necessary to mount the sink high enough to clear *the wheelchair's armrests. The faucets should be easy to reach from a seated poistion (refer to Appendix J; illustration #6).

2. THE KITCHEN

The kitchen is also important in terms achieving an appropriate design. The kitchen design in most cases should respond directly to the clients need. The kitchen may be subdivided into five different functional components, they are: storage and base cabinets, cleaning centre, food preparation, cooking, and eating.

The storage and base cabinets are most frequently used, in a kitchen for a wheelchair user, whereas overhead cabinets are of limited usefulness. "Counterspace usually occupies the most ideal space within a person's range. Since counters without kneespace underneath are not very usable, consider reducing the counterspace and substituting pantry storage units to increase the amount of storage space within the client's reach".[62] Since not all wheelchair users can reach down to the floor, one should establish the proper design heights according to the clients need (refer to Appendix J; illustration #7).
The cleaning centre would normally include the sink, built-in garbage disposal, and dishwasher. The design criteria for the sink would be similar to those described earlier for the bathroom. Built-in garbage disposals and dishwashers should be incorporated within the kitchen layout to suit the client's reach and balance.

A major concern for food preparation areas is to determine and achieve an acceptable height and greatest continuous work surface with height and knee clearance below for wheelchair users, at specific locations. The chosen work height may also affect the choice of appliances. For example, if the range is too high a drop-in range or surface cooktop may be in order, since they can be mounted at any level. One should provide a clearance of 400 mm between countertops and the underside of wall cabinets to allow room for appliances. Storage of utensils should be close to working areas, to minimize travel (refer to Appendix J; illustration #8).

The major factors for cooking are related to safety and the choice of appliances. Certain factors such as front controls make it unnecessary to reach over the stove when it is hot. Where the controls are at the front, they should be tamperproof (e.g. push-turn) to protect small children. "Kneespace below an oven, cooktop, or microwave is not recommended. The user cannot dodge hot spills. If the client does not favour parallel approach to the appliance, provide a space below the counter at the side of the appliance".[63] In many cases the conventional range may be too high. So wall ovens, microwaves, and cooktops should all be adjusted to the desired height. The location of the utensils should be nearby and pull-out boards may be needed to accept hot items below the cooktop or oven (refer to Appendix J; illustration #9).

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[62] Barrier-Free Design Centre. Source Book, The. Toronto: 1987, p.68

[63] Barrier-Free Design Centre. Source Book, The. Toronto: 1987, p.72

The dining area, where a disabled person would eat should be nearby the kitchen. A disabled person in a wheelchair may need a 760 mm by 1220 mm parking space, and would need at least 1220 mm of clearance between the table and any obstruction to manoeuvre into position at the table. The table that is recommended should be one with a centre pedestal that offers less obstruction than a table with corner legs.

3. THE BEDROOM

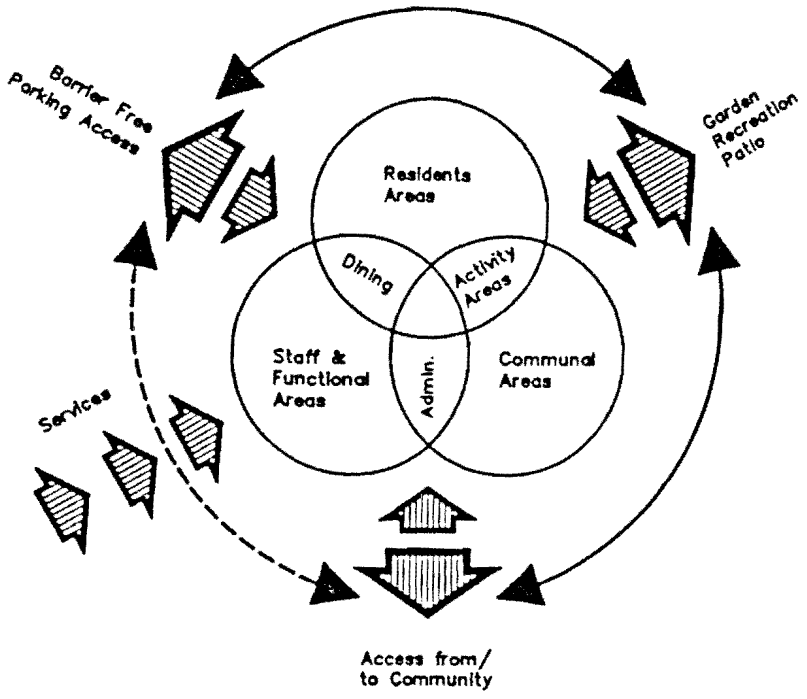
The bedroom is the only room, perhaps, in which the client will have privacy and control of his environment. At least some leisure activities should be accommodated in the bedroom. In many cases once the client is in bed, they will not want to rise again to answer the telephone, turn off the lights, turn off the television or radio, or answer the door. The need for control from the clients bed tends to increase, depending on the disability. A turning space of at least 1525 mm is preferred between the bed and closet, as well as 915 mm of access space on both sides of the bed. Access space infront of the windows and balconies should be provided so that the client can reach the controls.

The closet and dresser should be close by and the closet doors should be easy to open, most commonly recommended are sliding doors. The rod height in the closet should be set to the client's reach (refer to Appendix J; illustration #10).

A client depending on their disability, may have different sleeping and rising techniques. Some clients may need a suspended bar or a trapeze to pull themselves upright, therefore it may be necessary to reinforce the wall or ceiling to carry the load. If the client needs assistance only when rising, then a call button would be convenient. Finally, the type of bed and size, would depend on the disability, the size of the room, and the clients need.

The organization of these spaces within the proposed group home, apartment building, or family home, should be determined by an evaluation of the desired relationship among them. When setting an architectural program for rehabilitation work as well as for new design a hierarchy of values should be used to establish priorities, such as the general planning schematic seen in Figure 6.11.

FIGURE 6.11



Source: Ministry of Housing. Technical Guide for Special Projects with Care Facilities. Toronto: 1992, p.1

6.4 IMPLEMENTATION:

Through interviews with designers or architects, and the Barrier-Free Design Centre, I have noticed that there are many sources available for designing any disabled unit. However, the reader should be aware that these resources are not widely utilized, studied, or known by the housing industry. The housing industry therefore does not utilize these sources or apply the necessary information automatically when doing any new project.

Even though many designers and consumers are aware of the need for housing persons with disabilities, the housing industry has not generally adopted accessibility and barrier-free design principles. The government is therefore finding that there is a need to provide a range of cost-effective housing options to address a variety of individual needs and preferences.

Many housing design concepts have gradually emerged with the awareness of issues such as accessibility and barrier-free design. The ten different housing concepts according to Housing Choices for Canadians with Disabilities, published by CMHC, are: Accessible Housing; Adaptable Housing; Adapted Housing; Barrier Free Housing; Housing for Environmentally Hypersensitive People; Life Care Housing; Lifespan Housing; Mobility Housing; Safe Housing; Universal Design; and Wheelchair Housing (refer to Appendix M). All of which are seeking to represent the need for solutions which accommodate a wide range of housing needs.

It appears important that these design guidelines and principles be incorporated into appropriate federal/provincial/municipal legislation and implemented through local bylaws. The provincial and municipal building codes should also be amended to accommodate housing design criteria appropriate to all types of disability and to ensure that a wider variety of building types are accessible. I also feel that legislative provisions should be developed for the retrofit of older buildings to make them accessible to disabled persons. In conclusion, it appears that all physical components, amenities and furnishings within public buildings and a wide range of housing types should be accessible to and usable by disabled persons, if we are to meet the overall objective of integrating disabled people into the mainstream.

7.0 REGULATORY FRAMEWORK & COMMUNITY INTERACTION:

7.1 Zoning & Planning Requirements
7.2 Metropolitan Toronto Draft Official Plan
7.3 Building By-Laws
7.4 Fire Safety Requirements

7.0 REGULATORY FRAMEWORK & COMMUNITY INTERACTION:

7.1 ZONING & PLANNING REQUIREMENTS:

For the purpose of this section, the type of special needs housing that is examined, in the context of the regulatory framework, is a group home. If the project appears feasible from the Ministry's point of view, then a series of steps in the process, determines the circumstances under which the proposed home may be legally established in the community.

The definition of a group home according to the City of Toronto zoning by-law 438-86 (amended 0from by-law 332-78), falls under the term "residential care facility":

> "means a residence for the accommodation of six to ten persons, exclusive of staff, who be reason of their emotional, mental, social or physical condition or legal status require a group living arrangement for their well-being where:
>
> (i) the facility is supervised, or the members of the group are referred, by a hospital, court or government agency; or
>
> (ii) the facility is funded wholly or in part by a government, other than funding provided solely for capital purposes; or
>
> (iii) the facility is regulated or supervised under a general or special Act;
> but does not include any use otherwise classified or defined in this by-law".[64]

One of the first concerns for the provider is to verify with the specific municipality the zoning requirements for group homes. Throughout Metropolitan Toronto, many different possibilities would be confronted in the following municipalities: East York, Etobicoke, North York, Scarborough, Toronto. The following will explain the zoning restrictions for these municipalities.

EAST YORK (Borough of):

> -The Borough's Official Plan makes no specific provision for group homes, but a policy that would permit all types (except correctional homes) in residential areas without the need for site-specific amendments has been approved.
>
> -Under current zoning provisions, group homes may only be established through site-specific amendments.[65]

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[64] City of Toronto Planning Department. "A By-Law: No. 438-86". Toronto: 1986.

[65] Ontario Secretariat for Social Development. Ontario Group Homes: Resource Manual. Toronto: 1983, Appendix B-4

ETOBICOKE (Borough of):

-The Borough's Official Plan makes no specific provision for group homes.

-Under current zoning provisions, group homes may only be established through site-specific amendments. Council has established principles for consideration of site-specific amendments.[66]

NORTH YORK (City of):

-The City's Official Plan has been amended to designate all but one type of group home as a permitted land use, in residential areas.

-Under current zoning provisions, all types of group homes (except correctional homes) are permitted in residential areas without the need for site-specific amendments. Correctional group homes are restricted to arterial roads.

-A maximum of ten persons, excluding staff or receiving family, is permitted in all group homes.

-Only one group home per neighbourhood - as defined by the municipality - is permitted, and group homes must be separated from one another by at least 300 metres.[67]

SCARBOROUGH (Borough of):

-The borough's Official Plan has been amended to designate group homes for mentally retarded persons as a permitted land use in residential areas.

-Current zoning provisions permit group homes for mentally retarded persons in single-family and two-family dwellings in all residential areas. All other types of group homes may only be established through site-specific amendments to the zoning by-laws.

-Three to eight residents, exclusive of staff, are permitted in group homes.

-Group homes must be separated from one another by at least 800 feet.[68]

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[66] Ibid., Appendix B-4

[67] Ibid., Appendix B-10

[68] Ibid., Appendix B-13

TORONTO (City of):

-The city's Official Plan makes no specific provision for group homes, but group homes are recognized as a permitted land use in the city's comprehensive zoning by-laws.

-Under current zoning provisions, group homes may be established in all residential area without the need for site-specific amendments.

-Six to ten residents, exclusive of staff, are permitted in all group homes.

-Group homes must be separated from one another by a distance of at least 600 feet.

-Note: The provisions of Toronto's zoning by-laws are considered to be consistent with the Metroplan amendment which has been adopted by Metropolitan Toronto.[69]

Throughout all the municipalities, the provider will be confronted with different problems such as, but not limited to the following problems. Firstly, the provider would have to know which zoning by-laws permit the group home for developmentally and physically handicapped persons according to the residential area. Secondly the "municipal policy, which only permits the establishment of some or all types of group homes via a site-specific amendment to the zoning by laws, which designate the purposes for which property in a given area may be used".[70] Therefore, the final problem that the provider will be faced with, under zoning regulations and assuming that the project meets all general requirements mentioned earlier, is whether they need a site-specific amendment or not.

If the municipal zoning by-laws permits a group home at the location that the provider has selected, without the need for a site-specific amendment, then the provider may then go to the province for licensing and for funding approval of the home. If a site-specific amendment is required, then the provider must wait for the amendment to be approved before applying for licensing or funding from the Province. The provider, before actually receiving funding and the licensing of the group home, will also have to comply with the Building and Fire Department's regulations relating to building standards, health, fire safety, and occupancy.

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[69] Ibid., Appendix B-16

[70] Ibid., p.VII-2

7.2 METROPOLITAN TORONTO DRAFT OFFICIAL PLAN:

According to the 1992, Draft Official Plan by the Municipality of Metropolitan Toronto, their objective, with respect to non-profit housing and housing for 'special needs', is "to provide and support non-profit housing to meet the requirements of those with special needs, and to encourage the area municipalities to support the provision of non-profit and special needs housing".[71] This area of housing, as discussed in section five is largely dependant on government financing. This plan has considered the importance of the non-profit housing within Metropolitan Toronto. A number of problems are faced by the providers, such as high land values, unavailable sites, insufficient funds to purchase land, and an extremely time-consuming development approval process. All of these factors have contributed to the slow construction of non-profit units within Metropolitan Toronto.

The following policies, outlined by the Metropolitan Toronto Official Plan, (refer to Appendix K) are designed to take into consideration many of these problems. Metropolitan Toronto is also focusing on changing the level of acceptance and involvement by community members. Such changes allow many 'special needs' projects an opportunity, that previously wasn't available.

7.3 BUILDING BY-LAWS:

If a desirable location has been found by the provider, which meets the zoning requirements, applying for the building permit would be the next step. In the City of Toronto a registration system has been established for group homes, based on the application for a building permit. The provider of a group home must make an application for a building permit to establish a residential care facility, even though changes to the property are not necessary. This ensures that any proposed facility will be examined for compliance with zoning and other by-laws, as well as the Ontario Building Code.[72]

The registration process for all group homes, in order to achieve a building permit, requires that the client must meet with the Planning and Development Department's 'Group Home Co-ordinator'. The group home co-ordinator would determine whether the provider is proposing an adequate group home according to the City's definition. Usually, if the provider has a specific property in mind, the Planning and Development Department checks to see, according to the group home maps, if the project meets the zoning provisions, and if it complies with the distancing provision. If a site has not been selected by a group home provider, the Planning and Development Department may suggest to them where current homes are currently concentrated, so that they don't waste time looking in those areas. Once the property has been selected, and

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[71] Municipality of Metropolitan Toronto. The Liveable Metropolis: Draft Official Plan. Toronto: 1992, p.48

[72] City of Toronto Building Department. Jim Laughlin.

if it satisfies all of the restrictions, then provider submits a written request for a zoning confirmation to the manager of the 'Permit Services Section' of the Buildings and Inspections Department. The Buildings and Inspections Department considers the date of receipt of the building permit application, to prioritize areas, where more than one application has been received. Once the application is received, the Buildings and Inspections Department contacts the group home co-ordinator to confirm that the site meets with the distancing provision and any other relevant criteria. Before the building permit is issued, the group home co-ordinator will then advise the provider about the neighbourhood dialogue guidelines as discussed in Section 3.3. The provider will then notify the neighbourhood from the advice that is received, by both the group home co-ordinator and the neighbourhood dialogue guidelines, (refer to Appendix E). Once this is all completed, the provider is then issued a building permit and the group home is entered into the registry.

One of the major problems, in terms of building by-laws, lies with the definitions set out in the building code. The national building code of Canada classifies "infirm persons" as "all institutionalized persons whose age or health is such that they require institutional care or treatment".[73] When the Fire Department or Buildings and Inspections Department refer to this definition, they tend to interpret this to mean that disabled or elderly persons, are frail and infirm, therefore they tend to categorize such homes as institutional settings. I feel that this argument could be argued under the Human Rights Legislation, for the simple reason that this is differentiating between able and disabled persons. If one cannot discriminate by virtue of disability, or age, or gender, then the building code should not discriminate either.

If a building is categorized as an institutional project, then two serious impacts can result. The first is that an increase of up to 10 per cent in capital cost may result, just to meet increased fire safety ratings (i.e. to fit an institutional building requirements). There would also be an additional 10 per cent increase to the capital cost, because different locals, that are then used on the project. This increase of 10 per cent results because the union locals who build residential buildings, do not charge the same rates as those who build institutional buildings. Another problem, resulting from this building categorization is that the resulting building tends to limit the autonomy of the individuals in the building environment because of the increased fire safety requirements.

[73] National Research Council of Canada. National Building Code of Canada. Ottawa: 1985, p.8, section 1.3.2.

7.4 FIRE SAFETY REQUIREMENTS:

The Fire Department does not generally have a specific classification for group homes. The fire code may identify a group home as a "boarding house", thus making it fall within section 9.3 for boarding, lodging and rooming houses. The definition of a boarding, lodging and rooming house under the Ontario fire code is, "any building that doesn't exceed three storeys or building area of 600 metres square, that is providing lodging for more than three persons, or the provision of services and the lodging rooms do not have both bathrooms and kitchen facilities for the exclusive use of the individual occupants."[74]

In the Ontario Fire Code, part nine is known as the retrofit section which is separated into four sections, they are:

1. Containment;
2. Means of Egress;
3. Fire Alarm and Detection; and
4. Suppression Equipment.

Every group home is required by-law to conform to each of these four sections. According to Chief Scovell from the City of Toronto Fire Department, every section is important and they all play a key role towards keeping the fire-safety requirements at a high level. To prioritize a section, the Fire Department would say that the exiting and certainly the fire alarm and detection would be the two areas of most importance.

In simplest forms the fire alarm and detection requirements needed in a boarding, lodging and rooming house, which has an occupancy load of up to 14 persons, include the installation of an interconnected smoke alarm system. The smoke alarm system must consist of smoke detectors mounted on the ceilings, in the common corridors of the buildings adjacent to stairwells and interconnected throughout.

When considering the means of egress for buildings with an occupant load up to ten, the owner is allowed to provide continuous corridors. The bedroom doors and all other doors leading on to the common corridor should have a fire resistance rating. Not only is specific fire resistance needed, but the doors also have to be provided with self-closing devices. The reason being that those doors along that continuous corridor (provided that everything goes perfectly), remain closed in the event of a fire and therefore provide a reasonably well contained route for the occupants to exit the building. [75]

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[74] City of Toronto Fire Department. Ted Scovell (Chief Fire Prevention Officer).

[75] City of Toronto Fire Department. Ted Scovell (Chief Fire Prevention Officer).

The containment, section of 9.3 of the Ontario Fire Code, simply deals with the internal materials that have been used for constructing the building, such as lath, plaster, gypsum wall board. Other requirements that are considered under this section is the fire separation of furnace rooms in group homes. When the floor area in which the furnace is located, contains a bedroom, a recreation room, meeting or hobby room, then under the code, it will be required to have a fire separation of forty five minutes (or be sprinklered) in order to be separated as a different space. Most of these fire safety restrictions with respect to group homes came in affect after the well publicized fire in a rooming house in 1989, ie: the "Rupert Hotel".

With all of these requirements in the Ontario Fire Code for boarding, lodging and rooming house, the provincial authorities (authors of the code) recognize the fact that there are certain buildings, where strict compliance with these regulations cannot simply happen. The municipality has to examine "Submitted Life-Safety Plans", put together by a professional architect or engineer in co-operation with the client. Such a plan should address each of the four areas indicated earlier and identify where compliance can not be met, based upon the strict interpretation of these code requirements. They will, under their professional opinion, recommend to the Fire Department, reasonable and viable alternatives whereby an equal level of life safety might be achieved. The Fire Department, after analyzing the submitted Life-Safety Plans, then formulate their opinions and either accept, reject or modify the proposal. Along with the life-safety study, the Fire Department may also analyze the submission (and reasons for de-institutionalizing the look of the place) and at times may consider a management plan as part of the Life Safety Plan. Such a management plan generally indicates to the Fire Department, how well the building is managed on a daily and nightly bases. A checklist for summary management plans for submission with Buildings and Fire Department applications (refer to Appendix L), has been set out as a guideline for all providers.

The sample management plan (refer to Appendix L) tells providers, what to include, eg: an Introduction, Roles and Responsibilities, personnel, leasing and occupancy, financial and accounting, and maintenance practices.

The majority of housing providers are primarily concerned with the appearance of the first floor area, the living and common areas (to de-institutionalize the look), as opposed to the bedrooms themselves. The Fire Department feels that the homes should have more early detection strategies, to permit early warning of any endangered areas plus a management plan which would compensate for doors and closers that would normally be required. In order to use the building for this purpose, the provider must initially go before the Department of Buildings and Inspections. When the provider obtains his permit from the Department of Building examination, they also have the approval of the provider obtains his permit from the Department of Building examination, they also have the approval of the Fire Department as well.[76]

[76] City of Toronto Fire Department. Ted Scovell (Chief Fire Prevention Officer).

In order to obtain the services on an annual basis, the provider of the group home is required to have the home inspected by the Fire Marshal. The home is inspected according to the specifications outlined for lodging houses in the Ontario Fire code, as well as the Ontario Regulations of the Fire Marshals Act. The fire inspector examines numerous things in the home, but the first and most important is the "Fire Safety Plan". "The existence of a "Fire Safety Plan" which outlines the emergency procedures to be used in case of fire, including sounding the fire alarm, notifying the fire department, instructing occupants on procedures to be followed when the fire alarm sounds, evacuation of occupants, and confining, controlling and extinguishing the fire. Also included in the plan, is the course of instruction of staff and other occupants so that they are aware of their responsibilities for fire safety, the holding of fire drills, the control of fire hazards in the building, and the maintenance of building facilities provided for the safety of occupants".[77] Other items that the inspector examines include the fire alarm system, the doors in fire separations, and other safety requirements that fall under both the Ontario Fire Code and the Ontario Regulations of the Fire Marshals Act. Once the home has been inspected, the provider receives a letter indicating all of the deficiencies if any, that must be corrected, in order to comply.

[77] City of Toronto Planning and Development Department, and Ontario Secretariat for Social Development. "Group Home Primer for the City of Toronto". Toronto: 1984, p.12

8.0 MANAGEMENT PROCESS:

8.1 Project Development
8.2 Conceptualization
8.3 The Project Planning Stage
8.4 Construction
8.5 The Operation Stage
8.6 Economy of Scale

8.0 MANAGEMENT PROCESS:

8.1 PROJECT DEVELOPMENT:

This section outlines a step by step approach to the procedures that are used to ensure housing objectives that are met economically and effectively. In interviews with Anne Dundas, Pamela Cluff, and through the sources such as Housing an Aging Population, by the Government of Canada, and Designed for Seniors, by the Ontario Association of Homes for the Aged, the following information is summarized, based on the consensus reached for the complex project development process.

Organization of the tasks are in four stages, they are:

1. Conceptualization
2. Project Planning
3. Construction
4. Operation

The project development process can be used for projects such as group homes, or for multi-unit projects, such as apartments. Depending on the nature of the project and its location, this particular process will change, time scheduling, complexity and sequences within the various stages. It is a lengthy period from the conceptualization stage to the operation stage, for example an average project can take approximately three to four years. The project team is therefore very important, as a means of bringing the project to successful completion.

8.2 CONCEPTUALIZATION:

Every project starts with an idea that must be clearly defined at the beginning, otherwise during the construction phase there may be costly changes. Ideas at the conceptualization stage, derive from the following elements, and are broken down into the following categories:

1. User Group Requirements
2. Housing Requirements
3. Housing Options
4. Financial Feasibility
5. Project Financing

1. User Group Requirements

One must identify who will use the new housing as described earlier in section 2.2 and 2.3 of the study. The user is the person, or persons, who will be living in the dwelling unit, and it is important to know as much as possible about theses users. In identifying the users' characteristics, one needs to identify certain things such as; age, health, marital status, income, ethnic origin, religion, family proximity, interests, resources, functional disability, etc, in order to be able to assess actual housing requirements.

2. Housing Requirements

When planning housing for 'special needs', one must assess current and future housing requirements, by considering health, special needs, (ie: related to any disability) space for visiting family, space requirements for special facilities, and financial resources available for construction/modification or purchasing of the house or building, and its continuing maintenance.

As mentioned in section four, a disabled person will also need to look for available community support services, which he/she may need in the future. If they are planning to relocate this is very important. When planning to relocate one must also consider the potential for social activities and friendship in the local community.

The need for nearby social and health-care services may change for residents, if their health or mobility, changes. Transportation is also crucial, as the intended residents must be able to access shopping, recreation, entertainment and places of worship. Long term marketability must also take into consideration changing life styles. Projects are usually unsuccessful if they only plan for current needs.

3. Housing Options Available

It is essential for one to be aware of different ideas, and of the various housing types (refer to Appendix M) that are available, and to be open to any new forms of housing or related innovative ideas, that have been developed. The type of housing that one chooses should therefore reflect the type of independence that the user aspires to.

4. Financial Feasibility/Affordability

A major consideration is financial feasibility, when assessing the option that is best suited to the conditions. In order to figure out whether or not the housing is affordable, one must work out the cost of developing, operating and maintaining the project. This must be done before construction begins, in order to ensure that rental income or occupancy charges, are enough to cover debt servicing and operating costs.

Project Costs Include:

1. Capital Costs, land and construction, and fees and 2. Operating Costs, which include municipal taxes, utilities, maintenance, and administration. As well as debt servicing (eg: mortgage/ loan/ interest payments). The local builders, development consultants and lenders, can help to determine current construction costs. To estimate the building costs per unit, multiply square feet of building area proposed, by the local construction cost, per square foot. The project must be subsidized if the rent will not cover the costs. Subsidies or independent fund raising, should balance the cost/affordibility. In the case that subsidies etc. are not available, or secured, then the project should be reconsidered.

5. Project Financing.

An important step in developing a good project idea is to look at all of the resources available. One must consider if the size and scope of the project meets the available resources. This should be done at the conceptual stage if the project is to be realistic, when compared with the financial resources available.

When working with new construction, financial resources will be needed at different times during the project development. The following funds are needed for any project:

1. Start-up Funds;
2. Equity Funds (down payment);
3. Interim Financing;
4. Mortgage Funds;
5 Bridge Financing;
6. Rental Income or Occupancy Charges; and
7. Subsidies.

Some provinces provide mortgage insurance on those projects that receive assistance under provincial programs (as seen in Section 5). The financial resources should be assessed carefully before the project can continue. If one is formulating a project, the questions that should be asked are:

*is there a need and demand for the project?
*who will live there?
*what are the housing requirements for the residents?
*what other housing options are there available?
*which option best fits the needs identified?
*which option is financially feasible?
*how much rent will be generated?
*what project financing is there available?[78]

After these questions are considered, the next step is specific project planning.

8.3 THE PROJECT PLANNING STAGE:

When the concept has been considered, the next step is detailed and thorough planning of the project. This stage involves numerous decisions in order to move the project from conceptualization to construction and operation. The steps involved in project planning are categorized under three headings:

1. organization;
2. promotion and preliminary approval; and
3. finalizing arrangements.

All details should be taken care of early in the planning stage, because the further advanced the project, the higher the costs for changes. Therefore assessing the project planning stage is important and project plans should be adjusted to suit any new information.

[78] National Advisory Council on Aging. Housing an Aging Population. Ottawa: 1987, p.14

1. Organization

By this point, demand for the project has been identified, along with an idea of the various housing options and the feasibility with respect to resources. At this point one may organize and establish project procedures in further detail as follows:

a. establish a legal entity;
b. choose the project team;
c. select the project advisors and consultants;
d. elaborate the housing option;
e. undertake a need/demand survey;
f. develop a functional programme;
g. develop preliminary cost parameters;
h. begin land search; and
i. commission preliminary design.

2. Promotion and Preliminary Approval

Project promotion and preliminary approval involves both the local authorities, and persuading funding sources and community members to support the project. The following steps will ensure that important matters are covered in an effective manner, they are:

a. meet with potential funding sources; (eg: government and/or major private sponsors);
b. meet with local authorities;
c. meet with neighbourhood groups;
d. make a public announcement;
e. conduct initial financial feasibility study;
f. reassess and adjust project parameters;
g. prepare preliminary design drawings, site plan and outline specifications;
h. start the zoning/by-law approval process;
i. talk to other authorities having jurisdiction; and
j. reassess and adjust project parameters.

3. Finalizing Arrangements

This is the final step in the project planning stage and will set the basis to for construction of the project. The following steps outline the necessary steps, in order to finalize the project planning arrangements; they are:

a. obtain financing;
b. commission final working drawings, specifications and tender documents;
c. prepare final estimates and obtain zoning approval;
d. reassess and adjust as required;
e. finalize of purchase the land, obtain the building permit;
f. call for tenders;
g. reassess and adjust;
h. complete final arrangements;
i. enter contract negotiations;
j. reassess and adjust;
k. complete the contract signing; and
i. commence construction.

8.4 CONSTRUCTION:

The construction stage provides visible evidence of activity on the site. The construction stage may be outlined in five different sections, they are: construction schedule, project supervision and inspection, progress monitoring, completion, and marketing.

1. Construction Schedule

For projects such as a group home, the contractor has agreed to the date of completion, and usually maintains a simple construction schedule. The schedule is usually in the form of a bar chart showing all activities on the site, but also indicates the amount of time needed for each task or event. Depending on the size and complexity of the project is, the schedule will differ from project to project.

2. Project Supervision and Inspection

Projects for special needs housing must be inspected by the architect and engineering consultants, who must certify that the work has been done in accordance with the contract. The project is also inspected by the local building inspectors' who determines whether the work has been done according to the Prevailing Building Codes. The fire department is also involved in inspections, during construction. The requirements of the fire department are identified in section seven of the study. Deficiencies may be determined by either the architect, the building inspector, or the owner's representative and site superintendent.

3. Progress Monitoring

In many projects, unforeseen design and construction problems may occur during the construction phase. These changes may cause amendments to the construction contract and schedule. The project team will need to discuss the necessary changes and determine whether the changes are needed. If changes are approved, then adjustments of the initial budget and schedule will play an important part, in terms of progress monitoring. As discussed earlier in section five, the Ministry of Housing will also be involved in inspecting and approving any changes to the project, since the project loan is insured by them.

4. Completion

There are several important steps that are necessary to establish substantial completion for either a group home, or an apartment building for special needs housing. At the end of construction the architect must issue the certificate of completion. This certificate indicates that the work performed has been completed in accordance with the contract.

Even though the project is complete, clients must perform three tasks before the occupants may actually move in. The client or his architect, must obtain an occupancy certificate, perform a final deficiency inspection, and obtain all specified warranties, operating instructions, etc. The occupancy certificate is usually issued by the municipality, once the building inspector has determined that the project meets the appropriate fire and safety standards.

One year after the project is completed, the architect and the client should carry out a warranty inspection, to ensure that all work is satisfactory and completed according to the contract. They would also need to check that all deficiencies have been corrected. If all the deficiencies have been taken care of, and any warranty modifications have been dealt with, then any final payments held back, will be paid to the contractor.

5. Marketing

For projects of larger scale than those of a group home, such as an apartment, a marketing plan will be necessary to influence any local market demand. The project team for a large project should therefore consider advertising the project as early as possible, depending on the state of the current market.

8.5 THE OPERATION STAGE:

In group homes as discussed in section five, the operational costs are funded by both ministries, ie: the Ministry of Housing and the Ministry of Community and Social Services. For either a group home or an apartment two major steps that are important in the operation stage are, the management plan and the maintenance programs.

The management plan would usually be produced by the provider and is necessary to determine the management style, early in the process. The provider will normally establish the management plan, and provide copies to both ministries, and sometimes the fire department, if the management plan includes the Fire Safety Plan. The management plan demonstrates how the provider is financially organized, and his service delivery plan.

"Maintenance is becoming increasingly expensive and presents a significant problem for many disabled persons who wish to live independently in their own homes or apartments".[79] As mentioned earlier in section four, different services provided in the home will depend on the amount of care needed by the residents. The maintenance plan for each individual may therefore be subject to change over time.

The cost of operating a project must also include in its' operational funds, maintenance costs for the building itself. The building maintenance programme generally consists of routine checks of all operating systems, as well as day to day care and repair required to keep the building functional and attractive (washing/waxing floors, washing windows, gardening, etc.). Crisis maintenance for emergency situations which may damage the building,(power failure, storm damage, etc.) must also be considered.

[79] National Advisory Council on Aging. Housing an Aging Population. Ottawa: 1987, p.31

8.6 ECONOMY OF SCALE:

One traditional argument that Government has used to justify placing disabled persons in institutions is that the government will be able to take advantage of economies of scale, thus lowering their budgeting costs. Although this argument sounds as if it could have some truth to it on the surface, the fact is that studies have proven it to be a common misconception. Smaller group homes can be constructed to keep costs down. The way that this is accomplished is through specialization of facilities. For example, if the government were to construct different units of group homes where each unit could accommodate up to ten people, then it's objective would be to put ten people in a room with similar disabilities. In this sense, the room is equipped with these special equipments that are needed only for the group of ten. In addition, since similar disabled persons have similar needs, then the Government can hire nurses that will be trained to cater to those needs in specific. In this sense, costs will be kept down because in institutions, nurses did not have special training, rather they just had general skills to help the disabled persons. Thus, patients would often find it hard to obtain the proper care, which would in effect aggravate the matter, thus increasing costs.

Strictly in terms of economics;

> "on the matter of cost, it has been mistakenly assumed, under the influence of business thinking, that economies of size applied to all forms of residential care. In practice, small facilities for children and youth have proven less costly to operate, and in a considerable number of instances, the margin was very wide indeed. For once economy and professional preference appeared to coincide. In discussions held with 200 front-line staff, placement agencies and government officials, there was overwhelming support for the small unit approach".[80]

[80] City of Toronto Planning Department. "Report of the Working Committee on Group Homes". Toronto: 1977, p.24

9.0 CONCLUSIONS:

9.1 Summary of Findings
9.2 Concluding Statement

9.0 CONCLUSIONS

9.1 SUMMARY OF FINDINGS:

In summary, an analysis of 'special needs' housing for developmentally and physically handicapped persons has elicited certain criteria needed to develop such projects. As discussed throughout this study, in the formulation of housing policy and the development of housing programs for disabled persons, the most important consideration is that the disabled population cannot be treated as a homogeneous group. Since there are different types and degrees of disabilities, there must be different housing responses to address these differences. Consideration must be given to the type of disability, the functional status of disabled persons and their age, as well as requirements for housing adaptation, support services, location, and financial status.

I believe that the integration of disabled persons into the community at large must be the top priority of housing policy. Our social goals should be to give disabled persons security of tenure and a sense of independence. Normalization and integration cannot, however, be attained by an institutionalized atmosphere for disabled persons in need, but rather through de-institutionalization, thus allowing the individual to participate in the community to the full extent of their potential.

As aforementioned, the length of time required from the initial planning stage to the final completion of a project, is often three to four years. Many of the providers of 'special needs' housing often experience frustration and anxiety while working their way through the system. In particular, they feel that a lot of time is wasted in dealing with the various levels of government. Government policies pose an increasing and considerable threat to the success of 'special needs' housing for disabled persons because of long delays in their implementation, due to bureaucracy. I personally feel that both Ministry of Housing and Ministry of Community and Social Services, and at times also Ministry of Health all have questionable processes that should be revised for the improvement of the delivery of 'special needs' housing. Rather than being subjected to all three ministerial policies, 'special needs' housing should be made available only through one ministry. Such a "one stop shop" method, where one Ministry would be in control of the whole process would be advantageous to both the providers, and government agencies, in that firstly, it would allow providers to receive an allocation for a project with less obstruction, and, secondly, allow the monitoring of all funds, operating and capital, to be directed strictly towards special needs housing.

In section four of this study, I have discussed the levels of care used in the funding of support service and personal care facilities. At the present time, the government is searching for new funding policies to support the contemporary emphasis on community-based services and reflect the service requirements of communities. The government is also directing more resources towards providing supportive housing: "by the end of five years a minimum of $37.6 million will be reallocated annually from the total provincial hospital budget to long-term care and

support services".[81] The increased flow of funds towards support services for disabled persons will promote independence for many of these individuals. These resources will set a new direction for provincial funding patterns that is in direct opposition to traditional institutional care, by placing greater emphasis on services in people's homes and communities. In my opinion, by providing alternative services to the community, the only people who would be required to stay in a hospital, nursing home or a home for the aged, are the severely disabled who would need round the clock nursing care.

Presently in Ontario, the use of group homes has been restricted for a number of years, for the most part to: psychiatric patients who have just been discharged from psychiatric facilities and who need counselling and to developmentally disabled adults and children from institutions. Regrettably, not enough use has been made of the group home model for the average disabled person. The planning of group homes does not appear to have been based on a fully thought out social policy. Today, governments must place greater emphasis on pre-planning to identify appropriate locations for group homes, in order to facilitate successful integration of the residents into the community. Often, location of the project is dependent more on the availability of land than the need for disabled persons to be close to community services and social service agencies. There are also concerns with respect to their cost effectiveness as well as in regard to whether or not community living is necessarily the best option for all disabled persons, and what humane alternatives there might be. Unfortunately, due to the fact that we are in an economic downturn with governments attempting to restrain spending, supportive housing programs are suffering from a drastic lack of funding.

I personally feel that the group home model is an excellent setting for individuals who live in small communities. Group homes offer a family home environment, independence for many disabled persons, and an excellent support care facility. However, one remaining problem as illustrated in figure 3.1, is that the majority of group homes are concentrated in the Metropolitan Toronto region. Consequently, this often forces a number of parents, relatives, and friends of disabled persons to travel lengthy distances to see an individual in a group home. Sadly, this community type of living has yet to occur, according to both Ministries. I also feel that de-institutionalization without adequately funded alternatives, such as residential placement and community care, is likely to lead to reduced standards of care, lack of supervision for 'special needs' residents and generally declining standards of maintenance on the properties.

As previously mentioned in section 6.4, although many resources exist for designing any disabled unit, they are not widely utilized, studied, and known by the housing industry. I feel that the housing industry should take the time to identify these resources and apply them automatically to any developments that they may undertake. Issues towards designing for disabled persons have been gaining much recognition in the past few years. People are starting to realize that disabled persons are a significant group in our society and should be treated with common

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[81] Ministry of Community and Social Services. Redirection of Long-Term Care and Support Services in Ontario. Toronto: 1991, p.43

humanity. This includes taking the extra effort to provide them with better housing. It is my recommendation that priorities be established in the construction industry which would require that all new and existing buildings be made to provide accessibility to all in our community.

9.2 CONCLUDING STATEMENT:

'Special needs' housing plays a vital role in the provision of independent living for disabled persons. It is the epitome of their autonomy. As such, I would endorse a restructuring of our current system in order to promote the right to liberty of disabled persons in the sense that they be given the opportunity to exercise as much control over their lives as non-disabled persons do.

To achieve this objective, it is my opinion that direct funding must be made available to those individuals who are able and willing to manage and direct their own independent living services. Such funding can be distributed in several ways such as voucher systems, direct individual funding, and funding through service providing agencies.

I believe that the moment has come where government, service providers, consumers and educators can work together to develop innovative and appropriate methods for the design and construction of special needs housing. It is my firm belief that by implementing these ideas into all new building and existing free structures, the field of architecture will become revolutionized. This revolution will doubtless put our society on a higher plateau. It must be remembered that throughout history the progression of society has always been reflected by the architectural work of the time. By accommodating the needs of the disabled, we mark a significant improvement in our attitudes towards our fellow persons. "Let us go into the future as a society united in our diversity. Let us have the range of services which will allow all Ontarians to achieve this vision and let us acknowledge that for independent living, the time is now".[82]

On the whole, I was able to acquire a great amount of knowledge from this study. My professors at Ryerson have given me the foundations, and with the help and guidance of my mentors, I was able to gain in depth, insight into understanding the social link that underlies our respected profession. I am confident that this experience will have a profound impact on me in my future career. I sincerely hope that my study will also be beneficial to those who read it, in that it may inspire them to contemplate a social perspective in the work they do in the future.

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[82] Ontario Advisory Council for Disabled Persons. "Independent Living: The Time is Now". Toronto: 1988, p.43

10.0 BIBLIOGRAPHY & REFERENCES:

BIBLIOGRAPHY

Association Planning Consultants Inc., "Barrier Free Design Seminar: Understanding Accessibility". Ottawa: February 18, 1993.

Barrier-Free Design Centre. Source Book, The. Toronto: 1987.

Canada Mortgage and Housing Corporation. Accessibility Costs For Housing. Ottawa: 1984.

Canada Mortgage and Housing Corporation. Accessible Residential Communities Issues and Solutions. Toronto: Prepared by Associated Planning Consultants Inc., 1982.

Canada Mortgage and Housing Corporation. Private Non-Profit Housing Program, The. Ottawa: 1983.

Canada Mortgage and Housing Corporation. Cost and Design of Housing for Disabled Persons: Case Studies. Toronto: Prepared by Associated Planning Consultants Inc., 1983.

Canada Mortgage and Housing Corporation. Housing Choices for Canadians with Disabilities. Ottawa: 1992.

Canada Mortgage and Housing Corporation. Housing Disabled Persons. Ottawa: 1990.

Canada Mortgage and Housing Corporation. Housing Needs and Problems of Disabled Persons. Ottawa: 1982.

Canada Mortgage and Housing Corporation. Municipal Role in the Supply and Maintenance of Low Cost Housing, The: A Review of Canadian Initiatives. Ottawa: Prepared by the Centre for Human Settlements, 1990.

Canada Mortgage and Housing Corporation. Nursing Homes and Hostels with Care Services for the Elderly: Design Guidelines. Ottawa: 1990.

Canada Mortgage and Housing Corporation. Open House: Guidebook. Ottawa: 1992.

Canada Mortgage and Housing Corporation. Socio-Demographic Profile of Canadians Experiencing Health or Activity Limitations, A. Ottawa: Prepared by TEEGA Research Consultants Inc. 1991.

Canada Mortgage and Housing Corporation. Special Housing Needs. Ottawa: 1988.

Canadian Standards Association. Barrier-Free Design. Toronto: 1990.

City of Brampton Planning Department. "Group Homes Guide". Brampton: 1986.

City of Toronto Planning Department. "A By-Law: No. 332-78". Toronto: 1978.

City of Toronto Planning Department. "A By-Law: No. 438-86". Toronto: 1986

City of Toronto Planning Department. "Report of the Working Committee on Group Homes". Toronto: 1977.

City of Toronto Planning and Development Department, and Ontario Secretariat for Social Development. "Group Home Primer for the City of Toronto". Toronto: 1984.

City of Toronto Property Department. Accessibility Design Guidelines: for the City of Toronto. Toronto: Prepared by Proctor and Redfern Ltd., 1992.

Metropolitan Toronto Planning Department. "Metropolitan Toronto Key Facts". Toronto: 1992.

Ministry of Citizenship, Office for Disabled Persons. "Statistical Profile of Disabled Persons in Ontario: Volume II". Toronto: 1990.

Ministry of Citizenship, Ontario Human Rights Commision. Guidelines for Assessing Accommodation Requirements for Persons With Disabilities. Toronto: 1989.

Ministry of Community and Social Services. Challenges and Opportunities: Community Living for People with Developmental Handicaps. Toronto: 1987.

Ministry of Community and Social Services. Community Residential Services: for Developmentally Handicapped People. Toronto: 1982.

Ministry of Community and Social Services. Designable Environments: (adapted from E.Steinfeld's The Enabler). Toronto: 1987.

Ministry of Community and Social Services. Instructions to Complete the Budget Forms. Toronto: 1987/1988.

Ministry of Community and Social Services. Program and Resource Summary. Toronto: 1989-1990.

Ministry of Community and Social Services. Redirection of Long-Term Care and Support Services in Ontario. Toronto: 1991.

Ministry of Community and Social Services. Special Needs and Special Services Agreements. Toronto: 1981.

Ministry of Community and Social Services. Strategies for Change: Comprehensive Reform of Ontario's Long-Term Care Services. Toronto: 1989.

Ministry of Community and Social Services. Supported Independent Living Program for Developmentally Handicapped Adults. Toronto: 1984.

Ministry of Housing. Consultation Counts: Taking Action on a Housing Framework For Ontario. Toronto: 1991.

Ministry of Housing. Guide and Illustrations. Toronto: 1987.

Ministry of Housing. Instructions for the Completion of Project Application 1414: for Municipal and Private Non-Profit Corporations. Toronto: 1988.

Ministry of Housing. Non-Profit Housing Program. Toronto: 1992.

Ministry of Housing. Ontario Building Code. Toronto: 1990.

Ministry of Housing. Ontario Home Renewal Program For Disabled Persons. Toronto: 1989.

Ministry of Housing. Technical Guide for Special Projects with Care Facilities. Toronto: 1992.

Ministry of Housing, and Ministry of Municipal Affairs. Land Use Planning for Housing. Toronto: 1989.

Ministry of National Health and Welfare. Disabled Persons in Canada. Ottawa: 1981.

Ministry of Solicitor General. "Guidelines: Designing Residences for Developmentally Handicapped Adults". Toronto: 1982

Municipality of Metropolitan Toronto. The Liveable Metropolis: Draft Official Plan. Toronto: 1992.

Nagler, Mark. Perspectives on Disability. Hamilton: Health Markets Research, 1990.

National Advisory Council on Aging. Housing an Aging Population. Ottawa: 1987.

National Research Council of Canada. National Building Code of Canada. Ottawa: 1985.

Ontario Advisory Council for Disabled Persons. "Independent Living: The Time is Now". Toronto: 1988.

Ontario Association of Homes for the Aged. Designed for Seniors: Guidelines in the Planning Process for Enriched Housing. Toronto: 1984.

Ontario Secretariat for Social Development. Ontario Group Homes: Resource Manual. Toronto: 1983.

Rudy, Norma. For Such A Time As This. Toronto: Ontario Association of Homes for the Aged, 1987.

Russell, Wilfrid. New Lives For Old: The Story of the Chesire Homes. London: Victor Gollancz Ltd, 1969.

Scott, David H., Project Management Readings. Toronto: Ryerson Polytechnical Institute, Revision 2.

Statistics Canada. "The Health and Activity Limitation Survey: User's Guide". Ottawa: June 1988.

Statistics Canada. "Report of the Canadian Health and Disability Survey". Ottawa: 1983 - 1984.

Wilson, Jennifer. Group Homes in Ontario. Toronto: Thompson Educational Publishing Inc., 1991.

REFERENCES

Adapt-Able Design. Kathy Pringle.

Associated Planning Consultants Inc., Pamela Cluff, (FRAIC, FRIBA, President).

Barrier-Free, The. Judith E. Lytle, (Manager).

Canada Mortgage and Housing Corporation. Brian Davidson.

Canada Mortgage and Housing Corporation. Tom Parker.

Canada Mortgage and Housing Corporation. Bill Orr.

Canadian National Institute for the Blind. Catherine Newman (Coordinator)

Cheshire Homes Foundation. Cindy Kinnon (Director of Development).

Cheshire Homes Foundation. Bob Webber (Executive Director).

City of Toronto Building Department. Jim Laughlin.

City of Toronto Fire Department. Ted Scovell (Chief Fire Prevention Officer).

City of Toronto Planning and Development Department. Susan Brideweser (Planner).

Dundas and Garrick Associates Inc. Anne Dundas (Development Consultant, Principal)

Green and Nogue Associates Ltd. Tony Suppa (Project Manager).

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Metropolitan Planning Department. Errol Chapman (Planner).

Metropolitan Toronto Association for Community Living. Carolyn Clyke-Gardiner.

Metropolitan Toronto Association for Community Living. Ken Douglas.

Ministry of Community and Social Services. Frank R. Cummings (Program Supervisor).

Ministry of Health/Ministry of Community and Social Services. Warner Clarke (Program Supervisor).

Ministry of Housing. M. Abichandani (B.A. Sc. Civil Eng., CSC, Coordinator Codes and Standards).

Ministry of Housing. Tim Colfe (Program Co-ordinator).

Ministry of Housing. Martha McBurnie (Program Co-ordinator).

Ministry of Housing. Sylvia Patterson (Program Manager).

Office for Disabled Persons. Jerry Clark.

Parent to Parent Link. Shirley Clark.

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Susan Friedrich Architect. Susan Friedrich (BES, B.ARCH, OAA, President).

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APPENDIX A

Typical Case Study: "Group Home in North York".

APPENDIX A

This particular case displays how a regular bungalow has been renovated to suit the special needs of disabled persons. In analyzing this home through a before and after scenario , one may detect the changes in which the home must undergo.

Due to the confidentiality of the clients whom have taken residence in this particular case study, the exact address will be detained, although it will be mentioned that this home is in a general area located in North York, off of Bayview Avenue.

The groups which were involved in the changing process of this home and in the successful maintenance and care are; Reena Foundation, which provided the home with direct services, Susan Frederick the Architect and Dundas and Garrick Associates (development consultants).

Alteration and Renovations:

This home was a three bedroom bungalow with a garage attached to one side. After the renovations, in order to provide a very serious living condition, the garage was removed and replaced with bedrooms (refer to photo's and illustrations). The interior of the living spaces are based on an open concept. The house presently consists of four bedrooms on the ground level and two in the basement (refer to illustrations). The four bedrooms and washroom (refer to photographs) on the ground floor are fully wheelchair accessible. The concept of this place is to minimize ramping, easy living with open spaces and reducing the amount of sharp corners. In addition, there has been an extra fire exit designed.

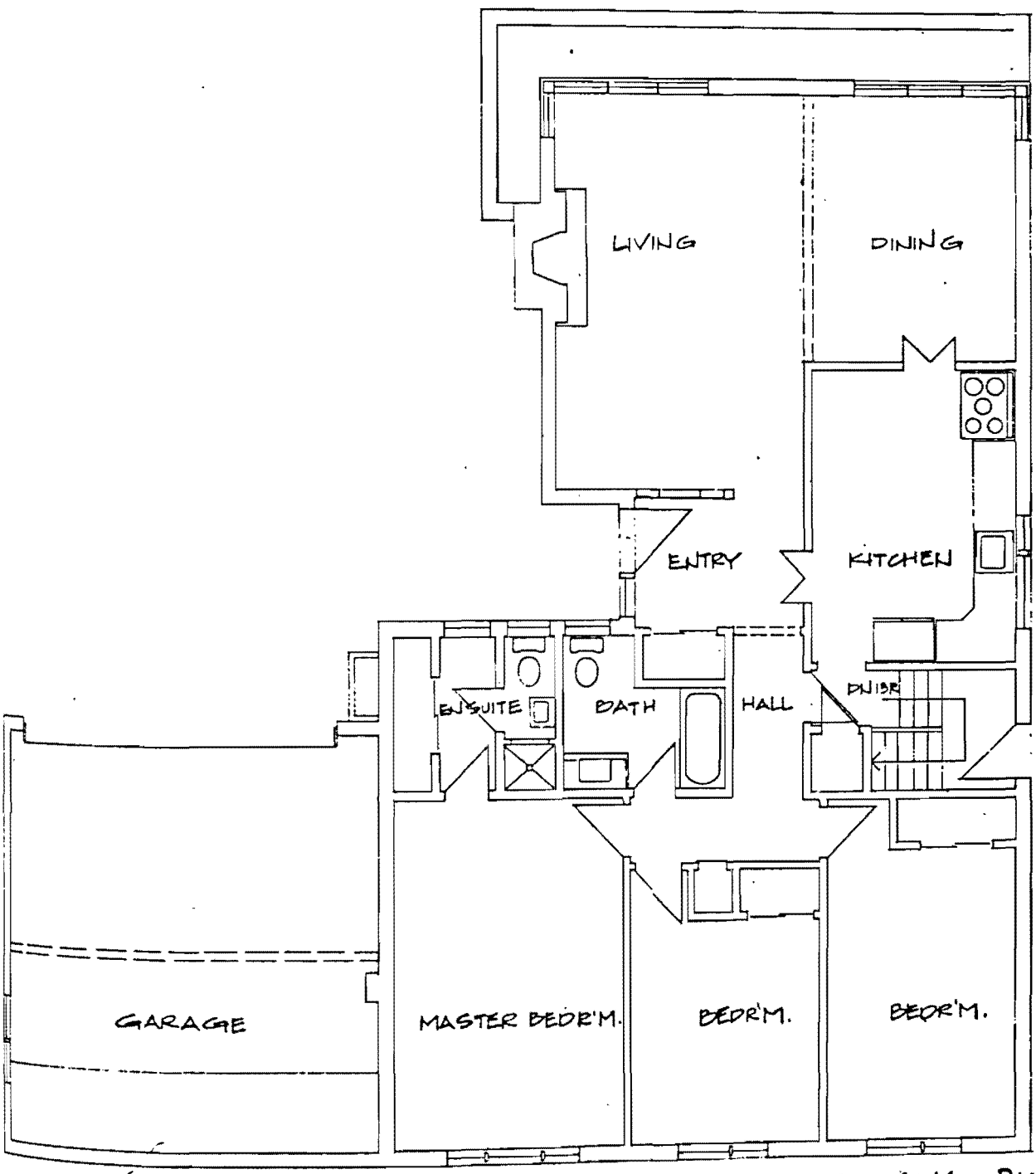
It is noticeable on the plans the living space had a specific area which was difficult to move about in a wheelchair or for the visually impaired. The room was redesigned according to certain design criteria mentioned in section six. It was a rectangular plan excluding the partition walls. Essentially the dividing walls in the kitchen were minimized and opened. The entrance was also moved to the opposite side which has extended easier access for turning etc, this has created a straight path way leading into the house.

The basement has been redesigned so that it does not create the impression of being below ground. This has been made possible by placing a large window well in front of the two bedrooms creating an image of being on an upper level. This modification in particular is not wheelchair accessible however it was constructed to accommodate one tenant who is blind. Many things have been provided for the visually impaired, such as wood moulding on the wall allowing that allows guidance and a sense of direction. Colours were also used for identification (some people see shades, shapes, etc.). In addition, the floors were changed from carpet to hardwood and vinyl tiles. This creates an environment which is easier for the client to walk through.

Reena Foundation believes that the group homes should allow for a mix in the varying needs in order to maximize options in the designs of these projects.

As seen within this particular home, the changes are not critical, which result in reconstructing a whole new home, but on the contrary, the renovations are such that may occur in any home to create a more accessible form of living environment for disabled persons. The following photographs provide an understanding of what has been changed according to the certain spaces by comparing a before and after photograph.

ILLUSTRATION #1

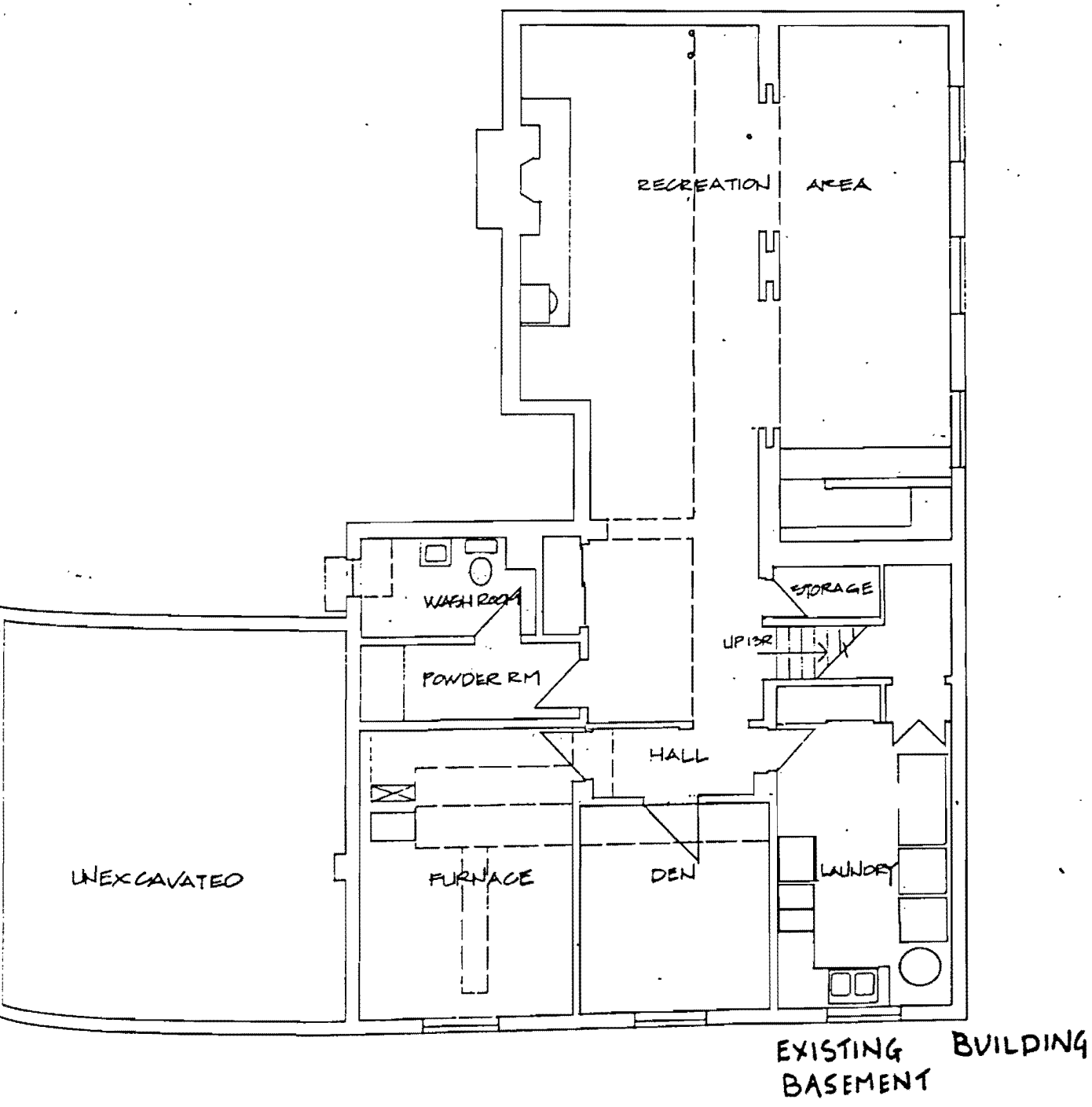


EXISTING BUILDING
GROUND FLOOR

SUSAN FRIEDRICH ARCHITECT

588A Bloor St. West, Toronto, Ontario M6G 1K4
Telephone (416) 588-3740 Fax 588-2401

ILLUSTRATION #2

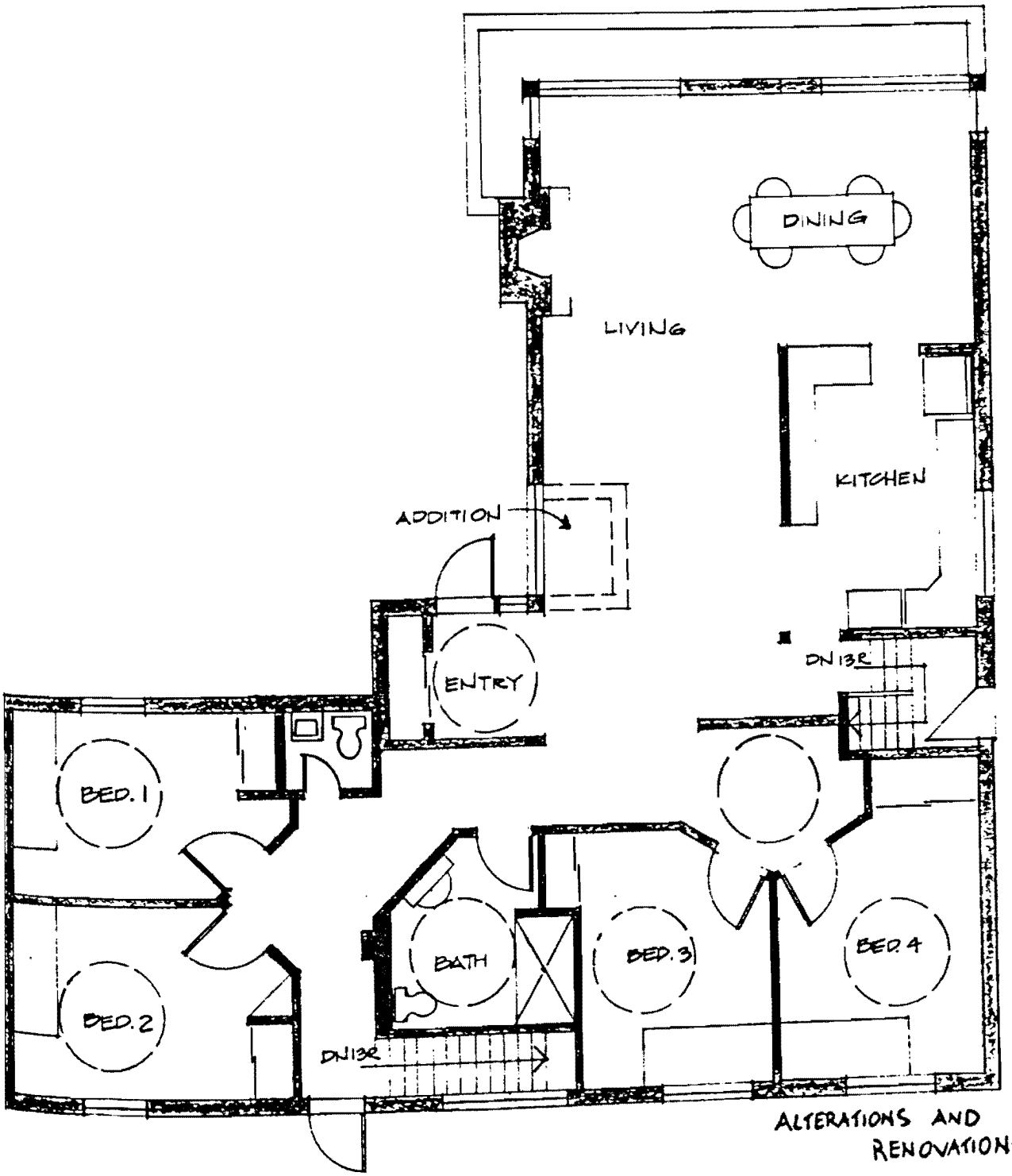


EXISTING BUILDING BASEMENT

SUSAN FRIEDRICH ARCHITECT

588A Bloor St. West Toronto, Ontario M6G 1K6
Telephone (416) 588-3740 Fax 588-2601

ILLUSTRATION #3



ALTERATIONS AND RENOVATIONS

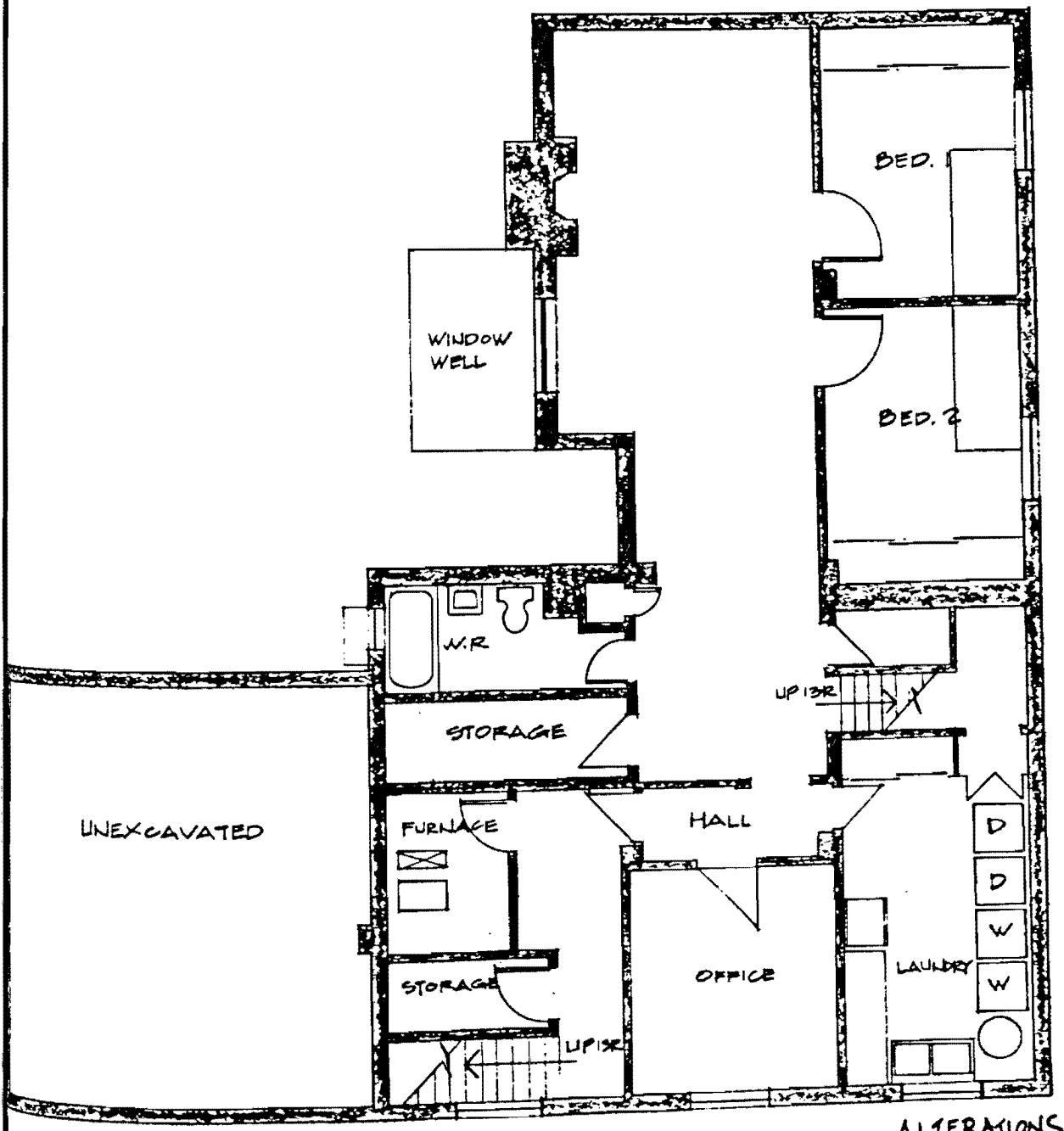
REENA FOUNDATION

SCHEME - 1A GROUND FLOOR PLAN
92-70
1/8"=1'-0"

SUSAN FRIEDRICH ARCHITECT

584A Bloor St. West, Toronto, Ontario M6G 1K4
Telephone (416) 588-3240 Fax 588-2401

ILLUSTRATION #4



ALTERATIONS AND RENOVATIONS

REENA FOUNDATION

SCHEME - 1 BASEMENT PLAN
92-70
1/8" = 1'-0"

SUSAN FRIEDRICH ARCHITECT

588A Bloor St. West, Toronto, Ontario M6G 1K4
Telephone (416) 560 3740 Fax 588-2401

ILLUSTRATION #5

CONSTRUCTION NOTES
LEGEND

LEGEND

- existing walls to be removed
- new partition P1
- new partition P2
- new partition P3
- ceiling mounted light fixture
- wall mounted lights fixture
- light switch
- duplex receptacle
- ground fault receptacle
- interconnected smoke detector
- battery operated smoke detector
- fire extinguisher
- emergency light
- exhaust fan
- ceiling fan
- floor drain
- existing receptacle to be relocated
- relocated existing receptacle
- existing switch to be relocated
- relocated existing switch

WALL TYPES

W1
- 4mm striped stone
- 1" airspace
- building paper
- 1/2" exterior plywood sheathing
- 2" x 6" studs at 16" o.c.
- Fibreglas batt insulation (R19)
- 6 MIL polyethylene vapour barrier
- 1/2" gypsum board finish

W1A
- Stucco on grid on wire
- 1" airspace
- building paper
- 1/2" exterior plywood sheathing
- 2" x 6" studs at 16" o.c.
- Fibreglas batt insulation (R19)
- 6 MIL polyethylene vapour barrier
- 1/2" gypsum board finish

W2
- existing masonry
- rigid insulation (Celotex Thermar)
- 6 MIL polyethylene vapour barrier
- 1/2" gypsum board finish

W3
- concrete block
- 1/2" gypsum board finish

PARTITION TYPES

P1
- 6" x 4" studs at 16" o.c.
- 1/2" gypsum board both sides

P2
- 4" x 4" studs at 16" o.c.
- 1/2" gypsum board both sides
- sound attenuation batts between studs

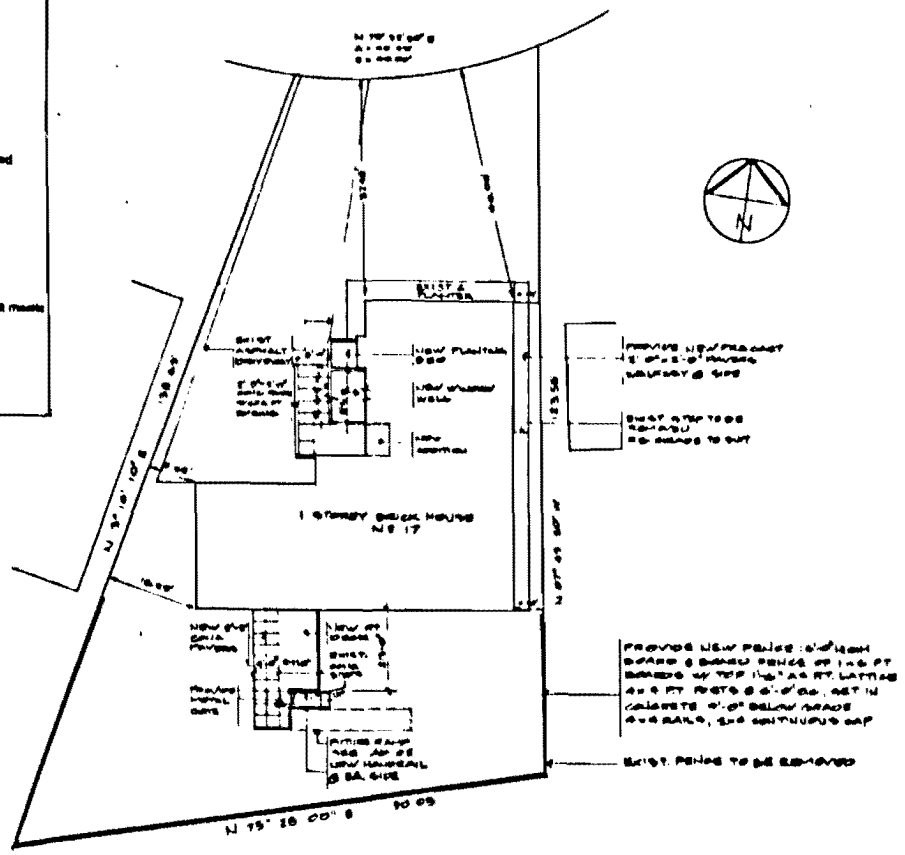
P3
3H HOUR RATED FIRE SEPARATION
- 4" x 4" studs at 16"o.c.
- new 5/8" U.L.C approved gypsum board, taped and sealed on both sides

FLOOR TYPES

F1
- finish floor
- built up wood platform floor
- 3/4" exterior grade plywood subfloor
- 6 MIL polyethylene vapour barrier
- rigid insulation
- pressure treated wood sleepers at 16" o.c. set in asphalt mastic
- existing concrete slab

F2
- finish floor (ceramic tile or seamless epoxy flooring)
- waterproof membrane
- 3/4" exterior grade plywood subfloor
- existing joists (sloped to drain)

WHITTAKER CRESCENT



SITE PLAN
1" = 10'

SUSAN FRIEDRICH ARCHITECT

ONTARIO ASSOCIATION OF ARCHITECTS
SUSAN FRIEDRICH
LICENCE

INFORMATION TAKEN FROM:
PLAN OF SURVEY OF LOT 8
REGISTERED PLAN 4796
CITY OF NORTH YORK
MUNICIPALITY OF METROPOLITAN TORONTO

SURVEY PREPARED BY:
PAUL HIGH SURVEYING LTD
DATED MAR 19, 1992

GENERAL NOTES

All drawings are the property of the Architect
The Contractor is to verify all dimensions and conditions on site prior to proceeding
Discrepancies are to be reported to the Architect.
Drawings are not to be scaled.

All work is to conform to the Ontario Building Code.
Comply with all Municipal Regulations

Repair all existing joints, finishes adjacent surfaces etc where new work joins
Protect existing from damage during work.
Repair any damage that should occur.

ISSUED FOR PERMIT	APR 14/93
ISSUED FOR TENDER	APR 10/93

REENA FOUNDATION

Alterations and Renovations

North York, Ontario

DRAWING TITLE
SITE PLAN NOTES

SCALE	DATE	DRAWING
AS NOTED	April 10, 1993	A1
PROJECT 92-70	DRAWN PJ	

ILLUSTRATION #6

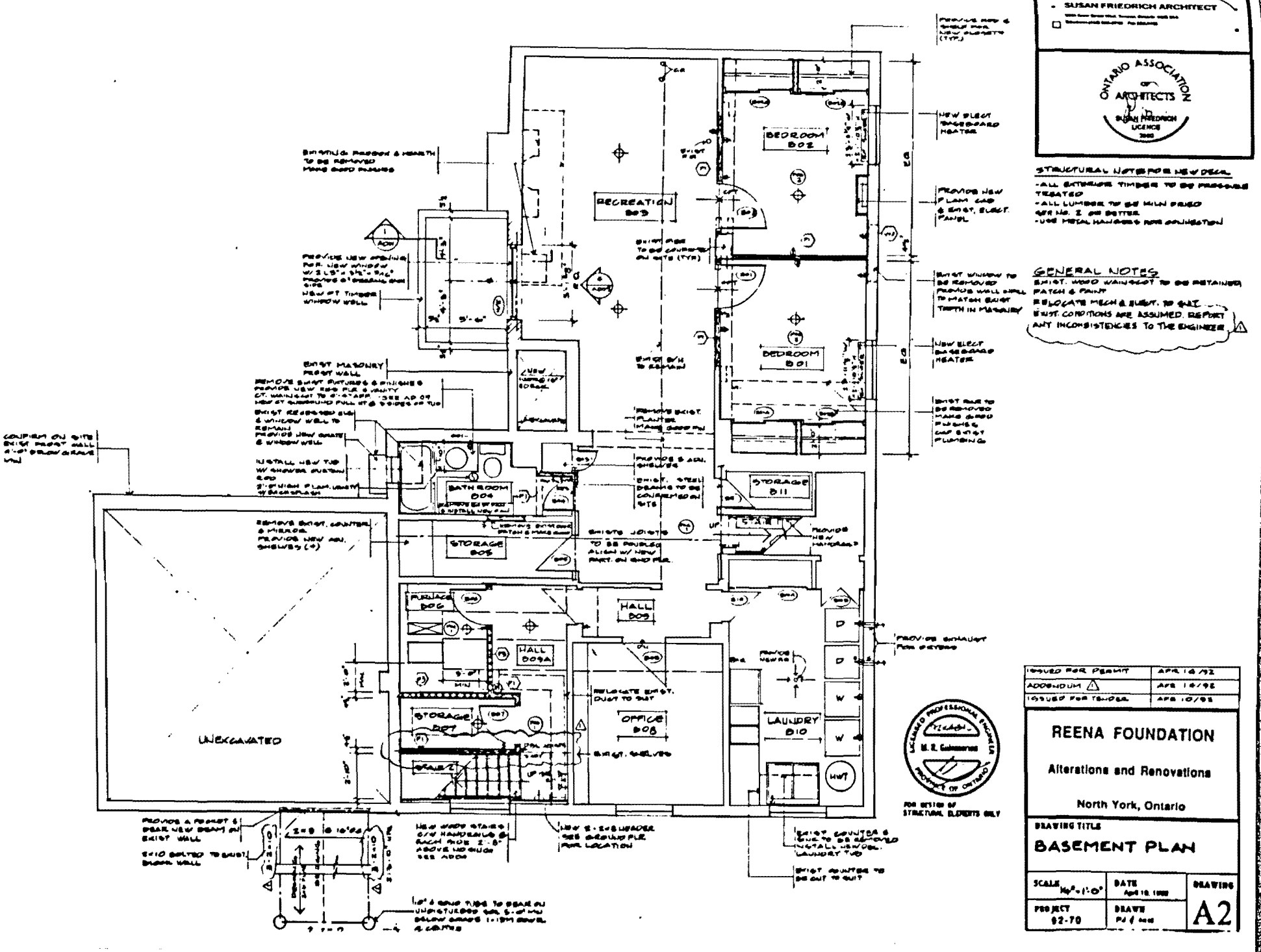


ILLUSTRATION #7

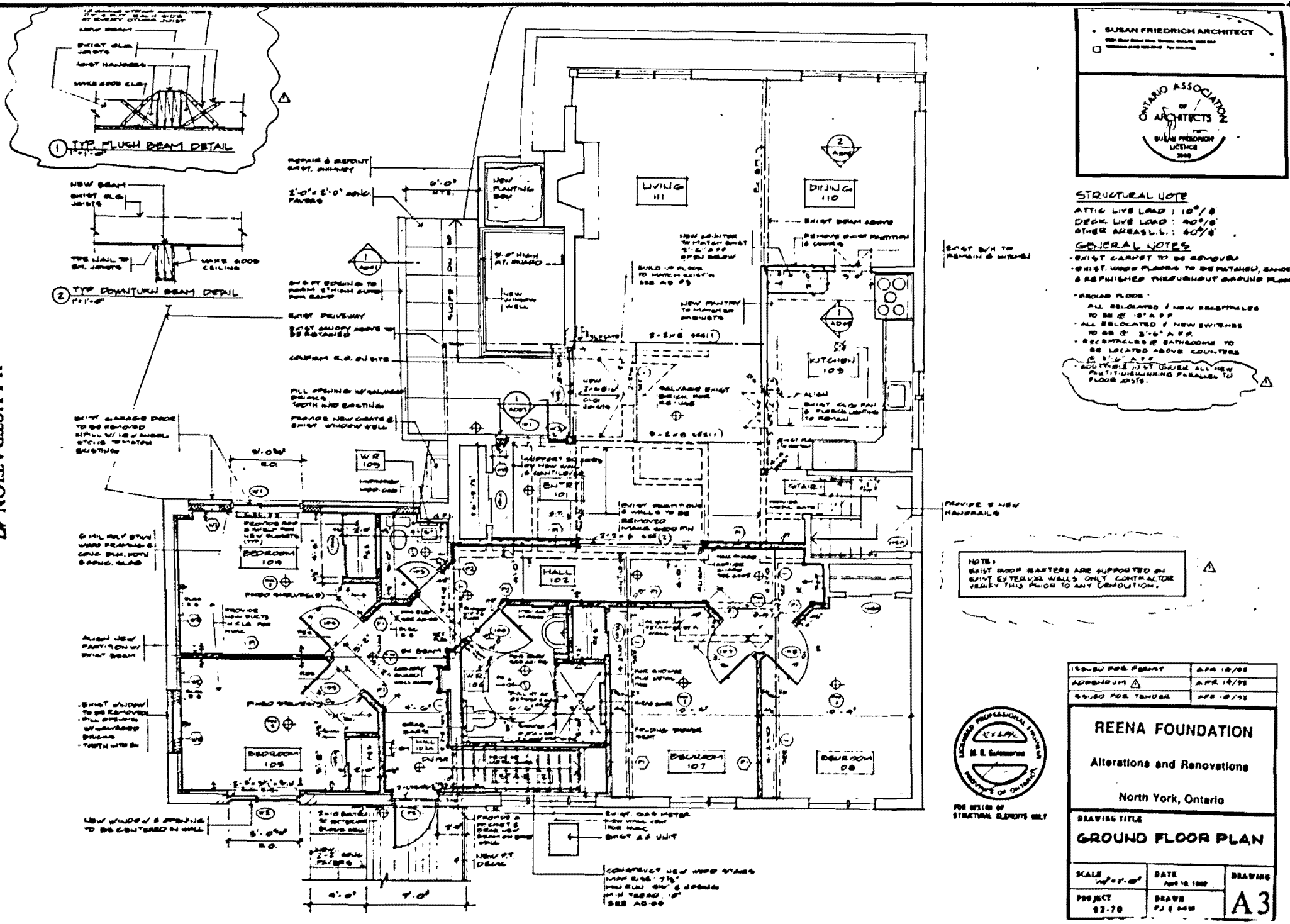
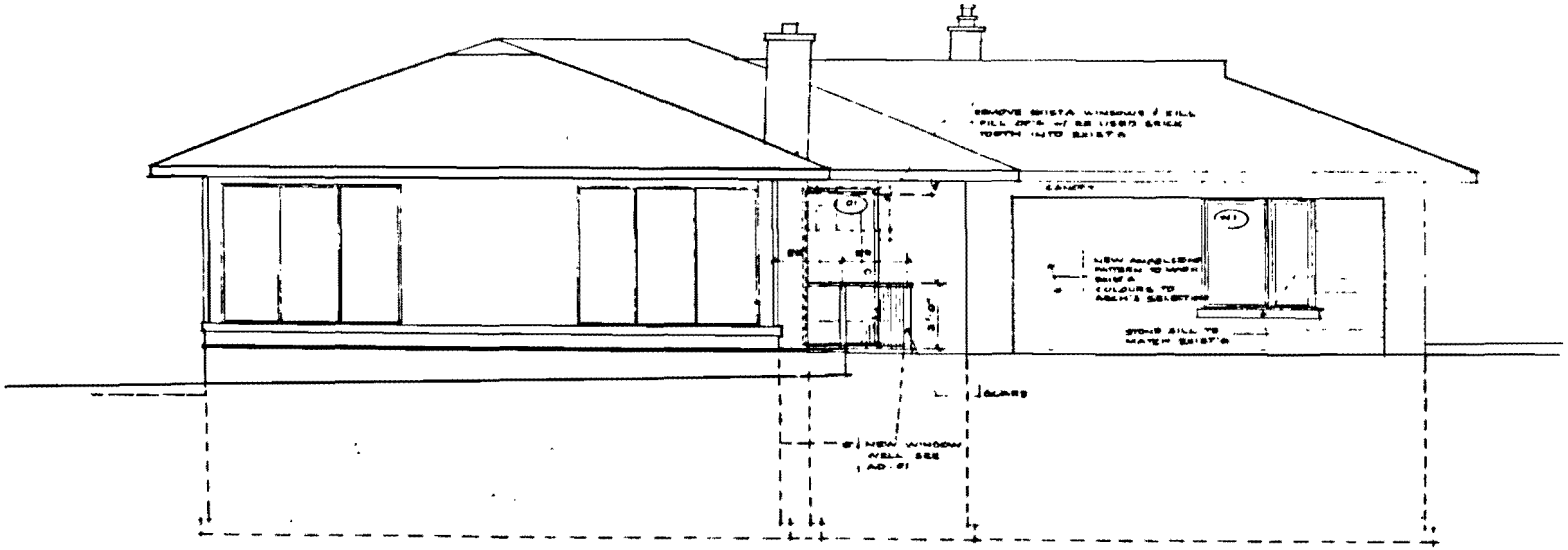
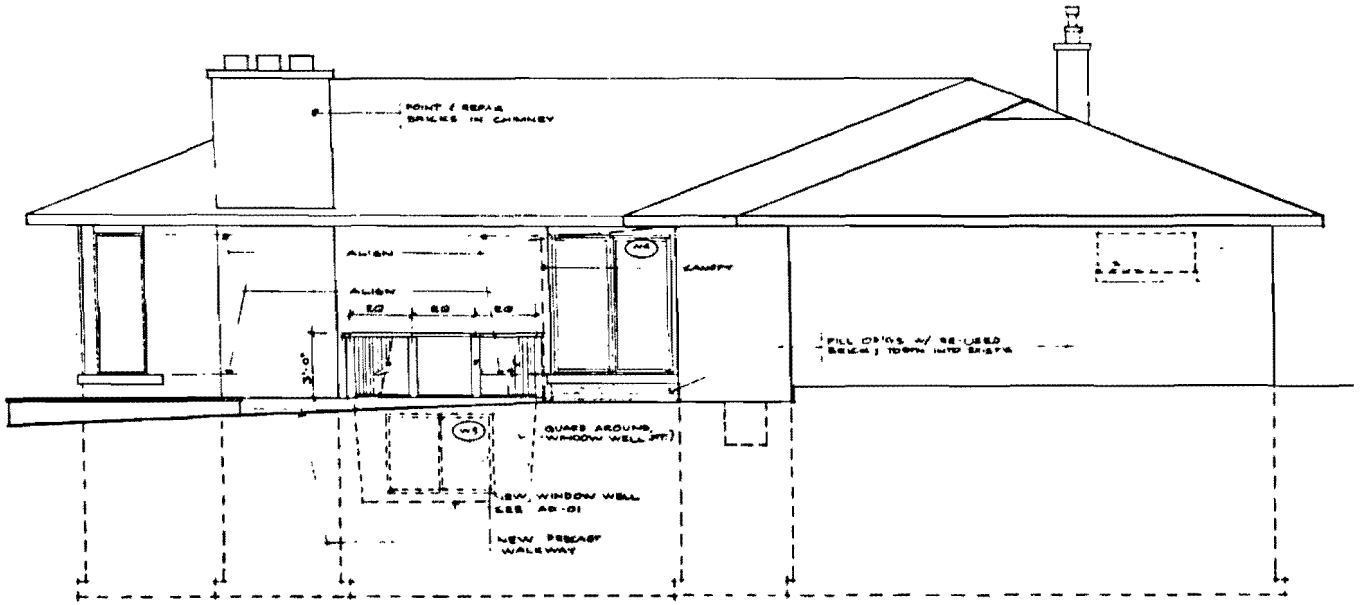

1 TYP. FLUSH BEAM DETAIL
2 TYP. DOWNTURN BEAM DETAIL
LIVING 111
DINING 110
KITCHEN 109
ENTR 101
HALL 102
BEDROOM 104
BEDROOM 105
BEDROOM 107
BEDROOM 108
STAIR
WR 109
NEW PLANTING BED
NEW PLANTER TO MATCH EXIST. SEE AD-03
NEW PANTRY TO MATCH EXIST. CABINETS
NEW WINDOW WELL
NEW 2'-6"x6'-0" SKYLIGHT
NEW 2'-6"x2'-6" SKYLIGHT
EXIST. GARAGE DOOR TO BE REMOVED INFILL W/ NEW WOOD STUDS TO MATCH EXISTING
EXIST. WINDOW TO BE REMOVED INFILL OPENING W/ SALVAGED BRICKS TOOTH INTO EXISTING
EXIST. DOOR TO BE REMOVED INFILL OPENING W/ SALVAGED BRICKS TOOTH INTO EXISTING
NEW WINDOW & OPENING TO BE CENTERED IN WALL
EXIST. BRICK CHIMNEY TO REMAIN & PATCH
EXIST. GAS METER
EXIST. A/C UNIT
CONSTRUCT NEW WOOD STAIRS SEE AD-05
PROVIDE & NEW HANDRAILS
EXIST. CAST IRON SOIL STACK TO REMAIN
EXIST. CAST IRON SOIL STACK TO BE REMOVED
EXIST. SKYLIGHT TO BE REMOVED
EXIST. SKYLIGHT ABOVE TO BE REMOVED
EXIST. DRIVEWAY
CONFIRM R.O. ON SITE
NEW 2'-6"x6'-0" SKYLIGHT
NEW 2'-6"x2'-6" SKYLIGHT

ILLUSTRATION #8



NORTH ELEVATION



WEST ELEVATION

SUSAN FRIEDRICH ARCHITECT

ONTARIO ASSOCIATION OF ARCHITECTS
SUBSCRIBER'S LICENCE
3940

GENERAL NOTES

- REPAIR DUST'S DOWNSPOUTS AS REQ'D

ISSUED FOR PERMIT	APR 10/92
ISSUED FOR TENDER	APR 10/92

REENA FOUNDATION

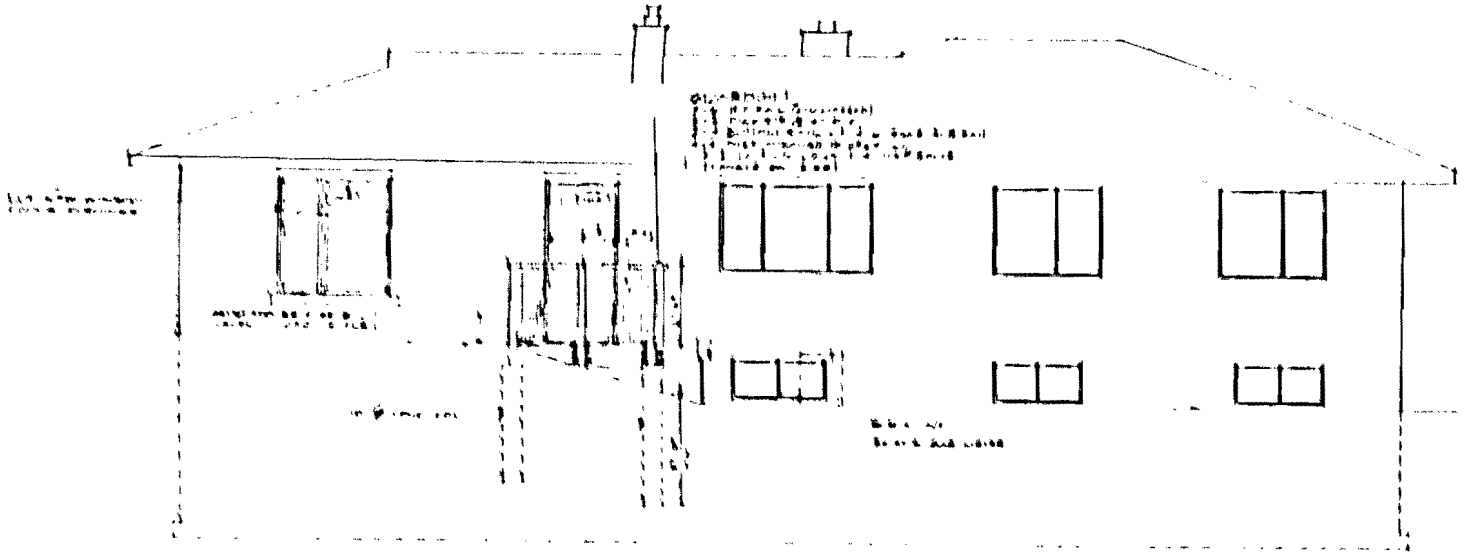
Alterations and Renovations

North York, Ontario

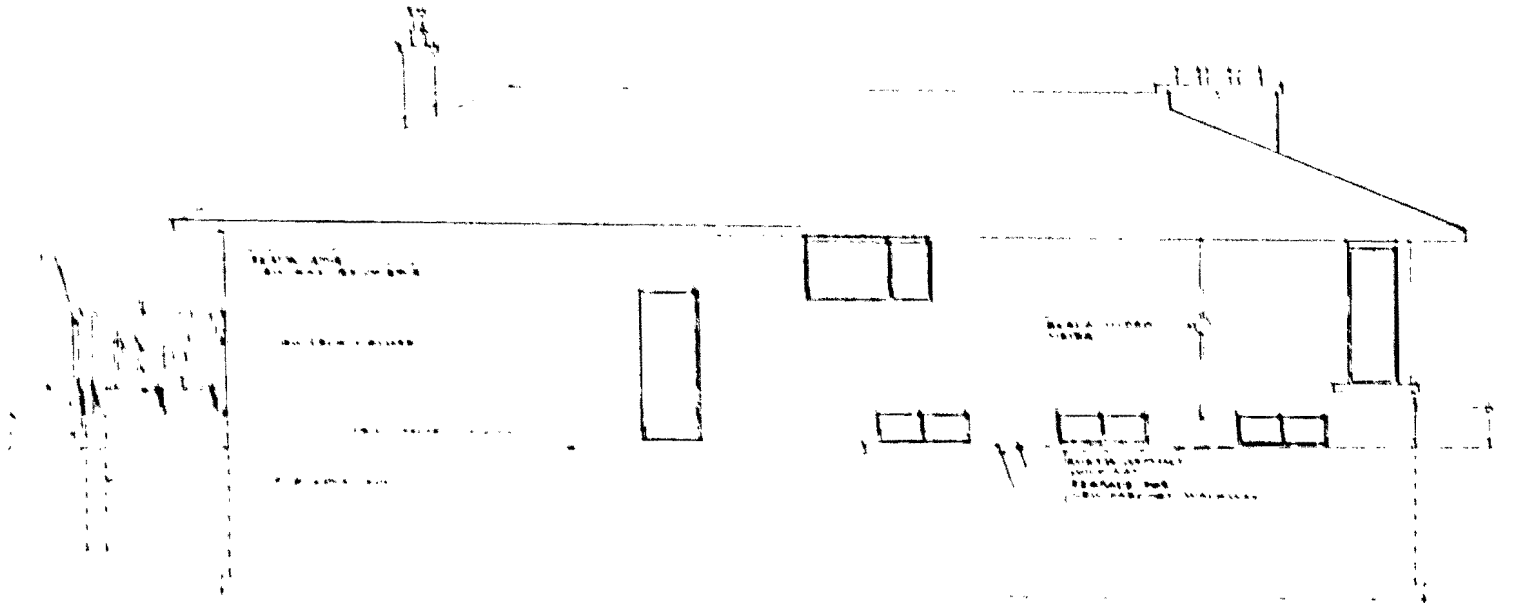
DRAWING TITLE

ELEVATIONS

SCALE	DATE	DRAWING
1/4" = 1'-0"	April 10, 1992	A4
PROJECT 92-70	DRAWN PJ & MMB	



SOUTH ELEVATION



REAR ELEVATION

SUSAN PRIETHRICH ARCHITECT

ONTARIO ASSOCIATION OF ARCHITECTS

GENERAL NOTES

REENA FOUNDATION

Alterations and Renovations

North York, Ontario

DRAWING TITLE

ELEVATIONS

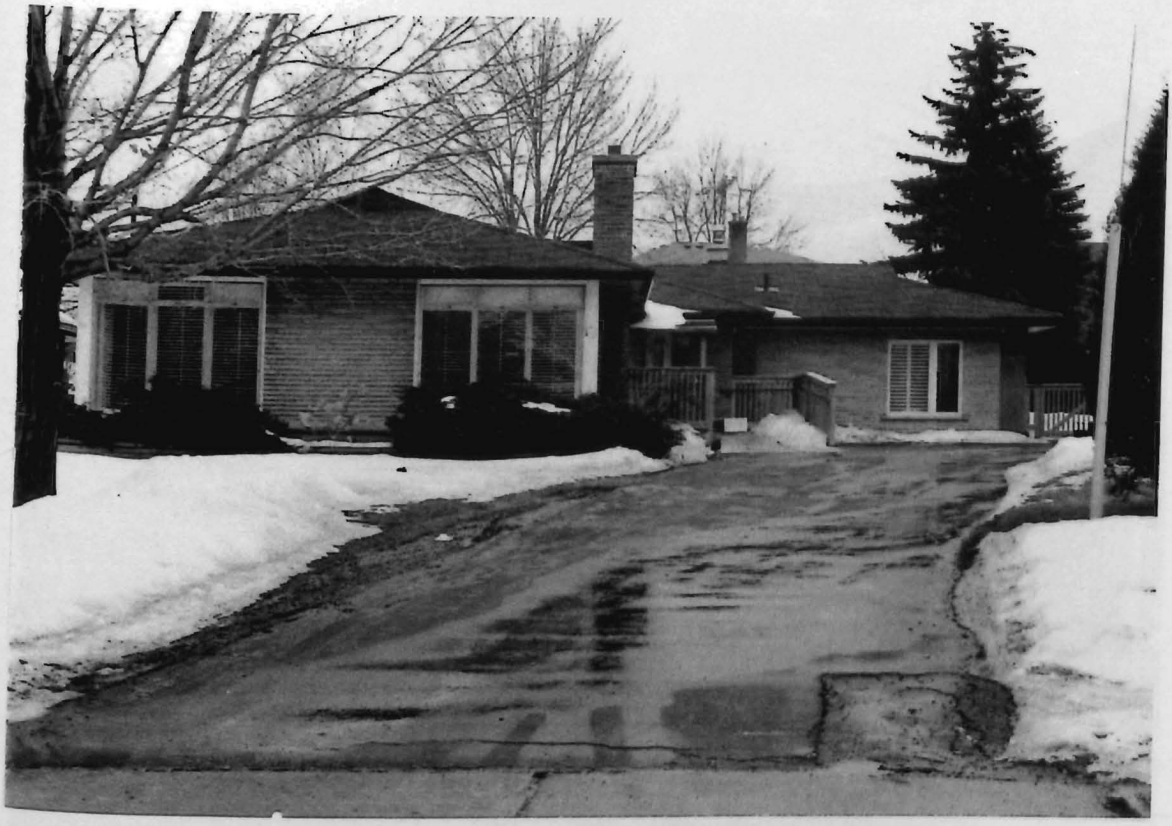
DRAWING

A5

NOVEMBER 89

EXTERIOR PHOTOGRAPHS

BEFORE: Front entrance to the home with the existing garage.



AFTER: Front Entrance of the Building Without the Garage, and a Ramp Leading up to the Front door.

EXTERIOR PHOTOGRAPHS

BEFORE: Front Entrance Door

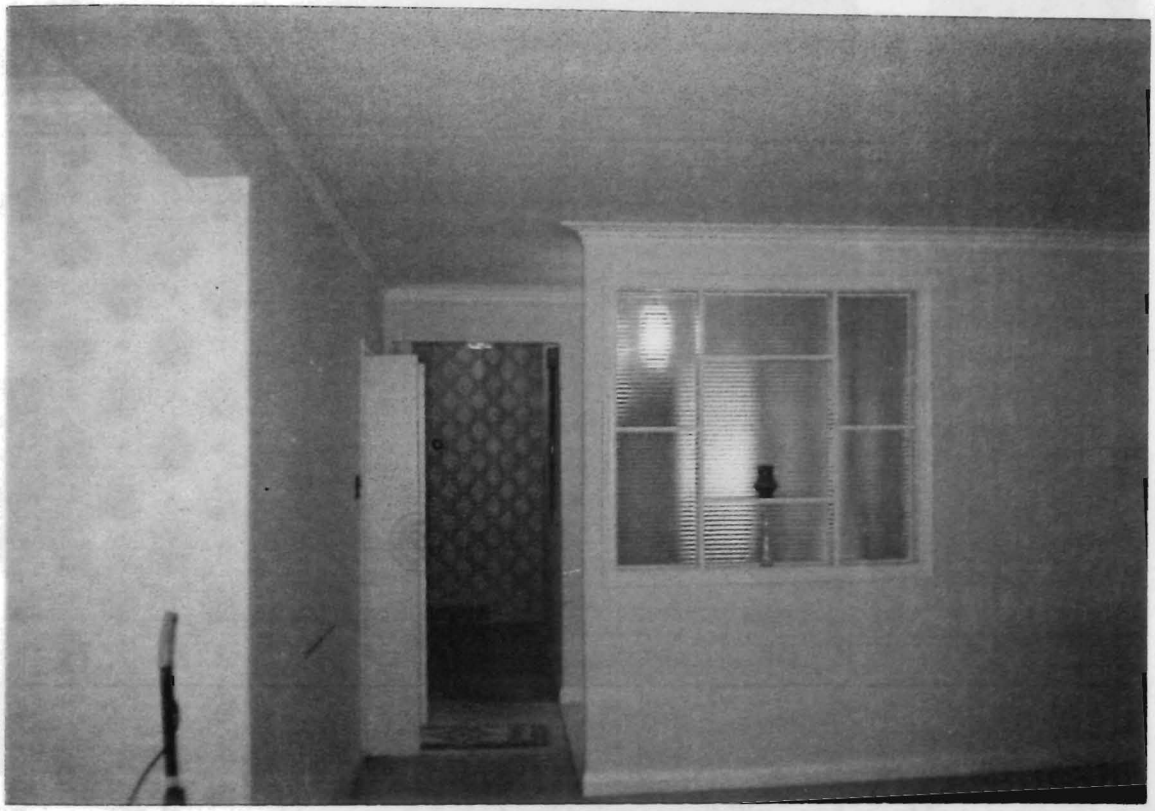
AFTER: Entrance Door was moved to allow easir Accessibility

EXTERIOR PHOTOGRAPHS

BEFORE: Rear of the House: slope exists on the land

AFTER: Patio Space Allowing for a Flat Area at Rear.

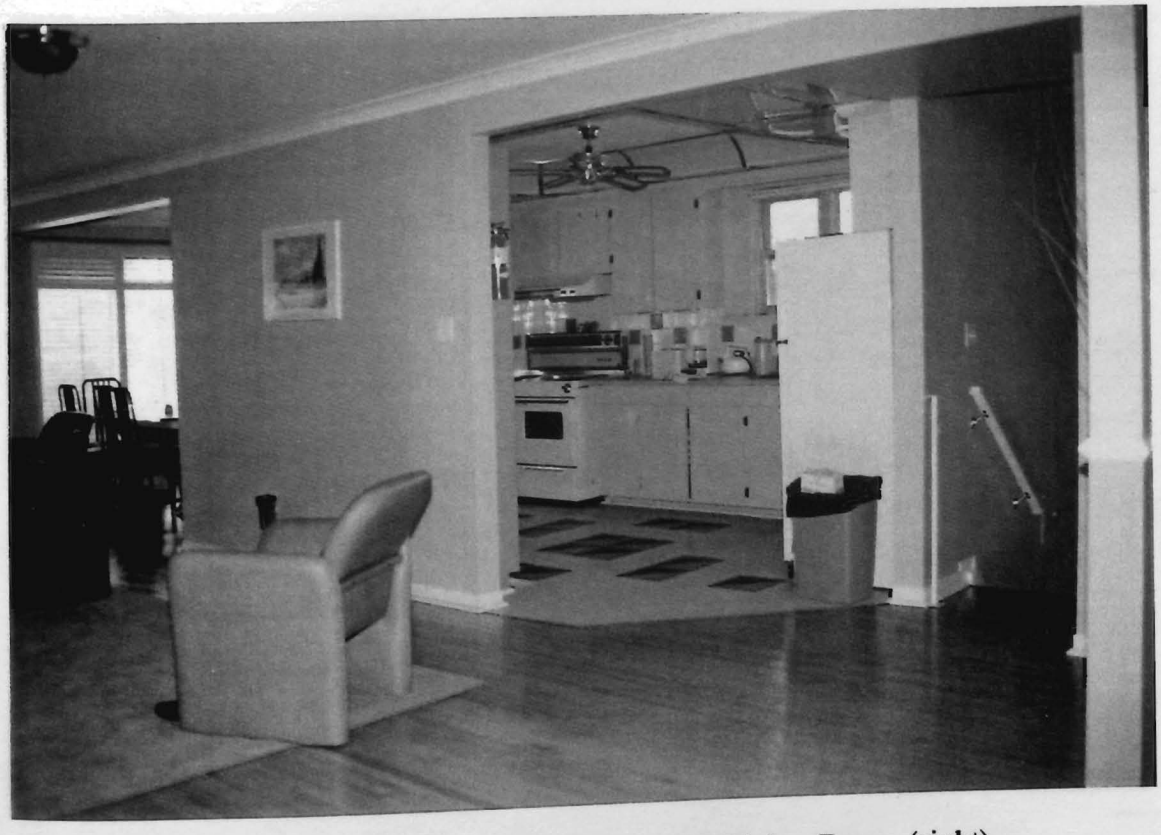
INTERIOR PHOTOGRAPHS



BEFORE: Front Entrance; behind the interior window and wall, very tight and narrow.

AFTER: Front Entrance; spacious enough to allow wheelchair accessibility

AFTER: Hallway; wide enough for wheelchair accessibility, and moulding is provided for protection against the wall from the wheelchair, but also as a guide for the blind.



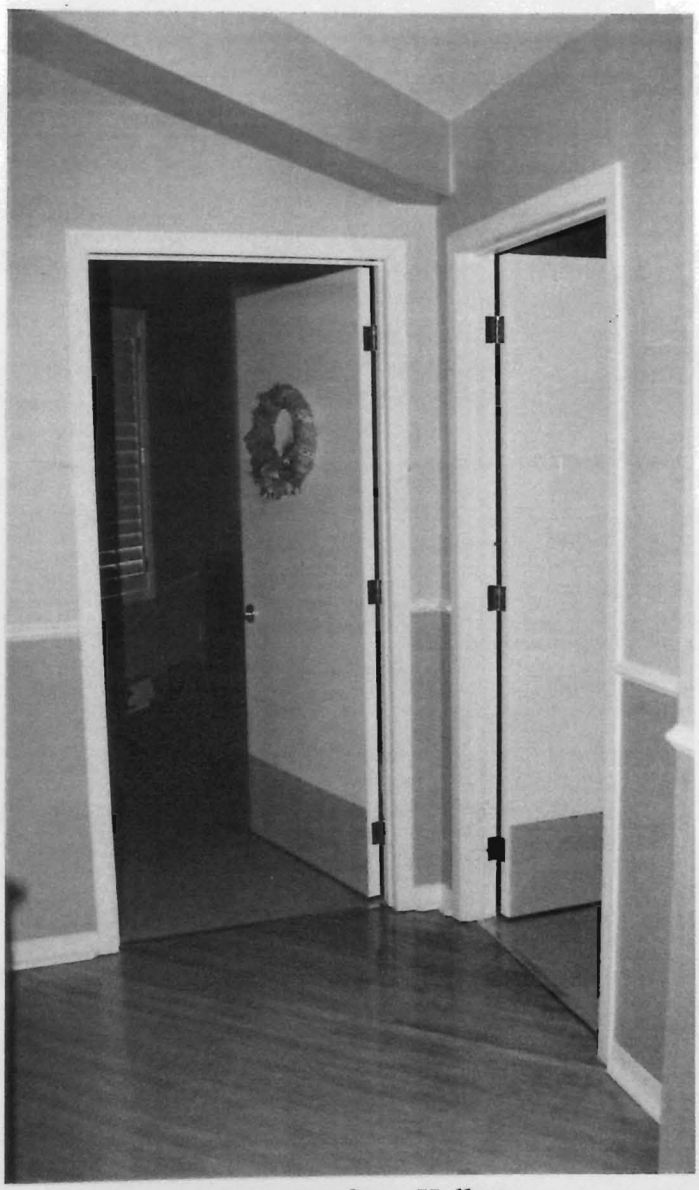
AFTER: A View Towards the Kitchen Space and the Living Room (right).

INTERIOR PHOTOGRAPHS

BEFORE: Kitchen Area; Wall with an entrance door existed where the dining area is at the present moment.

AFTER: Kitchen Area; no wall separating the dining room area.

BEFORE: Hallway & Bedroom Door Entrances.



AFTER: Direct Access from Hallway into Bedroom Spaces.

ACCESSIBLE WASHROOM

AFTER: Roll-In Shower Stall

AFTER: Grab Bars Provided for Toilet

APPENDIX B

Questionnaire: Client Information Profile.

Source: Barrier-Free Design Centre. Source Book, The. Toronto: 1987, p.12 - p.20

CLIENT INFORMATION PROFILE

PART I: GENERAL INFORMATION

Please tell us about the disabled person(s) in your family

Name _____

Address _____

_____ Postal Code _____

Telephone (Home) _____ (Work) _____

Birthdate _____

Disability _____

_____

How many people live in your house? _____

How do you get around in the house?

- ☐ Walk
- ☐ Walk with canes or crutches
- ☐ Use manual wheelchair
- ☐ Use electric wheelchair
- ☐ Use power scooter
- ☐ Other kind of assistance

What other equipment do you use to help you in the house (such as bath lifts, teachers, automatic controls)?

_____

_____

Do you have any problems with
(Please describe)

- ☐ Vision _____
- ☐ Hearing _____
- ☐ Sense of feeling in arms or legs _____
- ☐ Use of hands _____
- ☐ Strength _____
- ☐ Balance _____
- ☐ Use of neck _____
- ☐ Reaching or stretching _____

☐ Coordination _____

_____

☐ Endurance _____

_____

☐ Cognition _____

_____

☐ Breathing _____

_____

_____

PART II: DESCRIPTION OF ACTIVITIES

Please check the box that best describes how you would normally do the activity.

This section asks questions about how you do certain activities in specific rooms in your home. Please tell us as much as you can about your abilities, and the problems or solutions you have come up with in your house.

1. The Site

I can:	Does not apply	Can manage alone	Can manage with equipment (wheelchair, teacher, etc.)	Can manage with someone helping	Cannot manage at all
Move around outside the house	☐	☐	☐	☐	☐
Manage curbs	☐	☐	☐	☐	☐
Manage rough ground	☐	☐	☐	☐	☐
Manage slopes	☐	☐	☐	☐	☐
Manage ice/snow	☐	☐	☐	☐	☐
Carry things outdoors	☐	☐	☐	☐	☐
Get into and out of a car	☐	☐	☐	☐	☐
Load and unload things into and out of a car	☐	☐	☐	☐	☐
Use a bus, or special transportation service	☐	☐	☐	☐	☐
Drive a car	☐	☐	☐	☐	☐

Do you have any special outdoor interests or hobbies?

_____

_____

Do you have any special needs when going out of doors (i.e. sensitive to sun)?

_____

_____

Do you use a scooter or wheelchair when you are outside? Please describe.

_____

_____

What are the biggest problems to you when you are outside, or in your yard?

_____

_____

2. Front and Back Door

I can:	Does not apply	Can manage alone	Can manage with equipment (wheelchair, reacher, etc.)	Can manage with someone helping	Cannot manage at all
Climb up stairs	☐	☐	☐	☐	☐
Go down stairs	☐	☐	☐	☐	☐
Go up a ramp	☐	☐	☐	☐	☐
Go down a ramp	☐	☐	☐	☐	☐
Use a handrail	☐	☐	☐	☐	☐
Open and go through a door	☐	☐	☐	☐	☐
Use a key	☐	☐	☐	☐	☐
Use the door lock	☐	☐	☐	☐	☐
Use the door knob	☐	☐	☐	☐	☐
Use lever handles	☐	☐	☐	☐	☐
Reach and use the mailbox	☐	☐	☐	☐	☐
Walk (wheel) over the lip at the door	☐	☐	☐	☐	☐

What are the biggest problems you now have when going in and/or out of your house?

_____

_____

3. Hallways and Inside Doors

I can:	Does not apply	Can manage alone	Can manage with equipment (wheelchair, reacher, etc.)	Can manage with someone helping	Cannot manage at all
Manage carpeted areas	☐	☐	☐	☐	☐
Manage hallways	☐	☐	☐	☐	☐
Open and go through doors to rooms	☐	☐	☐	☐	☐
Manage door knobs	☐	☐	☐	☐	☐
Manage lever handles	☐	☐	☐	☐	☐

When I move from room to room I use a:

☐ cane ☐ crutches ☐ artificial limb ☐ manual/electric wheelchair

☐ power scooter ☐ other

What are the biggest problems you now have when going from room to room in your house?

_____

_____

4. Stairs

I can:	Does not apply	Can manage alone	Can manage with equipment (wheelchair, reacher, etc.)	Can manage with someone helping	Cannot manage at all
Climb up stairs	☐	☐	☐	☐	☐
Go down stairs	☐	☐	☐	☐	☐
Use a handrail	☐	☐	☐	☐	☐
Use elevator controls	☐	☐	☐	☐	☐
Use a lift device	☐	☐	☐	☐	☐

Is going from one level up or down to another level of your house very important to you? How do you manage going up or down?

What are the biggest problems you now have when going from one level to another in your house?

5. Bathroom

I can:	Does not apply	Can manage alone	Can manage with equipment (wheelchair, reacher, etc.)	Can manage with someone helping	Cannot manage at all
Turn the lights on and off	☐	☐	☐	☐	☐
Use the electrical outlets	☐	☐	☐	☐	☐
Use the cabinets and closets	☐	☐	☐	☐	☐
See myself in the mirror	☐	☐	☐	☐	☐
Wash hands and face and brush my teeth	☐	☐	☐	☐	☐
Use taps	☐	☐	☐	☐	☐
Use the sink	☐	☐	☐	☐	☐
Get on the toilet	☐	☐	☐	☐	☐
Get off the toilet	☐	☐	☐	☐	☐
Manage conventional toileting	☐	☐	☐	☐	☐
Reach the toilet paper	☐	☐	☐	☐	☐
Use grab bars	☐	☐	☐	☐	☐
Get into the bathtub	☐	☐	☐	☐	☐
Get out of the bathtub	☐	☐	☐	☐	☐
Take a bath	☐	☐	☐	☐	☐
Get into the shower	☐	☐	☐	☐	☐
Get out of the shower	☐	☐	☐	☐	☐
Take a shower	☐	☐	☐	☐	☐
Use taps	☐	☐	☐	☐	☐
Dry off after a bath/shower	☐	☐	☐	☐	☐
Get dressed after a bath/shower	☐	☐	☐	☐	☐

Do you have any special needs or procedures in the bathroom?

What are the biggest problems you now have when using the bathroom in your house?

6. Kitchen

I can.	Does not apply	Can manage alone	Can manage with equipment (wheelchair, reacher etc.)	Can manage with someone helping	Cannot manage at all
Turn the lights on and off	☐	☐	☐	☐	☐
Use the electrical outlets	☐	☐	☐	☐	☐
Reach the garbage	☐	☐	☐	☐	☐
Move around in the kitchen	☐	☐	☐	☐	☐
Take food out of the fridge	☐	☐	☐	☐	☐
Take food out of the freezer	☐	☐	☐	☐	☐
Take things out of the cupboards	☐	☐	☐	☐	☐
Wipe the counters	☐	☐	☐	☐	☐
Wash dishes	☐	☐	☐	☐	☐
Use the dishwasher	☐	☐	☐	☐	☐
Clean the floor	☐	☐	☐	☐	☐
Open cans, bottles, boxes	☐	☐	☐	☐	☐
Mix ingredients in a bowl	☐	☐	☐	☐	☐
Fill pot with water	☐	☐	☐	☐	☐
Place pot on stove	☐	☐	☐	☐	☐
Turn stove on and off	☐	☐	☐	☐	☐
Use a microwave	☐	☐	☐	☐	☐
Open and close oven door	☐	☐	☐	☐	☐
Put pan in oven	☐	☐	☐	☐	☐
Pour hot water from a pot	☐	☐	☐	☐	☐
Cook on stovetop	☐	☐	☐	☐	☐
Use range fan	☐	☐	☐	☐	☐
Set the table	☐	☐	☐	☐	☐
Eat in the kitchen	☐	☐	☐	☐	☐
Eat in the dining room	☐	☐	☐	☐	☐
Prepare a meal	☐	☐	☐	☐	☐
Prepare a snack	☐	☐	☐	☐	☐
Feed myself	☐	☐	☐	☐	☐

Do you have any special needs in the kitchen?

_____

_____

Is using the kitchen very important to you?

_____

_____

What are the biggest problems you now have when using the kitchen in your house?

_____

_____

7. Living Room or Family Room

I can:

	Does not apply	Can manage alone	Can manage with equipment (wheelchair, reacher, etc.)	Can manage with someone helping	Cannot manage at all
Get into the living room	☐	☐	☐	☐	☐
Use the T.V. controls	☐	☐	☐	☐	☐
Use the radio/stereo controls	☐	☐	☐	☐	☐
Use the telephone	☐	☐	☐	☐	☐
Turn the lights on and off	☐	☐	☐	☐	☐
Move around in the living room	☐	☐	☐	☐	☐
Use the living room chairs	☐	☐	☐	☐	☐

What are the biggest problems you now have when using the living room or family room in your house?

_____

_____

8. Bedroom

I can:

	Does not apply	Can manage alone	Can manage with equipment (wheelchair, reacher, etc.)	Can manage with someone helping	Cannot manage at all
Turn lights on and off	☐	☐	☐	☐	☐
Use electrical outlets	☐	☐	☐	☐	☐
Open and close windows	☐	☐	☐	☐	☐
Pull drapes open and closed	☐	☐	☐	☐	☐
Get into my bedroom	☐	☐	☐	☐	☐
Reach clothes in closet	☐	☐	☐	☐	☐
Open drawers	☐	☐	☐	☐	☐
Dress myself	☐	☐	☐	☐	☐
Undress myself	☐	☐	☐	☐	☐
Get into bed	☐	☐	☐	☐	☐
Get out of bed	☐	☐	☐	☐	☐
Get into the other bedrooms in the house	☐	☐	☐	☐	☐

What are the biggest problems you now have when using your bedroom?

_____

_____

9. Laundry

I can:	Does not apply	Can manage alone	Can manage with equipment (wheelchair, reacher, etc.)	Can manage with someone helping	Cannot manage at all
Get into the laundry room	☐	☐	☐	☐	☐
Turn the lights on and off	☐	☐	☐	☐	☐
Use the electrical outlets	☐	☐	☐	☐	☐
Reach the closets and cupboards	☐	☐	☐	☐	☐
Use the washer and dryer controls	☐	☐	☐	☐	☐
Put the laundry in the machine	☐	☐	☐	☐	☐
Take the laundry out of the machine	☐	☐	☐	☐	☐
Reach the taps	☐	☐	☐	☐	☐
Do hand laundry	☐	☐	☐	☐	☐
Do the ironing	☐	☐	☐	☐	☐

What are the biggest problems you now have when doing the laundry?

_____

_____

_____

IMPORTANT MEASUREMENTS

BFD Project # _____

_____

PART I: GENERAL INFORMATION

Please tell us about the disabled person(s) in your family

Name _____

Address _____

_____ Postal Code _____

Telephone (Home) _____ (Work) _____

Birthdate _____

Disability _____

Your measurements are very important to the person helping design your home. Because you and the equipment you use are unique, it is essential to take accurate measurements that best describe you. An error of one inch in the height of your wheelchair armrests could make the countertop unusable. Remember to wear the type of clothing that you would normally wear when doing the task, and to measure the hand, or side that you would normally use.

You might need help with this part of the form. Ask a family member, or your health care professional. If you would feel more comfortable, leave this part of the questionnaire and the consultant from the Barrier-Free Design Centre will help you.

MEASUREMENT	HOW TO MEASURE	YOUR MEASUREMENT	OTHER FAMILY MEASUREMENT (IF APPLICABLE)
EYE LEVEL (the line of vision will tell you about the height of windows, railings, and controls)	• Stand, or sit, using your cane(s)/wheelchair or other assisting equipment • Measure from floor to middle of eye with head relaxed		
ELBOW HEIGHT (this will tell you about grab bar heights)	• Stand or sit using your cane(s)/wheelchair or other equipment • Measure from floor to point of the elbow when arms are relaxed		
ARMREST HEIGHT (this will tell you about work table and sink heights)	If you use a wheelchair. • Sit in wheelchair • Measure from floor to top of armrest • Be sure to include control box or joy stick		
FORWARD REACH (this will tell you about shelving and the depth of countertops)	• Sit or stand using equipment usually needed • Reach out in front, do not strain • Measure distance from chest to the thumb point		
VERTICAL REACH (this will tell you about cabinet, cupboard and shelf locations)	• Sit in wheelchair • Reach up and forward, do not strain • Measure from floor to thumb joint • Repeat measurement reaching toward the floor • Repeat measurement if you can stand		
GRIP (this will tell you about knobs and grab bars)	• Make a circle with your thumb and finger – as if you are holding a round stick • Measure across the circle formed		
SHOULDER HEIGHT (this will tell you about the height of shelves and switches – if you are in bed – this will tell you about where to put bedside controls)	• Stand or sit using your cane(s)/wheelchair or other assisting equipment • Measure from the floor to the top of the shoulder		
WIDTH (this will tell you about door width and the space needed on a platform lift)	• Stand or sit using your cane(s)/wheelchair or other equipment • Measure across the widest distance (i.e across the bottom from crutch to crutch or across the wheelchair from rim to rim including fingers and elbows)		

MEASUREMENT	*HOW TO MEASURE*	*YOUR MEASUREMENT*	*OTHER FAMILY MEASUREMENT (IF APPLICABLE)*
LAP DEPTH (this will tell you about the space needed beneath a work surface)	• Sit in chair or wheelchair • Measure from the front of chest to point directly above toes - or to the edge of wheelchair footrests	_____	_____
KNEE HEIGHT (this will tell you about the space needed beneath a work surface or table)	• Sit in chair or wheelchair • Measure from the floor to the top of a book placed on the knee	_____	_____
SEAT HEIGHT (this will tell you about the height of beds, tubs and toilets)	• Sit in wheelchair or scooter • Measure from floor to top of seat - including the seat cushion	_____	_____
*Remember to measure the seat height of all equipment - for example the height of a commode chair if it is to fit over a toilet.			
FOOTREST HEIGHT (this will tell you about the kickspace under counters and the height of wall or door protectors)	• Sit in wheelchair or scooter • Measure the distance from the floor to the highest point of the footrests	_____	_____
TURNING SPACE (this will tell you about the amount of space needed in certain rooms)	• Sit in wheelchair or stand with crutches • Turn a complete circle • Mark the far points of the turn with a small chalk mark • Measure across the marks	_____	_____
*Remember - if a helper assists in the turn to be sure to include them in the measurement.			

Please feel free to add any comments or measurements that are specific to your needs and your house.

APPENDIX C

Problem Identification Matrix

Source: Ministry of Community and Social Services. Designable Environments: (adapted from E.Steinfeld's The Enabler).

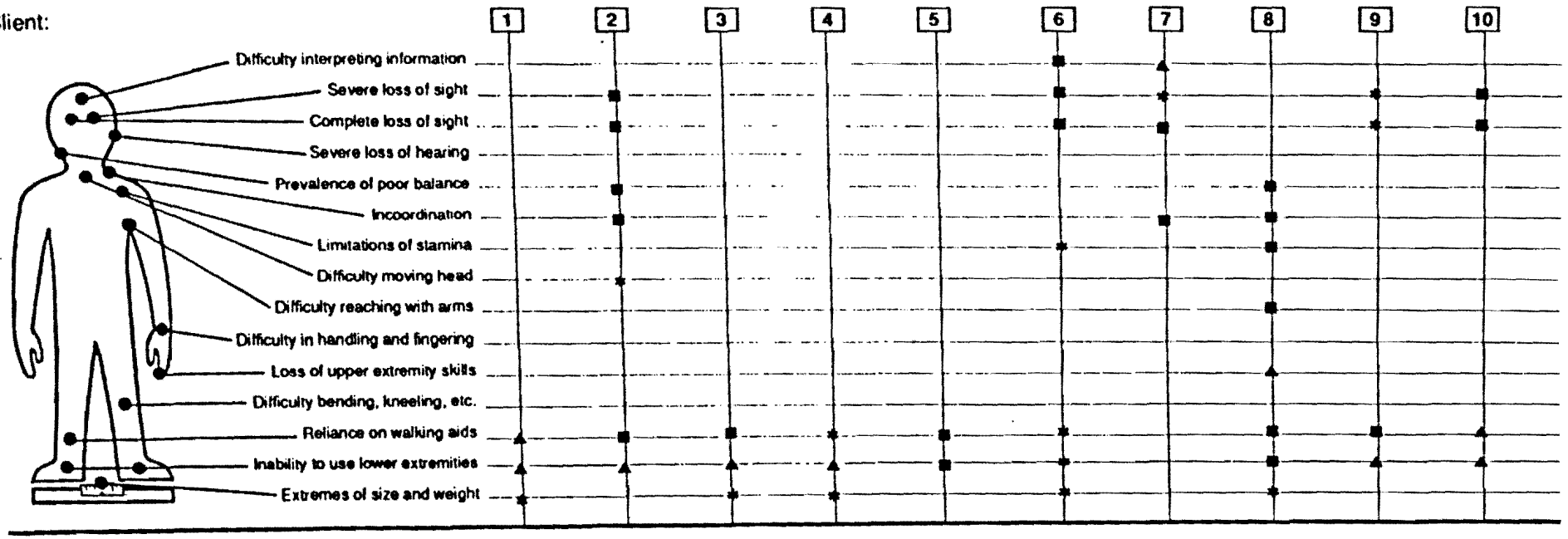
Toronto: 1987.

Problem Identification Matrix

Entrances, Exits and Doorways

- ✱ potential problem
- ● problem
- ■ severe problem
- ▲ impossibility

Client:



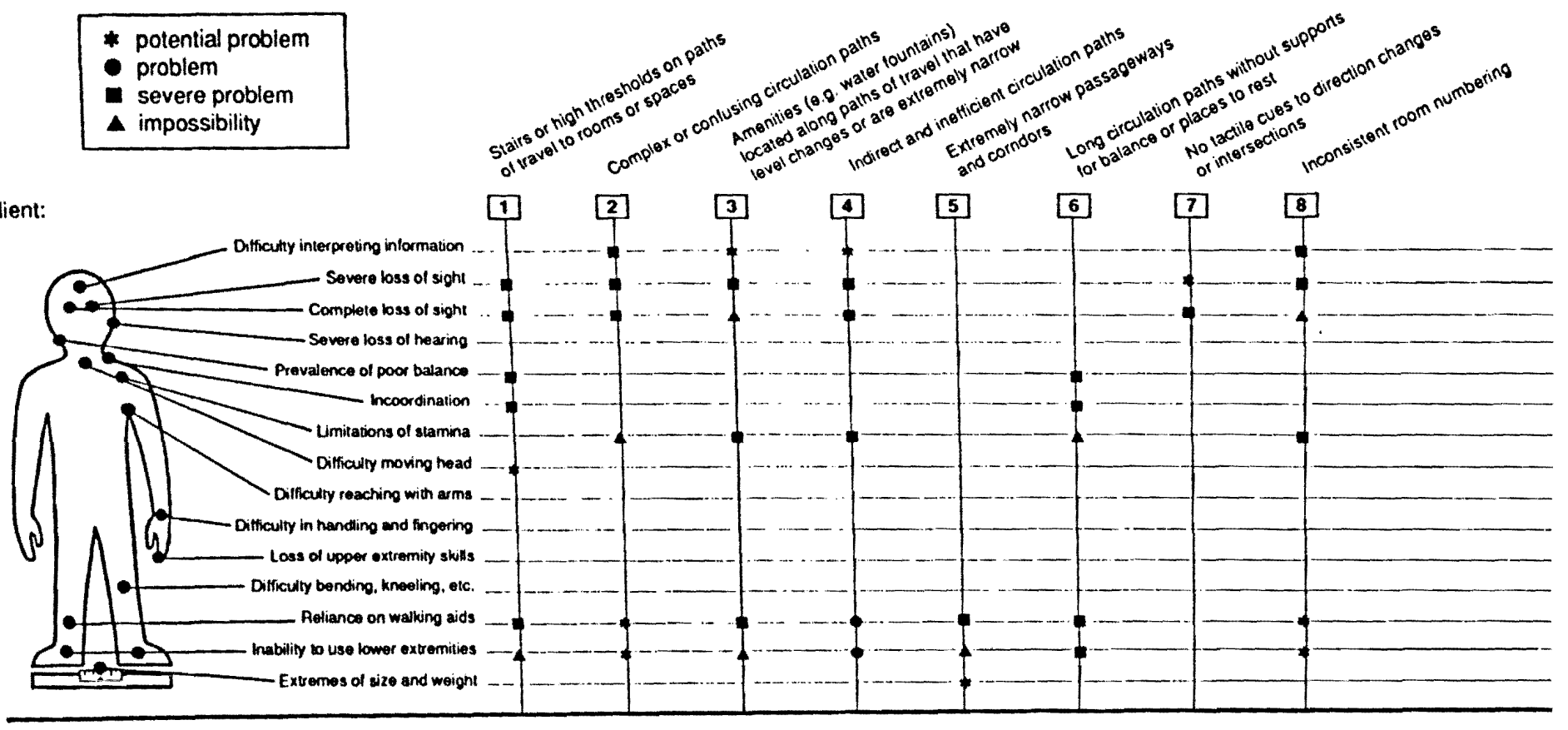
Comments:

Problem Identification Matrix

Interior Circulation Paths

- ✱ potential problem
- ● problem
- ■ severe problem
- ▲ impossibility

Client:



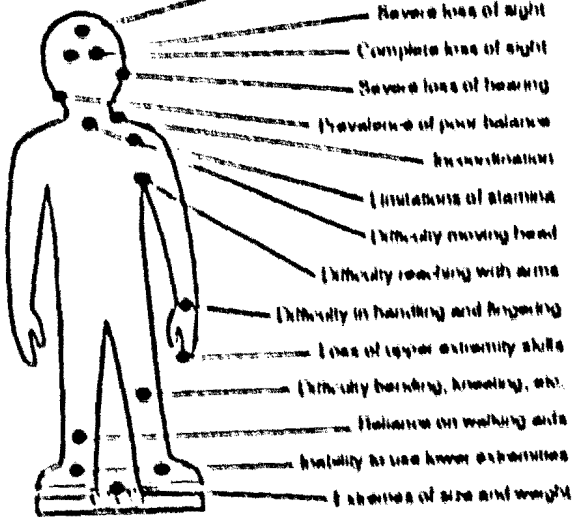
Comments:

Problem Identification Matrix

Interior Circulation Paths (cont'd.)

- potential problem
- problem
- severe problem
- ▲ impossibility

Client:



	9	10	11	12	13	14	15	16
Difficulty interpreting information				■	■	■		
Severe loss of sight	■	●		■				
Complete loss of sight	■	●		■				
Severe loss of hearing								
Prevalence of poor balance	■	■			■			■
Incoordination	■				■			■
Limitations of stamina	■	■	■	■	■	■		
Difficulty moving head		●						
Difficulty reaching with arms								
Difficulty in handling and fingering								
Loss of upper extremity skills								
Difficulty bending, kneeling, etc.								
Balance on walking aids	■	■	■		●			▲
Inability to use lower extremities		■	■		●			
Extremes of size and weight	■							

Comments:

Slippery walking surfaces

Walking surfaces with steep inclines

Carpet with high pile, loose weave or soft underlayment

Lack of information sources (e.g. receptionist to give directions at main entrance)

Random placement of furniture, plants, fountains, etc. in circulation areas

Lack of tactile or audio cues to hazardous areas

Lack of audio or tactile orientation cues for crossing large open spaces

Seating areas that can only be reached by stairs

Problem Identification Matrix

Communications

- ✱ potential problem
- ● problem
- ■ severe problem
- ▲ impossibility

Client:

	1 Signs and markers located out of visual range	2 Illogical signs and markers	3 Signs and markers for hazards and emergency use in only visual mode	4 Signs, markers, and signals for hazards and emergency use in only auditory mode	5 Signs and markers in complicated or abstract mode	6 Poor exposure of important signs and markers
Difficulty interpreting information	■	▲	✱		▲	■
Severe loss of sight	■	■	▲		■	■
Complete loss of sight			▲		■	■
Severe loss of hearing				▲		
Prevalence of poor balance						
Incoordination						
Limitations of stamina						
Difficulty moving head	■					■
Difficulty reaching with arms						
Difficulty in handling and fingering						
Loss of upper extremity skills						
Difficulty bending, kneeling, etc.						
Reliance on walking aids	■					✱
Inability to use lower extremities						✱
Extremes of size and weight	✱					✱

Comments:

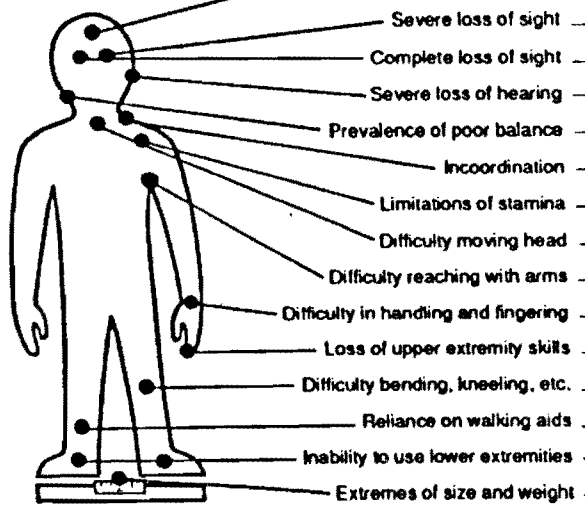
Problem Identification Matrix

Communications (cont'd.)

- ✱ potential problem
- ● problem
- ■ severe problem
- ▲ impossibility

Client:

	7 Directories and room markers only in visual mode	8 Small character size	9 Identifying signs only in visual mode	10 Lack or warning signal for hazards in a path of travel	11 Public announcement systems using only the auditory modes	12 Telephone systems without visual transmission modes
Difficulty interpreting information		✱				
Severe loss of sight		■	✱	■		
Complete loss of sight	▲		▲	■		
Severe loss of hearing					▲	▲
Prevalence of poor balance						
Incoordination						
Limitations of stamina						
Difficulty moving head				✱		
Difficulty reaching with arms						
Difficulty in handling and fingering						
Loss of upper extremity skills						
Difficulty bending, kneeling, etc.						
Reliance on walking aids						
Inability to use lower extremities						
Extremes of size and weight						



Comments:

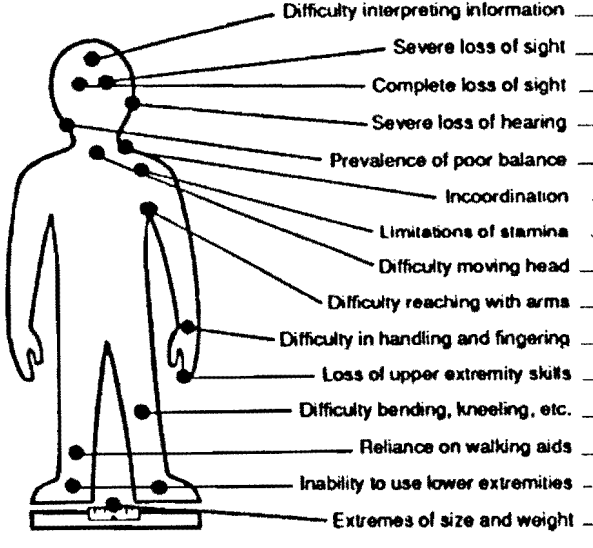
Problem Identification Matrix

Space Clearances

- ✱ potential problem
- ● problem
- ■ severe problem
- ▲ impossibility

Client:

	1 Small clearances for maneuvering close to plumbing fixtures, controls, operable hardware and storage units	2 Small clearances in furniture layouts	3 Small maneuvering spaces where turning is required	4 Narrow clearances where paths change direction or turning is required
Difficulty interpreting information				
Severe loss of sight	■	■		✱
Complete loss of sight	■	■		■
Severe loss of hearing				
Prevalence of poor balance	■	■		
Incoordination	■	■	●	
Limitations of stamina	✱			
Difficulty moving head				
Difficulty reaching with arms	■			
Difficulty in handling and fingering	■			
Loss of upper extremity skills				
Difficulty bending, kneeling, etc.				
Reliance on walking aids	■	■	■	■
Inability to use lower extremities	▲	▲	▲	▲
Extremes of size and weight	✱	✱	✱	✱



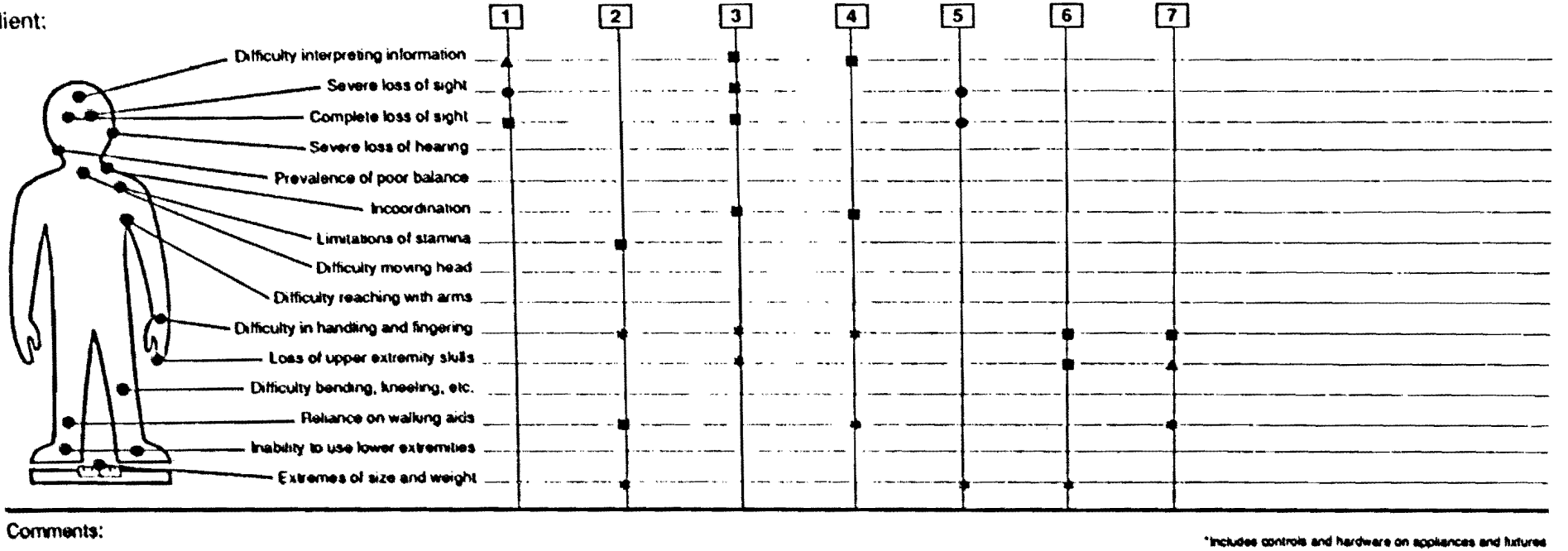
Comments:

Problem Identification Matrix

Controls and Operable Hardware

- ✱ potential problem
- ● problem
- ■ severe problem
- ▲ impossibility

Client:



Comments:

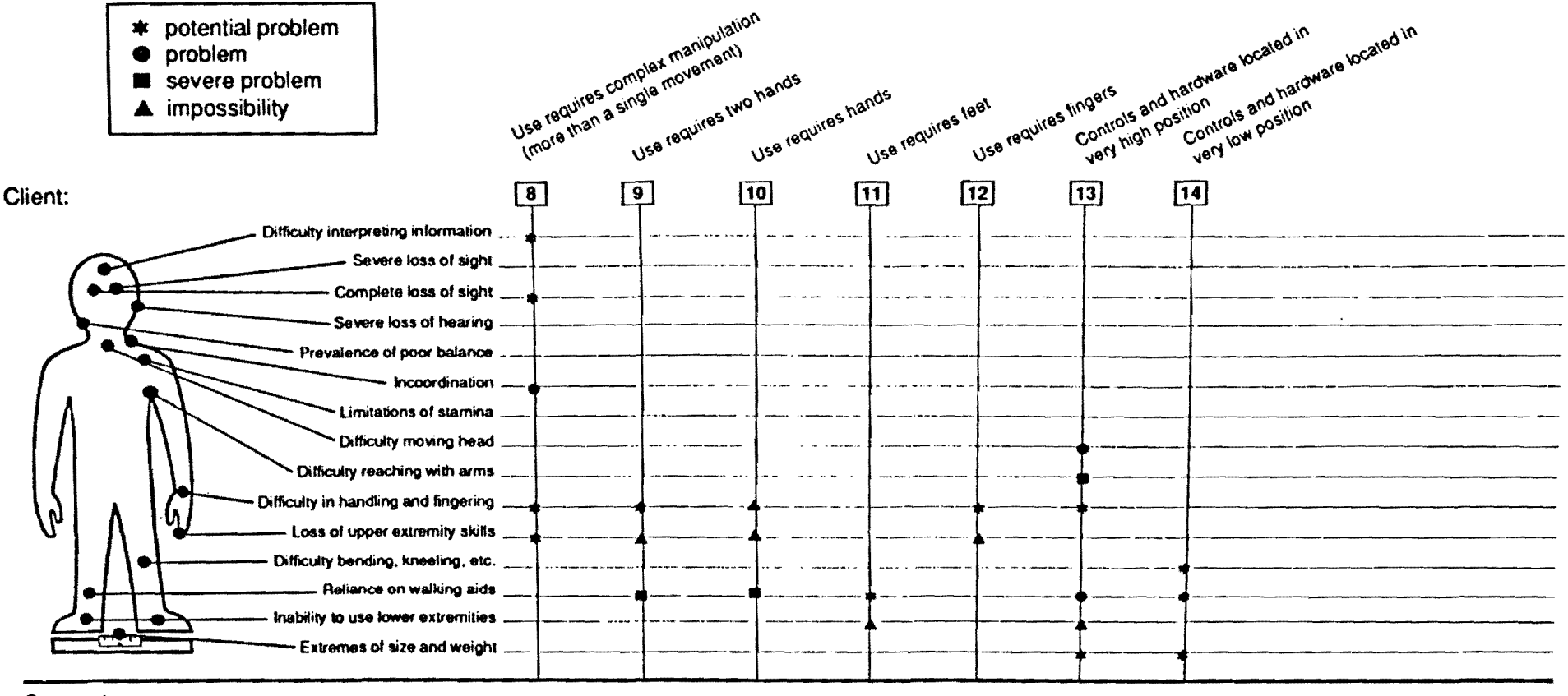
*Includes controls and hardware on appliances and fixtures

Problem Identification Matrix

Controls and Operable Hardware (cont'd.)

- ✱ potential problem
- ● problem
- ■ severe problem
- ▲ impossibility

Client:



Comments:

Problem Identification Matrix

Storage and Work Surfaces

- ✱ potential problem
- ● problem
- ■ severe problem
- ▲ impossibility

Client:

	1 Shelves and other storage facilities are located at extremes of reach (high or low)	2 Counters, cabinets or narrow spaces in front of storage units	3 Work surfaces that are at height suitable only for standing work	4 Work surfaces that are at very low heights	5 No clearances for legs under work surfaces	6 Counters too deep	7 Deep shelves	8 Door swings cause obstructions to use of storage units	9 Lack of illumination inside storage unit
Difficulty interpreting information							✱		
Severe loss of sight	■								■
Complete loss of sight	■								
Severe loss of hearing									
Prevalence of poor balance	▲	■							
Incoordination	■	■							
Limitations of stamina	■				✱				
Difficulty moving head	■	■		■				■	
Difficulty reaching with arms	▲					■	▲		
Difficulty in handling and fingering	■					■			
Loss of upper extremity skills	▲					▲	▲	▲	
Difficulty bending, kneeling, etc.	■			■			■	▲	
Reliance on walking aids	■	■	■		■	■	■	■	
Inability to use lower extremities	▲	■	■		■	■	■	■	
Extremes of size and weight	■	■		■					

Comments:

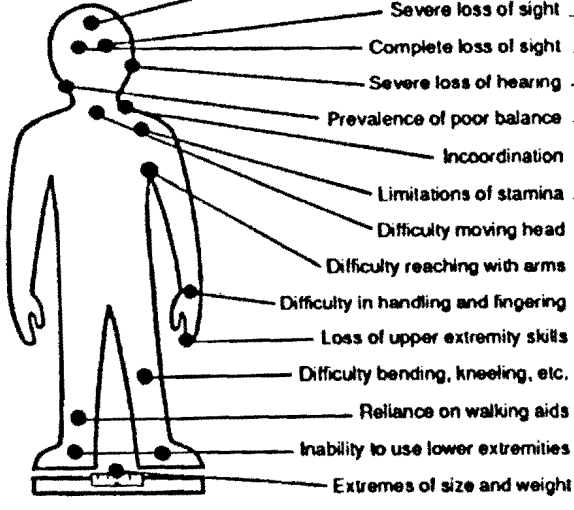
Problem Identification Matrix

Supports

- ✱ potential problem
- ● problem
- ■ severe problem
- ▲ impossibility

Client:

	1 Lack of handrails for maintaining balance	2 Lack of shower or bathtub seat	3 No grab bars for use in transferring into bathtub, onto toilet or onto shower seat	4 Grab bars set at extremes of reach only	5 Grab bars mounted at high positions	6 Grab bars mounted at low positions
Difficulty interpreting information						
Severe loss of sight						
Complete loss of sight						
Severe loss of hearing						
Prevalence of poor balance	▲	●	■	▲		■
Incoordination			■	■		■
Limitations of stamina			■	■		■
Difficulty moving head						
Difficulty reaching with arms				■		
Difficulty in handling and fingering						
Loss of upper extremity skills						
Difficulty bending, kneeling, etc.		■	■			
Reliance on walking aids	■	■	■	■		■
Inability to use lower extremities		■	■	▲	■	
Extremes of size and weight		✱				



Comments:

Problem Identification Matrix

Supports (cont'd.)

- ✱ potential problem
- ● problem
- ■ severe problem
- ▲ impossibility

Client:

	7 Vertical grab bar configuration	8 Grab bars too short	9 Surface of supports does not conform to hand size	10 Grab bars or handrails set close to wall	11 Location of grab bars obstructs use of equipment or fixture or circulation around it
Difficulty interpreting information					
Severe loss of sight					
Complete loss of sight					
Severe loss of hearing					
Prevalence of poor balance		■	▲	■	
Incoordination		■	✱	✱	
Limitations of stamina	■	■			
Difficulty moving head					
Difficulty reaching with arms					
Difficulty in handling and fingering			▲	■	
Loss of upper extremity skills					
Difficulty bending, kneeling, etc.					
Reliance on walking aids	■	■	✱	■	▲
Inability to use lower extremities	■	■	✱	■	▲
Extremes of size and weight			✱		✱

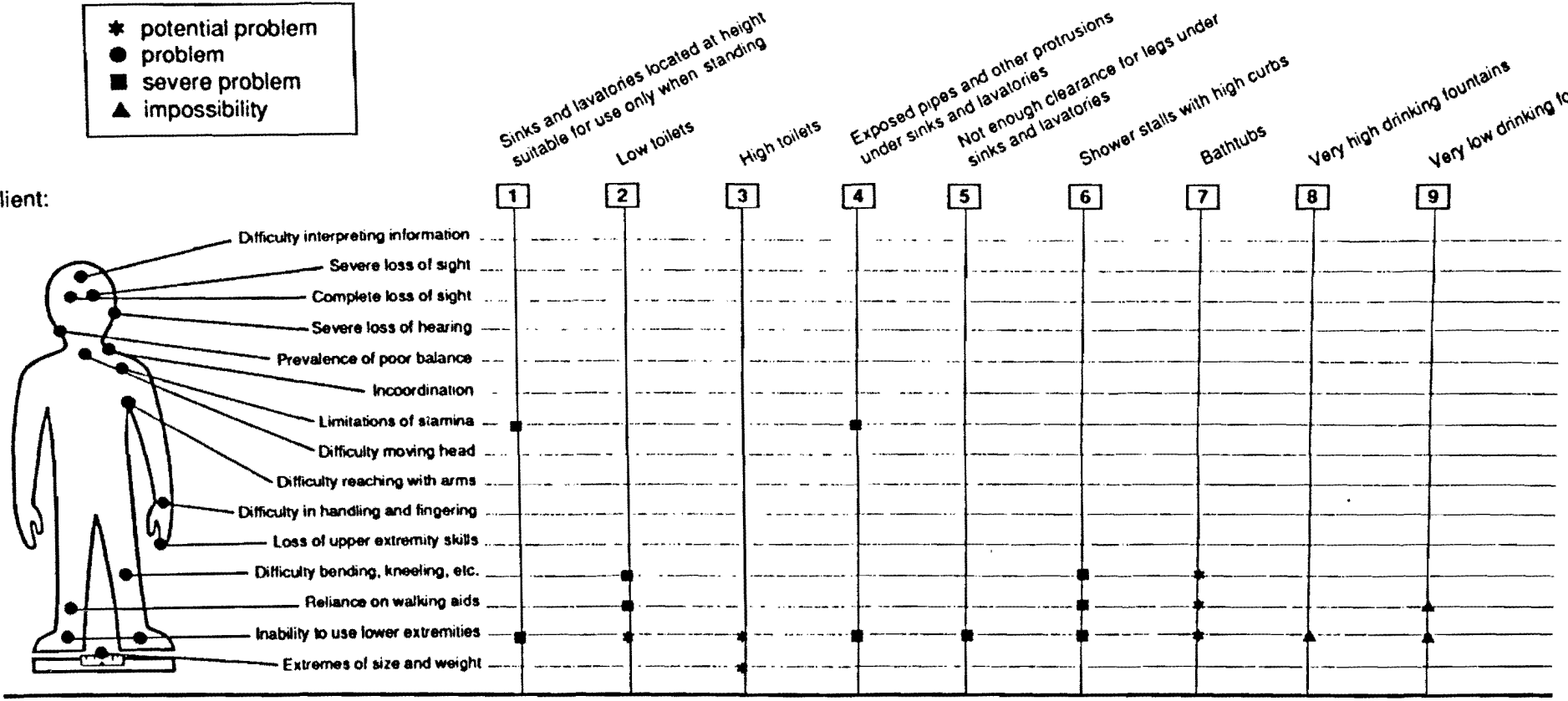
Comments:

Problem Identification Matrix

Plumbing Fixtures

- ✱ potential problem
- ● problem
- ■ severe problem
- ▲ impossibility

Client:

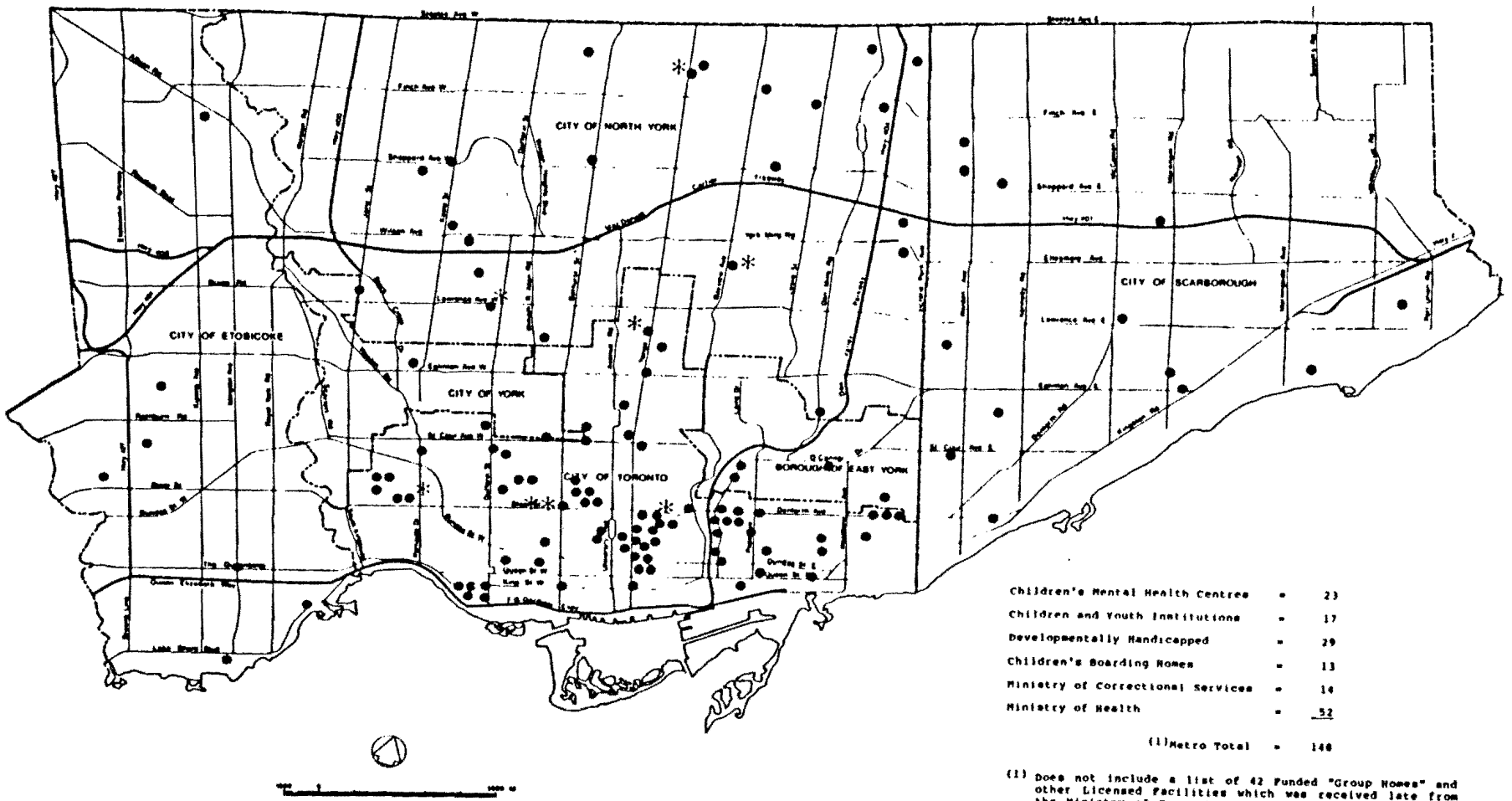


Comments:

APPENDIX D

Group Homes, Metropolitan Toronto, 1987.

ce: Metropolitan Toronto Planning Department. "Metropolitan Toronto Key Facts". Toronto: 1987, p.6.13



Children's Mental Health Centres	=	23
Children and Youth Institutions	=	17
Developmentally Handicapped	=	29
Children's Boarding Homes	=	13
Ministry of Correctional Services	=	14
Ministry of Health	=	52
(1)Metro Total	=	148

(1) Does not include a list of 42 Funded "Group Homes" and other Licensed Facilities which was received late from the Ministry of Community & Social Services. This will be updated in the next "Key Facts" publication.

* Houses 2 or more programs

** Office of Houselink Community House which administers 19 homes scattered throughout the city whose exact street numbers are not available.

Source:

Ministry of Community & Social Services - Central Regional Office
Ministry of Correctional Services
Ministry of Health

GROUP HOMES, METROPOLITAN TORONTO, 1987

APPENDIX E

Group Home Operator's Neighbourhood Dialogue Guidelines.

APPENDIX E:

GROUP HOME OPERATOR'S NEIGHBOURHOOD DIALOGUE GUIDELINES

1. Once an operator has secured funding through the appropriate Ministry and the home has been registered by the City, the operator should commence community dialogue immediately. In the period after securing funding, accommodation and registration, and before the start of operation of the facility, neighbours should be told about the program.

2. The operator should employ methods for neighbourhood dialogue which are most applicable to the situation. The operator may wish and, indeed, is encouraged to employ his/her own particular methods, so long as dialogue occurs.

   The following methods are suggestions and can be employed alone or in combination:

   a) Contact with the Mayor and Ward Aldermen, apprising them of all details of the program, in order to secure general support for the program;

   b) Mailing of a personal letter from operator (Executive Director, House Director, sponsoring agency director or manager, president or member of board of directors or community advisory committee) to immediate neighbours announcing the programs; details of the program (i.e. its objectives, screening and selection criteria, degree and kind of supervision, expertise of staff, and opening date); and, the names, addresses and telephone numbers of operator's liaison persons.

   c) Personal meetings by any of the actors identified in (b) with neighbours in their own homes to announce the program, supply all relevant information and answer any questions.

   d) Presentation at a neighbourhood meeting sponsored by neighbours of a local residents' association or the operator and chaired by a local representative such as a minister, school principal, residents' association president, ward aldermen or school board trustee. It would be advisable that one has an agreed upon agenda and procedure for conducting the meeting. Attendance at the meeting should include as many of the actors identified in (b) as possible.

   e) Announcement of program at local religious services.

   f) Appointment of neighbours to board of directors, where applicable.

Source: City of Toronto Planning and Development Department, and Ontario Secretariat for Social Development. "Group Home Primer for the City of Toronto". Toronto: 1984, p.13

g) Establishment of a local community advisory committee of neighbours to advise on:

   i) property maintenance;
   ii) residents' conduct in the neighbourhood;
   iii) residents' involvement in neighbourhood activities and organizations;
   iv) staff involvement in neighbourhood activities and organizations.

h) Immediate response, on a one-to-one basis, to any concerns neighbours may have about the facility or residents. Be prepared to answer the questions which most residents ask.

i) Invitation to neighbours to visit other residential programs.

Source: City of Toronto Planning and Development Department, and Ontario Secretariat for Social Development. "Group Home Primer for the City of Toronto". Toronto: 1984, p.14

APPENDIX F

Solicitor's Certificate #1.

Source: Ministry of Housing.

TO: HER MAJESTY THE QUEEN IN RIGHT OF ONTARIO,
AS REPRESENTED BY THE MINISTER OF HOUSING

AND TO: CANADA MORTGAGE AND HOUSING CORPORATION

AND TO: .....
(Name of Non-Profit Corporation)

FROM: .....
(Name of Solicitor(s) for the Non-Profit Corporation)

SOLICITOR'S CERTIFICATION

RE: Letters Patent/Articles of Incorporation and By-Laws of a Non-Profit Corporation

.....
(Name of Non-Profit Corporation)

.....
(Municipal address of project)

I have reviewed the above-noted Non-Profit Corporation's Letters Patent/Articles of Incorporation and By-Laws, and

I CERTIFY THAT:

1. HOUSING OBJECT

(The Non-Profit Corporation will be one of: Non-Profit Housing Corporation or Charitable Non-Profit Housing Corporation or Non-Profit Housing Co-operative or Municipal Non-Profit Housing Corporation. The Non-Profit Corporation shall have one housing object clause which will be one of Paragraphs 1(1), 1(2), 1(3) or 1(4); cross out those three of Paragraphs 1(1), 1(2), 1(3) or 1(4) which are not applicable.)

(If a Non-Profit Housing Corporation,)

(1) The housing object clause is:

"To provide and operate housing accommodation, with or without any public space, recreational facilities, and commercial space or buildings appropriate thereto, primarily for persons of low or modest income."

(If a Charitable Non-Profit Housing Corporation,)

(2) The housing object clause is:

"To provide and operate non-profit residential accommodation and incidental facilities thereto exclusively for:

(i) persons of low income;

(ii) senior citizens primarily of low or modest income;

(iii) disabled persons primarily of low or modest income;

or any combination of (i), (ii) and (iii)."

(If a Non-Profit Housing Co-operative.)

(3) The housing object clause is:

(a) "Primarily to provide housing to the members of the co-operative."

(b) "To provide and operate housing, with or without any public space, recreational facilities, and commercial space or buildings appropriate thereto mainly for persons of low or modest income."

(If a Municipal Non-Profit Housing Corporation.)

(4) The housing object clause is:

"To provide and operate housing accommodation, with or without any public space, recreational facilities, and commercial space or buildings appropriate thereto, primarily for persons of low or modest income at rentals below the current rental market in the area in which the accommodation is located."

2. SPECIAL PROVISIONS

(Sub-paragraphs 2(a) and (b) apply to all Non-Profit Corporations.)

The Special Provisions in the Letters Patent/Articles Incorporation of the Non-Profit Corporation include the following:

(a) "The Corporation's (Co-operative's) activities shall be carried on without the purpose of gain for its members, and any profit or other accretion to the Corporation (Co-operative) shall be used in promoting its objects."

(b) "The directors, and those directors who also serve as officers, shall serve as directors and officers without remuneration and no director shall directly or indirectly receive any profit or remuneration from his or her position as director or in any other capacity, provided that a director, including those who are also officers, may be paid reasonable expenses incurred by them in the performance of his or her duties."

(Subparagraph (c) applies to Non-Profit Housing Corporations, Charitable Non-Profit Housing Corporations and Municipal Non-Profit Housing Corporations; cross out if not applicable.)

(c) "Upon dissolution of the Corporation and after payment of all debts and liabilities, its remaining property and assets shall be distributed or disposed of to charitable organizations which carry on work solely in (Canada or Ontario)."

(Note: For Special Provision 2(c) the Non-Profit Corporation can elect either Canada or Ontario.)

(Sub-paragraphs 2(d), (e) and (f) apply only to a Charitable Non-Profit Housing Corporation; cross out if not applicable.)

(d) "The Corporation shall be subject to the Charities Accounting Act and the Charitable Gifts Act."

(e) "The borrowing power of the Corporation pursuant to any by-law passed and confirmed in accordance with section 59 of the Corporations Act shall be limited to borrowing money for current operating expenses, provided that the borrowing power of the Corporation shall not be so limited if it borrows on the security of real or personal property."

(f) "If it is made to appear to the satisfaction of the Minister of Consumer and Commercial Relations, upon report of the Public Trustee, that the Corporation has failed to comply with any of the provisions of the Charities Accounting Act or the Charitable Gifts Act, the Minister may authorize an inquiry for the purpose of determining whether or not there is sufficient cause for the Lieutenant Governor to make an Order under subsection 317(1) of the Corporations Act to cancel the Letters Patent of the Corporation and declare it to be dissolved."

(Sub-paragraphs 2(g), (h), (i) and (j) apply only to a Non-Profit Housing Co-operative; cross out if not applicable.)

g) "The co-operative is a Non-Profit Housing Co-operative for the purposes of the Co-operative Corporations Act."

(h) No membership fee shall be charged to a geared-to-income occupant if such charge will act as a financial barrier to membership in the co-operative by the geared-to-income occupant.

(i) No member loan shall be required from geared-to-income occupants.

(j) "On the dissolution of the co-operative and after payment of its debts and liabilities, the remaining property of the co-operative shall be transferred to or distributed among one or more non-profit housing co-operatives or charitable organizations which carry on work solely in (Canada or Ontario)."

(Sub-paragraph 2(k) applies only to a Municipal Non-Profit Housing Corporation. Insert name of municipality. Cross out if not applicable.)

(k) "No person shall be elected or appointed as a director unless such election or appointment has the prior approval of

......"

.....

3. **BY-LAWS**

(Sub-paragraphs 3(1) and (2) apply to all Non-Profit Corporations.)

(1) The organizational By-Law of the Non-Profit Corporation implements the by-law requirements contained in this Paragraph 3, and states that the provisions of the By-Law containing the requirements shall prevail over any other by-laws enacted by the Non-Profit Corporation in the event of any conflict.

(2) The By-Laws of the Non-Profit Corporation do not contain any provisions specifically authorizing contracts between the Non-Profit Corporation and its directors other than occupancy leases and agreements.

(3) The By-Laws of the Non-Profit require that all cheques and other negotiable documents for the payment of money be signed by two signing officers of whom at least one shall be the President, the Vice-President, the Treasurer or the Secretary.

(Sub-paragraph 3(3) applies to all Non-Profit Corporations if the by-laws include a section pertaining to indemnification; cross out if no indemnification section in the by-laws. The term 'Corporation' will be deemed to include 'Co-operative' where applicable)

(3) The indemnification section in the by-laws conforms with the following:

"Every director and officer of the Corporation, and his or her heirs, executors and administrators, respectively, shall from time to time and at all times be indemnified and saved harmless out of the funds of the Corporation only from and against:

(i) all costs, charges and expenses whatsoever such director or officer sustains or incurs in or about any action, suit or proceeding that is brought, commenced or prosecuted against him or her for or in respect of any act, deed, matter or thing whatsoever, made, done or permitted by him or her, in or about the execution of the duties of his or her office;

(ii) all other costs, charges and expenses he or she sustains or incurs in or about or in relation to the affairs of the Corporation,

except such costs, charges and expenses as are occasioned by his or her own negligence or default, or failure to act honestly and in good faith with a view to the best interests of the Corporation."

(Sub-paragraph 3(4) applies to all Non-Profit Corporations if the by-laws include a section pertaining to dissolution; cross out if no dissolution section in the by-laws.)

(4) The dissolution section in the by-laws conforms with the Letters Patent/Articles of Incorporation.

4. OPINIONS

In my opinion:

(1) The incorporation documentation and By-Laws of the Non-Profit Corporation do not contain occupancy requirements or other provisions regarding the housing accommodation which contravene the Human Rights Code and in particular, do not provide for the promotion or advancement of any group of persons in a manner that is inconsistent with the Code.

(2) There are no provisions in the By-Laws of the Non-Profit Corporation which conflict with, or are inconsistent with, the Letters Patent/Articles of Incorporation of the Non-Profit Corporation; and

(3) There are no terms or conditions contained in the Letters Patent/Articles of Incorporation or By-Laws of the Non-Profit Corporation which nullify, negate or derogate from the provisions as set out to in this Certificate.

_____ Date

_____ Solicitor's Signature

_____ Solicitor's Name, Address and Telephone Number

APPENDIX G

Initial Project Submission "560".

Source: Ministry of Housing.

Ministry of Housing | Ontario Housing Corporation

Initial Project Submission "560"

Targetted Non-Profit Prograr

Instructions: Parts 1-2 Complete only if this is the first application made under the Program or if the information has changed since the last project application
Parts 3-7 Must be completed on all applications.

Name of Corporation	Address of Corporation

Part 1 Incorporation

Incorporation Charter and By-laws	☐ Enclosed	☐ Previously Submitted
Board of Directors Listed by Name and Occupations	☐ Enclosed	☐ Previously Submitted

Part 2 Program Administration

	Enclosed	Previously Submitted		Enclosed	Previously Submitted
Draft Organizational Plan	☐	☐	Management Type Rationale	☐	☐

Part 3 Proposed Project Information

Project Name

Tenant Type	Project Type	Design Type
☐ Family ☐ Mixed	☐ New ☐ Acquisition & Rehab. ☐ Not Yet Determined	☐ Apartments ☐ Row House
☐ Seniors ☐ Other	☐ Acquisition ☐ Conversion from Non-Residential	☐ Stacked Townhouse ☐ Walk Up ☐ Othe

Construction Start Date	Construction Completion Date

Project Site(s): Has a potential site(s) been identified? ☐ Yes ☐ No
If "Yes", please give the following details, also if available a map indicating the site location in relation to existing amenities (e.g., shopping, medical, etc.)

	Site I	Site II
Property Location		
Service		
Zoning Status		
Ownership		
Size		
Asking Price	$	$

Part 4 Estimated Project Cost

Land	Building	Fees, Charges, Contingencies	Total	Average Maximum Unit Price	Cost Per Unit
$	$	$	$	$	$

Part 5

	Number of Core Need Units*	Number of Non-Core Units	Total
Project Targetting Plan			

* Includes both the required OHC 'neediest' units (neediest and shallow in co-ops) and any additional neediest and/or shallow units within core need limit.

Note: Project proposals will be given a priority ranking based on the number of additional core need units (neediest and/or shallow)to be provided in the project above the required minimum.

Part 6 Need Indicators

Indicate how the rent geared-to-income and market rent need for this project was determined. Please attach back up material if not previously submitted.

☐ Municipal Housing Statement ☐ Assisted Housing Survey ☐ Priority List/Group Analysis

Proof of Need		Core Need Units				Non-Core Units			
		Neediest		Shallow		Shallow		Market	
		No. of Units Proposed *	Demand: No. of households at or below neediest cut-off	No. of Units Proposed	Demand: No. of households btw. neediest and core cut-off	No. of Units Proposed	Demand: No. of households with incomes btw. core need cut-off and income level req'd to afford market rent within 25% of total household income	No. of Units Proposed	Demand: No. of households able to pay market rent within 25% of their income
Bachelor	Regular								
	Handicapped								
One Bedroom	Regular								
	Handicapped								
Two Bedroom	Regular								
	Handicapped								
Three Bedrooms	Regular								
	Handicapped								
Four Bedrooms	Regular								
	Handicapped								

* Includes the neediest units required by OHC, plus any additional units the housing agency plans to use for neediest households.

APPENDIX H

Project Application "1414".

Source: Ministry of Housing. Instructions for the Completion of Project Application "1414": for Municipal and Private Non-Profit Corporations. Toronto: 1988.

Ministry of Housing

Submission No.

Date Y M D

Estimated I.A.D.

Project Application "1414" Municipal and Private Non-Profit Corporations

Corporation

Name of Corporation	Financial Year End	Date of Incorporation
Address of Corporation		Corporation Type: ☐ Municipal Non-Profit ☐ Private Non-Profit
	Postal Code	

Names of Board of Directors	Position on Board	Occupation
	Chairperson	

Contact Person – Name	Position	MOH Number
Address of Contact Person	Postal Code	Telephone No.

Project

Project Name	Proposed No. of Units
Project Address	Project Municipality

Contacts

	Address	Contact	Telephone No.
Architectural Firm			
Lender			
Contractor			
Development Consultant Firm			
Mortgage Broker Firm			
Builder			
Law Firm			
Other – Specify			

Application Status

Attachments (a) or Previously Submitted (b)

	(a)	(b)	
☐ Project Plans	☐	☐	Management and Organization Plans
	☐	☐	Loan Search Strategy
	☐	☐	Market Rent Study
☐ Final	☐	☐	Tender Package / Bids
	☐	☐	Construction Contract / Schedule
	☐	☐	Signed Operating Agreement
	☐	☐	Mortgage Commitment Letter
	☐	☐	Undertaking to Insure (CMHC 530B)
☐ Pre I.A.D.	☐	☐	Market Rent Study Update
	☐	☐	First Year Budget

Drawings: Attachments (a) or Previously Submitted (b)

(a)	(b)	
☐	☐	Preliminary
☐	☐	Pre Tender
☐	☐	Post Tender
☐	☐	Final

Details

User Type

☐ Family ☐ Senior ☐ Handicapped ☐ Special (specify) ☐ Other (specify)

Project Type

☐ New ☐ Acquisition ☐ Acquisition and Rehab ☐ Conversion from Non-Residential ☐ Not yet determined

Design Type

☐ Elevatored Apartments ☐ Walkup Apartments ☐ Row House ☐ Stacked Row House ☐ Other (specify)

No. of Buildings	No. of Storeys

Property Management by

☐ Applicant ☐ Local Housing Authority ☐ Other (specify)

Procurement Technique

☐ Full Tender ☐ Modified Tender Call ☐ Turnkey ☐ Proposal Call ☐ Other (specify)

Unit Description

Unit Type	Regular & Mobility				Modified for Disabled				All Units
	# Units Regular	# Units Mobility	# Units Total	M.U.P.	# Units Wheelchair	# Units Sp. Design	# Units Total	M.U.P. + Handicapped Allowance	Average Net Floor Area (m²)
Bachelor									
One Bedroom									
Two Bedrooms									
Three Bedrooms									
Four Bedrooms									
Hostel – one bed / room									
Hostel – 2 beds / room									
Hostel – 3 + beds / room									
Total									
			Total M.U.P.				Total M.U.P.		

Total Project Maximum Unit Price

Gross Floor Area

	m²	%
Shelter		
Non-Shelter		
TOTAL		

Land Particulars

Is the intended use and design allowed in the Official Plan? ☐ Yes ☐ No

Is the Site, as of the date of this Application, zoned for the intended use and design of the Project? ☐ Yes ☐ No

Legal Description (Attach if necessary)

Tenure

☐ Freehold

☐ Leasehold

Land Area (m²)

Services Installed (Check if Yes)

☐ Sanitary Sewers ☐ Storm Sewers ☐ Combined Sewers ☐ Water ☐ Curbs ☐ Paved Roads ☐ Sidewalks ☐ Well ☐ Septic Tank

Capital Costs – SHELTER

		Applicant Estimate	MOH Estimate	Agreed Estimate
Land Acquisition and Servicing	1. Purchase Price			
	2. Legal Fees			
	3. Title Fees and Transfer Tax			
	4. Servicing to Site			
	5. Imposts and Levies			
	6. Surveys			
	7. Soils Tests			
	8. Interest on Land to Start of Construction			
	9. Other (specify)			
	10. Total Land Cost			
Fees and Charges	11. Taxes during Construction			
	12. Insurance during Construction			
	13. Architect's and / or Consultant's Fees (breakdown)			
	14. Legal Fees other than Land			
	15. Organization Expense			
	16. Mortgage Finder's / Broker's Fees			
	17. Interest During Construction (Provide calculation)			
	18. Building Permit Fees			
	19. Other (specify)			
	20. Total Fees and Charges			
Building	21. New Construction			
	22. Renovation / Conversion			
	23. Stoves and Fridges			
	24. Laundry Equipment			
	25. Furnishings & Equipment			
	26. Other (specify)			
	27. Total Building			
Landscaping and Site Improvements	28. Surface Parking			
	29. Landscaping			
	30. On site servicing			
	31. Other (specify)			
	32. Total Landscaping and Site Improvements			
	33. Net Occupancy Revenue / Loss			
	34. Contingency			
	35. Total Capital Costs Shelter			

Capital Costs – NON-SHELTER (if applicable)

		Applicant Estimate	MOH Estimate	Agreed Estimate
Land Acquisition and Servicing	1A. Purchase Price			
	2A. Legal Fees			
	3A. Title Fees and Transfer Tax			
	4A. Servicing to Site			
	5A. Imposts and Levies			
	6A. Surveys			
	7A. Soils Tests			
	8A. Interest on Land to Start of Construction			
	9A. Other (specify)			
	10A. Total Land Cost			
Fees and Charges	11A. Taxes during Construction			
	12A. Insurance during Construction			
	13A. Architect's and / or Consultant's Fees (breakdown)			
	14A. Legal Fees other than Land			
	15A. Organization Expense			
	16A. Mortgage Finder's / Broker's Fees			
	17A. Interest During Construction (Provide calculation)			
	18A. Building Permit Fees			
	19A. Other (specify)			
	20A. Total Fees and Charges			
Building	21A. New Construction			
	22A. Renovation / Conversion			
	23A. Stoves and Fridges			
	24A. Laundry Equipment			
	25A. Furnishings & Equipment			
	26A. Other (specify)			
	27A. Total Building			
Landscaping and Site Improvements	28A. Surface Parking			
	29A. Landscaping			
	30A. On site servicing			
	31A. Other (specify)			
	32A. Total Landscaping and Site Improvements			
	33A. Net Occupancy Revenue / Loss			
	34A. Contingency			
	35A. Total Capital Costs Non-Shelter			

		Applicant Estimate	MOH Estimate	Agreed Estimate
Shelter Loan Amount	36. Capital Costs Shelter			
	37. LESS Land Equity			
	38. LESS Cash Equity			
	39. LESS Grants (specify)			
	40. LESS Other (specify)			
	*41. Shelter Loan Amount			
Non-Shelter Loan Amount	42. Capital Costs Non-Shelter			
	43. LESS Land Equity			
	44. LESS Cash Equity			
	45. LESS Grants (specify)			
	46. LESS Other (specify)			
	47. Non-Shelter Loan Amount			
	48. Sector Support Loan Amount			
Total Loan Amount	49. Total Capital Costs			
	50a. LESS Equity			
	50b. LESS Grants/Other			
	51. Total Loan Amount			
	52. Loan Term			
	53. Amortization Period			
	54. Interest Rate			

*Compare with Total Project M.U.P. from Page 2

		Applicant Estimate	MOH Estimate	Agreed Estimate
Labour & Related Expenses (Maintenance)	55. Salaries			
	56. Temporary Help			
	57. Employee Benefits			
	58. Other (specify)			
	59. Total Labour & Related Expenses			
Materials & Services (Maintenance)	60. Roofing			
	61. Building General			
	62. Energy Conservation			
	63. Elevators			
	64. Electrical Systems			
	65. Equipment			
	66. Grounds			
	67. Heating and Plumbing			
	68. Painting			
	69. Waste Removal			
	70. Security			
	71. Social and Recreation			
	72. Other (specify)			
	73. Total Materials and Services			
Utilities	74. Electricity			
	75. Fuel			
	76. Water			
	77. Other (specify)			
	78. Total Utilities			
Other Expenses	79. Municipal Taxes			
	80. Insurance			
	81. Allowance for vacancies & bad debts			
	82. Other (specify)			
	83. Total Other Expenses			
Administrative Overhead	84. Salaries			
	85. Temporary Help			
	86. Employee Benefits			
	87. Transportation & Communication			
	88. Materials & Services			
	89. Supplies			
	90. Management Fees			
	91. Audit			
	92. Other (specify)			
	93. Total Administrative Overhead			
	94. Contingency			
	95. Replacement Reserve			
	96. Total Operating Costs			
	97. Initial Occupancy Loss			
	98. Amortization			
	99. Total Costs Shelter			

Operating Costs – NON-SHELTER (if applicable)

		Applicant Estimate	MOH Estimate	Agreed Estimate
Labour & Related Expenses (Maintenance)	55A. Salaries			
	56A. Temporary Help			
	57A. Employee Benefits			
	58A. Other (specify)			
	59A. Total Labour & Related Expenses			
Materials & Services (Maintenance)	60A. Roofing			
	61A. Building General			
	62A. Energy Conservation			
	63A. Elevators			
	64A. Electrical Systems			
	65A. Equipment			
	66A. Grounds			
	67A. Heating and Plumbing			
	68A. Painting			
	69A. Waste Removal			
	70A. Security			
	71A. Social and Recreation			
	72A. Other (specify)			
	73A. Total Materials and Services			
Utilities	74A. Electricity			
	75A. Fuel			
	76A. Water			
	77A. Other (specify)			
	78A. Total Utilities			
Other Expenses	79A. Municipal Taxes			
	80A. Insurance			
	81A. Allowance for vacancies & bad debts			
	82A. Other (specify)			
	83A. Total Other Expenses			
Administrative Overhead	84A. Salaries			
	85A. Temporary Help			
	86A. Employee Benefits			
	87A. Transportation & Communication			
	88A. Materials & Services			
	89A. Supplies			
	90A. Management Fees			
	91A. Audit			
	92A. Other (specify)			
	93A. Total Administrative Overhead			
	94A. Contingency			
	95A. Replacement Reserve			
	96A. Total Operating Costs			
	97A. Initial Occupancy Loss			
	98A. Amortization			
	99A. Total Costs Non-Shelter			

Summary – Non-Shelter

		Applicant Estimate	MOH Estimate	Agreed Estimate
	100. Total Costs Non-Shelter			
Revenue	101. Commercial Space Rentals			
	102. Other Non-Shelter Revenue (specify)			
	103. Total Revenue Non-Shelter			
	104. Non-Shelter Surplus / Deficit			
	105. Non-Shelter Surplus Retained			
	106. Surplus Revenue Non-Shelter			
Non-Rental Revenue	107. Laundry Revenue			
	108. Parking Revenue			
	109. Surplus Revenue from Non-Shelter Component			
	110. Other Non-Rental Revenue (specify)			
	111. Total Non-Rental Revenue			

Services Included / Excluded in Rental Rates

Please check if the following are included:

Heating _____ (circle gas or electric) Domestic Hot Water _____ (circle gas or electric) Stove _____ (circle gas or electric)

Refrigerator _____ Hydro _____ Washer / Dryer in unit only _____ Water _____ TV _____ (circle cable or master)

Parking _____ (circle indoor or outdoor) Other _____

Targetting Plan	Core Need		Non Core Need		
	Neediest	Shallow	Shallow	Market	Total
Unit Composition	No. of Units Proposed	No. of Units Proposed	No. of Units Proposed	No. of Units Proposed	No. of Units Proposed
Bachelor					
One Bedroom					
Two Bedrooms					
Three Bedrooms					
Four Bedrooms					
Hostel Beds					
Total					

112. Total Units

						Applicant Estimate	MOH Estimate	Agreed Estimate
		No. of Units		Rent / mo.	x 12			
Neediest Core RGI Bachelor / Bed	113.		114.		115.			
1 Bedroom	116.		117.		118.			
2 Bedrooms	119.		120.		121.			
3 Bedrooms	122.		123.		124.			
4 Bedrooms	125.		126.		127.			
Total	128.				129.			
Shallow Core RGI Bachelor / Bed	130.		131.		132.			
1 Bedroom	133.		134.		135.			
2 Bedrooms	136.		137.		138.			
3 Bedrooms	139.		140.		141.			
4 Bedrooms	142.		143.		144.			
Total	145.				146.			
Non-Core Need RGI Bachelor / Bed	147.		148.		149.			
1 Bedroom	150.		151.		152.			
2 Bedrooms	153.		154.		155.			
3 Bedrooms	156.		157.		158.			
4 Bedrooms	159.		160.		161.			
Total	162.				163.			

		Applicant Estimate	MOH Estimate	Agreed Estimate
Adjusted Costs	164. Amortization			
	165. Initial Occupancy Loss			
	166. Inflation Factor			
	167. Adjusted Operating Costs			
	168. Total Adjusted Costs			
Adjusted Revenue	169. Rent Review Guideline			
	170. Adjusted Rental Revenue			
	171. Non-Rental Revenue			
	172. Total Adjusted Revenue			
	173. Bridge Subsidy (if applicable)			
	174. Bridge Subsidy Repayment Owing to MOH (if applicable)			
	175. Total Reduced Rents Required			
Bridge Assistance - Market Units	176. Units			
	177. Share of Project			
	178. Bridge Subsidy Payable by MOH (if applicable)			
	179. Bridge Subsidy Repayment Owing to MOH (if applicable)			
Federal & Provincial RGI Subsidies				
Core Need RGI Subsidy	180. Units			
	181. Share of Project			
	182. Share of Total Costs Shelter			
	183. LESS Share of Non-Rental Revenue			
	184. LESS Core Need RGI Rental Revenue			
	185. Core Need RGI Subsidy Required			
	186. FEDERAL SUBSIDY			
	187. Provincial Core Need RGI Subsidy			
Non-Core Need RGI Subsidy	188. Units			
	189. Share of Project			
	190. Share of Total Costs Shelter			
	191. LESS Share of Non-Rental Revenue			
	192. LESS Non-Core Need RGI Rental Revenue			
	193. Provincial Non-Core Need RGI Subsidy			
	194. Federal M.I.&R. Subsidy			
	195. Provincial M.I.&R. Subsidy			
Assistance Summary				
	196. FEDERAL SUBSIDY			
Provincial Subsidy	197. Core Need RGI Subsidy			
	198. Non-Core Need RGI Subsidy			
	199. Bridge Subsidy Payable			
	200. LESS Bridge Subsidy Repayment Owing			
	201. Reconciliation Amount			
	202. TOTAL PROVINCIAL SUBSIDY			
	203. Total Assistance			

Project Rents

		Applicant Estimate	MOH Estimate	Agreed Estimate
Total Project Rents	204. Total Reduced Rents			
	205. PLUS Rent Stabilization Contributions			
	206. LESS Rent Stabilization Withdrawals			
	207. Total Project Rents			
Rents Market Units	208. Units			
	209. Share			
	210. Share Reduced Rent for Market Units			
	211. PLUS Share Rent Stabilization Contributions			
	212. LESS Share Rent Stabilization Withdrawals			
	213. Market Share Project Rents			
	214. Market Project Rents			
	215. Reconciliation Amount			
Rent Stabilization Fund	216. Opening Balance			
	217. Contributions			
	218. LESS Withdrawals			
	219. Interest			
	220. New Balance			

All Units

A Unit Type	B No. of Units	D Reduced Rent Per Unit Per Month	E Annual Reduced Rent (B x D x No. of Months
Totals			Per Line 175

I have understood that:

1. The project must be started within 6 months of the date of the undertaking-to-insure.
2. The Non-Profit Housing Agreement governs the non-profit corporation's responsibilities in the operation of the project. A fully executed Agreement will indicate final approval of the project.
3. The project must adhere to the construction standards and planning criteria in effect on the date of the Non-Profit Housing Agreement.
4. The Ministry of Housing Inspectors solely ensure construction is in reasonable conformity with prescribed construction standards. Ministry of Housing does not supervise on the Applicant's behalf.
5. As an applicant, I am responsible for my own contract with the builder. Disputes will not be arbitrated by the Ministry of Housing.
6. This application will not be approved if building, other than excavation is started prior to the date of the Housing Agreement and/or approval of the Undertaking-to-Insure.

I declare that the information disclosed above is complete and accurate to the best of our knowledge.

Signature of Applicant	Date
	Position
I declare that this information has been reviewed and approved by the Board of Directors. (to be completed for preliminary approval and mortgage approval)	
Signature of Corporation President/Head of Council	Date

Please affix Corporate Seal ▶

For M.O.H. Use Only

Certification by Appraiser, Ministry of Housing

It is hereby certified that the Lending Value, for Mortgage Insurance purposes, under the National Housing Act, for the previously described property is

$ _____ as identified in this submission dated _____ 19_____.

The Total Maximum Unit Price is calculated as $ _____.

Date	Signed on behalf of the Appraiser	M.O.H. Program Co-ordinator

APPENDIX I

Standard Budget Package

Source: Ministry of Community and Social Services. Instructions to Complete the Budget Forms. Toronto: 1987/1988.

Ministry of Community and Social Services
Ontario

Accommodation

REVENUE/SUBSIDY/UNITS OF SERVICE WORKSHEET
19 /

Name of Corporation	
Program	Ref. No.

B. TOTAL REVENUE	Current Year		Coming Year			
	19 / Projected/ Actual $	19 / Approved Budget $	19 / Base Request $	19 / Expansion/ Enrichment Request $	19 / Total Request $	Ministry Use Only $
I. Residents:						
(a) Whose full cost of residential accommodation is the responsibility of:						
(i) A Children's Aid Society under The Child Welfare Act, or						
(ii) Another Public Agency						
(b) Whose full cost of residential accommodation is payable by parent(s), others or themselves.						
Subtotal						
II. Residents for the purpose of provincial subsidy,						
(a) Who are in receipt of an allowance under The Family Benefits Act.						
(b) Others						
Subtotal						
Total						

C. PROVINCIAL SUBSIDY						
(a) Total Expenditure (Budget Summary, Total Item A)						
(b) Total Revenue (Budget Summary, Item B)						
(c) Net Expenditures (a – b)						
(d) 80% of (a)						
Subsidy (lesser of c or d)						

D. UNITS OF SERVICE						
(a) Rated Bed Capacity						
(b) No. of Days in Period						
(c) Maximum Days of Care (axb)						
(d) Occupancy Rate %						
Total Units of Service						

Ministry of Community and Social Services
Ontario

REPAIRS AND REPLACEMENTS WORKSHEET
19 /

MANDATORY

Name of Corporation	
Program	Ref. No.

Repairs and Maintenance	Number of Items	Estimate Cost Per Item	Total Amount
5400 Total Repairs and Maintenance			$

Replacements - Furnishing and Equipment	Number of Items	Estimate Cost Per Item	Total Amount
5500 Total Replacements - Furnishing and Equipment			$

1693

Ministry of Community and Social Services
Ontario

SALARY SCHEDULE

19 /

MANDATORY

Name of Corporation

Program

Ref. No.

Note: If more space is needed, attach an additional schedule(s) * Use separate for each category

A. EXPENDITURES	No. Of Hrs./ Wk.	Current Year 19 / Approved Annualized Base $	19 / Projected/ Actual $	Coming Year * 19 / Base request ☐ or * 19 / Enrichment Expansion Request ☐ * Allocated Admin. Costs ☐ Total $	Program $	Occupancy $	Dietary $	Trans-portation $	General and Adm. $
NAME/JOB CLASSIFICATION									

Ministry of Community and Social Services
Ontario

CENTRAL ALLOCATED ADMINISTRATION COSTS SCHEDULE

19 /

MANDATORY

Name of Corporation	
Program: ALL PROGRAMS	Ref. No

A. EXPENDITURES	Current Year		Coming Year			Ministry Use Only $
	19 / Projected/Actual $	19 / Approved Budget $	19 / Base Request $	19 / Expansion/ Enrichment Request $	19 / Total Request $	
4100 Salaries						
4200 Benefits						
4300 Staff Travel						
4400 Staff Training						
Sub - Total						
4700 Purchased Services						
4800 Supplies						
4900 Food Costs						
5000 Premises Rent						
5100 Other Rentals						
5200 Utilities and Taxes						
5300 Insurance						
5400 Repairs and Maintenance						
5500 Replacements						
5600 New Furnishings and Equipment (under $1,000)						
5700 Vehicle Operation & Maint.						
5800 Advertising & Promotion						
6000 Other (Specify)						
6100						
6200						
6900 Expenditure Recoveries (specify)	( )	( )	( )	( )	( )	( )
	( )	( )	( )	( )	( )	( )
	( )	( )	( )	( )	( )	( )
	( )	( )	( )	( )	( )	( )
TOTAL ADMINISTRATION COST						

Show Distribution by programs on the Distribution Sheet and explain here how Central Administration costs have been allocated to programs.

Ministry of Community and Social Services
Ontario

CENTRAL ALLOCATED ADMINISTRATION COSTS DISTRIBUTION
(Work Sheet) 19 /

MANDATORY

Name of Corporation	
Program: ALL PROGRAMS	Ref. No.

Note: If more space is needed attach a separate schedule

Coming Year

SUBSIDIZEABLE PROGRAMS	Projected Program Expenditure		Central Administration Cost Distribution		Ministry Use Only
	Base	Expansion	Base	Expansion	
Homes for Retarded Persons					
Workshops					
Support Programs (Adult)					
Approved Children's Homes					
Day Nurseries					
Support Programs (Childrens)					
Other ComSoc Subsidizeable					
Total Subsidizeable					
NON-SUBSIDIZEABLE PROGRAMS					
Total Non-Subsidizeable					
ASSOCIATION SHARE					
TOTAL - All costs					

1748 (11/80) Formerly 95-50-114

Ministry of Community and Social Services
Ontario

CENTRAL ALLOCATED ADMINISTRATION COSTS DISTRIBUTION
(Summary Sheet)

19 /

MANDATORY

Name of Corporation

Program: ALL PROGRAMS

Ref No.

Note: If more space is needed attach a separate schedule

A. EXPENDITURES 6800 Allocated Administration Costs	Current Year		Coming Year			
	19 / Projected/ Actual $	19 / Approved Budget $	19 / Base Request $	19 / Expansion/ Enrichment Request $	19 / Total Request $	Ministry Use Only $
SUBSIDIZEABLE PROGRAMS						
Homes for Retarded Persons						
Workshops						
Support Programs (Adult)						
Approved Children's Homes						
Day Nurseries						
Support Programs (Children)						
Other ComSoc Subsidizeable						
Total Subsidizeable						
NON-SUBSIDIZEABLE PROGRAMS						
NON-SHAREABLE COSTS						
TOTAL - All Costs						

Ministry of Community and Social Services
Ontario

EXPENDITURE WORKSHEET

19 /

MANDATORY

Name of Corporation	
Program	Ref. No.

*Use separate form for each category

A. EXPENDITURES	Current Year 19 / Approved Annualized Base $	Coming Year *19 / Base Request ☐ or *19 / Enrichment Expansion Request ☐ Total $	Program $	Occupancy $	Dietary $	Transportation $	General & Admin. $
4100 Salaries							
4200 Benefits							
4300 Staff Travel							
4400 Staff Training							
4500 Disabled Persons Wages							
4600 Disabled Persons Ben.							
4700 Purchased Services							
4800 Supplies							
4900 Food Costs							
5000 Premises Rent							
5100 Other Rentals							
5200 Utilities and Taxes							
5300 Insurance							
5400 Repairs and Maint.							
5500 Replacements							
5600 New Furnishings and Equip (under $1,000)							
5700 Vehicle Operation and Maintenance							
5800 Advertising and Promotion							
5900 Personal Needs							
6000 Other (Specify)							
6100							
6700 Allocated Admin. - Staff related							
6800 Allocated Admin. Costs - Other							
6900 Expenditure Recov. (specify)	( )	( )	( )	( )	( )	( )	( )
GRAND TOTAL							

1593 (06/86)

Ministry of Community and Social Services
Ontario

BUDGET SUMMARY

19 /

MANDATORY

Name of Corporation	
Program	Ref. No.

A. EXPENDITURES	Current Year			Coming Year			Ministry Use Only $
	19 / Projected/ Actual $	19 / Fiscal Approved Budget $	19 / Annualized Approved Budget $	19 / Base Budget $	19 / Expansion/ Enrichment Request $	19 / Total Request $	
4100 Salaries							
4200 Benefits							
4300 Staff Travel							
4400 Staff Training							
4500 Disabled Persons Wages							
4600 Disabled Persons Benefits							
4700 Purchased Service							
4800 Supplies							
4900 Food Costs							
5000 Premises Rent							
5100 Other Rentals							
5200 Utilities and Taxes							
5300 Insurance							
5400 Repairs and Maintenance							
5500 Replacements							
5600 New Furnishings and Equip. (under $300)							
5700 Vehicle Operation & Maint.							
5800 Advertising & Promotion							
5900 Personal Needs							
6000 Other (Specify)							
6100							
6700 Allocated Admin Cost - Staff related							
6800 Allocated Admin Cost - Other							
6900 Expenditure Recoveries (specify)							
GRAND TOTAL							
B. TOTAL REVENUE							
C. PROVINCIAL SUBSIDY							
D. UNITS OF SERVICE							
E. UNIT COST							

This Budget submission was prepared by: _____

Telephone No. _____ at _____

Approved on behalf of The Approved Corporation by: _____

_____

On _____ 19 ___

_____

MINISTRY USE ONLY

	Date	Signature
Received		
Reviewed		
Manager's Approval		
Date Mailed		

1592 (10/80) Formerly 95-50-101

Ministry of
Community and
Social Services
Ontario

PURCHASE OF SERVICE
19 /

AS REQUIRED BY AREA OFFICE

Name of Corporation	
Program	Ref. No.

Please attach documentation where possible.

List of Services		Total Amount
Type of Service	Supplier of Service	
5500 TOTAL ESTIMATED EXPENDITURES		$

1749

Ministry of Community and Social Services
Ontario

Personal Needs of Residents Worksheet
19 /
(Complete as required by Area Office)

Name of Corporation

Program | Ref. No.

5900 Personal Needs	19 / Projected/Actual $	19 / Fiscal Approved Budget $	19 / Base Budget $	19 / Expansion/ Enrichment Request $	19 / Total Request $	Ministry Use Only $
5901 Medical Doctors' Fees						
5902 Dental Fees						
5903 Optical Fees and Supplies						
5904 Drugs, Medications						
5905 Clothing and Footwear						
5906 Education Fees						
5907 Spending Money						
5908 Other (Specify)						
GRAND TOTAL 5900						

APPENDIX J

Design Illustrations

ILLUSTRATION #1

A 1200 × 1200 mm area would allow access for both forward and side approach.

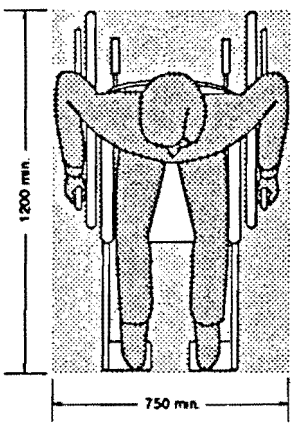
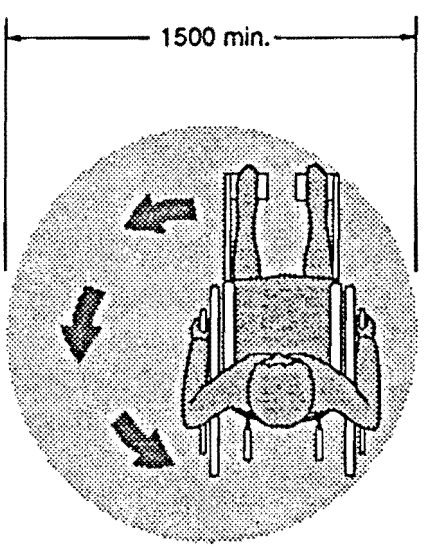


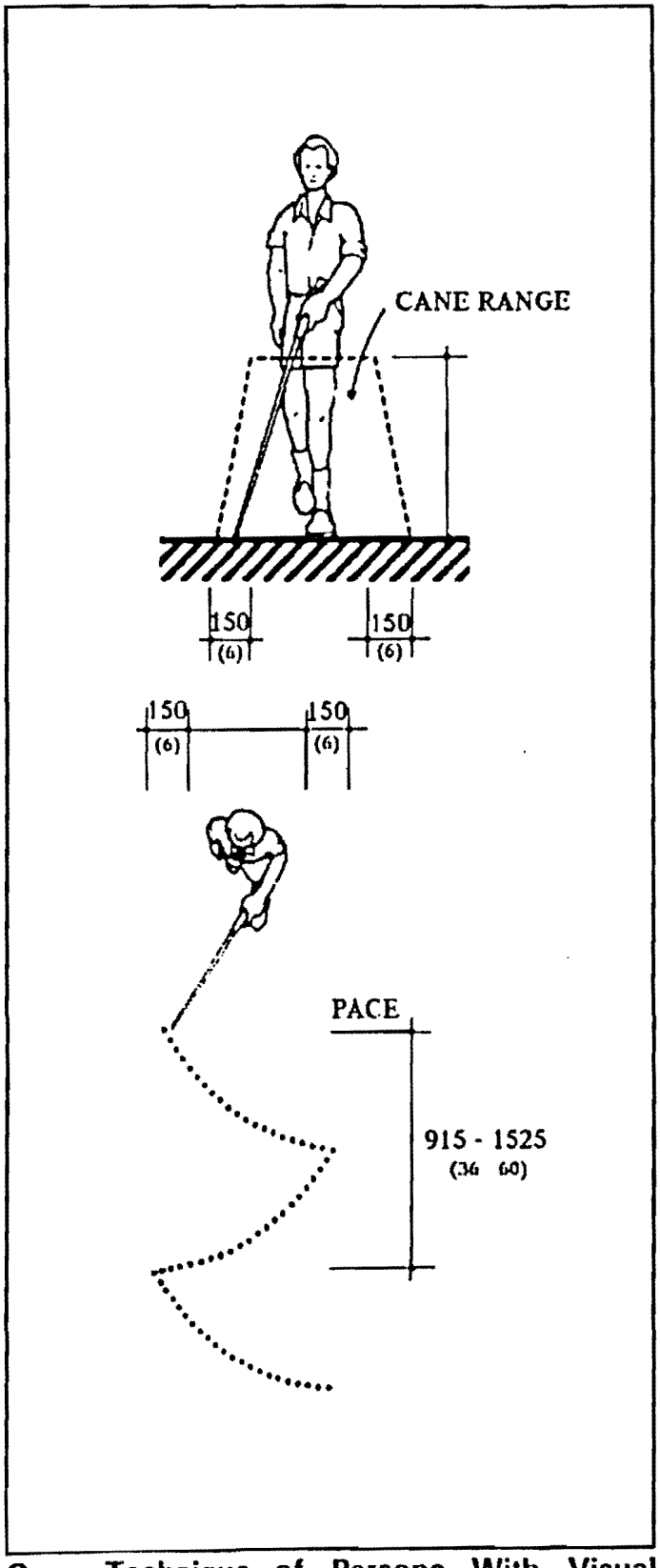
Figure 1
Minimum Clear Floor Area



Minimum Clear Turning Space at Toe Level for a Wheelchair to Pivot 180°

Source: Canadian Standards Association. Barrier-Free Design. Toronto: 1990, p.11

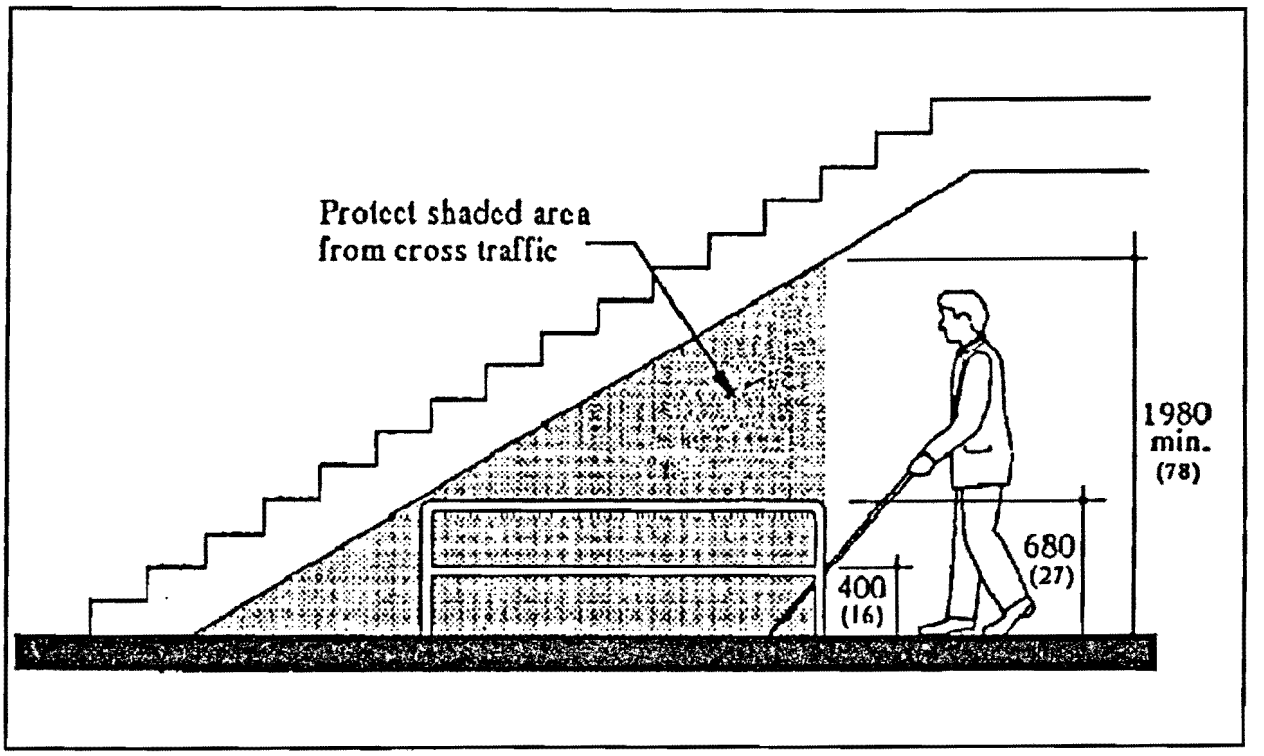
ILLUSTRATION #2-a



Cane Technique of Persons With Visual Impairments

Source: City of Toronto Property Department. Accessibility Design Guidelines: for the City of Toronto. Toronto: Prepared by Proctor and Redfern Ltd., 1992, Appendix C; illustration 3a

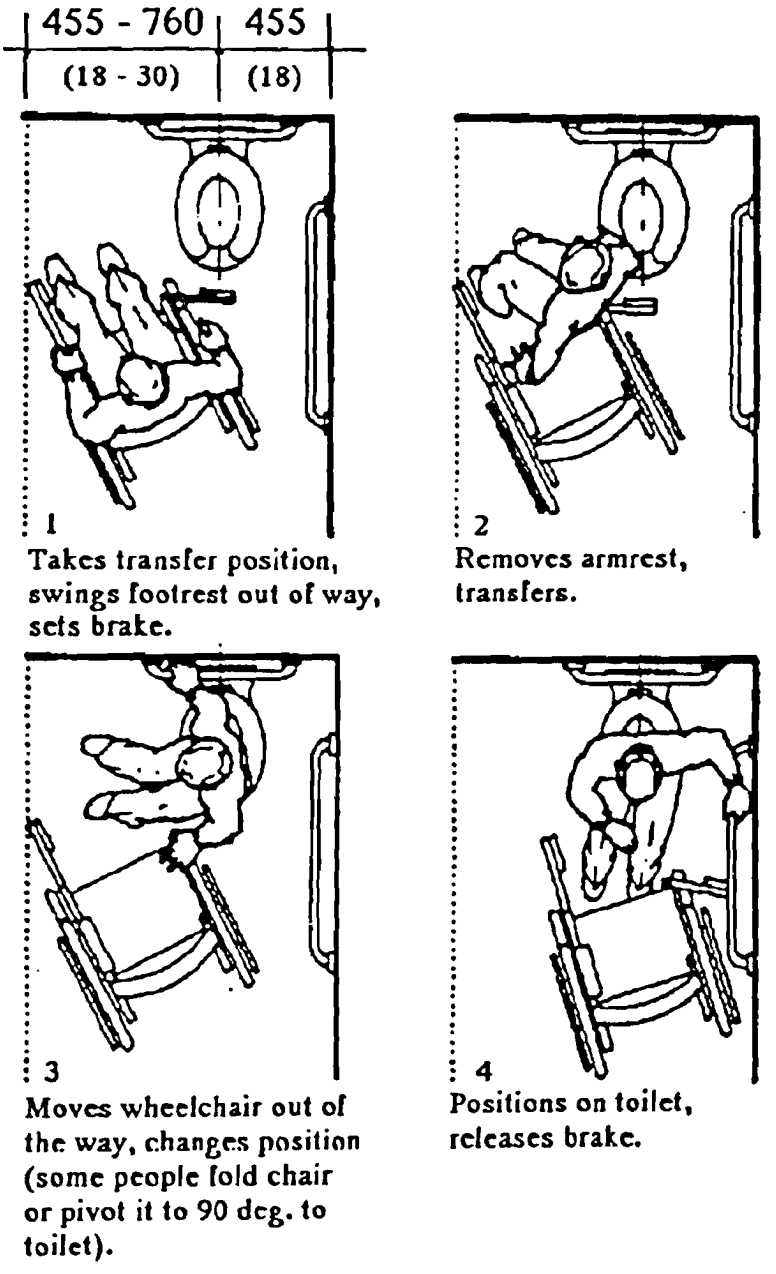
ILLUSTRATION #2-b



Cane Detectable Barricades

Source: City of Toronto Property Department. Accessibility Design Guidelines: for the City of Toronto. Toronto: Prepared by Proctor and Redfern Ltd., 1992, Appendix C; illustration 3b

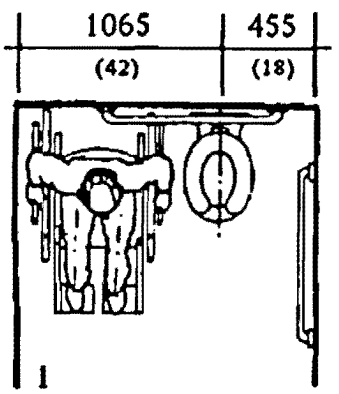
ILLUSTRATION #3-a



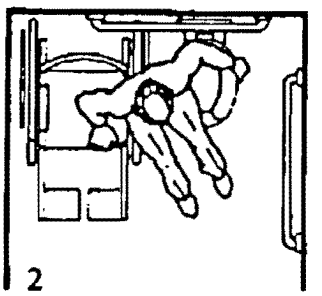
Diagonal Approach for Wheelchair Transfer

Source: City of Toronto Property Department. Accessibility Design Guidelines: for the City of Toronto. Toronto: Prepared by Proctor and Redfern Ltd., 1992, Appendix C; illustration 10a

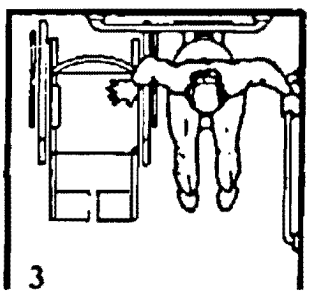
ILLUSTRATION #3-b



Takes transfer position, removes armrests, sets brake.



Transfers.



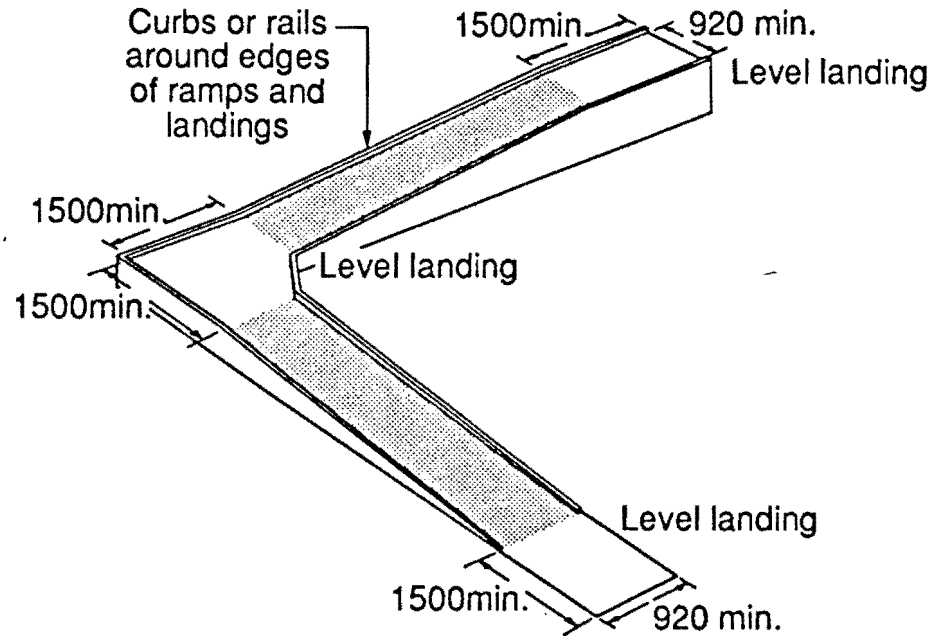
Positions on toilet.

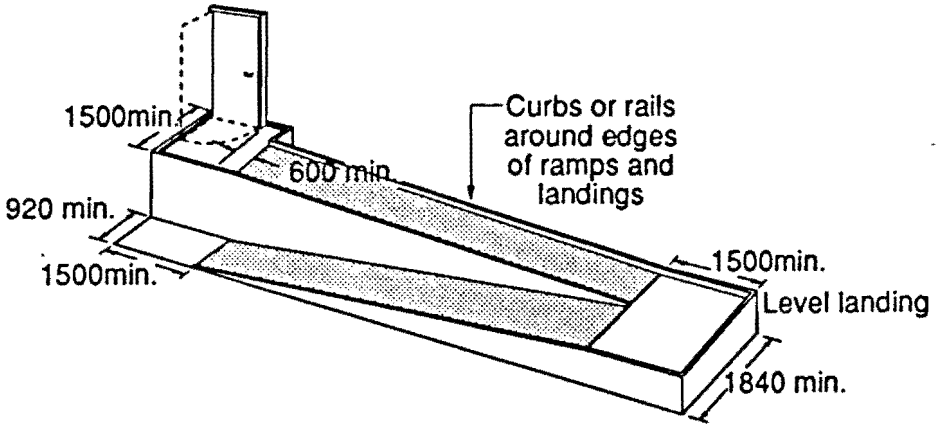
Side Approach for Wheelchair Transfer

Source: City of Toronto Property Department. Accessibility Design Guidelines: for the City of Toronto. Toronto: Prepared by Proctor and Redfern Ltd., 1992, Appendix C; illustration 10b

ILLUSTRATION #4

Consideration should be given to protecting ramps from rain, snow, and ice.



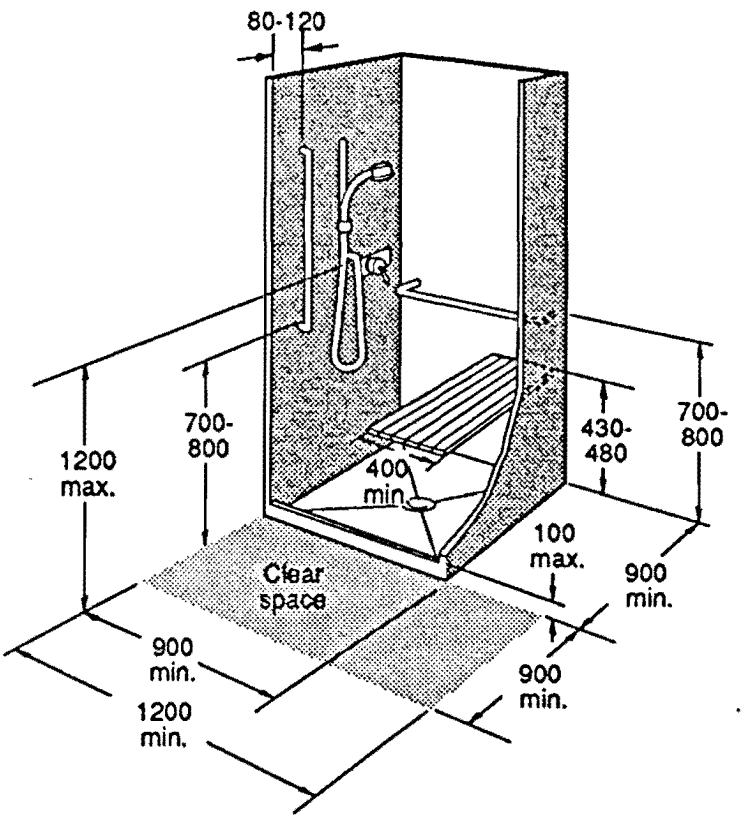


Ramps and Landings

Source: Canadian Standards Association. Barrier-Free Design. Toronto: 1990, p.30

ILLUSTRATION #5

Curb colour should contrast with the flooring colour to reduce dangerous tripping.

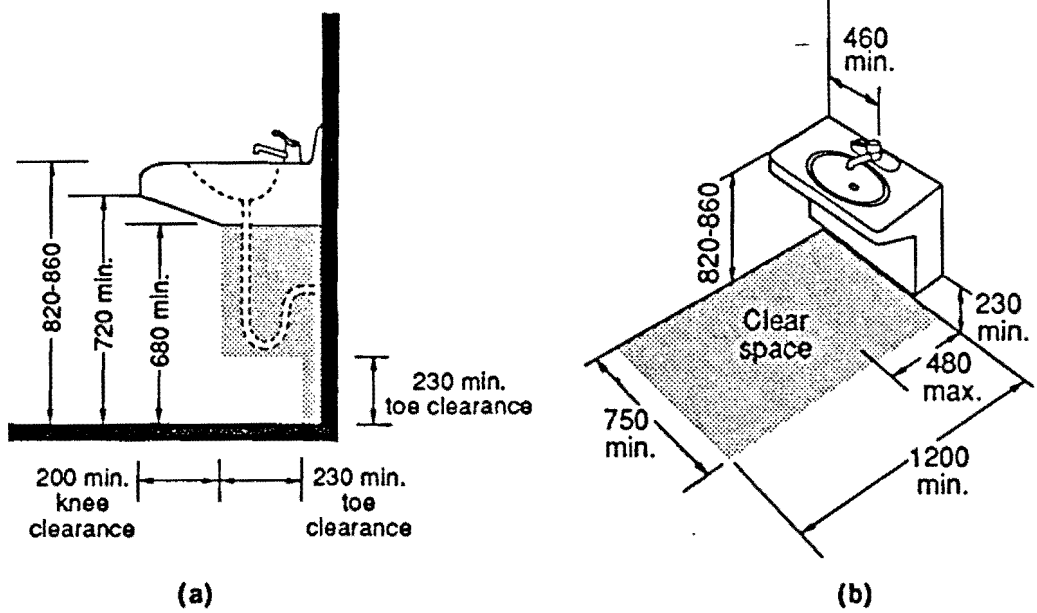


Shower Stall with Seat

Source: Canadian Standards Association. Barrier-Free Design. Toronto: 1990, p.95

ILLUSTRATION #6

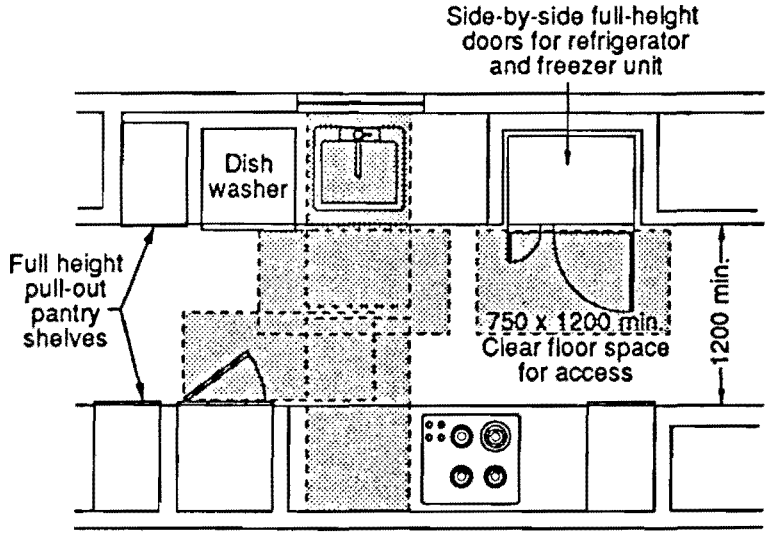
It is desirable to have a seat 400 mm deep across the width of the bathtub located at the end of the bathtub to allow easier access.



Lavatory Clearances

Source: Canadian Standards Association. Barrier-Free Design. Toronto: 1990, p.91

ILLUSTRATION #7

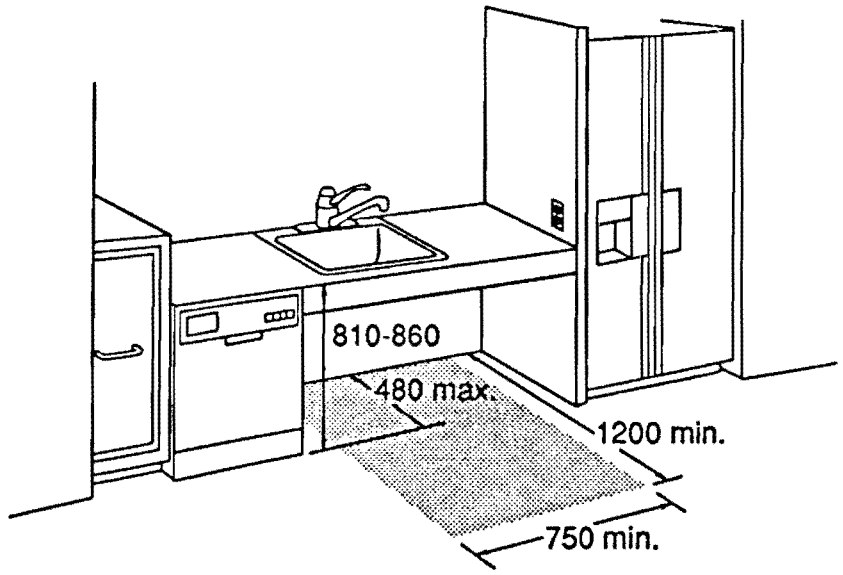


Parallel Kitchen

Source: Canadian Standards Association. Barrier-Free Design. Toronto: 1990, p.97

ILLUSTRATION #8

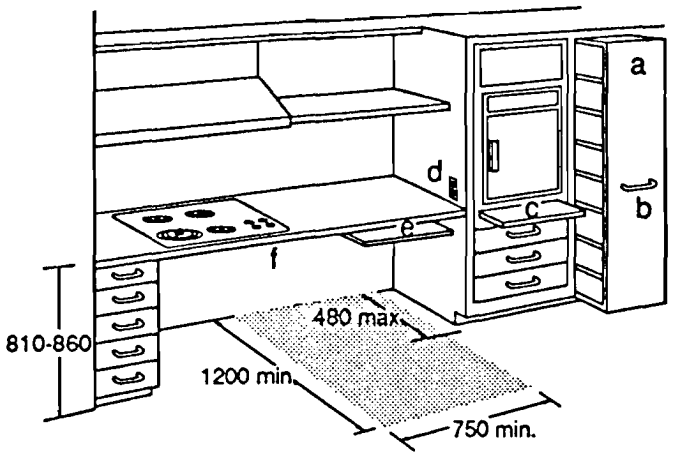
A pull-out work board below the standard countertop level is desirable (Figure 77).



Work Surface and Sink

Source: Canadian Standards Association. Barrier-Free Design. Toronto: 1990, p.98

ILLUSTRATION #9



a Full height pull-out pantry shelves

b D-type pulls on cupboards and drawers

c Pull-out shelf under wall oven

d Electric outlets accessible from seated position

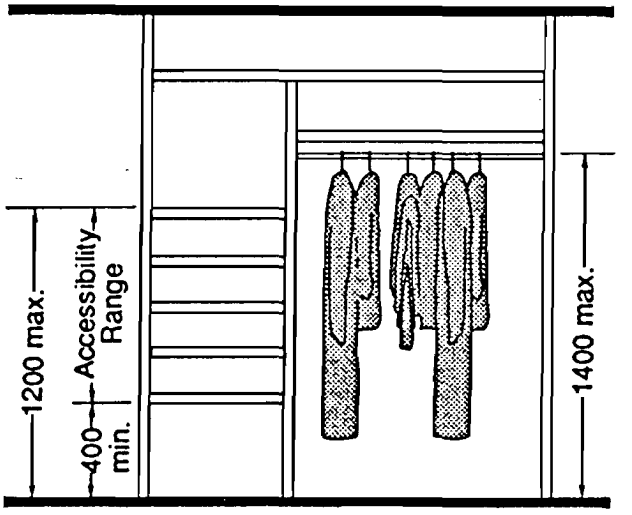
e Pull-out work boards for easy access and use

f Knee space under counter-top cooking unit

Cooking Unit, Oven, and Pantry Storage

Source: Canadian Standards Association. Barrier-Free Design. Toronto: 1990, p.99

ILLUSTRATION #10



Clothes Storage

Source: Canadian Standards Association. Barrier-Free Design. Toronto: 1990, p.101

APPENDIX K

Metropolitan Toronto Draft Official Plan; Policies.

Source: Municipality of Metropolitan Toronto. The Liveable Metropolis: Draft Official Plan. Toronto: 1992, p.49 - p.50

APPENDIX K:

THE MUNICIPALITY OF METROPOLITAN TORONTO, DRAFT OFFICIAL PLAN: POLICIES.

1. That lands owned by Metropolitan Toronto that became surplus to the needs of the operating departments and are suitable for housing be transferred first to MTHCL, to be used directly for housing or to be allocated to other non-profit housing providers.

2. To continue to acquire, construct, operate, and manage assisted housing developments as a means of ensuring access to housing for low-and moderate-income households.

3. To establish and adopt targets as part of the Metropolitan Toronto Housing Needs Profile for the production of assisted housing for Metropolitan Toronto. The target should reflect the capabilities of the Corporation and other agencies to provide assisted housing, and should consider projected need, the availability of suitable sites, and the availability of financing.

4. To allocate, in consultation with the area municipalities, an assisted housing production target to each area municipality on the basis of the principle of fair share. This principle means that each area municipality should eventually have the same ratio of low-income assisted households to its total households.

5. To encourage and support assisted housing projects that mix income groups at varying levels of physical and social need.

6. To actively seek and support innovative financing mechanisms that provide affordable housing, as well as housing for special needs.

7. To encourage area municipalities to provide opportunities for transitional and emergency accommodation.

Source: Municipality of Metropolitan Toronto. The Liveable Metropolis: Draft Official Plan. Toronto: 1992, p.49 - p50.

8. To establish community and institutional partnerships to meet the social needs of people with special needs, with the goal of assisting them to achieve the highest possible degree of self-sufficiency.

9. To support demonstration projects and innovative housing developments that provide opportunities for seniors and others with special needs to live independently in their community.

10. To ensure that area municipalities recognize group homes as a permitted use in all residential areas. The area municipalities may include zoning by-law provisions specifying:

a) the distance by which one group home may be separated from another;

b) the type of dwelling unit in which a group home is permitted;

c) that correctional group homes be restricted to certain locations along arterial roads.

Source: Municipality of Metropolitan Toronto. The Liveable Metropolis: Draft Official Plan. Toronto: 1992, p.49 - p50.

APPENDIX L

Management Plan (City of Toronto Fire Department).

Source: City of Toronto Fire Department.

Checklist for Summary Management Plans for Submission with Buildings and Fire Department Applications

The following checklist outlines the information which would be useful to the Buildings and Inspections Department when applying for a building permit and the Fire Department when submitting a Life Safety Study. It is an optional addition to the normal applications and does not replace the Fire Safety Plan which will still be required by the Fire Department.

1. Introduction
   - Name of the group
   - Contact person
   - Goals and objectives of the group
   - Characteristics of proposed housing model including food purchasing, preparation and eating
   - Use of facility (rooming house, single family dwelling etc.)

2. Role and Responsibility
   - Accountability - Board/Staff
     - People's responsibilities

3. Personnel
   - Support staff available - on-site/off-site

4. Leasing and Occupancy
   - Resident participation/expectation in house
   - Range of number of residents (maximum)
   - Intended tenancy (sole/primary residence, indefinite stay etc.)

5. Financial and Accounting
   - Funding sources, legislative acts, regulations
   - Rent collection (weekly, monthly, etc.)

6. Maintenance
   - How repair work is done - contact person
   - How work is performed if tenant is not home
   - How emergency corrective work is done
   - Records of maintenance, especially fire safety

SAMPLE MANAGEMENT PLAN

The following is a sample detailed management plan with some basic content. This information should be condensed to a one or two page Executive Summary for submission to the Buildings and Inspections and Fire Departments.

1. Introduction

Name of Organization - Organization X
Contact Name - Jane Doe - Operations Manager

Goals

Social Housing is developed by Organization X in accordance with the following goals:

1. To increase the volume of affordable and secure housing for the homeless and the severely underhoused.
2. To acquire and rehabilitate houses and buildings and undertake new construction for the purpose of providing affordable social housing to disadvantaged individuals and families.
3. To save housing for low income persons which would otherwise be lost to them through upgrading, conversion etc.
4. To highlight building designs and establish community structures that support and accelerate individual and group growth and autonomy.

Objectives

1. To provide basic affordable housing to homeless and underhoused singles and families in suitable locations.
2. To provide appropriate services to help individuals and groups achieve their goals.
3. To develop within each house a community able to manage itself as a household.
4. To help integrate each house into the neighbourhood and larger community.

Principles

The process referred to as facilitation, is carried out by the nurturing and enabling of individuals and groups to:

- creatively and effectively assume full control of their lives;
- test current skills and learn new ones;
- take their own place in life; and
- determine their own future and prepare to move toward it.

Housing Model

Physical Style

Organization X's shared "family" houses are located in several different neighbourhoods, primarily in the east end of the City of Toronto. In most cases, each house has five bedrooms equipped with conveniences and furniture. Bedrooms are private space. Kitchen, living room, bathrooms and front and back yards are common spaces. Houses are chosen on the basis of proximity to T.T.C. routes and accessibility to such services as shopping, social services and health facilities.

Social Environment

Each of the Organization's houses accommodates from four to six persons. Residents are selected according to Ministry of Housing guidelines and Organization criteria. The housing model is based on the belief that residents are able and want to take part in the life and management of their own homes. This affirms their sense of self-worth. It is also the basis on which they form strong supportive communities, alternate families, within the houses.

Residents share in the privileges and duties of collectively taking part in managing their home. This style of living requires that each one take seriously the individual duties required for upkeep of the house. It also means that each person promotes a spirit of harmony and co-operation among the members of the house. This involves taking the time to participate in meetings to discuss and make decisions about matters that are of common concern.

Management Style

The following are characteristics of the facilitative management style:

- Progression to self-management

  The degree of involvement of housing workers with the residents of the house diminishes over time as the residents become more cohesive and more able to assume and share house management responsibilities. Worker activity in established houses increases when there is a change in tenancy and a need to bring a new resident into the existing resident family.

- Alternate Families

  Organization X's housing, at this point, primarily serves single adults. The organization strives to foster community among the residents to generate what are referred to as "alternate families" in which there is a caring among family members. This mutual caring is at the core of the organization's self-help model

- Resident Decision Making

All residents have an equal say in the operation of the house; identifying duties, allocating of chores, admitting new residents, taking part in the evicting of ill-suited residents, outline maintenance schedules particularly regarding cleaning and general house and yard care, developing behavioral guidelines and resolving other practical operations and interpersonal issues.

- Resident Responsibilities

Residents, individually, are responsible for their rent, cooking their own meals and cleaning their own rooms. Residents, as a group, are responsible for maintaining common areas, resolving disputes within the group and making decisions as described in the previous paragraph. Cooperative arrangements for purchasing food and other household supplies is encouraged.

- Masters In Their Own Homes

The final goal is to create a sense of ownership and responsibility for the house among all the residents. This is essential for self-management to become a reality. Organization X assumes that people want to be master in their own homes. Staff input and support, therefore, are determined by the needs of the residents at the various stages on the way to full self-management.

As stated previously, the guiding assumption of Organization X's model is that long term affordable housing provides stability in people's lives. In summary, the staff works with residents to develop community within each house and to ensure that a collective sense of responsibility, both for the house and the neighbourhood, emerges as a product of the facilitation process.

2. Roles and Responsibilities

Board of Directors' Role

The Board of Directors is community based and includes residents of the organization's houses. The Board provides general policy direction and financial and program oversight of the work. Its responsibilities include:

- set operating policies
- maintain financial records and ensure that acceptable accounting, reporting and auditing procedures are in place;
- elect and appoint officers responsible for program administration;
- decide on the acquisition of properties and capital equipment;
- develop long range plans and evaluate and monitor program initiatives related to them;
- act on appeals made to it by tenants, associations and other

clients or client groups served by the two organizations; and
- ensure compliance with various agreements entered into with funders, tenants and other partners.

Board members also provide an important link with various communities supporting or served by the organization and expert program advice.

Tenants' Role

The tenant role is best seen as an evolving partnership with the Organization. At its base is the agreement between the tenant and the organization regarding mutual expectations around tenancy. These include the individual and group responsibilities listed earlier. It is intended that the tenants will:

- serve on the Board and various committees as the opportunities present themselves;
- act in a liaison capacity between the Organization and the community both in finding others who might benefit from the Organization's housing and in building good neighbourhood and community relationships;
- participate in the maintenance program within their projects;
- make suggestions on how the housing program might most effectively be expanded;
- give feedback, on a regular basis, on how well the self-management program is working; and
- suggest ways and means in which maintenance and other physical house operations requirements might be improved upon.

3. Personnel

Housing staff requirements, in this housing management model, are minimal. There is approximately one housing worker for every four houses, a worker/program co-ordinator, an operations manager and a general maintenance worker. Resident participation and group decision making is integral to housing management and reduces staff and general operations costs as well as generating a more positive and productive home environment. Housing workers are always available in emergencies.

4. Leasing and Occupancy

Orientation Program

The resident orientation program is central to the selection process. There are two different types of orientation programs: one for bringing a new house on-line and another for filling a vacancy in an established house.

New House

The intent in the new house environment is to find a maximum of five people who would stand a good chance of getting along in the co-operative environment of an Organization X house. It is usually necessary to interview between twenty and twenty-five applicants in order to fill a new five bedroom house. It is intended that this will be the sole permanent residence of the tenants.

A series of group meetings are held. Prospective residents are required to express their commitment to residency by attending these meetings. The meetings also provide an opportunity for people to get to know each other, discuss individual expectations and begin to form the group cohesiveness required for the housing to be successful for them as individuals and as a group. The applicant through this process can decide if this type of housing is desirable. There are those who decide to drop out because of the discomfort with the community living and self-help, self-management model.

A Vacancy in an Established House

In filling a vacancy in an established house, the orientation is somewhat different. Prospective tenants are on our waiting list or referred by existing residents. Prior to the applicant being referred to the house for an interview, the housing worker will go through a process with each applicant regarding the Organization, its expectations and an overview of the vacancy that is being offered. The prospective tenant is then interviewed by the residents of the house in a combination of question/answer items and discussion/opinion items.

4. Financial and Accounting

The Organization is funded by the Ministry of Housing. The tenants are covered by the Landlord/Tenant Act. Rent is collected monthly by the Housing Worker.

5. Maintenance

Preventative Maintenance

One of the major preventative maintenance practices is the inspection of the houses on a regular basis, at a minimum every six months, by the Operations Manager or her designate. In addition, residents are actively involved in preventative maintenance. The Organization provides the housing worker with a form to be filled out in consultation with the residents when the households recognizes necessary repairs or improvements. This preventative maintenance sheet is forwarded to the Operations Manager who will then address the problem. Regular safety and maintenance checks are done on the furnaces. There are also annual cleaning of furnaces and replacement of furnace

filters. Fire safety equipment is all checked and tested at a minimum every six months by the Operations Manager.

Seasonal and Cyclical Maintenance

Seasonal maintenance is scheduled regarding such matters as care of roofs, painting exterior and interior surfaces and grounds upkeep. the redecoration and paint cycle is a three year cycle. The cycle is frequently shorter depending on the need.

Unit Inspection

Unit inspection is carried out at least twice a year at the discretion of the housing worker and with the consent of the resident. If a major problem is identified the Operations Manager becomes involved. There is a unit inspection checklist.

Emergencies

In the event of an emergency, the action depends on the nature of the emergency. For urgent problems, such as a burst pipes and electrical and furnace failure, there is a list of service agents posted in each house who can be contacted immediately by the residents. Other emergencies that do not require immediate attention are referred to the Operations Manager.

Security

There are locks on the front doors of the houses and on each resident's room. Master keys are kept at the Organizations' offices. When keys are not returned upon a tenant's leaving, the locks are changed. The best security is believed to be good relations with neighbours.

APPENDIX M

Housing Types.

Source: Canada Mortgage and Housing Corporation. Housing Choices for Canadians with Disabilities. Ottawa: 1992, p.10 - p.11

Accessible Housing
allows people with disabilities to get to, enter and exit a home. At least some of the rooms and facilities are convenient for visits or short-term use. This type of housing is designed to meet the accessibility needs of users with various disabilities, including people who use a wheelchair, people who have difficulty walking, bending or standing for long periods, and people with hearing or seeing disabilities. With adaptations to meet specific needs, accessible housing can provide convenient, permanent homes for people with particular disabilities.

Adaptable Housing
is accessible housing that is also designed and constructed to be easily adaptable to meet the different or changing functional needs of the occupants, including persons with particular disabilities. The spatial requirements of a person using a wheelchair is one of the basic design considerations for adaptable housing.

Adapted Housing
is housing that has already been adapted to meet the specific needs of a person, or persons, with a particular disability, or disabilities.

Barrier Free Housing
allows people with disabilities to get to, enter and exit a home, and use all of the rooms and facilities. It is designed to accommodate the specific needs of users with a particular disability, or a range of disabilities, including people who depend on a wheelchair for their mobility, persons having difficulty walking, bending, or standing for long periods, and people with hearing, seeing or speaking disabilities.

Housing for Environmentally Hypersensitive People
is designed, built and operated to provide a healthy and comfortable environment for its occupants. It uses a number of techniques and approaches aimed at minimizing the sources of pollutants from both inside and outside the building, in combination with effective ventilation to remove or dilute any pollutants that do occur.

Life Care Housing,
a design concept recently introduced in Japan, is based on the principle that homes should be designed to enable occupants, including seniors and persons with disabilities, to live in comfort for years to come. The practical application of this concept will result in otherwise ordinary homes having built-in design provisions to make everyday living easier, more enjoyable and convenient for everyone, at any time during their lives. (Note: This concept is similar to the concept of "Universal Design" described later in this chapter.)

Lifespan Housing
is a design concept introduced in Norway in 1981 that builds on the principles of adaptable housing. The main objective is to design and develop homes with all essential rooms on the entrance floor, so that normal daily living does not require climbing stairs. The essential rooms include the living and dining rooms, the kitchen, at least one bedroom, and a bathroom containing a wash basin, toilet and either a bathtub that can be readily converted into a shower or a shower that can be readily converted into a bathtub. The entrance floor is accessible from the outside, and there are no steps or thresholds. Floor spaces and door widths allow the use of walking aids and wheelchairs.

Mobility Housing
is designed to address the needs of people who have difficulty walking. These people may use a wheelchair, but they can also stand and walk a few steps, although often only with assistance. Mobility housing allows these people to get to, enter and exit a home, and use all of the rooms and facilities. It is not, however, entirely barrier-free for people who totally depend on a wheelchair for mobility. This type of housing also has the potential to meet the needs of people with other types of physical disability, including hearing and seeing disabilities.

Safe Housing,
an innovative design concept that originated in New Zealand, combines the principles of barrier-free design with passive fire safety measures and basic security provisions. The result is an intrinsically safe and universally accessible home environment that promotes personal well-being and lifelong physical independence.

Universal Design
aims to accommodate the functional needs of everyone; children, adults and seniors, with or without disabilities. It is based on the premise that a well-designed environment addressing the needs of people with disabilities can also be a better environment for everyone. Widespread adoption of this approach would provide people with disabilities with increased opportunities to live independently in homes that look no different from any others.

Wheelchair Housing
is barrier-free housing for people who depend on wheelchairs for mobility. It is designed so that they can perform the activities of daily living as independently as possible. Every design detail reflects the particular needs of a person using a wheelchair, including appropriate locations and heights for light switches, electrical outlets and windows; complete accessibility to facilities, equipment and furniture; and sufficient space for maneuvering a wheelchair in all rooms and facilities. ▲