



# Shared and supported independent living

## Prospect Vale vacancy profile

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## Service provider

**Organisation:** Anglicare Tasmania

**Contact for this vacancy:** Dee Gordon

**Phone:** 0490 491 015

## House details

**Area/suburb:** Prospect Vale

**Total number of residents:** 4

**Resident age range:** 40-64

**Gender specific accommodation:** No preference

**Funded support level:** Standard intensity

**Access to community:** Vehicle attached to house, public transport, local shops and cafes in walking distance

**Staffing levels:** 1 - Facility Support Worker

**Staff ratio:** 6 Staff provide support in a combination of 1:1, 1:2, 1:3, 2:3, 2:4 and overnight sleepover 1:4

**Vacant bedroom size:** Medium

**Attached bathroom:** No

## Physical setup and access to property

**Entry:** There are 3 entry points into the property including the front and back door, and side entry which leads to the 4th bedroom, driveway and garage. The back door leads to the backyard and the outdoor entertaining area.

**Living areas:** Spacious living area and many communal spaces. The kitchen is highly functional with a separate breakfast nook.

**Yard:** Spacious communal outdoor entertaining area with a barbeque.

**Storage capacity:** Built-in wardrobes in each bedroom, small staff office, plus garage.

## Current resident

(De-identified information)

**Age:** 58

**Gender:** Female

**Description:** This resident has lived at Prospect Vale since 2016 and has become very fond of the other residents and staff that support her. She is an affectionate lady with a lot of warmth toward those she cares about. She is very capable and thrives on being included in activities of daily living.

**Level of disability:** She has Cerebral Palsy and has an unsteady gait and requires supervision when mobilising, particularly on uneven surfaces. She also shows features consistent with anxiety.

**Functional living skills:** She requires support and assistance with all activities of daily living, including personal care, medication administration, meal and drink preparation, financial management and community access.

**Behavioural support:** She has behaviour consistent with generalised anxiety disorder and needs high level compassionate support to manage this. She needs positive behaviour support strategies in place to assist her to live as independently as possible.

## Current resident

(De-identified information)

**Age:** 64

**Gender:** Male

**Description:** This resident has lived in shared accommodation for some thirty years. His friendships are very important to him and he is protective of the people he cares about. Active support is very important to him as he enjoys participating in the everyday running of the household.

**Level of disability:** He has Cerebral Palsy, Intellectual Disability, Schizophrenia, Hypertension, Ataxic dysarthria, Tardive Dyskinesia, low vision, Dysphagia and associated choke and communication hazards, and Autism.

**Functional living skills:** He is able to attend to most tasks of daily living with active support. He is good at socialising and interacting with other residents, putting his dishes on the sink, putting his washing away and maintaining the yard. He is also an artist with an eye for colour, and likes to talk about his sculptures and paintings.

**Behavioural support:** He has intermittent periods of poor mental health, and needs compassion and understanding at these times.

## Current resident

(De-identified information)

**Age:** 40

**Gender:** Female

**Description:** This resident likes to be as independent as possible and really enjoys social activities and community events. She has an exceptional memory (especially in relation to dates), a friendly caring nature and a beautiful smile. She enjoys being involved in household tasks and responds well to praise and positive reinforcement. She particularly enjoys baking, craft and shopping.

**Level of disability:** She has Tuberous Sclerosis, intellectual disability, trauma history, features consistent with ASD, Irritable Bowel Syndrome, Oedema, and Biliary Colic.

**Functional living skills:** She needs support and assistance with all activities of daily living, including, personal care, medication administration, meal and drink preparation, financial management and community access. She requires 1:1 supervision with personal care, such as dressing and toileting.

**Behavioural support:** She has behaviour consistent with having a trauma history and displays some maladaptive coping strategies, including taking things that don't belong to her, binge eating and inappropriate storage of food and faecal playing. She needs positive behaviour support strategies in place to assist her to live as independently as possible.

## **Vehicle and access to transport**

A vehicle is attached to the property. All fuel costs are shared between the residents.

## **Broad overview of the nature of the house**

Prospect Vale has participants that require a moderate level of support with daily aspects of living.

The house has 2 staff from 7.00am to 11.00pm and there is one sleepover shift from 11.00pm to 7.00am.

House staff practice positive behaviour support strategies and recognise that all residents benefit from 1:1 support. Individual needs are tended to on a 1:1 basis.

## **Resident's full fortnightly financial contribution**

Each resident contributes \$528 per fortnight which contributes to bills, maintenance, groceries and general shared expenses.

The rent is direct debited from this account also.

## Regular social activities attended and run by the residents

**Community access:** 2 residents attend day support 4 days per week.

1 resident attends day support 5 days per week.

**Weekends:** Residents participate in individual or group outings of choice.



## Identified pre-existing issues or behaviours within the residence for consideration

One of the residents has behaviour consistent with generalised anxiety disorder and needs high level compassionate support to manage this. She may demonstrate behaviours such as crying, screaming, wailing and sobbing when she feels unsupported or anxious about an upcoming event, such as visiting the doctor. It can be difficult to remove her focus from what is causing her anxiety. She may become aggressive when upset, and could push, hit or pinch other residents and staff.

Another resident has behaviour consistent with having a trauma history and displays some maladaptive coping strategies, including taking things that don't belong to her, binge eating and inappropriate storage of food and faecal playing.

There are positive support strategies in place to minimise all of these behaviours.

## House rules

Visitors to the house are welcome, both planned and impromptu visits are encouraged.

Smoking is not permitted in the house or near exits.