Lue Ann: How are you today, Derek?

Derek: I've actually been better. I've got a cold going on. But I had a lot to do today, and the

people I'm working with are depending on me. I took some vitamin C, and I'm good to

go. How are you going?

Lue Ann: I'm OK. I'm OK. Yeah, it does stink when you're sick, but yeah, have some garlic too. We

can't always call out in this type of environment. It's tough on the folks that, like you

say, are waiting for us.

Derek: Yeah, totally. But I did make sure I wasn't contagious or anything. I don't have a fever.

Lue Ann: Yeah, that's true.

Derek: You definitely don't want to make other people sick.

Lue Ann: Right, right, right.

Derek: I just laid low yesterday, but things are OK. But how is it going? I've heard you got, or

your people got, a threatening letter. It was the talk of the office here.

Lue Ann: Well, yes, because it was a big deal. OK, so back when Bianca had been symptomatic, I

think the manager was being unfriendly and unhelpful. They hadn't received-

Derek: Wait, the manager of the apartment building?

Lue Ann: Of the apartment building, yeah.

Derek: OK, yeah.

Lue Ann: They hadn't received any kind of formal eviction notice, but they were worried about it

at that time, or at least Mick was, because Bianca wasn't doing well. But now, what happened when Bianca had received Medicare bills from when she was in the hospital,

and Mick noticed those bills-

Derek: Yeah, I remember that.

Lue Ann: Yeah, even before she got discharged. He panicked, and he didn't pay this month's rent.

Derek: Oh no.

Lue Ann: Yeah.

Derek: Poor Mick.

Lue Ann: I know. They didn't know what to do.

Derek:

Yeah, I can see that.

Lue Ann:

Yeah, he panics like that, this time for good reason. But yeah, so he didn't pay the rent. Now they did get a letter. It's not an eviction notice, but it is threatening something to that effect. They even had reported to me a couple of times that the manager's just slow in getting back to them. Once the toilet was a clogged a couple of weeks ago, and then the window was stuck, and he just was unresponsive.

Yeah, they're unhappy there. They were doing so well and happy in terms of Bianca getting out of the hospital. But now that it's getting cold, first they were afraid about the rent. Then they don't really like it that it's the kind of apartment where they have to pay their own utilities. As I said, now that it's getting chilly, they're afraid to raise the temperature if they need to, because they're just overwhelmed with being able to pay for all of this.

Derek:

Oh boy. Yeah, that's a tough decision. There's a lot of pros and cons that go into deciding to move.

Lue Ann:

Yeah, yeah.

Derek:

I know Mick's job is close to where they live now, and that might be an issue. There's got to be a lot going on in their heads, I would imagine.

Lue Ann:

There's a lot. They're undecided. They're really not sure how to approach it. I talked to them about some of the stuff that we do with folks when we talk about problem solving. I talked to them about weighing the pros and cons, like you said. Is it close to work? OK, good. But are you unhappy with the way the manager's treating you? Well, not so good. I'm helping them do that.

I assigned them to make a checklist and start the process so that they can figure out what they want to do. Because really, it's such an important part of your wellness, coming home to a place where you're comfortable and happy. Bianca doesn't work, so she spends time there, and she needs to be comfortable.

Derek:

Yeah, you're exactly right. When you think about people's needs, housing, good, safe, affordable housing is right there at the base needs list, along with food and water. It's shelter. Yeah, a place where they both feel safe and not like they're going to be harassed or mistreated based potentially on their disability. I don't know what the manager's problem is with them. I guess Mick should've paid the rent on time, but hopefully he has it and could pay it. It seems like he was just holding onto it, because we talked about those issues with the Medicare bills and that they should get resolved.

But I think it's great that you had them list all the pros and cons about making this kind of change. That's probably the best way to do is to write all the thoughts down, and then they'll be able to see it in front of them. Together, they'll make the decision that's going to be best for them.

Lue Ann:

Yeah, yeah, because on the one hand we can't just abandon it, and be like, throw in the towel and move without planning ahead. But on the other, I don't want to brush off their not liking it, because they really never complained about that place before. I don't want them to feel like we're not hearing that they just want to be happy and comfortable, as well as it being affordable and all that.

Derek:

Yeah, yeah. So you're going to have them make the list so then talk to them next week about what they're going to decide to do?

Lue Ann:

Yeah. We're going to follow up on it right away, because yeah, we don't want any other difficulties coming up. We got the thing straightened out with them getting the food. She's stable. We don't want any other incidents to arise.

Derek:

Definitely not.

Lue Ann:

What's going on with George? What's going on with George?

Derek:

Well, you saw George last week. He's doing pretty good, except for the medication thing. But fortunately, we did meet, and we were able to speak with the psychiatrist. We got an appointment soon after his last appointment, because he was very upset about that, getting the shots, and did a really good job, Lue Ann. I was really impressed with him and his ability to advocate for himself and keep himself ... He didn't really express the delusions that he sometimes does about it. He had some real solid good reasons for wanting to make the change.

I think the doctor's going to consider it. He had just gotten the shot, so he couldn't make the change right away then anyway, but I definitely saw the psychiatrist listening to George. I think that's what made it all the better. You saw him last week. He did not really feel like the psychiatrist was treating him very fairly, so to speak.

Lue Ann:

Good. [inaudible 00:07:19].

Derek:

That was a good thing. He had this other thing he brought up to me. I actually wanted to run it by you, since you do know him from back then. You know how he used to live in that other apartment building on the other side of town before his hospitalization?

Lue Ann:

Yes.

Derek:

He's talked about that place a lot. He loved living there. His friends are there. He misses living there. This new place he's in, it's OK, but it's just not in a nice part of town. It's a little more run down. He doesn't feel like he has any friends there, so it's been a real challenge for him.

I wish we could've him ... Or the supporting housing agency that he's with, I wish they could've gotten him into that apartment back when he was discharged. But as you remember, there just weren't any apartments available at that time. He couldn't afford to wait and stay in the hospital just for the perfect place. I applaud for taking something

that was ... it's still decent. It's definitely not unsafe, but I can understand his reasoning for wanting to make a change.

He came to me right after the meeting with the psychiatrist, and he was saying that he was talking to his friend. I think Jack is his friend over there in the apartment building. Jack told him that somebody living right down the hall from him is getting ready to move out, and there might be an apartment available in the old building where he used to live.

He was wondering how to go about ... can he potentially move back there if he wanted? He has a voucher. It's like Section 8, but they don't call it Section 8 anymore. It's called, I think, a housing choice voucher. He doesn't know if they would allow him to move or not. I wasn't sure if you had any thoughts, but I told him to talk to the supporting housing agency and that they might be able to give him some more info, but also we could ask our colleagues about the issue with the voucher. I'm not sure if he could move or not.

Lue Ann:

OK, so perhaps he can use the voucher for the new unit. Even though the old unit that he liked is not available, at least another unit in the same exact building.

Derek:

Yeah, it wouldn't be the same exact apartment he used to have, but he said he was fine with that. He just wanted to be back in the building. I think it might be possible, but I'm definitely going to have to talk to some of my colleagues. I told him to talk supportive housing and see what they said, as well. Obviously, they know him well. You guys, from before I was here, know him fairly well too.

It seems like, the safety issues aside, just being back in the same building where he's got some close friends would be a really great step towards his recovery. What do you think?

Lue Ann:

Totally. Yes, because just like I was saying about Mick and Bianca needing to be happy, the environment where you live and with the friends, and the supports, and everything, it's just so important for George. He had been in the hospital a long time. He needs that comfort, and not so much routine, but yeah, he needs that familiarity. It would be good.

Derek:

I struggle, because some of the other of our coworkers have mentioned they felt like he may have gotten a little too comfortable and that this wasn't really challenging him. He was learning to shop in different places, because it's a different part and use different bus routes. But I think when you do think about people and their recovery, you certainly want people feeling comfortable about where they live and who they spend their time with and that they spend time with other people.

He's definitely voiced that to me that he doesn't spend enough time socializing, as he would like. That's a real need that we have to factor in when we think about wellness. I hope the supportive housing agency ... They're great, so I know they'll listen to him, but I just hope that maybe they can accommodate him and see about that for him. That'd be great.

Then also, just real quick on Michela, I guess it's a housing themed week. Her mom had reached out to me to give me an update on her financial situation. As you know, Michela gave me a release to speak with her mom, and we talked a few times. The mom is letting me know that Michela has to find a new place to live ASAP. She's got to be out basically by the end of the month. She's losing the house, unfortunately.

Lue Ann:

Oh my goodness.

Derek:

Yeah, so the money that she had had from that settlement a long time ago has run out, and she got behind. She's making arrangements. She's got some good supports in her life, she said. She's getting a new place to live starting next month, but she said she can't provide for Michela anymore, and I understand that. Michela's got to figure out her own housing. She asked me what types of options were out there. I explained to her a few of them that might be good. I talked about, unfortunately, some of the options that wouldn't be so great. I think knowing Michela, I don't think she'd be too much in favor of living in a shelter.

Lue Ann:

[inaudible 00:13:03].

Derek:

Given that she's been living in a private house like a residence. But that's the kind of options she might be looking at, or a-

Lue Ann:

Or a boarding home.

Derek:

Yeah, a boarding home. Michela's mom was a little surprised. She thought she could just get into her own apartment. I explained to her, based on what she's getting temporarily from the Board of Social Services, she's not going to be able to afford an apartment. She doesn't have a subsidy, so I'm going to look into some other options for her. I'm going to see if she might be eligible for a group home or supportive housing. I know there's RIST teams or PACT teams. I know there's other housing options out there. I just don't know if she'd be eligible for them based on her being out in the community now and not residing in a hospital.

It's going to be a big change for Michela, but she definitely has shown some promise and some progress lately. Hopefully, it'll be a good step in the right direction for her being a little more independent.

Lue Ann:

Yeah, yeah. For her to even know that there are some possibilities, and they don't have to all be yucky choices. They don't have to all be the shelters and the boarding homes. That would be cool if she could get into ... Even a group home where there's people her age and that kind of setting might be good in the short term.

Derek:

Yeah, that's what I know is a group home would be a transitional type of situation, but that might be what would be good for her right now. We will see. I'll look into it, and going to keep Michela's mom updated, because she asked me to. She said she'll help out in any way she can. She just doesn't have the financial means right now to assist her. I told her we understand that.

Anyway, yeah, busy week, busy week.

Lue Ann: Yeah, OK, well, good luck with everything. Let's keep in touch before the end of the

week about how this is going, because like you said, it's a real housing issues week.

That's complicated.

Derek: Yeah, will do. It's good to have your support as I work with the people on my case load,

just because I know you've been with the agency a while. You've got a lot of experience, and I know that it's good to be paired up. I think we've gotten some good stuff done for the people, and it's helped having another person on the team to bounce ideas off of.

Lue Ann: Yes, absolutely. I appreciate your help too, because that's what's cool about being here

is that we can turn to each other as a team.

Derek: Yeah, for sure. All right, Lue Ann.

Lue Ann: OK, cool.

Derek: Talk to you later.

Lue Ann: OK, bye.

Derek: Bye.