## **Residential Group Home**

**Qualification Entity** 

We can accommodate riders with: **Hearing Impairment** Manual wheelchairs Vision Impairment Age Requirements 22-55 56-60 60+ Available 24/7 Yes Other Eligibility Criteria 21 and older Intake Contact Alesia Rawls Intake Contact Email genesis1thehouse@outlook.com **Intake Process** Please call for more information. Intake Contact Telephone (757) 477-6882 Qualifications Qualification Type Licensure **Qualification Entity** Virginia Department of Behavioral Health and Developmental Services (DBHDS) **Qualification Number** 1303 Qualification Type Certification

Medicaid
Qualification Number
DD Waiver
Genesis 1 The House of Care LLC
Main
(757) 562-5505
314 Washington Avenue
23851 VA
United States

Payment Method(s) Private Pay

, Community Living Waiver Languages Spoken English

Genesis 1 The House of Care provides residential and community support services and other related support services for adults with intellectual disabilities. Individuals are supported with:

- ADL's
- meals
- activities of choice
- community outings

Service Area(s)
Franklin City
,
Isle of Wight County
,
Petersburg City
,
Portsmouth City
,
Southampton County
,
Suffolk City

Email

genesis1thehouse@outlook.com