























Client & Family HANDBOOK





CHIRS Community Head Injury Resource Services of Toronto

62 Finch Avenue West Toronto, Ontario M2N 7G1

Telephone: (416) 240-8000

Fax: (416) 240-1149 E-mail: chirs@chirs.com

www.chirs.com

The materials in this Handbook are owned by CHIRS and are not to be copied without permission.

TABLE OF CONTENTS **Page Number ALL ABOUT CHIRS** CHIRS Strategic Plan 4 CHIRS Executive Director Welcomes You Who We Are 6 Mission, Vision, Values & Code of Ethics 7 How We've Grown.... 8 CHIRS Services. 9 Our Staff 11 **RIGHTS AND RESPONSIBILITIES** Your Bill of Rights..... 13 What Are My Responsibilities?..... 14 CHIRS Complaint Procedure..... 15 Tell Us the Good Stuff!..... 17 CHIRS COMMITMENT TO PRIVACY Confidentiality 18 CHIRS Personal Information Policy **WORKING TOGETHER FOR SAFETY AND HEALTH** What is CHIRS Doing to Keep the Focus on Health and Safety for Everyone? What Client Health and Safety Issues Does CHIRS Focus on?.... 23 Other Infectious Diseases CHIRS GENERAL APPROACH TO SERVICE Model of Support..... 29 Everyday Ethics Managing Risks Your Relationship with CHIRS Staff..... 36 Competency and Substitute Decision Makers..... 37 How CHIRS Works with Families..... 40 **CHALLENGING SUPPORT ISSUES** Introduction..... 42 Positive Approaches for Changing Behaviour..... REFERENCE INFORMATION Glossary of Terms.....

CHIRS STRATEGIC PLAN 2015-2020 AT A GLANCE

MISSION

To improve the quality of life for persons living with the effects of acquired brain injury

VISION

To be leading edge in the provision of evidence-based community and client-centred services in the field of Acquired Brain Injury

COMMUNITY WE SERVE

Clients and Families Partners in Healthcare Staff and Volunteers

Wider Community

VALUES

PEOPLE FIRST - DIGNITY & RESPECT ◆ EXCELLENCE & QUALITY

INTEGRITY, ACCOUNTABILITY AND ETHICAL CONDUCT ◆ COLLABORATION

FLEXIBILITY, INNOVATION, & ENTREPRENEURSHIP

STRATEGIC PRIORITIES

DEVELOP and MAINTAIN MUTUALLY BENEFICIAL PARTNERSHIPS EXPAND CHIRS CENTRE OF EXCELLENCE DEVELOP NON-DESIGNATED REVENUE STREAM

QUALITY AND OPERATIONAL EFFECTIVENESS

Client Safety and Satisfaction Safety and Wellness Staff Engagement Thoughtful Opportunism

Strong Infrastructure Responsible Financial Management Sound Governance

Welcome to CHIRS!

On behalf of everyone at CHIRS, I would like to welcome you as a member of the CHIRS family! For some of you, the wait for scarce ABI services has been a long one and we hope that we will be able to fulfill your expectations and provide exceptional opportunities for learning, growth and the development of new friendships.

You are now the central part of a CHIRS team which will be created to support you and work with you to help you reach your goals. We know that we will learn many things from you and from your family and we are open and receptive to your feedback. To help you understand the CHIRS philosophy and approach to service provision, we have developed this Handbook with the help of families, clients, and staff members. Please read through it carefully and feel free to ask questions and seek clarification. We appreciate a straightforward approach.

As an internationally recognized, evidence-informed, and accredited ABI community service provider, the CHIRS staff receive training and supervision from a sophisticated and creative clinical team. We are proud that our staff training and orientation program was the recipient of a Leading Practice award from Accreditation Canada. CHIRS has won other awards over the years, including the Business of the Year Award for Innovation and Leadership from the Toronto Board of Trade. CHIRS was also selected as one of 14 programs in the world included in the *Casebook of Exemplary Evidence-Informed Programs that Foster Community Participation after ABI* – making CHIRS a recognized centre of excellence *worldwide*. We were also awarded Exemplary Standing by Accreditation Canada for our most recent accreditation 2012 – 2016.

We would like to express our thanks to the families, clients and staff members who participated in the development of this handbook, and to Dr. Robert Solomon from the Faculty of Law at the University of Western Ontario, who provided legal guidance and advice. We are also grateful to the Ontario Federation of Cerebral Palsy, who provided some of the material for the 'Know Your Rights' handbook.

We look forward to working with you and hope that your experiences at CHIRS will not only fulfill but exceed your expectations.

We are committed to providing you with exceptional service!

Hedy Chandler

Executive Director

CHIRS



WHO WE ARE

Community Head Injury Resource Services of Toronto (CHIRS) provides programs and support services for adults who have sustained an acquired brain injury.

CHIRS has four main programs areas:

- Adult Day Services (ADS) and other social and recreational groups
- Ashby Community Support Services (ACSS)
- ♦ Residential Services
- Clinical Services and Therapeutic & Educational groups



CHIRS is a not-for-profit charitable organization. We receive most of our funding from the Local Health Integration Network (LHIN) and the Ontario Ministry of Health and Long-Term Care, and have an ODSP funded Supported Employment Program. CHIRS also supports clients on a **Fee-for-Service** basis if there is funding available from a **third party payor** or insurance settlement.

CHIRS has been awarded **Exemplary Standing by Accreditation Canada** for our most recent accreditation 2012 – 2016. Earning accreditation means that CHIRS has consistently shown progress, commitment, and accountability in providing quality client and family-centered services. 'Exemplary standing' is the highest level awarded by Accreditation Canada.

CHIRS is a **Recognized Centre of Excellence**: CHIRS was selected as one of 14 programs in the world included in the *Casebook of Exemplary Evidence-Informed Programs that Foster Community Participation after ABI* – making CHIRS a recognized centre of excellence *worldwide*.

CHIRS is actively involved in the larger acquired brain injury community and has partnerships with many other organizations locally, provincially, and internationally.

MISSION

CHIRS exists to improve the quality of life for persons living with the effects of acquired brain injury.



VISION

To be leading-edge in the provision of evidence-based community and client-centred services in the field of acquired brain injury.

VALUES

- ♦ People first Dignity and Respect
- ◆ Excellence and Quality
- Integrity, Accountability and Ethical Conduct
- ♦ Collaboration
- ♦ Flexible, Innovative and Entrepreneurial
- Accessible and Inclusive

CODE OF ETHICS

- 1. Respect for the Dignity of People
- 2. Responsible Service Provision
- 3. Integrity in Relationships
- 4. Responsibility to the Community





HOW CHIRS HAS GROWN...



These are some of the events that have brought us to where we are now:

1978	Ashby House was founded by Mira Ashby. It was the first community–based transitional living ABI residence in North America
1979	Semi-independent apartment program was started on Spencer Ave. This was the second phase of the transitional program
1990	Official opening of St. Georges, a 24-hour supervised long-term residence
1991	Ashby House closed and opening of head office in Etobicoke to make way for Ashby Community Support Services (ACSS)
1994	Opening of Aldebrain and Shoniker 24-hour supervised residences as part of repatriation program
1995	Recreation & Leisure and Supported Employment Programs developed
1997	CHIRS was the first community-based ABI agency to receive accreditation by Accreditation Canada
1998	Aldebrain and Shoniker merge into one residential program at the Aldebrain site and the 'Variable Support Model' is developed
1999	CHIRS Adult Day Services (ADS) program opens
2002	CHIRS head office and ADS move to North York location at 62 Finch Ave. W
2006	Finch Residence opens
2007	Semi-Independent Living apartments open at 605 Finch Ave W
2008	Aging At Home (AAH) program opens
2009	Substance Use and Brain Injury (SUBI) program is developed
2010	Community support services enhanced in Scarborough via the CEAP program
2011	Development of Neurobehavioural Intervention Program (NBIP)
2013	Expansion of Clinical Groups
2015	Opening of Neuropsychological Assessment Clinic
2016	Expansion of Adult Day Services (ADS)

CHIRS SERVICES

Adult Day Services (ADS)

CHIRS believes that having something meaningful to do and a place to belong is an important part of everyone's life. Adult Day Services provides people with places to go, things to do and opportunities for personal growth. ADS runs a wide variety of structured group programs to help people keep physically and mentally active. Some examples are Swimming, Social Clubs, Hobby Club, Cooking, and Bowling. CHIRS also has a drop-in centre, known as 'The Club,' which is a great place to hang out and meet people.

ADS clients describe their experiences with CHIRS:

"The Club is the best thing that happened to Toronto. I now have a place where people understand my ABI issues and I do not feel alone anymore."

"For people who feel displaced in society, CHIRS gives you a place to go."

Community Support Services:

Ashby Community Support Service (ACSS), Aging At Home (AAH), and Central East ACSS Program (CEAP)

The community support services programs provide flexible support to individuals who are living in the community. Support may include case management, individual or group support with a goal -directed activity such as personal or home management, or getting out more in the community.

Residential Services

CHIRS has three residential facilities: St. Georges Residence, a wheelchair accessible bungalow in Etobicoke, Aldebrain Towers in Scarborough, where clients live in one, two, or four bedroom apartments, and the Finch site. Support in the residences is available 24-hours per day, 7 days per week. The residential team works closely with others to provide opportunities for people living in the residences to access 'The Club' and ADS programs, as well as other options available in the community.

Residential clients describe their experiences and feelings about CHIRS:

"It was hard at first and I got used to the staff helping me a lot. Now I think CHIRS is the best."

"CHIRS is a place where you can reach out for help and people will help."

"I think CHIRS is groovy."

Clinical Services

CHIRS has a team of clinicians which includes Neuropsychologists, a Neuropsychiatrist, Behaviour Therapists, an Occupational Therapist, and a Social Worker. These professionals provide individual and group services to eligible clients and families. They also provide consultation to staff regarding client and family needs.

Please read the FREQUENTLY ASKED QUESTIONS for each specific program or the CHIRS Program and Services Guide at www.chirs.com for more information about CHIRS services.

OUR STAFF

CHIRS has a staff of approximately 160 individuals. Each staff member has a university degree or college diploma. Many are educated in areas such as behavioural science and technology, recreation, psychology, and social work.

What kind of training do CHIRS staff have?

CHIRS staff members receive intensive on-site training where they learn about client support, and agency systems and procedures. Within the first three months at CHIRS, staff attend an orientation training session where they are introduced to the agency's philosophy and approach to service. They also receive training in a number of other areas including:

Skills for working with Clients and Families

- ♦ Brain Injury Basics
- Skills for Collaboration
- Brain and Behaviour
- ♦ Errorless Learning
- Sexuality and Brain Injury
- ◆ Family-Centered Support
- Boundaries in the Staff/Client Relationship
- Medication Management

Health and Safety related

- First Aid / CPR
- ♦ Non-Violent Crisis Intervention
- Infection Prevention
- Prevention of Workplace Musculoskeletal Injuries

Who will be my main contact person?

Please check your 'MY SUPPORT TEAM-CONTACT SHEET' which is in the front pocket of this folder. If you have any questions about who to call for what, please contact your Service Coordinator or Intake Facilitator and they will be able to help you.

What are the roles of CHIRS staff that I might work with?

- **Intake Facilitator:** Maintains contact with individuals on the wait list and individuals receiving only ADS. Is also responsible for assisting with transitions into CHIRS services.
- Residential Facilitator (RF): Provides support to clients living in the residential program.
- **Community Facilitator (CF):** Provides support and case management to clients living in the community. May also work in the CHIRS Club and run community-based groups.
- **Primary Facilitator:** An RF or CF who has primary responsibility for coordinating your care and support. This person is usually your main contact.
- **Senior Facilitator:** Works with the Service Coordinator to provide support to the residential team. Provides client support as needed.
- **Service Coordinator:** Supervises a team of facilitators (residential and community). Also oversees the client support for that team and communicates with families, as needed.
- *Managers*: Oversee all aspects of the Residential and Community Support Services programs.
- **Behaviour Therapist:** Provides assessment, treatment, and consultation. Works closely with CHIRS teams regarding client goals, daily routines, and behaviour management.
- **Employment Specialist:** Links clients who are actively seeking competitive employment to suitable vocational training and/or employment opportunities through the ODSP Employment Supports program.
- **Occupational Therapist:** Provides assessment, treatment, consultation & environmental safety evaluation. Work closely with CHIRS teams regarding client's safety and function.
- **Social Worker:** Provides individual, group, and family counselling. Provides consultation to the various teams regarding client and family issues.
- **Neuropsychologist:** Provides or supervises clinical assessments and interventions and consults with the client support team and the family.
- **Neuropsychiatrist:** A psychiatrist that specializes in brain injury, he provides assessment and treatment to individuals with mental health or behavioural challenges. He also provides consultation to staff.
- Clinical Director/ Neuropsychologist: Monitors the clinical direction of the agency and oversees client interventions. Provides consultation to all CHIRS programs. Provides individual assessment and counselling, as well as group and family intervention.
- **Director of Operations:** Responsible for overseeing the daily operations of the agency. Is also the Privacy Officer.
- **Executive Director:** Reports to the Board of Directors, oversees and monitors the vision and growth of the agency.
 - ◆ These individuals can be contacted by calling the CHIRS Finch site at 416-240-8000 or see your 'My Support Team-Contact Sheet' for contact information.

YOUR BILL OF RIGHTS

HOW ARE MY RIGHTS PROTECTED?

Ontario has a law called the Home Care and Community Services Act (1994). This Act contains a Bill of Rights, which is a set of rules about how people who receive community services should be treated. CHIRS makes every effort to ensure these rights are respected and promoted.



WHAT ARE MY RIGHTS?

There are nine important rights that you should know about.

These rights belong to you, by law, and are as follows:

YOUR BILL OF RIGHTS

- 1. Courtesy, Respect and Freedom From Abuse
- 2. Privacy and Freedom to Make Your Own Decisions
- 3. Recognition of Your Individual Preferences
- 4. Information and Answers About Your Support
- 5. Participation in the Development and Evaluation of Your Service Plan
- 6. Right to Give or Refuse Consent to Service
- 7. Freedom to Speak Out
- 8. Knowing CHIRS' Rules and Policies
- 9. Confidentiality of Your Personal Information

The booklet that comes with this Handbook will tell you more about each of these rights. It is called 'KNOW YOUR RIGHTS.'

If you ever feel that one of your rights is not being respected, please follow the guidelines in the <u>CHIRS' Complaint Procedure</u> on pages 15 -16.

WHAT ARE MY RESPONSIBILITIES?

As a client of CHIRS, you also have a number of responsibilities. Some of these expectations are outlined in the Service Agreement that you sign when you first begin working with CHIRS, and they are also listed below:

1. Active Participation

CHIRS staff will work with you and your family to develop a Service Plan to help you meet your goals, if you are in the ACSS or Residential programs. CHIRS cannot make this happen without your involvement. You are expected to actively participate in setting goals,



planning for your support, and working with support staff toward meeting your goals.

2. DO NOT use alcohol or drugs

Drug Use' section on pages 43-44.

Research indicates that substance use and brain injury do not mix. CHIRS believes that you may not fully benefit from services if you use alcohol or street drugs or misuse your prescription drugs. If you are under the influence of these substances during a time when you are scheduled to meet with a staff member or participate in a CHIRS activity, the session may be discontinued or you may be asked to leave. If this becomes a frequent problem, CHIRS may request that you seek substance abuse counselling either before continuing with CHIRS services or at the same time. For more information please refer to the 'Alcohol and



3. Treat other clients and CHIRS staff with respect

You are expected to treat all staff members and clients with courtesy and consideration and to remember that they have the same rights that you do.

CHIRS COMPLAINT PROCEDURE

CHIRS works hard to provide the best possible service and always strives to improve. You can help us do that by letting CHIRS know how you are feeling about your support.

1. Talk to any staff member.



CHIRS expects its staff to respect your rights and treat you with dignity. If you feel that you are not being treated respectfully, or if you have questions or concerns about your support, please talk to a staff member. Often the best place to start is to speak directly with your Primary Facilitator or another front-line worker that you feel comfortable talking with. You may also speak with another representative of CHIRS, such as a Manager, Service Coordinator,

Psychologist or Social Worker. All staff members have a responsibility to report your concerns to their supervisors so you know your concerns will be heard. Your main CHIRS contact people are listed on your 'MY SUPPORT TEAM - CONTACT SHEET.'





2. Your concerns may be brought to the Executive Director.

If you are not satisfied with the way your questions or concerns have been addressed so far, you may bring your concern to the Executive Director, <u>Hedy Chandler</u>. Hedy can be reached at **416-240-8000** or by e-mail at **hedyc@chirs.com**. You can also write her a letter addressed to **62 Finch Ave. West, Toronto, Ontario, M2N 7G1.**

3. Your concern may be brought to the CHIRS Board of Directors.

CHIRS has a Board of Directors, which is made up of volunteer community members. If you are not satisfied with the Executive Director's response, you may lodge your complaint with the chairperson of the CHIRS Board of Directors. They can be contacted in writing at:

62 Finch Avenue West, Toronto, Ontario M2N 7G1.

4. The Health Services Appeal and Review Board (HSARB)

If you are still not satisfied after receiving a response from the CHIRS Board of Directors, you have a legal right to take your complaint to the HSARB. The HSARB is an independent body made up of members of the general public. For general information about the appeal process, you can visit their website at www.hsarb.on.ca. You can contact the HSARB by telephone at 416-327-8512 or by e-mail at hsarb@ontario.ca. To start the appeal process, you must write to the HSARB and ask for a hearing. They will tell you how to do this. The HSARB will tell you when your hearing is scheduled and what you need to do to prepare. After the hearing, the HSARB will send you a letter about its decision.

If I file a complaint, will my services be affected?

The Bill of Rights states that you have the right to raise concerns or recommend changes about your services. CHIRS will not refuse or reduce services to you if you file a complaint.

CHIRS takes all complaints seriously.



TELL US THE GOOD STUFF!!!

If you have something positive to say about CHIRS, please tell us. Positive comments about your support are gladly welcomed and help us to know what we are doing well. Your feedback also helps us ensure that funding goes to important and successful programs and services.



How can I let CHIRS know what programs, services and supports I like?

Call or talk to your Primary Facilitator, Service Coordinator, and any
other CHIRS staff member if you are enjoying a certain program or if you
are pleased with the support you are receiving. The names and numbers
of these people are listed on your 'MY SUPPORT TEAM - CONTACT
SHEET.'



- 2. **Write a letter** to the Service Coordinator or the Executive Director, Hedy Chandler. The letter can be addressed to CHIRS at 62 Finch Avenue West, Toronto, Ontario M2N 7G1.
- 3. **Fill out questionnaires**. Occasionally, you may be asked to give feedback through interviews or written questionnaires. As part of our Quality Review process, CHIRS has begun using a client and family survey to help us improve services and programs.

CHIRS COMMITMENT TO PRIVACY

Confidentiality

Confidentiality means keeping your personal information private. Information about you will only be shared under the following circumstances:

1. Within your CHIRS support team

The staff at CHIRS work as a team. Team members may share relevant information with each other to make sure that you get the support you need.

2. With the consent of you or your substitute decision maker

If CHIRS staff are asked to release verbal or written information about you or your support to anyone outside of CHIRS, they will need permission from you or your substitute decision maker. CHIRS will only share information that is relevant to the specific request.

3. In exceptional situations

CHIRS' employees may be required to share confidential information (possibly without your consent) in the following situations:

- if required to do so by a court of law (e.g. a subpoena)
- ♦ if you require emergency medical attention
- if you are in a situation that results in police involvement (e.g. missing person)
- if CHIRS believes that you or someone else might be in danger, for example, if the situation involves abuse or potential self-harm.

CHIRS Personal Information Policy

At CHIRS, we are committed to protecting your privacy. We collect and use your personal health information to provide the best service possible. CHIRS recognizes the importance of privacy and the sensitivity of your personal information. We are committed to ensuring that your privacy is protected through practices and policies that relate to collecting, using, sharing, and keeping personal information, consistent with Ontario's Personal Health Information Protection Act, 2004.

Why does CHIRS need your personal information?

Personal and financial information are collected in order to:

- Determine your eligibility for service, your eligibility for subsidy, and your service needs.
- Provide you with individualized services that relate to your needs.
- Maintain a list of applicants waiting for services.
- Satisfy legal requirements.
- Improve the quality of our services including the management of risk.
- Teach students and other professionals.
- Raise funds in order to improve the services.
- ♦ Make referrals on your behalf to other healthcare providers for additional services.
- Do research to improve our knowledge in acquired brain injury.

What personal information does CHIRS collect and keep?

- ◆ Your personal information related to the service(s) provided or being requested.
- Reports on your goals, progress, support needs, medical and psychological information that relate to your service plan. This information is most often shared with you or persons acting on your behalf on a regular basis.
- Personal information about you received from other sources where the information helps us have a better understanding of your needs and your progress.
- Your personal information profile that provides important contacts and personal health information for everyday staff use and for use in an emergency.

How does CHIRS collect your personal information?

 We receive your personal information from other agencies and organizations, which have obtained your consent to share information with us.

- Personal information is collected in the form of the 'Request For Service' or 'ABI Client Community Profile' submitted by you or a person acting on your behalf.
- We may also receive personal information from other health professionals, service providers, and family members, both written and verbal, supporting your application.
- Personal information is collected during your screening interview with CHIRS intake and assessment team.
- Ongoing information is shared with us by others who are providing you with continuing service.

When does CHIRS disclose personal information?

- CHIRS only discloses your personal information for the reason it is collected unless you
 give us your consent to disclose for other reasons, or we are required or authorized to do
 so by law.
- Our staff and volunteers are provided access to your personal information in order to provide service and/or carry out their assignments. However, the amount of personal information made available is limited to what is needed to carry out the assignment or to provide the service.
- You further direct the disclosure of personal information to others involved in your support through the service planning and service agreement process.
- ♦ In the event that you are at some risk of serious harm or your actions would put someone at serious risk of harm, CHIRS will disclose, without consent, personal information necessary to reduce the risk of harm to the individual or individuals.
- CHIRS makes referrals on your behalf to other health care or community service providers for additional services or to apply for financial benefits.

What choices do I have regarding my personal information?

- ♦ You may withdraw your consent for some of the above-mentioned use and disclosure.
- You may direct us to share or not to share some or all of the personal information about you to certain people or agencies.
- In certain circumstances limiting our ability to collect information may impede our ability to provide comprehensive service.
- You can request access to and seek correction of your personal information.

What steps does CHIRS take to protect the security of my information?

CHIRS takes steps to:

- Ensure that everyone who works or performs services for us protects your privacy and uses your personal information only for the purposes to which you have consented.
- Protect your personal health information from theft, loss and unauthorized access, copying, modification, use, disclosure, and disposal.
- Complete audits and investigations to monitor and manage our privacy compliance.

Who do I contact for more information?

CHIRS' Privacy Officer can tell you more about how we protect your health information. If you have questions or concerns, contact <u>Danny Caplan, Privacy Officer:</u>

Telephone: (416) 240-8000, ext. 222

E-mail: dannyc@chirs.com
Address: 62 Finch Ave. West

Toronto, Ontario

M2N 7G1

If you believe that your privacy rights have been violated, you can file a complaint with the Information and Privacy Commissioner of Ontario:

Telephone: (416) 326-3333

Address: 2 Bloor Street East, Suite 1400

Toronto, Ontario

M4W 1A8

Web: www.ipc.on.ca

WORKING TOGETHER FOR SAFETY AND HEALTH

At CHIRS, concern for everyone's health and safety is at the centre of everything that we do. CHIRS management is committed to supporting your health and safety; however, at the same time, they need to provide a healthy and safe work environment for staff who work at CHIRS sites and in the community. We are constantly checking to see how we are doing in this area, as part of our commitment to quality improvement at CHIRS. We will be most successful at creating a safe and healthy environment for everyone if we all work together. Clients, families, staff, and volunteers all make up the CHIRS safety team.

What is CHIRS Doing to Keep the Focus on Safety and Health for Everyone?

Staff Training:

Staff are trained regularly about providing services in a way that is safe for you and for them. You will see some examples in the information below. Staff also receive regular training in First Aid and CPR, to equip them to deal with medical emergencies.

Assessment & Support Planning:

Clients in ACSS, AAH, and residential programs go through an **assessment process** and have an **individualized Service & Care Plan** that helps us identify and plan for your specific safety and support needs. **Support procedures and routines** may be developed with you, to help you do certain activities in the safest way.

Your Community Facilitator will also do a Home and Community Safety Assessment when he/she comes to visit your home, to see if there are safety hazards for you or for them.

Clients in the ADS program go through a brief sampling assessment to see if they might need extra support to safely participate. If you have special needs, that information is recorded in your Service Agreement and in the Information Profile that staff use. It might mean that you will need to bring a support person with you to safely participate in the program.

Reporting, Investigation and Tracking of Incidents:

Safety-related issues, incidents, and 'near-miss' incidents are reported, investigated, and tracked to make sure that CHIRS makes the improvements that are needed to keep things as safe as possible for everyone.

Staff Workgroups and Development of Policies:

A number of workgroups, such as the Client Safety and Wellness Workgroup, Community Safety Workgroup and the Joint Occupational Health and Safety Committee review CHIRS policies and practices and make recommendations about how we can all do things in a way that is safer for both clients and staff.

Education and Information:

There is a 'Safety at CHIRS' bulletin board in the CHIRS Club. This board provides up-to-date information for clients, families, and visitors regarding various safety issues.

What Client Health and Safety Issues Does CHIRS Focus On?

Although we at CHIRS are committed to addressing all health and safety risks, these are some of the main areas that we are working on:

Falls Prevention:

CHIRS Falls Prevention Program is in place because persons with acquired brain injuries are at a greater risk for falls than the general population, and we know that falls are one of the major causes of injury-related hospitalizations. We strive to reduce the risk of falls and fall related injuries in a way that preserves function, independence, and dignity. Our Falls Prevention Program includes education, screening/identifying falls risks, applying general falls prevention principles, developing individualized plans when needed, incident reporting and follow up, and program evaluation.

Please read the brochure included with this Handbook, and found on CHIRS website, to learn more about how we can all work together to prevent falls and the related injuries. Please refer to the Physical Support section on page 47 in this handbook, to learn more about our role in falls management/intervention.

Infection Prevention and Control Program:

Staff receive regular training on infection control practices such as hand hygiene, housekeeping procedures, and monitoring of infection rates.

Did you know that hand washing or using hand sanitizer is the single most important thing we can all do to prevent the spread of germs and infectious illnesses?



Choking Prevention and Management:

Choking is a serious risk for anyone, but individuals with brain injury can be at an increased risk because of challenges with swallowing, impulsivity and poor judgment.

Specific training and equipment is provided to staff to help them prevent incidents and intervene, if needed. You may notice that some foods are no longer served at CHIRS because they are riskier foods for choking.

Medication Management:

CHIRS recognizes that mistakes involving medications can be very serious and put your health at risk. Staff that are involved with giving clients medication, receive extensive training regarding safe administration.



Emergency Preparedness and Response System:

CHIRS has developed agency plans and procedures and regularly holds practice drills to ensure staff know what to do in an emergency. The system includes **Fire Plans** for all CHIRS sites, a **Disaster Preparedness and Recovery Plan**, an **Influenza Pandemic Plan**, and an **Inclement Weather Policy**.



What are YOUR Health and Safety Responsibilities?

Safety for CHIRS Staff in your Home and Community:

There may be safety hazards in your home and community that can put you and your Community Facilitator at risk for injury.

If you have a Community Facilitator that visits your home, you need to prepare for the home visit by using the 'Your Community Safety Responsibilities' checklist provided in the front pocket of this Client and Family Handbook. The checklist tells you what you need to do in your home environment to make things as safe as possible for you and the CHIRS staff that comes to your home.



The Falls Prevention Program brochure, provided with this Handbook and on the CHIRS website, has many helpful tips for reducing the risk of falls for yourself, CHIRS staff, and others. Please review the brochure to see what you can do.

Please tell your CHIRS staff if you experience any health changes that may put you at greater risk of falls. Staff may be able to help you do things to reduce your risk of falls, or may refer you to a health practitioner or therapist that can help.



Equipment Safety:

If you have assistive devices to help you to get around, like walkers, canes, or wheelchairs please use them and keep them well maintained.



Medication Safety:

- ◆ If CHIRS staff are providing support to you related to your medications, please make sure to let staff know about any medication related changes.
- It will be important to talk with your doctor(s) if you notice any negative side effects. Don't make changes to your medications without talking to your doctor, as this could affect your health.
- Learn what each of your medications looks like and what it does, especially if you give it to yourself. This will help to reduce medication mistakes, which can be serious. Your doctor or pharmacist can help with that.
- Use a strategy that helps you to take the right medications at the right time. Your CHIRS community facilitator or pharmacist will have some ideas that could help.



Be Prepared for an Emergency:

- ◆ Go to the website <u>www.ontario.ca/emo</u> to learn what you can do to prepare for an emergency. There is also special advice for individuals living with a disability.
- ◆ Emergencies can occur suddenly and without any advance warning. Individuals and families play a very important role in preparing for times of crisis when emergency services, government resources and CHIRS resources may be strained. It is important to prepare to be self-reliant for at least three (3) days immediately after or during an emergency.



Infection Prevention and Control:

There are many infections that can spread from person to person causing much illness in the community. People get infections such as 'pink eye' and the common cold frequently. There are other more serious febrile respiratory illnesses such as pneumonia or influenza that we also need to be concerned about. We need to work together to reduce the risk of infection for everyone.

How to protect yourself and others:

- Talk to your doctor about getting the flu shot every year
- ♦ Sneeze into your sleeve not your hand
- If you are sick with a fever or other flu-like symptoms, or if your doctor tells you that you have an infection that can be passed on to others, please stay home,



◆ **Do call** the staff that are scheduled to visit you in your home.

prevent the spread of infection causing germs.

Hand Washing or using hand sanitizer is the one most important thing we can all do to



Wash your hands:

and

- Before and after preparing, handling, or serving food.
- After using the washroom.
- ◆ After sneezing, coughing, or blowing your nose.
- When your hands are visibly soiled.
- After handling garbage.
- ◆ Anytime you think you may have touched something with germs.

Other Infectious Diseases

There are some infectious diseases that a person can carry in their blood even if they are not feeling sick; for example, Hepatitis B and HIV/AIDS. These infections can be passed to other people, but usually through contact with the blood of an infected person or by sexual contact.

Will it affect my CHIRS services if I have an infectious disease?

- ♦ CHIRS will continue to provide services to you as long as you are willing and able to do what you can to not spread your infection.
- In most cases, CHIRS will be able to keep information about your disease confidential, however there are some situations in which CHIRS has an ethical responsibility to reduce the risks to others by informing them with your consent. For example:
 - If you live in a CHIRS residential setting the staff who work with you and your roommates may need to be informed of your disease so they can protect themselves from being infected.
- If you are suspected of having an infectious disease, your doctor has a legal duty to report your disease to the Public Health Department. A Public Health officer may contact you to determine if anything needs to be done to protect you and others around you. This may mean informing certain people about your disease.
- As a last resort, if you continue to engage in behaviours that may put others at risk, your CHIRS services may be discontinued.

What if I don't have an infectious disease but am concerned about being exposed to one?

The staff at CHIRS will do everything they can to reduce the spread of infectious diseases. If you want to protect yourself, you can:

- talk to your doctor about getting available immunization shots (e.g. for Hepatitis A and B)
- never use other people's personal items such as toothbrushes or razors or share needles
- always use safer sex practices.

MODEL OF SUPPORT

We have found that success is more likely when services are geared toward the activities and goals that are truly important to you. Sometimes this means finding a new way to learn a skill. Other times, this means changing your environment to help bring out the best in you. It always means working together to find the most comfortable, productive and satisfying lifestyle for you.

We use these basic principles to guide our services:

1. Understand and appreciate the challenges that people are faced with.

Cognitive and **physical difficulties** often have a direct link to behaviour. Everyone experiences these difficulties differently. The better we understand the challenges, the better we can plan for success.

2. Prevention is the key to success.

The most successful and useful approaches focus on asking questions like "what led up to that?" or "how can we avoid that situation in the future?" Planning in advance, rather than dealing with the consequences, is more likely to have a positive result.

3. Collaborate, collaborate, collaborate.

When we are working together to develop goals that are both possible and relevant, interventions are more likely to be successful.

4. Life is not a dress rehearsal.

We are interested in assisting clients to reach goals and have successes that make a real difference NOW. Goals may range from doing laundry independently to finding a job. All may be equally important in leading your life with personal satisfaction and dignity.

Your goals are the key to Service & Care Planning

Services are planned in partnership with you, your family and other service providers that you would like to include. Your goals and ongoing service needs are the focus of the Service & Care Planning process. Long-term goals for community living or specific short-term goals for new experiences are recorded in your Service & Care Plan and you and your team can review and update it regularly. Please note that Service & Care Planning only occurs if you are in the community support services or residential programs.



How will the staff at CHIRS help me to reach my goals?

Staff members are encouraged to use a 'mentoring' approach when working with you to learn new skills. Unlike school, there are no quizzes or tests! Mentoring means that staff members will give you information, answer your questions and help you figure things out - there is no guessing involved. By working side-by-side with workers, you can develop supports and daily routines that are right for you.

How much support will I get?

When you are admitted to CHIRS services, the number of hours of service you are eligible to receive will be reviewed with you. Your staff will carefully plan with you and your team to make sure this time is used to help you work on goals that are important to you, that help you feel productive and that promote your independence.



Although staff members are there to help, your full participation is necessary for your success.

EVERYDAY ETHICS

CHIRS and its employees are responsible to behave in a professional, respectful way that honours the dignity, individuality, and safety of our clients. CHIRS also has an ethical and legal responsibility to provide our employees with a working environment that is safe.

The CHIRS Code of Ethics provides us with principles that help us deal with situations and guides us in our working relationships with clients, family members, CHIRS staff, as well as community professionals and the general public.

The **CHIRS Code of Ethics** is made up of the following principles:

- ◆ Respect for the Dignity of people which means that we value the dignity of individuals and their right to respect, privacy, confidentiality and choice.
- ◆ Responsible Service Provision means that CHIRS strives to provide service in a way that responds to your needs and preferences. We also recognize that certain choices can be risky, and staff will want to work with you to reduce the chance of harm.
- Integrity in Relationships means that in our professional relationship with you, staff will strive to be honest, accountable, and maintain appropriate relationship boundaries.
 (See also page 36)
- Responsibility to the Community means that in addition to being responsible to the clients we support, CHIRS also needs to be responsible to others in the community.



Sometimes, following one principle can make it hard to follow another principle. This is called an Ethical Dilemma, and is often challenging. Please the example below:

An Everyday Ethics Example:

Joe is choosing to spend a lot of his money on lottery tickets and then he does not have enough money to buy groceries. If staff are only respectful of his **dignity** and choice, they would not say anything about how he spends his money. However, they <u>also</u> have a **responsibility** to help him think about choices that are more healthy, like saving money for groceries.

A tool that CHIRS uses to help us make decisions about the most ethical way to deal with a situation is called the **Ethical Decision-Making Worksheet**. The worksheet is based on the word **IDEA**:

I	Identify the facts
D	Determine ethical principles involved
E	Explore options
Α	Act on your decision and evaluate

Joe's Options:

Staff realize they cannot stop Joe from buying lottery tickets, as that would not respect his dignity, and probably would not work. But they also cannot ignore what is happening because Joe's health is suffering. They will, however, talk to him about different options - like buying his groceries before anything else, or making a budget to see how much he can actually afford to spend on lottery tickets, or other creative options that they come up with together.

If you and your support team are dealing with a challenging situation that feels like an ethical dilemma, ask your staff about using the Ethical Decision-Making Worksheet.

MANAGING YOUR RISKS

Risk-taking is a necessary part of life for everyone. We all take risks to reach new goals, experience new things, and reach new levels of independence.



Often this can be exciting and wonderful; however, it is important to recognize

that although some risk-taking is necessary for growth, other risks may create problems or safety concerns that you should avoid. The challenge is learning how to anticipate situations that may be risky for you, and making a plan to manage that risk in a way that helps to keep you safe.

What risky situations should I be aware of?

Everybody is affected differently by their brain injury, and it is impossible to list all the situations that could be risky for different people. These are a few examples that may be relevant for you:

1. Vulnerability in the community

Difficulties with memory and judgment may make you more vulnerable to dishonest people in the community. It may be harder for you to resist forceful sales people or to figure out if someone is really acting in your best interest. Some temptations like alcohol, drugs, and promises of sex or easy money may also be harder for you to resist. It is important to recognize these as risks to your money, health, and emotional well-being.

2. Increased risk of being injured

Some of the physical challenges that result from an ABI include **ataxia**, reduced muscle control, and poor balance. This may leave you at higher risk for certain kinds of accidents. You and your support staff may need to think of strategies to reduce your risk for injuries.



3. Increased risk associated with making poor decisions

Because of changes in the way you think, you may have difficulty making good decisions. For some people this includes challenges with judgment or impulsivity, e.g. you may find that you act before thinking, get angry more easily, or make questionable financial decisions.

What can I do to manage risks in my life?

Get to know your strengths and limitations.

It's important to have a realistic view of yourself. It often helps to talk to people you trust, such as family members or CHIRS workers.

Use compensatory strategies.

This means using tools to make up for challenges that you may have in certain areas; for example, if you have a poor memory and are worried about getting lost, you may choose to write down directions to where you are going and bring along a cell phone.



Ask for help and advice.

It isn't always easy to ask for help, but when you are not sure about something, please ask. CHIRS' staff is understanding and will take your concerns seriously without judging you.



How does CHIRS address risk taking?

- CHIRS will respect your rights and support you to make decisions about your life and will also be looking out for your safety and well-being.
- CHIRS deals with all risky situations on an individual basis.
- ◆ As mentioned earlier, some risk-taking is necessary to achieve your goals and grow. CHIRS will support you to take reasonable risks to reach your goals.
- When possible, CHIRS staff will problem-solve with you regarding risky situations to try to prevent or reduce the chance of something negative from happening.
- In rare situations, CHIRS may refuse to support you when the risk to you as a client, CHIRS staff, or property is too great.

Family members have their own concerns about risk-taking. Here is one person's story...

"I think it is necessary for ABI/TBI survivors to be able to take a certain amount of RISK as it is needed to boost their confidence and self-esteem. My spouse is a client of CHIRS in the residential program. We recently attended a St. Patrick's Day party at the CHIRS Club. My spouse and I were cutting apples to make scones - this was a very scary task for him to take on (scary for me, but I don't think it bothered him one bit). I was very nervous, afraid he might hurt himself, cut his fingers off with this very LARGE knife, or maybe just get a stab wound! Well, everything went just fine - he did a great job - no wounds, just a few more gray hairs for me!"



YOUR RELATIONSHIP WITH CHIRS STAFF

For many of you, this may the first time that you have worked with support staff such as those at CHIRS. It can be a confusing relationship in that staff members may feel like friends at times. They are friendly and interested in how you are doing. They may support you in situations that are fun and social and sometimes very personal. However, the relationship is a professional relationship and is different from a 'friend' relationship.

What is a professional relationship?

This means that staff members are there to support you as part of their job and their focus is on your safety, well-being, and your success toward the goals that you have set for yourself. They will support you in the ways that are described in this Handbook.

This also means that staff members will <u>not</u> accept invitations to do social "friend" activities with you, will not go on dates with you, or develop a special relationship with you outside of your CHIRS support. Staff will not share a lot of personal information with you and may remind you about that if you ask. These guidelines are called staff-client "boundaries."

Why are boundaries necessary?

Most agencies that provide some kind of support or counselling have guidelines (boundaries) like these. These boundaries help us all to know what to expect from each other. They are an important reminder that the focus of the staff-client relationship is you and your goals. They are also a way to ensure that clients are treated equally and do not receive different treatment because of different relationships.

What about gifts?

The staff at CHIRS will not accept individual gifts for the same reasons. You may instead choose to express your thanks to a group of staff or to CHIRS as an agency. We very much appreciate your positive remarks and encouragement.

COMPETENCY AND SUBSTITUTE DECISION MAKERS

Since your brain injury, you might have heard people use words such as 'competency' or 'capacity.' You may have also heard the terms 'substitute decision maker,' 'power of attorney' or 'legal guardian.' This is a complicated legal topic and everyone's situation is different.

What do 'competency' and 'capacity' mean?

These words mean the same thing. They simply refer to your ability to understand the information that you need to make a decision, including the positive and negative consequences of your decision.

For example, if you are trying to decide whether or not to have a certain medical test completed, you would need to understand the following:

- what is the test for
- what are the possible risks
- what might happen (good and bad) if you decide to have the test
- what might happen (good and bad) if you decide not to have the test.

If you understand the relevant information related to the decision you have to make, you are considered competent, unless you have been deemed legally incompetent to make the decision you are presented with (e.g. financial, personal care, treatment).

What kinds of situations does this apply to?

There are several kinds of decisions where your competency to make a decision will be considered. Some decisions that relate to your CHIRS services may include:

- ◆ Decisions about personal care or treatment, for example, support services, medical or psychological treatment, and sharing of information related to these services.
- Decisions about **finances or property**, for example, money management.

Who decides if I am 'competent' or not?

There are a couple of different ways for this to be decided:

- (1) You can have a formal assessment done by someone called a 'capacity assessor.' Sometimes family members, or others who know you, may request this formal assessment if they are concerned about your ability to make decisions.
- (2) If no formal assessment has been done, then in situations where you require some kind of treatment, the health care practitioner that you are dealing with can determine whether he or she believes you are able to understand the important information that is being presented to you. This includes understanding the positive and negative consequences of your decision.

What happens if I am found to be 'competent?'

The law says that you have the right to make the decision yourself. Although no one else has the authority to make the decision on your behalf, it's often a good idea to discuss important decisions with people you trust.

What happens if I am found to be 'incompetent?'

This means that someone else will be asked to make the decision for you. This person is called your Substitute Decision Maker (SDM).

What is a 'Substitute Decision Maker' and who would be mine?

A Substitute Decision Maker is someone who has the authority to make decisions for you. This might be someone that you chosen in a 'Power of Attorney' document, a 'Legal Guardian,' a 'Public Trustee' or a family member that is your 'next of kin' according to the law. By law, your Substitute Decision Maker is expected to make decisions that they think you would have made for yourself if you were competent. Please refer to the glossary for definitions and clarification of the differences between the terms.

Will I always be considered 'competent' or 'incompetent?'

- ◆ Not necessarily. If you have been deemed legally incompetent for finances or personal care, you can challenge the court's decision, which involves having your competency re-assessed.
- ◆ If you have not been formally assessed, you may be competent for some decisions but not for others. For example, you may be able to decide what programs you want to attend and how you want to spend your day, but you may be unable to look after your money.
- ◆ People may also be considered competent at one point in time and later be considered incompetent or vice versa.

What does this have to do with CHIRS services?

- When you receive services from CHIRS, you will have a number of things to make decisions about or give consent for, such as signing your Service Agreement, deciding what kind of support you wish to receive, and deciding which programs you would like to attend.
- Upon entering CHIRS services, CHIRS will request information about your Substitute
 Decision-Maker, if you have one, to ensure we are getting consent from the right person.
- ◆ CHIRS will also discuss a decision-making process with you and your family so that your rights are being respected and your family is as involved as you want or need them to be.

HOW CHIRS WORKS WITH FAMILIES

CHIRS believes in working with clients and families in a 'family-centered' way. Being "family-centered" means that we encourage your family to be part of your support team, if they are available and you want them to be involved. CHIRS believes that families are a valuable resource because they know a lot about you, such as what you were like before your brain injury and what has gone on since that time. Families are also generally concerned for your well-being and want to support you to do the best you can.

How much information is shared with my family?

That depends. CHIRS generally encourages sharing of information with families, because we have found that family involvement and support is often helpful. If you are competent and make your own decisions about who can receive information about you, you can decide whether your family receives information. If you have a Substitute Decision Maker who makes these decisions for you, that person will decide how much information is shared. It should be noted that competent individuals who give permission to share information with their family members, may later ask that specific information not be shared. This expressed wish to keep specific information confidential must be respected within the limits of confidentiality.

(Please see the pages about Confidentiality and about Competency and for more specific information.)

How is my family involved in making decisions about my support needs?

When it comes to making decisions about your support, it often works best to talk about the decision together with your family and your CHIRS support team. Most of the time, we are able to make a good decision when we work on it together. Occasionally, you and your family may find it hard to agree on a decision. If the decision involves CHIRS services, CHIRS is required to listen to the person who has the legal right to make the decision. That person may be you or it may be your **Substitute Decision Maker**.

How are families affected by brain injury?

Families are very different in how they cope with and adapt to brain injury. It depends on so many different factors, including the type of relationship they have with you and how you were affected by your injury. Your family may experience some of the same feelings that you have experienced since your brain injury, such as loss and sadness that things are not the same as they used to be. They may worry about you and hope that you will be okay. Like you, they may be interested in learning all they can about your brain injury. This information helps them understand what you are going through and how they can best support you.



How will CHIRS support my family?

- ◆ CHIRS employees are sensitive to the needs and experiences of families, and will work with families in a supportive way.
- ◆ Families are welcome to come to a monthly support group where they can meet other family members who have similar experiences, and learn more about brain injury.
- ◆ The CHIRS Social Worker and Neuropsychologists can also provide short-term counselling to help families understand and adjust to the many changes that come with brain injury.

CHALLENGING SUPPORT ISSUES

INTRODUCTION

Many CHIRS' clients face support issues that can be complicated and sensitive, such as those that will be discussed in this section. These issues have been included because:

- (1) They are issues about which clients and families often have questions.
- (2) They are issues that are complicated in that they involve personal rights, risk, values, and morals.

The issues described in this section include:

Alcohol and Drug Use

Tobacco Use

Sexuality

Physical Support

Positive Approaches to Changing Behaviour



The following section describes how CHIRS will support you in dealing with these issues.

ALCOHOL AND DRUG USE

CHIRS understand that using alcohol and other drugs is a personal choice. However, there are a lot of really good reasons to avoid using drugs and alcohol after brain injury. Problems with substance use are very common in the people we serve, and CHIRS strongly believes that it is important to help people to prevent the problems that can come with substance use after brain injury.

For these reasons, it is CHIRS policy that no one, staff or clients, may use alcohol or other substances while participating in a CHIRS event or service. If you appear intoxicated when you come to CHIRS, we will help you to find a safe way to get home. We may then begin working with you on a plan that will prevent you from coming to CHIRS in an intoxicated state in the future.



What are the Effects of Substance Use After Brain Injury?

A brain injury kills and/or disconnects brain cells. Because of that, the injured brain reacts differently to alcohol and drugs and this interferes with healing. To recover well, the brain needs all of its resources. Here are some good reasons to avoid drugs and alcohol after a concussion or brain injury:

- People who use alcohol and other drugs do not recover as completely or as quickly.
- Problems with balance, walking and talking are made worse by alcohol and drugs.
- Difficulty with problem solving, memory and other thinking skills are made worse by alcohol and drugs.
- Alcohol and drugs have a quicker and more powerful effect on a person after a brain injury.
- Alcohol increases depression.
- Alcohol and drugs often interfere with medications prescribed after a brain injury.
- ♦ Alcohol and drugs can increase the risk of having a seizure after a brain injury.
- Alcohol and drugs can increase the risk of having another brain injury.

How does CHIRS help with Problem Substance Use?

CHIRS has partnerships with the Centre for Addiction and Mental Health (CAMH) and Addiction Services for York Region (ASYR) in order to provide the best possible services for people who are experiencing problems as a result of using alcohol or other drugs.

CHIRS has staff members who are trained as substance abuse counsellors and we can also help you to get the services you need or want outside of CHIRS - at CAMH, ASYR or other agencies.

CHIRS takes a 'Harm Reduction' approach to substance abuse problems. That means that you don't have to start out saying that you want to stop your substance use. If you are noticing that there are some problems that come with drinking or drug use - or if you find that others are concerned about your substance use and you want to learn more about it, we'll work with you to set goals for counselling that you can feel good about. CHIRS provides these services on an individual and group basis. Just let your CHIRS worker know you're interested.

TOBACCO USE

CHIRS recognizes that although smoking has serious health risks, it is a lifestyle choice that people are free to make. CHIRS discourages smoking, but respects the fact that if you are aware of the risks involved in smoking and choose to smoke anyway, you must be allowed to smoke.



However, there are some limitations regarding smoking that you need to know about:

- ◆ There is no smoking in any CHIRS indoor facility. This includes the Finch Avenue site and all CHIRS residential sites.
- If you require staff support to go outside to smoke, you may need to wait until a staff member is available to accompany you.
- If you do not appear to understand the risks of smoking and the benefits of quitting or if you have been assessed to be not competent to make decisions regarding your personal care (as discussed in the <u>Competency and Substitute Decision Makers</u> section on pages 35-37), your Substitute Decision Maker and your support team at CHIRS may make a plan that restricts or discourages your smoking.

If you do smoke, there are outdoor smoking areas at all CHIRS locations (Aldebrain, St. Georges, and Finch Ave. W.) that we ask you to use. Please respect the environment and dispose of your cigarettes in the available containers.

CHIRS staff will gladly assist you in trying to quit smoking, or will refer you to someone who can help if that is one of your goals.

SEXUALITY

Sexuality is a normal, healthy part of an adult's life. However, this can be a very challenging issue for clients and families following a brain injury. CHIRS understands that sexuality issues tend to be sensitive and staff will provide support in a confidential way. Whether you are in a relationship or not, adults do not generally choose to discuss issues regarding their sexuality with their parents or other family members. However, after a brain injury, families may become more concerned about sexual decisions. Families can know that CHIRS will support clients, as needed, in making responsible

As a CHIRS client, you have the following Rights regarding sexuality:

- the right to have your sexual identity accepted and understood
- ♦ the right to engage in sexual relationships and intimacy
- the right to privacy

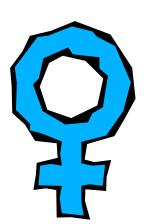
decisions involving their sexuality.

- the right not to be judged because of your sexuality
- the right to be free from unwanted sexual attention.

You also have some **Responsibilities** when it comes to sexuality:

- Do not push your sexuality or your sexual values on others.
- Respect that others may see sexual issues differently that you do.
- Respect the privacy of others.
- ◆ Do not make sexual comments or touch someone sexually unless the other person has given their consent.
- ◆ Do not make sexual comments or engage in sexual/intimate behaviour in public places where some people may be offended.
- ♦ Respect feedback from others about your behaviour. Others may not welcome your comments or behaviour. Remember that "No Means No."
- Under no circumstances are sexual behaviours or comments toward staff acceptable.

Knowing your rights and responsibilities helps to ensure that CHIRS is a safe and comfortable place for everyone.



CHIRS can provide support to you by:

- supporting you in making choices that will safeguard your health, safety and emotional well-being.
- helping you get the information and counselling you need about safer sex practices,
 contraception, sexually transmitted diseases, and other sexual issues.

Do you live in a CHIRS residential setting?

Sexual issues become more complicated if you live in a shared residential setting. You have an additional responsibility to consider how your behaviour will affect your roommates. To ensure that everyone living in your apartment or house feels safe and comfortable, a list of guidelines will be developed by you and your roommates about issues such as behaviour in the residence and overnight guests. You have a responsibility to respect these guidelines.



PHYSICAL SUPPORT

Many people experience physical challenges after brain injury, such as weakness or paralysis, poor balance, and reduced ability to move independently. In fact, you may need to use a wheelchair, walker, cane, or other adaptive aid to help you get around and complete your daily activities more safely. You may also require some physical support to accomplish your activities of daily living, such as showering, toileting, or participating in a community activity, such as swimming or bowling.

What is Physical Support?

Physical support refers to when a staff member helps to support your body weight by providing physical guidance, such as during a transfer.

What guidelines do CHIRS staff follow in providing Physical Support?

CHIRS has a "no weight bearing" policy in order to protect the safety of both clients and staff. This means that CHIRS' staff <u>cannot</u> take on any client weight during daily tasks, transfers, or during falls.

CHIRS staff provide physical support in the form of hands on guidance or cueing only. Examples of this type of support may include removing footrests and seatbelts, positioning a client's feet before a transfer, guiding their hand to an appropriate place to grab onto a transfer pole, or gently directing client hips towards a transfer surface.

CHIRS focuses on environmental supports and modification, the use of assistive devices, and the use of strategies and routines to support individuals in their daily tasks, including transfers. Our focus is on developing safe transfer routines, falls prevention, and on enabling clients to complete daily tasks in a way that safely promotes maintenance of function, independence, and dignity.

CHIRS strives to provide physical support in a way that minimizes the chance that you or CHIRS employees will get hurt. To ensure the safety of all involved, CHIRS staff will only provide physical support that has been designed by a qualified professional. If you require physical support, we will ask that you complete an assessment with an occupational or physical therapist during your initial assessment period to ensure that the physical support is safe for you. CHIRS may require the assessment to occur before any support is provided if there are significant concerns. If support needs change, CHIRS may ask for a new assessment.

Are there any limits on the Physical Support that CHIRS will provide?

Yes there are limits. Within CHIRS 'no weight bearing' policy CHIRS staff will work hard to find the best ways to support to you. CHIRS reserves the right to refuse to provide physical support during an activity if a staff believes that it presents a risk to you or to the staff providing the support. CHIRS will make every effort to find other ways to meet your physical support needs for your essential daily activities.

However, physical support for participation in optional recreational or vocational activities may be discontinued if the activity is felt to be unsafe for you or CHIRS staff.

Will CHIRS staff 'catch' a falling person?

CHIRS staff will not manually intervene to stop a fall for a variety of reasons including the risk of injury it presents to both staff and clients, CHIRS 'no weight bearing' policy, and the fact that our frontline staff are not healthcare professionals. At CHIRS our focus will be on the development of safe routines and fall prevention. Our goal is to reduce the risk of falls and fall related injuries through environmental modification, the use of assistive devices, individualized prevention planning and support routine development, and education. It is important to note that even with careful assessments, planning, and interventions, a risk of falls may persist for some clients.

Does 'catching' a falling person cause injuries?

Yes. Research indicates that the person who is 'catching' the falling person is at risk of injury due to excessive forces, awkward poses, and heavy loads which may cause injuries to their back, neck, or shoulders. In addition, the falling person is also at risk of injury. Attempting to 'catch' a falling person disrupts their reflex to protectively extend their arms overhead, presents the risk for contact injuries (shearing, shoulder dislocation), and generally could result in more damage than allowing the person to fall.

If you have concerns about your risk of falls or the risk of your family member while in service at CHIRS, please speak to your Facilitator or Service Coordinator about developing an individualized prevention plan.

POSITIVE APPROACHES FOR CHANGING BEHAVIOUR

Since your brain injury, you may feel or act differently than you did before. Dealing with these changes can be very frustrating and upsetting for you and the people who care about you. However, a positive approach can make all the difference.

What are Positive Behavioural Supports?

'Positive behavioural supports' means focusing our efforts on preventing the problems that we can prevent. It also means having a good working relationship so that we can get through the difficult times in a collaborative way. Sometimes this means working with a Behaviour Therapist to understand what triggers a problem and then working with you to make changes that help things go better. It might mean changing things in the environment or changing how your facilitators work with you. Sometimes it means providing support to you and/or your family for developing new ways of managing strong emotions or difficult situations. Sometimes medication is helpful.

CHIRS approach is holistic and, as much as possible, our team collaborates with clients, family members and other health care providers. We want to take into consideration the biological, psychological and social aspects of each individual client, within their environment. We try to use evidence-based practices where they exist. These are interventions that have been



researched and shown to be effective. As much as possible, we like to use data. Data is information that we gather about behaviour by observing, asking questions, or having a person fill out a questionnaire. This information helps us figure out what we need to do and whether or not what we are doing is actually making the right difference.

How will CHIRS staff support me to better manage my frustration and anger?

CHIRS staff will work with you to create positive daily routines. These routines will take into consideration your personal preferences and perhaps things like how your environment is set up. Changes like rearranging your room or your schedule may decrease stress in your life. You may find that since your brain injury you have less control over your life. CHIRS staff will provide opportunities for you to make choices and decisions. CHIRS believes that if we are able to work together and compromise, many difficult situations can be avoided.

What if I am still feeling anxious, angry or sad?

We will problem-solve together. Sometimes a simple suggestion by you or a family member may help. Other people who can help include the CHIRS Social Worker, Neuropsychologists, Neuropsychiatrist, Behaviour Therapists, and Occupational Therapist. You may choose to work with one or more of these people, either individually or as part of a group. They may also provide suggestions to you, your family, and/or other CHIRS workers. If you decide to meet with the Neuropsychiatrist, he may prescribe medication that can help you to better manage your feelings and behaviours.

How will CHIRS staff respond if I loose control of my behaviour?

CHIRS staff members are trained in Nonviolent Crisis Intervention and will treat you with respect and dignity. They will listen to what you have to say and will try to support you to gain control again. CHIRS staff will only use physical intervention after all other approaches fail and it is absolutely necessary for the protection of individuals who are at risk of immediate harm.

Can CHIRS help me with goals like exercising more, or meeting people?

Absolutely. CHIRS workers will support you in working toward goals that are important to you. They will work with you to clarify your goal and then develop a plan for achieving it. The plan could include strategies to help you work around any challenges that might get in the way of you achieving your goal, such as memory challenges. For example, if you want to exercise more, staff could help you to decide what exercises you want to do, how often, how much time you want to spend, and where you will exercise. Staff might also help you put your exercise times into your schedule, and also develop a strategy to track your progress toward your goal.



The bottom line is that many people feel that issues with their behaviour stand in the way of them achieving some of their goals, such as getting and keeping a job and making friends. If you feel that there are areas that you want to work on, speak to your Primary Facilitator, and we can tackle it together.

GLOSSARY OF TERMS

Assessment

A process of determining your skills, abilities and areas of difficulty. This may occur by having you try certain activities or by asking you questions. The assessment helps us identify the areas in which you may want to develop your skills or where you may require support or assistance.

Autonomy

Making your own decisions, including the decision to choose someone you trust to help you.

Capacity Assessor

Assessors are persons who are authorized to conduct an assessment of a person's mental capacity for certain purposes, such as appointing a guardian for property, without going through the courts. They have appropriate professional backgrounds and have successfully completed a training course in capacity assessment. They are independent of the government.

Cognitive Difficulties

Includes difficulties in areas such as memory, perception, thinking, and problem solving.

Consent

Giving your permission or agreement, after you have all of the information that you need to do so.

Fee for Service

A situation in which a person or funder, such as an insurance company, pays for the services that a client receives.

Legal Guardian - of the Person

A Court may appoint a guardian of the person to make decisions on behalf of an incapable person in some or all areas of personal care. The guardian must be at least 16 years old.

Legal Guardian - of Property (and Finances)

A guardian of property is someone who is appointed by the Public Guardian and Trustee or the Courts to look after an incapable person's property or finances. The person must be at least 18 years old. A guardian is different from an attorney. An attorney is chosen by the individual, before becoming incapable, to act on his or her behalf, while a guardian is appointed after incapacity.

Mentoring

A process in which someone works with you as a coach or guide to help you develop the skills that you wish to gain.

Non-Violent Crisis Prevention and Intervention

A training program focused on the safe management of disruptive and assaultive behaviour. The program is designed to provide employees with principles and techniques of crisis management in order to gain the confidence necessary to handle crisis situations with minimal anxiety and maximum safety.

Personal Care

Personal care includes health care, nutrition, shelter, clothing, hygiene, and safety.

Physical Difficulties

This includes any changes to your body that affect your ability to perform your daily activities, for example, balance, weakness or paralysis.

Power of Attorney for Personal Care

A Power of Attorney for Personal Care is a legal document in which one person gives another person the authority to make personal care decisions on his or her behalf, if he or she becomes mentally incapable.

Power of Attorney for Property

A Power of Attorney for Property is a legal document in which a person gives someone else the legal authority to make decisions about his or her finances if he or she becomes unable to make those decisions. The person who is named as the attorney does not have to be a lawyer. The power of attorney may be designed to come into force only after the person who gave it is no longer mentally capable.

Public Guardian and Trustee

The Public Guardian and Trustee's role is to act as a substitute decision maker of <u>last resort</u> on behalf of incapable people who have no one who is willing or able to act on their behalf.

Service Agreement

This is a CHIRS document that outlines the support you will receive from CHIRS, your rights and responsibilities as a CHIRS client, and the CHIRS complaint procedure. You or your Substitute Decision Maker are required to sign this agreement with CHIRS staff prior to receiving services.

Service Plan

Your Service Plan is a CHIRS document that is completed when you begin service with CHIRS and updated on an annual and/or as needed basis. The Service Plan summarizes your goals, your ongoing support needs, and what CHIRS will do to provide that support.

Statutory Guardian

A statutory guardian is a person who is appointed to act on another person's behalf without going to court. Statutory guardianship applies only to property or finances; there is no statutory guardianship for personal care. A statutory guardian can be the Public Guardian and Trustee (PGT) or someone approved by the PGT to replace the PGT as statutory guardian.

Substitute Decision Maker

A person that has the legal authority to make decisions on your behalf, such as a Guardian, someone who has Power or Attorney, or in some cases a family member.

Support Team

Your support team is made up of the CHIRS staff members who work with you to help you reach your goals or participate in CHIRS programs and services. Your support team may consist of a Primary Facilitator, Senior Facilitator, Service Coordinator, or Intake Facilitator.

Different clients may have different staff on their support team. Please see your 'MY SUPPORT TEAM - CONTACT SHEET' for the names of the people on your support team.

Third Party Payor

Someone other than you or the service provider (e.g. CHIRS) that pays for the services that you receive, for example, an insurance company.

