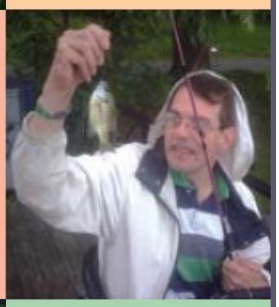
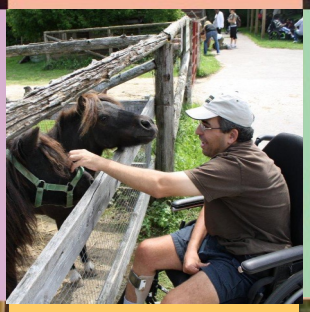
CHIRS

Community Head Injury Resource Services





Client & Family HANDBOOK

Ontario Health

ACCREDITATION CANADA
AGRÉMENT CANADA

Driving Quality Health Services
Force motrice de la qualité des services de santé

Updated: October 2025

CHIRS
Community Head Injury Resource Services of Toronto

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COMMUNITY HEAD INJURY RESOURCE SERVICES

Strategic Plan 2025-2027

AT A GLANCE

VISION:

TO BE LEADING-EDGE IN THE PROVISION OF EVIDENCE-BASED COMMUNITY AND CLIENT-CENTRED SERVICES IN THE FIELD OF ACQUIRED BRAIN INJURY

MISSION:

CHIRS EXISTS TO IMPROVE THE QUALITY OF LIFE FOR PERSONS LIVING WITH THE EFFECTS OF ACQUIRED BRAIN INJURY

SUPPORTING AND SERVING COMMUNITIES:

CLIENTS AND FAMILIES
PARTNERS IN HEALTHCARE
STAFF AND VOLUNTEERS
WIDER COMMUNITY

WITH VALUES OF:

"PEOPLE FIRST"
DIVERSITY AND RESPECT
EXCELLENCE & QUALITY
INTEGRITY, ACCOUNTABILITY & ETHICAL CONDUCT
COLLABORATION, FLEXIBILITY, INNOVATION & ENTREPRENEURSHIP

2025-27 STRATEGIC PRIORITIES	GOALS TO DELIVER STRATEGY
INCREASE CAPACITY OF CLIENT SERVICES	ENHANCE CLIENT SERVICE DELIVERY THROUGH ADVOCACY AND THE STRATEGIC, EFFICIENT USE OF AVAILABLE RESOURCES.
ADVANCE EVIDENCE-BASED PRACTICES THROUGH CONTINUED DEVELOPMENT AS A CENTRE OF EXCELLENCE	ENHANCE CLIENT OUTCOMES AND FOSTER SYSTEMIC CHANGE BY GATHERING, ADVANCING AND PROMOTING ESTABLISHED AND EMERGING EVIDENCE-BASED PRACTICES.
ENHANCE LONG-TERM VIABILITY OF ORGANIZATION	ENHANCE FINANCIAL RESILIENCY AND HUMAN RESOURCE STRATEGIES THAT INTEGRATE DIVERSITY, EQUITY AND INCLUSION AND ENVIRONMENTAL, SOCIAL AND GOVERNANCE PRINCIPLES INTO OPERATIONS AND DECISION MAKING.

QUALITY, OPERATIONAL, AND ORGANIZATIONAL EFFECTIVENESS:

SAFETY AND WELLNESS | CLIENT SATISFACTION
STAFF ENGAGEMENT | STRONG INFRASTRUCTURE ADAPTABILITY & NIMBLENESS
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 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.

We are an internationally recognized, evidence-informed, and accredited ABI community service provider. CHIRS staff receive training and supervision from a sophisticated and creative clinical team. We are proud that our staff training and orientation program and our Ethical Framework each received 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 (2025 to 2029) for our most recent accreditation.

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 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,
Chief Executive Officer
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 (ABI).

CHIRS has four main program areas:

- Adult Day Services (ADS) and other social and recreational groups
- Community Support Services (CSS)
- Residential Services
- Clinical Services and Therapeutic and Educational groups

CHIRS is a not-for-profit charitable organization. We receive most of our funding from Ontario Health and the Ontario Ministry of Health. 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 2025-29. Earning accreditation means that CHIRS has consistently shown progress, commitment, and accountability in providing high quality client and family-centered services. 'Exemplary Standing' is the highest level awarded by Accreditation Canada.

In addition, CHIRS submission entitled *CHIRS Ethical Framework: Everyday Ethics in Acquired Brain Injury* was accepted as **a Leading Practice** by the Health Standards Organization (HSO), which is affiliated with 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 ABI 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” - Diversity and Respect
- Excellence and Quality
- Integrity, Accountability, and Ethical Conduct
- Collaboration
- Flexibility, Innovation, and Entrepreneurship

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; 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 and 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 (Central East ACSS 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)**

2019 Trillium Grant received for development of **Rooftop Garden** at Finch site

2020 New funding from the Central LHIN for **expansion of Community Support Services and Adult Day Services**

2022 New funding for **partnership with Reena**
Trillium Grant for the **replacement of the HVAC system** at Finch site

2023 Trillium Grant received for the purchase of **3 new vehicles**

2024 Partnership with Reena for supported housing units

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, Music Club, Cooking, and Bowling. CHIRS also has a drop-in center, known as 'The Club,' which is a great place to hang out and meet people. Some programs are also provided virtually.

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."*

Ashby Community Support Service (ACSS), Central East ACSS Program (CEAP), and Neurobehavioural Intervention Program (NBIP)

Community Support Services:

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

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."*

Clinical Services

CHIRS has a team of clinicians that include 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 CHIRS staff regarding client and family needs.

Please read the FREQUENTLY ASKED QUESTIONS for each specific program for more information about CHIRS services.

CHIRS Staff

CHIRS has a staff of approximately 160 individuals. Each staff has a university degree or college diploma. Staff who provide direct client support 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 receive intensive on-site training where they learn about client support and agency systems and procedures. They complete orientation, where they are introduced to the agency's philosophy and approach to service. They also receive comprehensive and ongoing training in a number of other areas, including:

Skills for working with Clients and Families

- Everyday Ethics
- Tools for Collaboration
- Brain and Behaviour
- Role of the Worker
- Sexuality and ABI
- Family-Centered Support
- Supporting Functional Mobility and Safe Transfers
- Medication Management
- Motivational Interviewing

Health and Safety related

- First Aid / CPR / AED
- Safe Management Training
- Infection Prevention & Control
- Prevention of Workplace Musculoskeletal Injuries

Who will be my main contact person?

Please check your *My Support Team* for contact information. If you have any questions about who to call and for what, please contact your Service Coordinator or Intake Facilitator and they will be able to help you.

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

Intake Coordinator maintains contact with individuals on the waitlist and individuals participating only in ADS; 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 is 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 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.

Mentor Coordinator oversees the ADS drop-in (the Club) and the CHIRS Mentor program, which provides volunteer opportunities for clients.

Behaviour Therapist provides assessment, treatment, and consultation; works closely with the CHIRS teams regarding client goals, daily routines, and behaviour management.

Occupational Therapist provides assessment, treatment, consultation and environmental safety evaluation; works closely with CHIRS teams regarding client's safety and functioning.

Social Worker provides individual, group, and family counselling; also 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 is a psychiatrist that specializes in brain injury and who provides assessment and treatment to individuals with mental health or behavioural challenges; also provides consultation to staff.

Clinical Director/Neuropsychologist monitors the clinical direction of the agency, oversees client interventions, and provides consultation to all CHIRS programs; also provides individual assessment and counselling, as well as group and family intervention.

Director of Programs and Services directs and leads the implementation of support services to meet client needs, works to ensure the effective and safe delivery of services to clients and the maintenance of a safe and healthy environment for staff; also oversees all aspects of programming for Community Support Services.

Manager of Community Support oversees all aspects of the Outreach Programs.

Manager of Residential Services oversees all aspects of the Residential Services.

Chief Executive Officer oversees and monitors the vision and growth of the agency; she reports to the Board of Directors.

These individuals can be contacted by calling the CHIRS Finch site at 416-240-8000.

Your Client Bill of Rights

How are my rights protected?

Ontario has a law called the *Connecting Care Act (2019)*. This Act contains a Bill of Rights, which is a set of rules about how people who receive community services should be treated. As a client, family member, or substitute decision-maker, you have the right to expect that every CHIRS employee will respect and promote your rights as follows:

1. **To be dealt with in a respectful manner** and to be free from physical, sexual, mental, emotional, verbal and financial abuse.
2. **To be dealt with in a manner that respects your dignity and privacy**, and that promotes your autonomy and participation in decision-making.
3. **To be dealt with in a manner that recognizes your individuality** and that is sensitive to and responds to your needs and preferences, including preferences based on ethnic, spiritual, linguistic, familial and cultural factors.
4. **To receive CHIRS services free from discrimination** as per the *Human Rights Code or the Canadian Charter of Rights and Freedoms*.
5. **A patient who is First Nations, Métis or Inuk** has the right to receive CHIRS services in a **culturally safe manner**.
6. **To receive clear information** about your CHIRS services in a format that is accessible to you.
7. **To participate in the assessment and reassessment of your needs**, as well as the development and revision of your care plan.
8. **To designate a person to be present with you during assessments**, and to **participate in the development**, evaluation and revisions to your care plan.
9. **To receive assistance in coordinating your services**.
10. **To give or refuse consent** to the provision of any CHIRS services.
11. **To raise concerns or recommend changes** related to the services that you receive, and with policies and decisions that affect your interests, without fear of interference, coercion, discrimination or reprisal.
12. **To be informed of the laws, rules and policies** affecting the delivery of your CHIRS services, including this Client Bill of Rights, and to be informed, in writing, of the procedures for initiating complaints about the services.

What are my responsibilities?

As a client of CHIRS, you have responsibilities. Some of these are outlined in the **Service Agreement** that you sign when you begin working with CHIRS; 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 (for clients in the CSS or Residential programs). CHIRS cannot make this happen without your involvement. You are expected to actively participate in setting goals, planning your support, and working with support staff toward meeting your goals.

2. DO NOT use alcohol or other drugs while participating in CHIRS services

Being intoxicated, or even just a little high, can make it harder to benefit from

services. Misusing prescription drugs can be dangerous. If you appear to be under the influence of alcohol or other drugs when you arrive at a CHIRS facility or program or when you meet with a staff member, CHIRS staff members may discontinue the service or activity or you may be asked to leave. If an ongoing problem of substance use develops, CHIRS will work with you to make a plan that considers the safety of the CHIRS community as well as your own goals. This may include asking you to participate in treatment for substance use or limiting or changing the way that services are provided. CHIRS reserves the right to discontinue services if a client's ongoing substance use poses a risk to themselves or to a member of the CHIRS community, such as risky behaviour while intoxicated or sharing or distributing alcohol or other drugs. For more information please refer to the 'Alcohol and Drug Use' section on pages 43-44.

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 strives to provide a healthy and safe environment that is free from discrimination in all forms. We are fortunate to have a very diverse group of staff and clients and it is likely that you will interact with individuals who may look or sound different from you.

It is expected that you treat everyone with respect regardless of their race, culture, gender, abilities, sexual orientation, or disabilities. Offensive language or behaviour that makes others feel uncomfortable because of their race, gender, or any other difference is not acceptable.

If maintaining respectful interactions with others is challenging for you, staff may work with you to make a plan to help you be more successful with this. Please refer to 'Positive Approaches for Changing Behaviour' on pages 49-50 for more information. If a participant is not able to interact respectfully, even with this support, CHIRS may limit or change the way that person uses CHIRS services.

The 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 speaking 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 that your concerns will be heard. Your main CHIRS contact people are listed on your *My Support Team - Contact Information* sheet.

2. Bring your concerns to the CEO

If you are not satisfied with the way your questions or concerns have been addressed so far, you may bring your concern to the CEO, Hedy Chandler. 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 Avenue West
Toronto, Ontario M2N 7G1

3. Bring your concern to the CHIRS Board of Directors

CHIRS has a Board of Directors, made up of volunteer community members. If you are not satisfied with the CEO's response, you may take up 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 TOO!!!

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?

1. **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 Information* sheet.

2. **Write a letter** to the Service Coordinator or the CEO, 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 Improvement process, CHIRS regularly uses Client and Family Surveys to help us improve our services and programs. We hope that you will take some time to complete these surveys because your input and perspectives are really important to us.

Client describes their experiences with CHIRS:

◊ *"CHIRS is a place and community where everyone is heard, everyone is valued and a chance for us all to come together. I feel heard and respected here!! Cheers to CHIRS."*

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 (SDM)

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 SDM. CHIRS will share only 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 Health 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 aim to ensure that your privacy is protected through practices and policies that relate to collecting, using, sharing, and keeping personal information and that are consistent with Ontario's *Personal Health Information Protection Act, 2004.*

Why does CHIRS need your personal health information?

Personal and financial information are collected in order to:

- Determine your eligibility for service, your eligibility for subsidy, and your service needs;
- Determine your ability to make your own decisions;
- Provide you with individualized services/treatment 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 for additional services to other healthcare providers;
- Do research to improve our knowledge of acquired brain injury.

What personal health information does CHIRS collect and keep?

- Your personal information related to the services provided or being requested;
- Reports on your goals, progress, and support needs and medical and psychological information that relate to your Service Plan. This information is most often shared with you or persons regularly acting on your behalf.
- 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, your photograph, and personal health information for everyday staff use and for use in an emergency;
- Recordings of you participating in activities and/or receiving treatment.

How does CHIRS collect your personal health information?

- We receive your personal health information from other agencies and organizations that 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. This may include assessments shared through a secure electronic system.
- Personal information is collected during your screening interview with the CHIRS Intake and Assessment team.
- Ongoing information is shared with us by others who are providing you with continuing service.
- We may record you (photo/video/audio).

When does CHIRS disclose personal health information?

- CHIRS discloses your personal information only for the reason(s) 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 and for the purpose of submitting generalized assessments to EHealth.
- CHIRS makes referrals on your behalf to other healthcare or community service providers for additional services or to apply for financial benefits.
- For the purpose of promoting CHIRS programs and services.
- In the course of running a social media program that you have chosen to participate in.
- 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.

What choices do I have regarding my personal health 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.
- You can ask us not to record you or you may choose not to pose for a particular picture.
- In certain circumstances, limiting our ability to collect information may impede CHIRS 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.

Limits of Confidentiality:

- CHIRS services are offered in both private and public spaces; the support you receive may happen within the community. Your actions and presence in public areas cannot reasonably be held in confidence.
- Reasonable efforts will be made by CHIRS to identify in advance clients who do not want their picture taken or image recorded and CHIRS staff will assist in facilitating others to respect those wishes.
- CHIRS promotes the responsible use of social media to enable inclusiveness and the further development of a sense of community; however, social media sites are not private and there are risks to participation. Although efforts are made to mitigate the risks to clients through ongoing program support and education, CHIRS cannot eliminate all risks.

Who do I contact for more information?

The CHIRS Privacy Officer can tell you more about how we protect your health information. If you have questions or concerns, contact Michele Graham, Privacy Officer:

Telephone: (416) 240-8000, ext. 508
E-mail: micheleg@chirs.com
Address: 62 Finch Avenue 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 Health and Safety

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. At the same time, they must 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. We will be most successful at creating a safe and healthy environment for everyone if we all work together. Clients, families, staff, and volunteers are all part of the CHIRS safety team.

What is CHIRS doing to keep the focus on health and safety for everyone?

Staff Training

Staff are trained regularly in providing services in a way that is safe for you and for them. You will see examples in the information below. Staff also receive regular training in *First Aid* and *CPR/AED* to equip them to deal with medical emergencies. *Emergency Response Training for Opioid Overdose* is also provided.

Safe Management Training is provided to all staff that provide direct support to clients. *Infection Prevention and Control* training is also provided to all staff.

Assessment and Support Planning

Clients in ACSS, NBIP and residential programs go through an **assessment process** and have an **individualized Service and 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 they come 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 participate safely. 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

Client Safety Incidents, including those resulting in harm, no harm, and near misses, are reported, investigated, reviewed and tracked to guide quality improvement activities, prevent recurrence, improve client-safety-related systems, promote learning, and enhance the CHIRS safety culture.

Staff Workgroups and Development of Policies

A number of workgroups, such as the *Client Safety and Wellness Workgroup*, *Community Safety Workgroup* and the CHIRS *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 information for clients, families, and visitors regarding various safety issues. Periodically, presentations/workshops regarding current health and safety issues are provided in the CHIRS Club or at Mentor meetings for clients and others.

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

The 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 because 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 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 regarding infection control practices such as hand hygiene, use of personal protective equipment (PPE), management of "sharps", disinfecting, cleaning and housekeeping procedures. In addition, CHIRS does regular audits to ensure that staff are following health and safety procedures. CHIRS also monitors the rates of infectious illnesses of clients and staff. We do so to ensure that we can contain and properly respond to outbreaks.

Did you know that good hand hygiene (hand washing or sanitizer) is the single most important thing we can 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 increased risk because of challenges with swallowing, impulsivity and judgment. Specific training and equipment that may be needed in an emergency is provided to staff to help them prevent incidents and intervene. You may notice that some foods are no longer served at CHIRS; that is because they are foods that are riskier 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 medications to clients 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 **Pandemic and Disaster Preparedness, Response and Recovery Plan**, and an **Inclement Weather policy**.

Pest Management

Pests are a fact of life in the community and can affect anyone. Even clean environments can be affected by the presence of pests. Early detection and prompt reporting is the best response to the identification of the presence of pests in the environment.

In order to prevent infestations of household pests and minimize the potential spread of disease, CHIRS follows the principles of *Integrated Pest Management (IPM)* to prevent and control infestation of household pests, using strategies that minimize health risks and involve application of pesticide treatment only as necessary. Maintaining a clean environment and reducing clutter to eliminate hiding spots for pests are a main line of defence. CHIRS staff, clients, and visitors work together to prevent, control, and treat pest infestation.

Safety for CHIRS Staff in your Home and Community

What are YOUR health and safety responsibilities?

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 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 and/or or may refer you to a healthcare 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. Support in this area will be outlined in your individualized *Service and Care Plan*.

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 is important to talk with your doctor if you notice any negative side effects from a medication. Don't make changes to your medication without talking to your doctor, as changes could negatively 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.
- If you need to test your blood sugar while you are at the CHIRS Club, we ask you to bring your own sharps container and dispose of your sharps safely.

Be Prepared — Emergencies, Disasters and Pandemics

As an agency, CHIRS has a *Pandemic/Disaster Preparedness, Response and Recovery Plan* that helps us be ready for these situations and guides our response. Our plan includes having supplies available so that staff can work safely as well as guidelines to help us decide if certain services need to change or temporarily close. Being prepared in one of the most important things you can do to help deal with these situations. Some emergencies occur suddenly and without any advance warning, while other situations, like a global pandemic, can develop over time. It is really important that you have a plan for what to do in the event of an emergency situation. Things to consider include ensuring that you have enough essentials (such as food, water and medications) on hand. As part of CHIRS service and care planning process, emergency planning will be discussed to help you put a plan in place. To learn more about what you can do to prepare for an emergency, check the website www.ontario.ca/emo.

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, 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 that they can protect themselves from being infected.
- If you are suspected of having an infectious disease, know that your doctor has a legal duty to report certain infectious diseases to Public Health. 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 I am concerned about being exposed to one?

The staff at CHIRS will do everything that 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 (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, such as using a condom. CHIRS has free condoms available in the Club if you need or want them.

Infection Prevention and Control

While this has always been an important topic, the COVID-19 Pandemic created an even greater awareness about the importance of working together to control the spread of infectious diseases. Infections that can travel from person to person quickly can cause widespread illness in the community. Infections can vary in severity, such as 'pink eye' and the common cold, which are less severe, and more serious respiratory illnesses (such as COVID-19, pneumonia or influenza), which can be life-threatening. Here are things you can do to help control the spread of infections:

How to protect yourself and others

- Talk to your doctor annually about getting the Flu shot, as well as the COVID-19 vaccine.
- Familiarize yourself with the precautions needed to keep yourself and others safe, such as:
  - ☐ Sneeze/cough into your sleeve – not into your hands.
  - ☐ Frequent **hand hygiene** – washing your hands with soap or using hand sanitizer – is the one of the most important things we can do to prevent the spread of infection-causing germs.
  - ☐ Wearing a clean face mask and maintaining a distance of at least 2 metres from others helps to prevent the spread of COVID-19.
  - ☐ If you or other members of your household 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 and follow all Public Health directives**.
    and
  - ☐ If you are a non-residential CHIRS client, **call the staff** that are scheduled to visit you in your home to **cancel their visit.**

Wash your hands

- ☐ 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
- ☐ Before putting on or after taking off your face mask
- ☐ Anytime you think you may have touched something with germs.

CHIRS Support Model

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. 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?"

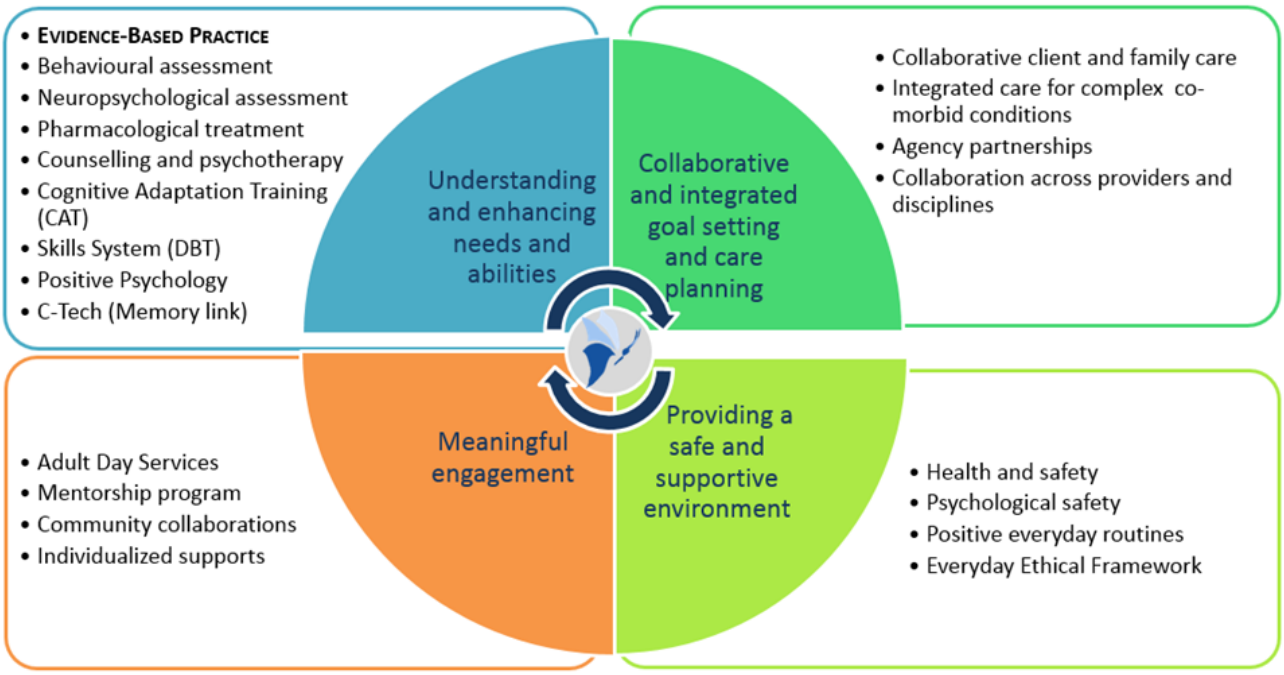
3. Collaborate, collaborate, collaborate.

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.

The CHIRS Clinical Model



Your goals are the key to service and 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 service and care planning. Long-term goals for community living or specific short-term goals for new experiences are recorded in your Service and Care Plan and you and your team can review and update it regularly. Please note that service and care planning is done only if you are in the Community Support Services or Residential programs.

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

Staff 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 will give you information, answer your questions, and help you figure things out - there is no guessing involved. By working side-by-side with staff, 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 that 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 are there to help, your full participation is necessary for your success.

Everyday Ethics

CHIRS and its staff 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, supportive, and inclusive.

The *CHIRS Code of Ethics* outlines principles that help us deal with situations and guides us in our working relationships with clients, family members, and 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 and accountable and maintain appropriate relationship boundaries. (Also refer to 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 see 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 respectful only of ***his dignity****, they would not say anything about how he spends his money. However, they also have a responsibility to help him think about* ***his choice****, involving discussion of choices that are healthier, like saving money for groceries.*

A tool that CHIRS uses to help us make decisions about the most ethical approach to dealing 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
A	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 and confidence. 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 you keep 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. These 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 that you trust, such as family members or CHIRS staff.

- **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. It is important to use any devices, such as a walker or cane, that may have been recommended to help you move around safely.

- **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 are understanding and will take your concerns seriously and 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 may, at times, feel like friends to you. 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 are there to support you as part of their job and that 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 will not 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. This is staff setting "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 CHIRS 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 (SDMs)

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 undergo a certain medical test, you would need to understand the answers to the following questions:

- 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 already 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 healthcare practitioner that you are dealing with can determine whether they believe that you are able to understand the important information that is being presented to you. This includes understanding the positive and negative consequences of your decisions.

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

The law says that you have the right to make decisions 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 decisions 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 chose 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* at the end of this handbook 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. or 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 that 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

We believe that when we all work together it improves the quality of services that we provide. The CHIRS client/family-centred approach includes getting input from you and your family and working closely together in partnership. During your time at CHIRS we hope that you will encourage your family, which can include any important friends, to be a part of your support team. They are such 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. In addition to being an important part of your support team, there are a lot of different ways that your family can be involved with CHIRS, if they are interested. Volunteering at special events, being a part of a committee, or coming to our monthly Family Support Group are just a few of the opportunities available. We look forward to getting to know you and your family.

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 us 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* 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 with your family together with your CHIRS support team. Most of the time, we are able to make a better 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 staff are sensitive to the needs and experiences of families and aim to 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.
- CHIRS will ask you and your family to let us know how we are doing. We do this through regular client and family surveys, service planning, and other meetings. If you or your family have any feedback you don't have to wait for a survey. Tell us as soon as possible!
- 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 of 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**
- **Smoking and Vaping**
- **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

Our goal at CHIRS is to provide a safe place for all clients, including those who are interested in changing their substance use patterns. For that reason, we seek to maintain a substance-free environment. We ask that you avoid bringing alcohol, cannabis, or other non-prescription drugs to CHIRS. We also ask you to be aware that many clients are at a very high risk for medical problems if they use certain drugs or alcohol. Never provide a medication or substance to other CHIRS clients.

What are the effects of substance use after a 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 other 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 problematic substance use?

CHIRS has staff members who are trained as substance abuse counsellors; we can also help you get the substance use services you need or want outside of CHIRS. CHIRS maintains an active partnership with the Centre for Addiction and Mental Health (CAMH) and has also worked with many of the addictions treatment programs in Ontario. We can help you to find the care that best suits your needs.

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 will 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 contact person know that you are interested.

Cannabis

We know that some clients have prescriptions for cannabis. Like any medication or drug, it should not be shared. Like alcohol and other prescription drugs, cannabis is often a substance of concern for our clients. That is, cannabis use has caused a problem in their lives and they are working to make a change regarding its use. Our goal at CHIRS is to be a safe place that offers an alternative to substance use for those who require it. For this reason, cannabis use is not permitted on CHIRS property or near programs, even if you have a prescription for it.

Cannabis can have an impact on behaviour and thinking. We strongly recommend that clients avoid using cannabis at times that would result in more difficulty learning and interacting in CHIRS programs. If a concern arises about cannabis use prior to programming, we will work with you to create a plan that is safe and helps you to get the best benefit from programming.

Naloxone

Drug overdosing has become a serious problem in Toronto and around the world. Naloxone kits are kept onsite. They are carried by some staff that work in the community and those staff are trained in the correct use. If you are concerned that a client at CHIRS may be at risk of overdosing, talk to a staff immediately.

Smoking and Vaping

CHIRS takes a *Harm Reduction* approach to client smoking and vaping. That means that staff can work with your to reduce the risks related to your smoking, even if you are not ready to quit completely. Clients who have the capacity to understand the serious health risks of smoking but continue to smoke have the right to do so. However, there are limitations regarding smoking at CHIRS that you need to know about:

- There is no smoking or vaping in any CHIRS indoor facility. This includes the Finch Avenue site and all CHIRS residential sites.
- Smoking or vaping of cannabis or any other substances is prohibited on all CHIRS properties.

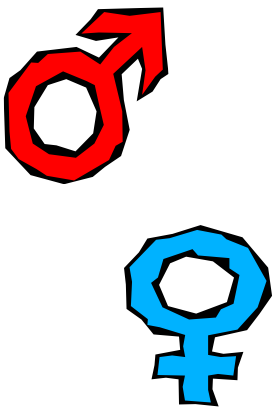
- If you require staff support to access a designated smoking area, you may need to wait until someone is available. Staff will not support you to smoke or vape; therefore, you must be able to remain in the designated area safely and independently.
- If a staff comes to provide support in your home, you will be asked to refrain from smoking in your home for 30 minutes before a scheduled appointment with a staff.
- CHIRS staff will adhere to all municipal smoking bylaws and will encourage you to do the same while supporting you in the community.
- If you do smoke or vape, there are outdoor smoking areas at all CHIRS locations 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 to quit smoking. This can include a referral to STOP — a CHIRS smoking cessation program or other smoking cessation programs throughout Toronto. STOP provides counselling and free Nicotine Replacement Therapy to any staff, clients, or clients' family members who want to quit smoking cigarettes and other nicotine products.

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; 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, toward making responsible decisions involving their sexuality.

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 with consenting adults
- the right to privacy
- the right not to be judged because of your sexual orientation
- the right to be free from unwanted sexual attention

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

- Do not push your sexuality or your sexual values on others.
- Do not engage in illegal sexual activity.
- Respect that others may see sexual issues differently than you do.
- Respect the privacy of others.
- Do not make sexual comments or touch someone sexually unless the other person has given competent consent freely.
- 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 and also any risks that your visitors may pose to staff. 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, or reduced ability to move independently. You may need to use a wheelchair, walker, cane and/or other devices to help you get around and complete your daily activities safely. You may also require 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 hands-on support for guiding or positioning part or all of your body, such as during a transfer.

What guidelines do CHIRS staff follow in providing physical support?

In order to maintain staff and client safety, CHIRS staff do not manually lift clients. Evidence shows that when a person lifts and/or moves another person, the risk of injury to both increases. So, to prevent injuries, CHIRS staff will provide physical support only in the form of hands-on guidance or cueing. Examples of this type of support may include removing footrests and seatbelts, positioning a client's feet before a transfer, guiding a client's hand to an appropriate place to grab onto a transfer pole, or gently directing client's hips towards a transfer surface.

CHIRS also focuses on environmental supports and modification, the use of assistive devices, and strategies and routines to support individuals in their daily tasks, including transfers. Our focus is on developing safe transfer routines and falls prevention and 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 ways that minimizes the chances that you or CHIRS staff will get hurt. To ensure the safety of all involved, CHIRS staff will generally provide only physical support that has been prescribed by a qualified professional. If you require physical support, we will ask that you complete an assessment with an Occupational Therapist or Physiotherapist during your initial assessment period to ensure that the physical support is safe for you. If there are significant concerns, CHIRS may require the assessment to occur before any support is provided. If support needs change, a reassessment may be required.

Are there any limits on the physical support that CHIRS will provide?

Yes, there are limits. In order to maintain staff and client safety, CHIRS staff do not manually lift clients. CHIRS staff will work hard to find the best ways to support to you; however, 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?

No, CHIRS staff will not physically intervene to stop a fall for a variety of reasons, including the risk of injury it presents to both staff and clients. At CHIRS our focus will be on the development of safe routines and falls 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.

Why can't staff 'catch' a falling person?

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 can disrupt the individual's falls response, which involves outstretching the arms, protecting the head and neck, and bending at the knees. 'Catching' a falling person also increases the risk for contact injuries, such as shearing or shoulder dislocation, and could result in more damage than allowing the person to fall.

What will staff do if I have a fall?

Unfortunately, not all falls are avoidable. If you experience a fall, staff will first check to see if you are injured and will provide first aid and/or call for emergency assistance, if needed. As stated above, staff are not able to lift you up, but will provide verbal support and guidance, as needed, to assist you to pull yourself up. If you are not able to do so, staff will call for non-emergency assistance to help you up.

Falls Prevention Information

For additional information, please refer to the **CHIRS Falls Prevention Program** brochure. If you have concerns about your risk of falls or the risk of your family member in service at CHIRS, please speak to your Facilitator or Service Coordinator about developing an individualized prevention plan.

Positive Approaches for Changing Behaviours

Since your brain injury, you may feel or act differently than you did before the injury. 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.

The CHIRS approach is holistic and, as much as possible, our team collaborates with clients, family members and other healthcare 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 desired 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 lose control of my behaviour?

CHIRS staff receive Safe Management Training 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 use physical intervention only 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 staff 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 might want to do, how often, how much time you want to spend, and where you will exercise. Staff might also help you to put your exercise times into your schedule and develop a strategy to track your progress towards 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 Facilitator and tackle them 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 to act on their behalf, while a guardian is appointed after incapacity is established.

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

Mentors
At CHIRS, Mentors may be client volunteers who take a leadership role in ADS programs and services.

Non-Violent Physical Crisis Intervention
A training program focused on the safe management of disruptive and assaultive behaviour. The program is designed to provide staff 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 healthcare, 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 become 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 last resort 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, and must also signed by the CHIRS CEO, prior to receiving services. The *Extra Support Requirement* is an addendum to the Service Agreement for those who need additional outside support to attend programs.

Service and Care Plan
Your *Service and Care Plan* is a CHIRS document that is completed when you begin service with CHIRS and updated annually and/or as needed. The *Service and Care 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 who work with you to help you reach your goals and 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 Information* 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.