

Moving On

A Semi-Annual Newsletter for our Families, Partners and Donors

issue two - volume two

Systematic Shift from Safety and Security to Functional Independence

Dale Brain Injury Services is an agency that recognizes and supports the unique needs and distinct personal goals, strengths and challenges of each individual. The objective of all our services is to work with Participants to maximize their potential for independence, reintegration into their community, build positive relationships and enhance their quality of life.

A continuum of rehabilitation services and programs and a multidisciplinary team approach are used as a framework of support to clients. Services are provided under the supervision of a clinical psychologist and the support of highly trained rehabilitation counsellors, social workers, behaviour therapists and access to a wide range of professionals in the community to achieve client goals.

Participants and their teams are faced with challenges, obstacles and barriers as they move along the continuum of independence from 24 hour support. Some of the key variables instrumental to the transition include funding/financial concerns, expectations of stakeholders, goal setting, accommodation and communication.

Funding/financial concerns must be negotiated, agreed upon and in place prior to transition. The sustainability of staffing resources and assistive devices must be considered.

Clarifying the role and expectations of all stakeholders is important to facilitate support of rehabilitation and transition plans. This is achieved through group meetings and Service Agreements that outline the treatment plan, transition plan and responsibilities of stakeholders. It is interesting to note that the goals and expectations of the various stakeholders are similar (for example affordable housing); however the priorities, motivation, substance and value of these could be varied.

Goal setting is a systematic process designed to develop the functional independence skills a Participant requires to maximize rehabilitation while minimizing barriers. Evidence based information is collected and these data are evaluated and used to identify the rehabilitation areas that require support, the effectiveness of support strategies, and to assess readiness for transition to the next level of independence.

Affordable and accessible housing is difficult to find so it is important to start searching early. Considerations include: what area of town they will live in, proximity to city transit, laundry facilities, medical professionals, grocery stores, banks and church. The Team needs to determine if there are any supports available that augment moving costs and develop a checklist of household items required to furnish/outfit a new residence.

Communication among all stakeholders is important to sustain collaboration and deal with issues of trust and anxiety. This is accomplished by identifying a relationship manager as the point person; conducting regular meetings and communication via phone and/or email to address priorities, concerns and discuss the evaluation process; and incorporate feedback and suggestions from frontline staff, families, outside professionals and funders.

These key factors require creativity, communication, positivity and enthusiasm to overcome the intrinsic challenges and barriers of community based brain injury rehabilitation. Ongoing time linked evaluation of progress and achievement throughout this process is required in order to ensure success, to respond to safety concerns, and to prevent crisis and relapse.

Natalie Woods, Behaviour Therapist

We build futures.

Dale Brain Injury Services Update

We are in the middle of a very exciting time at Dale Brain Injury Services, with many new events and activities. June is Brain Injury Awareness month and we have jumped on board with a couple of new events that we are launching to help raise awareness about the impact of brain injury on people's lives, as well as the services that are provided by Dale to assist people living with the effects of an Acquired Brain Injury.

Elsewhere in this newsletter, there is a detailed listing of these events and we look forward to seeing you there. June 13th is our annual Staff Recognition BBQ at East Park where we honour the staff who work very hard each day to help our participants on their rehabilitation journey. We thank them for their vital role in ensuring that our participants maximize their abilities.

We are on the move! Our lease at the Salvation Army site is expiring, so we are moving our administrative offices into 1111 Elias Street on Oct. 1, 2009. We will be sharing space with Cheshire London's administrative offices. They provide Assisted Living and Outreach services to people with physical disabilities in five counties and we look forward to working together and exploring some integration opportunities.

Participants in our Assisted Living 24 hour programs currently residing at the Salvation Army site will be moving on to our Westlake site, or to our new 24 hour site at Nelson Street. We have been fortunate to lease the second floor of a new building being built by Homes Unlimited, a non-profit housing corporation. Moves will take place in September. Some of our capital campaign fundraising efforts are going towards furnishing and equipping the apartments, as well as funding modifications to the 2nd floor to make it safer and more conducive to meet our participants' needs. If you wish to make a donation, please contact us, or go online to www.daleservices.on.ca. As well, please attend the first ever "Dine for Dale" event as all proceeds will go towards the capital costs for the Nelson Street location.

Sue Hillis, Executive Director



The poster features the Dale Brain Injury Services logo at the top, which includes a stylized green and yellow triangle with a white cross. Below the logo, the title "Dine for Dale" is written in a large, elegant, gold-colored script font. Underneath the title, the date and time "Friday, June 26, 2009 beginning at 5:00 pm." are printed in a smaller, black, sans-serif font. The central image is a white plate with a silver rim, containing a meal of yellow rice, green beans, and a piece of meat. The plate is set on a white tablecloth with silverware (forks, knife, and spoon) arranged around it. At the bottom of the poster, a line of text states: "Participating restaurants will donate \$2.00 from every entrée or a percentage of their dinner receipts." Below this text is a row of logos for various restaurants: MULLOONS, Cavanas, CRAVE, black trumpet, DAVIS DINO, Cibo!, and ce.la. The website address www.daleservices.on.ca is printed at the very bottom.

Ethical Decision-Making

On a day-to-day basis, the various teams at Dale Services make many decisions. For example, the clinical team makes decisions regarding participants' programs, the operations staff make decisions about resources, health and safety issues and implementation of policies and procedures, and the leadership team makes management decisions. In fact, I wish that I had a nickel for each decision that is made here!

We try very hard to make sure that our decisions are good ones and are right for the people whom we support and who work here. It is critical that the decisions that we make are based on the "best practice" model and on sound evidence or data. Decisions should be practical, able to be implemented, and justifiable on strong scientific and operational grounds.

It is also essential that the decisions we make be examined from an ethical point of view as well as a practical one. We have to ensure that all perspectives are being considered when significant issues are being discussed. We have to be aware that the values, attitudes, cultural and gender differences of the decision-makers affect the way in which we ultimately reach

decisions. We have to try to make sure that we are not limited by our own unique experiences and biases. Not only do we have to be respectful of participants' rights, but we also have to take into account the values, needs and expectations of the community as a whole in providing supports to individuals with acquired brain injury.

Accordingly, we are in the process of developing an ethical framework to guide the decision-making process at Dale Services. Once it is complete, we will provide details to all our stakeholders and will carry out an extensive program of training with all our staff. An ethics committee is being established to consider issues of a general nature as well as those specific to individual participants. Recommendations arising from deliberations at the ethics committee meetings will be forwarded for consideration to the appropriate teams and managers. We are looking forward to some lively debate and the opportunity to look at the "forest" as well as the "trees".

Alan Lawrence, Psychologist

Dale Outreach Services Work for Dr. Don McIver

Dale Brain Injury Services has been supporting me from 2005 to the present. I would like to outline the services that I have received from Dale: Past, Present, and Future.

My initial contact was with Rob and I am currently working with Steve. These are the projects that we have initiated. We have initiated learning bus routes, programming and utilizing the palm pilot, exercise sessions at the YMCA, and outings to the Covent Garden Market and the London Public Library.

One of the most invaluable contributions has been organizing my office: a place for everything and everything in its place. In this context we are starting to professionally label the office. This

has had a dramatic effect on the retrieval of manuscripts. We have started learning how to use a debit machine. I feel that Dale Services has been invaluable with these initiatives. My confidence and independence in the community is continually improving.

I have several proposals that are in varying degrees of completion. I would like to initiate an exercise group as well as a cooking group. I would also like to continue organizing the office. I look forward to a long and happy relationship with Dale. There are many things that I would not have completed without Dale's support.

Don McIver

Upcoming Events for Dale Brain Injury Services

June 13 2009

**DBIS Staff and Community Partners
Recognition Barbeque**

11:00 a.m. – 2:00 p.m.

East Park Golf Gardens Site G-2

Contact Lisa McIntyre, lmcintyre@daleservices.on.ca
for more information.

June 25 2009

Cornerstone Clubhouse 10th Anniversary

5:00 p.m. – 9:00 p.m.

781 Richmond Street

Come help us celebrate with guest speakers,
food, fun and music!

RSVP by June 11th by calling 519-679-6809.

June 26 2009

'Dine for Dale'

Participating Restaurants are:

- Aroma Mediterranean Restaurant
- Auberge Du Petit Prince
- Black Trumpet
- Braywick Bistro
- Ciao Bistro
- Cello Supper Club
- Chancey Smith's
- Crave
- David's Bistro
- Muldoons pizza
- Next Door Bar & Grill
- Tru Restaurant

A portion of the night's proceeds will be donated to
Dale Brain Injury Services who support people in the
community living with the affects of an acquired brain injury.
Visit www.daleservices.on.ca for more information.

June 27 2009

Heads Up - Walk-a-thon for Brian Injury Awareness

Springbank Gardens

1K & 2.4K

Walk, wheel & jog

9:00 a.m. – 11:00 a.m.

Come out and help DALE BRAIN INJURY SERVICES build futures.

All proceeds go to support active rehabilitation.

Visit www.daleservices.on.ca for more information.



Cornerstone Clubhouse Celebrates It's 10th Anniversary!

In 1997, a discussion had begun at Dale Brain Injury Services to investigate what type of service was available for brain injury survivors that no longer required the facilities of a full rehab program. It was understood that these survivors would need some sort of program that would continue with their reintegration process back into society and it quickly became apparent that there was no such program available. This group of people decided to try something different. They would create a separate day program using the Clubhouse Model of the I.C.C.D. (International Centre for Clubhouse Development), and in May of 1999, Cornerstone Clubhouse opened its doors with five staff members, (a director and four facilitators) and 10 attending Members.

The program and the Clubhouse have gone through numerous modifications and upgrades since that first day. For example, there are now seven staff, (a director and six facilitators), we now have 154 Members, of which 55% attend

on a regular basis, and we've gone through two accreditations and are still the one and only fully accredited brain injury clubhouse in the world. Our program speaks for itself. We have had many visitors from around the globe come to Cornerstone to 'see' how we do what it is that we do so well, and what makes us so successful.

The motto of Cornerstone Clubhouse is that it is a safe place to come and belong, but for the past ten years, the Clubhouse has been more than just a safe place to come to. Cornerstone Clubhouse has been the home away from home for its Members and has given us the opportunity to continue our recovery by learning and expanding our skills and abilities.

And most importantly, we have been able to grow to become more than what we were.

Andrew Tankus, Member, Cornerstone Clubhouse



Cornerstone Clubhouse Members and Facilitators



The Brain Injury and Substance Use Education and Support Group

The New Attitude Committee is comprised of partners from Dale Brain Injury Services including Thames Valley Addiction Services, Parkwood Hospital and Pediatric Acquired Brain Injury Community Outreach Program (PABICOP). The committee is continuing its efforts at finding solutions and bridging care access and service gaps for individuals living with the co-occurring challenges of Brain Injury and Substance Dependency in our London and Middlesex community. A number of initiatives are underway including the development of an educational/support group for this population. Eligible individuals associated with the five partnering agencies were referred by their case managers and began participating in sessions in April 2009. The group focuses on education, prevention, and effects of the co-occurring challenges of brain injury and substance dependency on an individual's adaptive functioning and optimal community re-integration. The group also emphasizes various intervention and self management techniques including harm reduction and abstinence methods. Session topics cover information about the brain and brain injury, the effects of drugs and alcohol on the

brain, the stages of addiction, pain management, nutrition and self care. Members have the opportunity to discuss and practice skills for managing various psychosocial issues regarding family, intimate relationships and friendships. Each individual session has core objectives that support individuals to understand and use information about brain injury and substance dependency in the hope that they will be able to apply these skills in their day to day lives. In addition to bridging a service gap and facilitating easy access to this unique combination of benefits offered by the partners involved in the New Attitude endeavour, we aim to create a very supportive and welcoming environment for members of the group. A targeted outcome of this group includes increased membership and higher visibility of the needs of our targeted group of participants in the care plans of service providers within our Local Health Integration Network (LHIN). For further information about this groundbreaking education and support series, contact Adrienne Whiten or Becky Coward at 519-668-0023.

Becky Coward and Adrienne Whiten

THANK YOU TO ALL OUR DONORS

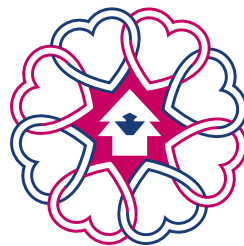
Donors

AGAPE
City Hall Charity Chest Fund
City of London
Dr. Sid Freedman
Kellogg E.C.C.O.
London Transit Commission ECCO Fund
Mrs. Mae Yako
Ms. Joan Furukawa

Capital Campaign Donors

London Hunt and Country Club
Tennis Tournament
Selectpath Benefits & Financial Inc.

Dale Brain Injury Services **Capital Fundraising Campaign**



We build futures.



Dale Brain Injury Services, 815 Shelborne Street, London, Ontario N5Z 4Z4

Tel: 519-668-0023 Fax: 519-668-6783 Email: info@daleservices.on.ca www.daleservices.on.ca

We build futures.