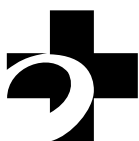


# GUIDE

## BRAIN INJURY DISCHARGE PACKAGE



### **Coping with brain injury** **A guide for patients**



The Ottawa  
Hospital | L'Hôpital  
d'Ottawa

***Disclaimer***

*This is general information developed by The Ottawa Hospital. It is not intended to replace the advice of a qualified health-care provider. Please consult your own personal doctor who will be able to determine if this information is appropriate for your specific situation.*

# Going home after a brain injury

In this booklet you will find information on:

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Along with this booklet you will find your personal health record. Read this and share it with your doctor and family.

Remember to share the caregiver information package with your family and/or caregiver(s).

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# Section 1

## What to expect

This section helps you to understand why you feel the way you do, what changes to expect and what signs to watch out for.

### **Common concerns**

- Fatigue
- Diff culty paying attention
- Memory problems
- Thinking – initiation, organization, planning and problem solving
- Communication problems
- Emotional changes
- Irritability/Agitation
- Impulsivity
- Sexuality
- Changes to taste, touch, vision, hearing and smell
- Headache
- Dizziness

### **Potential complications**

- Diff culty taking your medications
- Family issues
- Depression
- Wanting to be alone/feeling lonely
- Seizures
- Vision problems that get worse
- Increased confusion
- Loss of feeling in your arms, legs or body
- More pain than usual
- Headaches that will not go away

- Over or under eating
- Sudden changes in behaviour
- Vomiting
- Fluid or bleeding from the ear or nose
- Blacking out
- Slurred speech

# Common concerns

## You (after a brain injury)

After a brain injury you may notice some changes in yourself. For example, many physical, thinking and personality changes can occur after a brain injury.

### When will I feel like my old self?

Some of the changes you are noticing now will go away soon. Others will last longer and some could even last forever. You should ask your doctor how long you should expect your symptoms to last.

### Common concerns

In the next pages you will find information about some of the most common concerns following brain injury.

It is important to know that you may experience some or all of these. Exactly which symptoms you experience depends on which area of the brain was hurt and how badly it was injured. You may want to discuss this with your doctor.



If you are having trouble dealing with your concerns or you start to feel worse, call your doctor.

# Fatigue

Fatigue and loss of energy are common after brain injury.



It is important to understand that this is a *real* symptom and not a case of mind over matter.

## What is fatigue?

Fatigue is a feeling of tiredness, exhaustion, or a lack of energy.

## What causes fatigue?

Fatigue may occur at any time. You might experience fatigue after light activity or hard work. Both physical and mental activities can make someone feel tired. It may even occur for no obvious reason.

## There are two types of fatigue:

### 1. Mental

The occurrence of mental fatigue is often what surprises people after a brain injury. Activities that were easy like reading or studying may be more difficult now.

### 2. Physical

Some physical activities that you were doing might be difficult now. It might be difficult to work or do other activities like mowing the lawn and gardening.

People can experience mental and physical fatigue at the same time or separately.

## Am I fatigued?

Everyone feels tired sometimes but it could be fatigue if you:

- Have daytime sleepiness
- Are getting more headaches
- Are more cranky than usual
- Get upset more easily
- Are more forgetful
- Feel anxious
- Are less able to concentrate



## What can I do?

- **Make a schedule.** Some people may experience fatigue at certain times of the day; not all the time. If you have more energy in the morning, do your most difficult tasks at this time.
- **Schedule daily rest periods.** If you are “resting”, you should be doing nothing at all (no TV or reading).
- **Sleep.** Try to maintain a regular sleep pattern. Some people find they may also need to take a nap during the day.
- **Set priorities.** Do not try to do it all. Instead, focus only on the things that must be done and let the other things go.
- **Pace yourself.** Take things slowly. If you are returning to work, return gradually. You might want to start off part-time.
- **Break it down.** Break larger activities into smaller tasks. By completing things one step at a time you will have the chance to rest while you work.
- **Exercise.** If your doctor says it's okay, do some exercises. Be sure you talk to your doctor or physiotherapist about what exercise is best for you. Too much activity can sometimes make symptoms worse.
- **Eat healthy foods.** Don't skip meals. This should help to give you energy.

# Attention

After a brain injury, it is often difficult to focus on a specific task. This may be because the injury affects a person's ability to pay attention or concentrate.

## What is attention?

The word 'attention' describes the ability to focus on one thing for a period of time. For example, you are paying attention when you are listening to only one person talk in a loud, crowded room.

## What causes attention problems?

To be able to pay attention or concentrate, you need to be able to block out other distractions like noise. When the brain is injured you may not be able to do this as easily.

Other effects of a brain injury including fatigue, stress and illness can make attention problems worse. Some medications can also make it more difficult to pay attention.

## Do I have attention problems?

People with attention problems may find it hard to:

- Listen to other people talk
- Read a story, magazine article or book chapter from start to finish
- "Tune out" distractions
- Watch a TV show or movie
- Drive – This is because it is harder to pay attention to the other cars, signs and other factors around you

## What can I do?

Try some of these suggestions if you think you are having problems with attention:

- **Take a break.** If you feel you're having trouble paying attention, take a break from your task and return to it.

- **Schedule.** There may be certain times of the day when it's easier for you to pay attention. Try to do things that require concentration during this time.
- **Take it slow.** It is okay if it takes you longer to do things now. Taking frequent breaks and taking time to sort through your thoughts should help you to finish the task at hand.
- **Get lots of rest.** It is harder to concentrate when you're tired. To avoid fatigue, take naps and try to maintain a regular sleep pattern.
- **Exercise and eat healthy foods.** It's easier to pay attention if you are feeling well and energized. Exercise also helps to relieve stress, making it easier to pay attention.
- **Avoid multi-tasking.** Doing more than one thing at a time can be difficult if you are having trouble concentrating. Instead, try focusing on one thing at a time.
- **Use aids.** If you need them, wear glasses or hearing aids.
- **Change the environment and minimize distractions.** Make sure the room is bright enough to see what you are doing. If you are distracted by noise, turn off the radio or TV. If it's still too noisy, try wearing ear plugs. Reduce distractions by working in a clean, uncluttered area.
- **Practice.** You may need to work at it. Make sure you face the person you are talking to. You may need to remind yourself to focus and repeat key ideas back to them or take notes.

# Memory

Memory problems are probably the most common concern after a brain injury.

## What is memory?

Memory is the ability to take in and keep information. It also allows a person to think back to things they have done, seen or learned before.

## What causes memory problems?

There are certain areas of the brain that are important for memory. If these areas are injured, they may not work as well as they used to. This could cause new memory problems or it could make old memory problems worse. Things like fatigue, depression and medications can also make it difficult to remember.

## There are two different kinds of memory:

1. **Remote memories** are pre-injury memories; things that happened before your brain injury.
2. **New memories** allow you to remember things that just happened, or that happened after your injury.

After a brain injury, new memories are mostly affected, including short and long term memories. It is remote memories that are preserved.

## Do I have memory problems?

Everyone forgets things sometimes but people with memory problems forget things more often. For example, after your brain injury, you may have more difficulty remembering:

- Names
- Appointments
- Where you put things
- Conversations
- Details
- Directions
- Telephone messages

## What can I do?

Although some of your memory problems will get better with time, there is no cure for them. The best way to deal with memory problems is to find ways to make up for them.

- **Write it down.** Using a calendar or journal will help you to remember important things like appointments and other things you do each day. Try using a notepad beside the phone and a “cheat sheet” with important information on it.
- **Use labels.** Putting labels on your things and/or cupboards may help you find things more easily.
- **Make a schedule.** Having a plan for each day and each week should help you to remember important things like taking your pills and going grocery shopping.
- **Organize.** Being organized can make it easier to remember. For example, you may want to make a list of things you need to do and check them off when you’re finished. Having one place to put each thing in your house will help you to remember where to find it next time.
- **Pill organizer.** Using a pill organizer will help you keep track of your medicines and remind you when to take them.
- **Use signals.** Try using a timer, alarm or beeping watch to remind you about when to take medications, go to appointments or do other activities.
- **Ask for help.** You may need to ask a friend or family member to try to remember too. Ask a family member to come to your doctors appointments with you. They may be more likely to remember what your doctor said or they may even be willing to take notes for you.
- **Break it down.** It’s often easier to learn and remember one thing at a time. Try breaking information down into smaller parts.

# Thinking

People are more likely to have problems with complex or “higher level” thinking after a brain injury.

## What is complex thinking?

Complex thinking is a term used to describe thinking activities that require a lot of brain power. This includes things like: initiation (starting things), planning, problem-solving, and/or organization.

## What is initiation?

Initiation is the ability to start doing something and maintain the task. It requires seeing what needs to be done, making a plan about how to start doing it, and putting the plan into action.

## What is problem-solving and planning?

Problem-solving and planning skills help you to decide how you will do a certain task.

Problem-solving is the ability to think ahead of time how a task or activity will turn out.

Planning includes things like making a list of each step involved and deciding what you will need to do it. You should also have some idea about how long it will take to complete the task.

## What is organization?

Organization is the ability to put all of the steps of a task in the correct order.

It is also the ability to keep things in appropriate places so that you can find them later.

## What causes problems with thinking?

Complex thinking depends on other mental skills like memory and attention that are controlled by certain areas of the brain. Because a brain injury can affect any

of those areas, it can also make complex thinking more difficult. Fatigue, stress and medications can also contribute to problems with thinking.

## **Do I have problems with thinking?**

If you are having problems with thinking, you may find that:

- Other people seem to think you are not motivated.
- You have a hard time starting and finishing things.
- You sometimes get stuck on one thought or activity.
- It is difficult to do things that used to be easy (i.e. getting dressed or doing an assignment)
- It is difficult to try new ways of doing things.
- It is harder now than before to do more than one thing at a time.
- It is difficult to keep the steps in order.

## **What can I do?**

Try these suggestions if you are having problems with thinking.

- **Avoid multi-tasking.** Focusing on one thing at a time will give you more time to think things through.
- **Break it down.** Break large, difficult tasks into small steps. Define each step clearly and write it down. To help you keep track, check each step off as you finish it.
- **Clean up.** Putting things away when you are done with them will help you to keep organized. If you already know where something is, you will have one less thing to think about.
- **Ask for help.** You may need someone else to remind you when you need to do something. If needed you can have them tell you when to start each task.

# Communication

A person's ability to communicate can change after a brain injury.

## What is communication?

Communication is the use of listening, speaking, reading, writing and even certain body movements (i.e. a head nod or hand gestures) to understand or express a thought or idea.

## What causes communication problems?

Changes in your ability to communicate depend on where your injury is and how badly you were hurt.

Other effects of brain injury including pain, fatigue and changes in mood can make communication more difficult. Some of your medications could also have side effects like drowsiness that make communication problems worse. For example, some people find that they slur words.

## Do I have communication problems?

After a brain injury, most people are not able to speak as well as they did. It is common for people to have trouble understanding and expressing ideas. In addition, communication problems could also be difficult understanding other people's facial expressions and gestures. The following may be signs that you are having communication problems:

- Difficult remembering certain words/finding the right words to say or write
- Often need to ask others to repeat themselves
- A hard time understanding or remembering what you have read
- Difficult to remember and follow instructions
- More trouble with spelling than you did have
- Need more time now to understand what others are saying
- It takes longer to read now than it did before



## What can I do?

If you think you are having trouble communicating, try following some of the suggestions in the list below:

- **Use other ways to communicate.** For example, if speaking is difficult, try writing your message on a whiteboard, computer or notepad.
- **Keep it simple.** Try to use short, clear sentences that get to the point.
- **Use a quiet place.** Try to have your conversations in a quiet room. With less background noise (i.e. radio or TV), you will be able to focus on what is being said.
- **Avoid fatigue.** It is best to communicate with others when you are feeling rested and alert so that you are better able to pay attention.
- **Be happy.** Try to communicate when you are in a good mood. This may prevent frustration and make it easier for you to pay attention.
- **Try to be patient.** Communication problems are common after a brain injury but they can be frustrating for you and for other people. In order to deal with these problems, patience is needed on both sides. Ask others to slow down, to repeat, and to look directly at you if necessary.
- **Don't rush.** Take your time and think about what it is you are trying to say. If you need to, ask questions so that you can understand what is being said by others.
- **Take turns.** When you are talking with someone, try to make sure only one person is talking at a time. This will make the conversation easier to follow.
- **Ask for help.** A speech-language pathologist can help you to deal with your communication problems. Call: \_\_\_\_\_

# Emotions

It is natural for people to have an emotional reaction to an injury that impacts their whole lifestyle.

## Emotional changes

After a brain injury, people notice a difference in how they feel. For example, you may find that you are more emotional, have difficulty controlling your reactions, or stop feeling emotions all together.

## Mood

Mood is a long lasting emotional state. Moods are usually less specific than an emotion like fear—usually, we talk about being in a “bad mood” or a “good mood”.

After your brain injury, you may experience mood swings. That is, you might change from one emotional state to another (i.e. sad to happy) for no obvious reason.

## Anger and irritability

When people are angry or irritable, it means that they are more easily annoyed or bothered by things around them. They may have trouble controlling their emotions and therefore are more likely to over react. This could result in sudden outbursts, aggressive behaviours (i.e. lashing out) or constant crankiness.

## Anxiety

Anxiety can be described as a feeling of uneasiness, worry or nervousness. When someone is anxious, they may feel tense or jumpy. These feelings are often related to uncertainty or fear of what's to come in the future.

## Sadness

Sadness can be considered a temporary lowering of mood and may be experienced as a feeling of loss. Often, people who are sad express themselves through crying. Temporary sadness is normal after an injury but if it lasts for a long time, it could be depression.

## What causes changes in emotions?

Our brains help us to feel and control our emotions. When our brain is injured, it may not be able to do this as well. As it is working hard to recover, it is more likely to over react or respond to things in an inappropriate way. Pain, frustration, uncertainty, stress and lack of sleep following a brain injury can also affect your emotions.

## Have my emotions changed?

Signs that your injury may have affected your emotions include:

- Mood swings or lack of emotions
- Trouble sleeping
- Crying more often/more easily
- Feeling more cranky
- Losing your temper easily

## What can I do?

- **Relax.** When you start to feel angry or upset, take a breath and try to think of something more positive. Try counting to ten, taking a walk or listening to music.
- **Exercise.** Exercising on a daily basis can help reduce tension and frustration.
- **Have a plan.** Decide on which relaxation strategies work best for you. This will help you avoid anger or upset in the future.
- **Take a break.** If you feel like you are becoming angry or upset, stop what you are doing. You can return to the task when you are more relaxed.
- **Express yourself.** Talking about or writing down your feelings and problems can make you feel better. You may want to consider counselling or talking to your doctor.
- **Be positive.** Make a list of positive thoughts to focus on when you're upset. Try to do things that make you happy and avoid people who are negative and/or critical.



If you are concerned that your anger could make you hurt someone, talk to your doctor.

# Behaviour

After a brain injury, people can have changes in the way they behave.

## What are behavioural problems?

Behavioural problems are acts that are harmful or interfere with recovery.

Whether your behaviour is a problem depends on how harmful it is and how often it happens. Your actions may be considered a behavioural problem if they are hurting others around you, yourself or occurring more often than they should.

## What causes behavioural changes?

Behavioural changes will depend on the injury. For example, you might behave differently if you damaged the area of the brain that helps you to monitor and control your behaviour. When your brain is unable to direct the way you act, your behaviour can become disorganized.

Because your brain has less control over your behaviour, the environment will have a greater impact on the way you behave. For example, after your brain injury you may find it more difficult to deal with too much noise around you. As a result, you may become agitated more easily. If you are having attention or other thinking problems, you may also be more likely to act impulsively; while feelings of frustration and anger can lead to aggressive behaviours.

Other symptoms of brain injury (i.e. emotional changes, fatigue) can make behavioural problems worse.

## What is agitation?

Agitation is an unpleasant state of extreme psychomotor activity combined with increased tension, and irritability. It occurs when someone loses the ability to control their own behaviour.

## What is impulsivity?

Impulsivity is when a person does something without thinking ahead.

## What is aggression?

Aggressive behaviours are actions that cause physical or emotional harm or injury.

## Has my behaviour changed?

If you are experiencing any of the following, your behaviour could become a problem:

- A tendency to over react
- Become physical with others (i.e. fighting, punching)
- Yelling or cursing more often
- Feeling more irritable or angry than usual
- Doing things you wouldn't have done before
- Family or friends have noticed changes in your behaviour

## What can I do?

It is difficult to see behavioural changes in yourself. However, if you or your family/friends are concerned about your behaviour, try following the suggestions below.

- **Make a plan.** Try to identify what situations cause you to behave inappropriately. Once you do, you can come up with ways to prevent your actions ahead of time. For example, taking a break from the situation.
- **Use reminders.** To prevent unwanted behaviours, post helpful tips around the house that will remind you what to do if you are feeling upset.
- **Ask for help.** Ask your family and/or friends to help you gain control over your actions. Decide on a signal that they can use to let you know when you are acting inappropriately.
- **Talk to your doctor.** Your doctor can help you or refer you to someone who can.

# Headaches

Many people have headaches and other pain after a brain injury. In fact, headaches are one of the most common physical problems.

## What is a headache?

A headache is a pain that a person feels in the head that can make it hard to do things.

For example, headaches can make it difficult to sleep and make it harder to enjoy activities you like to do.

## What causes headaches?

Headaches usually occur when there is something wrong in the body, like damage caused by a brain injury.

When you hurt yourself, you may have damaged the muscles around your head. The movement of structures in your head, swelling, irritation, muscle and pressure changes that can occur when a brain is injured may also be causing head pain.

If you have a history of migraines before your brain injury, you are more likely to have headache problems now.

Your thoughts and feelings about your injury can also influence your pain. Feelings like anger, anxiety or depression can lead to muscle tension. This can cause pain or make an existing headache worse.

It is hard to tell how long headaches will last. For some people, they will never go away. You should ask your doctor how long you should expect to have pain. The information on the following page should help you to deal with headache problems.

## What can I do?

- **Use medications as directed.** Be sure to talk to your doctor before you make any changes to your medication schedule. Sudden changes can cause headaches.

- **Use heat or ice.** This could help to relieve the pain. Ask your doctor which one he/she would recommend for you.
- **Keep a headache journal.** Keeping track of your headaches can help you learn what makes your pain worse or better.
- **Act quickly.** Once you know what helps your pain, act quickly so that it doesn't get worse.
- **Get plenty of rest.** Sleep and rest can help to relieve headaches. To prevent a headache, make sure you are comfortable when you sleep.
- **Minimize stress.** When you are stressed, you are more likely to have a headache. Avoiding things that cause you stress could prevent headaches from occurring.
- **Relax.** Try some relaxation techniques to help reduce stress and prevent pain. (i.e. yoga, meditation, getting a massage, soothing music or going for a walk).
- **Use distractions.** Doing things you enjoy could help take your mind off of the pain.
- **Ask for help.** If nothing seems to help your pain, you should consider talking to your doctor or other health-care provider. This could be a sign of something more serious.



If your pain gets worse, talk to your doctor.

This could be a sign of a more serious problem:

# Dizziness

Dizziness is common after many injuries including brain injuries.

## What is dizziness?

Dizziness is a feeling of being imbalanced or lightheaded. It is often described as a “turning sensation” or a “funny feeling”.

## What causes dizziness?

After a brain injury, people may feel dizzy for different reasons.

If your injury was a serious one, the dizziness may be directly caused by brain damage.

Usually, however, dizziness is caused by damage to other regions. For example, damage to the inner/middle ear or damage to the connections between the ear and brain can make you feel dizzy. It could also be caused by damage to the eyes or neck.

Other causes include emotional upset, changes in blood pressure or breathing, and bruising of the muscles and/or other tissues around the head or neck.

## Is it dizziness?

When you are dizzy:

- You may find it difficult to move around. Bending over or climbing could be especially difficult.
- It is hard to keep your balance.
- You may have a hard time estimating how far away things are and how fast they are moving.

## What can I do?

If you have been getting dizzy, try following the suggestions below:

- **Exercise.** Balancing exercises can help reduce dizziness over time. For example, you may want to try balancing on one foot. To avoid injury, stand close to a wall so you can use it as a support.



- **Stretch.** Stretching your neck and shoulders can help you overcome dizzy spells. “Rolling” your head around may cause some dizziness but with time, the dizzy reaction should go away.
- **Maintain activity.** It is common for people with dizziness to avoid activity. However, activity is important to prevent dizzy spells from occurring. Being active will also help you to learn how to handle dizziness more effectively.
- **Practice relaxation.** Find out what strategies work best to help you relax. This should make it easier for you to regain control after a dizzy spell.
- **Be prepared.** Learn what to do when you have a dizzy spell. Try following the suggestions below.

When you have a dizzy spell:

- **Take a break.** If you’re feeling dizzy, sit down for a rest.
- **Try using one of your relaxation techniques.** For example, take a few deep breaths or think about something positive. Try telling yourself that it will soon be over.
- **Take it slow.** When you are feeling okay, get up slowly. You should then be able to continue with what you were doing before you got dizzy.

# Senses

After a brain injury, people may experience sensory changes.

## What are sensory changes?

Sensory changes are alterations in the way a person sees, hears, feels or smells things.

## What causes sensory problems?

When someone has a brain injury, they may have damaged some of the body-brain connections. For example, if you have lost your sense of smell it could mean that the connection between your nose and your brain was affected.

It is also possible that when the brain is injured, other nearby areas get injured too (i.e. parts of the head or face). For example, you may have injured your eye, nose or ear at the same time.

## Do I have sensory problems?

If your injury has affected your senses, you may:

- Not be able to see as well as you did (blurry or double vision)
- Have problems with perception (i.e. judging distances and size)
- Not be able to hear as well as you did (loss of hearing or ringing in the ears)
- Have a loss of smell or taste
- Have a bitter taste in your mouth
- Have a reduced sense of touch
- Be less likely to feel heat, cold and/or pain
- Feel like your skin is tingling, itching or in pain

## What can I do?

**Vision problems:**

- Ensure that your vision has been assessed by an eye doctor (an ophthalmologist or optometrist).

- If you have blurry or double vision you may need to wear glasses to correct this. Sometimes a prism in the lens is needed
- You may require larger print fonts to read more easily

### **Smell and taste:**

- Smell is affected, particularly if you have had a skull fracture.
- Smell changes typically occur at the time of the injury, but may not be noticed until later in the course of rehabilitation.
- Often smell is not completely absent, it is only partially affected.
- It is important that if there is loss of smell then the place you live should have smoke and natural gas detectors to accommodate for your loss of smell.
- Taste is closely tied with smell which can be the main complaint when smell is actually affected.
- If taste is a problem, eating foods that are less bland may improve your enjoyment of eating.
- Taste can sometimes be affected by medications. If this is a possibility, then you should speak with your doctor.

### **Touch sensations:**

- The ability to feel following a brain injury may be affected. Often, this will affect only one side of the body due to how the brain is organized
- If sensation is affected, you will need to watch that clothing, straps and footwear are not binding because you may not feel them
- When feeling is affected, you can sometimes experience unusual sensations. For example, something soft can seem painful. Rubbing the area gently with cream may help desensitize the area. A doctor can also prescribe medication to treat this.

# Sexuality

A brain injury can change the way a person experiences and expresses their sexuality.

## What is sexuality?

Sexuality describes the way we express ourselves and behave as sexual beings. Sexuality encompasses issues of intimacy and relationships, gender/sexual identity, and sexual health. It is influenced by individual beliefs, values, preferences, culture and experiences.

## What causes changes in sexuality?

Sexuality may be affected by physical, emotional and social changes that can occur after a brain injury.

You may experience changes in sexuality if you injure certain areas of the brain. For example, your injury may have affected the areas of the brain that control your hormones and/or emotions, both of which can influence your sexuality.

You may have had to make a lot of changes in your life because of your brain injury. These changes can affect the way you see yourself and the way you interact with other people. For example, new limitations or job loss can lower your self-confidence. As a result, you may find it more difficult to deal with your partner. Your mood, fatigue and medications can also have an impact on your sex drive. Sexuality can also change because your partner is also adjusting to the impact of your brain injury.



If you had problems with sexuality before, your brain injury may make these problems worse.

## Has my injury changed my sexuality?

After a brain injury, you may notice the following changes:

- Reduced sex drive
- Increased sex drive
- Erectile problems
- Inability to achieve orgasm
- Having sex less often
- Tendency to behave sexually at the wrong time
- Physical mobility challenges

## What can I do?

To address common problems of sexuality, including reduced sex drive and difficulties having sex try the suggestions below:

- **Communicate.** Tell your partner how you are feeling and talk about your concerns. Communicating openly with each other will help to resolve your issues.
- **Emphasize romance.** Remember to show your appreciation for each other. Compliments and affection are important.
- **Take it slow.** Try to avoid putting pressure on yourselves. Take your time, working through your concerns as they arise.
- **Enjoy yourself.** Don't worry about how you are supposed to be doing things. Focus on what works best for you.
- **Use aids.** If your trouble is reduced sex drive, try using videos or magazines to help arousal.
- **Ask for help.** Some of your problems may be caused by symptoms including depression. Your medications can also affect your sex drive. If you have these concerns, you should speak to your doctor.

Brain injuries can create all kinds of problems related to your sexuality. For example, if you are having memory problems, you may forget to take birth control pills at a consistent time. It is important to talk to your partner and your doctor about these concerns.

## Potential complications

When someone has a brain injury they are at risk of having some more serious problems.

### When should I get help?

You should talk to your doctor if any of your symptoms are getting worse or if they are interfering with your daily life.



**Seek immediate medical attention if you are experiencing any of the following symptoms:**

- Vision problems that gets worse
- Increased confusion
- Loss of feeling in your arms, legs or body
- More pain than usual
- Headaches that will not go away
- Over or under eating
- Sudden change in behaviour
- Vomiting
- Fluid or bleeding from the ear or nose
- Black outs
- Slurred speech

These symptoms could mean that your condition is worsening or that you have injured yourself again. A second brain injury could have a serious impact on you.

### Other potential complications

On the next pages you will find information about some of the other potential complications of brain injury including:

- Depression
- Wanting to be alone/feeling lonely
- Seizures
- Difficult taking your medications
- Family problems

# Seizures

After a brain injury, people may be at risk of having a seizure. Seizures can happen right after the brain injury or much later (i.e. months or years).

## What is a seizure?

A seizure is a sudden change in brain activity that can affect the whole body.

## How do I know if I have had a seizure?

It is sometimes difficult to know whether or not you have had a seizure.

There are two types of seizures. To help you and others around you to know when/if you have had a seizure, you should be aware of these signs:

### 1 Major motor or generalized seizure

- Body stiffness
- Jerking limbs, often one side
- Loss of consciousness
- Increase bowel/bladder function

### 2. Focal motor or partial seizure

- Blinking out
- Changes in perception
- Senses are altered
- Feeling spaced out

## What should I do?

- **Avoid risks** such as driving or being on a ladder.
- **Talk to your doctor.** If you think you have had a seizure, go see your doctor as soon as possible.
- **Write it down.** Writing it down in your rehabilitation health record or somewhere else where you won't forget it is important. Make note of the date and anything else you can remember so you can tell your doctor.

# Depression

## What is depression?

Depression can be described as a condition of extreme sadness. People who are depressed may also feel hopeless or worthless. They may stop enjoying the things they used to like.



People are more likely to become depressed after a brain injury. This could slow a person's recovery. If you think you are depressed, ask for help.

## Am I depressed?

It is normal to feel sad after your injury but it should go away. If you feel sad for a long time (weeks, months, years), you may be depressed. Only a professional (i.e. a doctor or psychologist) can tell you this for sure. However, there are certain signs and symptoms that you should watch out for. You should talk to your doctor if you are experiencing some of these problems:

- Do not enjoy the things you used to
- Not interested in doing anything
- Feeling sad for a long time
- Feeling hopeless or worthless
- Feel bad about yourself/not happy with yourself
- Sleeping more or less than usual
- Find it hard to fall asleep or stay asleep
- Eating more or less than usual
- Drinking too much
- Have a hard time finishing what you start
- Fatigue
- Don't want to get out of bed
- A sense of being overwhelmed
- Have thoughts about harming or killing yourself
- Anger
- Anxiety and/or restlessness
- Have a hard time paying attention



## What can I do?

**Depression can be treated. If you are feeling depressed, you should ask for help.**

It is important that you talk to your doctor about your mood. He/she can help you or refer you to someone who can.

Talking about your feelings with a family member or close friend may also help you feel better.

You should avoid using coping strategies that are not productive. Avoid drinking alcohol or using drugs. Instead, spend time with family and friends who make you feel good about yourself.



**Remember:** Everyone feels sad sometimes but if your symptoms are worse or lasting longer than usual it could be depression.

If you have been having suicidal thoughts, call the Crisis Line immediately.

## Crisis Line phone number:

1-613-722-6914 or 1-866-996-0991 if you live outside of Ottawa.

# Loneliness

For many people, a brain injury can affect the relationships they have with friends and family. As a result, many people feel lonely or isolated after their injury.

## What is loneliness?

Loneliness is a feeling of being disconnected, that something is missing from life. For example, it could be a feeling of distance between you and your friends or family, even if they are always around you.

## What causes loneliness?

After a brain injury, a person is likely to have many concerns that could affect their relationships.

For example, you may have a hard time understanding what others say. Changes like this make it difficult to talk to others and may make you nervous about trying. Other symptoms like fatigue could also stop you from spending time with others.

On the other hand, some of your friends or family members may be feeling uncomfortable around you, because they are worried that they won't say the right thing and don't know how to help you.

## Is it loneliness?

If you are lonely, you may find yourself thinking that:

- Nobody cares about you
- People are trying to avoid you
- People don't want to talk to you
- It's easier to be by yourself
- You're alone – that no one understands what you are going through

## What can I do?

To overcome loneliness, try following the suggestions below:

- **Find a hobby.** By developing your interests, you will have more positive things to talk about with others.
- **Make a list.** Make a list of things you enjoy doing. Whenever you get lonely, try to do something on the list.
- **Adopt a pet.** When you give a pet a loving home, you could end up with a great companion.
- **Be healthy.** Exercise and a healthy diet will give you more energy and help you to feel better about yourself.
- **Avoid alcohol.** Alcohol can lower your mood and make you act differently around people.
- **Ask for help.** Asking others for help means that they don't have to guess what you need. This can help them to feel more comfortable around you.
- **Offer help.** Reaching out to other people is a good way to show that you care and that you appreciate them.
- **Volunteer.** Getting involved will help you meet other people who share your interests.
- **Stay connected.** Make time for people who care about you. Make a point to write, call or e-mail your family and friends even if you are just saying "hello".
- **Be positive.** Focusing on what's wrong with your life can push other people away. Instead, make a point to tell others about the good things in your life.
- **Fight fair.** When there is conflict in your relationship, talk about your feelings. Try to avoid placing blame. Working through your problems together will make your relationship stronger.
- **Build new relationships.** Try to keep an open mind. Think about where you've met people or made friends before. Try to take up new activities, attend community events or support groups.

# Family issues

Brain injury affects both the injured person and their family. This can lead to family problems.

## What is family disagreement?

Family discord describes a state of disagreement or tension among family members.

## What causes family discord?

Brain injuries can lead to family discord when:

- **Members are required to take on new roles and/or responsibilities.** When members are required to take on a new role, it changes the relationship. For example, a spouse may become the caregiver to a husband/wife. More demands may be placed on the spouse to fulfil both roles.
- **The injury becomes the focus for all other members.** The more attention you are given, the less attention other family members are given.
- **The injury has resulted in personality changes (i.e. emotional and behavioural changes).** Often, a brain injury can change the way you act and feel. To others, you may seem like a completely different person.

These changes may be overwhelming. They can cause stress, frustration, anger and even resentment among family members



**If anger is directed towards you, try to remember:**

Your injury has changed your family's life in addition to yours. Their anger may be directed towards you because your injury has led to the changes. Try talking to your family member about his/her feelings.

## What are the signs of family discord?

The following problems could lead to family discord:

- Family members are overwhelmed and seem more stressed than before.
- Your family members are more easily upset than before.

- You are noticing that your family has a difficult time getting things done (too much to do).
- Family members become more emotional or seem depressed.
- You feel like you are getting all the attention.
- Your family is not aware of your limitations. You may feel like you are being pushed to do things you are not ready for or your family is too protective and not allowing you to do things you are capable of doing.
- Family members are telling you what and how to do things.

## **What can I do?**

To avoid discord, try the following suggestions:

- Encourage family members to share responsibilities.
- Discuss with your family members and your doctor what duties/responsibilities you are comfortable doing.
- Allow time for others to take a break from responsibilities.
- Express your feelings and concerns with family members in order to avoid built-up tension.
- Family members, with the help of a professional, should make a plan that clearly defines the roles for each member.
- Encourage family members to join a support group.
- Consider home-care or professional assistance.
- Talk to a counsellor or a psychologist about your feelings as they are able to help resolve family issues.
- If you experience depression, seek help from a professional such as a doctor, a private counsellor, or a support group.
- Discuss with family members any changes you have noticed.
- Encourage family activities that include all members to shift the focus of attention.
- Visit friends or other family members.

# Medications

After a brain injury, it is common to have a hard time taking medications.

## **What problems could a person have with medications?**

Even though medications are meant to help people, sometimes they can make people feel worse.

Many medications have side effects that could affect the way a person feels.

People often find it difficult to take their medications as prescribed.

## **What could cause my medication problems?**

After your injury, you may have been prescribed several medications for different reasons. Taking multiple medications can cause problems for you. They may be hard to keep track of, which can be confusing. Your symptoms can contribute to this problem by making it more difficult to take your medications properly. For example, memory problems can make it difficult to follow your medication schedule.

Your medications can make you feel worse if they have side effects that make your symptoms more noticeable. For example, some medications can cause drowsiness which could make it even harder to pay attention or communicate.

When you take more than one medication at a time, an interaction could occur. When drugs interact, they may not work as well or they could have a different effect on your body.

## **Do I have problems with my medications?**

If you are having any of the following difficulties, you may have trouble with your medications:

- Difficulty remembering when or how to take your medications
- You feel worse when you take your medications

## What can I do?

To avoid having medication problems, try following some of the suggestions below:

- **Use your medication calendar.** With this booklet, you will find your medication calendar. In it, you can keep useful information including a list of your medications, why you need to take them and what side effects to expect.
- **Follow the instructions.** Your medications will be the most helpful if you are using them properly. Make sure you are taking the right amount at the right time.
- **Use memory aids.** Try using a pill organizer to help you remember when to take your medications. You can also program an alarm on a watch to remind you to take your medication. It is a good idea to carry a list of medications with you, in case you need to tell someone (i.e. your doctor) what you are taking.
- **Ask for help.** It is easy to forget your medication schedule. You may need to ask someone (i.e. a family member or close friend) to help you remember. You may want to share your medication schedule with them.
- **Talk to your pharmacist.** Ask your pharmacist for an instruction/information sheet that goes with your medication.
- **Talk to your doctor.** If you have any concerns about your medications, be sure to tell your doctor. Tell your doctor what medications, over-the-counter drugs and vitamins you are taking.

PATIENT  
NAME:

DATE:

## MEDICATION CALENDAR

MEDICATION NAME	DIRECTIONS	REASON FOR USE	B R E A K F A S T	L U N C H	S U P P E R	B E D T I M E	More common side effects	COMMENTS

The following medications have been discontinued:

The Rehabilitation Centre

The Ottawa Hospital

Pharmacist:

Contact: 613-737-7350 ext. 75312

Always check the strength and directions on you bottle. If different, please contact your pharmacy to clarify.



## Section 2

# Recommendations for recovery

### Ask for help

For persons you think are appropriate, you may want to share some of the educational materials in this package so they can better understand your challenges. This may make it easier to ask for and receive support and help from others you trust.

#### Who can you ask for help:

- Your spouse
- Family members
- Caregiver
- Other relatives
- Close friends
- Your employer
- Professors/teachers (for students)
- Student services department (for students)

#### When to ask for help:

- If you are experiencing physical, behavioural, emotional or cognitive changes that may affect your performance on a task.
- If you are having difficulty communicating with others.
- To help you gain control of your actions or for remembering information.
- If your overall health is getting worse.
- To discuss any concerns or issues you may have with others.

## **How much to divulge:**

How much you tell someone will depend on your relationship status with the person who is helping you. For example, in general you would divulge more information to a spouse or family member than to your employer.

Information should be limited to the area of interest you require help with; if you have trouble concentrating, then you need to share this information with your employer in greater detail.

# Alcohol and drugs

## No alcohol or drug use



People who begin or continue using alcohol or drugs after a brain injury don't recover as quickly.

Using alcohol or drugs that were not prescribed by your doctor after a brain injury can have a serious impact on your health. It may slow your recovery or stop you from recovering completely. It may even make your injury worse.

### **If you use alcohol or drugs after your brain injury, the following may occur:**

- Reduced ability to regain old skills.
- Current symptoms could get worse. For example, problems with balance, speech, depression, memory and concentration will be worsened.
- Increased likelihood to have a seizure.
- Medications may not work as well.
- Trouble using coping strategies that you may have learned.
- Increased risk of having another injury.

Some people use alcohol and drugs to help them cope. If you need advice to help you cope with your situation talk to your doctor.

# Driving

## **Do not drive unless you are told it is okay.**

After a brain injury, people may have symptoms that could affect their ability to drive. For example, you may not be able to think as quickly as you used to, or you may have trouble seeing. These symptoms make driving dangerous.



It is dangerous to drive after a brain injury. You should not drive unless your doctor tells you it is okay.

## **How will I know if I cannot drive?**

Your doctor will tell you if they are worried about you driving. They will also tell the Ontario Ministry of Transportation because it is the law. Four to six weeks later, the Ministry will send you a letter telling you whether or not you can drive.

## **When can I drive again?**

You cannot drive until your doctor and the Ministry of Transportation say that it is safe for you to do so.

It is important that you listen to your doctor and the Ministry so that you do not put yourself or others at risk.

## **What can I do to get my license back?**

If you think you are ready to drive again, you must first go see your doctor. At your appointment, your doctor will review your health and send an update to the Ministry of Transportation.

If your doctor thinks it is appropriate, he/she might refer you to a specialized driving program for an assessment of your driving skills.

## **Taking the drivers test**

You will do your drivers test at a Driving Assessment Centre. You can only take the drivers test if your doctor refers you for a driving assessment. You will have to pay for this service.

Before you can take your test, the Driving Assessment Centre must have the results from your eye doctor. If your vision is okay, they will contact the Ministry of Transportation and decide when you can take your test. You will get a temporary license for your test date only. The driving centre will let you know when you need to be there for your test.

When you go for your drivers test, you will have to do some written tests, as well as a simulated drivers test. Your abilities will be assessed by an occupational therapist. If you do well on the first few tests, you will be able to do an in-car drivers test. For the in-car portion of your test, an occupational therapist and driving instructor will evaluate your driving skills.

## **What next?**

You and your doctor will both get a copy of your drivers test results. The Ministry of Transportation will also get a copy in addition to the health report sent by your doctor. The Ministry of Transportation will decide if you can return to driving based on this information.

## **What if my drivers test doesn't go well?**

If the people assessing your skills aren't sure you are ready to drive, they may ask you to take some lessons before you can have your license back.

If you are told you cannot drive, you may still be able to take the test again. Remember, there is a fee for this service even if you are taking it for the second time.

Some people are not able to return to driving for long periods of times, or in some cases, ever.

# Sports

## Do not play sports unless you are told it is okay.

After an injury, the brain will need some time to recover. To help the brain recover, people who have had injuries should avoid high risk sports or activities that may result in a fall or blow to the head (snowboarding, skiing, biking etc.).

## When can I play sports again?

Speak with your doctor or physiotherapist to determine when you can return to your leisure activities or to determine which activities are appropriate to return to.

Depending on the severity of the injury, your doctor may recommend that you avoid some activities for up to 1 year.

## Returning to sports: Safety first!

When returning to sports, safety is the number one consideration. People with a brain injury are at higher risk of having another brain injury.

## What can I do?

- Wearing a helmet is the best way to stay safe.
- Bicyclists who wear helmets can reduce the severity of brain injury by as much as 85%! Helmets also prevent brain damage in water and winter sports.



Wearing a helmet is the most important way to prevent a serious head injury.

## Wearing a helmet

A helmet needs to fit you correctly if you want it to protect you. To make sure your helmet will help keep you safe, try following the helmet fitting tips below.

## **Your helmet fits correctly when:**

- It fits snugly and doesn't move around.
- It sits two fingers or less above the eyebrows.
- The straps meet in a "V" just below the ears.
- You can place no more than two fingers between your chin and the strap.
- Your bicycle helmet is CSA certified (it is the law for cyclists under 18 years of age).

## **Other advice:**

- Helmets can break down from the sun. Therefore, it is a good idea to replace your helmet every few years.
- If you have ever been in an accident while wearing your helmet, it is recommended that you replace it.

# Return to work

## Return to work slowly.

Getting back to work after a brain injury is hard. Some people may be able to return to their old job or some might have to find a new one. This takes time, and it may be very stressful. Returning to work is more likely to be successful if a person with a brain injury takes it slow.

## How will I know when I am ready to get back to work?

You may be ready for work if you:

- Have a high energy level and would feel comfortable spending at least a half day at work.
- Are able to have a conversation with someone and understand social cues (i.e. you can tell when someone is upset).
- Have control over your anger/temper.
- Are able to start, plan for, and complete tasks on your own.
- Know when you have made a mistake.
- Can effectively use strategies to help you deal with any remaining concerns (i.e. a day planner for memory problems).



**Remember:** Starting a new job or returning to your old one is especially stressful when you have a brain injury. While you are learning new skills or relearning old ones, you may be feeling even more tired and/or anxious. You and your family members should be aware of this. The adjustment could be difficult for everyone.

## Old job or new job?

This is a difficult decision. Returning to your old job might mean that you do not have to learn any new information. However, you may decide to look for a new job if:

- You are afraid you will not succeed at your old job.
- You have lost some of your skills, preventing you from returning to your old job.
- Your old job no longer exists.



If you are thinking about returning to your old job, or finding a new one, it is a good idea to talk to someone who can help. An occupational therapist or vocational counsellor can assess your skills and prepare you for work.

## **What can I do?**

To help make your return to work a success, try the following:

- **Know yourself.** Think about your skills, interests and abilities. If you need to look for a new job, try to find one that matches your strengths.
- **Take it slow.** You may want to start working part-time and gradually extend your hours. Once at work, start with simpler job tasks. You can work your way up to more difficult tasks.
- **Ask for help.** Your occupational therapist can assess your work skills and help you relearn what you need to know for your job. They can also help you decide if you are ready to go back to work.
- **Talk to your co-workers.** You may want to talk to your co-workers about your condition so that they know what to expect. Talk to your employer if you need to make any changes (i.e. maybe you need a quieter work space).

# Return to school

## Plan ahead for a gradual return to school.

For many people, going back to school is one of the hardest things to do after a brain injury. It is important to take some time off before returning to develop a plan that will help you deal with potential problems.

## What will it be like at school?

After a brain injury, you may have some of the following difficulties in the classroom:

- Trouble remembering what you learned before.
- Difficulty learning new information.
- A hard time paying attention in class.
- Difficulty taking notes from the chalkboard or overhead.
- It may take you longer to finish your homework and other assignments.
- Become easily tired, making afternoon classes especially difficult.
- Become overwhelmed by the workload.
- Trouble organizing your time.

Most teachers do not know a lot about brain injuries and therefore are not familiar with these difficulties that you may have at school. Returning to school slowly will also give your teachers a chance to prepare themselves so that they will be able to help you when you return.

## What can I do?

To help make your return to school successful, you may want to:

- **Plan ahead.** You may need to arrange things with your school in advance or set up a meeting with the teacher. Perhaps start by redoing a course you have already taken or auditing a course.
- **Know your needs/limitations.** If you know where you might have trouble, you will be able to ask for exactly what you need before you need it.

- **Ask for help.** Talk with your student services department or teacher. For example, you could ask to sit at the front of the class if you find it difficult to see. If your thinking is slow, you may need to ask for extra time to finish assignments and/or tests.
- **Find a study buddy or peer tutor.** Having someone to study with can help you focus on the more important information. If it would be helpful, your buddy may even be able to take notes for you in class.
- **Make a schedule.** Try to schedule a daily study period for when you are most alert. This will help you to avoid late-night studying and cramming.
- **Avoid distractions.** Try not to study in front of the TV or while listening to the radio. If you find you are easily distracted, you might need to look for a new study area (i.e. the library).
- **Break it down.** Dividing larger assignments into smaller tasks and taking plenty of breaks should help you get through it.
- **Use aids.** If you are having memory problems, you may need to use an agenda/day planner. This way, you can keep track of your homework/ assignments as well as your class schedule.



Giving teachers information about brain injury will make it easier for them to help you. There is a lot of information available online for teachers interested in learning more.

# References

Below is a list of sources that includes published materials and websites used to obtain some of the information found in this package. You may refer to these sources for more in-depth information on strategies for coping with a brain injury.

- Ponsford, J., Willmott, C., Nelms, R. & Curran, C. Information about Mild Head Injury or Concussion. 2004
- Page, T.J. The Road to Rehabilitation Part 4: Navigating The Curves: Behavior Changes & Brain Injury. Brain Injury Association of America, 2001.
- Blosser, J.L. & DePompei, R. The Road to Rehabilitation Part 5 – Crossing the Communication Bridge: Speech, Language & Brain Injury. Brain Injury Association of America, 2001.
- Zasler, N. The Road to Rehabilitation Part 2 – Highways to Healing: Post-Traumatic Headaches & Brain Injury. Brain Injury Association of America, 2001.
- University of Washington Medical Center/Harborview Medical Center. Patient Education: Rehabilitation Medicine – Memory and Brain Injury. UW Medicine, 2008.
- University of Washington Medical Center/Harborview Medical Center. Patient Education: Rehabilitation Medicine – Attention and Brain Injury. UW Medicine, 2008.
- University of Washington Medical Center/Harborview Medical Center. Patient Education: Rehabilitation Medicine – Pain, Headaches, and Brain Injury. UW Medicine, 2008.
- University of Washington Medical Center/Harborview Medical Center. Patient Education: Rehabilitation Medicine –Initiation, Planning, Organization and Brain Injury. UW Medicine, 2008.
- Corkery, S., Fairweather, M. & Patterson, R. Communication after Brain Injury. Brain Injury Rehabilitation Trust, Disabilities Trust. No date.
- The Effects of Brain Injury. Headway, the brain injury association.

- Kruetzer, J.S., Livingston, L.A. & Taylor, L.A. Overcoming Loneliness and Building Lasting Relationships after Brain Injury – Living with Brain Injury. Brain Injury Association of America, 2006.
- Traumatic Brain Injury and Sexual Issues: Fact Sheet. Better Health Channel, [www.betterhealth.vic.gov.au](http://www.betterhealth.vic.gov.au) 2010.
- Hovland, D.C. Anger Problems Following Traumatic Brain Injury. Communication Skill Builders Inc., 1994.

# Section 3

## Community resources

This section will help you find useful services in your community.

You may want to start with the Brain Injury Association of the Ottawa Valley.

### **Brain Injury Association of the Ottawa Valley**

Email: [braininjuryottawavalley@bellnet.ca](mailto:braininjuryottawavalley@bellnet.ca)

Website: [www.biaov.org](http://www.biaov.org)

Refer to page 60 for more information on the Brain Injury Association of the Ottawa Valley.

On the next pages, you will also find information about housing, education, healthcare and other support services in your area.

# Acquired brain injury community resource guide

## How can this resource guide help?

The Acquired Brain Injury (ABI) Community Resource Guide has been designed to provide information to persons living with an acquired brain injury, caregivers and family members about where to access services in the Ottawa area, once back in the community.

Whether living at home independently or with support, life can present new and unexpected challenges. Abilities may change over time; you and your family may have questions about how to meet those changing needs.

You or your family may wish to start a search online. There are a number of helpful general internet resources available online.

## Acquired brain injury information websites

### Brain Injury Association of Ottawa Valley

[www.biaov.org](http://www.biaov.org)

### Toronto ABI Network

[www.abinetwork.ca](http://www.abinetwork.ca)

### Ontario Brain Injury Association

[www.obia.on.ca](http://www.obia.on.ca)

**\*Note:** For a full listing of the websites included in this resource guide, refer to the last page.

For privately funded services please consult Professional Associations/  
Colleges for listings.

If you are looking for more specific information regarding publically funded support, programs and services in the Ottawa area, the upcoming pages in this guide will provide you with information in the following categories:

ABI Community Resource Guide Phone Directory . . . . .	p. 54
Community ABI Housing and Support Services . . . . .	p. 56
Day/Recreational Programs . . . . .	p. 59
Educational Resources . . . . .	p. 61
Family Support/Peer Support . . . . .	p. 64
General Community Services, Information Services and Transportation etc	p. 65
Hospitals and Community Care Access Centres in the Champlain District .	p. 70
Specialty Services: Addiction Services . . . . .	p. 72
Employment and Financial Services . . . . .	p. 74
The Ottawa Hospital . . . . .	p. 76
Website Listings . . . . .	p. 78



# **ABI community resource guide phone directory**

## **Community ABI housing and support services**

Community Care Access Centre (CCAC) – Respite Care	613-745-5525
Moose Creek Villa – Long Term Residential Program	613-538-2977
Pathways to Independence – Supported Independent Living (SIL)	613-962-2541 ext. 269
Pathways to Independence – Long Term Residential Program	613-962-2541 ext. 269
Vista Centre – Long Term Residential Program	613-729-9379
Vista Centre – Supported Independent Living (SIL)	613-234-4747

## **Day/recreational programs**

Brain Injury Association of Ottawa Valley – Step Up Work Centre	613-233-8303
City of Ottawa ABI – Day Program	613-824-0819 ext 234
Pathways to Independence – Day Program	613-808-4998
Vista Centre – Day Program	613-234-4747 ext 25

## **Educational resources**

ABC Line, Ottawa Community Coalition for Literacy	613-233-3232
Adult High School – Ottawa-Carleton District School Board	613-239-2707
Algonquin College – The Centre for Students with Disabilities	613-727-4723 ext 7683
Alternative Learning Styles and Outlooks (ALSO)	613-233-8660
Carleton University – Paul Menton Centre	613-520-6608
Cite Collégiale – Centre pour les besoins spéciaux	613-742-2493 ext 2090

Ottawa-Carleton Catholic School Board – Special Education 613-224-2222

Ottawa University – Student Academic Success Services 613 562-5976

## **Family support/Peer support**

Brain Injury Association of Ottawa Valley 613-233-8303

The Ottawa Hospital Rehabilitation Centre  
(Social Work Department) 613-737-7350 ext 75322

## **General community services**

Brain Injury Association of Ottawa Valley 613-233-8303

Citizen Advocacy of Ottawa 613-761-9522

Community Care Access Centre (CCAC) Ottawa 613-745-5525

Distress Centre – Ottawa and Region 613-238-2311

Ottawa Public Health: Health and Support Services 613-580-2400

Para Transpo 613-244-1289

## **Hospitals and CCAC in the Champlain**

District Ontario Ministry of Health INFOline 1-866-532-3161

## **Specialty community services**

### **Addiction services**

Alcoholics Anonymous in Ottawa 613-789-8941

Rideauwood Addiction and Family Services 613-742-4881

Sandy Hill Addiction and Mental Health Services 613-237-6000

Serenity Renewal Counselling (individual and family) 613-523-5143

**Employment and financial aid services**

Canadian Pension Plan – Retirement and Disability Benefits 1-800-277-9914

Northern Lights Vocational Services Ottawa 613-688-5627

Ontario Disability Support Program (ODSP) 613-234-1188

Ontario Works 613-560-6000

**The Ottawa Hospital**

613-737-8899

# **Community ABI housing and support services**

## **Community Care Access Centre (CCAC) – Respite Care**

**613-745-5525**

4200 Labelle St., Suite 100

The Ottawa Community Care Access Centre (CCAC) is a bilingual, charitable, non-profit corporation. They are funded by the provincial Ministry of Health and Long-Term Care. The CCAC exists to connect the people of Ottawa with the community and long-term care services they need. They offer In Home Respite Services and Social Work and they can make respite bed referrals to Saint Vincent's Hospital as well as Nursing Homes.

**Email:** [glenda.owens@ottawa.ccac-ont.ca](mailto:glenda.owens@ottawa.ccac-ont.ca)

**Website:** <http://healthcareathome.ca/champlain/en>

## **Moose Creek Villa – Long Term Residential Program**

**613-538-2977**

53 Labrosse P.O. Box 10, Moose Creek, Ontario

Moose Creek Villa is a warm, comfortable private owned lodge where quality living is still affordable; we provide residential long-term living support mainly to adults living with the effects of Acquired Brain Injury. The Villa is located in a quiet rural setting, about 40 minutes southeast of Ottawa. Bilingual programs and services are all designed to meet the needs and rehabilitation goals of each individual as well as ensuring the quality of life they desire.

**Email:** [info@moosecreekvilla.com](mailto:info@moosecreekvilla.com)

**Website:** [www.moosecreekvilla.com](http://www.moosecreekvilla.com)

## **Pathways to Independence – Supported Independent Living**

**613-962-2541 ext. 269**

211 Bronson Avenue – Room 309

Supported Independent Living (SIL) clients receive support in their own apartments in the community. For example: budgeting, household management, managing medical appointments, finding vocational and leisure options in the community.

**Email: [laurieb@pathwaysind.com](mailto:laurieb@pathwaysind.com)**

**Website: [www.pathwaysind.com](http://www.pathwaysind.com)**

## **Pathways to Independence – Long Term Residential Program**

**613-962-2541 ext. 269**

211 Bronson Avenue – Room 309

Pathways to Independence has two long term residences. These residences are staffed seven days a week, 24 hours a day, providing a caring environment to small groups of people making and sharing a home. Located in both rural and urban environments across south eastern Ontario, Pathways residences are customized to meet the physical and social needs of the residents.

**Email: [laurieb@pathwaysind.com](mailto:laurieb@pathwaysind.com)**

**Website: [www.pathwaysind.com](http://www.pathwaysind.com)**

## **Vista Centre – Supported Independent Living Program (SIL)**

**613-234-4747**

211 Bronson Avenue, Room 214

The Supported Independent Living Program (SIL) serves individuals living with the effects of brain injury who require long term support. The focus is on reintegration in to the community. SIL offers leisure/recreation programs, life skills training, behavioural rehabilitation, brain injury resources and education, case management, occupational therapy, physiotherapy and psychology services.

**Email: [sil@vistacentre.ca](mailto:sil@vistacentre.ca)**

**Website: [www.vistacentre.ca](http://www.vistacentre.ca)**

## **Vista Centre – Long Term Residential Program**

**613-729-9379**

107-31 Van Lang Private

The Residential Program is a long term, wheelchair accessible, fully supervised living setting for five individuals living with the effects of brain injury. The individuals are encouraged to be as independent as possible in areas such as daily living, self-help, accessing community resources and socialization. This residential program offers: leisure/recreation programs, life skills training, counselling, behavioural rehabilitation, cognitive rehabilitation, crisis intervention, health and fitness, nutrition, brain injury resources and education.

**Email: [vanlang@vistacentre.ca](mailto:vanlang@vistacentre.ca)**

**Website: [www.vistacentre.ca](http://www.vistacentre.ca)**

## **Day/Recreation Programs**

### **Brain Injury Association of Ottawa Valley – Step Up Work Centre 613-233-0111**

211 Bronson Avenue, Room 300

The Clubhouse Work Centre is a member directed, community based day program for adults living with the effects of an acquired brain injury. The day is viewed as a workday and the members are there to work. It is operated by and for its members. Membership is voluntary and without time limits. The Clubhouse is currently open three days per week (Mon, Wed, and Thurs) from 10 am – 3 pm. Members have the chance to participate in all work areas of the clubhouse, which includes: Kitchen/Environmental, Administration and Employment, Community and Education Unit (ECE).

**Email:** [braininjuryottawavalley@bellnet.ca](mailto:braininjuryottawavalley@bellnet.ca)

**Website:** [www.biaov.org](http://www.biaov.org)

### **City of Ottawa Acquired Brain Injury (ABI) Day Program 613-824-0819 ext 234**

Orleans Recreation Complex, 1490 Youville Drive

The City of Ottawa and the Ministry of Health and Long Term Care offer this therapeutic recreation and life skills day program for adults with acquired brain injuries. Participants maintain and improve functional, social and behavioural skills through health and fitness, leisure/recreation as well as life-skills training. The ABI Day Program runs Monday to Friday 9 am – 3 pm at a cost of \$10.50 per day. The cost covers all community activities and in house programs. A packed lunch is recommended as food purchases are extra.

**Email:** [margot.quigley-diotte@ottawa.ca](mailto:margot.quigley-diotte@ottawa.ca)

**Website:** [www.ottawa.ca](http://www.ottawa.ca)

## **Pathways to Independence – Club ABI**

**613-233-3322**

356 Woodroffe Avenue, Ottawa, Ontario

The Pathways to Independence's Club ABI provides a relaxed setting with opportunities for people with acquired brain injury to develop new skills, build social networks and have fun. Programs and activities are offered in-house as well as in the community. There is a monthly membership fee of \$30 per month (subsidies available). Additional costs may be required depending on the activity.

**Email:** [darlenem@pathwaysind.com](mailto:darlenem@pathwaysind.com)

**Website:** [www.pathwaysind.com](http://www.pathwaysind.com)

## **Vista Centre – Day Program**

**613-234-4747 ext 25**

Boys and Girls Club, 430 McArthur Ave.

The ABI Day Program is for independent individuals between the ages of 21 and 55 who have an acquired brain injury. Located in Ottawa West, Boys and Girls Club, the program runs twice a week (Monday and Friday 10 am – 2 pm). The program helps participants to develop leisure lifestyle skills, foster social relationships, improve community awareness and increase quality of life through fun and interactive activities in a casually structured environment.

**Email:** [tammy@vistacentre.ca](mailto:tammy@vistacentre.ca)

**Website:** [www.vistacentre.ca](http://www.vistacentre.ca)



## **Educational resources**

### **ABC Line, Ottawa Community Coalition for Literacy**

**613-233-3232**

211 Bronson Avenue, Suite 107

ABC Line is a literacy hotline for persons looking for help with the basics reading and writing skills. The hotline offers information and referral services about literacy and programs here in the City of Ottawa.

**Email:** [abcline@occl.ca](mailto:abcline@occl.ca)

**Website:** [www.occl.ca](http://www.occl.ca)

### **Adult High School – Ottawa-Carleton District School Board**

**613-239-2707**

300 Rochester Street

High school courses are offered during the day for adults from grades 10 to 12. The environment is designed to meet special needs. Programs are run full-time in a classroom setting. Also, a cooperative education program is available to students who want to combine work and school. Students must attend full time minimum 3 out of 4 classes.

**Website:** [www.adulths.ocdsb.ca](http://www.adulths.ocdsb.ca)

### **Algonquin College – The Centre for Students with Disabilities**

**613-727-4723 ext 7683**

1381O Woodroffe Avenue, Room C 142

The Centre for Students with Disabilities provides educational support services to students with identified disabilities who are applying or attending Algonquin College. A counsellor gives ongoing academic support and guidance. Accommodations are put in place to help students meet the academic requirements of their courses, for example: note-taking services, memory aids, extended time on tests/exams. The John Burton Adaptive Technology Lab provides assessment on adaptive equipment based on a student's cognitive and physical needs.

**Email:** [csd@algonquincollege.com](mailto:csd@algonquincollege.com)

**Website:** [www.algonquincollege.com/cal/](http://www.algonquincollege.com/cal/)

## **Alternative Learning Styles and Outlooks (ALSO)**

**613-233-8660**

153 Chapel Street

ALSO helps people who need extra support and time with the basics reading, writing and math skills required for daily life, work and future learning. Specialized training plans and goal setting are used to help students reach their upgrading goals. ALSO works with Algonquin College to offer the ACElinks program too. ACElinks is like a Grade 12 diploma that can be used to get into college, university and apprenticeship programs.

**Email: [info@also-ottawa.org](mailto:info@also-ottawa.org)**

**Website: [www.also-ottawa.org](http://www.also-ottawa.org)**

## **Carleton University – Paul Menton Centre**

**613-520-6608**

500 University Centre, 1125 Colonel By Drive

The Paul Menton Centre is responsible for the coordination of academic accommodations and support services for students with disabilities who are applying or attending Carleton University. A variety of support services are provided, such as: one-on-one learning support, note taking, adaptive equipment loans, sign language interpretation, and screening and referral for disability assessment.

**Email: [pmc@carleton.ca](mailto:pmc@carleton.ca)**

**Website: [www2.carleton.ca/pmc](http://www2.carleton.ca/pmc)**

## **La Cité collégiale – Service des besoins spéciaux**

**613-742-2493 ext 2090**

801 Aviation Parkway, Unit C – 1040

La Cité collégiale has established various quality services tailored to the special needs of its French students. The Special Needs Services provide students with an assessment of their needs. The result of this evaluation is to develop a plan of accommodating the student in such a way that functional limitations on learning are reduced and the chances of success are increased. Tutoring services in are also offered free to students with difficulties in written and spoken French.

**Email: [info@lacitec.on.ca](mailto:info@lacitec.on.ca)**

**Website: [www.collegelacite.ca/programme-transition](http://www.collegelacite.ca/programme-transition)**

## **Ottawa-Carleton Catholic School Board – Special Education**

**613-224-2222**

570 West Hunt Club Road

The Ottawa-Carleton Catholic School Board has classes available in number of schools for English-speaking students with developmental and/or physical disabilities, living in Ottawa. There are assessment programs, education for community living classes as well as elementary to high school classes.

**Website: [www.ocdsb.ca](http://www.ocdsb.ca)**

## **University of Ottawa– Student Academic Success Services (SASS)**

**613-562-5976**

University Centre, 85 University, Room 339

SASS offers a wide range of services to meet student's learning needs, including: workshops, study skills appointments, study spaces and more at Learning Support Services; a network of peers helping peers in our Peer Assisted Study Sessions; and assistance with academic writing in the Writing Tutorial Service. SASS is the best place for special needs students to meet one-on-one with a SASS academic advisor to discuss their educational plans. Hours: 8:30 am – 4:30 pm.

**Email: [adapt@uOttawa.ca](mailto:adapt@uOttawa.ca)**

**Website: [www.sass.uOttawa.ca/access](http://www.sass.uOttawa.ca/access)**

## **Family and peer support**

### **Brain Injury Association of Ottawa Valley (BIAOV)**

**613-233-8303**

211 Bronson Avenue, Room 300

The Brain Injury Association offers a number of programs in the community for adult survivors with brain injury, their family and caregivers. A Family Support Group, Peer Support Group and Peer Mentoring Program are available through the Association. The groups allow those coping with brain injury to connect with and learn from other individuals sharing similar experiences. Also, the Peer Mentoring Program offers the added opportunity to volunteer help to others by sharing your experiences.

**Email:** [braininjuryottawavalley@bellnet.ca](mailto:braininjuryottawavalley@bellnet.ca)

**Website:** [www.biaov.org](http://www.biaov.org)

### **The Ottawa Hospital Rehabilitation Centre**

**613-737-7350 ext 75322**

505 Smyth Road

Family Brain Injury Education/Support Sessions is offered through the department of Social Work in the Ottawa Hospital Rehabilitation Centre (no referral needed). Also, individual counselling is available through the Psychology department (referral needed). If you were not previously a client of the Ottawa Hospital then you will need a referral from Dr. Marshall, at the Acquired Brain Injury Outpatient Clinic.

**Website:** <http://www.ottawahospital.on.ca/wps/portal/Base/TheHospital/ClinicalServices/DeptPgrmCS/Departments/RehabilitationCentre>

Refer to Specialty Community Services for support in the areas of:

- Employment
- Financial Aid
- Addiction Services

## **General community services**

**(Information services, transportation, etc.)**

### **Brain Injury Association of Ottawa-Valley**

**613-233-8303**

219-211 Bronson Avenue

The Brain Injury Association of Ottawa Valley provides support groups for individuals who have sustained a brain injury and their families. A resource centre is available, providing literature and video cassette information about brain injury and brain injury resources. The Association also provides a quarterly newsletter and special events/education sessions for the membership.

**Email:** [braininjuryottawavalley@bellnet.ca](mailto:braininjuryottawavalley@bellnet.ca)

**Website:** [www.biaov.org](http://www.biaov.org)

### **Champlain Health Line**

Online only

The Champlainhealthline.ca is a website developed by the Champlain Community Care Access centre (CCAC). It posts accurate and up-to-date information about health and community services across the Champlain region. Over 2100 service listings describe organizations and programs serving people who live in Ottawa, Renfrew county, Prescott and Russell, Stormont, Dundas and Glengarry and North Lanark and North Grenville. Users can search through services, events, news and careers.

**Email:** [edit@champlain.ccac-ont.ca](mailto:edit@champlain.ccac-ont.ca)

**Website:** [www.champlainhealthline.ca](http://www.champlainhealthline.ca)

## **Community Care Access Centre (CCAC) Ottawa**

**613-745-5525**

100–4200 Labelle St.

The Ottawa Community Care Access Centre (CCAC) is a bilingual, charitable, non-profit corporation. They are funded by the provincial Ministry of Health and Long-Term Care. The CCAC exists to connect the people of Ottawa with the community and long-term care services they need. They provide personal and caregiver support by means of information, education as well as referrals to accessible brain injury resources.

**Email: [info@champlain.ccac-ont.ca](mailto:info@champlain.ccac-ont.ca)**

**Website: <http://healthcareathome.ca/champlain/en>**

## **Citizen Advocacy of Ottawa**

**613-761-9522**

312 Parkdale Avenue

Citizen Advocacy is one of only a few Ottawa agencies supporting people with a wide range of disabilities. Citizen advocacy matches volunteers from the community with people who are isolated and vulnerable because of a disability. Citizen Advocacy sets up one-to-one matches between volunteer advocates and people with disabilities that can have profound effects on both. They offer services to the client by taking them out in the community and as a result giving respite to the caregiver during this community outing.

**Email: [info@citizenadvocacy.org](mailto:info@citizenadvocacy.org)**

**Website: [www.citizenadvocacy.org](http://www.citizenadvocacy.org)**

## **Ottawa Public Health: Health and Support Services**

**613-613-580-9656**

100 Constellation Crescent

Ottawa Public Health (OPH) encourages residents to actively participate in decisions that affect their health. Health and support services allow all residents to increase their knowledge about how to access health and social services in our community. The more you know about where to find help, the more informed decisions you can make to get and to stay healthy. OPH is your link to Ottawa's health and support services.

**Email: [healthsante@ottawa.ca](mailto:healthsante@ottawa.ca)**

**Website: [www.ottawa.ca/en/residents/public-health](http://www.ottawa.ca/en/residents/public-health)**

## **Para Transpo**

**613-244-1289**

1500 St. Laurent Boulevard

Para Transpo is a door-to-door transportation service for persons with disabilities who are unable to use conventional transit services. It is funded by the City of Ottawa and administered by OC Transpo. It provides transportation within the urban and rural areas of the City of Ottawa and to the Hull sector of Gatineau. Para Transpo may offer transportation services to acquired brain injury but it is done on an individual basis. Off ce hours are Monday to Friday between 8 am – 5 pm.z

**Website: [http://www.octranspo.com/accessibility/para\\_transpo](http://www.octranspo.com/accessibility/para_transpo)**



## **Distress Centre – Ottawa and Region**

**613-238-2311**

The Distress Centre operates a confidential volunteer based 24/7 support line. Volunteers are trained to listen, talk through concerns or provide community resource information. They support those who are depressed, lonely, overwhelmed or so distraught they're contemplating suicide.

**Website: [www.dcottawa.on.ca](http://www.dcottawa.on.ca)**

# Hospitals and community care centres

To find a Community Care Access Centre (CCAC) closest to you, within the Champlain District please call the local number: 613-310-2222.

<b>Alexandria</b>	Glengarry Memorial Hospital
<b>Almonte</b>	Almonte General Hospital
<b>Arnprior</b>	The Arnprior and District Memorial Hospital
<b>Barrys Bay</b>	St. Francis Memorial Hospital
<b>Carleton Place</b>	Carleton Place and District Memorial Hospital
<b>Cornwall</b>	Hotel Dieu Hospital of Cornwall Cornwall Community Hospital
<b>Deep River</b>	Deep River and District Hospital
<b>Hawkesbury</b>	Hawkesbury and District General Hospital
<b>Kemptville</b>	Kemptville District Hospital
<b>Ottawa</b>	Bruyere Continuing Care Inc. Children's Hospital of Eastern Ontario (CHEO) Hopital Monfort Queensway-Carleton Hospital The Ottawa Hospital/ L'Hopital D'Ottawa University of Ottawa Heart Institute 613-761-4779
<b>Pembroke</b>	Pembroke Regional Hospital Inc. 613-732-2811

**Renfrew**

Renfrew Victoria Hospital  
613-432-4851

**To find a hospital or CCAC outside the Champlain District area, please call:  
1-866-532-3161 to reach The Ontario Ministry of Health INFOline.**

The hours of operation are from 8:30 a.m. – 5:00 p.m. or you can find them online.

**Website: [www.health.gov.on.ca](http://www.health.gov.on.ca)**

## **Speciality community services: Addiction services**

### **Alcoholics Anonymous (AA) in Ottawa**

**613-237-6000**

If you or your loved one thinks you may have a problem with alcohol, there are many meeting locations throughout the Ottawa area. The local website explains the twelve steps and traditions to success in AA as well as the various listings for when and where you can attend meetings nearest you. You may also email a request for help.

**Email:** [ottawaaa-help09@primus.ca](mailto:ottawaaa-help09@primus.ca)

**Website:** [www.ottawaaa.org](http://www.ottawaaa.org)

### **Rideauwood Addiction and Family Services**

**613-742-4881**

312 Parkdale Avenue, Ottawa

If you are calling regarding admittance into a Rideauwood program, or are calling to gather information on our programs for someone you know, you must go through our Telephone Intake Screening. Please call between 9 am and 5 pm, Monday to Friday and leave a message for intake services. The receptionist will tell you how soon you can expect to receive a call back.

**Email:** [rideauwood@rideauwood.org](mailto:rideauwood@rideauwood.org)

**Website:** [www.rideauwood.org](http://www.rideauwood.org)

### **Sandy Hill Addiction and Mental Health Services**

**613-789-8941**

221 Nelson Street, Ottawa

Sandy Hill Community Health Centre provides confidential and supportive counselling services for individuals, couples, families and children/ adolescents seeking help for addictions (including problem gambling), mental health issues, or co-occurring disorders. These services are open to anyone living in the City of Ottawa.

**Email:** [info@sandyhillchc.on.ca](mailto:info@sandyhillchc.on.ca)

**Website:** [www.sandyhillchc.on.ca](http://www.sandyhillchc.on.ca)

## **Serenity Renewal Counselling (individual and family)**

**613-523-5143**

2810 Baycrest Drive, Ottawa

Serenity Renewal for Families helps individuals, couples, youth and families in the Ottawa region to build healthier and happier lives. The focus of the program is to educate others about addiction and more importantly the effect addiction can have on the family as a whole. Groups are offered where individuals learn to deal with life's challenges by learning new life skills and developing personal 'tools' to help deal with problems as they arise.

**Email:** [info@serenityrenewal.com](mailto:info@serenityrenewal.com)

**Website:** [www.serenityrenewal.ca](http://www.serenityrenewal.ca)

## **Tri-County Addiction Services in Smith Falls**

**1-800-361-6948**

Unit A3 | 88 Cornelia Street West, Smith Falls

The Tri-County Addiction Services is a community-based addictions counselling and health promotion agency located in south-eastern Ontario. Services are available to persons in Lanark and Leeds & Grenville counties who may be experiencing family or personal difficulties related to alcohol, drugs, gambling and addiction co-occurring with mental health problems.

**Email:** [north@tricas.on.ca](mailto:north@tricas.on.ca)

# **Employment and financial services**

Everyone's situation is different. The information here is intended as general guidance only. It is not meant to provide a full description of the following government programs or to tell you if you qualify for the program. Please call or visit the website address for more information.

## **Canadian Pension Plan – Retirement & Disability Benefits 1-800-277-9914**

The Canada Pension Plan (CPP) retirement pension provides a monthly taxable benefit to retired contributors.

The Canada Pension Plan (CPP) disability benefit is a monthly payment. The primary purpose is to replace a portion of employment earnings for people who recently paid into the CPP. It is available to people who contributed while they worked, and then became unable to work at any job on a regular basis because of a disability.

**Website:** [www.servicecanada.gc.ca](http://www.servicecanada.gc.ca)

### **Northern Lights Canada Ottawa**

Gloucester Shopping Centre, 1980 Ogilvie Road, Suite 163 (EAST)  
Lincoln Fields Shopping Center, 2525 Carling Avenue, Suite 27A (WEST)

Northern Lights is now working with Employment Ottawa. Employment Ottawa is a network of Employment Ontario services available to Ottawa citizens. Northern Lights' staff will work with you to develop a return to work action plan that is custom-made to meet your employment needs, and provide you with a referral to the programs that will assist you to meet your job goals. The two offices have the same hours of operation – Monday to Friday, 08:30 to 16:30 (8:30 am to 4:30 pm). It is recommended that you book an appointment before hand, if you wish to meet with an Employment Specialist.

## **Ontario Disability Support Program (ODSP)**

The Ontario Disability Support Program helps people with disabilities who need financial help or help finding a job. You do not have to work, but we can help you find and keep a job if you are interested. If you are eligible, you may also receive health and other benefits for yourself and your family.

**Website:** [www.mcass.gov.on.ca/en/mcass/programs/social](http://www.mcass.gov.on.ca/en/mcass/programs/social)

## **Ontario Works**

**613-560-6000**

Ontario Works helps people who need money right away to pay for food and housing. To qualify, the person applying must be willing to participate in activities to help them find a job. If you are eligible, you may also receive health and other benefits for yourself and your family.

**Website:** [www.mcass.gov.on.ca/en/mcass/programs/social](http://www.mcass.gov.on.ca/en/mcass/programs/social)

# **The Ottawa Hospital**

The Ottawa Hospital offers four services based on the patients need at the time of referral.

## **Post Acute Acquired Brain Injury Inpatient Service**

505 Smyth Rd, General Campus

The Post Acute Acquired Brain Injury Inpatient Service is a structured inpatient program. The focus is to improve memory, attention, perception, learning, planning judgment and physical functioning. Therapy programs help patient's to manage challenges in the areas of perception, memory, thinking, problem solving and physical functioning. Skills are practiced and strategies are taught to help improve function and find strategies to work around the challenges left by the brain injury. The overall goal is to help patients to return to the community and live as independently as possible.

## **Behavioural Rehabilitation Service (BRS)**

505 Smyth Rd, General Campus

The Behavioural Rehabilitation Service (BRS) helps patients gain control over challenges associated with their brain injury. The BRS services adults who have an acquired brain injury and demonstrate moderate to severe behaviours. Their treatment approach focuses on the behaviours and thinking, their interactions, and their impact on everyday functioning. Both inpatient and outreach services are offered.

## **Robin Easey Centre**

125 Scrivens Dr., Ottawa ON

The Robin Easey Centre is a community-based transitional living centre located in Ottawa-West. The centre provides community-based life skills instruction, rehabilitation and education services for adults who are living with a brain injury. It also provides training to other health care providers to enable local, specialized support. There is a residential program, a day program and an outreach program.



## **Acquired Brain Injury Outpatient Clinic**

505 Smyth Rd., General Campus

The Acquired Brain Injury Outpatient Clinic offers an outpatient clinic and follow-up services. Outpatients are seen in the ABI clinic for follow up after inpatient rehabilitation. Patients and significant other can discuss challenges and concerns they may have with returning to the community. New patients who require the services need a referral from family doctors or other specialists, to see Dr. Shawn Marshall, Psychiatrist.

## **Website listings**

**ABC Line, Ottawa Community Coalition for Literacy**

[www.occl.ca](http://www.occl.ca)

**Adult High School – Ottawa-Carleton District School Board**

[www.ocdsb.ca](http://www.ocdsb.ca)

**Alcoholics Anonymous (AA) in Ottawa**

[www.ottawaaa.org](http://www.ottawaaa.org)

**Algonquin College – The Centre for Students with Disabilities**

[www.algonquincollege.com/cal](http://www.algonquincollege.com/cal)

**Alternative Learning Styles and Outlooks (ALSO)**

[www.also-ottawa.org](http://www.also-ottawa.org)

**Brain Injury Association of Ottawa Valley**

[www.biaov.org](http://www.biaov.org)

**Carleton University – Paul Menton Centre**

[www2.carleton.ca/pmc](http://www2.carleton.ca/pmc)

**Canadian Pension Plan**

[www.servicecanada.gc.ca](http://www.servicecanada.gc.ca)

**Champlain Health Line**

[www.champlainhealthline.ca](http://www.champlainhealthline.ca)

**Citizen Advocacy of Ottawa**

[www.citizenadvocacy.org](http://www.citizenadvocacy.org)

**City of Ottawa ABI Day Program**

[www.ottawa.ca](http://www.ottawa.ca)

**Community Care Access Centre (CCAC)**

<http://healthcareathome.ca/champlain/en>

**Distress Centre – Ottawa and Region**

[www.dcottawa.on.ca](http://www.dcottawa.on.ca)

**La Cite collegiale – Service des besoins speciaux**

[www.collegelacite.ca/programme-transition](http://www.collegelacite.ca/programme-transition)

**Moose Creek Villa – Long Term Care**

[www.moosecreekvilla.com](http://www.moosecreekvilla.com)

**Northern Lights Vocational Services**

[www.eoon.ca/northern-lights.php](http://www.eoon.ca/northern-lights.php)

**Ottawa-Carleton Catholic School Board**

[www.ocdsb.ca](http://www.ocdsb.ca)

**Ottawa University – Student Academic Success Services (SASS)**

[www.sass.uOttawa.ca/access](http://www.sass.uOttawa.ca/access)

**The Ottawa Hospital Rehabilitation Centre**

[www.ottawahospital.on.ca/rehabcentre](http://www.ottawahospital.on.ca/rehabcentre)

**Ottawa Public Health: Health and Support Services**

<http://ottawa.ca/en/residents/public-health>

**Ontario Disability Support Program(ODSP)**

[www.mcass.gov.on.ca/en/mcass/programs/social](http://www.mcass.gov.on.ca/en/mcass/programs/social)

**Ontario Works**

[www.mcass.gov.on.ca/en/mcass/programs/social](http://www.mcass.gov.on.ca/en/mcass/programs/social)

**Para Transpo**

[www.octranspo.com/accessibility/para\\_transpo](http://www.octranspo.com/accessibility/para_transpo)

**Pathways to Independence**

[www.pathwaysind.com](http://www.pathwaysind.com)

**Rideauwood Addiction and Family Services Website:**

[www.rideauwood.org](http://www.rideauwood.org)

**Sandy Hill Addiction and Mental Health Services**

[www.sandyhillchc.on.ca](http://www.sandyhillchc.on.ca)

**Serenity Renewal Counseling**

[www.serenityrenewal.ca](http://www.serenityrenewal.ca)

**Vista Centre**

[www.vistacentre.ca](http://www.vistacentre.ca)

**Ontario Brain Injury Association**

[www.obia.ca](http://www.obia.ca)

PATIENT  
NAME:

DATE:

**MEDICATION CALENDAR**

MEDICATION NAME	DIRECTIONS	REASON FOR USE	B R E A K F A S T	L U N C H	S U P P E R	B E D T I M E	More common side effects	COMMENTS

The following medications have been discontinued:

The Rehabilitation Centre

The Ottawa Hospital

Pharmacist:

Contact: 613-737-7350 ext. 75312

Always check the strength and directions on you bottle. If different, please contact your pharmacy to clarify.

PATIENT  
NAME:

DATE:

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# Tools

# My personal notes

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