

**BRAIN INJURY
COMMUNITY
RE-ENTRY
(NIAGARA) INC.**



**Become a
Participant
or Family
Volunteer
Advisor**

Participant or Family Volunteer Advisor Interest Form

Mail to: BICR, 3340 Schmon Parkway, Unit 2, Thorold, ON, L2V 4Y6
Drop off: Ask your Case Facilitator or other staff team member to deliver the form for you. ~ Email: staff@bicr.org ~ Fax: 905-641-2785

Contact Information (Please Print)

First Name:

Last Name:

Street Address:

City:

Postal Code:

E-mail Address:

Daytime Phone Number:

Participant Family/Caregiver

Are you available during the day? Yes No

Are there any areas that you are particularly interested in (for example: work on task group, speak at training, plan social event, etc.)



HOW CAN I HELP?

Participants and families can play a unique role in helping Brain Injury Community Re-entry (Niagara) Inc. to provide high quality service delivery. In fact, an essential ingredient to high quality healthcare is actively including the voices of participants and families to improve quality, safety and service outcomes.

Examples of ways BICR currently partners with Participants and Families:

- ◆ Participant Wellness Committee.
- ◆ Strategic Planning Open Space Forums.
- ◆ Brain Injury Survivor and Family representation on the Board of Directors.
- ◆ Community and Family representation on the Behavioural Review Committee.
- ◆ Participation in the agency's annual Golf, Bowling and other fundraising activities.
- ◆ Participant and Family Satisfaction Surveys.

WHY SHOULD I CONSIDER BEING A PARTICIPANT OR FAMILY VOLUNTEER ADVISOR?

- ◆ A chance to improve the quality and safety of services for you and your family member.
- ◆ The opportunity to network with other participants, families, staff and other providers.
- ◆ Give your perspective on problems and help to create innovative solutions.
- ◆ Make a contribution.



WHAT CAN PARTICIPANT AND FAMILY VOLUNTEER ADVISORS DO?

- ◆ Help educate others by talking about your experiences as they relate to improving services.
- ◆ Give feedback about planning.
- ◆ Participate on long term committees and short term working groups.
- ◆ Speak at training and events.
- ◆ Other volunteer opportunities.

If you would like to express an interest in being a Participant or Family Advisor, please complete the Participant or Family Volunteer Advisor Interest Form and return it to BICR. You will be contacted to follow up on your interests and what a suitable role may be. If you have any questions, please call the office at 905-687-6788 or 1-800-996-8796.

Disclaimer:

Brain Injury Community Re-entry (Niagara) Inc. acknowledges funding support for many of our programs and services from the Hamilton Niagara Haldimand Brant Local Health Integration Network (HNHB LHIN) and the government of Ontario.

The views expressed in this publication are the views of Brain Injury Community Re-Entry (Niagara) Inc. and do not necessarily reflect those of the Hamilton Niagara

BICR CONTACT INFORMATION

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1-800-996-8796

Fax: 905-641-2785

Email: staff@bicr.org

Website: www.bicr.org

ACCESSIBLE FORMATS & COMMUNICATION SUPPORTS

Special accessibility accommodations and materials in alternate formats can be arranged by contacting Brain Injury Community Re-entry (Niagara) Inc. at 905-687-6788 ext. 663 or www.bicr.org.