



Recreation Therapy Community Reintegration Family Training

Your main priority when you are in the community is safety. You may be doing everything correctly, but you have to anticipate what others may or may not be doing. The following is an overview of general safety considerations and recommendations when in the community setting.

Outing Preparation

What to bring when you go out:

- Extra bowel and bladder care supplies (IC kits, condom catheters, colostomy supplies, etc.)
- Extra change of clothes (in case of bowel/bladder accidents, spills, or inclement weather)
- Empty water or Gatorade bottle which can be used to collect bladder drainage in a pinch
- Empty grocery bags (can be used for dirty/soiled clothes or to put over joysticks on power wheelchairs in case of inclement weather- this will still allow you to drive the chair while keeping electronics dry)
- Push gloves
- Be prepared for all temperatures

Hot Temperatures

- Sunscreen
- Water
- Umbrella or hat
- Handheld fan

After SCI, a person is much more susceptible to sunburn. A daily practice of wearing sunscreen is highly recommended. Staying hydrated in hot weather is also very important. Always keep water on hand. Umbrellas and hats are helpful in protecting skin from direct sunlight. Personal handheld fans can also aid in cooling.

Cold Temperatures

- Wear insulating clothing (wool, nylon, polypropylene)
- Wear a hat
- Add layers
- Artificial heat sources (heat packs)
- Warm drinks

After a spinal cord injury, the body may not regulate its temperature as before. This results in many people feeling cold almost all of the time. This is especially true for people who have higher-level injuries. Reduced circulation can make the extremities feel cold while the body is warm. Keeping the entire body warm in cold temperatures is important for the body to work properly and avoid tissue injury or hypothermia.

Miscellaneous

- If using a power wheelchair, check the battery on the chair. If you don't have much battery left, it may be best to postpone leaving to allow your chair to charge or bring your charger with you.
- Communicate with each other. You are a team; however, you are not mind-readers. We promote independence but understand that patients will need help.
- If you have more than one family member/caregiver present, make sure you establish a point person and ensure that everyone knows their role and responsibility when out in the community. This can help clear up any confusion and potential safety risks.

Time Management

Always give yourself extra time to get to your destination.

If you think it will take 10 minutes to push to your destination, then allow yourself 20 to 25 minutes to get there. You never know if an issue may arise that will slow your progress (e.g., an impromptu IC, waiting at crosswalks, chair malfunction). You never want to substitute speed for safety

Plan ahead.

If it is your first time visiting this destination, call ahead to ask about accessibility. Remember, not everyone knows what "accessibility" really means. Ask specific questions about entrances, ramps, walkways, etc. to determine accessibility.

Blood Pressure Management

Low Blood Pressure

Potential Signs and Symptoms

- Pale, ashen face
- Dizziness
- Fainting

Treatment

- Power tilt
- Assisted manual tilt
- Lift patient's legs above heart level.
- Put on stomach binders and TED hose.

High Blood Pressure (Dysreflexia)

Dysreflexia is the body letting you know that something is not right.

Potential Signs and Symptoms

- Red face or red blotches on the skin
- Excruciating headache
- Sweating above the level of injury
- Nausea
- Cold, clammy skin

Treatment

- Remove any stomach binders and TED hose.

- Head-to-toe check. Check for any loose items that they have fallen underneath the legs or anything that may be causing the body discomfort.
- IC
- Bowel program

If problem persists, call 911.

Dysreflexia is usually only experienced by individuals with a T-6 level of injury and above. However, knowing and understanding this information is important for people with all levels of injury.

Terrain Management

- **Ramps**
 - **Power chair**
 - Caregiver stays on side of joystick
 - If chair dies, be prepared to do a manual push.
 - If caregiver needs to rest, turn chair perpendicular to ramp, and the chair will remain stationary.
 - Patient can partially tilt back while going down a ramp to feel more stable.
 - Patient should **NOT** be in tilt while going up a ramp.
 - **Manual chair**
 - Caregiver always has hands placed on chair when going down ramps.
 - Patient will do short pushes at first then more full-range pushes once his/her momentum is going up the ramp.
- **Sidewalks**
 - Always avoid large cracks, holes or debris on sidewalk. The chair may get stuck or messed up.
 - Stay in the middle of the sidewalk. The middle is usually the flattest and most stable.
 - The caregiver should always walk on the side of traffic so that they are between the patient and the cars in the street.
- **Curb Cut-Outs**
 - Square up behind the yellow curb-cut box. It is important to stay behind the yellow box so that if cars round the corner too sharply and the back tires come up onto the sidewalk, the patient is out of harm's way.
 - Always enter at the flattest part of the curb cutout.
- **Crossing the street**
 - The caregiver should always cross on the side of the patient where there will be oncoming traffic.
 - The caregiver will be more visible to oncoming cars as they will be taller than the patient who is at a seated level.
 - Pedestrians have the right-of way while in the crosswalk. Even if the crosswalk timer is running out, continue to cross the street as normal.
 - If the crosswalk is unfamiliar, wait one full rotation of the light before crossing. This will ensure that you know how much time you have to cross the street once the light turns.

Problem-Solving

Problem-Solving in the Community

1) There are steps into a building:

- Look for another entrance.
- Check and see if there is a ramp.
- Have someone bump you up the steps if you are in a manual chair.
- Carry a portable ramp in your car.
- Talk to the manager.

2) Your table is too low at a restaurant:

- Look for a table that might be higher.
- If your armrests are not in the way, try removing them.
- Raise the table using phonebooks, dishwashing crates, trays, etc.
- Put a tray in your lap.
- Pull up sideways to the table.
- Transfer into a chair or a booth. See if there is a chair that your friend can move to sit where there is accessible seating.
- Talk to the manager.

3) The door to the restroom is too narrow:

- Check the other restroom (men's or women's).
- Ask if there is a private room or space that you can use.
- Use your car/van.
- See if the place next door has a restroom that is accessible.
- Talk to the manager.

4) The waiter/waitress does not talk directly to you. He or she asks the person with you what you want:

- Use humor. Say to the person you are with, "Tell the waiter that I would like a Coke."
- Be direct. Say, "Thanks, but I can order for myself and I would like a Coke."

5) There isn't accessible seating where you can sit next to your friend or family:

- Transfer into a chair.
- Sit in your wheelchair in an aisle next to a chair.
- See if there is a chair that your friend can move to sit where there is accessible seating.
- Talk to the manager.