

Darlene joined ICE almost two years ago. She has worked and volunteered with people from a wide-range of age groups, from infants to seniors. She is also a woman with diverse talents and experience; Darlene studied art at the Alberta College of Art in Calgary and has worked as a reporter/paste-up artist/photographer for a small-town newspaper. She also taught Art to elementary grades for 1 ½ years and was self-employed for 5 years in the telecommunication business. Darlene is presently working with one full-time ICE non-residential client and 1 part-time ICE non-residential client.

Darlene's full-time client is actively involved working in the community and is dedicated to improving her balance, co-ordination, and strength through a full-time membership at the local gym. With Darlene's support, her client has received high praise from the GYM trainer for the client's dedication and progress in training.

Darlene is also assisting her part-



time client to increase her exercise and to improve and organize her home. These actions are really building the client's self-image. Darlene finds it rewarding facilitating the growth of her client's physical abilities and positive self-esteem.

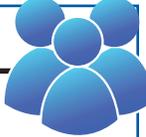
Darlene's other passion is being an artist; she works mainly on portraits. She is in the midst of developing an "After School Care" program in her home and an art studio in her garage so that she may continue to share her artistic talents to teach others. This talent and knowledge has been a great benefit to her work with ICE clients as eye-hand co-ordination improves

when completing "detail" work in hobbies & crafts...with an added benefit of building pride and positive self-esteem in producing their projects.

Darlene is continually working on professional ways to help clients build connections, confidence and trust with members of their community. Thank you for generously sharing your talents!



ECAT
Employee & Client Assistance Team
780-461-7236
after office hours 

MEETINGS 
Health & Safety Meeting
APRIL 5, 1:30 PM
Team Leader/Team Coordinator
MAY 3RD, 10 AM-12 PM
RPAC
APRIL 19, 2:00PM
Please note the TL/TC meeting is in May rather than April.

TIME SHEET HAND-IN 
Hand-in day will be:
April 15th, 2011
for all shifts worked between April 1st and 15th and
May 2nd, 2011
for all shifts worked between April 15th and 30st

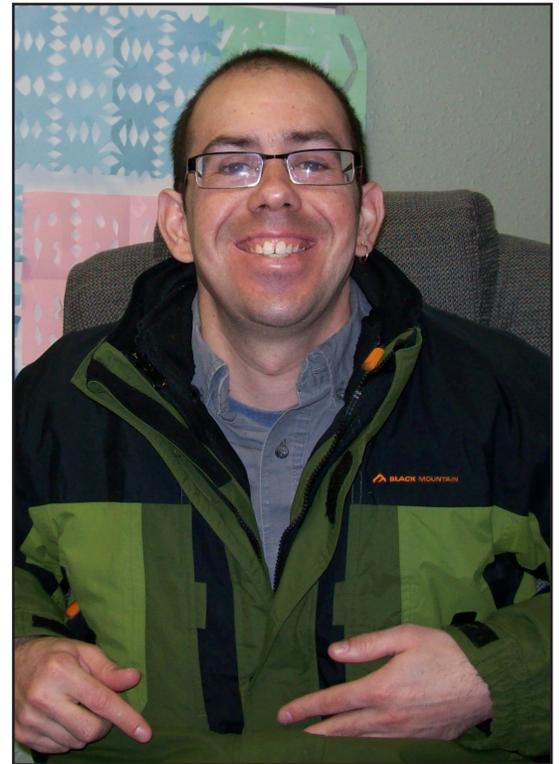
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Client Success Story – Curtis

Curtis is a 31 year old man that lives in a support home in Grande Prairie. He also has community supports provided by ICE throughout the week. At the end of March Curtis is going to the Philippines for a vacation with his support home provider and roommate. He is very excited because it is really hot there and he likes the people. Last time he went to the Philippines he shopped in the “giant malls”, went swimming, visited an ostrich farm, and also saw crocodiles. Curtis has already had his immunizations, saved his money, and has started packing his suitcases. The one hurdle left is the long overnight flight. Curtis is dreading it.

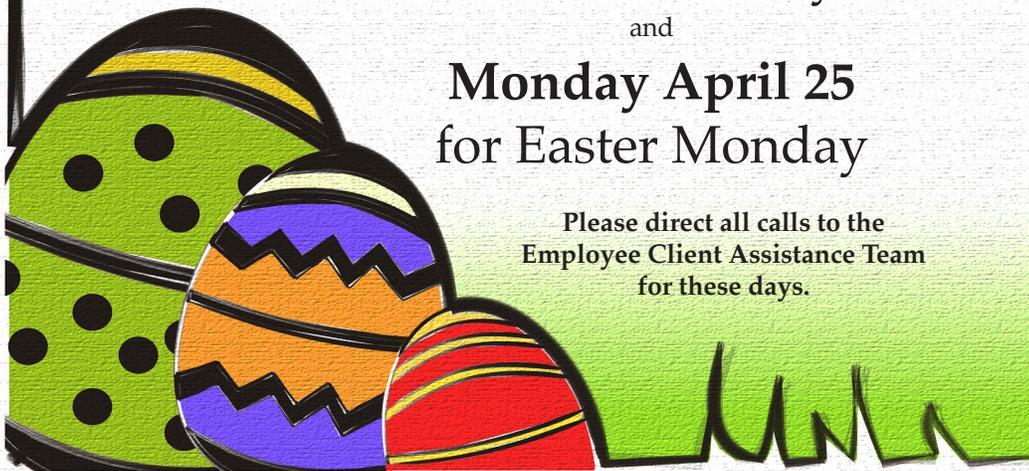
One word people use to describe Curtis is “busy”. He’s always doing something. Wednesdays Curtis volunteers at the QEII Hospital visiting with friends, playing board games, and eating pizza. Sundays Curtis participates in 5-pin bowling. On alternate weekends Curtis visits his family in Whitecourt. Thursdays he goes to Joy Chapel where he meets his friends and girlfriend. Some of his favourite activities include; swimming, playing video games, and going for coffee at Tim Horton’s. Curtis is often a lucky winner at “Roll up the Rim”.

Curtis is fun-loving, social, busy, and an intelligent man who lights up any room he enters. Congratulations, Curtis on your ongoing success!



All ICE offices will be closed
Friday April 22
for Good Friday
and
Monday April 25
for Easter Monday

Please direct all calls to the
Employee Client Assistance Team
for these days.



ICE has a TD Group RSP plan!

If you are eligible, ICE will match your contributions!

Refer to Policy 3.4.18. ICE Savings/Pension Plan.

To sign up, please contact Linna Roem at (780) 453-9664.



INCENTIVE FOR REFERRING EMPLOYEES

Here’s how it works!

If you refer a person to ICE who successfully meets our hiring requirements and completes three-month probation with a minimum of 120 hours worked, you will receive \$50.00. Take advantage of this great opportunity.





Mr. Taguedong received a Thank You card for using Proactive Behavior intervention skills in de-escalating an agitated client. Mr. Taguedong received a Mainstay Comforter for preventing possible injury to the client and fellow staff.



An ECAT Supervisor submitted a Thank You card to Adebowale (Debo) Fekoya. Debo took a 2:00 am phone call and went in to relieve an injured staff that required immediate medical attention. Debo received a Black and Decker Tool Kit. Thank you for your dedication!

Thank  You!

Yordanos Ghebremedin received a Thank You card from her Manager for advocating for clients who were being dropped off across the street from their residence. (This posed a safety concern for the clients as they were required to cross the street to get to their home.) Yordanos persistently contacted DATS until the client drop off was changed to in front of the house. Thank you for your incredible perseverance!

EDMONTON REFERRAL INCENTIVE WINNER



This month we have 3 recipients receiving the ICE referral incentive. Milan Jani (left), Odile Niyonsaba (right) and Serge Bayingana (no photo available for Serge) will receive an additional \$50.00 on their next pay check. Congratulations for your wonderful referrals!

Proactive Behavior Interventio
April 14th, 2011, 9am-5pm

Positive Behaviour Supports
April 15th, 2011, 9am-5pm

**Documentation &
Reporting Practices**
April 19th. 2011, 9am-1pm

TRAINING

WILL YOU BE ONE OF NEXT MONTH'S FEATURED EMPLOYEES RECEIVING A \$50.00 INCENTIVE PAYMENT?



The Heart

The heart is one of the most important organs in the human system. It pumps blood to all parts of your body. The blood delivers oxygen and nutrients to the cells in your body. The heart contains four chambers. The right side of the heart pumps blood to the lungs where waste that was collected gets exchanged for fresh oxygen. Then the freshly oxygenated blood is returned to the left side of the heart, which pumps it to the rest of the body.

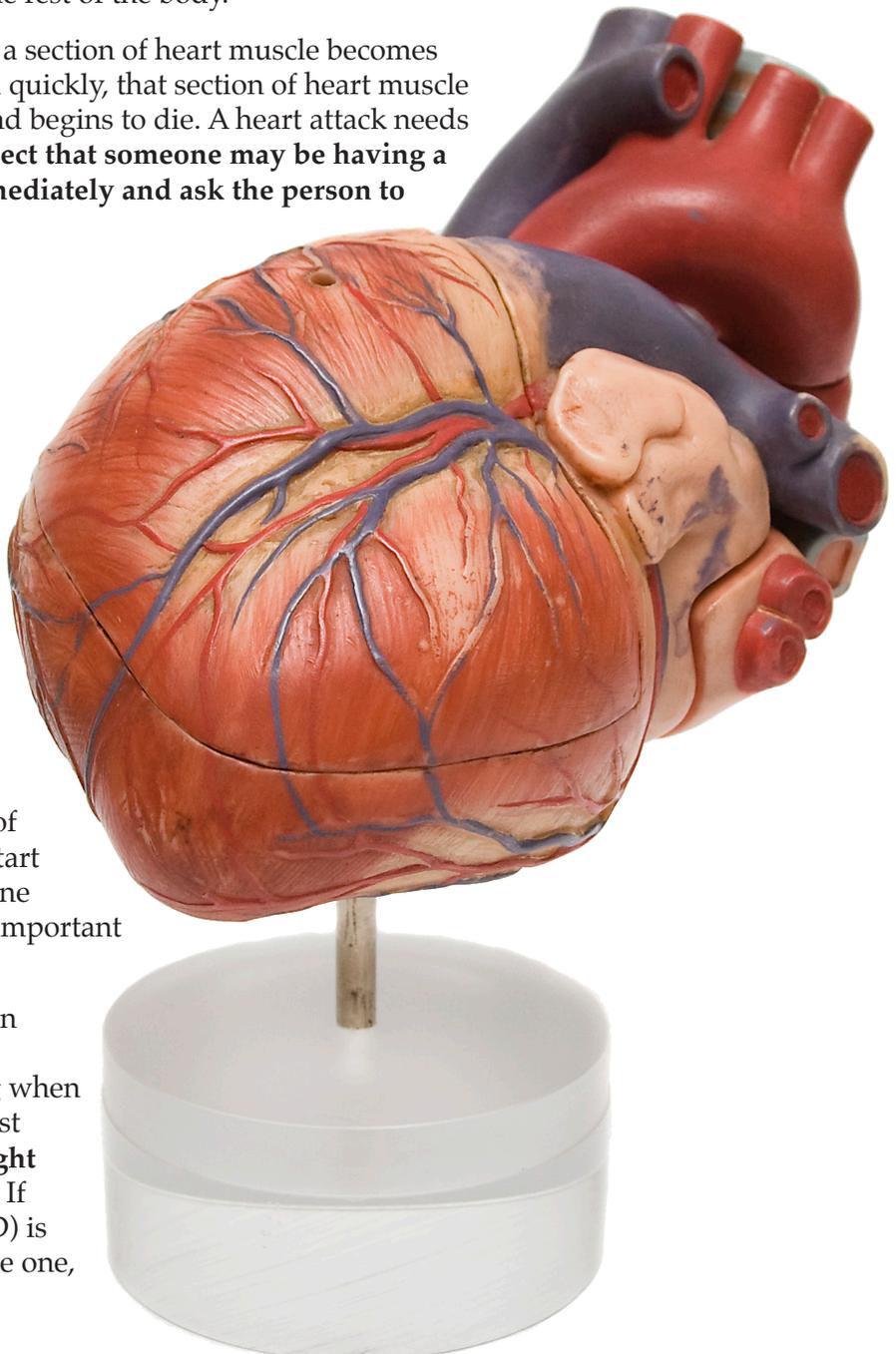
A **heart attack** occurs when blood flow to a section of heart muscle becomes blocked. If the flow of blood isn't restored quickly, that section of heart muscle becomes damaged from lack of oxygen and begins to die. A heart attack needs to be treated within one hour. **If you suspect that someone may be having a heart attack, you need to contact 911 immediately and ask the person to rest while waiting for the ambulance.**

The symptoms of a heart attack include:

- ♥ sudden discomfort in the chest, neck, jaw, shoulders, arms, or back that does not go away with rest;
- ♥ discomfort/pain such as burning, squeezing, heaviness, tightness or pressure;
- ♥ chest pain or discomfort that is brought on with exertion and goes away with rest;
- ♥ shortness of breath; nausea, indigestion, vomiting; sweating and fear (anxiety or denial).

Cardiac arrest is the sudden, abrupt loss of heart function. "Brain death" and death start to occur in just 4 to 6 minutes after someone experiences cardiac arrest, therefore, it is important to call 911 quickly.

Signs of cardiac arrest include: sudden non responsiveness, especially when called or tapped on the shoulder and not breathing when you tilt the head back and check for at least five seconds. **It is important to call 911 right away and start CPR (if you are certified).** If an Automated External Defibrillator (AED) is available and you have been trained to use one, use it immediately.



1.1.3 Outcome Measures

General information

- The agency's philosophy (**policy 1.1.2**) establishes what components are measured and evaluated for continuous quality improvement to sustain excellence in service provision.
- The agency's documentation system is the most essential tool to assist in the collection of outcome measures for employee performance and training, effective health and safety protocols and an overall consistent and excellent service delivery. The policy manual and various operations manuals clearly specify and provide details of the documentation required, who is responsible and follow-up required.
- For the purpose of outcome measures the agency will formally document and review **agency, residential and nonresidential goals** for each region. What is encompassing under each of these areas will be addressed below. Prior to agency SWOT meetings, CET or other accreditation processes a summary of each will be provided from information collected during monthly telephone conferences with management. Refer to Master forms binder section A for the forms used for documenting outcome measures for each of these goal areas. Regional Managers/Managers or the appropriate designate in each region will be responsible for these summaries.
- Outcome measures are documented in the above three areas on a regular basis, in accordance with agency policy and procedure, and then reviewed and evaluated through various team and managerial meetings. Recommendations are established and implemented to further facilitate improvements in service provision, health and safety and employee competencies.

Description of Goals

Agency Goals: This will include information on the following:

- Total hours of service billed per month per client and compared to total hours of approved funding available.
- Review of COR score (as applicable) and WCB stats as it pertains to employee safety.
- Review of agency SWOT goals and what was achieved.
- Review of CET as applicable.
- Review of employee mandatory training.
- Review of client behaviour plans and RPAC involvement.

Residential Goals: This will include information on the following:

- Progress on **client goals** to determine percentage achieved.
- Client health and safety will be reviewed by documenting number of EQAs, random inspections and monthly safety inspection checklist (the latter also includes fire drills, emergency drills and inventory list of emergency preparedness kit).
- Review of client/guardian satisfaction with service as reviewed at annual planning meetings.

Nonresidential Goals: This will include information on the following:

- Progress on **client goals** to determine percentage achieved.
- Client health and safety will be reviewed by documenting number of random inspections.
- Review of client/guardian satisfaction with service as reviewed at annual planning meetings.
- Review of staff communication.



Find frequently used forms at
www.icenterprises.com

Health and Safety Minutes

3.1 Review of Regional Health and Safety Minutes

Review of Employee Injuries

February 3, 2011 – Staff was assisting a client with AM care. Client is usually weight bearing when staff pulls up client's jeans and undergarments. Client was very tired at this particular morning; client was not able to weight bear. Staff strained back due to unanticipated full weight of the client.

Recommendations:

Review the morning routine; prior to pulling up the undergarments, staff is to ensure that client is awake / alert and is able to weight bear.

Additional Recommendation:

Complete an OT assessment and obtain the appropriate equipment if required.

Calgary Region: Meeting minutes date: January 19, 2011

Review of Employee Injuries

January 6, 2011 – Staff had finished administering meds and was carrying supplies back to the staff room in the basement for proper storage. Staff slipped and fell forward on their way down, hitting their knee and head on the door. Staff was not able to hang on to the rails as both hands were full.

Recommendations: Staff to hang onto rail, concentrate on task and not to rush. Staff will utilize a cloth bag to carry medication supplies up and downstairs to free up hand to hang on to rail.

Additional Recommendations:

Setting up locked cabinets on the main floor instead of the basement.

January 7, 2011 – Staff went out with the client. Staff banged their head getting up from tying their shoe. A deco-

orative shelf is placed in the entrance way.

Recommendations: The shelf will be removed.

Review of Near Miss

December 21, 2010 - Staff was stopped at a red light, another vehicle hit them from behind.

Recommendations: Staff was unaware of forthcoming hazard; the other driver was at fault.

January 2, 2011 - Staff allowed stranger inside the residence to use the phone to call 911, the stranger was a scared young female with a disability. Stranger stayed at the entrance way making the call.

Recommendations: Unidentified individuals are not to be let into residences as per Policy 3.5.4 (Working Alone). Emergency Services (911) can be contacted without letting the stranger inside the house. This will be discussed at the TL meeting.

January 11, 2011 - Overnight staff was on his way to the washroom in the basement. Handrail support broke, staff did not fall. It was determined that it is safer to remove rail completely.

Recommendations: Landlord was contacted to repair handrail.

3.2 Evaluation of current Injury Investigations

February 1, 2011

Overnight staff fell on the stairs and hit their head. Staff had a bump on their left eye. Staff was carrying a heavy back pack on their way to the basement, staff was not holding on to the rail.

Recommendations: Advise staff to carry a smaller back pack or a tote for his personal belongings.

January 6, 2011

Client missed their medication under the care of a respite worker. Client became agitated and pushed SHO.

Recommendations: Will review monitoring meds with respite worker.

3.3 Evaluation of Near Miss Investigations

February 9, 2011

Office worker smelled something burning from the microwave.

Recommendations: The microwave was immediately unplugged and a sign was posted to let other employees know. A new microwave has been purchased and an instruction for basic use has also been placed.

3.4 Review of COR Audit

The group reviewed 2010 COR audit (pages 27-33)

3.5 Review of Hazard Assessment and Control Document - Master

The group reviewed pages 33-34. Recommendations for revisions to the HACD Master were made. Next meeting will start from– Contact with Visitors, Contractors or intruders/strangers at office or residence

HACD next revision.

4.1 March ICE page articles and reminders

Kelly suggested writing about Health/ Pulmonary conditions

Kelly to compose a Health article.

4.2 Policy Review

The group reviewed First Aid according to the Alberta Occupational Health and Safety legislation as outlined in ICE Policy 3.5.6 - Eliminating/Mitigating/Controlling Worksite Hazards.