

F E B R U A R Y 2017
ICE PAGE

**EDMONTON/
NORTH CENTRAL**

ECAT

Employee & Client
Assistance Team
780-461-7236

After office hours
Phone do not accept text
messages— staff need to
call ECAT.

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**TIME SHEET
HAND-IN**

- **February 15th, 2017—**
For all shifts worked
between February 1st
and February 15
- **February 28th 2017—**
For all shifts worked
between February 16th
and February 28th

UPCOMING:

- **HEALTH AND SAFETY MEETING**
— February 1st, 2017
at 1:30PM
- **RPAC MEETING—**
February 15th, 2017
at 1:30PM

Making it Happen!- Supporting Social Inclusion

Joining ICE in October of 2016 marked Damon's first time as a recipient of support services. With the guidance of his parents, Damon came equipped with a list of his hopes for a day program and expectations for the ideal support staff. Damon was excited about becoming more independent from his parents and about getting involved in his community. He hoped he would be matched with a staff who liked comic books, could help him learn to prepare meals, and would assist him at the gym to reach his fitness goals.

Staff understood the physical barriers Damon faced in the kitchen and introduced Damon to new recipes that he could assemble almost completely independently to store away for his week. Up until now Damon's mother was picking up his comic books because the store close to their home was not wheelchair accessible. With some assistance from his staff Damon researched accessible comic-book stores so he could gain independence in his hobby and meet persons with similar interests. Damon, supported by ICE staff also made arrangements to receive extra personal-training sessions at his gym. This was completed so both he and his staff could learn as many adaptive exercises as possible and to provide Damon additional opportunities to meet people in his community. Damon now goes to the gym twice a week, cooks regularly, and visits

accessible comic book stores. Since accessing these new experiences, Damon has been exposed to opportunities for building social connections and he is becoming more comfortable using the community transportation system. His parents and coordinator have noticed an obvious increase in his self-confidence and Damon has enjoyed gaining some new-found independence.



Employee Spotlight

Mark, the ICE staff supporting Damon, is also new to our agency but he is no stranger to this field of work. Mark has very similar interests as Damon including a background in culinary training that he is able to employ when working in the kitchen with Damon. Mark is eager and willing to support Damon in all his goals and knows that running into an accessibility barrier does not mean a dead end. By tapping into his own persistence, strengths and knowledge Mark has been able to support his ICE clients to go a long way. Thank you, Mark, for bringing your own spice to Damon's program and not letting accessibility challenges stand in the way.

ICE offices will be closed Monday, February 20th, 2017 for Family Day

Please direct all calls to the Employee Client Assistance Team for this day.

HURT AT WORK?

Employees and Support Home Operators are reminded of their responsibility (as per legislation) to report **all workplace injuries immediately to an ICE supervisor or manager.** In the event of an injury the employee will follow all agency policies and procedures

While not all injuries are reportable to WCB, all injuries and work related health concerns are required to be reported within the company. This is done so that health and safety investigation and follow up may be completed for the safety of all parties

IMPORTANT MESSAGE RE: EMPLOYEE ADDRESSES

ICE Employees need to ensure that they update their addresses and phone numbers when there are changes. Please contact the ICE office in your region to update or confirm your information as necessary.

February is Heart and Stroke Month

What is a stroke? A stroke occurs when blood vessels in the brain are blocked or burst. Without blood and the oxygen carried in it, brain damage can begin within minutes.

Symptoms of a stroke

- Sudden confusion or trouble speaking or understanding language;
- Sudden problems with walking or balance;
- A sudden severe headache that is different from other headaches.
- Sudden numbness, tingling, weakness or loss of movement in your face, arm or leg, especially on just one side; Sudden vision changes;

FAST is a simple way to remember these main symptoms of stroke.

When you see these signs call 911 or emergency services right away.

F = FACE DROOPING

A = ARM WEAKNESS (Ask the person to raise both arms).

S = SPEECH (Slurred or confused)

T = Time to call 9-1-1. (Do not let the person drive to the hospital, call emergency services.)

See your doctor if you have symptoms that seem like a stroke, even if they go away quickly. You may have had a transient ischemic attack (TIA), sometimes called a mini stroke. A TIA is a warning that a stroke may happen soon. Getting early treatment for a TIA can help prevent a stroke.

Risk Factors: smoking, high blood pressure, high cholesterol, diabetes, being overweight, lack of exercise,

drinking large amounts of alcohol.

What is Heart Disease? This generally refers to a group of conditions that affect the structure and functions of the heart. Heart disease has many root causes but for most types, maintaining a healthy lifestyle (healthy eating, physical activity, avoiding tobacco misuse) is a key part of preventing these conditions.

Heart Failure Symptoms

- **Shortness of breath** - breathlessness during activity or while at rest or even while sleeping (causing waking).
- **Persistent coughing or wheezing.** Coughing may produce white or pink tinged mucus.
- **Buildup of excess fluid in body tissues (edema).** Swelling in the feet, ankles, legs or abdomen or weight gain. You may find your shoes fit tight.
- **Feelings of tiredness and fatigue** all the time and difficulty with everyday activities such as shopping, climbing stairs, carrying groceries or walking.
- **Lack of appetite and nausea.** A feeling of fullness or of being sick to your stomach.
- **Confusion or impaired thinking.** Memory loss and feelings of disorientation. A caregiver or family member may notice this first.
- **Increased Heart Rate.** Heart palpitations which feel like your heart is racing or throbbing.

Prevention – While there are some risk factors you cannot control, like age and family history, you can help prevent some factors associated with heart disease and stroke if you maintain good everyday lifestyle habits and manage your health effectively.

Better everyday choices to reduce risk include:

- Being physically active for at least 30 minutes a day,
- Eat more fruits and vegetables and whole grains. Limit processed foods like canned soups, cold cuts, and frozen meals.
- Manage stress – understand what causes you stress and try to reduce / eliminate them. Do things that relax you, like taking a walk outside or listening to music.
- Quit smoking – this is one of the best things you can do to lower your risk.
- Limit the alcohol you drink.

There are videos and additional information on Stroke and Heart Disease as well as other important health topics readily available on the Alberta Health website: <https://myhealth.alberta.ca>

Annual Bath/Shower Assist Shadows

As per policy, All Employees need to complete their Annual Bath/

Shower Assist Shadow.

(Please refer to Policy-2.3.14 Community Rehabilitation Bath/Shower Assist and Policy-3.3.4 Mandatory Employee Training)

Policy Review

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, Master Document Binder, Health and Safety Binder, and the Personnel Operations Manual 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, support home 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 Document 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 four 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:



- 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, water temperature charts for the home and for client bathing/showering and the inventory list for the 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.

Support Home: 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, Monthly SHO Safety Checklist (completed by I.C.E personnel) and Monthly SHO Checklist (completed by the SHO) This includes fire drills and water temperature charts.
- Review of client/guardian satisfaction with service as reviewed at annual planning meetings.

ICE THANK YOU CARD INCENTIVE WINNERS



Fabien Munyankiko

Tended to your client's needs and took them to hospital for a medical concern. Fabien won a *Starfrit Panini Grill*.



John Toussaint

Completed the EQA follow up a week early, the manager was impressed with how fast it was completed and especially the plumbing modification. John won a *Midea Rice Cooker*.



Evelyn Pelletier

Took your Client to their new podiatrist Doctor and followed up diligently until he received his custom-made insoles. Evelyn won a *Casemate Paper Shredder*.

Training

PET (Pre-Employment Training)

February 13th-15th, 2017

February 27th-March 1st, 2017

9:00AM-5:00PM

As described on the ICE website

PBI (Proactive Behaviour Intervention)

February 3rd, 2017

February 17th, 2017

9:00AM-5:00PM

As described on the ICE Website

\$100.00 ICE Referral Incentive

Winners



**CONGRATULATIONS
EMPLOYEE REFERRAL
INCENTIVE PROGRAM \$100
RECIPIENT!**

Odile Niyonsaba

Employees or Support Home Operators who refer a person to ICE who successfully meets our hiring requirements and completes their three month probation with a minimum of 120 hours worked, receive \$100.00!

ICE HAS A TD GROUP RSP PLAN!

Refer to Policy 3.4.18 ICE FUTUREBUILDER RSP

If you are eligible, ICE will match your contributions! To sign up, please contact:

Linna Roem at 780-453-9664



CREATING EXCELLENCE TOGETHER Standards 6 and 18: COMMUNITY INCLUSION

Standard 6 of the Quality of Life and **Standard 18** of the Quality of service reviews “**Community Inclusion**” Standard 6 has 7, level 1 indicators within the clients “Quality of Life”. Standard 18 reflects on how the staff support the individual to engage and participate in his or her community. This “Quality of Service” has 9 level 1 indicators and two indicators under level 2.

Quality of Life: Level 1 Indicators

1. **The individual is involved in her community with other community members.**

“I will be knitting hats for the community craft sale with my friends”

2. **The individual knows people in her community and interacts meaningfully with them**

“My Volunteer coordinator asked me if I wanted to help with another shift”.

3. **The individual contributes to her community.**

“My friend and I are going to help with litter removal this weekend”.

4. **The individual participates in community activities that are not organized by the service provider.**

“I will be going to the volunteer BBQ to kick off the season”.

5. **The individual has access to whatever information she needs to be involved in her community to the extent that she desires and is capable of.**

“I was reading the local paper and there is a class I want to take”.

6. **The individual participates in her community in a way that establishes her as a recognized community member.**

“My coordinator told me I did a great job and was really helpful finding seats for the community members”.

7. **The individual knows why she feels safe while in the community.**

“It’s a new bus route but I will be with someone I know and I have all the contact numbers in my wallet, if I need them”.

Quality of Service: Level 1 Indicators

1. **Staff understands their role in terms of making contacts ahead of time and building relationships and connections.**

How did you assist the individual to meet peers and maintain communication?

2. **Staff ensure that the individual knows about, access and is involved in her community with other community members.**

Did the individual receive the community newsletter and is informed of the surrounding events?

3. **Staff support the individual to get to know and connect meaningfully with people in her community.**

Are there community events scheduled and/ or attended, involving neighbors?

4. **Staff support the individual to contribute to her community in the way she desires.**

Did your individual want to contribute to a community craft or bake sale?

5. **Staff support the individual to participate in community activities that are not organized by the service provider.**

Did you review the community paper and check off activities which are meaningful to the individual?

6. **Staff provide the individual information that helps her to be involved in her community to the extent that she desires and is capable of.**

Did the individual receive the local paper and community bulletins this month?

7. **Staff support the individual to participate in her community in a way that establishes her as a recognized community member**

Did the individual choose to volunteer and want to participate next year?

8. **Staff**

A) support the individual to be safe while she is in the community

B) know what risk management plans or safety plans are in place to ensure the individual's safety

Does the individual know who to contact in the event of an emergency? Is she or he able to reach a phone or communicate to another person if they need help?

9. **Staff understand their role in terms of fading out their support**

Can the individual call independently and speak with her volunteer coordinator?

Quality of Service: Level 2 Indicators

1. **Staff support the individual's inclusion and participation in community activities by helping her develop and maintain reliable natural supports.**

Does the individual call her peers from class, after he or she has spent much time getting to know one another?

2. **Staff help the individual to identify and develop valued roles and relationships within the community.**

Will the individual be returning to the community hall to assist her peers and neighbors?

As a support worker, do you know who the individual is and what skills they have and what they would like to do? It is important for us to know who we are working with in order to best provide supports. As a support worker, you have the ability to provide a variety of community options to the individual you support. Just look around! There are community events and leagues in all areas of the city. We have fundraisers, classes, festivals and events every day. I imagine the individual you support, would find some of these items meaningful and perhaps even want to get involved. If you don't know where to start, grab a local newspaper and flip through it with the individual you support.

ICE has many individuals who participate in their communities and just took one visit to a meeting or event. These single visits could lead the individual to a lifetime of memories and friendships.

Health and Safety Meeting Minutes

INDEPENDENT COUNSELLING ENTERPRISES

Health and Safety Committee Meeting Minutes

January 4th, 2017
Edmonton

STANDING ITEMS

3.2 Evaluation of current Internal Incident Investigations for Injury, Health, Property Damage: Edmonton – Meeting January 4th, 2017

No Internal Incidents Investigations submitted for review.

3.3 Evaluation of current Near Miss Incident Investigations: Edmonton – Meeting January 4th, 2017

No Near Miss Incidents submitted for review.

3.4 Review of COR Audit and Action Items – COR 2016 Section 1 – Management Leadership and Organizational Commitment. The group reviewed Existing Strengths and Suggestions for Improvement. Discussion was held on the President's Health and Safety message shared at December Open Houses across the province and printed in the January ICE page.

3.5 Hazard Assessment and Control document (H.A.C.D.) review – The group reviewed parts of the General section of the 2016 HACD. Page 8-11, Driving and Driving with Clients

Driving – changes and additions to Chemical Hazards (PC to 4, changing Total to 10, Priority Rating is now 1, also adding Fire Explosive Policies and Procedures to references: 2.3.12 Blood Borne Infectious Disease Controls. Under Required Training/Orientation: removed: Risk Assessment Orientations provided and signed off as per individual client support requirements.

Driving with Clients – Tabled until next meeting.

3.6 Policy Review

The committee reviewed Policy 2.3.14 Community Rehabilitation – Bath/Shower Assist. – discussed guidelines for grab bars should be provided for clients that use them.

OTHER BUSINESS

ICE page Article suggestions – Mental Health / Well-being, Heart and Stroke information. Everyone agreed.

NEXT MEETING – February 1st, 2017 at 1:30 PM (Committee Member Potluck)

