

JULY 2019

**EDMONTON/
NORTH CENTRAL**

ECAT

Employee & Client Assistance Team
780-461-7236

Phones do not accept text messages- staff need to call ECAT.

INSIDE THIS ISSUE:

POLICY REVIEW	2
HEALTH AND SAFETY MEETING MINUTES	4-5
AIR QUALITY HEALTH INDEX	6
H&S COMMITTEE POSTER	7

TIME SHEET HAND-IN

- **July 15th 2019**- For all shifts worked between July 1st and July 15th.
- **July 31st 2019**-For all shifts worked between July 16th and July 31st

UPCOMING:

- **HEALTH AND SAFETY MEETING**- July 3rd 2019 at 1:30 PM
- **RPAC MEETING**- July 17th 2019 at 1:30PM

ICE PAGE



Making it Happen!- Supporting Social Inclusion



Amanda

Amanda is active in the Grande Prairie community and has been living in a support home with ICE since 2008. Amanda was born in Grande Prairie and raised by her mother and uncle. She enjoys spending time with her Mom in Rainbow Lake. Amanda has a brother who lives in another support home in Grande Prairie with ICE, and they visit on a regular basis.

Amanda is very shy, and likes to keep to herself. This lifestyle has worked well with her as she has a

close group of friends that help support and encourage her to reach her goals. Amanda loves to go shopping, walking, and spending time in the garden. She also likes to draw and spends a lot of her spare time improving her new found skill.

Amanda was volunteering at Goodwill when they hired her as an employee in October 2010. During her time with Goodwill she worked very hard and received a 5 year service award. In April 2016 Amanda decided to pursue further employment. With the assistance of her support staff, working on her reading and writing paid off and Amanda got a cleaning job at the Alberta College of Massage Therapy.

In the beginning staff assisted Amanda with completing each item on her checklist. Over time Amanda and her staff have worked on building her cleaning skills and independence in her paid employment. Amanda even covered her coworker's sick leave as he was unable to work for two months. She is requiring less prompts and is completing the majority of the tasks on her own now. Amanda tracks her hours and submits monthly invoices to ACMT for payment. She has shown tremendous initiative in making this job her own.

ICE has watched Amanda grow into a beautiful and empowered young woman and is so proud of the wonderful work she does. Keep up the good work Amanda; we are excited to see where you will go from here.

Employee Spotlight



Joy has been an employee with ICE since November 2016. She enjoys working with a broad range of clients and sharing her skills with each of them. Joy began working with Amanda a few months ago and encourages her to be as independent as possible. She shows tremendous patience with all of her clients and guides them to be involved members of their community from assisting with employment to attending medical appointments.

Thank you Joy for all that you do!!

ICE OFFICES WILL BE CLOSED MONDAY, JULY 1st FOR CANADA DAY



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

780- 461-7236

Policy Update

3.2.3 PERFORMANCE EVALUATIONS

1. All employees will be formally evaluated before the completion of their probationary period and annually thereafter or as required. Refer to the Master Forms Binder – Personnel Section re forms.
2. The evaluation process is intended to be a collaborative effort between the employer and the employee. Both are encouraged to have open, frank discussions about performance, expectations and to set goals for the employee together.
3. As part of the annual evaluation process the employee and their supervisor will review training requirements, achievements, personal information and documentation to ensure accuracy and that policies are met.
4. It is to be noted that employees working within the CR Unit must be re-shadowed for medication administration during the evaluation process.
5. Additionally, as part of the evaluation process, employees (field and non-field) will review a specific package of policies (Key Policies), the employee will be required to sign confirmation of their review / understanding of said policies on a Training Participation form. This practice will be effective July 1, 2019,
6. Bath/shower assists will be completed for all employees according to an agency specified date.
7. Employee evaluations will be documented on the Evaluation Form. Employees are encouraged (but not required) to sign the form and they are provided a copy of the goal section. The evaluation will be kept on the employee's personnel file. Attached to this form will be a list of the employee's training for the time period of the review from C-Views training tracking system.
8. If requested a copy of the performance evaluation will be provided to the employee at the time of the review.
9. If an employee works in more than 1 program / position their performance evaluations will be a collaborative effort if more than 1 supervisor is involved in their supervision.
10. An employee's annual evaluation date will be determined once the employee commences work. Once the employee completes their first shift either personnel or their supervisor will set the month for all future annual evaluations in the employee's C-Views file. This will not change during the person's employment with this agency. Should the employee change positions and be assigned a different supervisor, the annual evaluation will require both supervisors to be involved in the evaluation. The current supervisor will initiate the evaluation process; the previous supervisor must provide input / feedback based on their involvement with the employee.

June 2019

ICE HAS A TD GROUP RSP PLAN!

Refer to Policy 3.4.18 FUTUREBUILDER RSP If you are eligible, ICE will match your contributions!

To sign up, please contact:

Independent Counselling Enterprises at : 780-453-9664

Contact your local TD branch or book an appointment online to see a financial advisor to discuss your savings needs and any other financial objectives.

⇒ To find a TD branch close to you:

<https://www.td.com/ca/en/personal-banking/branch-locator/>

⇒ To book an appointment online:

<https://www.td.com/ca/en/personal-banking/products/saving-investing/>

Referral Incentive

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 THANK YOU CARD INCENTIVE WINNERS



Anatole Nziyumvira received a Thank You card from his supervisor for convincing a client to return an item to the store after he purchased it, an item that presented a hazard to the client and staff. Anatole won a Hamilton Beach slow cooker.

Thank you for your efforts!



Senait Tesfamariam received a Thank You card from her team leader for accepting shifts on short notice. It is appreciated very much. Senait won a Black and Decker toaster oven.

Keep up the good work!



Seena Starson received a Thank You card from her team leader for staying overnight with a client at the U of A hospital and supporting her during suicidal ideation, the client was having a difficult time. Seena won a Cuisinart coffee maker.

Your client care is valued!

Training

PET (Pre-Employment Training)

July 8-10, July 22-24, 2019
9:00AM - 5:00PM

PBI (Proactive Behavioural Interventions)

July 12 & 26, 2019
9:00AM - 5:00PM

Client Abuse In-service

July 3, 2019
10:00AM - 1:00PM

Call your manager to arrange client and appropriate staff attendance.



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.



Looking for Answers? Below are some online links you may find of assistance:

<https://www.canada.ca/en/health-canada.html>

Health Canada is responsible for helping Canadians maintain and improve their health. It ensures that high-quality health services are accessible, and works to reduce health risks.

<https://www.albertahealthservices.ca/findhealth/service.aspx?Id=1001957>

Linking Albertans to a wide range of health information and service options.

<https://work.alberta.ca/occupational-health-safety.html>

<https://work.alberta.ca/occupational-health-safety/ohs-publications.html#laws>

Alberta Occupational Health and Safety works in consultation with industry to help prevent work-related injuries, illnesses and fatalities. The OHS site provides access to a wide range of information bulletins and on-line training options

<https://work.alberta.ca/occupational-health-safety/resources.html>

Health and Safety Meeting Minutes
June 5, 2019

(Minutes edited for publication)

3.0 Standing Items

- 3.1 Review of Regional Health and Safety Meeting Minutes
Review other region's minutes especially sections 3.2 and 3.3.
- 3.1 A) Review of Regional Health and Safety Meeting Minutes – Section 3.2. Incident Investigations for Injury, Health and Property Damage

Calgary – May 9, 2019 Meeting Minutes:

April 15, 2019

Staff and client were at the gym utilizing the “Stair Master.” Staff misplaced their foot on the edge of the stair and fell backwards onto their back and right hand.

Incident Investigation was completed.

Recommendations: Management asked staff to avoid utilizing gym equipment in the future as client is able to complete these activities on their own with their trainer.

Additional Recommendations: No further recommendations added.

South – May 7, 2019 - Meeting Minutes:

April 30, 2019

A client wanted to take their medications 90 minutes before the scheduled time. Staff explained that the pharmacy/physician would have to be contacted in order to take medications that early. Client was upset by this information. Client attempted to gain access to the staff room to get the medications and then became more upset when the door was locked. Staff thought they were standing a safe distance away from the client however, the client quickly moved and pushed the staff up against the wall. Staff was able to get out of the home and call the police for assistance.

Recommendations: Staff to review PBI/CPI techniques. Staff to give more space when the client is upset and ensure they have a safe route to an exit. Speak to pharmacy/physician about the possibility of permanently adjusting medication times for the client if they wish to take their medications earlier. Continued RPAC involvement for the client. Review of RPAC documents with staff in the program.

Incident Investigation to be completed.

Additional Recommendations: No further recommendations added.

May 2, 2019

A client was tapping the glass in the living room window. The client then began hitting the window with an open hand. Staff was attempting to re-direct the client but the window broke before they were able to prevent it. The client was taken out of the home until the window could be replaced due to safety concerns.

Recommendations: Review incident with RPAC and update positive approaches document for the client. Contact OT for an assessment for help with supporting the client in their home environment.

Incident Investigation to be completed.

Additional Recommendations: Explore the possibility of using plexiglass as opposed to glass for the window.

Northwest – May 7, 2019 Meeting Minutes:

No incidents to report.

- 3.1 B) Review of Regional Health and Safety Meeting Minutes Section 3.3 (Near Miss Incidents)

Calgary – May 9, 2019 Meeting Minutes:

No near miss incidents to report.

South – May 7, 2019 Meeting Minutes:

May 3, 2019

Client went outside the apartment to have a cigarette at 2 a.m. Staff observed they seemed intoxicated when they returned inside. Staff asked if they had been drinking as there was no alcohol on the premises to the staff's knowledge. Client admitted that a friend had brought alcohol in a coke bottle to the home earlier that evening. The client became agitated at the staff's inquiry and began yelling loudly. ECAT was contacted and attempts were made to calm the situation, however, this was unsuccessful. The client began to say that they would hit the staff. Staff left the home and called the police for assistance. When police arrived, the client became very aggressive with the officers and they were taken into custody for the night.

Recommendations: Continued RPAC involvement. Review of RPAC documents with all staff in the program. Review of CPI/PBI training for staff. Continue to support the client to seek out addictions and mental health supports in the community.

Additional Recommendations: Monitor safety for client's friend bringing things into the home.

Northwest – May 7, 2019 Meeting Minutes:

No near miss incidents to report.

- 3.2 Evaluation of current Internal Incident Investigations for Injury, Health and Property Damage:

May 5, 2019

Client was fixated on not having cannabis and his overall unhappiness in wanting to leave Edmonton and became increasingly agitated and damaged his coffee table, phone, bedroom door, dining table and patio door. He also entered into the public area of the apartment building and broke the protective glass of one of the fire extinguishers, resulting in damage to part of his hand. In speaking with the manager, who was trying to de-escalate the situation, he threatened to harm her with a small piece of wood he was holding in his hand. Follow up included: EPS and ECAT called; utilized client's positive approaches; Client Service Review with Case Worker and Guardian; update Risk Assessment and review Crisis Plan and updated RA with staff.

Incident Investigation Completed

Recommendations: Service Termination Notice provided to client May 16/19.

May 5, 2019

Staff were not clear on directions provided in the communication log book regarding transporting client. Instead of contacting ECAT, staff asked the client. The client became upset, telling staff to figure it out themselves and put their hands in staff's face. Staff backed up, but directed the client to be quiet. The client became more argumentative. At this point, staff decided to phone ECAT, but client blocked access to the phone. When staff eventually were able to make the call and while they were on the phone, client punched staff in the head. Follow up included: Staff to review client's positive approaches and risk assessment; staff to contact ECAT regarding clarifying instructions rather than talk with client. Staff were moved from the program effective

immediately to ensure their safety.

Incident Investigation to be completed.

Recommendations: Ensure clear instructions are left in staff communication book and review communication process with staff at the next team meeting, including importance of not asking client for information that staff should be providing to each other.

May 6, 2019

Staff was walking towards manager and fell. The staff used her left hand and wrist to stop her fall. It was noted that staff was hurrying, reading while walking and wearing heels greater than 2.5 inches.

Incident Investigation Completed

Recommendations: Review Policy 3.8.6 with employee and unit. Review with employee to ensure she is working safely, including not rushing and to be paying attention while walking.

Additional Recommendations: No further recommendations added.

May 23, 2019

At approximately 2:00 a.m., staff was pulling out a couch from the wall when staff accidentally fell over a coffee table, resulting in pain to knee and ankle.

Incident Investigation to be completed.

Recommendations: Review cleaning checklist and ensure that staff are not expected to move furniture while working alone.

3.3 Evaluation of near miss investigations.

May 13, 2019

Client came out his room and used racial slurs as well as attempted to throw a book at staff after contacting ECAT to complain about what foods there were on hand in the home. He may have become agitated because his cell phone bill wasn't paid. Follow up included: reviewing client's positive approaches with the team; ensuring that the client's cell phone bill is paid on time and placing a reminder on client's calendar; as well as ensuring client is involved in grocery shopping and ensuring there are always some of the client's favorite foods on hand.

Incident Investigation to be completed.

Recommendations: No further recommendations added.

May 26, 2019

Client was experiencing pain and stating she needed to go to the hospital and started yelling at staff to help her. The client phoned 911 and told them that she was having stomach pain. The client handed staff the phone. The client heard staff tell the hospital it didn't appear to be a medical emergency and escalated, attempting to hit staff, but staff was able to stay behind a door. Client left the home and staff followed her at a safe distance. Once back at home, client threatened staff with a fork, but staff was able to stay in the staff office where client couldn't reach them. EPS and EMS arrived and client left in the ambulance. Follow up included: client medical tests completed and follow up; reviewing client's positive approaches with staff, further consultation with RPAC; follow up with client's psychiatrist; as well as discussed with staff avoiding minimizing or negating client's medical concerns.

Incident Investigation to be completed.

Recommendations: No further recommendations added.

3.4 Health and Safety Committee Inspections

3.4 A) Inspections held as a result of health and safety concerns - include name of committee member(s) completing, program, issue, inspection type (E.g. RI) and # workers involved - N/A - None for May.

3.4 B) Inspections completed - May - Monthly Safety Inspection Checklists completed - 3 - Emmanuella (1), Vesna (1), and Pauline (1) - 8 workers participated; Random Inspections completed - 7 - Adrienne F. (4), Charmaine (1), Amanda (1), Pauline (1) - 7 workers participated.

3.5 COR Audit Review - The group discussed ideas for COR Audit Requirement 4.11, which entails a process in place for the Health and Safety Committee to make recommendations to management. Greg discussed that it was discussed at the manager's teleconference and it was determined that management is responsible for reading the minutes and that managers are responsible for completing any follow up that comes out of the Regional Health and Safety Committee Meetings (E.g. Incident Investigations recommendations). If there are any further concerns/recommendations, Greg can take them up directly up with senior management.

3.6 Hazard Assessment and Control document (H.A.C.D.) - Review section (and provide recommendation(s) for changes if needed) - New HACD for Cannabis

Calgary - May 9, 2019 Meeting Minutes:

The Health and Safety Committee continued to draft the vaping and cannabis information sheets and discussed the risks that could be added to the HACD.

South - May 7, 2019 Meeting Minutes:

South Committee Reviewed pages 66 - 73. No changes were suggested for "Performance of Medical Delegations", "Completing First Aid and CPR", "Blood and Body Fluid Clean Up" or "Use/Maintenance of Oxygen Tanks".

Northwest - May 7, 2019 Meeting Minutes:

Continued to complete new HACD for Vaping and Cannabis

Policy review - 3.8.6 Dress Hygiene and Grooming

4.0 Other Business

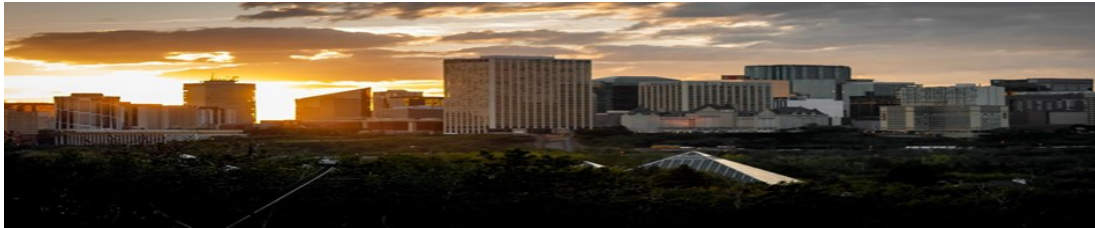
4.1 Health and Safety Training Updates - All Health and Safety Committee members have required health and safety committee Training.

4.2 Ideas for upcoming ICE Page Articles - Greg discussed upcoming ICE Page articles on Air Quality and Heat Stroke. Other ideas included seasonal allergies.

4.3 Health and Safety - Edmonton Office - "No Perfume" Sign in the TC Room. As a result of a suggestion from the Health and Safety Box, Greg has put a sign up in the TC Room regarding users avoiding wearing perfume due to an employee's allergy concerns.

4.4 Approval Letter - ICE has received approval through OHS for ICE's 4 regional joint Health and Safety Committees to represent the health and safety of all employees (and not require Health and Safety Representatives at each of our 1010 programs). Greg will be sending out more information regarding this matter.

NEXT MEETING DATE: July 3, 2019 at 1:30



Air Quality Health Index

The Air Quality Health Index or "AQHI" is a scale designed to help you understand what the air quality around you means to your health as well as the health of the individuals you support.

It is a health protection tool that is designed to help you make decisions to protect your health by limiting short-term exposure to air pollution and adjusting your activity levels during increased levels of air pollution. It also provides advice on how you can improve the quality of the air you breathe.

This index pays particular attention to people who are sensitive to air pollution and provides them with advice on how to protect their health during air quality levels associated with low, moderate, high and very high health risks.

The AQHI communicates four primary things;

1. It measures the air quality in relation to your health on a scale from 1 to 10. The higher the number, the greater the health risk associated with the air quality. When the amount of air pollution is very high, the number will be reported as 10+.
2. A category that describes the level of health risk associated with the index reading (e.g. Low, Moderate, High, or Very High Health Risk).
3. Health messages customized to each category for both the general population and the 'at risk' population.
4. Current hourly AQHI readings and maximum forecast values for today, tonight and tomorrow.

The AQHI is designed to give you this information along with some suggestions on how you might adjust your activity levels depending on your individual health risk from air pollution.

How is the AQHI calculated?

The AQHI is calculated based on the relative risks of a combination of common air pollutants that is known to harm human health. These pollutants are Ozone, Particulate Matter and Nitrogen Dioxide.

What is the scale for the AQHI?

The AQHI is measured on a scale ranging from 1-10+. The AQHI index values are grouped into health risk categories as shown below. These categories help you to easily and quickly identify your level of risk.



- 1-3 Low health risk
- 4-6 Moderate health risk
- 7-10 High health risk
- 10 + Very high health risk

How can I find out about the air quality in my community?

To find your local AQHI, listen to or watch local weather forecasts or check on the Alberta Environment Website:

www.environment.alberta.ca/apps/aghi/aghi.aspx

Wildfire Smoke and Air Quality

Why is wildfire smoke bad for my health?

Wildfire smoke is a mixture of gases and fine particles from burning trees and other plant material. Gases released by wildfires, such as carbon monoxide, are mainly a risk to people like firefighters who work near smoldering areas. Fine particles, which are in smoke, can irritate your eyes and your respiratory system and worsen chronic heart and lung diseases.

The amount and length of smoke exposure, as well as a person's age and overall health, play a role in determining if you will experience smoke-related health problems.

Why is everyone talking about particulate matter?

Particulate matter in wildfire smoke poses the biggest risk to your health. The potential effects vary based on the type of plants burning, atmospheric conditions and, most importantly, the size of the particulates. Particulates can irritate the eyes, nose and throat. Fine particles can be inhaled in the deepest part of the lungs, and may cause coughing or may worsen existing heart and lung diseases.

Who is most likely to have health effects from wildfire smoke exposure?

- People with existing respiratory conditions such as lung cancer, asthma or chronic obstructive pulmonary disease (COPD), including chronic bronchitis and emphysema;
- People with existing heart conditions including angina, previous heart attack, congestive heart failure or irregular heart beat
- People over 65 years of age;
- Pregnant women;
- Smokers, especially those who have smoked for several years

What should I do if I am having a health problem from smoke?

If you have a medical emergency from smoke, such as chest pain or severe difficulties breathing, you should call 911 if available, or get help to go to the hospital emergency room immediately.

How can I protect myself/the individuals I support from the harmful effects of smoke exposure?

- Stay indoors whenever possible with the doors and windows closed;
- Use high-efficiency (HEPA) filters, if available;
- Avoid vacuuming, which can stir up air;
- When driving in a vehicle, keep windows closed and if you have air conditioning, set to re-circulate
- Drink plenty of water to help reduce symptoms of scratchy throat and coughing.

Your ICE Employee Health and Safety Committee



Back Row, Left to Right: Dusi Sen, Innocent Kagabo, Adrienne Fraser, Greg Lane
Front Row, Left to Right: Char maine Hyman, Pauline Henry– Stephens
 Trust in God Odudu, Amanda Jean, Vesna Vila, and (inset) Emmanuella Kankam

WHAT WE ARE: A group of worker and employer representatives working together to identify and solve health and safety concerns as well as promote awareness and interest in health and safety. We provide support for the 3 basic rights that all Albertans have in protecting their health and safety including: the right to know, the right to participate and the right to refuse dangerous work.

WHY: A health and safety committee benefits both employers and workers. A healthy and safe workplace cuts down on injuries that hurt you and hurt your company with reduced productivity and expensive insurance coverage. It is also the law. Occupational Health and Safety (OHS) legislation passed in June 2018, mandates companies to have Health and Safety Committees/ Representatives.

If you have concerns about your own or another employee’s safety, you are obligated to report it (ICE policy 3.5.2 / OHS legislation). There are a number of ways to report your concerns. You may report these to: your supervisor or manager, call an Employee Client Assistance Team (ECAT) supervisor, contact a member of the Health and Safety Committee (numbers below) or drop a note into the health and safety box in the reception area of your regional office.

If you are a residential employee, it is also your responsibility to document identified hazards in the ‘Hazard Identification section’ of the ‘Staff Communication Log so co-workers/others may be made aware immediately.

HOW: The Health and Safety Committee works to improve your work environment by completing inspections, participating in and reviewing injury/illness/near miss investigations, reviewing policy and hazards, and taking action based on these findings, as well as by bringing forth your concerns to management.

WHEN: In Edmonton the committee meets the first Wednesday of every month at 1:30 pm in the ICE office (confirmation is printed each month in the ICE Page). If you are interested in attending a meeting, please call Greg at 780-453-9656.

NAME	PHONE	NAME	PHONE
Adrienne Fraser	780-453-9832	Greg Lane	780-453-9656
Amanda Jean	780-447-7898	Innocent Kagabo	780-454-9500
Charmaine Hyman	780-463-9666	Pauline Henry-Stephens	780-454-9500
Dusi Raj Sen	780-454-9500	Trust in God Odudu	780-454-9500
Emmanuella Kankam	780-454-9500	Vesna Vila	780-454-9500