

WHERE WHAT YOU DO REALLY MATTERS

## Brand New Initiative! Incentive for Referring Employees

We have always appreciated our employees' referral of their family and friends to I.C.E. In an effort to recognize this we have initiated an incentive program for your continued loyalty and commitment.

Here's how it works!

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

What could be easier!



*Empowerment, Integrity, and Caring*

**After  
Hours  
Supervisor**  
**(780) 512-3129**



### MEETINGS



**Health &  
Safety Meeting**

Tue Nov 21, 1:00 pm

**Team Leader  
Meeting**

Thurs, Nov. 16, 1:30 pm

**Behaviour Review  
Committee**

Thurs, Nov 23, 1:30pm

### TIME SHEET HAND-IN



Hand-in day will be:

**Mon, Nov 13**

and

**Tues, Nov 28**

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## SUCCESS STORY

### *A view from the Summit*

My name is Derrick. I am a self-advocate and I belong to the Self-Advocacy Federation (SAF). I am treasurer and on the steering committee. I am also a member of the Gateway Board of Directors and have been nominated for an award with Gateway. I would like to tell you about the Self-Advocacy Summit that took place in Edmonton on September 29 – October 1, 2006. I was asked to speak at the Summit about the Edmonton Self-Advocacy Federation. I talked about how the SAF started. It started out as a group called Voices for the Future and now has expanded and is called the Self-Advocacy Federation.

The next workshop I went to was about A.I.S.H. Some people talked about how A.I.S.H. asks about too much private information such as how many people you are living with and how much money you have in your bank. People said it “feels like they are invading your space”. Also people said that when they phone their A.I.S.H. worker they don’t return messages.

Another workshop I went to was one about Michener Center. It is a large institution in Red Deer. Michener Center seems to be getting better at getting people out and about in the community.

I really enjoyed the Self-Advocacy Summit staying up to the wee hours of the morning networking with other self-advocates. I learned a lot there. I plan on going to future conferences.

## CET STANDARDS: 21

### *Individuals are supported in their leisure time pursuits.*

*(This Quality of Service Standard # 21 compliments the Quality of Life Standard # 9)*

#### **About this standard...**

Leisure time is not called “free time” because there is “nothing to do.” Rather, it is a time frame that individuals are free to use to engage in fun, enjoyable and possibly stimulating activities. Individuals with disabilities should be able to choose to participate in the same types of leisure activities as people without disabilities in their community. The service provider should provide information about options and opportunities to experience these, and support individuals to spend their leisure time in a way that is personally fulfilling.

Key indicators include...

- The service provider knows what the individual’s interests and preferences are regarding leisure activities.

- The service provider presents information to the individual about potential leisure activities that are compatible with her interests.
- The service provider creates opportunities for the individual to experience leisure activities that are compatible with her interests.
- Staff support the individual to find the right balance for her between being too busy and not busy enough.
- Staff support the individual in her choice of leisure activities.
- The service provider has a strategy for helping the individual to assess her satisfaction with her leisure activities, and takes follow-up action as appropriate.

## In Flanders Fields

By: Lieutenant Colonel John McCrae, MD  
(1872-1918)

Canadian Army

IN FLANDERS FIELDS the poppies blow  
Between the crosses row on row,  
That mark our place; and in the sky  
The larks, still bravely singing, fly  
Scarce heard amid the guns below.  
We are the Dead. Short days ago  
We lived, felt dawn, saw sunset glow,  
Loved and were loved, and now we lie  
In Flanders fields.  
Take up our quarrel with the foe:  
To you from failing hands we throw  
The torch; be yours to hold it high.  
If ye break faith with us who die  
We shall not sleep, though poppies grow  
In Flanders fields.

*Lest we forget ...  
Remembrance Day  
November 11, 2006*

### TRAINING

#### Positive Behaviour Supports

TBA

As described on the ICE website



Thank  You!

#### October 2006 Incentive Thank-you Card Draw Winner

#### Prize won:

**Fall Basket: towels, potpourri, candle, soaps,  
dish and a fall wreath created  
by Hope Colburne.**

**Mary Blatz** received a thank-you card from a Coordinator when Mary arrived for her shift 30 minutes early, as she knew the coordinator was working, and was sick.



**Next ICE Incentive  
Thank-you Card Draw  
November 15, 2006**

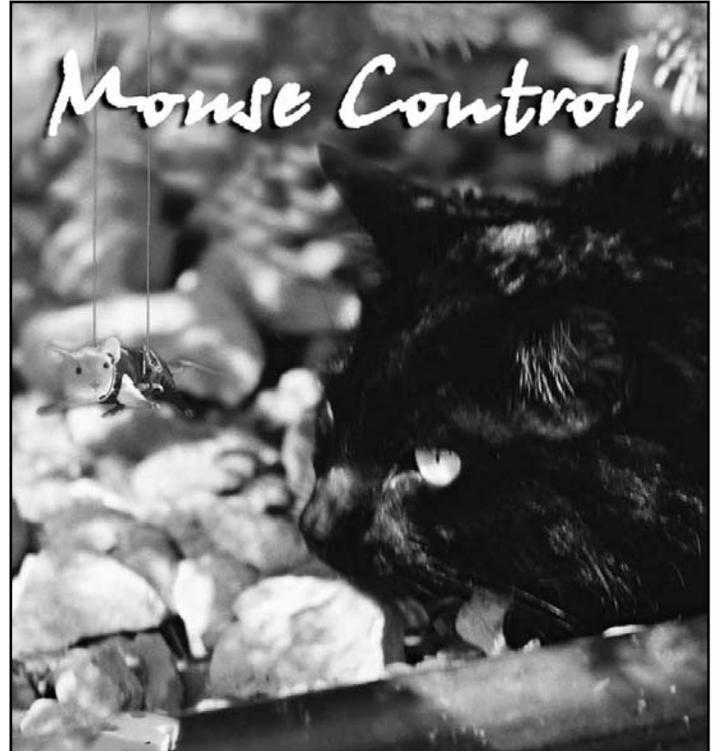
# Health Corner

At this time of year, people are not the only ones looking for a warm comfy spot. Mice are too, and slip into any opening looking for warmth and a good food supply. Screens with holes in them, window cracks, or doors being left open while we carry in groceries may provide easy access to our home. It is vital to know how to eliminate and clean up after them.

**Hazard Identification:** possible exposure to hantavirus in dust from nesting material and droppings of mice ( While Deer mice are the ones normally blamed for hantavirus; they are not the only mice that may subject us to exposure). All staff and clients should be aware that this exposure to hantavirus does have severe consequences and all staff potentially exposed **MUST** be aware of the hazards and follow control procedures.

## Elimination of Mice

1. Any trap that kills the mouse is best.
2. Place traps in mouse runs (along walls in darkened areas, especially unused ones and in the basement.) make sure all the occupants of the home are aware of the location as well.
3. After trapping, inform others of the hazard, put on PPE ( gloves and N95 masks) and spray the mouse and trap with a bleach solution of about 1 part bleach to 9 parts water – 10%) in a bleach bottle. Another disinfectant can be used, as long as it is a powerful germ-killer. Make sure the area is wel dampened, to keep the dust down.
4. Put the trap with the dead mouse into a plastic bag and seal it. Put it into the garbage and take the garbage outside.
5. Secure the home. Check for all possible entry points out-



side the home, from bottom to high where the possibility to climb exists. Mice can gain entry through an opening as small as 6 mm. Identify possible entry points and seal them using materials that are not easily gnawed through. Contact the landlord or ICE Health & Safety for assistance.

6. Continue to look for signs of mice inside the home. Droppings might be found almost anywhere, countertops, inside cupboards, along mice runs. Other signs include scattered nesting materials like dry grass or wood chips.
7. It is wise to store all food in sealed containers . Mice will gnaw their way through a bag, so a metal, glass or plastic container is advantageous. They will climb into cupboards, up into drawers and leave their little messes. Be watchful, as this is the time of year they seek the warmth of your home.



Find frequently used forms at  
**[www.icepage.com](http://www.icepage.com)**

go to the "ICE Staff" section by entering  
 User name "iceuser" and password "100smiles"

## OH&S: September Stats

Year	Month	Total Injuries	Lost Time Injuries
2005	September	6	4
2006	September	9	3

7/9 Injuries in 2006 arose out of client behaviors.

1/9 Injuries was the result of a motor vehicle accident where an employee was rear-ended. (1 Lost Time)

1/9 injuries was the result of a slip and fall, compounded by inappropriate shoes (1 Lost Time)

Our goal is to reduce the number of injuries we are having.

Each injury must be reported.

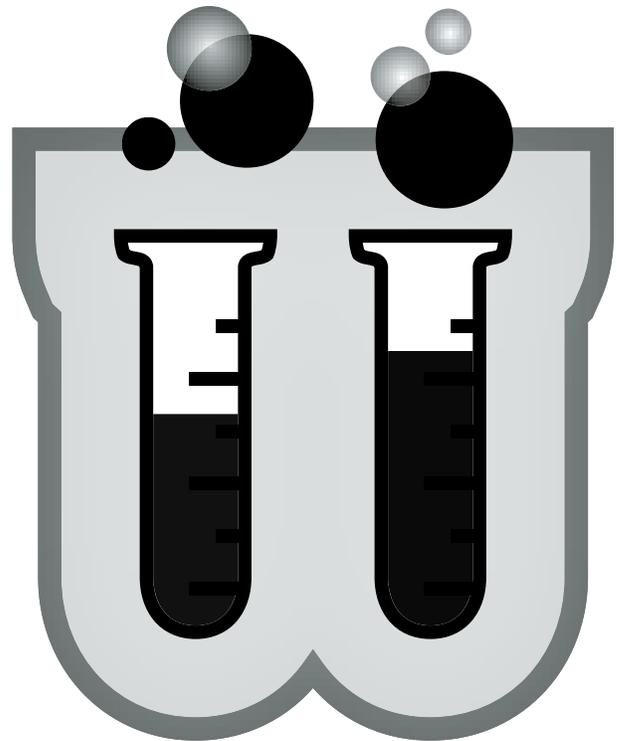
Each injury must be investigated.

## Membership in Health & Safety Committee

An employee recently commented that both the Health & Safety Program and ICE Page are only for those employees working in the residential programs, and I was amazed. All articles for the ICE Page have been written for all employees, and it was obvious to me that she must not have read it if she made that comment. And, if she didn't read it, what other information is she not getting? What about the ICE RRSP contributions?

And would health and safety, by any chance, be bettered by her involvement? Health and safety, for example, relies upon involvement from all areas to discuss and guide us in the issues that need development, and consideration by a team, not just one person or management's perspective. How limited we are if we have only representation from one area. We need involvement from all areas and Home Care, Office, Residential and Day Programs are all welcome to participate. As we are a community of workers and employees under the umbrella called ICE, then we need to support ICE and be active and involved in our organization. It is easy to sit and complain but far more satisfying to take part and involve ourselves in meaningful co-operative work. Thank you to all our members who faithfully come and take part. We wouldn't be ICE without you!

*Be sure to get  
your flu shots.  
The serum  
should be available  
sometime  
in November.*



### Your ICEPAGE

Is there something you would like to see in the ICEPAGES? Do you have an idea for a column?

Contact Corinne Stasiewicz at

(780) 453-9672

or [cstasiewicz@icenterprises.com](mailto:cstasiewicz@icenterprises.com)

## 2.3.12 BLOOD-BORNE INFECTIOUS DISEASE CONTROLS

In regular performance of work duties, all employees and clients may be exposed to the risk of blood borne infectious diseases through contact with an infected individual's blood (wet or dry), non-intact skin, mucous membranes, or certain types of bodily fluids. I.C.E. recognizes that it is not possible to know conclusively which people receiving support have blood borne infectious diseases such as HIV, Hepatitis B and Hepatitis C. In order to balance the risk of transmission, Standard Precautions (previously referred to as Universal Precautions) must be used at all times.

Employees are to assume that each direct exposure to blood (wet and dry), body fluids, non-intact skin or mucous membranes may result in the spread of an infectious disease. I.C.E. requires that in the process of providing personal care, each employee must use Standard Precautions with all clients, thereby protecting both client and employee from potential spread of disease.

When I.C.E. becomes aware of a client having blood borne pathogens which may then place employees at a risk of contact with blood borne pathogens, we will inform employees working with that client. When an employee becomes aware of the previously unknown presence of blood borne pathogens in a client, they will notify management through a critical incident form. Changes will be made to the client profile and other employees working with the client informed.

All employees that will be working with clients with known or suspected cases of the above diseases, will be informed of this risk and have the right to refuse without repercussion.

### Controls

1. ICE employees are to follow established administrative controls and wear appropriate personal protection equipment in accordance with accepted Standard Precautions.
2. All employees will have access to appropriate personal protective equipment, at no cost to the employee.
3. All employees will receive training about the transmission of infectious diseases and about the Standard Precautions necessary for working with all clients. This training will occur prior to the employee's first shift with the agency. The training will cover:
  - a. Various diseases, their transmission methods, and the short and long-term effects of the disease.
  - b. Standard Precautions, including hand washing, the use of personal protective equipment, good sharps usage, and aseptic techniques as barriers against infectious diseases.

- c. The procedure necessary to follow if the employee believes he/she has been exposed to disease through contact with a client's bodily fluids.

### High Risk Situations

I.C.E. recognizes that specific behaviors (e.g. tissue-piercing biting, abuse of sharps, self abusive behavior that causes bleeding) of an individual may increase the risk of transmission of blood borne infectious disease to others. These situations will be approached differently than the regular procedures described above.

These situations will be managed on an individual basis. This individual management will be the responsibility of the supervisor in consultation with an I.C.E. Registered Nurse. These individual precautions may include any or all of the following: a requirement for testing for blood borne infectious disease, additional education and training provided to employees, refusal to provide all services or certain types of services to the individual, and mandatory vaccination of employees and other individuals exposed to the hazard.

Employees who become aware that they have tested positive for a Blood Borne Pathogen and work in a situation considered high-risk as described above are required to inform the Health and Safety Specialist.

### Post- Exposure Procedures

Any employee who experiences a sharp or needle stick injury with exposure to blood and/or body fluids, an exposure to a splash of blood or body fluid in the eye, nose, mouth, open wounds, or to chapped, derided or damaged skin, or a human bite with broken skin shall:

1. Wash the affected area for 10 minutes with soap and water or cleaners to reduce contamination, or flush with water if the eye is affected.
2. Seek medical attention immediately if required, but no later than 24 hours after exposure.
3. Immediately notify your supervisor.
4. Complete an Incident Report including documentation of the route of exposure and the circumstances under which it occurred (see Policy 2.7.3 Critical Incidents).
5. Follow your physician's recommendations
6. Follow Policy 3.5.5 Employee Work Related Injury, Illness And Near Misses.
7. Provide your direct supervisor with regular updates.