

# ICE PAGE

NORTHWEST

2016

## Contents:

**Influenza Quiz** - Page 3  
**Influenza Quiz Answers** - Page 5  
**Health and Safety Meeting Minutes** - Page 4  
**POLICY REVIEW - 4.2.2. Risk Management**- Page 6.

## Health and Safety Meeting

October 13th 2016 @ 3:00 pm

## RPAC Meeting

October 4th, 2016 @ 1:30 pm

# ECAT

Employee & Client Assistance Team

**780-512-3129**

after office hours

Phones do not accept text messages. Staff need to call ECAT.

## TIME SHEET HAND-IN:

### October 17th, 2016

For all shifts worked between Oct. 1st and Oct.15th, 2016

### October 31st, 2016

For all shifts worked between Oct. 16th and Oct. 31st, 2016



## Making it Happen!

*Supporting Social Inclusion*



James is a helpful, friendly and easy going man who has been receiving residential supports from ICE since 2012. James lives with two roommates and works three days a week at a local wood shop. He has developed new confidence for connecting with people over the last few years and enjoys an active life in Grande Prairie.

James used to rely on ICE staff to assist him with transportation for work and social events. The Team Leader at his residence, Bonny, would drive him to and from these locations. With Bonny's encouragement and support, James has increased his personal independence by learning how to schedule his own bus service. He now books his own transportation to work and for his various community activities. This gives him freedom to arrange his schedule the way he likes it without having to rely on others.

Being physically active is fun for James. He participates annually in the local Special Olympics bowling league and as a result of regular league play, James has developed friendships with other participants. He keeps in touch with them through phone calls and they sometimes meet in the community. James and his roommates enjoy swimming at the local pool. Recently while swimming at the aquatic centre James struck up a friendship with a



local community member and now they meet casually outside of trips to the pool.

This summer James had the opportunity to attend Joy camp through a local church and he had great fun participating in camp activities and reconnecting with old friends. At home James is a sports fan and he watches baseball and records sports statistics for his favourite players. His favourite team is the Blue Jays.

*(cont. on page 2)*

James has a close connection to his family and together they share interests such as camping, fishing and going on family trips. He has one sister living in Australia who he stays in touch with through phone calls, text messages and Facetime.

When James recently expressed that he wanted to visit his sister who lives in Australia, ICE staff encouraged him to begin setting savings aside to reach this goal. Since then, James has been diligently saving money in order to travel to Australia and he is excited about his future travel plans.

**Employee Spotlight - Bonny Beaulieu**



**Photo: James with Bonny.**

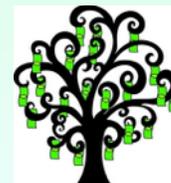
Bonny has worked for ICE 5 years. She finds fulfillment in watching the ICE individuals she supports reach their goals. Bonny says she enjoys making a connection and building an environment of trust. Thank you Bonny for your valued contributions.

**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**



**TRAINING**



**Pre-Employment Training (PET)**

October 18th, 19th and 20th, 2016  
9:30 am - 5:00 pm

**Crisis Prevention Intervention Training**

October 11th & 12th  
9:30 am - 4:30 pm

**Proactive Behaviour Intervention**

October 21st 2016  
9:00 am - 4:00 pm

**Mental Health First Aid**

October 5th and 6th, 2016  
9:00 am - 5:00 pm



**Did You Know?**

ICE Health and Safety Committees across the province review and make recommendations regarding Near Miss and Employee injury incidents each month at Health and Safety meetings. (Specific worker / program information is not shared.) Investigation and corrective actions for these incidents are completed by management with input from the Health and Safety Committees. Information is shared regarding these incidents and the recommendations made each month in the Health and Safety meeting minutes in the ICE Page.

**Why?**

Workers have a legislated right to know about hazards in their workplace and how to control these. By sharing this ICE information in our newsletter we hope to enhance employee safety across the company. Reporting a Near Miss in your work site could prevent an injury to you, your clients, your co-workers, and even to other workers across the province. Please report.



## Influenza Quiz

Annually at the start of influenza season (October/ November) we review important information on influenza in our ICE page. Try the following TRUE OR FALSE quiz to see if you have the knowledge you need to protect yourself and others from influenza:

### TRUE OR FALSE?

1. Influenza is a stomach and intestinal bacterial infection thus the common reference to “stomach flu”.
2. Influenza symptoms are often confused with those of the common cold.
3. Influenza is a minor health issue.
4. Three effective preventative measures for Influenza include: 1) Get the influenza vaccine every fall. 2) Regular and thorough daily hand washing using regular soap (for at least 15 seconds). 3) Avoid touching your eyes, nose or mouth.
5. You only need to receive the influenza vaccine once in your lifetime to be fully protected from the virus.
6. Alberta Health provides a Universal Influenza Immunization Program, where all people 6 months of age and older who live, work or go to school in Alberta are eligible for vaccine at no charge.

ANSWERS APPEAR ON PAGE 5



## ICE offices will be closed Monday, October 10th, 2016 for the Thanksgiving Holiday

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.*

## Health and Safety Minutes Northwest - Meeting - September 8th, 2016

### 3.0 STANDING ITEMS

#### 3.1 A) Review of Regional Health and Safety Meeting Minutes - Section 3.2 Internal Incidents

##### Calgary:

**July 3, 2016**

Staff noticed water was leaking from under the kitchen sink; water was spreading towards the living room. The water was mopped right away; the landlord and plumber were contacted right away. The cause of the leak was unknown and was fixed by the plumber. It is unknown if the leak caused permanent damage to the flooring, staff will watch for mold.

**Recommendations:** Staff to complete regular visual inspections under sinks to search for possible leaks. Incident Investigation completed.

##### Edmonton- August 3rd, meeting minutes.

No Current Internal Incidents to Review

##### South- August 9th, 2016 meeting minutes

No Current Internal Incidents to Review

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

##### Calgary: August 17th, 2016 meeting minutes

**July 11, 2016-** Staff was leaving a visit out in the community when she heard a sound was coming from her tire. Staff drove to the nearest gas station, inspected the tire and notice it was flat. Staff continued and tried filling tire with air with no success. Staff was able to get help with patching her tire. Staff returned to the ICE office.

**Recommendation:** Staff to routinely check tire pressure, also suggested for staff to walk around their vehicle and complete an inspection prior to entering vehicle.

Near Miss Investigation completed.

##### South: August 9th, 2016 meeting minutes

No Near Miss Incidents to Report.

##### Edmonton: August 3rd, 2016 meeting minutes

No Near Miss Incidents to Report.

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

August 27th, 2016

Staff was completing a community access shift and felt pain in their wrist as they were lifting a wheelchair into their vehicle.

**Recommendation:** Staff was reminded to use proper ergonomics when lifting items. Incident Investigation will be completed.

#### 3.3 Evaluation of current Near Miss Incident Investigations:

No current Near Miss Incidents to review.

#### 3.4 Review of COR Audit and Action Items:

Reviewed 4.3

4.3 Are workers involved in the inspections? 15/15

4.4 Are the individuals designated to conduct formal inspections given appropriate training? 10/10

4.5 Is a site/operation specific checklist used for the inspection? 10/10

4.6 Are inspection reports reviewed and signed off by management? 5/5

4.7 Are deficiencies identified in the inspection report corrected in a timely manner? 15/15

4.8 Is there a system in place whereby employees can report unsafe or unhealthy conditions and practices? 5/5

4.9 Does the system for reporting unsafe or unhealthy conditions and practices ensure action is taken by management in a timely manner? 10/10

5.1 Is there a process in place to ensure employees have the qualifications and training to perform their jobs in a healthy and safe manner? 15/15

5.2 Are critical health and safety issues addressed before the employee starts his/her normal job responsibilities? 14/15

5.3 Is the new employee orientation completed within the first week of employment? 15/15

#### 3.5 Review of Master Hazard Assessment and Control Document

Reviewed the HACD. Pages 1-11.

Other regions review & and recommendations and regional response to recommendations:

##### Calgary: August 17th, 2016 meeting minutes

Reviewed the HACD Working with High Behaviours pages 11-16 for items that should be in the section specific to non-residential work.

Physical Aggression- recommended taking information out about safe house, change emergency contact numbers located at phones in residential programs to emergency numbers located on back of Hazard Assessment Control card.

Calgary made a suggestion to add to the back of the ID card writing "if this card is given to you, call 911". If there was a situation where staff was dealing with an aggressive client, staff can provide this card to the by standers in the community, so they can then call for help while staff is trying de-escalate client.

AWOL- recommended adding follow AWOL Protocol.

##### South: August 9th, 2016 meeting minutes

Reviewed Pages 30 - 34

Use of Dishwasher – No

Recommendations

Bed Making – Add use of (and regular checking of) bed bug traps under client/ staff beds.

##### Edmonton: August 3rd, 2016 meeting minutes - Tabled until the next meeting.

#### 3.6 Policy Review:

Policy Review – 3.6.5 Workplace Violence

#### 4.0 OTHER BUSINESS

NEXT MEETING October 13, 2016.

## Incentive Award

Winner!

September 2016 Thank-you Card

Draw Winner

### Deo Sselwanga

**Deo received a Thank You card from his Team Leader for quality of supports offered to ICE clients.**

**Deo won a Stainless Steel Flask and a Tea Variety Pack.**



**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!**



## ANSWERS TO THE INFLUENZA QUIZ ON PAGE 3

1. FALSE - Influenza is a highly contagious infection of the airways caused by a virus. While nausea, vomiting and diarrhea may occur, especially in children, influenza is not an intestinal disease.
2. TRUE - The common cold and influenza share some symptoms such as: fever, loss of appetite, a sore throat, sniffles and sneezes. Influenza is characterized by the sudden onset of illness while cold symptoms generally appear more gradual. It typically starts with headache, chills and cough, followed by fever (usually high), loss of appetite, muscle aches and fatigue, runny nose, sneezing, watery eyes and throat irritation. Influenza usually causes extreme tiredness and involves the whole body while cold symptoms are more localized.
3. FALSE - While the majority of those who become ill with the flu recover, in Canada there are about 12,000 hospitalizations and nearly 3500 deaths each year. Complications of influenza can include pneumonia (bacterial and viral), ear and sinus infections, dehydration, and worsening of chronic medical conditions such as asthma, diabetes, and congestive heart failure.
4. TRUE - Additional preventative measures include:
  - a. Cover your cough with a tissue or cough or sneeze into your upper sleeve, not your hands. Clean your hands after every coughing or sneezing event.
  - b. Avoid crowds when influenza is circulating.
  - c. Use hand hygiene frequently, especially after using the washroom, after using shared copy machines, fax machines, someone else's computer or phone. Use hand hygiene before eating and drinking.
  - d. If you are ill with influenza, stay home so you do not spread the virus.
  - e. Frequently sanitize "high touch" areas such as keyboards, your mouse and phone.
5. FALSE - While immunization is the most effective way to prevent influenza, each year influenza virus strains change so vaccination must be repeated annually to achieve protection. With a good "match" of vaccine to the virus influenza immunization prevents disease in about 50- 85 % of healthy individuals. Even with an imperfect match the overall risk of infection is reduced from vaccination. For the frail and elderly vaccinations decrease the incidence of pneumonia, hospital admissions and deaths. Vaccines take about two weeks to become effective so you may not be completely protected during that time period.
6. TRUE - Alberta Health Services coordinates the delivery and administration of a Universal Influenza Immunization Program with large public immunization clinics starting in mid-October. Immunization partners such as physicians, pharmacists and private health agencies offer access to the influenza vaccine.



**Watch for information coming soon on Alberta Influenza Immunization clinics and get vaccinated!**

# Policy Review

## 4.2.2 RISK MANAGEMENT

**I.C.E. has a formal risk management program to minimize, prevent and/or reduce losses to the organization, its employees, its clients, and community members.**

For the purpose of this Policy Risk Management will be defined as the efforts undertaken by the agency to identify, control, and mitigate risks and to reduce the uncertainty in the achievements of I.C.E.'s strategic and operational goals. The objective is to achieve a better practice in the management of risks that threaten to adversely impact the agency, its service delivery, operations, assets, employees, clients or community members.

A risk is defined as an event or cause leading to an outcome that jeopardizes the clients, employees, agency operations, or community members. The severity of the risk is directly related to the likelihood of its occurrence and the consequences of the occurrence.

Established policies and practices will maximize opportunities for success in all activities and minimize adversity. Risk management is embedded in all policies and practices that govern the agency. Fundamental policies includes screening and hiring of employees, employee training, clearly defined employee job requirements, employee discipline and dismissal, health and safety, emergency plans, fire safety plans for residential programs, accident and incident reporting, defined documentation and record keeping systems, financial management, ethics, privacy and documentation of consumer support requirements. The agency's Policy Manual clearly addresses all of these and more.

Risk management involves:

1. Identification of hazards / risks – what can cause harm
2. Assessment of risks. – understanding the likelihood that a risk may occur and if it does what will be the consequences
3. Controlling risks-implementing practices and procedures that most effectively control / minimize the risk within the agency's ethical framework and industry standards
4. Continually review and evaluate control measures for effective management of the risk

It is the responsibility of all employees to continually identify, evaluate, respond, monitor and communicate the risks associated with any activity, function or process within their relevant scope of responsibilities and authority. The effectiveness of a risk management program is

contingent on the involvement and cooperation of employee's and management's commitment to health and safety.

### General Policies:

1. Independent Counselling Enterprises will take reasonable and prudent actions to prevent and to minimize risks/hazards in the workplace. All employees will be educated in skills that can avoid and/or reduce the risk of injury to themselves and to clients. (See also Policy Section 3.5 and 2.3.6)
2. Communication between Contracting agencies/Guardians, I.C.E., and the client remains the cornerstone in minimizing risk factors involved in service provision.
3. Independent Counselling Enterprises will carry third-party liability insurance, professional practice insurance, loss and theft.
4. Independent Counselling Enterprises will ensure the continued monitoring, accessing and implementation of enhancements to site and information security. This would include ensuring employee and client awareness and use of security measures, personal safety measures, confidentiality, and preventing the loss of company site and information assets.
5. Management will review all general and critical reporting incidents to identify areas where action can be taken to further reduce potential risk to Independent Counselling Enterprises, its employees, its clients, and community members.
6. Where ever possible employees will participate in exit interviews. I.C.E. Management will review the results for service improvement and identify problem areas. Evaluations disputed by employees or other formal grievances that have been reviewed as per policies will be analyzed for process improvement.
7. Environmental Quality Audits are conducted a minimum of two times annually in all 24-hour residential homes and annually in support homes. In Residential settings trained staff conducts house audits (Monthly Safety Inspections and Random Inspections) on a regular basis. In support homes the operator completes a monthly safety checklist and the supervisor of the program completes a monthly checklist. Residential and support home programs will have monthly fire drills, check smoke detectors, check carbon monoxide detectors, monitor water temperatures and ensure fire extinguishers are operational. Refer to the Master document binder for a copy of these forms. Program supervisors receiving all

program documentation must ensure it is accurate before signing off on the information provided.

8. The Community Support Coordinator/Community Team Coordinator (as appropriate) will regularly monitor and make recommendations regarding safety in client homes. Services may be suspended until conditions are deemed satisfactory in all settings that are not operated by I.C.E. In residential programs operated by I.C.E. it is the responsibility of this agency to ensure a safe environment on an ongoing basis. The Health and Safety Specialist may be involved in this assessment.
9. In all cases where an employee is injured in the performance of his/her duties the W.C.B. report will be reviewed by the appropriate supervisor, for indications of service hazards and corrective action, and then forwarded on to the **Health and Safety Specialist/designate** for review. See **Policy 3.5.5 Employee Work Related Injury, Illness, and Near Misses**

### Employee Risk Management:

1. Employees are screened and reference checked. All must complete pre-employment training session.
2. Personal safety both for clients and the employee is addressed through various training sessions and on-site supervision.
3. Minimizing potential risk through information exchange is imperative. Imparting information about client's weight, height, special equipment, mental health, past/current behavioural history and required additional procedures all play a significant role in risk management. Providing the client with the appropriate employee, whose skills will equal the needs of the client; will minimize potentially dangerous situations for the client and the employee. In turn I.C.E. is responsible to report any change in client health and/or support requirements that will reduce incidents that may be harmful to the client.
4. Client visits are conducted with a view to confirming the authorized services and examine safety issues that may be present in the environment. **All client visits are documented in C-Views as standard practice by the person conducting the visit.**
5. An employee has the right to refuse to work under unsafe conditions.

Updated November 2015