

Andrea Beck was born in Zuerich, Switzerland. After many years of education and three years of apprenticeship as an office clerk, she worked as a bookkeeper. In 1993, she and her husband travelled for the first time through British Columbia and Alberta. They fell in love with our country so much that they returned every season and eventually decided to move here. They immigrated to Canada in 2002 and made the Crowsnest Pass their home. At the end of 2008 they moved to acreage near Cowley, AB. This move allowed them to fulfill a lot of their wishes. Andrea's husband now has his own shop and they have a few animals, like goats, sheep, llama, chickens, rabbits, dogs and cats.

In 2009 a friend of Andrea's, asked her if she would like to change her career. After all those years of sitting in an office, she was happy to be given this opportunity and took on the challenge. That's how she started working for ICE. After she went through all the training, she met her first client. She loves her "Sunshine" (which is her nickname for this lovely lady). Andrea is convinced that she made the right decision and says it has changed her



whole life. In 2009 she was given the opportunity to take the Health Care Aide Course. After the many hours of studying she is so happy to have the certificate and to be able to continue to work with her client and in the health-care field.

Andrea enjoys sharing her life experiences with her client. She says, "Our Sunshine is a happy lady, always laughing, in a good mood, always busy with something." Andrea says "Sunshine" loves to come to their "little zoo" to pet and feed the animals. Andrea and "Sunshine" also enjoy being active in the community, meeting as many people as possible.

Andrea tells everyone that she loves

her job and is so happy that her friend asked her that very special question. She would like to thank all the supporters that assist her to do this interesting and never boring job.



After Hours Supervisor

Lethbridge is
403-634-8805

Nanton is
403-625-9513

(the calls are forwarded to one phone so no one has to pay long distance)



MEETINGS



Health & Safety Meeting

August 17, 2010 Lethbridge, 10:30 am

Management

August 17, 2010 Lethbridge, 10:30 am

RPAC

August 17, 2010 Lethbridge 11:30 am

TIME SHEET HAND-IN



Hand-in day will be:

August 16th, 2010

for all shifts worked between

August 1st and 15th and

August 31st, 2010

for all shifts worked between August 16th and 31st

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Client Success Story – Brandy

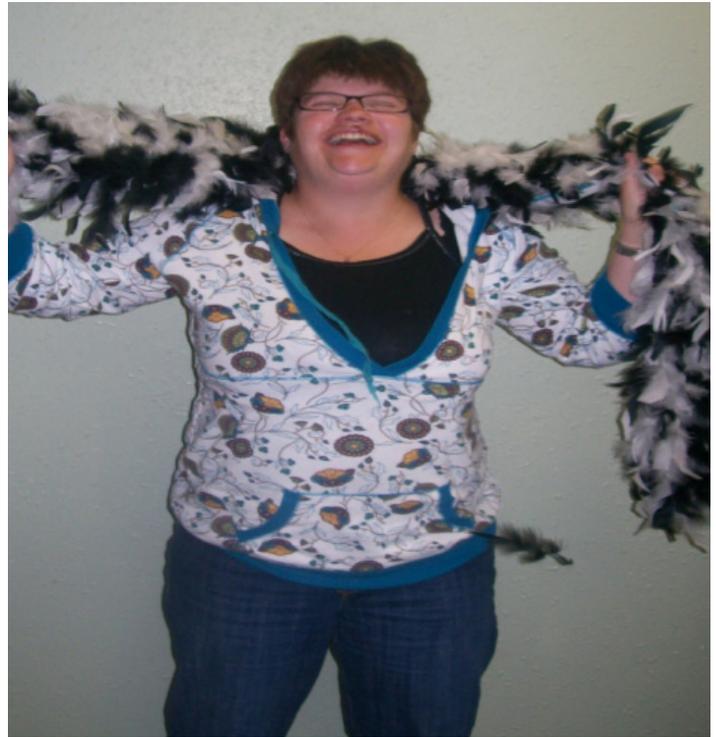
Brandy and her staff have been going non-stop for the last two years. Brandy lives in a support home in Lymburn, which is 30km Northwest of Beaverlodge. Three days a week she spends the day with her ICE staff and they scour the Peace County looking for adventure and creating fun and laughter everywhere they go.

One of Brandy's favourite things to do is listen to music and to dance. (In the photo for this article, Brandy is dancing.) Brandy has had two recent opportunities to display her dancing skill: first at the PDD spring fling celebration in May and then at the Rio Grande rodeo in early July. She likes a variety of music but she prefers something with a steady beat that she can dance to. Her staff says, "She's really good too. Brandy's definitely got rhythm".

Brandy loves babies. One of her friends has a baby and Brandy regularly spends time with her. This spring Brandy did something very special for this friend. Every week during the school year Brandy goes to Learning for Life at the Resource Center where she is working towards her goal of reading letters and words. Twice throughout the year, for spring and Christmas, they hold a concert. This spring, with minimal help, Brandy composed a poem for her friend's baby which she read during the concert. Her friend and the baby were on the stage with her and when Brandy read the poem, the audience was brought near tears. To present the poem to her friend to keep, Brandy made a scrapbook page that could be added to the baby's scrapbook.

Every Wednesday morning Brandy, with staff support, volunteers at a day care where Brandy has more opportunities to practice reading. In the winter when it's too cold to go outside, Brandy helps the children share story time. Brandy and her staff also help make crafts and take the kids outside to play. Brandy has been volunteering at the day care for over two years. Brandy's staff says, "When they see me without Brandy, they are disappointed and ask, "where's Brandy?""

Another of Brandy's recent achievements has been learning to swim. Every week Brandy and her staff go to the pool. Before, Brandy had always been scared to go into the deep end. Over time, with encouragement and practice Brandy has learned to swim on her own beside her staff. Now, she



swims by herself with her supports watching and cheering her on. Brandy showed no fear of the water during a recent trip to the water park in Sylvan Lake nor during the same trip when she swam in a lake in Red Deer.

The list of activities Brandy partakes in goes on and on: picnics in the park, visiting friends, meeting her friends at the farmer's market, hiking on Saskatoon Mountain, biking in Beaverlodge, going to Edmonton to rally for the hospital, completing a food drive for Curves, volunteering at the library (recently she helped grade one and two children at a science booth by answering questions about the experiments), and shopping at the thrift stores so she can donate blankets to the kittens when she volunteers at the SPCA. Brandy is so involved in her community that this year at Joy Camp she received an award for attending the camp 10 years in a row. We hope that we can continue to keep up to Brandy in her never-ending quest for fun and adventure.

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.



Health and Safety Minutes

3.1 Review of Regional Health and Safety Minutes

Calgary May 17, 2010 Minutes reviewed

3.3 Near Misses

May 8, 2010-Staff was setting a trap and the trap snapped back on her fingers however did not cause injury.

Recommendations: Landlord to be contacted to set traps. All 4 units in complex will need to be inspected and treated. Ensure food (dry goods) is stored in plastic containers.

Northwest Region June 10, 2010 Minutes reviewed

No injuries or Near misses

Edmonton Region-No minutes available to review

3.2 Evaluation of current Injury Investigations

June 1, 2010

Client made toast for herself. Staff went to move the toaster and put away, but the toaster wall was very hot and the staff burnt her finger. Index finger on right hand. Staff immediately ran her fingers under cold water to cool the skin. No blisters appeared. Skin is intact. Incident Investigation completed.

To prevent future incidences, let appliances cool down all the way before attempting to move

them.

3.6 Policy Review

2.3.8 Medical Conditions and Procedures

4.1 Training

CPI took place in Lethbridge July 6, 2010

4.2 Reviewed Corinne's email

Regarding Blood Glucose testing staff in Edmonton do this testing in several programs where this type of support is required.

The tip about first aid kits.

"The Team Coordinator coordinated the inventory list with the packaging in their first aid kit. Example. On the ICE First

Aid Supply Checklist list the first item a. is 10-antiseptic cleansing towelettes, individually packaged. These are usually found in a boxed package in the first aid kit. The Team Coordinator simply labeled the box obviously with an a. and so on for the rest of the list and packages. That way, no time is lost matching the packages while checking the supplies. It is a simple idea, but it does save time."

Current Job Opportunities

Nanton & Claresholm,

P/T shifts in Claresholm & Nanton

Relief/casual shifts available in Nanton & Claresholm areas

F/T shifts available in Claresholm

Lethbridge, Cowley, Areas

Lethbridge:

ROOMMATE POSITION

P/T mornings 7am-9am for male staff

relief for Lethbridge & Fort Macleod Areas

Please note:

Status of programs does change, so please check with your coordinator if you or someone you know may be interested.

If any staff is available and willing to volunteer to post ads in your local community, please contact Julie at 866-646-1199.

All ICE offices will be closed

Monday August 2

Please direct all calls to the After Hours Supervisor for this day.

TRAINING

PET

Aug 4 & 5 location TBA, 9:30-5:00

Thank  You!

Holly Rush received a Thank you card for attending extra training to ensure that a client's support needs were met. She won a badminton set and a bocce ball set.

CALORIES in – CALORIES out

The word “calorie” comes from the Latin “calor” which generally translates as “heat.”

Calories measure the amount of heat energy a fuel source can produce. For people, our fuel source is food.

The average person requires between 1500 to 2500 calories a day; females usually require fewer calories than men per day. People who are more active, or who “burn” more calories, may require a LOT more! Some athletes need to consume 6000 to 8000 calories a day to maintain performance. Imagine the calories required to play a full afternoon of soccer or a hockey game.

Of course, the legendary “couch potato” can survive on much fewer calories. For some of the people with an inactive lifestyle, even 1200 calories per day is too much. In cases where the “calories out” (activity) level is too low, the doctor may

recommend a medically-supervised diet restriction of 800 calories per day in order for the body to start “burning” some of its own fuel storage (fat). This would literally be a “starvation diet.”

The healthier way to keep a balance between calories in and calories out, is to live an active lifestyle with an adequate, nutritious diet.

When considering the “calories in” process, we need to know how many calories are in our fuel source and how they can be utilized efficiently and productively.

Calories in food:

CHO (carbohydrates)	= 4 calories/gram
Protein	= 4 calories/gram
Fat	= 9 calories/gram

ALL of these fuel sources are required for the human body to run efficiently. Diets that purport to have a “quick fix” for weight loss by cutting out one of these food groups (such as a NO Carbs. or NO Fat diet) will only confuse and harm the body’s metabolic balance.



2.7.3 CRITICAL AND GENERAL REPORTING INCIDENTS

For all AHS-Capital Health clients Home Care employees will document all reportable incidents using the Critical Incident/ General Incident Reporting forms. The I.C.E. Manager of Home Care will transcribe all reporting incidents into a quarterly summary form and forward it to AHS-Capital Health as per the Home Care Contract.

1. A reporting incident is considered to be any event or series of events, real or alleged, that is or could potentially be life threatening/cause injury. The incident may result in criminal charges, police involvement, legal action and/or further investigation by outside authorities. As a result the circumstances must be formally documented to ensure the situation is addressed properly. The agency has two types of reporting incidents: **Critical and General**. Both types require documentation and internal (i.e. I.C.E.) follow up. A **Critical Incident** in addition to the former follow up must be reported to outside sources such as the funding source for client care, police, Protection for Persons In Care, for external review and/or further investigation. Note all abuse allegations must follow I.C.E. policy (refer to policy 2.6.3 Client Abuse)

1. Examples of **Critical Incidents (CI)** include but are not limited to: client death/suicide, employee death, client seeking

medical attention as a result of injury or poor health outside the normal experience of the client, client hospitalized as a result of injury or poor health outside the normal experience of the client, employee physical injury, client AWOL, allegations of client abuse, disclosure of criminal activity by a client, illegal activity by client, police involvement/criminal charges against client, loss of confidential client/employee information, serious emergency situation or dangerous situation such as fire or break-in, or physical restraint outside of the client restrictive procedures.

2. Examples of **General Incident (GI)** include but are not limited to: Change in overall client health that does not require medical intervention, client aggression, client behaviour escalation, planned restrictive procedure performed, client self injury, property damage by client, verbal threats made by client, medication error, delegated procedure not performed in accordance with care plan, weather problems, disruption to client living situation such as bed bugs or a near miss.

3. When a reporting incident occurs, these steps are to be followed:

- To the best of your ability, ensure the immediate

safety of the client and yourself;

- If necessary, immediately contact the appropriate emergency authorities: (911, poison centre, pharmacy, etc.);
 - Contact your supervisor or the ECAT supervisor immediately by phone;
 - The supervisor will provide the employee with direction and contact the appropriate I.C.E. personnel to facilitate follow-up;
 - The employee is to document the incident on the correct reporting incident form. This will either be a critical incident reporting form or a general incident reporting form (see definitions point #2 and point #3);
 - Should the incident involve an employee injury or near miss the employee will be required to complete further documentation as per **Policy 3.5.5. Employee Injury, Work Related Illness, and Near Misses.**
4. Documentation of a reporting incident includes:
- Completing the correct reporting incident form as soon as possible, preferably within 30-60 minutes of the incident;
 - Provide a clear, brief account of what happened leading up to the incident and the action you took as a result. Use the guidelines for routine recording on Contact Notes;
5. Unless otherwise directed, submit the completed Reporting Incident Report to the office within 24 hours. If faxing the form ensure it is stipulated on the fax as to who the fax is to be directed to.
6. If another agency is involved, you may need to complete documentation specific to that agency. Do so using the guidelines outlined above.
7. The I.C.E. personnel/ECAT supervisor who directly receives the information concerning the reporting incident must ensure documentation systems, such as C-Views and pager notes, are immediately updated to facilitate completing part two of the reporting incident form. Part two of the reporting incident form is generally completed by the appropriate supervisor of client care. The supervisor of client care will then ensure that follow up is completed and documented in consultation with their Manager. Please note that at times the supervisor may be the Manager.
8. The follow up is dependent on the type of reporting incident and is to include but is not limited to :
- Action plan is to be devised and implemented as required.
 - CI /GI sent to C.O.O. and President.
 - Unit Manager has assigned an investigator if an employee injury or near miss occurred. Page one of the CI/GI goes to investigator.
 - If WCB involved employee provided with a confidential copy of CI and appropriate ICE personnel informed and process commenced.
 - If Abuse investigation a copy of CI made available for that report and investigation process has commenced.
 - Unit Manager has sent copy of CI/GI to RPAC as required.
 - Unit Manager has provided confidential copy of CI/GI to Health and Safety Chair as required.
 - Copy of CI are only sent to PDD as required and in consultation with the C.O.O. and President.
 - Copy of CI sent to Program/residence for follow up.
 - Original client CI/GI is to be filed in the client file at the main office.
 - Original CI/GI involving an employee is to be filed in the employee's file.
 - If an employee is injured/involved in a Near Miss the CI/GI is to be attached to the Investigation Report and filed in the employee's file
 - CI/GI entered into C-Views and internal tracking system
9. Note: If the reportable incident involves a client who is receiving residential services from I.C.E. copies of the CI and GI form are in the staff room of each residential program. For any other situation the form must be obtained from the main office should the employee not have the proper documentation form.
10. Delegation errors (as per Home Care) that may have been the result of the employee's error or omission will necessitate the employee being taught again the delegation procedure at the next shift with that client. If the incident involved a client transfer, that transfer will be evaluated by the nursing supervisor both at the next shift the employee has with that client and the next shift any employee has with that client.
11. The employee's supervisor will follow up with the employee as appropriate.

Refer to Policy 3.5.5 Employee Injury, Work Related Illness, and Near Misses

Refer to Master Forms Binder Section E or F

Updated October 2009

2010 ICE PAGE Newsletter Survey

In April and May of this year ICE conducted a survey about our ICE Page newsletter. The survey sought feedback from selected individuals within all levels of the company and across various regions of the province. Many interesting things were learned from this survey and this article will share some of them.

What is working well?

Many positive comments were received about the newsletter as a great source of information and a way to recognize the achievements of staff and clients.

What could be improved?

Feedback:

- “Each staff should have a copy of the ICE Page.”
- “If I could get the paper through email, it would be better for the environment.”
- “Some participation from field staff, perhaps “Questions from the field” or employees could be asked to share pointers and suggestions for their work.”
- “Shorter articles on topics rather than full page articles.”
- “Colour copies of newsletters made available.”
- “Always put the newsletter on the internet.”
- “Would like information on the ICE RSP program in the ICE Page”.
- “Information and announcements are not always circulated soon enough.”

“We’re listening.”

Responses:

- ICE makes every effort to provide all employees with access to the company newsletter. Newsletters are: circulated to ICE residential programs, available in the reception areas at each ICE office, available during Hand In days, emailed to employees (who have provided an email address and who have requested this service) and it is posted on line. To access the newsletter on line go to www.icenterprises and pull up the ICE Web Page. At the bottom of the ICE home page just click on the tab, “ICE Pages”.
- In response to your feedback, the ICE Pages that are circulated by email and those that are posted on the Web site will now appear in a colour format. Printed copies will remain black and white to manage our reproduction costs.
- We’re adjusting our format to feature briefer “bite” size articles.
- A regular “box” with RSP information will appear in each issue of the ICE Page.
- Participation by ICE staff to share professional and appropriate subject matter related to our field is welcome. Each ICE page issue is the result of contributions of many different employees within the company. To contribute a submission for consideration, contact the ICE office in your region. “Questions from the field” are encouraged.
- Time sensitive and/or frequently revised announcements are not suited to the 15 day turn around time lines required for layout and reproduction of our 4 regional monthly newsletters. It is recommended that time sensitive and/or frequently revised announcements be shared by more flexible avenues such as flyers, memos, posters, or telephone contact. ICE will continue to explore alternate effective means to share information.

(Additional comments or suggestions for the ICE Page may be forwarded to cstasiewicz@icenterprises.com.)

Thank you for your feedback and please keep reading!