ICE PAGE



Denis Therrien was born and raised in Fahler, Alberta. French was his first language, and he began learning English in grade four. Denis volunteered with the Friendship Corner in Fahler, assisting individuals with disabilities on community outings.

Denis moved to Girouxville Alberta at 25 years of age, when he married. He lived there for 18 years, and worked at True Value for 14. There he had two

sons; Daniel lives in Wembley with his wife and son, and Stephan lives in Grande Prairie.

Denis worked at Canadian Tire for a year and a half before he was recruited to work at ICE, and he has never looked back! Denis has worked at what is now called the Swanavon program for the entire five years of employment with ICE

Denis played hockey for 20 years, and still enjoys watching it on TV and attending the Grande Prairie Storm games. He likes all sports, golf and slow-pitch in particular. He enjoys watching scary movies and has traveled throughout British Columbia

and Alberta.

Denis is a very valuable member of the ICE team, and we hope to have the pleasure of working with him for many years to come.



Did you know?

- Fahler is known as the Honey Capital of Canada. At its peak, it has more than 48,000 bee hives that produce 10 million pounds of honey annually. The Peace Region produces 40% of Canada's honey.
 - Fahler is the home to the largest bee in the world. The

steel structure was constructed in 1990 by Richard Ethier, the same year the Honey Festival began. The bee is 22'8" long and 7"7" in diameter. This year's Honey Festival is July 20 & 21.

• Fahler is also home to the 'World's Largest Beehive', a three-storey slide.

For more information, visit: http://ux.town.falher.ab.ca



Canada Day celebrates the creation of the dominion of Canada through the British North America Act on July 1, 1867, uniting three British colonies—the provinces of Nova Scotia, New Brunswick and Canada. The three colonies united to form one country divided into four provinces. The Province of Canada became Ontario and Quebec.

The holiday was formally established by statute in 1879, and was originally called Dominion Day, making reference to the term "dominion," which was first used to describe a political union within the British Empire for Canada, at a time when the British government was hesitant to adopt the name proposed by the Fathers of Confederation: Kingdom of Canada.

The name was officially changed to Canada Day on October 27, 1982, largely harking back to the adoption of the earlier Canada Act 1982.

After Hours Supervisor 819-0583

Health & Safety Meeting Thurs, June 21, 1:30 PM

MEETINGS

Team Leader Meeting

Wed, June 13, 1:30 pm

TIME SHEET HAND-IN



Hand-in day will be:

Tuesday, June 15, 2007

for all shifts worked between June 1st and 15th and

Tuesday, July 3, 2007

for all shifts worked between June 16th and 30th

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SUCCESS STORY: BEN

Ben is a bright young man who grew-up and remains living in a small rural community situated in the heart of southern

Alberta. A hard worker, animal enthusiast, athlete, and friend, Ben has taken full advantage of surrounding opportunities to become involved in the community and with those around him.

Known for his up-beat friendly personality, Ben has built up relationships with citizens and employers alike and does his part to give back to the community. Some of his jobs include delivering a newsletter bi-weekly to various businesses in town, taking care of a pup named, Mate, during lunch-hours, and a mail delivery route to a handful of people/ businesses.

Recreational activities such as sports, working with animals, and baking are what really get Ben going. Over the past couple of summers, Ben has been a volunteer for the Foothills Therapeutic Riding

Association in hopes of passing on his love and knowledge of horses to younger children with disabilities. Another activ-

ity Ben is very passionate about is fishing! He has an eye to spot any boat within a kilometer radius at any given time and

himself can be found by the water on a nice sunny day with a fishing rod in hand, enjoying the company of friends and family.

Sports are another activity that Ben absolutely loves. Whether it is for fun with local teams or a specific sports program, he will be there ready to play. Bowling, floor-hockey, and baseball are regular sports Ben plays through Special Olympics. His most recent achievement is a bronze medal that he and his floor-hockey team won at the Alberta Special Olympic Winter Games hosted in Calgary this past February.

So regardless of where Ben is or what he is working on, you can be sure he will be dishing out endless helpings of friendly greetings and waves to everyone who

crosses his path and continuously passing on his contagious smile!



Summer is coming. Time for a quick review of BBQ, lawn mower and gasoline safety!

BBO

- Prior to using the BBQ for the first time this season, inspect the hoses and connections for deposits of fuel and
 - grease and ensure they are cleaned up. Look at the BBQ, propane cylinders and hoses for corrosion, damage, cracks or wear.
- Make sure the BBQ is located away from the house, vehicles, railings, or dry vegetation.
- Remember your Propane BBQ must have a MSDS sheet (usually a hot pink sheet) nearby for the propane.

Lawn mower

- Look over the lawn before mowing. Look for rocks, sticks, toys, or any other objects that could become projectile if picked up by the lawnmower.
- Wear appropriate clothing: close fitting clothes and fully enclosed shoes with good grips (running shoes).
- Do not mow grass when it is wet.
- Never leave a lawn mower running unattended.

- If you have an electric mower take care to monitor the cords.
- Always monitor if a client is mowing the lawn.

Gas

- Fill gasoline containers carefully. Only fill portable gasoline containers outdoors. Place the container on the ground before filling. Fill it only about 95 percent full to leave room for expansion.
- Don't put gas into a hot machine. Let it cool first
- Store gasoline outside the home, such as in a garage or lawn shed in a tightly closed metal or plastic container approved for gas storage. Never store gasoline in glass containers or non-reusable plastic containers, such as a milk jug.
- Remember gas must also have a MSDS sheet nearby. For copies of MSDS sheets or to report any health and safety concerns please notify Pamela Marcoux @ 447-7891.





Incentive Thank-you Card Draw Winner Prize won: Cookware Sets

Janet Zhang received a thank-you card from her Coordinator for providing additional relief support hours with another client. Great work Janet!!

Other Thank-you Cards Received

Mark Anderson received a thank-you card from his Coordinator for providing home with some house repairs. Thanks Mark!

Maxine Bailey received a thank-you card from her Coordinator for her dedication and support of a client who was in the hospital. Excellent job Maxine!

Don Beringer received a thank-you card from his Cooridnator for doing such a great job at a clients' Annual Planning Meeting. Awesome work Don!!

Philana Blackburn-Morin received a thank-you card from her Coordinator for working additional hours in the home. Great teamwork Philana!

Team Coordinator Donna Mikl received a couple thank-you cards for stepping in at the last minute to work relief in another home when no staff were available to work. Very much appreciated Donna!

Tanya Hirsche received a thank-you card from her Coordinator for providing great support services to a client. Great work Tanya!

Karen Husarik received a thank-you card from her Coordinator for doing such a great job in clients' program. Well done Karen!

Shanda Lutz received a thank-you card from her Coordinator for the great job that she has been doing in her clients' program. Great job Shanda!!

Jose Rosa received a thank-you card from his Coordinator for working additional hours to cover other home staff vacations.

Your teamwork is greatly appreciated Jose!

Pearl Carnahan, Ann Sumner, and Norma Harris received thank-you cards from Payroll Dept for the great work they are doing in Central AB.



TRAINING

PET - Pre-employment Training

June 4, 5, 6,

9:00 am - 5:00 pm

June 11, 12, 13,

9:00 am - 5:00 pm

June 18, 19, 20,

9:00 am - 5:00 pm

June 25, 26, 27,

9:00 am - 5:00 pm

PBS Positive Behavior Supports

June 8, 9:00 am – 12:00 pm

June 22, 1:00pm – 4:00pm

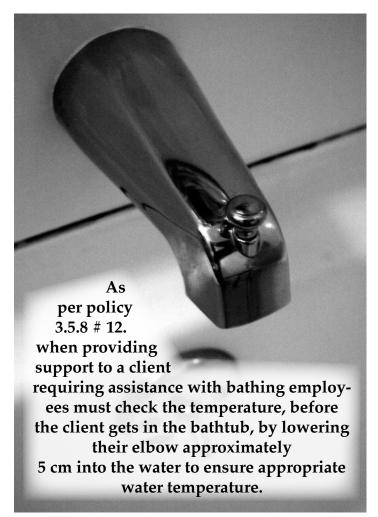
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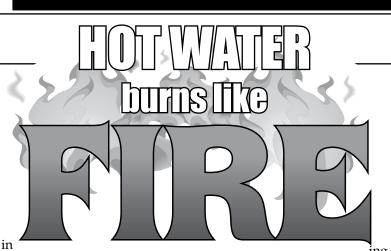
SCALDS

Scalds are one of the most common causes of burns, especially for those most vulnerable including children, elderly people, and people with physical and cognitive disabilities. Scald burns are painful, the treatment is agonizing and the effects can result in

life long scarring. Serious scalds can happen by accident very easily if staff sup-

ports are not aware and constantly vigilant in their care of the individuals supported. ICE is presently in contact with the Canadian Burn Foundation in order to set up further specialized training on this important topic. Further updates on this specialized training will be announced soon, but in the meantime here is some information that ICE employees must know to enhance the safety of the individuals we support.





What is a scald?

A scald is a burn caused by hot liquid or steam. Scalds may be caused by hot beverages or foods (coffee, tea, soup etc.), hot tap water (bathing or hand washing), or steam

(during cooking).

Who is at risk?

Three populations are particularly at risk for tap-water scalds, children under 5 years of age, elderly people and people with disabilities. These vulnerable groups are at risk as their physical condition may be underdeveloped or impaired, and because they may not comprehend the dangers of hot water. Sensory disorders may limit recognition of dangerous temperatures and physical disabilities may prevent a quick escape from the situation.

Time - Temperature relation

A time- temperature relation has been established in regard to scalds of adult skin. Many people are not aware of the short exposure periods that can result in serious burns. According to the Canadian Burn Foundation, third degree burns can occur in as little as two seconds, depending on the water temperature.

66 degrees Celsius: third degree burns in two seconds;

60 degrees Celsius: third degree burns in six seconds;

52 degrees Celsius: third degree burns in two minutes;

49 degrees Celsius: third degree burns in 10 minutes;

Children's skin can burn in about one quarter of the time it takes to burn adult skin as children's skin is thinner and more sensitive than adult skin. The elderly also have thinner skin surfaces resulting in increased risks.

Prevention

Successful prevention of scalds involves both passive and active measures and both of these measures are included in ICE Policy. (3.5.8 Standard Hazard Controls – refer to the ICE Policy Manual or the May 2007 ICE Page.)

Passive measures involve altering the injurious agent (i.e. the water temperature). Effective passive prevention limits the temperature of tap water by reducing the temperature set on the thermostat for home water heaters or installing anti-scald

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continued from page 4

devices that regulate the maximum water temperature at the faucet. Reduc-

tion of the hot-water temperature in all homes to 49 degrees Celsius is recommended and would

all homes to 49 degrees Celsius is recommended and would likely eliminate most tap-water scalds. According to ICE policy hot water tanks must be checked at least once per month to ensure they are at an acceptable (low, medium) water temperature.

Active measures involve changing the behavior of individuals.

Active measures to prevent scalds include:

- Regularly checking the setting of the home's hot water heater. (Policy 3.5.8)
- Careful, consistent support and supervision of children and those with cognitive impairments around all taps;
- Fill sinks and bathtubs with cold water first and then bring up the temperature by adding hot water;
- As per policy 3.5.8 # 12.when providing support to a client requiring assistance with bathing employees must check the temperature, before the client gets in the bathtub, by lowering their elbow approximately 5 cm into the water to ensure appropriate water temperature.
- Keep young children and individuals incognizant of hazards out of the kitchen during cooking times;
- Ensure kettle or crock-pot cords are not dangling down for impulsive hands to pull on;
- Use the back burners of the stove whenever possible;
- Turn pan handles towards the back of the stove and away
 - from where a child or an individual incognizant of hazards could reach and grab them;
- Keep hot drinks well away from children or individuals incognizant of hazards. Put a tight fitting lid on hot drinks.
- Never let a child or an individual incognizant of danger drink a hot drink through a straw;
- Educate and review with staff and clients ongoing about the dangers of hot water. Teach more independent cli-

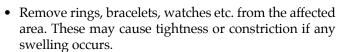


First Aid for Scalds

Staff is required to follow ICE Policy 2.7.3 Critical Incidents regarding any events causing physical injury or accidents involving clients or employees. The treatment for a scald will depend on how deep the burn is and how much of the person's body is burned. ICE staff are required to ensure injury is minimized and then to seek qualified medical assistance as soon as possible.

Immediately:

- Cool the burnt area immediately with cool water (preferably running water) for at least 20 minutes.
 For example put the burnt area under a running tap.
 Note: do not use very cold water or ice.
- Call 911 for emergency support and contact the office (if during office hours) or the Em
 - ployee Client Assistance Team.



- After cooling, remove clothing form the burnt area.
 DO NOT TRY TO PULL OFF CLOTHING THAT HAS STUCK TO THE SKIN.
- A COLD COMPRESS SUCH A TEA TOWEL SOAKED IN COLD WATER MAY BE SOOTHING OVER THE BURNT AREA. You can apply this after the initial cooling under cool water.
- Before going to hospital or to a doctor's surgery, cover the burn with cling film or a clean plastic bag and leave it on until seen by a doctor or nurse. (Do not wrap the film around the burn as the burn area may swell).

DO NOT:

- Prick any blisters;
- Apply creams, ointments, oils grease etc.
- Put on an adhesive, sticky or fluffy dressing.

Protect yourself and our clients by learning about scald prevention and consistently following ICE Policy and safety practices regarding tap-water.

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Near-Miss Incidents

A "Near Miss" is "a miss that was nearly a hit". It is an unplanned event that did not result in injury, illness or damage – but had the potential to do so. Only a fortunate break in the chain of events prevented an injury, fatality or damage.

Let's look at an example to see how this works.

The Near Miss Occurs

Joe, a capable resident at Home 234, assists regularly with household chores. Joe drops a carving knife while attempting to place it in the dishwasher. The knife falls quickly to the floor and lands blade point down on the kitchen floor, just missing the foot of the staff person assisting him by a few centimeters.

That is a Near Miss. As a responsible employer I.C.E. will want to know what happened so the agency can take steps to ensure it doesn't happen again. But will Joe or the other staff person tell anyone about the incident?

Joe and the Staff Decide Whether or Not to Report the Near Miss

Through life experience and social conditioning, people are inadvertently encouraged not to report situations that cast a "supposedly" negative light on themselves or anyone else. In many cases an unwritten code emerges among members to keep such negatives a secret. The motivation for such behavior is to protect oneself and others from negative consequences.

The Happy Ending

Let's say that staff does come forward and writes a Critical Incident Report outlining the Near Miss. The Coordinator for the program follows up and investigates the incident to assess the risk of reoccurrence. As a result of the investigation the Coordinator discovers:

- Joe always rushes to load the dishwasher as he is in a hurry to get his chores finished to move on to more preferred activities (1st Mistake); and
- Joe grabs knives by the blade instead of the handle (2nd Mistake).

Now that the Coordinator and the support team know what is going on, they are in a position to educate Joe on the dangers of always being in a rush and on the proper handling of knives. The problem is resolved and dishwasher loading becomes safer at Residence 234.

The Unhappy Ending

Joe and the staff do not report the incident. No one else living or working at Residence 234 has any reason to suspect that Joe is rushing to load the dishwasher and handling knives by the blade. And since no injuries have occurred, the improper behavior has been reinforced so it's repeated.

Two weeks later, Joe informs staff of his intention to go out with his buddies on Friday night. Staff reminds Joe that Friday is his dish chore night and that he will need to complete the dishes before he goes. Joe accepts the reminder but is in an even bigger hurry than usual to complete his chore. He distractedly grabs a steak knife by the blade and slices open his hand.

This accident could have been avoided, but it wasn't. The reason: the Coordinator and rest of the support team didn't know about Joe's dangerous loading techniques until after an injury occurred. The Near Miss, in other words, was an opportunity to fix the problem before it led to an injury. Unfortunately, that opportunity was lost since the Near Miss wasn't reported.

What Can Be Learned

What we all need to learn from this simple example is to treat each Near Miss as a fortunate gift. We can learn about our agency's latent weaknesses, without first having to experience painful consequences.

Near Miss Action / Follow Up

- Front line employees are required and encouraged to report Near Miss incidents by completing a Critical Incident Report describing the Near Miss.
- Coordinators/Managers will then complete a Near Miss Incident Investigation to explore the root causes of the Near Miss and the factors that prevented loss from occurring.
- To prevent the Near Miss from happening again the agency will follow up to provide training, feedback on performance and to continue data collection and analysis for further improvement.

Please report all Near Miss Incidents so that we don't waste such "fortunate gifts".

Health and Safety Stats Injuries April:

12- (4 lost time, 8 no lost time)

Previous year: 9 injuries (2 lost time, 7 no lost time)

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Health + Corner

HEPATITIS C

Prevention:

Treatment is important, prevention is vital. Hepatitis C is spread predominantly by blood to blood and other ways are infrequent. Logical means of prevention are:

Personal health measures:

- avoid sharing toothbrushes, razors, etc.
- avoid unprotected sex during menstrual period (Hepatitis Knowledge Network Vol.1 No. 2)
- clean all blood contamination with bleach
- cover open sores and burns with a bandage

General health measures:

- do not share needles
- avoid unprotected, promiscuous sex
- only use tattoo parlors which use disposable needles
- do not share body piercing needles

Alcohol:

Consumption of alcohol makes hepatitis C more active and progress more rapidly. Thus, all patients with chronic hepatitis C should be advised to minimize, if not eliminate, alcohol use.

Effects:

The virus can affect people in different ways:

Symptoms can take anywhere from 2 weeks to many decades to show

Most people get no symptoms at all

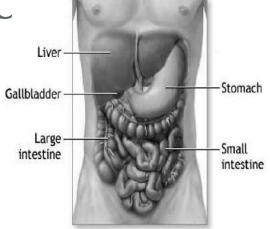
Symptoms can be flu-like

Most people develop chronic Hepatitis C infection and become 'carriers'; that is, they do not get rid of the virus from their bodies and remain infectious to others

Chronic infection can result in fatal cirrhosis of the liver or liver cancer

Symptoms, if you get them, can be hard to recognize and can take years to show. They have a tendency to come and go and are often mistaken for flu or other conditions. Often, people with Hepatitis C are left with extreme tiredness. Only around 20% of people get rid of the virus from their bodies completely. The rest become 'carriers', meaning they will carry the virus and be able to pass it on to others for the rest of their lives.

Unless successfully treated, most people with chronic Hepatitis C go on to suffer liver damage with a minority developing cirrhosis (scarring of the liver) or liver cancer which can require a liver transplant or be fatal.



Symptoms:

Less than 5% of people infected with Hepatitis C notice any symptoms when they are first infected. Many people never notice symptoms at this point and it can take several years for symptoms to appear. Many of the symptoms of Hepatitis C are similar to those for Hepatitis A and B.

Symptoms may include:

Fatigue

Depression

Anxiety

Weight loss

Loss of appetite

Alcohol and fatty food intolerance

Abdominal pain

Concentration problems, memory loss and confusion

Feeling sick

Flu-like symptoms such as fever, chills, night sweats

Sleep problems

Headaches

Jaundice – this makes the whites of your eyes go yellow. Some people's skin goes yellow and itchy. Your urine can go dark and your feces can go pale.

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CREATING EXCELLENCE TOGETHER - STANDARDS

4 Individuals are treated with dignity and respect.

Being treated with dignity and respect is something that matters to everyone. Individuals should feel they are respected and valued in every aspect of their lives. This standard is about the esteem of individuals and how others, including those who provide services and supports, treat them. In practice, it is about how individuals are treated by others (e.g. friends, relatives, staff, co-workers) in their homes, work and community life. Interactions should be typical of those between people who have a positive relationship with each other (i.e. friendly, considerate and supportive).

Indicators:

The individual indicates that he/she is treated with dignity and respect. He/she reveals he/she is listened to, included in conversations, and treated as an adult.

Example from client log book: Name asked writer to book DATS for the 15th as she's scheduled to visit her doctor. Writer called DATS but it was too late to book such a trip. Writer discussed with Name and provided her with options. Name decided to postpone the doctor's appointment so DATS could be booked. Writer supported her decision and called the doctor's office on Name's behalf to change the appointment to another date.

• The individual indicates that he/she is treated fairly if something goes wrong.

Example from client meeting minutes: Name said that when he spilt a carton of milk outside, staff did not get mad, they just said, "Accidents happen." The individual has personal and private space. He/she indicates that staff respect his/her need for privacy and confidentiality.

Example from client meeting minutes: Name volunteered that, "staff have to knock before entering my bedroom" and also stated, "I talk to my parents in my room with my door closed".

• If personal care is needed, someone the individual indicates he/she feels comfortable with provides the care.

Example from log book: Writer suggested that she help Name to do her hair for the day. Name indicated that she was not ready. When regular staff came on shift a few minutes later, Name told staff she wanted her hair braided. Writer assisted Name's roommate to tidy up after breakfast while regular staff assisted Name with her hair.

 If the individual is assisted with personal care, he/she reveals it is done in a private place and in a manner that respects his/her dignity.

Example from client log book: Writer assisted Name in his room to trim his toenails. After this was completed Name said that he was ready to take his bath. Writer assisted Name to get items ready for his bath, to pour the bath water/adjust the temperature. Name said he could do the rest himself and that he would like to soak for a while in private. Writer left Name to enjoy his soak in the tub and left the room closing the door.



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