SEPTEMBER 2019

EDMONTON/ NORTH CENTRAL

ECAT

Employee & Client Assistance Team
780-461-7236

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

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TIME SHEET HAND-IN

6

ALLERGIES

- September 16th 2019
 For all shifts worked
 between September 1st
 and September 15th.
- September 30th 2019– For all shifts worked between September 16th and September 30th

UPCOMING:

- HEALTH AND SAFETY MEET-ING- September 11th
 - 2019 at 1:30 PM
- RPAC MEETING— September 18th 2019 at 1:30PM

ICE PAGE

Making it Happen!- Supporting Social Inclusion

Colin

Colin is an energetic, approachable young man who moved to Edmonton from the Northwest Territories. Colin loves to regale his staff members with tales of his home and family, and he is always ready with a funny story or a joke to get everyone laughing. Colin's sense of humour makes him easy to talk to and helps people feel at ease. Like many young men his age, Colin is an avid gamer and really enjoys playing video games with his friends in person and on-line. Colin also enjoys socializing and playing chess and card games with staff, and people he meets through the agency. Colin is quite an athlete and is a member of the Clareview Recreation Centre which he attends three times a week to use the treadmill, swim and play basketball with staff support.

Since coming to Edmonton, Colin expressed a desire to be connected with his indigenous community and, with the help of his staff Richard, Colin found a wonderful Dene drumming group. Although he can be a bit shy, with staff support Colin attends this group weekly and really enjoys both the music and the cultural connections he has made there. In addition, Colin made his own traditional drum! Colin loves to share in and celebrate his culture through singing, storytelling and drumming.



Colin is also interested in giving back to the community. Colin is the first person to offer help to others at every given opportunity. His soft spoken and respectful nature serves him well when socializing with others in his community. To help Colin achieve his goal of helping out others in a meaningful way, support staff researched various volunteering options and Colin chose to focus on opportunities at the Canadian Native Friendship Centre where he is a member. Staff assisted with connecting Colin to the Centre volunteer program and helped him decide how to spend his time there. Colin now volunteers every week for up to five hours. As a volunteer, Colin participates in the bingo fundraisers. His job is to choose the bingo balls from the ball cage and call out the number for the players. Colin can really get into his job and doesn't need any encouragement to be heard all across the bingo hall. Colin is very proud of the work he does to help out, always taking the time to give back during his busy week.

Employee Spotlight

Richard started working with the Edmonton region as a relief staff in February 2017 after moving to Edmonton from Cameroon in July 2016. His skills and work ethic soon saw him promoted to Team Coordinator in the Tigereye program where he has been working with Colin from his beginning of service with ICE. Richard has been instrumental in supporting Colin to achieve his goals; encouraging him to volunteer and to engage in cultural activities on a weekly basis.



Colin (left) and Richard (right)

Thank you for all your hard work over the past 3 years, Richard.

ICE OFFICES WILL
BE CLOSED
MONDAY,
SEPTEMBER 2nd
FOR LABOUR DAY

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

780-461-7236

2.2.2 CLIENT CONFIDENTIALITY

*(Selected sections of ICE policy 2.2.2 are reproduced here, please refer to the Policy manual for the complete policies).

Independent Counselling Enterprises places a high priority on the right to confidentiality as it pertains to client personal information and the services they receive from the agency. Service is provided in accordance with the Health Information Act (HIA), the Freedom of Information and Protection of Privacy Act (FOIP), and the Personal Information Protection and Electronic Documents Act (PIPEDA).

All confidential information is collected, used, disclosed, and disposed of as per information and site security policies (see **Policy 3.9.1 Site Security and 3.9.2 Information Security**).

1. Any information pertaining to Independent Counselling Enterprises' clients or their families will be held in strict confidence. No information will be released to outside sources without written consent from the client and/or guardian and the funding source as appropriate.

4. Information Technology Security:

• Confidential client information will not be posted online, emailed from the office or saved on employees' personal electronic equipment. Any employee/support home operator who must submit client information to the office via personal electronic equipment must maintain client confidentiality i.e. All client identifiers must be eliminated i.e. Only the first name and first three letters of the client's last name are to appear on any documents. Once information is submitted it must be immediately deleted from the employee's/support home operator's device. To protect client rights no photographs or video clips are permitted to be taken on any employee's cell phone or any other personal electronic equipment unless authorized by their supervisor for a specific purpose. (See Policy 3.8.12 Smart Phones and Mobile Devices).

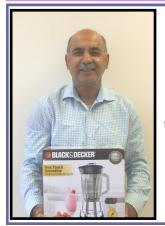
7. Transportation:

- Whenever transporting client information only transport what is required, secure the location of the documents, if possible remove client identifiers, and sign out the information as required.
- Employees may also carry their own documentation of visits if they work with clients that are not at I.C.E operated sites (i.e. contact notes, activity sheets, client verification forms, time sheets, critical and general incident forms). Employees are to keep this documentation as anonymous as possible by only including the client's first name and the first three letters of the last name. No other identifying information is to be included on any of these forms.
- All client information is kept in the trunk of the vehicle, or otherwise hidden from view, when being transported. Client confidential information will not be left in an unattended vehicle.
- All employees carry with them only the information required to perform safe, effective and quality service. Documents not required in a given day are stored in the office, or at an I.C.E. operated site, or a secure area of the support employee's home if they do not work at an I.C.E. operated site. Access is restricted to the I.C.E. employee. When the employee is off duty, all documents are stored in this secure area of their home.

October 2018

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		

ICE THANK YOU CARD INCENTIVE WINNERS



Aman U received a Thank You card from ICE president for supporting your client on his visit to Yellowknife. You coordinated a meaningful trip that was enjoyable and culturally significant for the client and his family. Aman won a Black & Decker blender.

Your kindness and care is valued!



Devi O received a Thank You card from ICE president for supporting your client through a medical situation. Your judgement, actions and reporting led to a safe outcome for the client. Devi won a Hamilton Beach slow cooker.

Your efforts for client care are appreciated!



Samrawit T received a Thank You card from a manager for participating in an EQA. Samrawit helped fix a smoke detector concern, her help was greatly appreciated. It was impressive as she was at the end of her shift. Samrawit won a Gibson Elite Dinnerware set.

Thank you for your hard work!

Referral Incentive Recipient

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!



Romodan B.

Training

PET (Pre-Employment Training)

September 3-5, 2019 September 16-18, 2019 9:00am - 5:00pm

PBS (Positive Behaviour Supports)

September 6 & 20, 2019 9:00am - 5:00pm



HURT AT WORK?

Employees and Support Home Operators are reminded of their responsibility (as per legislation) to report <u>all work-place injuries immediately to an ICE supervisor or manager</u>. 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.

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/personalbanking/branch-locator/
- ⇒ To book an appointment online: https://www.td.com/ca/en/personalbanking/products/saving-investing/

Health and Safety Meeting Minutes August 7, 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

<u>Calgary – July 11, 2019 Meeting Minutes</u> <u>June 20, 2019</u>

Staff and client were sitting in a restaurant enjoying coffee and in the presence of client's peers. When the peers left, client began kicking staff under the table and began yelling and name calling staff. Staff attempted to calm client. Client threw coffee at staff's face. Staff went to the washroom to clean up and upon returning noticed the client with a new cup of coffee. Staff let the client know that staff would be driving the client back home. Client became upset and threw the new cup of coffee in staff's face. Staff drove client home.

Incident Investigation Completed.

Recommendations: Staff to attend PBI/CPI training. Staff to follow policy 2.4.5 Transporting clients with behavioral issues. Staff to provide space to agitated client. RPAC consultation. Staff to attend day two of PET to be trained on key policies/procedures. Staff to contact the office for support.

South – July 9, 2019 Meeting Minutes:

June 20, 2019

Staff and client were driving home from day program. The staff proceeded through an intersection when the light turned green. Another vehicle went through a red light and struck the front driver's side bumper of the staff's car. Minimal damage to the staff's car and no injuries occurred as both drivers were driving slowly. Police were contacted to report the accident.

Incident Investigation Completed

Recommendations: Staff to be aware of other drivers at all times but especially when proceeding through intersections. ICE staff were not at fault in this accident.

July 2, 2019

A client was due to check back in at the psychiatric unit at a certain time. They were already late for the check-in and the client wanted to stop and have a cigarette at the hospital smoking area before going back to the unit. Staff suggested they go and check in first and then have the cigarette afterward. Client was upset and tried to grab the staff. The staff was able to move out of the way but the client did make contact with the staff's bag. The hospital staff quickly intervened and the client did not get the bag or make further contact with the staff.

Incident Investigation in progress

Recommendations: Review incident with RPAC and update RPAC tracking record. Review CPI/PBI skills with the staff. Review RPAC documents with the staff.

Additional Recommendations: Ensure to arrive early at appointments to allow client time for a break prior to the appointment. If client is already aware that they have arrived late and chooses to smoke that is their right and the psychiatric unit can be notified that client is running a little late.

Northwest – July 9, 2019 - Meeting Minutes: May 28, 2019

Staff was driving client to the store during a community access outing. As staff approached traffic lights, they turned yellow and staff proceeded through. A driver coming from the other direction also proceeded through and turned left in front of staff causing staff to hit the other driver on the passenger side door. No injuries.

Incident Investigation to be completed.

Recommendations: Safe driving policies were discussed with staff. Staff encouraged to choose less busy roads especially during rush hour traffic.

Additional Recommendations: Consider alternate transportation arrangements (E.g. public transportation, walking to the store).

June 3, 2019

Staff was driving client to the program on a lightly travelled road returning from an outing. Staff slowed as she approached the intersection and the vehicle following her struck her vehicle's rear end. No injuries.

Incident Investigation to be completed.

Recommendations: Safe driving policies were discussed with staff. Staff encouraged to choose most direct path to and from destinations.

Additional Recommendations: Consider alternate transportation arrangements (E.g. public transportation, walking to the store).

June 25, 2019

Staff was putting laundry away and entered the washroom to put away towels. Staff slipped on a wet patch on the floor and struck her knee. It appears that the client who exited the washroom just prior did not use the toilet effectively and the bathroom floor should have been cleaned prior to staff putting away laundry as this is a known issue.

Incident Investigation to be completed.

Recommendations: Staff reminded to check washroom for cleanliness upon client exit. And to ensure bathroom floor is kept dry and clear of obstructions.

Additional Recommendations: Consider having a hard surface sweeping and mopping tool (E.g. Swiffer mop with disposable pads) ready in bathroom in case floor cleaning is needed.

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

Calgary – July 11, 2019 Meeting Minutes:

No near miss incidents in June.

South – July 9, 2019 Meeting Minutes:

No near miss incidents in June.

Northwest - July 9, 2019 Meeting Minutes:

No near miss incidents in June.

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

July 4, 2019

On the way to boxing class with staff, client left staff and went to the liquor store and purchased beer, which the client then consumed at home and became intoxicated, in spite of staff's attempted redirection. While staff was completing paperwork, client came towards staff aggressively, pushed staff by the arms and grabbed the papers from her hand and spit on the papers. The client was verbally aggressive, yelling racial slurs at staff and flipped the couch upside down. Staff contacted police by pushing the lifeline panic button in the home. Follow up included: follow up with psychiatrist; encourage client to seek addictions counselling; review client's positive approaches, lifeline procedures, and crisis plan with all staff, as well as ensuring that when client becomes aggressive, for staff to remove themselves from the situation and maintain a safe distance.

Incident Investigation incomplete.

Recommendations: If possible, don't complete paperwork in presence of client. Further RPAC involvement regarding harm reduction strategies for client consuming alcohol.

July 10, 2019

Client joined a neighbour to have a cigarette. Staff was watching them when they noticed staff and client approaching him. The neighbour then came inside the house and started assaulting staffing and choking him. The neighbour seemed intoxicated. Staff was able to escape the choke and contact police. Neighbour again approached staff and started choking him. Police came and arrested the neighbour, who was still yelling obscenities at the staff. Follow up: Client is to be accompanied while having a cigarette, and will be directed to

the front of the program to smoke; doors at the program to be locked at all times; talk to client about safety in the neighbourhood and appropriate interactions with strangers.

Incident Investigation incomplete.

Recommendations: Health and Safety Committee to ensure that the 2019 HACD covers this hazard. Edmonton Health and Safety Committee reviewed and confirmed that hazard is covered in General Section of the HACD – pages 16-17 "Accessing Community" as well as controls under Appendix A #6 - Strategies for Community Safety.

July 13, 2019

While on the bus, the client wanted to grab the staff's fingers very hard. Staff tried to redirect, but client persisted. When staff removed their hand, the client got angry and attempted to hit the staff in the chest. Staff avoided the punch and tried to give the client some room, however the client moved towards staff and bit staff on the shoulder. Staff contacted ECAT, who directed staff to go back to the client's home. Follow up includes: Staff will no longer be working with the client. Staff to review client's PRP.

Incident Investigation Incomplete

Recommendations: Further RPAC involvement as required. July 14, 2019

The client was aggravated during the day and hadn't eaten lunch yet. He calmed down and was napping when staff came in to change his adult undergarment. As staff was changing the client, he rolled over and his hand hit staff in the eye. Once the personal care was finished, the client went to eat his lunch. Follow up included reviewing with staff: PBI and to avoiding personal care when the client is agitated; following the client's Positive Approaches and being aware of stressors identified in them; and reviewing the client's risk assessment.

Incident Investigation Incomplete

Recommendations: Announce presence of staff and ensure that client is calm and awake prior to completing any personal care.

July 24, 2019

Client turned off A/C, but staff advised him that if it was too low, the apartment would get too warm. The client became physically aggressive and told staff to get off the couch or he will roll it over. The client then began pulling on the couch. When staff tried to move away, the client hit staff twice on the chest. Staff pressed the lifeline panic button. When staff advised the client that the police had been contacted, the client became apologetic. Police responded and spoke to the client that if continued to be physically aggressive, they would have to arrest him. The client then calmed down.

Incident Investigation Incomplete

Recommendations: The apartment should be kept at the comfort level of the client as opposed to the staff (as long as it is a safe temperature for staff) and staff should avoid, if possible, getting into a power struggle with the client.

3.3 Evaluation of near miss investigations.

July 16, 2019

Client became agitated and complained about the cleanliness of the house and then became physically aggressive and grabbed the staff's leg, dragged him and took off the staff's shoe. Follow up included: Staff review client's positive approaches; maintain safe distance while client is agitated; and remind client to use dialogue and not physical aggression to avoid future conflict.

Incident Investigation incomplete

Recommendations: Review PBI techniques and ensure that staff chore lists are being completed.

July 20, 2019

After escalating in the community earlier, the client came out of her room and smashed a glass by throwing it on the floor. She ensured that she broke it into little pieces. She stated that she doesn't want a new roommate. Follow up included: redirection; psychotropic PRN given; and possibly move up psychiatric visit.

Incident Investigation incomplete

Recommendations: Change glassware plates and cups to plastic ware

- 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 no concerns reported for July
- 3.4 B) Inspections completed Include name of committee member(s) completing inspection, inspection type (E.g. EQA, RI, Office Inspection), # of inspections and # of workers involved for each inspection type July Monthly Safety Inspection Checklists completed 4 Emmanuella (1), Vesna (1), and Pauline (1) and Dusi (1) 4 workers participated; Random Inspections completed 5 Adrienne F. (3), Charmaine (1) 6 workers participated, including Amanda for Charmaine's inspection. EQAs Amanda participated in 2 EQAs with Quality Assurance (Macha) completing the inspection.
- 3.5 COR Audit Review An update was provided regarding upcoming COR Audits. Holly P has taken internal COR auditor training and will be completing her qualifying audit August 19th 23rd. There are a number of Edmonton residential staff who will be participating in interviews. The internal COR Audit for ICE is set for October 2019.
- 3.6 Hazard Assessment and Control document (H.A.C.D.) Review section (and provide recommendation(s) for changes if needed): Pages 39-43 "Use of Dishwasher and Bed Making" there were no recommended changes.

Calgary – July 11, 2019 Meeting Minutes:

No section reviewed in June.

South – July 9, 2019 Meeting Minutes:

Reviewed pages 82 - 87, For client support for seizures the committee suggests changing frequency of exposure to at least a 2 for biological, physical and psychological hazards. The committee felt that many clients have more frequent seizure activity.

Northwest – July 9, 2019 Meeting Minutes;

Reviewed office related work pages 2 - 16. No recommendations

3.7 Policy review – **3.5.3 Health and Safety Committee**

Other Business

- 3.1 Health and Safety Training Updates Promoting Safety set for August 14, 2019 Desi and Innocent need to take it. Greg stated he would update their manager of the planned training.
- 3.2 Ideas for upcoming ICE Page Articles preventing slips, trips and falls in winter
- 3.3 Hazard Assessment and Control Document The 2019 document is complete. Greg has sent out a division of responsibilities for Health and Safety Committees to review the HACD. Residences and Offices are to complete updates to the HACD by September 15, 2019.
- 3.4 Emergency Drills Residential Programs are to complete a tornado drill by the end of august.
- 3.5 Vacancy on H & S Committee There is a worker vacancy on the Health and Safety Committee. Any worker interested in applying to join the Health and Safety Committee should contact Greg Lane at 780 -453-9656
- 3.6 Health and Safety Committee identification cards Greg handed out Health and Safety Committee identification cards to all Health and Safety Committee members present.

NEXT MEETING DATE: September 11, 2019 at 1:30 p.m.



Allergies occur when your immune system reacts to a foreign substance — such as pollen, bee venom or pet dander — or a food that doesn't cause a reaction in most people.

Your immune system produces substances known as antibodies. When you have allergies, your immune system makes antibodies that identify a particular allergen as harmful, even though it isn't. When you come into contact with the allergen, your immune system's reaction can inflame your skin, sinuses, airways or digestive system. The severity of allergies varies from person to person and can range from minor irritation to anaphylaxis — a potentially life-threatening emergency. While most allergies can't be cured, treatments can help relieve your allergy symptoms.

Symptoms

Allergy symptoms, which depend on the substance involved, can affect your airways, sinuses and nasal passages, skin, and digestive system. Allergic reactions can range from mild to severe. In some severe cases, allergies can trigger a life-threatening reaction known as anaphylaxis.

Hay fever, also called allergic rhinitis, can cause: sneezing; itching of the nose, eyes or roof of the mouth; runny, stuffy nose; and/or watery, red or swollen eyes (conjunctivitis).

A food allergy can cause: tingling in the mouth; swelling of the lips, tongue, face or throat; hives and anaphylaxis.

An insect sting allergy can cause: a large area of swelling (edema) at the sting site; itching or hives all over the body; cough, chest tightness, wheezing or shortness of breath and anaphylaxis.

Atopic dermatitis, an aller gic skin condition also called eczema, can cause skin to: itch, redden, flake or peel

Anaphylaxis

Some types of allergies, including allergies to foods and insect stings, can trigger a severe reaction known as anaphylaxis. A life-threatening medical emergency, anaphylaxis can cause someone to go into shock. Signs and symptoms of anaphylaxis include: loss of consciousness, a drop-in blood pressure; severe shortness of breath; skin rash; light headedness, a rapid, weak pulse; nausea and vomiting

When to see a doctor

You might see a doctor if you/your client has symptoms you think are caused by an allergy. If you or your client have symptoms after starting a new medication, call the doctor who prescribed it right away.

For a severe allergic reaction (anaphylaxis), call 911 or your local emergency number or seek emergency medical help. If you/your client have an epinephrine auto-injector, give yourself or your client a shot right away prior to calling 911.

Even if your symptoms improve after an epinephrine injection, you should go to the emergency department to make sure symptoms don't return when the effects of the injection wear off. If you/your client has had a severe allergy attack or any signs and symptoms of anaphylaxis in the past, make an appointment for yourself or your client to see a doctor. Evaluation, diagnosis and long-term management of anaphylaxis are complicated, so you'll probably need to see a doctor who specializes in allergies.

Causes

An allergy starts when your immune system mistakes a normally harmless substance for a dangerous invader. The immune system then produces antibodies that remain on the alert for that particular allergen. When you're exposed to the allergen again, these antibodies can release a number of immune system chemicals, such as histamine, that cause allergy symptoms. Common allergy triggers include:

- Airborne allergens, such as pollen, animal dander, dust mites, and mold
- Certain foods, particularly peanuts, tree nuts, wheat, soy, fish, shellfish, eggs and milk
- Insect stings, such as from a bee or wasp
- Medications, particularly penicillin or penicillin-based antibiotics
- Latex or other substances you touch, which can cause aller gic skin reactions

Complications:

Having an allergy increases your risk of certain other medical problems, including:

- Anaphylaxis. If you have severe allergies, you're at increased risk of this serious allergy-induced reaction. Foods, medications and insect stings are the most common triggers of anaphylaxis.
- Asthma. If you have an allergy, you're more likely to have asthma an immune system reaction that affects the airways and breathing. In many cases, asthma is triggered by exposure to an allergen in the environment (allergy-induced asthma).
- Sinusitis and infections of the ears or lungs. Your risk of getting these conditions is higher if you have hay fever or asthma.

Prevention

Preventing allergic reactions depends on the type of allergy you or your client may have. General measures include the following:

- Avoid known triggers. Even if you're treating your allergy symptoms, try to avoid triggers. If, for instance, you're allergic to pollen, stay inside with windows and doors closed when pollen is high. If you're allergic to dust mites, dust, vacuum and wash bedding often.
- Staff should ensure that they are aware of any client and staff
 allergies in the program. If there are staff or client allergies, this
 should be reflected in information provided to all staff and should be
 contained in the Site-Specific Hazard Assessment and Control Document. Post signage in the home if there are severe client and/or staff
 allergies.
- Staff should take precautions to avoid causing triggers to other staff or clients. For example, staff should avoid wearing perfume or aftershave, especially when near people who are sensitive to fragrances. Wear latex free gloves if you have an allergy to latex.
- Keep documentation. When trying to identify what causes or worsens your allergic symptoms, track your/your client's activities and what you/your client eat, when symptoms occur and what seems to help. This may help identify triggers
- Wear a medical alert bracelet. If you/your client have had a severe allergic reaction, a medical alert bracelet (or necklace) lets others know that you/your client have a serious allergy in case there is a reaction and you/your client are unable to communicate.

STAFF APPRECIATION BBQ

On Thursday, August 15, 2019 ICE held their annual field staff appreciation BBQ! Staff and clients came to the office to enjoy the nice weather, some food and good company. ICE wanted to show their appreciation for their field staff. We thank you for all that you do!







There was a draw for door prizes and the winners were:

- ⇒ Jenneh K won a sport set
- ⇒ Veronica Q won a cooler
- ⇒ Jody L won a water jug











