

ICE PAGE

GRANDE PRAIRIE

2012

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TIME SHEET HAND-IN:

June 15th, 2012

For all shifts worked between June 1st and June 15th, 2012.

July 3rd, 2012

For all shifts worked between June 16th, and June 30th.

Health and Safety Meeting

June 14th, 2012 @ 3:00 pm

RPAC Meeting

June 26th, @ 1:30 pm

After Hours Supervisor

(780) 512-3129

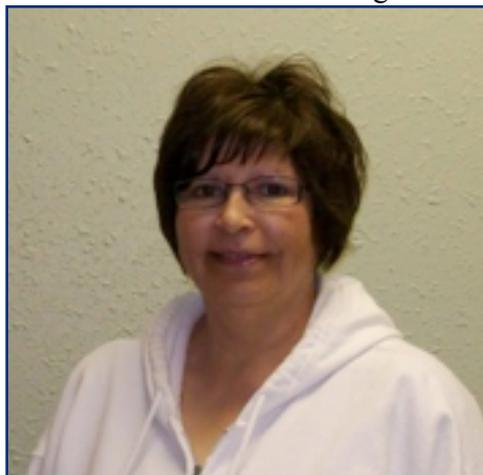


EMPLOYEE SPOTLIGHT

Bonny Beaulieu

Bonny started working for Independent Counselling Enterprises in Grande Prairie in December of 2011. Bonny grew up in Northern Alberta on a Metis settlement called Paddle Prairie. She moved to Grande Prairie in the early 80's and has lived here ever since. Married at a young age, Bonny will celebrate her 39th wedding anniversary this August with her husband Hubert. Together Bonnie and her husband raised five children, four girls all of whom became nurses and one son who now works in the oil patch. Now a proud grandma of five grandchildren, Bonny enjoys going for walks, having sleepovers, swimming, eating ice cream and having all kinds of fun with them!!

Bonny also shares interests with the individuals she supports. A personal goal that Bonny has set is to stay in shape this year by going to the multiplex for exercise and getting involved in a weight lifting class. This is an interest that she shares with one of her clients who has similar goals



Bonny has worked as team leader in an ICE residential program since she began with ICE. She has created a positive atmosphere in the home and

has developed great rapport with the clients and staff. One of the things she finds most rewarding about working in this field is supporting her clients to realize their goals. As Bonny says, "Then you get to see their big smiles!" She is really enjoying her job since she has built a strong level of trust with her clients and they have become comfortable sharing with her. Bonny describes the gentlemen she supports as, "Awesome!"

Bonny is also a strong supporter of the staff she leads at the home and often mentions how much she appreciates their work. She has also recently become a member of our ICE Health and Safety Committee. Bonny's experience and caring presence carries through in her work. Clients, support staff and office staff alike appreciate her efforts and positive outlook. Thank-you, Bonny, for being such a wonderful role model and team player!!

Client Success Story: Dan

Dan is a very outgoing and engaging young man. He has accomplished a lot in the four years he has been associated with ICE.

Dan was born and raised in Coaldale, Alberta and lived there until he turned 18. He then moved into Lethbridge. Dan currently lives in an ICE supported home where he has his own apartment. Dan likes the family he lives with and enjoys the time they spend together.

For the past eight months Dan has been working as a Shipper/Receiver for Wholesale Sports in Lethbridge. Dan is very proud of his job and has really enjoyed getting to know the products at his workplace. He has enjoyed the specialized training he has received in order to work with the special sporting equipment sold in the store.

Dan has a passion for life and enjoys being outdoors. He can be found most evenings out fishing at the many rivers and parks around Lethbridge. He also loves to take pictures and is an avid photographer. Many of his photos have been



framed and placed on display in the Lethbridge ICE office for all to enjoy. Dan also loves to bike ride, visits to the gun range, driving remote controlled cars, and travel. A highlight of the last year was a trip with his dad to Mexico. Dan's newest passion is restoring a fishing boat for himself. He is taking it apart and rebuilding it piece by piece.

Dan is thankful for the supports he receives from ICE. He likes being able to come to the office and talk when he needs to, having supports to advocate and stand with him when he feels things aren't right, and he appreciates help with managing his finances. Dan also appreciated ICE's efforts to find him his supported home.

TRAINING

PET

Two day workshop
As needed - 9am-5pm

PBI

Proactive Behavior Intervention
As needed - 9am-4pm

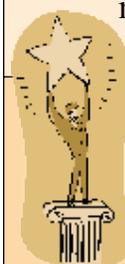
CPI

Crisis Prevention and Non-violent intervention
June 11th, 12th, 2012 - 9am-5pm



THANK YOU!

Therese Neba was our Thank- You Incentive prize winner for the month of May 2012. She won an Ice Cream Station (with bowls and spoons to serve sundaes for five) for assisting to complete a last minute shift at a residence. It was very much appreciated!



ICE Referral Incentive Winner!

Lisha Colley-Knipple

Spring Fling!



Joan (SHO), Bonny (TL) and Mike G



Lorne and Lisha



Stroke

What is a Stroke?

If a blood clot blocks a narrowed artery in the brain and the part of the brain beyond the clot doesn't get the oxygen it needs, the brain tissue dies. This is called a stroke or Cerebrovascular accident (CVA). A severe stroke can cause death. A less severe stroke may cause brain damage, which impairs certain body functions, depending on the part of the brain affected. A stroke can also be caused by a ruptured artery.

What is Transient Ischemic Attack (TIA)?

TIA is a condition that is similar to a stroke. It is caused by a lack of oxygen to part of the brain and lasts from a few minutes to several hours and leaves no permanent brain damage. TIA is a warning sign that a stroke may follow so anyone who has a TIA should see a doctor right away. A TIA that lasts longer than 12 hours is usually considered a stroke.

What are the signs and Symptoms of a Stroke/ TIA?

Remember the acronym FAST as the way to check for signs of a stroke:

Facial droop – one side of the face doesn't move as well as the other side.

Arm drift – have the person hold both arms out. One arm may not move or may drift down compared to the other.

Speech – the person slurs words, uses the incorrect words or is not able to speak.

Time – get immediate medical help, the earlier a stroke is treated the better the outcome.

Other signs and symptoms include: weakness (sudden loss of strength or sudden numbness in the face, arm or

leg, even if temporary); trouble speaking (sudden difficulty speaking or understanding or sudden confusion, even if temporary), vision problems (sudden trouble with vision), headache (sudden severe and unusual headache), dizziness (sudden loss of balance, especially with any of the above signs).

What to do?

If a person is showing any signs and symptoms of a stroke, an ambulance needs to be called immediately. While at the hospital, they can be given a medication to dissolve the blood clot, but this would have to be within very few hours after the onset of symptoms. While waiting for the ambulance, provide first aid and CPR as required if you are certified.

S - SPEECH, or any problems with language
T - TINGLING, or any numbness in the body
R - REMEMBER, or any problems with memory
O - OFF BALANCE, problems with coordination
K - KILLER HEADACHE
E - EYES, or any problems with

**Stroke is a medical emergency.
Call 911 if you observe signs and symptoms of a stroke.**



POLICY REVIEW

3.4.16 LEAVE OF ABSENCE

Leave of absences are granted on an individual basis in consultation with the appropriate manager and with final approval from the President. The employee must complete all of the appropriate leave of absence documentation. Requests are reviewed based on individual circumstances such as, the purpose of the leave, job performance, length of employment with the agency, the frequency of such requests and the impact of the employee's absence on the agency's operation. All leaves granted would be without pay. A leave of absence would be considered time off without pay for 5 consecutive working shifts (1-24 hour shift counts as 1 shift) or more.

Leave of Absence for Personal Reasons

The length of a leave of absence will be as follows:

- During the 3 month probationary period no leaves will be granted.
- Employees who have worked for a minimum of 3 months but less than 1 year will be entitled to 1 week
- Employees who have worked longer than 1 year but less than 2 years will be entitled to 4 weeks.
- Employees who have worked 2 years or more will be entitled to 3 months.

For those employees on personal leave I.C.E. will only be able to provide the opportunity for employment upon return. Return to the same position is not a guarantee.

Leave of Absence for Medical Reasons

For employees requesting a medical leave, the employee must provide the agency with supporting medical documentation. Medical follow up and reports may be required during the leave of absence as well.

The length of a leave of absence will be as follows:

- During the 3 month probationary period no leaves will be granted.
- Employees who have worked for a minimum of 3 months, but less than 1 year will be entitled to a maximum of 3 months.
- Employees who have worked longer than 1 year will be entitled to a maximum of 6 months.

For employees in receipt of benefits (Wawanesa, Blue Cross, Futurebuilders), refer to **Policy 3.4.5 Payroll Processing, Policy 3.4.18 ICE Savings/Pension Plan, Policy 3.4.19 Benefits – Blue Cross, Policy 3.4.20 Benefits – Wawanesa.**

If the leave of absence is not granted the employee has the option to re-apply with Independent Counselling Enterprises when they are able to do so.

Updated July, 2011

ICE offices will be closed

**Monday,
July 2, 2012
for Canada Day**



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

Employee Referral Incentive Program

Here's how the Employee Referral Incentive works:
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!



**ICE has a TD Group
RSP plan!**



Refer to Policy 3.4.18 ICE
Savings/Pension Plan.

**If you are eligible, ICE will match your
contributions!**

To sign up, please contact Linna Roem at
780-453-9664.

HEALTH AND SAFETY MINUTES

Grande Prairie - Meeting Minutes May 10, 2012

3.1 Review of Regional Health and Safety Meeting Minutes

Edmonton Region Meeting Minutes date:

April 4th, 2012

Feb 22, 2012

After a shift, employee called in to report a sore back. When contacted the employee said she may have pulled a muscle when she was carrying a bucket of water (for floor mopping) down the stairs

Injury Investigation completed.

Recommendations:

Buckets to be made available for use on each level of the residence.

Put water in the bucket on the level of the residence on which it will be used to avoid carrying hazards on stairs.

Do not fill the cleaning bucket too full (avoiding weight and spill hazards). Some mop buckets are also available with wheels.

Follow safe back – care procedures for lifting and carrying. Have staff repeat PET Lab day on back care.

Staff to know and respect personal limitations/ capacity regarding task completion.

March 13, 2012

Employee was looking for a screwdriver (to complete a household repair task) in the sharps box in an ICE residential program. He reached into the sharps box and poked one of his fingers on another sharp object in the box. The employee's finger was punctured and bled. First aid provided on site.

Injury Investigation completed.

Recommendations:

Sharps box to be sorted and organized.

Provide cases / sheaths inside the larger container for sharps that present poking hazards. Consider separate secure storage of household tools.

Review policy 3.5.8 with team and employee.

Staff to approach/access "Sharps container" with appropriate attention and care.

Consider a sign / label on the outside sharps container reminding staff to "Take care re sharps hazards".

Near Miss Investigations

March 9, 2012

Employee went outside to clear ice from a sidewalk at a residence. Staff slipped on ice where eaves trough spout had been leaking water across the sidewalk and fell down. Employee was not injured.

Near Miss Investigation to be completed.

Recommendations:

Sand and salt use before chipping ice.

Ensure proper footwear for weather and task.

Address root causes creating hazard (eaves trough leaking water onto sidewalk).

Reposition drainage away from walkway.

Avoid rushing.

March 18, 2012- Client Behavior

A non-verbal client became agitated and was hitting outwards towards SHO. The SHO maintained safe distance from the client and was not injured. It was suspected that client's agitation was a result of client being in pain that they could not verbalize.

Medical treatment was sought for the client Near Miss Investigation to be completed.

Recommendations:

RPAC has reviewed the incident and has made recommendations

March 22, 2012- Slip and fall

Staff slipped and fell while in the community with client. Staff was wearing appropriate footwear but slipped on ice that was not visible due to snow coverage. Building supervisor was notified were incident happened was notified

Near Miss Investigation to be completed.

Recommendations:

Staff to be more observant to the condition of walk ways

April 13, 2012- Client Behavior

Staff and client arrived at ICE office, there was a large black dog belonging to the downstairs tenant who approached the staff's car, upon seeing the dog client reacted in fear, panicking and flailing arms and grabbing at staff but not enough to cause injury.

Near Miss Investigation to be completed.

Recommendations:

Staff to be aware that they should avoid situations where there may be a large dog present, if there is a dog present they should leave the area and return at another time.

South Region

Meeting Minutes: No minutes available

3.2 Evaluation of current Injury Investigations

No injury investigations to review

3.3 Evaluation of Near Miss Investigations

Near Miss Investigations: None

3.4 Review of 2011 COR Audit Report

Reviewed section 2 (Pages 25 - 29) Discussed what the COR audit is and how often an audit is completed.

3.5 Review of Master Hazard assessment and Control Document

Edmonton –

Hazard Assessment review was tabled for this meeting to permit time for group H&S Policy review.

Calgary -

Reviewed: Tabled due to time constraints due to policy review

South - Reviewed pages 32 & 33

Blood & Body Fluid Exposure/Clean up Client Lift Transfer (mechanical & Manual Client Repositioning

Addition to Controls: Use of SEDS

Grande Prairie

Tabled for Health and Safety Policy review

3.6 Policy Review

Reviewed policies

3.5.3 Communication/Staff support

3.5.5 Employee Work Related Injury, Illness, and Near Misses

3.5.8 Eliminating/Mitigating/Controlling Work Site hazards

3.5.9 Hazard Assessment and Control Document

3.9.1 Site Security

3.9.2. Information Security

Committee members were requested to review the H&S policies and to bring any recommendations / concerns/ suggestions for policy additions or revision forward to Corrina or Joanna as soon as possible.

Recommendations:

Recommendations will be submitted for current policy review
Membership binder updating/provision
2012 Policy Review
Policy feedback follow up

4.0 Other Business

4.1 Training

PBI is taking place on May 17th/12, and CPI on May 22nd, and 23rd and PET on the 24th.

4.2

Due to committee membership changes – some Health and Safety Members will require training in Incident Investigation and Hazard Assessment and Control.

Kaitlin provided inspections and incident investigation training on April 18/12.

Corinne to provide a course in Hazard Assessment and Control in May 2012
Training completed ASAP

Next Meeting: June 14th, 2012 @ 3pm

