

# Carmichael Connection

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## What Does Being Trauma Informed Mean to our Carmichael Enterprises Residential Programs?

**Submitted from:** Cathy Bontogon, Deputy Executive Director

Trauma-informed approaches are similar to harm-reduction-oriented approaches, in that they both focus on safety and engagement.

### Principles of Trauma Awareness

**1. TRAUMA AWARENESS** - A trauma-informed approach begins with building awareness among staff and clients of the commonness of trauma experiences; how the impact of trauma can be central to one's development; the wide range of adaptations people make to cope and survive after trauma; and the relationship of trauma with substance use, physical health, and mental health concerns. This knowledge is the foundation of an organizational culture of trauma-informed care.

**2. EMPHASIS ON SAFETY AND TRUSTWORTHINESS** - Physical, emotional and cultural safety for clients is key to trauma-informed practice because trauma survivors often feel unsafe, are likely to have experienced abuse of power in important relationships and may currently be in unsafe relationships or living situations. Safety and trustworthiness are established through such practices as welcoming intake procedures; adapting the physical space to be less threatening; providing clear

information about the programming; ensuring informed consent; creating crisis plans; demonstrating predictable expectations; and scheduling appointments consistently. The safety and needs of caregivers must also be considered within a trauma informed service approach. Safety measures and changes in treatment culture are key aspects of implementation of a trauma-informed approach. Trauma informed services demonstrate awareness of vicarious trauma and staff burnout. Whether or not providers have experienced trauma themselves, they may be triggered by client responses and behaviours. Key elements of trauma informed services include staff education, clinical supervision, and policies and activities that support staff self-care.

**3. OPPORTUNITY FOR CHOICE, COLLABORATION, AND CONNECTION** - Trauma-informed services create safe environments that foster a sense of efficacy, self-determination, dignity, and personal control for those receiving care. Caregivers try to communicate openly, equalize power imbalances in relationships, allow the

expression of feelings without fear of judgment, provide choices as to treatment preferences, and work collaboratively with clients. In addition, having the opportunity to establish safe connections with treatment providers, families, peers, and the wider community is reparative for those with early/ongoing experiences of trauma. This experience of choice, collaboration, and connection is often extended to inviting individual involvement in evaluating the treatment services, and forming service user advisory councils that provide advice on service design as well as service users' rights and grievances.

**4. STRENGTHS BASED SKILL BUILDING** - Clients in trauma-informed services are assisted to identify their strengths and to (further) develop resiliency and coping skills. Caregivers emphasize teaching and modeling skills for recognizing triggers, calming, centering, and staying present. This has been described as having an organizational culture characterized by 'emotional intelligence' and 'social learning'. Again, a parallel attention must be paid to caregiver competencies and learning these skills and values.

## Staff Spotlights

**New Staff**

Prince  
Ramandeep  
Milan  
Uchechi  
Wisama

**New Staff**

Jenna  
Chinonso  
Tino  
Amod  
Kanwal



## Manulife ~ Delisting

Excerpts from: <https://www.manulife.ca/personal.html>



### The scoop on *delisting*

#### What does it mean if my service provider is delisted?

It means, they're not covered under your benefits plan and we won't pay claims from them.

We delist service providers if, after reviewing them, we have concerns about their business practices.\*

\* These business practices may include submitting improper claims, potential benefits abuse, or disciplinary action taken by a regulatory body.

#### How do I find out if my service provider is delisted?

Sign into your plan member secure site at [manulife.ca](https://www.manulife.ca). Then go to the **Wellness centre** section near the bottom of the page and choose **View list of providers not covered**.

Check with your service provider. We tell them if we won't accept claims from them.

#### What can I do to help?

**View the list of service providers not, covered** every once in a while.

It's important that only eligible claims are processed and paid. It helps us to protect you, your employer and your benefits plan.

Tell us if your experience with a service provider concerns you – use the new **Share & Protect e-form**.

<https://www.manulife.ca/personal/support/group-plans/group-benefits/protect-your-benefits/share-and-protect-eform.html#Mobile>

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INS6791 Group Benefits: Fraud Story Flyer E 01/20 AODA



**Intersection of Sexual Identity & Mental Health ~ Part #1 of 3**

**Excerpts from:** Manulife & Homewood Health Article submitted by Carmela Taylor

If someone were to ask you who you are, how would you answer that question? We would likely share the things that we instinctually feel form our identity and are essential for us to express. However, we would also likely assess the environment and situation we find ourselves in first to determine the degree of information to share. We gauge other people’s potential interests, determine if we are meeting them for the first time, whether alone or in a group, and collect details about the setting, their appearance, tone of voice, and facial expressions that give us clues. What we say is selective and doesn’t necessarily share every profound aspect of our life experience that has contributed to forming our identities to date at that moment, but rather those that are most important to convey a picture for them to receive and develop quickly to understand.

We can consider all the people, situations, and circumstances that help us determine our identities are like the spokes of a wheel. Ultimately, they converge and intersect at a central point of strength that holds them all in place, the hub. That is our essence, our sense of self: our identity. Different points of intersection affect the experiences of marginalized groups within our society.

**What is intersectionality?**

Intersectionality is a way to look at all the different aspects of someone’s life that have influenced them and their experiences. For example, considering where they grew up, where they live now, what their childhood was like, how they were affected by their families and culture, and whether they have had economic advantages that have increased their social standing would all factor into creating both inequalities and power. However, some influences can be even more critical in developing someone’s social standing where “divisions such as gender, ethnicity, class and life course positioning” are likely to shape more people’s lives than others. Researchers have discovered that the social divisions experienced have a more last role in influencing a person’s life. Intersectionality examines how “multiple” forms of discrimination and oppression, can be present and active at the same time in a person’s life.

**The importance of taking an intersectional approach to sexual identity and mental health**

Studies are starting to explore how important it is to view intersectional aspects of our identities through a multi-factor lens. Evidence shows how various health conditions are treated socially and by healthcare providers and systems. Overall, there needs to be a focus on reducing the “burden of stigma.”

The intersection of sexual identity and mental health tremendously influences someone’s sense of belonging and identity. But it’s also important to understand that looking at points of intersection should not be limited to comparing only two tangents because it’s the “convergence of multiple systems of oppression that together underlie the ways the ways that individuals interact with the world around them and how they are treated by others.” For those in the LGBTQ2S+ community, where there is a continuum of many sexual identities and genders, in addition to “diverse racial and ethnic groups, differing abilities, and a range of socioeconomic backgrounds” it is vital to acknowledge that divisions and negative connotations present in society make it exceptionally difficult for members to navigate their lives confidently and safely, especially when it comes to obtaining high quality, purposeful healthcare. Negative health outcomes are compounded for LGBTQ2S+ individuals experiencing other forms of discrimination, including racism, colonialism, and ableism. Practitioners may be unaware of how unconsciously managing a case, instead of approaching a situation from a person-centric point of view, can create trauma for someone seeking medical care.



**Mental health Resources for LGBTQ2S+ communities**

We’ve compiled some resources that can help. Feel free to explore them while focusing on living well and feeling better.

[itgetsbettercanada.org](http://itgetsbettercanada.org)

The Canadian Centre for Gender + Sexual Diversity

[ccgsd-ccdgs.org](http://ccgsd-ccdgs.org)

## Carmichael Enterprises Residential Programs

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*“Carmichael Enterprises is committed to meeting the needs of individuals with disabilities”*



We're on the Web!

[www.carmichaelenterprises.ca](http://www.carmichaelenterprises.ca)

## Foody Safety

Submitted from: Scott Hartnett ~ Health & Safety Coordinator

# Food Safety

Food safety is important in any setting but it is especially important in a group home where our residents may have weakened immune systems due to age, illness, or medication. By following these tips, you can help prevent the spread of food borne illness and keep everyone healthy.

### Washing Hands

Hands should be washed with soap and water for at least 20 seconds before, during, and after food preparation and handling. This helps to remove bacteria and other harmful microorganisms that can cause food-borne illness.



### Sanitizing Utensils and Equipment

Utensils and equipment should be washed and sanitized after each use. This helps to prevent the spread of bacteria from one food to another.



### Cooking Food

Thaw food in the fridge or the microwave, not on the counter. Food must be cooked to the proper internal temperature to kill harmful bacteria. The safe internal temperature for cooked meat and poultry is 165 degrees Fahrenheit. The safe internal temperature for cooked fish is 145 degrees Fahrenheit.



### Cooling Food

Food should be cooled quickly and properly to prevent the growth of bacteria. Food can be cooled quickly by placing it in shallow containers and dividing it into smaller portions. The food should then be placed in the refrigerator or freezer. Use refrigerated leftovers within 3 to 4 days.



### Storing Food

Food should be stored at the correct temperature to prevent the growth of bacteria. Refrigerated food should be kept at 4 degrees Celsius (40 degrees Fahrenheit) or below. Frozen food should be kept at -18 degrees Celsius (0 degrees Fahrenheit) or below. Meat, poultry, and seafood should be stored separately on the bottom shelf to avoid dripping.



### Throwing Away Food

Food that has been left out at room temperature for more than two hours should be thrown away. This is because bacteria can grow rapidly in food that has been left out at room temperature.



### Cross Contamination

Cross-contamination occurs when bacteria from raw food is transferred to cooked food. This can happen when using the same utensils or cutting boards for raw and cooked food, or when not washing your hands properly after handling raw food. It is important to use separate utensils and cutting boards for raw and cooked food, and to wash your hands thoroughly with soap and water after handling raw food.

