



## IDENTIFICATION

Department	Position Title	
Northwest Territories Health and Social Services Authority	Community Health Representative	
Position Number(s)	Community	Division/Region(s)
47-5581	Ulukhaktok	Population Health / Client Services/Beaufort-Delta

## PURPOSE OF THE POSITION

To provide community health promotion services in Ulukhaktok, in accordance with the philosophy and objectives of the Inuvik Regional Health and Social Services Authority (NTHSSA) to promote the prevention of disease, maintenance of health and the overall health and well-being of the community.

## SCOPE

The NTHSSA administers all regional health and social services delivered through the Inuvik Regional Hospital (IRH), a 47 in-patient bed accredited facility, 12 Community Health Centers; and seventeen other sites, including social services and dental therapy offices, public health clinics, elder's facilities, and various group homes. The NTHSSA provides and supports the delivery of health care services to adults and children on an inpatient, outpatient and outreach basis in order to enhance healthy communities well-being through excellence, accountability and respect for regional diversity

Located within the Emegak Health Center and reporting directly to the Nurse in Charge and indirectly to the Manager of Rehabilitation and Health Promotion, the Community Health Representative (CHR) works with community members, health care providers and other agencies to promote healthy living and well-being to a client population of approximately 400 residents (predominantly Inuvialuit). The CHR plays a critical liaison role between the community and the NTHSSA and ensures that individuals within the community have access to education and health promotion required for healthy living; and that the NTHSSA is aware of the community concerns with respect to continued health and well-being. The health center is the sole medical facility in the community.

Services may be provided within the Health Station, community halls, schools or in a patients/residents home (i.e. elderly population) and are intended to promote a health way of life, and decrease the incidence of death and disease. Services may be provided on an individual basis or as part of a multi-disciplinary team.

In the absence of a Community Health Nurse or the NIC the CHR may be required to deliver medications that have already been dispensed (i.e. bubble pack) to individuals within the community.

## **RESPONSIBILITIES**

- 1. Provide and participate in the delivery of community health programs (i.e. including but not limited to Well-Child/Woman/Man clinics, pre and post-natal clinics, school health program, chronic disease clinic, communicable disease surveillance) according to the GNWT Health Standards in order to protect, prevent and reduce the incidence of communicable disease, to promote a healthy life style and to reduce the incidence of disability and/or death to all community members.**
  - Deliver community health programs (both pre-packaged and requiring development by the incumbent to fit community needs).
  - Encourage community members to participate and attend education and health promotion sessions.
  - Use and involve the media (such as local radio, T.V. and newspaper) to facilitate mass public education on health related topics.
  - Assist in the arranging of specialty clinics with physician specialists or other healthcare providers (i.e. Make sure individuals scheduled for an appointment know they are scheduled and are aware of what services are being provided).
  - Assist in the evaluation of community health programs and offer suggestion for improvement where appropriate (culturally sensitive support).
  - Act as a local resource for other community based health care workers, and promote a safe and healthy environment in homes, schools and throughout the community.
- 2. Facilitate patient and family educational/teaching based on the needs of the patient in collaboration with Health Care providers facilitate individual learning to patients and their families in relation to patient illness or injury (i.e. self-care, health promotion, etc.) as directed.**
  - Determine a patients knowledge of their health, disease process and learning needs.
  - Participate in the development of community specific educational resources necessary to support patients.
- 3. Advocate practice environments that have the organization and resource allocations necessary for safe, competent and ethical nursing care.**
  - Explain local culture, community health needs, and problems to health care professionals to encourage appropriate programming and communication techniques are used to meet DSCB goals.

- Collaborate with nurses, peers and other members of the health care team to advocate health care environments that are conducive to ethical practice and to the health and well-being of patients and staff.
- Participates in research (i.e. flu watch) and special projects related to the community's health status.
- Creates and follows a work plan and records specifics of all encounters or services provided for statistical purposes and follow up.

**4. General departmental maintenance and other duties as assigned.**

- Assist the NIC, CHN or Medical Travel Clerk arrange for the transportation (including Medevac and appointments for special clinics) of clients both to and from regional centers in order to ensure the client receives appropriate care.
- Under the direction of an NIC deliver pre-dispensed (i.e. bubble pack) medications to clients and ensure ingestion based on orders from the NIC.
- Adheres to and complies with the policies and procedures of the NTHSSA.
- Engages in the culture of safety and accountability for quality of services provided on an ongoing basis through the Accreditation process. This is an evaluation process based on national standards and required organizational practices used to assess the quality of health care and social services provided.

## **WORKING CONDITIONS**

*(Working Conditions identify the **unusual and unavoidable**, externally imposed conditions under which the work must be performed and which create hardship for the incumbent.)*

### **Physical Demands**

The incumbent will be required to carry supplies and equipment from health unit to homes or teaching locations, using stairs, obtaining water samples, and climbing in and out of a vehicle several times a day which may lead to moderate levels of physical fatigue.

### **Environmental Conditions**

When assisting other health care professionals with client care (such as health screening), the incumbent may be exposed to human body fluids, including blood. During home visits the incumbent may be exposed to smoke, unsanitary conditions and potentially abusive (verbal and physical) patients or family.

As a result of living in an isolated, northern community, the incumbent may be required to travel on small planes and on ice or winter roads when traveling to or from the community.

### **Sensory Demands**

The incumbent will be involved in situations where the incumbent will need to deal with difficult clients experiencing medical problems that require an immediate outcome. As a result the incumbent will need to use combined senses to accurately assess patients and situations in order to respond appropriately and diffuse potential problems.

## **Mental Demands**

The CHR may become involved in situations with community members who are experiencing stress or confusion with respect to the delivery of health care or the status of their own health. This involvement/interaction may occur at any time (day or night). This may cause a significant disruption to the incumbent's family and social life.

In addition, within the health care setting there can be significant lack of control over the work pace, with frequent interruptions (work is often dictated by external factors) that may lead to mental fatigue or stress.

From time to time the CHR may be required to assist CHN or Lay Dispenser during the provision of nursing services to abusive patients, individuals under the influence of drugs or alcohol and RCMP escorts. These incidents may occur while the incumbent is on duty as well as when off duty (within a small community it is difficult to separate the individual from the position). As a result, there may be concern for safety and well-being of the incumbent which may cause extreme levels of stress on the incumbent both during and after working hours.

## **KNOWLEDGE, SKILLS AND ABILITIES**

- Knowledge of current trend in health promotion, community development and adult education theory as well as a basic understanding of common disease processes and conditions throughout the life span.
- An ability to identify health issues and formulate an action plan. This includes and ability to formulate teaching plans and use audio visual and other teaching aids well as and ability to create teaching materials that is culturally appropriate for the client's needs.
- Knowledge of traditional healing methods as well as community and cultural norms.
- An ability to speak, read and write English (this includes and ability to follow verbal and written instruction from nursing, medical and dental personnel and interpret health information accurately- following the Medical interpreter's Guide).
- Ability to operate basic office equipment (i.e. telephones, fax machines, etc.).
- Knowledge of and an ability to work effectively in a cross-cultural setting and work with community groups and resources.
- Knowledge of and ability to operate word processing applications (i.e. Microsoft Word) in order to complete training materials and presentations, electronic mail to send and receive mail and the internet in order to conduct on-line research.
- An ability to educate patients and their families (where applicable) on appropriate self-care methods and techniques a directed by a health care provider (i.e. NIC).
- Knowledge of and an ability to network resources within and outside the DCSB (i.e. Social Services, Public Health, medevac teams etc.)in order to provide comprehensive health promotion and education.
- The incumbent must be aware of the importance of confidentiality and be able to keep personal and medical information private and confidential at all times.

**Typically, the above qualifications would be attained by.**

This level of knowledge is typically acquired through the completion of a NWT Community Health Representative training program.

An ability to speak the local aboriginal language is an asset.

An ability to complete a satisfactory criminal records check is mandatory.

**ADDITIONAL REQUIREMENTS**

**Beaufort-Delta Regional Requirements**

Within the Beaufort-Delta Region the CHR must be able to acquire within a reasonable time frame and remain current with the following training and certifications.

- Internet, word processing and electronic mail.
- Standard First Aid.
- Certification in basic CPR.

**Position Security (check one)**

- No criminal records check required
- Position of Trust – criminal records check required
- Highly sensitive position – requires verification of identity and a criminal records check

**French language (check one)**

- French required
- French preferred
- French not required