

Government of Northwest Territories

IDENTIFICATION

Department	Position Title		
Northwest Territories Health and Social Services Authority	Mental Health and Addictions Counsellor		
Position Number	Community	Division/Region	
87-12474	Tulita	Mental Health and Addiction Services/Sahtu	

PURPOSE OF THE POSITION

As a member of the Primary Community Care Team, the Mental Health and Addictions Counsellor is responsible for providing comprehensive mental health, addictions, and family violence services for the residents of Tulita. Services are provided in accordance with the Northwest Territories (NWT) *Mental Health Act, Child and Family Services Act, Protection Against Family Violence Act,* Mental Health and Addiction Services Framework and Action Plan, and the NWT Community Counselling Program Standards. Services are intended to help improve the mental health and well-being of residents and their community

SCOPE

The Northwest Territories Health and Social Services Authority (NTHSSA) is the single provider of all health and social services in the Northwest Territories (NWT), with the exception of Hay River and Tłıcho regions, covering 1.2 million square kilometers and serving approximately 43,000 people, including First Nations, Inuit, Metis, and non-aboriginals. Health and social services includes the full range of primary, secondary and tertiary health services and social services including family services, protection services, care placements, mental health, addictions, and developmental activities, delivered by more than 1,400 health and social services staff.

While the Tłįcho Community Services Agency (TCSA) will operate under a separate board and Hay River Health and Social Services Agency (HRHSSA) will in the interim, the NTHSSA will set clinical standards, procedures, guidelines and monitoring for the entire Northwest Territories. Service Agreements will be established with these boards to identify performance requirements and adherence to clinical standards, procedures, guidelines and policies as established by the NTHSSA.

Under the direction of the Minister of Health and Social Services, the NTHSSA is established to move toward one integrated delivery system as part of the government's transformation strategy.

Located in Tulita, population 506, the Mental Health and Addictions Counsellor (Counsellor) reports directly to the Regional Clinical Supervisor, Mental Health and Addiction Services for administrative supervision, functional input and clinical guidance. The incumbent is a key member of the Primary Community Care Team (PCC) providing direct, community based, culturally sensitive, mental health, addictions, and family violence counselling services to clients. These services include but are not limited to: prevention and promotion initiatives; planning and delivery of community based mental health, addictions, and family violence therapeutic counselling services; case management; and providing crisis response, supported living, consumer self- help and vocational/education services. The Counsellor is also a key referral agent and service provider for complex addictions, family violence, and psychiatric clients who may be referred for inpatient treatment or other services outside of the community.

The Counsellor operates within a philosophy of education, prevention, therapeutic counselling, out-patient-treatment, and aftercare, to minimize the negative physical, mental, social and emotional impacts of addictions, family violence, mental illness, and trauma through providing clients with the tools, support, and therapeutic venue required to achieve and maintain the highest level of mental health that is possible for the individual This involves having the skills to work with various cultural groups and all members of the population (elders, adults, adolescents, children and families).

The incumbent works collaboratively with the Primary Community Care Team. As a part of this team they are the key provider of a full range of mental health and addictions counselling services. As a member of the Community Counselling Program (CCP), the Counsellor plays an important role in ensuring that clients' needs are met by providing appropriate screening, intake, assessment, mental health, addictions, and family violence counselling, treatment services, planning, and aftercare.

This position impacts on community health and well-being through increased awareness and treatment of mental health, addictions, and family violence issues, reduction of suicides and alcohol related death and illness, as well as the reduction of family breakdown through prevention, therapeutic counselling, and crisis intervention. By providing mental health, family violence, and addictions treatment within the community fewer individuals will need to be referred out of the community reducing costs overall.

RESPONSIBILITIES

1. Using a Best Practices model, the Mental Health and Addictions Counsellor is responsible for, independently and as part of the Primary Community Care Team, providing a continuum of therapeutic counselling services for individuals, groups, and families in the areas of mental health, addictions, and family violence.

- Conduct screening, intake, and biopsychosocial assessment protocols with various client groups including, elders, adults, couples, families, adolescents and children for a variety of conditions and disorders including, but not limited to addictions, Diagnostic and Statistical Standards Manual of Mental Disorders Fourth Edition (DSM-1V) (i.e. depression, anxiety, post-traumatic stress disorder, schizophrenia), addictions, family violence (including work with victims, offenders, and the Justice system), trauma, impact of residential schools, FASO, concurrent disorders, victims of sexual/physical assault, problems with work, school, family or other important areas of function and other problems causing distress.
- Provide short and long-term out-patient treatment through client centered therapeutic counselling services in individual, family, or group formats using a treatment modality that best fits the client(s) situation including, but not limited to, solution-focused, cognitive-behavioural, family systems, stages of change, motivational interviewing, harm reduction, and/or art and play therapy models.
- Provide aftercare and follow-up counselling; following in-patient treatment for addictions, family violence, or mental health/addictions related hospitalization (participate in discharge planning). This may also include medication monitoring, regular checks on clients and ongoing therapeutic counselling.

2. Provide comprehensive mental health, addictions, and family violence case management services.

- Take a lead role in case management and case planning for mental health, addictions and/or family violence clients. This includes taking lead role on the Primary Care Team in service planning for clients with mental health, addictions, and family violence issues.
- Conducts care coordination/planning involving necessary professionals/traditional healers/services on a regular basis.
- Make referrals where required (note: this includes making all the arrangements both within and outside of the community for travel and admissions to hospitals).
- Provide consultation to physician when determining need for hospitalization and possible medevac for mental health issues.
- Provide leadership and advocacy with clients in working with other agencies.

3. Contribute to the effective functioning of the Community Counselling Program (CPP) and enhancing program development, delivery and continuity of care.

- Complete documentation, clinical notes, referral letters, and other documentation as required in the format set out by the Department of Health and Social Services.
- Provide reports and case management notes to assist clients in understanding treatment protocols or treatment plans.
- Participate actively in community interagency meetings, especially as they relate to the socioeconomic environment with respect to emerging developments such as self-government and economic development and understand the impact of these developments on the well-being of individuals.
- Participate in program evaluation, data collection activities, and other program design and delivery initiatives.

- Evaluate therapeutic counselling and treatment outcomes to determine the best service for clients.
- 4. As the primary provider of Mental Health and Addictions Services within Tulita the incumbent is the primary consultant and educator of the Primary Community Care Team and other community agencies (Community Wellness Workers, CSSW's, Probation, Physicians, Justice Committee's, RCMP, Nurses, Teachers, CHR's, Homecare, Band Councils, Non-Government Organizations, etc.) on mental health, addictions, and family violence issues within Tulita and the Sahtu region.
 - Provide community awareness and education. This includes but is not limited to providing presentations and/or workshops that raise awareness of relevant mental health, addictions and family violence issues within the community.
 - Work in partnership with the Community Wellness Workers in providing education sessions to professionals.
 - Provide orientation and training on mental health, addictions, and family violence to key stakeholders within the community (i.e. RCMP, Nurses, Schools, Non-Government Organizations, Band Councils, etc.).
 - Provide materials and expertise to community groups.
- 5. Conduct suicide risk assessments and Mental Status exams and providing recommendations regarding care and monitoring to clients who may be in RCMP cells, in Health Centers or referred by any third party.
 - Complete screening and risk assessment for suicide and violence and mental status with all client groups and individuals.
 - Prioritize and identify community and regional resources for each client in crisis.
 - From time to time the incumbent may be required to act as a psychiatric escort.
 - Make referrals where required (note: this includes making all the arrangements both within and outside of the community for travel and admissions to hospitals).

Workplace Health and Safety

- Employees of the NTHSSA are committed to creating and maintaining a safe and respectful workplace for employees and patients/clients. Building a safe and respectful workplace is everyone's responsibility
- All Employees have a professional and personal responsibility to perform their duties to health and safety regulations, standards, practices and procedures
- All stakeholders (management, staff, UNW and WSCC) need to ensure our Workplace Health and Safety Committee works effectively, with a shared purpose of continuous
- All Employees play an active role in Workplace Health and Safety through their daily activities identifying prevention risk and accidents, and applying timely corrective measures
- A healthy workplace, where employees can prove quality service under safe conditions, is the right thing to do

WORKING CONDITIONS

Physical Demands

No unusual demands.

Environmental Conditions

The majority of mental health and addictions services are provided within an office/clinic setting (i.e. office, classroom, nursing stations, etc.). However from time to time services will be provided in remote locations (i.e. client home, coffee shop, etc.). In these situations, the incumbent may be required to walk to and from the different locations and will experience a variety of weather conditions. The severity of Arctic temperatures requires a period of adjustment, but with proper preparation does not cause undue hardship.

Sensory Demands

The incumbent will spend approximately 60% of the day providing direct counselling services requiring the use of the combined senses of touch, sight, smell and hearing during assessment and provision of counselling services.

In working with children, who often communicate through symbolism and metaphor, it is necessary to be attuned to the various ways children communicate their thoughts, feelings, and needs including body language, play, stories, energy level, tone of voice, and other verbal and non-verbal cues.

Mental Demands

The incumbent may be presented with competing urgent priorities as well as highly emotional situations, such as suicides. Professionals providing mental health and addiction counselling services have been known to suffer traumatization as a result of repeatedly hearing client's traumatic stories (i.e. sexual abuse, multiple losses, residential schools, cultural issues, etc.). Because of this, the Counsellor requires excellent self-care skills.

Providing these services in a small community presents unique challenges including having to deal with friends, neighbors, relatives or social acquaintances who are receiving services, as well as victims and perpetrators, on a day-to-day basis outside of work (i.e. present at community functions, grocery shopping, walking, down the street, etc.).

In this profession there is some level of uncertainty in knowing what to expect while at work and when a traumatic event occurs within the community, or to an individual, the incumbent will often be called upon, outside of work hours. The Mental Health and Addictions Counsellor occasionally works with mandated clients (probation, social services) and others that may present as dangerous and unpredictable. People in crisis can be abusive to those trying to help. As a result, there is legitimate concern about the risk of verbal or physical aggression (i.e. clients or family members under the influence of drugs of alcohol).

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

KNOWLEDGE, SKILLS AND ABILITIES

- Knowledge of therapeutic treatment options as well as the skill and ability to provide such treatment to people of all ages with mental health, addictions, and family violence issues.
- Knowledge of child, adolescent, and adult developmental, psychological, social, and cognitive development.
- Ability to acquire knowledge of the different referral agencies/services available within the NWT (and community) for those individuals who require in-patient or alternative (such as psychiatric) assessment and care, this includes knowledge of referral routes and case management techniques.
- Knowledge of and an ability to refer clients to traditional healers and elders.
- Knowledge of the biopsychosocial presentation, determinants and precipitators of mental health and mental health disorders and the biopsychosocial presentation, and models of addictions (abstinence model, moral model, harm reduction model, etc.) and the biopsychosocial presentation, determinants and precipitators of family violence in order to recognize and interpret findings and determine an appropriate treatment plan.
- Ability to appropriately use clinical, diagnostic and treatment planning terminology with clients, other health care providers and referral agents.
- Knowledge of the Diagnostic Standards Manual classification system, psychopharmacology and psychophysiology of disorders.
- Knowledge of the signs of violence and/or abuse at an early stage as well as current trends and best practices in addressing psychological outcomes of violence, including interpersonal therapy, supportive counselling, group support and cognitive behaviour strategies.
- Knowledge of current trends and ability to apply best practices with clients for addressing risk factors for addictions, mental health disorders and family violence.
- Ability to apply the NWT *Mental Health Act*, the *Child and Family Services Act*, the *Protection Against Family Violence Act*, as well as knowledge of other NWT legislations.
- Adherence to a professional code of ethics.
- Knowledge/understanding of community demographics, values, culture, and history.
- Knowledge of and ability to network resources within and outside the employing Health and Social Services Authority to ensure support for clients and their families.
- Ability to communicate (orally) effectively in a cross cultural setting.
- Ability to draft written documents, which are clear, concise and easy to understand by both professionals and non-professionals.
- Ability to work as a team a member as well as be self-directed, meet deadlines, prioritize workloads and manage several tasks at once.
- Ability to operate a desktop computer with a basic software package.

Typically, the above qualifications would be attained by:

Master's degree in social science with one (1) year of relevant counselling experience in a scope of practice or experience in addictions, mental health, and/or family violence: or

Bachelor degree in social sciences with three (3) years of relevant counselling experience in a scope of practice or experience in addictions, mental health, and/or family violence: or

Diploma in Psychiatric Nursing with five (5) years relevant counselling experience in a scope of practice or experience in addictions, mental health and/or family violence.

The experience of the Mental Health and Addictions Counsellor should include clinically supervised education or work experience (counselling experience obtained under a qualified clinical counselling supervisor) that includes at least 500 hours, where at least 120 of those hours are direct client contact. Additional hours are spent in face-to-face supervision, educational activities, documentation activities and professional development.

ADDITIONAL REQUIREMENTS

Must have a Valid Class 5 Drivers License

NTHSSA - Sahtu Regional Requirements

The Mental Health and Addictions Counsellor must be able to acquire within a reasonable time frame and remain current with the following training and certifications:

- Standard First Aid
- Non-violent Crisis intervention
- Certification in basic CPR, Level C and AED
- Cultural Training
- WHMIS and TDG
- Mental Health First Aid (MHFA)
- Applied Suicide Intervention Skills Training (ASIST)
- Work Safety
- Hand Hygiene
- Training form Accreditation Canada

Position Security

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

French language (check on	e if applicable)		
\square French required (must	identify required leve	l below)	
Level required for th	is Designated Positior	ı is:	
ORAL EXPRESSIO	ON AND COMPREHENS	SION	
Basic (B) □	Intermediate (I) \square	Advanced (A) \square	
READING COMPREHENSION:			
Basic (B) 🗆	Intermediate (I) \square	Advanced (A) □	
WRITING SKILLS	:		
Basic (B) □	Intermediate (I) \square	Advanced (A) \square	
\square French preferred			
Indigenous language: Sele	ct language		
☐ Required			
☐ Preferred			