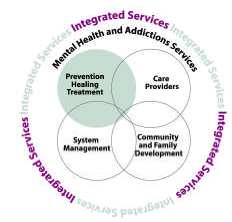


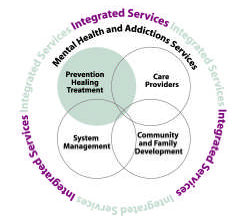
# Mental Health and Addictions Services Framework For Action Status Report 2002-2004





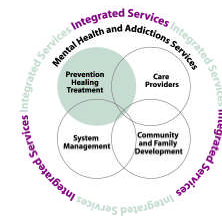
**Goal #1: Individuals, families and communities have the skills and resources necessary to actively achieve and maintain a healthy lifestyle.**

Action Items	Status
<p><b>Health Promotion Activities</b></p> <p><i>Public education campaigns on healthy lifestyle choices using a popular education model</i></p>	<p><b>Health Promotion Activities</b></p> <ul style="list-style-type: none"> <li>✓ Family Violence Awareness Week</li> <li>✓ Mental Health Week</li> <li>✓ National Addictions Awareness Week</li> <li>✓ Residential School Awareness</li> </ul> <p><b>FASD Health Promotion Activities</b></p> <ul style="list-style-type: none"> <li>✓ Dene Nation Gathering of Grandparents</li> <li>✓ FASD Conference – Secondary Disabilities: Supporting the Environment</li> <li>✓ FASD Symposium for Continuing Medical Education and Profession Development</li> <li>✓ Tobacco Strategy</li> </ul> <p><b>FASD strategy (in progress)</b> <b>Telecare NWT</b></p>



**Goal #2: Individuals and families have access to a continuum of community-based, core wellness services.**

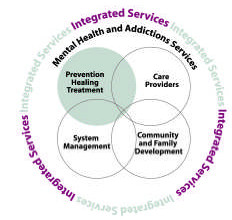
Action Items	Status
<p><b>Community Based Counseling Services</b></p> <p><i>Design an integrated counseling service and clinical supervision in the areas of addictions, mental health and family violence.</i></p>	<p><b>Implementation of Community Counselling Programs (CCP) for Addictions, Mental Health and Family Violence:</b></p> <ul style="list-style-type: none"> <li>✓ Three new positions; Community Wellness Worker (CWW), Mental Health/Addictions Counsellor, Clinical Supervisor</li> <li>✓ Developed core competencies</li> <li>✓ Job Descriptions</li> <li>✓ Job Classification/Evaluation</li> <li>✓ Program Standards and Toolkits</li> <li>✓ 15 Direct appointments – CWW</li> <li>✓ Shelter enhancements for Operations and Maintenance</li> <li>✓ Training CWW's (see Goal #5)</li> </ul>



**Goal #3: Individuals, families and communities have access to a range of facility-based services.**

Action Items	Status
<p><b>*Healing Programs</b></p> <p><i>Specialized or residential healing for children and youth with mental illness, addictions or trauma issues</i></p>	<p><b>Specialized Programs for Children and Youth</b></p> <p>✓ Request For Proposals developed for review of children/youth treatment services</p>

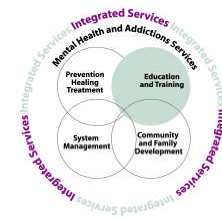
*\*This action item is a direct response to the Community Addiction Program Evaluation recommendation regarding mobile treatment programs.*



**Goal #3: Individuals, families and communities have access to a range of facility-based services.**

Action Items	Status
<p><b>Regional Support for Persons with Mental Illness</b></p> <p><i>Establish levels of support (residential, community living, and psychosocial rehabilitation) in areas of high need</i></p>	<p>✓ Draft standards for Supported Living Options</p>





**Goal #5: Care providers are trained and supported to provide services at the community level.**

**Priority Area for Action (Enhanced)**

Action Items	Status
<p><b>Skills/Qualifications</b></p> <p><i>Appropriate levels of education and qualifications to meet the demands and expertise of the job.</i></p>	<p><b>CWW Training Plan:</b></p> <ul style="list-style-type: none"> <li>✓ CWW Training Plans</li> <li>✓ Health and Social Services Authority Training Supervisors trained</li> <li>✓ Partnership with Keyano College and Nechi Institute</li> <li>✓ Community Wellness Worker Certificate Program</li> <li>✓ 2 streams of students identified               <ul style="list-style-type: none"> <li>◆ Stream 1 – 5 CWW</li> <li>◆ Stream 2 – 10 CWW</li> </ul> </li> <li>✓ Stream 1 completed 4 courses 2003/04</li> </ul>

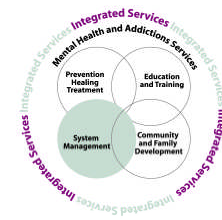


**Goal #6: Families and communities have the capacity to address wellness issues.**

**Priority Area for Action (Enhanced)**

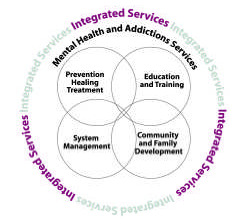
Action Items	Status
<p><b>Suicide Prevention Initiatives</b></p> <p><i>Increased community capacity to respond to suicide crisis and aid in preventing suicide</i></p>	<ul style="list-style-type: none"> <li>✓ Continue Phase 1 training</li> <li>✓ Respite program – Yellowknife Association for Community Living</li> </ul>





**Goal # 7:** Sufficient addictions, mental health and family violence resources are allocated in a planned, needs-based manner.

Action Items	Status
<p><b>Funding Levels</b>  <i>Fund appropriate salaries and benefits based on re-profile of addictions, mental health and family violence programs</i></p> <p><b>Accountability Framework</b>  <i>Work with Department on the design and development of accountability framework</i></p>	<p><b>Funding Levels for Community Counselling Program</b></p> <ul style="list-style-type: none"> <li>✓ Cost analysis of Community Counselling Program</li> <li>✓ Fund appropriate salaries, and integrated programs based on re-profile of addictions, mental health and family violence programs</li> </ul> <p><b>Accountability Framework for Community Counselling Program</b></p> <ul style="list-style-type: none"> <li>✓ Work with the Planning and Evaluation Unit to ensure strategy becomes part of Department evaluation framework</li> <li>✓ Develop standards, benchmarks, and outcome measures for Community Counselling Program</li> <li>✓ Report on Best Practices for Mental Health and Addiction Services</li> </ul>



**Goal # 8: Programs and services are integrated and coordinated at all levels**

Action Items	Status
<p><b>Primary Community Care</b></p> <p><i>Addictions, Mental Health and Family Violence programs and services are integrated with Primary Community Care Teams</i></p>	<ul style="list-style-type: none"> <li>✓ Consultation with communities regarding co-location of Community Counselling Programs</li> <li>✓ Plan for transition of Community Counselling Programs into Primary Community Care Teams</li> <li>✓ Infrastructure requirements</li> <li>✓ Collaborate with Primary Health Care Transition Fund Projects</li> </ul>

## APPENDIX 1

### Mental Health and Addiction Services 2003/04 Funding

<b>Region</b>	<b>Community Wellness Worker</b>	<b>Mental Health/ Addiction Counselor (FMB )</b>	<b>Mental Health/ Addiction Counselor (Health Accord )</b>	<b>Clinical Supervisor</b>	<b>Community Wellness Worker Training</b>	<b>Family Violence</b>
Department					120,000	96,000
Deh Cho	462,652	93,592	52,148	99,960		
Dogrib	313,289	90,988	52,530	97,356		
Fort Smith	181,682	91,159	2,384 (O&M)	97,525		
Hay River	240,839	90,808	2,174 (O&M)			
Inuvik	1,150,844	193,206	113,828	205,942		
Yellowknife	542,139		52,936			
<b>Subtotals</b>	<b>2,891,445</b>	<b>559,753</b>	<b>276,000</b>	<b>500,783</b>	<b>120,000</b>	<b>96,000</b>
<b>Total</b>						<b>\$4,443,981</b>

## APPENDIX 2

### Mental Health and Addictions 2004/05 Funding

Region	Community Wellness Worker	Mental Health/ Addiction Counselor	Mental Health/ Addiction Counselor and Clinical Supervisors (Health Accord)	Clinical Supervisor	Community Wellness Worker Training	Family Violence
Department					120,000	96,000
Deh Cho	459,830	86,086	182,606	88,960		
Dogrib	314,845	83,482	184,135	86,356		
Fort Smith	182,616	83,653	88,384	86,525		
Hay River	247,085	83,302	87,962	-		
Inuvik	1,156,135	178,194	302,504	186,838		
Yellowknife	544,940	-	269,699	-		
<b>Subtotals</b>	<b>2,905,451</b>	<b>514,717</b>	<b>1,115,291</b>	<b>448,680</b>	<b>120,000</b>	<b>96,000</b>
<b>Total</b>						<b>\$4,984,138</b>

Note: These figures represent the outcome of job evaluation (August 2003), i.e. position classifications are reflected in salaries. These figure also represent 3% increase as per UNW collective agreement.