

Health Care: A Career For Life

MENTAL HEALTH

A Mental Health Worker is responsible for administering and delivering mental health services to individuals and families.

Mental health workers are employed in:

- Health care and rehabilitation clinics and hospitals
- Family and community services (for example, agencies that operate group homes, day programs, etc.)
- seniors' lodges, assisted living facilities and continuing care facilities
- private practices
- Correctional facilities.

RELATED OCCUPATIONAL PROFILES

Aboriginal Liaison, Addictions Counsellor, Child and Youth Care Worker, Community Disability Services Practitioner, Community Health Representative, Life Skills Coach, Marriage and Family Counsellor, Mental Health Aide, Psychiatric Nurse, Psychologist, Recreation Therapist Registered Nurse, Social Worker

GUIDE TO MANITOBA'S MENTAL HEALTH SYSTEM

COMMUNITY MENTAL HEALTH provides comprehensive assessment, case management, rehabilitation/treatment, supportive counseling and crisis intervention, community consultation and education. Community Mental Health services are operated by Regional Health Authorities and assist people with mental health difficulties to develop coping and living skills and obtain other community services needed to meet their living needs and personal goals. There are several types of community mental health workers including Adult Workers, Child and Adolescent Workers, and Psychogeriatric Workers.

Intensive Case Management Programs (ICM) work with individuals who have clearly identified goals in areas like school, work, home or their social life. This program provides more intensive and continuous support than the community mental health worker model, and has a strong emphasis on psychosocial rehabilitation. People entering the Intensive Case Management program usually have a strong desire to make major changes in their lives, but require support and assistance in achieving these goals because of mental health difficulties.

SALARY RANGE

\$30,000 - \$78,000

EDUCATION

Mental health workers' academic qualifications vary greatly. Most mental health workers have post-secondary education in a discipline related to mental health such as nursing, psychology, social work, occupational therapy or recreation therapy. They may be required to be registered, certified or accredited by their particular professional associations before they

Proctor Programs provide supportive services to assist individuals to develop community living skills and other social, recreation, and/or educational interests and goals. Proctors are usually casual paraprofessionals who work under the direction of community mental health workers (CMHW or ICM), usually in accordance to an established rehabilitation plan.

The **Forensic Community Service**, operated by the Winnipeg Regional Health Authority, provides specialized services to individuals under the auspices of the Criminal Code Review Board. It has a varied mandate, including case management in the Winnipeg area and consultation with mental health agencies and health care providers throughout the province. This service has a strong treatment and rehabilitation focus, which addresses both daily living needs and safety issues of the programs' clients, their families and the community.

Mobile Crisis Units provide crisis intervention and suicide prevention services to persons experiencing emotional or mental health crises. Services are provided in the community, usually within individuals' residences and includes screening and psychiatric assessment, crisis intervention and counselling, referral and short-term follow-up with other

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mental health and social services. This service is provided by various Regional Health Authorities.

Crisis Stabilization Units are short-term community-based settings that provide mental health intervention to persons who require specialized mental health supports but not hospitalization. Crisis stabilization units usually have a nurse on shift who is able to assist with medication management and other medical and psychiatric issues. Individual stays in crisis stabilization units vary considerably, but usually do not exceed two weeks.

Safe Houses are short-term residential settings for individuals who require a caring, supportive environment to help them manage an emotional or mental health crisis. Safe houses are often staffed by consumers, and usually do not have the nursing expertise to manage acute psychiatric crises.

Crisis Lines provide telephone crisis intervention and suicide prevention services by trained volunteers and staff. These services provide immediate and short-term interventions, and can serve as referral links to other community mental health services. Most mobile crisis units and crisis stabilization units also provide telephone crisis intervention.

Help Lines are peer support telephone services that provide basic support, practical assistance, and information to persons struggling with emotional or mental health issues. These are not crisis lines, although they may make referrals to crisis lines and other mental health services.

Critical Incident Stress Debriefing Teams provide immediate and short-term interventions to persons who have experienced a potentially traumatic event. Critical events can include suicides, murders, major accidents and other emergencies. Critical incident debriefing teams provide post-trauma debriefings, education, and referral to longer-term community resources.

Self-Help and Family Supports are most often provided through formal associations of people, many of whom are either living with a mental illness or have family member with a mental illness. Self-help activities include mutual support, public education, advocacy and consumer-oriented services that promote the needs and priorities of people with mental health difficulties.

Prevention, Promotion and Public Education Services are advisory and education services to the public and professional groups, often provided by RHA mental health programs and self-help organizations.

Vocational and Employment Supports provide assistance to persons wanting to pursue and secure employment. Services

include career guidance counseling, education and training, referral and job finding assistance, and employment placement. Programs vary from pre-vocational education and on-site job training to casual employment placement.

Housing and Community Living Programs are available to persons who may experience difficulties living independently because of mental health difficulties. Supported housing (non-facility based) assists people to choose, obtain, and keep housing in the community. Other housing service options vary from residential care facilities (which provide a full range of services including meal preparation, medication administration, laundry, and assistance with daily living skills) to supportive housing options (which focus on rehabilitation and the development of independent community living skills).

Social and Recreational Programs offer a variety of supports and skill development activities for persons interested in becoming involved in social and leisure activities. These activities are structured to assist people with mental health difficulties to pursue individual interests and develop meaningful social and living roles within their community.

Cross-Cultural Mental Health Specialists provide community mental health assistance to persons with mental health difficulties that have difficulty accessing and using community resources because of language and cultural differences. Many of these people may be refugees or recent immigrants to Canada. Services are similar to those provided by community mental health workers, although with increased attention to ethnic and cross-cultural issues. This is a Winnipeg Regional Health Authority position.

Acute-Care Treatment Facilities provide psychiatric care and treatment in inpatient psychiatric units of general hospitals or community health centres operated by Regional Health Authorities.

The **Mental Health Review Board** works on behalf of Manitobans in need of mental health services. The Board hears appeals regarding any aspect of the admission or treatment of a patient in a psychiatric facility. Legislation also requires that there be an automatic review of all involuntary patients after the filing of the third certificate of renewal and annually, thereafter.

The **Ombudsman** provides formal individual advocacy for all government-operated services, including the operations and hospitals of regional health authorities. The Ombudsman investigates complaints from persons who feel they have been unfairly treated by government departments or agencies, and promotes the principles of fairness, openness and accountability.

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