JOB OPENING

Job Title: HEALTH CARE NAVIGATOR - SSVF
Department: Operations
Reports To: Program Manager
Classification: Non-Exempt

SUMMARY
The SSVF Health Care Navigator provides services included but not limited to, connecting Veterans to VA health care benefits or community health care services where Veterans are not eligible for VA care. The Health Care Navigator provides case management and care coordination, health education, interdisciplinary collaboration, coordination, and consultation, and administrative duties. This position will work closely with the Veteran’s primary care provider and members of the Veteran’s assigned interdisciplinary treatment team. The Health Care Navigator position is responsible for the following duties:

ESSENTIAL DUTIES AND RESPONSIBILITIES include the following. Other duties may be assigned.

1. Conducts assessments of the Veteran in collaboration with the interdisciplinary treatment team, the Veteran, family members, and significant others.

2. Works closely with Veterans to assist them in communicating their preferences in care and personal health-related goals to facilitate shared decision making of the Veteran’s care.

3. Serves as a resource for education and support for Veterans and families and helps identify appropriate and credible resources and support tailored to the needs and desires of the Veteran.

4. Conduct outreach by traveling to participant households, emergency shelters, transitional housing and community locations to engage homeless and “at risk” participants families for referrals.

5. Develop relationships with regional community and faith-based organizations, the local Continuum of Care, housing providers, education providers, offices of Veterans Affairs, shelters, soup kitchens, libraries, law enforcement and other organizations that can be a source of participants.
6. Coordinates referrals to VA, community health clinics, and other programs needed to ensure access to health care and facilitates adherence and collaborates with community providers to maximize the use of VA and community resources.

7. Develop Veteran’s care plan by collaborating with the interdisciplinary treatment team, the Veteran, family members, and significant others, and incorporate measurable goals.

8. Regularly reviews care plan goals with the Veteran, conducts regular non-clinical barrier assessments, and provides resources and referrals needed to support adherence to care plan.

9. Evaluates the effectiveness of the resources and referrals provided and makes appropriate modifications to ensure the provision of high-quality care and interventions.

10. Monitors Veteran’s progress, maintains comprehensive documentation, and provides information to treatment team members when appropriate.

11. Link Veterans and caregivers to supportive services, which include, but are not limited to, housing, financial benefits, transportation.

12. Determine the needs, strengths, limitations, and preferences of each Veteran and will engage in problem-solving to identify and reduce barriers to care.

13. Educate the Veteran and family on the available options for acquiring knowledge and skills for managing health and wellness.

14. Become proficient in and use appropriate program data systems to report progress, outcomes and measures.

15. Report progress at monthly meetings, continuum of Care (CoC) and coordinated Access meetings, as appropriate.

16. Refer ineligible applicants to appropriate programs and services, or to the VA and other agencies for services not provided through the program.

17. Maintain applicant/participant confidentiality by securing hard copy files in locked cabinets and electronic records password protected.

18. Attend relevant professional development training as assigned.

19. Interpret federal and state laws and regulations as appropriate.

20. Perform other job duties as assigned by supervision.

**SUPERVISORY RESPONSIBILITIES**
Responsible for own work and not required to direct or supervise other personnel but may occasionally instruct or show another employee how to perform work.
QUALIFICATIONS
To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions. Honorably discharged veteran preferred.

- At least two years of experience in a healthcare or social services area of practice
- Knowledge of education services and materials to help match the health literacy level of the Veteran
- Adhere to ethical principles about confidentiality, informed consent, compliance with relevant laws, and agency policies
- Ability to work with and support a diverse customer base
- Excellent customer service skills

EDUCATION and/or EXPERIENCE
Master’s level social worker or equivalent education and experience is preferred; or equivalent combination of education and experience. Hiring preference to honorably discharged veterans.

COMPUTER SKILLS
The ability to understand more advanced computer skills and be proficient in the advanced knowledge of software such as Microsoft Word and Excel, etc.; knowledge of HMIS a plus.

OTHER SKILLS AND ABILITIES
N/A

CERTIFICATES, LICENSES, REGISTRATIONS
Licensed Clinical Social Worker (LCSW) Certification recommended.

To apply:
Submit Cover Letter and Resume to:
Lauren Kelman, HR Specialist
lkelman@workplace.org