



United to Solve Homelessness Community Housing Navigator Expectations

Description of Position:

The Community Housing Navigator (CHN) works to unite community resources, providing hope and housing solutions for families experiencing homelessness. This position will primarily be focused on providing wrap around, in-depth case management to support families experiencing homelessness from coordinated entry all the way to sustainable housing. Services CHNs will provide include, but are not limited to, case assessment, pre-tenancy support, housing navigation, tenancy-sustaining services, and wrap-around service coordination. CHNs will be newly hired staff equivalent to at least 1.0 FTE or an expansion of current staff duties that are equivalent to at least 1.0 FTE per agency.

CHNs will be expected to engage in all of the below activities to support clients as applicable, including but not limited to:

- CHNs will build **trusting relationships** with clients through participant-centered and trauma-informed care using motivational interviewing techniques and working with clients at their own pace to ensure sustainable long-term progress.
- CHNs will know about community programs and services and will provide support to clients through in-person (if possible), **warm handoff referrals** to agencies who provide services their clients need.
- CHNs will utilize the Housing Solutions Fund, strong connections to community agencies, and coalitions to overcome barriers to housing and **wrap-around support**. This will include providing referrals and on-going assistance for non-housing issues such as mental health ailments, working with CPS, and sober living access among others.
- CHNs will have knowledge of and connections to, affordable housing options in the community and be able to assist clients with housing navigation, landlord interactions, move-in, life skills education, and maintaining housing once they have it.
- CHNs will maintain a reasonable **caseload that ensures clients receive exceptional support** and the position requirements are met while also assisting as many families experiencing homelessness as possible.
- CHNs will attend the United to Solve Homelessness **Community of Practice meetings**, complete assigned training as well as participate in relevant coalitions and partnerships.
- CHNs will maintain detailed client records, including all reporting requirement data, Housing Solutions Fund records, and will be expected to **correctly input all HMIS data** as outlined by the CES lead for Yellowstone County and the United Way of Yellowstone County.
- Be familiar with and commit to **engage in the evidence-based principles and best practices** of trauma-informed and participant-centered care, harm reduction, motivational interviewing and safeguarding participant confidentiality as well as other best practices identified in training.
- Commit to serving clients and a willingness to provide **in-depth case-management** that may include daily check-ins, long-term support post-housing, emotional support, and skill building to ensure clients are ready to maintain sustainable housing.
- CHNs will **provide support for clients outside of their hiring agencies** normal programs and will engage in collaborative problem solving by referring clients to the agency best able to support them while continuing to be that client's main point of contact for long-term support.
- Be able to employ a **deep sense of care and empathy** for clients that is exhibited throughout the case management process and be motivated and committed to proactively removing barriers.
- Each **hiring agency must support their CHN(s)** in meeting all the above requirements of their role as well as protect their staff from emotional burnout and unaddressed secondary trauma.