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| **Position Title** | Housing Navigator / Tiwhana |
| **Date** | 19 December 2024 |
| **Approved by** | CEO – Tuwharetoa Health Charitable Trust  |

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| **Position holder** | TBC |
| **Reports to**  | Kaitataki / Team Lead for day-to day matters.Overall, to the Whanau Engagement Manager |
| **Purpose of the position** | The Housing Tiwhana role is to * Work alongside individuals and whanau at risk of housing instability.
* Provide support in addressing the issues that have contributed to housing instability.
* Ensure whanau are connected to their community.
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| **Working Relationships** |
| Internal – Tuwharetoa Health  | External |
| * Whanau Engagement Manager and team
* Chief Executive Officer (CEO)
* Chief Operating Officer (COO)
* Clinical Advisor
* Financial Controller and team
* Head of Data Science and IT team
* Operations Manager and team
* Pou Herenga / Te Tira Atamai Manager and team
* Project Lead
* Whanau, Pepi and Tamariki Manager and team
* Executive Management Team (EMT)
* Trustees
 | * Clients and whanau
* Our partners in Te Whariki Aroha
* Other providers of health and social services, for example
	+ Anamata Café
	+ Pinnacle Midland Health Network
	+ General Practice
	+ Te Whatu Ora Lakes
* Community organisations
* Crown Agencies, for example
	+ Ministry for Social Development
	+ Kainga Ora
	+ Ministry Urban Development & Housing
	+ Te Puni Kokiri
	+ Ministry for Children Oranga Tamariki
* Taupo District Council
* Local Ngati Tuwharetoa marae
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| **Standard Attributes, Knowledge and Skill** |
| **Analytical Thinking and Problem Solving:** Ability to both identify problems and use information to resolve them. |
| **Communication:** Ability to clearly convey thoughts, both verbally and in writing, and to listen to and understands others. |
| **Confidentiality:** Ability to maintain privacy and confidentiality in line with the Privacy Act (2020) and the Health Information Privacy Code (2020). |
| **Continuous Improvement:** Ability to understand and implement a continuous improvement process in respect of one’s own performance, and the organisation’s processes and services. |
| **Cultural Appropriateness:** Ability to provide culturally appropriate support to a wide range of clients. Knowledge and experience in Ngati Tuwharetoa Tikanga and Kawa is desirable. |
| **Cultural Development:** Commitment to attending and actively participating in quarterly All Team Hui / Noho Marae. |
| **Health and Safety:** Ability to work responsibly under the Health & Safety at Work Act 2015. |
| **Policies:** Ability to become familiar with, and work in line with Tuwharetoa Health’s policies. |
| **Relationship Development:** Ability to build and sustain effective relationships both internally and externally. |
| **Self-Management:** Ability to work autonomously and flexibly to achieve the purpose of the position and the goals of the organisation.  |
| **Teamwork:** Ability to work with others to achieve goals. |
| **Treaty of Waitangi**: Knowledge of the principles of the Treaty and how these relate to the development of specific initiatives for Maori. |
| **Values**: Ability to conduct themselves in line with Tuwharetoa Health’s principles and values of Whanaungatanga **(Spirit of Family),** Manaakitanga (Spirit of Support) and Huhuatanga (Spirit of Service Excellence). |
| **Current Full New Zealand Driver License is essential.** |

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| **Position Specific Qualifications, Skills, and Experience** |
| Qualifications  | The New Zealand Certificate in Health and Wellbeing (Social and Community Services) (Level 4) or equivalent, or The New Zealand Certificate in Whanau Ora (Level 4) or equivalent, or a willingness to complete. |
| Knowledge, skills and experience | * Experience in supporting individuals and whanau to develop the skills and knowledge that will help them to successfully achieve their aspirations.
* An understanding of the New Zealand health and social service sector, and the role of government agencies.
* Knowledge of local community networks and providers.
* Knowledge of Maori models of health (e.g. Te Whare Tapa Wha) and experience implementing them.
* Knowledge of relevant Acts and Codes in the health and social services sector (e.g. Children’s Act, Privacy Act).
* The ability to plan and execute the implementation of a new programme of work, including gathering, recording, and disseminating information that will assist clients.
* Customer service skill and the ability to engage clients and whanau.
* Case management experience.
* Strong self-management skills.
* Excellent written and oral communication skills.
* Effective key board skills and a working knowledge of Microsoft Office and Office 365.
* Experience using an electronic client management system would be an advantage.
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| **Main Responsibilities** |
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| As required engage with whanau, establish a relationship, gain whanau consent and enrol for Housing Navigator services. |
| Conduct a baseline assessment of the whanau situation, identify the needs and aspirations, strengths and barriers and prioritise outcomes required for whanau. |
| Support whanau in the development of the skills that will help them to secure sustainable, long-term housing.  |
| Ensure whanau have positive social outcomes through being connected in their community. |
| Identify and engage with key stakeholders who can assist whanau in the development of the skills that will help them to secure sustainable housing. |
| Participate in communication opportunities including review meetings, clinic appointments and multi-disciplinary team meetings. |
| Reporting |

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| **Role Delegations** |
| Financial (limits/mandates etc.) – Nil |
| Staffing – No direct reports |

| **Main Responsibilities** | **Tasks – How it is achieved** |
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| As required engage with whanau, establish a positive relationship, gain whanau consent and enrolment for Tiwhana services. | * Receive referrals from the Integrated Services Case Manager (ISCM)
* Ensure contact is made with individuals and their whanau
* Multiple methods of culturally appropriate engagement are to be used.
* Enrolment and consent must be completed before support can be implemented. Ensure whanau are aware of their rights, and that privacy and confidentiality is fully explained as per Tuwharetoa Health policy.
* Issues with engagement are escalated to the ISCM and support is sought when necessary
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| Conduct a baseline assessment of the Whanau situation, identify the needs and aspirations, strengths and barriers and prioritise outcomes required for whanau | * Conduct an initial assessment.
* Develop and document a tailored integrated, strengths-based plan in conjunction with the whanau. This will include but is not limited to
	+ the support needed to address any health and social issues. This will include an understanding of the involvement of other agencies to support service integration
	+ the support needed for the whanau to move into sustainable long-term housing
	+ support the whanau to meet with MSD to ensure they are receiving full and correct entitlements, and complete a public housing assessment
* Give the whanau the chance to drive the process and share their aspirations and goals for the future
* Ensure all relevant information is shared with the whanau
* Ensure whanau are informed of their rights and choices with relation to service delivery
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| Support whanau in the development of the skills that will help them to secure sustainable, long-term housing.  | * Keep in regular contact with the whanau, walking hand in hand with them as they work towards achieving their goals and aspirations.
* Support the whanau to engage with other providers and community groups that will help them to develop the knowledge and skills they require, and to address any health and social needs.
* Ensure support and training is delivered or facilitated as required, including but not limited to
* Budgeting services and education
* General household education and advice including cooking, cleaning, and washing (life skills)
* Cultural connectedness
* Parenting support
* Access to education
* Access to health services
* Oranga Tamariki involvement
* Access to community service
* Childcare and early childhood education
* Transition to employment
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| Ensure whanau have positive social outcomes through being connected in their community | * Support whanau to establish links and participate in their local community.
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| Identify and engage with key stakeholders who can assist whanau in the development of the skills that will help them to secure sustainable housing. | * Networks with whanau, hapu, iwi are established and maintained through regular contact.
* Networks with health services, primary health, community groups and community providers are established and maintained through attendance at MDT meetings and local and regional health and social service groups.
* A list of key contacts is developed and maintained on a regular basis.
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| Participate in communication opportunities including review meetings, clinic appointments and multi-disciplinary team meetings. | * Actively participate as an advocate for whanau in review meetings, appointments, and MDT meetings.
* Whanau are supported to move easily between providers who are all contributing to their wellbeing.
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| Record keeping  | * Client records are maintained to a high standard in line with Tuwharetoa Health policies and the contractual requirements
* Data is collected and recorded in line with contractual requirements.
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| Reporting  | * Monthly service reports to the Leadership Team via Kaitataki or Service Manage.
* Quarterly narrative and numerical reports to the funder as per contract.
* All reporting is directed to the Kaitataki or Service Manager.
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