

NAVIGATION AND PEER SUPPORT HANDBOOK

United Way
British Columbia

TERRITORIAL ACKNOWLEDGEMENT

At United Way BC, we dedicate ourselves to fostering understanding, respect, and an acknowledgement of the rich history of the lands and waterways we traverse. Our mission guides us across vast and diverse territories, each with its unique tapestry of languages, governance systems, traditions, and cultural heritage. The relationship with these lands and waterways has been stewarded by Indigenous communities since time immemorial, long before the establishment of contemporary boundaries, and we humbly recognize that many of these territories remain unceded.

We also acknowledge that our list of Nations is a work in progress, a testament to our ongoing process of improving our learning and understanding. Our commitment is to honour the cultural distinctiveness of each community as we continue to pursue improved and lasting partnerships built on the foundations of respect, humility, and open dialogue.

Inclusion and equity for Indigenous communities and First Nations means addressing the inequities and injustices impacting First Peoples. There are 203 First Nations, 34 distinct languages, seven language families, and two isolated language families in the areas United Way BC serves.

View the communities in which we work here: Territorial Acknowledgement



WELCOME/INTRODUCTORY MESSAGE FROM THE UNITED WAY

Welcome to United Way British Columbia's Navigation and Peer Support Handbook.

At United Way BC, we are dedicated to fostering healthy, caring, and inclusive communities by strengthening vital connections that support those in need. Within our Healthy Aging department, we are committed to empowering older adults and Elders to age independently at home while remaining active, connected, and engaged in their local communities.

United Way BC Healthy Aging

Since 2012, United Way BC has worked alongside the Community-Based Seniors' Services (CBSS) sector, with support from the Government of British Columbia, to help older adults age in place and live healthy, connected and engaged lives. Today, United Way BC Healthy Aging supports more than 380 programs across the province that address a range of needs, including transportation, nutrition, social connection, caregiver support, physical and mental well-being, and access to community services and supports.

Navigation and Peer Support

United Way BC began supporting Navigation and Peer Support (NPS) as a standalone granting stream in 2021. In recognition of the value of this work, NPS funding was expanded to all Better at Home programs in 2024–25 and has since become a required service embedded within the Better at Home program. NPS helps older adults navigate government benefits, programs and services, access community-based supports, and overcome barriers that can make systems difficult to navigate independently.

As part of Better at Home, Navigators work closely with Better at Home Coordinators and other community partners to support older adults and strengthen connections across services.

Funder Acknowledgement

Healthy Aging programs are funded by the Government of British Columbia and managed by United Way British Columbia

Our Vision

A healthy, caring, inclusive community.

Our Mission

We strengthen vital connections that support people in need in our local communities. Healthy Aging Programs Healthy Aging programs are designed to help British Columbians remain active, connected, and engaged in their existing communities. Based on these simple essentials, Healthy Aging develops and supports a range of programs and activities that support seniors including the Better at Home program.

ABOUT THIS HANDBOOK

This handbook has been specifically drafted for Navigators, who provide critical supports that help individuals to meet the determinants of healthy aging. It serves as a comprehensive overview of Navigation and Peer Support programs, and can act as a training guide for Navigators and the agencies supporting them.

411 Seniors Centre Society and Navigation and Peer Support

To support the integration of NPS into Better at Home, United Way BC partnered with 411 Seniors Centre Society as the NPS backbone agency. Drawing on 411 Seniors' expertise in navigation, community resources and volunteer engagement, Better at Home programs received implementation support and shared promising practices and early learnings through a Community of Practice. This guide brings together those learnings and experiences from funded partners to support consistent and effective NPS delivery across the province. It provides practical guidance on NPS services, delivery models, roles and boundaries, service delivery practices, systems navigation and available resources.

United Way BC gratefully acknowledges 411 Seniors Centre Society for its leadership, expertise and guidance in drafting this handbook, as well as supporting the successful integration of NPS into Better at Home programs.

This handbook was written by Chloe Strauss of 411 Seniors Center with content and editing support from Lisa Cyr and Prabhraj Sandhu of United Way BC. Special thanks also go to Sogol Hosseini and Chloe Strauss for their support in the development of the Community of Practice and to all the agencies who participated in the Community of Practice calls, and who contributed to informing this handbook.

Contents

Territorial Acknowledgement **2**
Welcome/Introductory Message From The United Way **3**
About this Handbook **4**
1. Understanding Navigation and Peer Support **7**
What is Navigation and Peer Support? 7
The Navigator Role 8
What is Not the Navigator Role 9
The Importance of Clear Boundaries 9
NPS and Social Prescribing 10
Key Differences Between NPS and Social Prescribing 11
Working Together 12
2. NPS Models **13**
Volunteer-Based Model 14
Dedicated Navigator Model 14
Distributed Staff Model 14
Blended Community Connector and Navigator Role 15
Blended SHINE and NPS Navigator Role 15
Partner Delivery Model 16
Feature Model: Centralized Navigator and Program Intake 17
Brella Community Services: Referral to Service Delivery Process 18
3. Implementing a Volunteer-Based Model **19**
Benefits of Volunteer Navigators 19
Leveraging Volunteer Strengths 19
The 411 Volunteer Model 21
Staff Supervision and support for Volunteer Navigators 21
Volunteer Training and Onboarding 22
Consistent and Reliable Operations 23

4. The Navigation and Peer Support Process 24
The NPS Process 24
Determining the Level of Support 24
Core NPS Process 25
1. First Contact 25
2. Assessment 25
3. Providing NPS Services 26
4. Closure 28
5. Reporting 28
5. Navigating Common Systems and Supports 29
Guiding Practices for Systems Navigation 29
Common Systems and Supports: 30
Government Benefits and Income Taxes 30
Filing Income Taxes 30
Navigating Healthcare and Health Supports 31
Navigating Housing Supports 32
Navigating Safety Concerns 33
Confidentiality, Safety and Reporting 33
Navigating Community-Based Supports and Services 34
6. Resources 35
7. Appendix 36
Appendix 1: Gray Areas and How to Respond 36
Appendix 2: Form-Filling Examples 38
Appendix 3: Assistance with Communication Examples 39
Appendix 4: Systems Navigation Examples 40
Appendix 5: Example Agency NPS Intake and Referral Workflow 42

1. UNDERSTANDING NAVIGATION AND PEER SUPPORT

What is Navigation and Peer Support?

Navigation and Peer Support (NPS) helps older adults find, understand and access information, services and supports that can help them remain independent and connected in their communities. NPS can range from providing straightforward information and referrals to more hands-on assistance navigating complex systems, completing forms, communicating with service providers and overcoming barriers to access.

NPS may also incorporate peer support, where people draw on shared experiences or characteristics such as age, culture, caregiving experience or other life experiences to provide understanding, encouragement and practical support.

Understanding the differences between **Information and Referral, Navigation, and Peer Support** helps staff and volunteers determine the appropriate type of support, maintain clear role boundaries and report NPS services consistently.

	Information & Referral (I&R)	Navigation	Peer Support
What it is	Brief, accurate information that connects an older adult with an appropriate service or resource.	More hands-on, person-centred support to help an older adult understand and access services and navigate systems or barriers.	Support grounded in shared experiences or characteristics that provides understanding, encouragement and connection.
What it can look like	Identifying a service, providing contact information or explaining where to go for assistance.	Helping identify options, understand eligibility, complete forms, communicate with organizations, make referrals or work through barriers.	Listening, sharing relevant lived experience, offering encouragement and helping someone feel understood and less isolated.
Typical level of support	Usually brief and transactional.	May involve several steps or follow-up depending on the person's needs.	May be one-to-one or group-based and can be ongoing depending on the program or relationship.
Example	Providing an older adult with information about local food programs and how to contact them.	Helping an older adult identify benefits they may be eligible for, understand the application process and complete required forms.	An older adult with caregiving experience providing support and encouragement to another older adult who has recently become a caregiver.

The Navigator Role

NPS is typically delivered by a Navigator, who may be a staff member or volunteer depending on the organization's delivery model (see Section 2: NPS Models). Navigators work collaboratively with older adults to help them find, understand and access information, services and resources. Their role is to provide practical support while empowering older adults to make informed decisions based on their individual needs and priorities.

Navigation and peer support are complementary elements of NPS. Depending on the individual and their circumstances, the type and level of support provided may vary.

Navigator Duties and Responsibilities:

Navigators may support older adults through:

- **Information gathering and sharing** – helping identify and understand relevant programs, services, benefits and resources.
- **Form-filling assistance** – supporting older adults to understand and complete applications and other forms.
- **Assistance with communication** – helping older adults prepare for or communicate with service providers, government agencies and other organizations.
- **Referrals and connections** – connecting older adults with appropriate services and, where helpful, facilitating a supported connection/referral.
- **Problem solving** – working collaboratively with older adults to explore options and address barriers when a straightforward solution is not available.

These five elements are considered core NPS services.



What is Not the Navigator Role

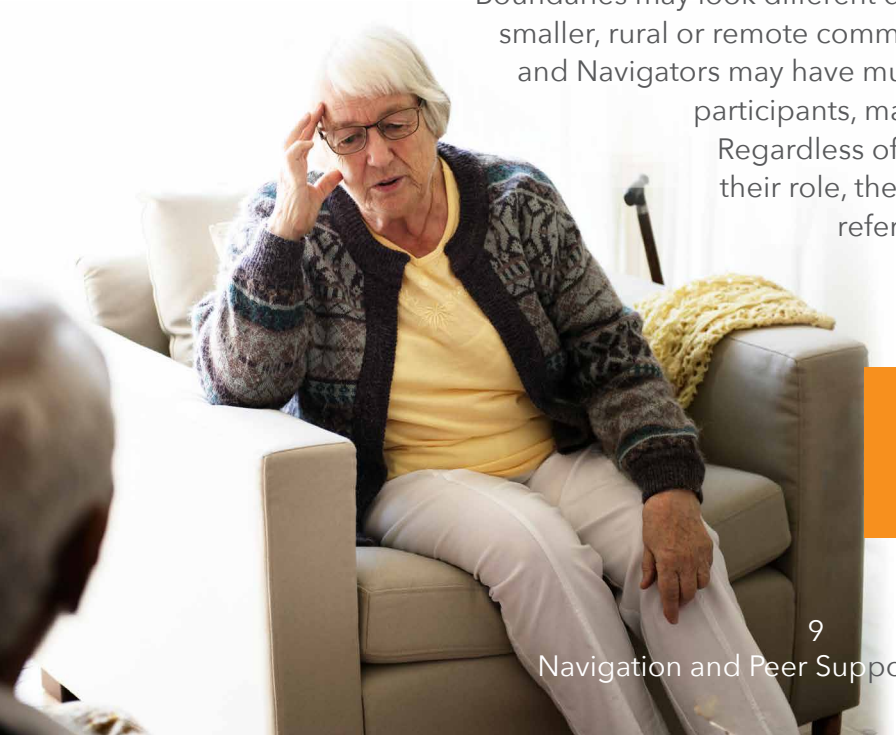
Older adults accessing NPS may have needs that extend beyond the scope of the program. Clear boundaries help ensure that Navigators provide appropriate, safe and sustainable support and recognize when another service or professional is needed.

NPS does not include:

- Case management or intensive, long-term support
- Counselling or therapy
- Legal, financial, medical or clinical advice or services
- Crisis intervention or emergency response
- Making decisions on behalf of an older adult
- Completing tasks or communicating on an older adult's behalf without their knowledge, consent and involvement
- Providing personal services, such as transportation, home care, errands or hands-on assistance with activities of daily living
- Lending or giving money or goods to participants

The Importance of Clear Boundaries

Clear boundaries are essential to effective NPS. While building trust and rapport is an important part of the Navigator role, support should remain consistent, appropriate and within the scope of NPS. Establishing clear expectations early helps older adults understand the Navigator's role and ensures they are connected to appropriate support when their needs extend beyond NPS.



Boundaries may look different depending on the community context. In smaller, rural or remote communities, where services may be limited and Navigators may have multiple roles or existing relationships with participants, maintaining boundaries can be more complex. Regardless of setting, Navigators should be clear about their role, the support they can provide and when a referral to another service is appropriate.

For practical examples of applying NPS boundaries, see Appendix 1: Gray Areas and How to Respond.

NPS and Social Prescribing

Healthy Aging funded partners may deliver both Navigation and Peer Support (NPS) and Social Prescribing (SP) within the same agency or community. Both are person-centred approaches that help older adults overcome barriers and connect with community services and supports. However, they differ in their primary purpose and approach.

NPS typically begins with an identified practical or system-navigation need, such as accessing benefits, completing an application, communicating with an organization or finding a specific service. The Navigator works with the older adult to understand the need, identify options and provide practical assistance.

Social Prescribing takes a broader, goal-based approach to health and well-being. A Community Connector works one-on-one with an older adult to understand what matters to them, identify goals, co-create a wellness plan and connect them with non-clinical community supports. Follow-up is provided to help address barriers and support participation.

Despite these differences, NPS and SP share important elements. Both emphasize individual choice, relationship-building, warm referrals and connections to community resources, and both may support older adults experiencing barriers related to income, social isolation, language, geography or other circumstances.

Example – Social Prescribing:
A family doctor refers an older adult experiencing isolation and anxiety to a Community Connector. Together, they identify the older adult's goals and develop a wellness plan that includes connections to a local walking group, transportation supports and grief counselling.

During their conversations, the older adult also shares that they are struggling to understand and access several health and government services. The Community Connector connects them with the local Navigation and Peer Support (NPS) program for more focused assistance with these needs.

The NPS volunteer helps the older adult understand their options, work through forms and service pathways, and identify appropriate resources. The Community Connector continues to support the broader wellness plan and follows up on the older adult's social connections and goals.

By working together, Social Prescribing and NPS provide complementary supports: the Community Connector maintains a holistic focus on the older adult's goals and wellbeing, while NPS provides additional navigation support where needed.

Key Differences Between NPS and Social Prescribing

Understanding the primary differences between NPS and SP can help providers determine the most appropriate support, coordinate services and report activities consistently.

Aspect	Navigation and Peer Support (NPS)	Social Prescribing (SP)
Primary purpose	Helps older adults address practical needs and navigate systems, services and resources.	Supports broader health and well-being through goal-setting, wellness planning and connections to non-clinical community supports.
Approach	Begins with an identified need and provides practical assistance such as information, form filling, communication support, problem solving and referrals.	Begins with what matters to the older adult and uses a co-created wellness plan to identify goals and appropriate community connections.
Delivery	Delivered by staff and/or volunteers, depending on the organization's NPS model.	Delivered by a Community Connector.
Referral pathways	May include self-referrals and referrals from community organizations, Community Connectors and other partners.	May include referrals from healthcare providers, community organizations and other community-based referral sources.
Follow-up	May include follow-up as needed to address the identified navigation need.	Includes follow-up to support progress toward goals, address barriers and support participation in the wellness plan.
Broader community role	Navigators contribute knowledge of participant needs, service barriers and gaps and may participate in community collaboratives.	Community Connectors support individual participants and play a defined role in strengthening community connections, referral pathways and collaboration.

Working Together

NPS and SP can complement one another, particularly when both are offered within the same organization or community. Clear roles and referral pathways help reduce duplication and provide a more seamless experience for older adults.

For example, a **Community Connector may refer to NPS** when an older adult needs practical assistance with a specific issue, such as completing a benefits or housing application. The Community Connector remains involved but the navigation piece or completion of the application forms part of a broader wellness plan.

Similarly, a **Navigator may refer to a Community Connector** when an older adult who initially seeks help with a practical issue identifies broader goals or needs that could benefit from ongoing connection to community supports. The Navigator can address the immediate navigation need and, with the older adult's agreement, connect them with the Community Connector.

Organizations delivering both services should establish clear internal referral pathways and encourage NPS Navigators and Community Connectors to share knowledge of local resources, participate in relevant community collaboratives, and build a common understanding of each program's scope and role. Cross-training on shared practices such as active listening, boundaries and warm referrals can further strengthen coordination while maintaining the distinct purpose of each service.



For more information about Social Prescribing:

For detailed guidance on Social Prescribing, including the Community Connector role, wellness planning, asset mapping and program implementation, refer to the **United Way BC Healthy Aging Social Prescribing Implementation Guide** and related training resources.



2. NPS MODELS

NPS delivery will look different across communities. Agencies may design their NPS model based on local needs, available staffing, existing programs and partnerships, and the realities of urban, rural and remote service delivery.

Common approaches include:

Model	How it works	Key consideration
Volunteer-based	Trained volunteers provide information, referrals, form-filling assistance and other NPS supports under staff supervision.	Requires strong recruitment, training, supervision and clear role boundaries.
Dedicated Navigator	An agency funds one or more staff positions primarily responsible for NPS delivery.	Provides a clear access point and allows staff to develop specialized navigation knowledge.
Distributed staff model	NPS responsibilities are shared across existing roles, such as coordinators, outreach workers or reception staff.	Requires consistent training and clear processes so NPS is delivered and reported consistently.
Blended or shared role	One staff member delivers NPS alongside another role, such as Social Prescribing or SHINE.	Staff must distinguish the scope, activities and reporting requirements of each role.
Partner delivery	A Better at Home agency flows NPS funding to one or more community partners to deliver services locally.	Requires clear agreements, coordination and consistent service expectations across partners.

Volunteer-Based Model

In a volunteer-based model, trained volunteers provide NPS services such as information and referral, form-filling assistance, communication support and connections to community resources. Staff or a volunteer coordinator provides training, supervision and support to ensure consistent service delivery and appropriate boundaries.

NPS in Practice: 411 Seniors Centre Society

411 Seniors Centre Society developed a volunteer-based approach that draws on trained volunteers to support older adults with navigation and information needs. The model demonstrates how volunteer skills and lived experience can expand an agency's capacity while maintaining staff oversight and clear service standards.

More detailed guidance on volunteer recruitment, training, supervision and scheduling is provided later in Section 3.

Dedicated Navigator Model

In this model, an agency funds one or more staff positions whose primary responsibility is to provide NPS. Referrals may come through other agency staff, Community Connectors, community partners or directly from older adults.

NPS in Practice: NexusBC Community Resource Centre

NexusBC delivers NPS through its *Connect* program, with dedicated Navigators supporting older adults with forms and applications, income concerns, government systems and referrals. Because NexusBC also delivers other Healthy Aging programs, Navigators can make internal referrals and connect participants with additional services available through the organization.

Distributed Staff Model

Some agencies integrate NPS responsibilities across several existing staff roles rather than assigning the work to a single Navigator. This can include Better at Home Coordinators, outreach staff, reception staff or other frontline positions that regularly serve as an initial point of contact for older adults.

This approach can create multiple access points for NPS, but agencies should ensure that staff receive consistent training and understand NPS scope, boundaries and reporting requirements.

NPS in Practice: Princeton Community Services

Princeton Community Services has embedded NPS throughout its Better at Home program. The Better at Home Coordinator identifies navigation needs during intake and supports older adults with referrals, applications and forms. Other frontline staff also draw on their knowledge of local resources to help identify needs and connect older adults with appropriate supports.

This integrated approach increases the number of staff able to identify and respond to navigation needs while making NPS part of the agency's broader service delivery.

Note: *Where staff hold multiple responsibilities, some activities may fall under another program or professional role rather than NPS. Agencies should ensure that activities are delivered and reported under the appropriate service or funding stream.*

Blended Community Connector and Navigator Role

In smaller, rural or remote communities, one staff member may hold both the Social Prescribing Community Connector and NPS Navigator roles. This can provide a streamlined experience for older adults and make efficient use of limited staffing capacity.

When roles are combined, staff must remain clear about which service they are providing and report activities under the appropriate program. The same service should not be counted under both NPS and Social Prescribing.

NPS in Practice: Boundary Family Services

Boundary Family Services combines its Community Connector and Navigator responsibilities within one full-time position. The staff member identifies whether an older adult requires NPS, Social Prescribing or both and delivers the appropriate support while maintaining separate reporting.

The model is particularly suited to the organization's rural service area, where one trusted point of contact can reduce the number of people an older adult needs to engage with while still providing access to multiple forms of support.

Blended SHINE and NPS Navigator Role

An agency that also delivers Seniors Housing Information and Navigation Ease (SHINE) may combine SHINE and NPS funding within a shared Navigator position. This allows the same staff member to respond to general navigation needs as well as more specialized housing concerns.

Because SHINE may involve more intensive housing navigation, case management and follow-up than NPS, agencies must distinguish which activities fall under each program.

NPS in Practice: Langley Senior Resources Society

Langley Senior Resources Society combines NPS and SHINE funding across three Navigator positions. Navigators can respond to both general navigation needs and housing-related issues, allowing older adults to work with fewer staff and reducing the need to repeat their circumstances to multiple providers.

The blended model also allows staff to share responsibility for complex housing cases while supporting participants with related concerns such as income security.



Partner Delivery Model

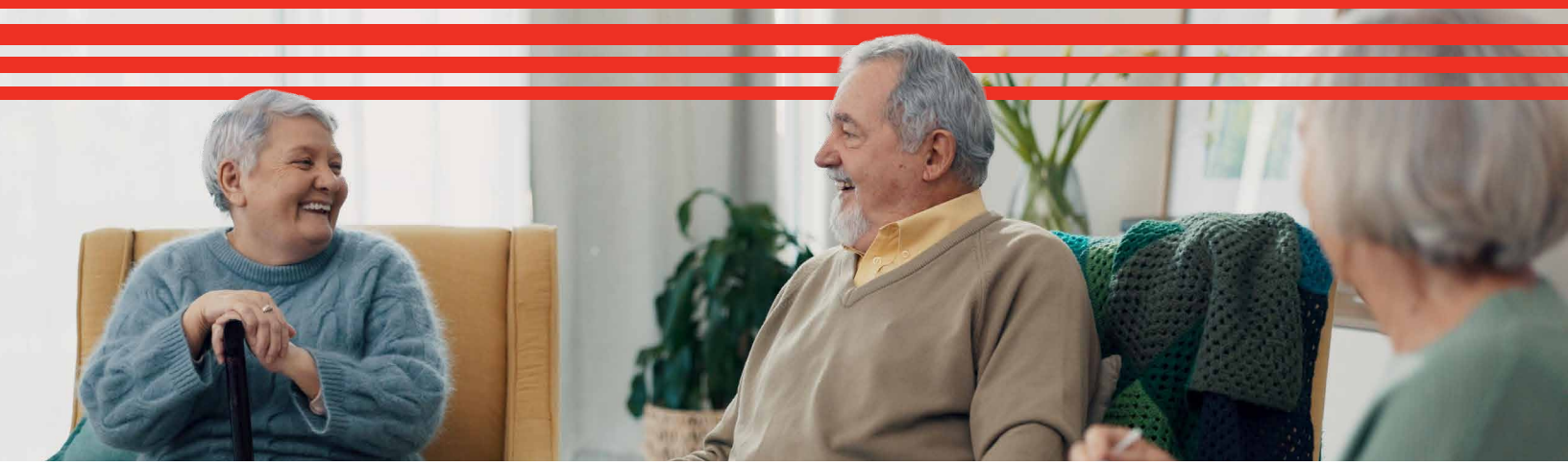
In some communities, a Better at Home agency may provide flow-through NPS funding to another community organization or to several partner agencies. This approach can extend NPS into communities where the lead agency may not have sufficient local presence or staffing.

Clear agreements should establish service expectations, training, referral processes, reporting and coordination among participating organizations.

NPS in Practice: Eagle Valley Community Support Society

Eagle Valley Community Support Society distributes NPS funding across partner organizations serving communities throughout its regional catchment. Rather than relying on one dedicated Navigator, participating agencies expand existing frontline roles to provide NPS locally.

The model creates multiple access points for older adults and strengthens relationships among partner organizations, supporting referrals between NPS, Better at Home, Social Prescribing and other community services.



Feature Model: Centralized Navigator and Program Intake

NPS in Practice: Brella Community Services

Brella has leveraged the NPS funding to create a single position that specializes in community resource navigation. As the "one-stop-shop" navigator, this individual also uses a centralized intake and referral form, that allows participants to have their immediate needs met, while also being placed on waitlists for other relevant programs.

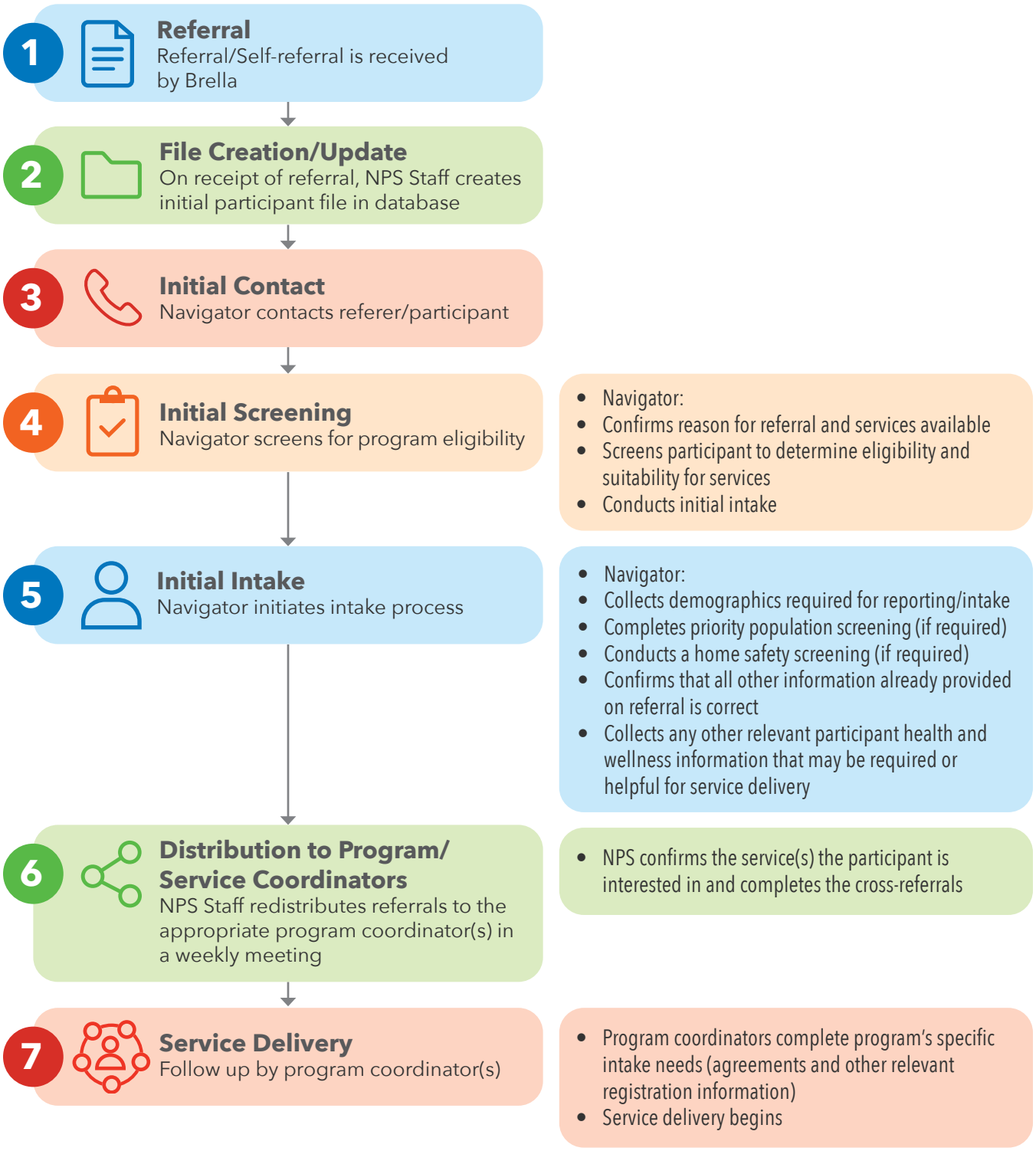
Benefits include:

- Increased efficiency of internal cross-program referrals though universal eligibility screening process, and as a result decreased time spent on inappropriate referrals;
- Increased staff time and capacity to support new and appropriate referrals;
- Ability to provide individualized services – less time doing general information and referrals;
- Reduced waitlist times for programs individuals don't want/need.
- Ability to waitlist participants for multiple programs simultaneously, allowing them to receive program services sooner for programs with shorter waitlists;
- Smoother experience for the participant.

Considerations:

- This model can imply a change in where numbers and services are captured for reporting purposes (ie. Community Connector doing less generic information and referral, but alternatively having more capacity to assist with complex navigation).
- Navigator may consult with program coordinators at any time regarding appropriateness of referrals or on how to navigate participant situations.
- Particularly challenging referrals can be directly given to program coordinators to follow-up/ conduct intake on if required.
- If NPS is overwhelmed with the number of referrals, Program Coordinators can step in to do the intake process themselves, prioritizing referrals designated for their program.

Brella Community Services: Referral to Service Delivery Process



3. IMPLEMENTING A VOLUNTEER-BASED MODEL

Volunteers can play an important role in NPS delivery by expanding organizational capacity and bringing diverse skills, lived experience and community knowledge to the Navigator role. For volunteers, the role can also provide meaningful opportunities to contribute their experience and build connections within their community.

A volunteer-based model is not required for NPS delivery. Agencies choosing this approach should ensure that volunteers receive appropriate training, supervision and ongoing support and that services are delivered consistently and within the scope of NPS.

Benefits of Volunteer Navigators

Peer connection: Volunteers, including older adult volunteers, may bring shared experiences that help build trust, understanding and rapport with participants.

Increased capacity: A team of trained volunteers can increase the number of people available to provide NPS and offer greater flexibility in responding to participant needs.

Diverse skills and experience: Volunteers may bring professional knowledge, lived experience, language skills, cultural knowledge and familiarity with community resources that can strengthen NPS delivery.

Team learning and support: Volunteer teams can share knowledge, resources and problem-solving strategies, strengthening the collective capacity of the NPS program.

Leveraging Volunteer Strengths

Agencies can make effective use of volunteer strengths by:

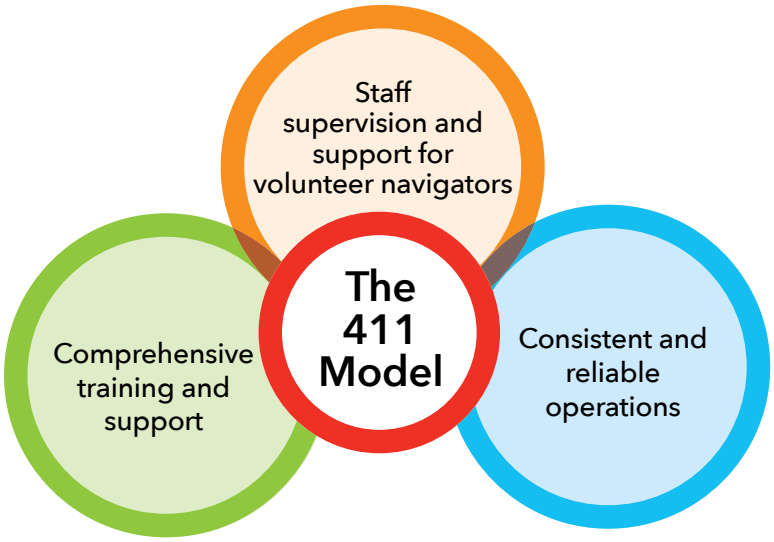
- matching volunteers with tasks appropriate to their skills, experience and comfort level;
- creating opportunities for volunteers to share resources and knowledge with one another;
- considering lived experience, language and cultural knowledge when matching volunteers and participants; and
- ensuring that all volunteers work within NPS scope and boundaries, regardless of their professional background or experience.

Volunteer background or strength	How it may support NPS
Finance or administrative experience	Helping older adults organize information, understand application requirements and complete forms related to income and government benefits.
Healthcare or caregiving experience	Helping older adults identify appropriate services, understand how to access them and prepare questions for service or healthcare providers.
Relevant lived experience	Providing peer support, sharing appropriate practical knowledge and helping participants feel understood and supported.
Language or cultural knowledge	Supporting culturally responsive communication and helping identify appropriate community-specific resources and services.

Important: A volunteer's professional or lived experience can strengthen their NPS role but does not expand the scope of NPS. Volunteers should not provide professional, clinical, legal or financial advice unless they are doing so through a separate authorized role within the organization.



The 411 Volunteer Model



411 Seniors Centre Society developed a structured volunteer-based approach to NPS that addresses some of the challenges associated with volunteer-led service delivery, including consistency, continuity and quality of support. The model emphasizes strong staff supervision, comprehensive training and reliable operating practices to ensure volunteers are well supported in their Navigator role.

The following sections outline key elements of this approach that agencies may consider when developing or strengthening a volunteer-based NPS model.

Staff Supervision and support for Volunteer Navigators

Staff supervision is essential in a volunteer-based NPS model. The supervisory role may be held by a Better at Home Coordinator, staff Navigator, Community Connector or another designated staff member, depending on the organization's structure. At 411 Seniors Centre Society, this responsibility sits with the Seniors Services Manager.

The designated staff member provides day-to-day program oversight, supports volunteers and helps ensure NPS services are delivered consistently and within program scope. Key responsibilities include:

- **Program oversight:** Coordinate day-to-day operations, including scheduling, service quality, and implementation of program procedures and protocols.
- **Volunteer management and support:** Recruit, train and provide ongoing support to volunteers. This includes being available to answer questions, problem-solve and debrief challenging situations.
- **Resource management:** Ensure volunteers have access to organized, current and reliable information and resources to support their navigation work.
- **Data collection and reporting:** Ensure required program data is collected and reported and use available information to identify trends and opportunities for program improvement.
- **Community connections:** Build and maintain relationships with community organizations and services to strengthen referral pathways and support warm referrals.

Volunteer Training and Onboarding

The 411 model emphasizes comprehensive onboarding and ongoing support so volunteers have the knowledge, skills and confidence needed to provide NPS. Training combines foundational learning, hands-on experience, peer learning and ongoing guidance from a staff supervisor.

United Way BC can also support agencies with volunteer recruitment and related resources. Additional resources are available through Healthy Aging CORE BC.

Step 1	Step 2	Step 3	Step 4	Step 5
Screening	**Access to core resources**	**Orientation**	**Hands-on learning**	**Ongoing Support**
Prospective volunteers participate in an informational interview. This step ensures volunteers understand the commitment involved, have realistic expectations for the role, and are a good fit for the position.	New volunteers receive the 411 Volunteer Manual and access to both online and printed resources about senior services, eligibility criteria, and common applications.	The NPS Coordinator or experienced volunteers review social service systems, communication techniques, and organizational procedures and protocols with new volunteers.	New volunteers shadow experienced volunteers/the NPS coordinator during client appointments. This provides practical experience, exposure to real client scenarios, and opportunities for peer learning.	The NPS Coordinator and experienced volunteers provide guidance, answer questions, and debrief complex cases. Volunteers develop their skills at regular meetings and trainings.

Step 1. Screening and expectations
Prospective volunteers participate in an informational interview with the NPS Coordinator. This step ensures volunteers understand the commitment involved, have realistic expectations of the role, and are a good fit for the position.

Step 2. Resources
New volunteers receive relevant organizational policies, volunteer materials, and access to the resources they will use in their role. These may include information about services for older adults, eligibility requirements, referral resources and commonly used applications and forms.

Step 3. Orientation and learning sessions
Volunteers receive orientation from the staff supervisor and/or experienced volunteers. Key areas include:

- **Systems and services:** An introduction to common systems Navigators may encounter, including income and benefits, housing, healthcare and community-based supports.

- **Communication skills:** Active listening, empathy, person-centred communication and strategies for supporting older adults without taking over.
- **NPS scope and boundaries:** Understanding the Navigator role, when to seek assistance and when another service or professional is required.
- **Policies and procedures:** Intake processes, confidentiality, information management, code of conduct and other relevant organizational requirements.

Step 4. Shadowing and hands on learning
Before providing NPS independently, new volunteers shadow experienced volunteers or staff during appointments where appropriate. This provides an opportunity to observe NPS in practice, apply learning to real situations and build confidence with support from the team.

Step 5. Ongoing support during independent service
Once volunteers begin providing NPS independently, staff supervision and opportunities for peer learning should continue. Volunteers should know who to contact when they have questions or encounter situations outside their knowledge or role.

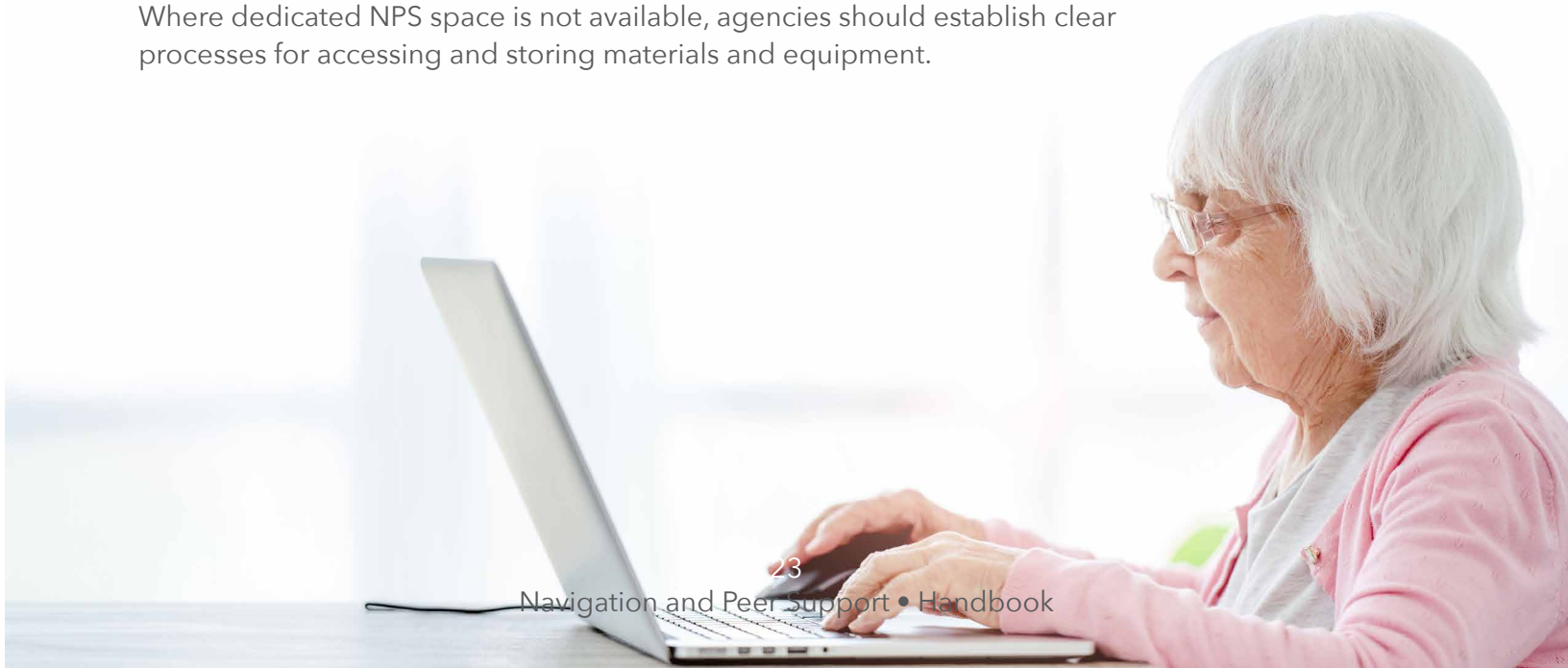
Regular check-ins and volunteer meetings can also provide opportunities to share resources, discuss emerging issues and service trends, reinforce boundaries and support continued learning.

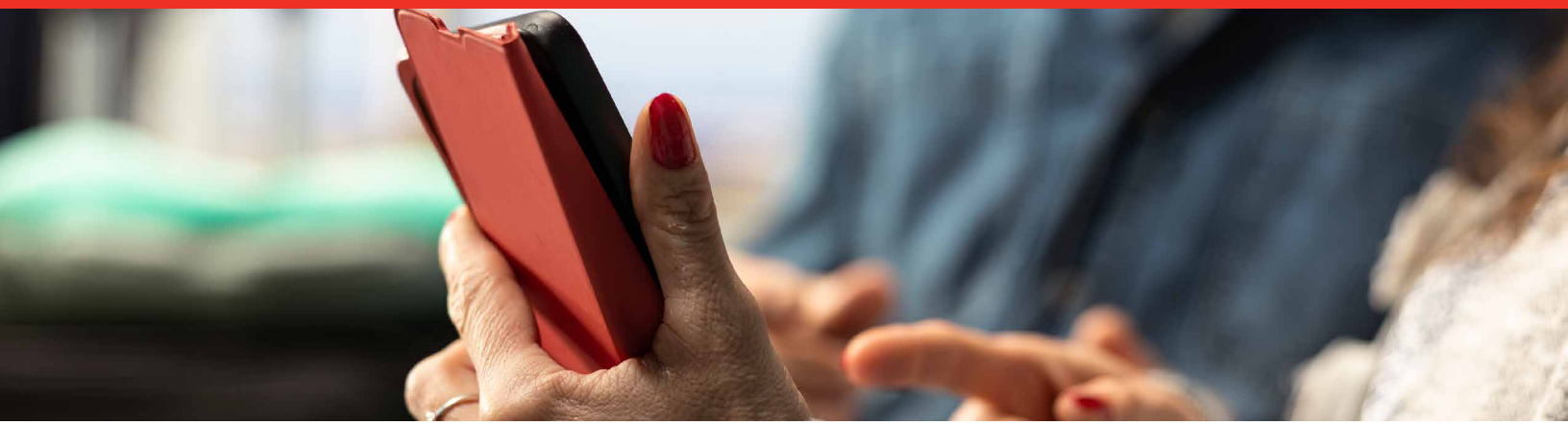
Consistent and Reliable Operations

Volunteer-based NPS also benefits from predictable processes and easy access to the tools and resources needed to provide consistent service.

Scheduling: Where possible, establish regular volunteer shifts and consistent schedules. This can improve service continuity and make it easier for older adults to know when NPS is available.

Space and resources: Ensure volunteers have reliable access to appropriate workspace, phones, computers, current resource information and other tools required for their role.
Where dedicated NPS space is not available, agencies should establish clear processes for accessing and storing materials and equipment.





4. THE NAVIGATION AND PEER SUPPORT PROCESS

The NPS Process

The NPS process provides a consistent, person-centred approach to helping older adults identify their needs, explore options and access appropriate services and supports.

NPS may involve a single interaction or several interactions, depending on the participant's needs and the level of support required. The same core process can be applied whether support is provided in person, by phone, virtually or, where appropriate, by email.

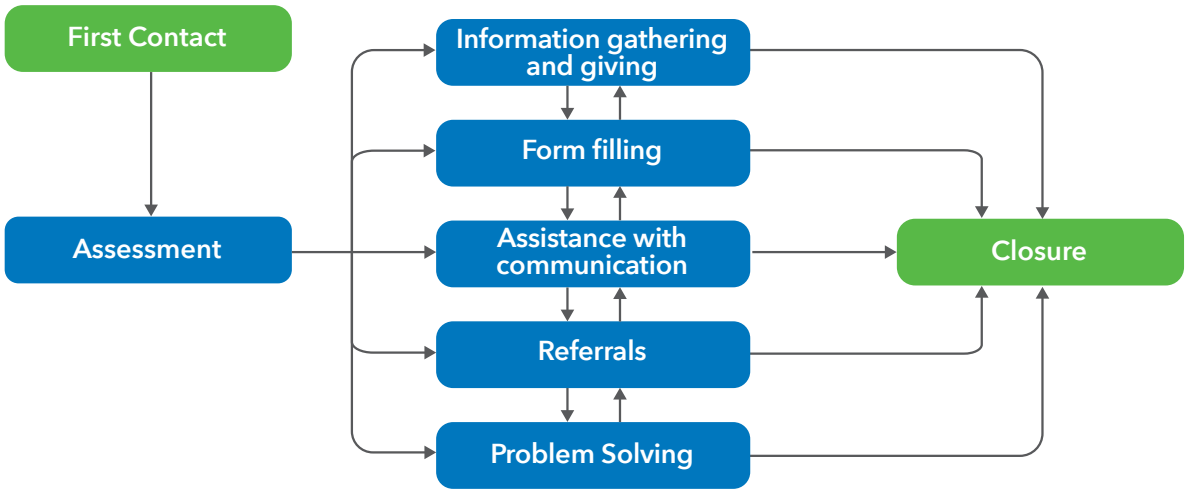
Determining the Level of Support

The amount and duration of NPS support will vary according to the participant's needs:

Participant need	NPS approach
Straightforward need	Identify the need, provide appropriate information or assistance, and determine whether any follow-up is required.
More complex need	Identify the need, determine appropriate next steps and provide navigation support. Follow up as needed.
Multiple needs	Identify the different needs, work with the participant to determine priorities, and address them in manageable steps. Follow up or connect with other supports as appropriate.

NPS should remain responsive to the individual rather than follow a predetermined number of meetings. Throughout the process, Navigators work collaboratively with the older adult, respect their choices and autonomy, and recognize when a need requires support beyond the scope of NPS.

Core NPS Process



1. First Contact

Welcome the participant, introduce yourself and your role, and briefly explain NPS and the types of support available. Use a warm, respectful approach to build rapport and establish clear expectations about the Navigator's role before exploring the participant's needs.

2. Assessment

Assessment helps the Navigator understand what the participant is seeking support with, what matters most to them, and what information or assistance may be appropriate. Assessment begins with the initial conversation but may continue as new information or needs emerge.

Use active listening and respectful questioning, avoiding assumptions about the participant's circumstances or priorities. Participants should understand why information is being requested and may choose not to answer questions.

Effective assessment includes:

- **Active listening**: Give the participant time to explain their situation and priorities.
- **A non-judgemental approach**: Recognize individual strengths, circumstances and choices.
- **Cultural awareness**: Be responsive to cultural differences and avoid assumptions.
- **Respectful questioning**: Use questions relevant to the participant's needs and explain why information is being requested.
- **Clarification**: Summarize or paraphrase key information to confirm understanding.

Priority population screening: Priority population screening is not required to receive NPS. If a participant is referred to another Healthy Aging or Better at Home service, that program's eligibility and screening requirements may apply.

Assessment Questions

Assessment should be conversational rather than a checklist. A combination of open- and closed-ended questions can help identify the participant's needs, existing supports and potential barriers. Questions should be tailored to the reason the participant is seeking support.

Open-ended questions can help begin the conversation:

- What brings you in today?
- What would you like some help with?
- Can you tell me more about what has been happening?
- What have you tried so far?
- What would be most helpful to you right now?

More specific questions can then be used when relevant to understand eligibility, existing supports or barriers. These might explore:

- income and benefits;
- housing;
- healthcare and medications;
- family, friends and other supports;
- access to technology;
- transportation; or
- support with activities at home.

Only ask for information that is relevant to understanding the participant's needs or identifying appropriate options.

Together, the Navigator and participant can use the information gathered to determine appropriate next steps.

3. Providing NPS Services

Once the participant's needs and priorities are understood, provide the NPS service or combination of services that is appropriate to their situation. There is no required sequence or minimum number of services.

Information Gathering and Sharing

Help the participant identify reliable information, programs and resources relevant to their needs. This may include government and community services, Healthy Aging programs or other local supports.

Explain available options clearly so the participant can make informed decisions about what they would like to pursue.

Form-Filling Assistance

Navigators may support participants with applications for benefits, programs and services, online or on paper.

Review relevant eligibility requirements and ensure the participant understands what they are applying for and consents to proceeding. Where possible, provide confirmation that an application has been submitted and information about any required follow-up.

See Appendix 2: Form-Filling Examples for additional guidance.

Assistance with Communication

Navigators may help participants prepare for or communicate with government agencies, service providers and other organizations. This could include helping to prepare questions or correspondence or supporting a participant during a phone call.

The participant should remain informed and involved, and consent should be obtained before communicating with another organization on their behalf.

See Appendix 3: Assistance with Communication Examples.

Referrals and Connections

When another organization or service is better positioned to address a participant's needs, help them identify appropriate options.

Provide enough information for the participant to make an informed choice, including relevant eligibility requirements and how to access the service. Where appropriate and with the participant's consent, facilitate a warm referral by helping make the initial connection.

Problem Solving

Sometimes an appropriate service or straightforward solution may not be available. In these situations, work collaboratively with the participant to explore alternatives, existing strengths and supports, and possible next steps.

Acknowledge the participant's experience while remaining clear about what NPS can and cannot provide.

4. Closure

Before ending the interaction:

- summarize what was discussed and any actions taken;
- confirm the participant understands information, referrals and next steps;
- ensure they have relevant documents, contact information or application details; and
- determine together whether follow-up is needed.

Where no further NPS support is required, ensure the participant knows how to reconnect with the program if another navigation need arises.

5. Reporting

Agencies should maintain an appropriate system for tracking NPS participants and services in accordance with United Way BC reporting requirements. Funded agencies may use iUnite, which supports the transfer of data to the Salesforce reporting platform, or another system that meets program reporting requirements.

A participant who receives at least one NPS service during the reporting period should be captured as a unique participant in accordance with current reporting definitions. Agencies should have a method for recognizing returning participants and accurately tracking the services they receive.

Current reporting guidance and learning opportunities are available through the Better at Home group on CORE BC and through regional United Way BC Healthy Aging staff.



5. NAVIGATING COMMON SYSTEMS AND SUPPORTS

Navigators may support older adults to understand and access a range of government, health, housing and community services and benefits. Navigators are not expected to have expert knowledge of every system. Their role is to help participants find accurate, current information, understand their options and connect with the appropriate service or organization.

Because programs, eligibility requirements and processes can change, Navigators should use reliable sources and confirm current information rather than relying solely on previous knowledge or experience.

The following sections provide practical guidance for navigating some of the systems and supports commonly encountered through NPS.

Guiding Practices for Systems Navigation

Effective systems navigation does not require knowing every program or process. It requires knowing **where to find reliable information, how to identify appropriate options, and when to connect with others who have greater expertise.**

Use reliable, current information: Start with official government and service-provider websites when confirming programs, eligibility requirements and application processes. Use trusted directories and resource databases, such as 211, to identify additional services and supports.

Know your local community: Become familiar with local organizations and resources, including smaller services that may not be widely advertised. Local knowledge is particularly important in rural and remote communities where available supports and access pathways may differ.

Build relationships and referral pathways: Develop connections with organizations you refer to regularly. Understanding their services, eligibility requirements and referral processes can support more effective warm referrals and reduce unnecessary hand-offs for participants.

Keep useful contacts and resources accessible: Maintain current contact information, resource lists and commonly used navigation tools so they are readily available when supporting participants.

Set realistic expectations: Some systems involve long wait times, processing delays or multiple steps. Explain what the participant can expect, including possible timelines and follow-up requirements, without promising an outcome or timeframe that is outside your control.

Plan for communication and accessibility needs: Identify barriers that may affect a participant's ability to navigate a service, including language, disability, literacy, technology or communication needs, and explore appropriate supports or accessible alternatives.

Know when to seek help: When information is unclear, a situation is particularly complex or a participant requires expertise beyond the NPS role, consult a supervisor or connect with an appropriate organization or professional rather than trying to resolve the issue independently.

Common Systems and Supports:

Government Benefits and Income Taxes

Navigators may help older adults understand and access federal and provincial income, tax and benefit programs. This can include identifying potential benefits, understanding eligibility and application requirements, completing forms, addressing issues with existing benefits, and communicating with government departments.

Three government bodies Navigators may commonly encounter are:

Government body	Role	Examples of programs and supports
Canada Revenue Agency (CRA)	Administers federal taxes and a range of tax credits and benefits.	GST/HST Credit, Disability Tax Credit (DTC), caregiver-related tax credits and Home Accessibility Tax Credit
Service Canada	Provides access to many federal government programs and benefits.	Canada Pension Plan (CPP), Old Age Security (OAS), Guaranteed Income Supplement (GIS), CPP Disability and Canadian Dental Care Plan
BC Ministry responsible for income and disability assistance	Administers provincial income and disability assistance and related supports.	Income Assistance, Disability Assistance and the BC Bus Pass Program

Navigation tip: Program names, eligibility requirements, benefit amounts, and application processes can change. Navigators should confirm current information through official government sources rather than relying solely on resource lists or previous experience.

Filing Income Taxes

Filing an income tax return can be important for accessing and maintaining government benefits, tax credits and other income-tested programs. When relevant to a participant's navigation needs, Navigators should consider whether their tax filing is up to date and connect them with appropriate tax-filing support if needed.

Older adults with modest incomes and simple tax situations may be eligible for free tax-filing assistance through the **Community Volunteer Income Tax Program (CVITP).** Organizations may also consider partnering with a CVITP provider or becoming a participating organization to make tax-filing assistance more accessible to older adults.

Where tax-filing services are offered alongside NPS, agencies should ensure that tax preparation is provided through the appropriate program and by trained volunteers or staff. Tax preparation itself is not a core NPS service.

See Appendix 4 for a sample case.

Navigating Healthcare and Health Supports

Navigators may help older adults understand and access healthcare coverage, programs and community-based health supports. This may include identifying appropriate services, understanding eligibility and referral requirements, completing applications, and connecting participants with health authorities or other service providers.

Navigators do not provide medical or clinical advice. Their role is to help participants understand available options and navigate access to appropriate services.

Program or system	What it provides	Examples
Medical Services Plan (MSP)	BC's public health insurance program covering medically required services for eligible residents.	Physician and specialist services and other insured healthcare services
Fair PharmaCare	Income-based assistance with eligible prescription drug costs.	Coverage toward eligible prescription medications and dispensing fees
Canadian Dental Care Plan (CDCP)	Federal dental coverage for eligible individuals who meet program requirements.	A range of eligible oral health services
Regional Health Authorities	Deliver and coordinate publicly funded health services within their regions.	Home and community care, home support, assisted living, long-term care and mental health services
Community organizations and non-profits	May provide or help connect older adults with health-related supports that are not fully covered through public programs.	Medical equipment, mobility supports, hearing and vision supports, foot care and counselling

Many healthcare supports require registration, referrals, or assessments. Navigators can play a key role in helping participants understand eligibility, complete applications, and connect with the appropriate Health Authority or program.

See Appendix 4 for a sample case.

Navigating Housing Supports

Navigators may help older adults identify housing options, maintain existing housing and access financial or community supports related to housing. Housing navigation can involve complex eligibility requirements, applications, waitlists and tenancy issues, and available options vary considerably by community.

The Navigator's role is to help participants understand their options, access reliable information and connect with appropriate housing or specialized services.

Type of support	Examples	How it may help
Housing navigation	Seniors Housing Information and Navigation Ease (SHINE)	Provides specialized housing navigation and connections to housing-related and wraparound supports.
Subsidized and affordable housing	BC Housing and non-profit housing providers	Provides access to subsidized, affordable and supportive housing options. Eligibility, application processes and wait times vary.
Rent assistance	Shelter Aid for Elderly Renters (SAFER) and other eligible rent supports	May help eligible older renters with the cost of private-market rent.
Supports to remain at home	Better at Home and accessible home adaptation programs	May help older adults maintain independence at home through non-medical supports or eligible accessibility modifications.
Homeowner financial supports	Property tax deferment programs	May help eligible homeowners manage property-tax costs and remain in their homes.
Tenancy information and disputes	Residential Tenancy Branch	Provides information about residential tenancy rights and responsibilities and access to dispute-resolution processes.
Housing instability or homelessness	Local homelessness services, emergency shelters and housing outreach programs	May provide immediate or short-term support and connections to longer-term housing resources.

Navigation tip: Housing options, eligibility requirements and availability can change frequently. Navigators should confirm current information and avoid promising that a particular housing option, placement or financial support will be available.

When a participant requires specialized housing advocacy, legal advice, intensive case management or emergency housing support, connect them with an appropriate service rather than taking on these functions within the NPS role.

Navigating Safety Concerns

Navigators may encounter older adults experiencing abuse, neglect, financial exploitation, unsafe living conditions, gender-based violence or other safety concerns. The Navigator's role is to listen without judgement, provide information about available supports and help the participant connect with appropriate services while respecting their autonomy and choices.

Depending on the situation, appropriate resources may include emergency services, crisis and support lines, specialized abuse or violence services, legal resources, safe housing, health and social services, and community-based supports.

Navigators should not investigate allegations of abuse or attempt to provide crisis intervention or specialized safety services themselves.

Confidentiality, Safety and Reporting

Participants should be informed about confidentiality and any limits to confidentiality that apply to the NPS service. Older adults should be supported to make their own decisions wherever they are able to do so, including decisions that others may not agree with.

When a Navigator becomes concerned about a participant's safety, they should:

- listen and respond without judgement;
- avoid investigating or making assumptions about what has occurred;
- explain any applicable limits to confidentiality;
- involve the participant in decisions and next steps wherever possible;
- consult their supervisor and follow organizational policies and procedures; and
- connect with emergency, designated or specialized services when required.

Where there is an immediate safety emergency, follow the organization's emergency procedures and contact the appropriate emergency service.

Where there are concerns about abuse, neglect or self-neglect involving an adult who may be unable to seek support and assistance independently, Navigators should consult their supervisor and follow applicable organizational procedures regarding Designated Responders and other appropriate services.

Important: Organizations should ensure that their NPS policies and staff/volunteer training clearly address confidentiality, safety concerns, emergency situations, adult abuse and neglect, and when and how to involve a Designated Responder. Navigators should follow organizational policy and current legal requirements rather than making these determinations independently.

Navigating Community-Based Supports and Services

Community-based organizations provide a wide range of services and supports that can complement government programs and respond to local needs. Available services vary by community and may change over time, so Navigators should confirm that programs are current and accepting referrals before connecting a participant.

Navigators can identify local resources through trusted directories such as 211, local community organizations and established community networks. Community Connectors may also be a valuable source of local knowledge and may have access to a Community Asset Map identifying services, resources and community strengths.

Examples of community-based supports include:

United Way BC Healthy Aging programs: Community-based programs supporting older adults to remain independent, connected and engaged. Depending on the community, these may include Better at Home, Social Prescribing, Therapeutic Activation Programs for Seniors (TAPS), Family & Friend Caregiver Supports, Social Meals, transportation supports and other Healthy Aging initiatives.

BC Community Response Networks: The BC Association of Community Response Networks (BCCRN) supports local Community Response Networks across the province to increase awareness and strengthen community responses to adult abuse, neglect and self-neglect. Local CRNs can be an important resource for organizations seeking information, education and connections related to adult safety.

Legal information and services: Legal clinics, advocacy organizations and other services that may assist with issues such as housing, benefits, planning, adult abuse and immigration matters.

Food and nutrition supports: Community meals, food banks, grocery programs and other initiatives supporting access to affordable and nutritious food.

Newcomer and culturally specific services: Settlement, language, cultural and community organizations that can help older adults access services in ways that reflect their language, culture and circumstances.

Indigenous-led services and supports: Indigenous organizations and service providers offering culturally grounded programs, resources and connections for Indigenous older adults and Elders.

Navigation tip: Local knowledge is an important part of effective NPS. Build relationships with community organizations and keep local resource information current rather than relying solely on static resource lists.

6. RESOURCES

Resource	How it can help Navigators
BC 211	Searchable information about community, social and government services across BC. Navigators can also connect with 211 for assistance identifying appropriate resources.
Benefits Finder – Government of Canada	Online tool that helps identify federal and provincial benefits and financial supports that may apply based on an individual's circumstances.
BC Seniors' Guide	Provincial guide covering programs and services for older adults, including benefits, healthcare, housing, transportation, finances and safety.
SeniorsBC	Provincial information portal for programs, services and resources related to older adults and healthy aging in BC.
Office of the Seniors Advocate BC	Information, reports and resources related to issues affecting older adults and the services and systems they rely on.
Seniors First BC	Legal information, advocacy and support for older adults, including resources related to abuse and neglect.
Seniors Services Society of BC – Housing Resources	Information and tools to help older adults explore seniors' housing options and housing-related supports in BC.
Service Canada	Information and access to federal programs and benefits, including CPP, OAS and GIS.

7. APPENDIX

Appendix 1: Gray Areas and How to Respond

The following scenarios highlight situations that may feel unclear. In these cases, focus on empowering the individual, maintaining boundaries, and seeking supervisor support when needed.

Scenario 1: "Can you call for me, without me?"

An older adult asks you to phone Service Canada and handle everything for them because they feel overwhelmed.

Appropriate: Call together, put the phone on speaker, or coach them through the conversation.

Not appropriate: Calling alone and acting on their behalf without their knowledge or consent.

Scenario 2: "Can you fill out this form for me?"

An individual brings an application and asks you to complete it.

Appropriate: Support them by explaining questions, typing, or writing what they tell you, and reviewing together.

Not appropriate: Completing the form independently or guessing answers for them.

Scenario 3: "Can you give me a ride?"

A participant asks for transportation to an appointment.

Appropriate: Help arrange transportation options (HandyDART, bus pass programs, volunteer drivers, family supports).

Not appropriate: Providing rides in your personal vehicle.

Scenario 4: "What should I do legally?"

An older adult asks whether they should sue their landlord.

Appropriate: Provide information about tenant rights and refer to legal supports.

Not appropriate: Giving legal advice or recommending a specific course of legal action.

Scenario 5: Emotional distress

An individual shares that they feel lonely and overwhelmed and spends much of the meeting talking about personal struggles.

Appropriate: Listen empathetically, validate feelings, and offer referrals to counselling or mental health supports if needed.

Not appropriate: Providing therapy or ongoing emotional counselling.

Scenario 6: Ongoing complex needs

An older adult returns weekly for many months with multiple unresolved issues.

Appropriate: Provide time-limited support, prioritize needs, and connect them to longer-term services or case management programs.

Not appropriate: Becoming their sole or indefinite support person.

Appendix 2: Form-Filling Examples

Navigators may assist participants with applications and forms while ensuring that the participant understands what they are applying for and remains involved in the process. The level of assistance will vary depending on the form and the participant's needs.

Canada Dental Care Plan

A Navigator may support a participant applying for the Canada Dental Care Plan by:

- helping locate the current application information;
- explaining available application options;
- assisting the participant to understand and complete their portion of the application; and
- helping identify any information or documentation they may need.

Shelter Aid for Elderly Renters (SAFER)

A Navigator may support a participant applying for SAFER by:

- helping locate the current application and eligibility information;
- reviewing the application requirements with the participant;
- assisting with completion of the participant's portion of the application; and
- helping identify and organize required supporting documentation.

Disability Tax Credit

Some applications require information or certification from a qualified professional. For example, a Navigator supporting a participant with a Disability Tax Credit application may:

- help locate the current application and instructions;
- explain the application process and required steps;
- assist the participant with their portion of the application; and
- help the participant prepare to request completion of the appropriate section by their healthcare provider.

Navigators should not complete or provide information on behalf of a healthcare or other qualified professional. Where an application requires professional certification, help the participant understand who must complete that portion and what steps they need to take.

Remember: Form-filling assistance means supporting the participant through the process—not making decisions for them, providing professional advice or completing sections that must be completed by another authorized person.

Appendix 3: Assistance with Communication Examples

Navigators may help participants prepare for and communicate with government agencies, service providers and other organizations. Wherever possible, the participant should remain involved in the communication and understand what information is being shared.

Federal Income Benefits

Situation: An older adult's federal income benefits have been interrupted following a late tax filing.

NPS support: Help the participant identify appropriate tax-filing assistance. Once the return has been filed, support them in contacting Service Canada to understand what steps are required to have their benefits reinstated.

Unexpected Phone Charge

Situation: A participant believes they have been incorrectly charged on their phone bill.

NPS support: Help the participant review the bill, prepare questions and contact the service provider to understand the charge and discuss available options.

Information Required from a Healthcare Provider

Situation: An older adult requires information from a healthcare provider to complete a benefits application.

NPS support: Help the participant draft a brief request explaining what information is required and identify the appropriate healthcare provider to complete it.

Housing Repair

Situation: A participant's stove is not working, and their landlord has not responded to a request for repair.

NPS support: Help the participant prepare written communication describing the problem, documenting previous requests where relevant, and asking the landlord to respond regarding next steps.

BC Housing Application

Situation: A participant has a question about an existing BC Housing application.

NPS support: Help the participant prepare their question and support them in contacting BC Housing to obtain the information they need.

Appendix 4: Systems Navigation Examples

The following examples illustrate how Navigators may combine different NPS services to help participants navigate common systems and supports.

Example 1: Income Benefits and Taxes

Situation: Mrs. K, age 72, notices that her monthly income has decreased and is concerned about paying for rent and groceries. Through their conversation, the Navigator learns that she did not file her previous year's income tax return and that her Guaranteed Income Supplement (GIS) has stopped.

NPS response: The Navigator helps Mrs. K connect with a free tax clinic through the Community Volunteer Income Tax Program (CVITP) and identify the documents she will need. Once her tax return has been filed, the Navigator supports her in contacting Service Canada to determine the steps required to have her GIS reinstated.

The Navigator also helps Mrs. K identify whether there are other benefits or income supports she may be eligible to apply for.

NPS services demonstrated: Information gathering and sharing, assistance with communication, referrals and problem solving.

Example 2: Healthcare and Supports at Home

Situation: Mr. L, age 79, is experiencing increased difficulty with household and daily activities because of reduced mobility. He is unsure what services or supports may be available.

NPS response: The Navigator helps Mr. L identify appropriate health and community services and understand how to access them. This includes helping him connect with his regional health authority to inquire about an assessment for home and community care services.

The Navigator also helps Mr. L explore other relevant supports, including Fair PharmaCare, Better at Home and community resources for mobility equipment. Where applications are required, the Navigator provides appropriate form-filling or referral assistance.

NPS services demonstrated: Information gathering and sharing, form-filling assistance, referrals and problem solving.

Example 3: Housing Supports

Situation: Ms. R, age 68, receives notice of a rent increase that she is concerned she cannot afford. She wants to understand her options and explore more affordable housing.

NPS response: The Navigator helps Ms. R locate Residential Tenancy Branch information about rent increases and identify where she can obtain further assistance if she has questions about her rights or dispute-resolution options.

The Navigator also helps her explore potential financial and housing supports, including SAFER and subsidized housing, and connects her with SHINE for specialized housing navigation. Depending on her circumstances and local availability, other housing-stability resources may also be explored.

NPS services demonstrated: Information gathering and sharing, form-filling assistance, referrals and problem solving.

Appendix 5: Example Agency NPS Intake and Referral Workflow

The following example illustrates how one organization has integrated NPS into its broader intake and referral process. It is provided as an example rather than a required NPS workflow. Agencies should adapt their processes to their organizational structure, programs, community context, and reporting requirements.

Step	Stage Name	Summary	Breakdown
1	Referral	Referral/Self-referral is received by Brella	
2	Participant File Creation/ Update	On receipt of referral, NPS Staff creates initial participant file in database	
3	Initial Contact	Navigator contacts referee/ participant	
4	Initial Screening	Navigator screens for program eligibility	Navigator confirms reason for referral and services available Navigator screens participant to determine eligibility and suitability for services Navigator conducts initial intake
5	Initial Intake	Navigator initiates intake process	Navigator collects demographics required for reporting/intake Navigator completes priority population screening (if required) Navigator conducts a home safety screening (if required) Navigator confirms that all other information already provided on referral is correct Navigator collects any other relevant participant health and wellness information that may be required or helpful for service delivery

Step	Stage Name	Summary	Breakdown
6	Distribution to Program/ Service Coordinators	NPS Staff redistributes referrals to the appropriate program coordinator(s) in a weekly meeting	NPS confirms the service(s) the participant is interested in and completes the cross-referrals
7	Service Delivery	Follow up by program coordinator(s)	Program coordinators complete program's specific intake needs (agreements and other relevant registration information) Service delivery begins