

# Job Description

Job Title	Lead Service Coordinator – Career MAP
Department	Center for Financial Inclusion
Reports to	Associate Program Director
Work Location	2901 14th Street NW, Washington, DC
Position Type	Regular, Full-time
Exemption Status	Exempt
Date	April 2024
Salary	\$68,000 - \$70,000 based on experience and credentials

### **General Summary**

The Greater Washington Urban League offers a Family Work & Wellness Accelerator Program to assist approximately 300 families who have experienced homelessness and who may have recently exited a rapid rehousing program. We provide critical services in career advancement, financial empowerment, family support, and housing stabilization. The program was developed in partnership with FHI 360 to provide an integrated solution for career navigation and coaching services that put the voices of participating families at the center of design, care, and support.

The Lead Service Coordinator will spend their time completing daily programmatic requirements and leading a team of Service Coordinators. The Lead Service Coordinator will also support their caseload/members while coordinating the overall care of each assigned head of household and their family members. This role requires leading a team while providing guidance and oversight of program service delivery. Some administrative duties are aligned with this role based on the request of your assigned team, the assigned members on their caseload, and/or on their behalf. This role also requires the ability to assess members' individual and family needs and maintain support for all members of the household not limited to linkage to the available services and resources. This role requires facilitating member services. Particularly ensuring better outcomes, better compliance with sound advice, and better member self-management. This role is responsible for the wellbeing of every member and their families residing in their household and further includes guidance through the processes and regulations related to their individual and family cases while adhering to duties.

## **Essential Duties and Responsibilities**

According to the ADA 1990, reasonable accommodations may be made to enable individuals with disabilities to perform essential functions.

## Team Lead Responsibilities:

- Lead and supervise the team of 4 Service Coordinators in the development and implementation of the Career Mobility Action Plan and timeline for their caseload.
- Working closely with the Service Coordinators to ensure that the care and support is effective and administered correctly.
- Monitor, track, and assist the team of Service Coordinators with all required reporting and documentation, including quarterly navigation plans, monthly progress notes, member engagement notes, emergency funds requests, housing relocation requests, case note entries, etc.
- Train Service Coordinators on program processes, policies, procedures, guidelines, regulations, and requirements, including completing onboarding duties with assigned Service Coordinators.
- With guidance from program leadership, set strategy and monitor progress towards the Service Coordination Team and overall program goals.
- Serve as the first point of contact to support Service Coordinators directly.
- With guidance from program leadership, create and maintain the Service Coordination team-wide calendar of events to ensure the necessary programming is occurring monthly.
- Identify and discuss opportunities for continuous program improvement.
- Be knowledgeable of all program participants assigned to the Service Coordination Team to ensure all members are provided with program services and have an additional point of contact if needed.



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• Ensure that support is provided in all areas related to Member Intake/Registration, Safety Plan and/or Wellness Plan Development, Navigation Plan development, Monthly Progress Note Entries, Individual and Family Contact Note Entries, and the continuum, along with Caseload Review and Discharge Planning.

## Service Coordination Responsibilities:

- Meet with the head of household and household members in-office at a minimum of once per month.
- Provide direct services to up to 18 families participating in the program; engage and motivate families to participate in services, coach families in selecting relevant trainings and support groups; remove barriers, support relocation efforts, and distribute emergency financial support funds etc.
- Work with families to develop a Career Mobility Action Plan with clearly defined goals and action plans to achieve those goals over time. The action plan must include career, family, individual, education, mental health, physical health, and financial goals.
- As a part of the Mobility Action Plan created by the program member, complete monthly progress notes, quarterly navigation plans, and record all notes of engagement to track the progress of goal attainment.
- Work with families to build strong protective factors to maintain stable program participation, meet their goals, and enhance whole-family wellness.
- Complete case reviews and annual case presentations for all members assigned to the caseload.
- Coordinate and facilitate member growth through assessment, evaluation, planning, and implementation.
- Assess, plan, implement, monitor, and evaluate members step by step actions towards their full income growth potential while meeting their rent, finance, health, and overall human services need(s).
- Coordinate care or planning that is safe, timely, effective, efficient, equitable, client-centered, and client-driven.
- Lead service team-wide events and/or groups at a minimum of once per quarter.
- Participate in case management training and become an evidence-based service provider working with families participating in the program. Implementation and ongoing use of the Case Management model for all assigned families is required.
- Work in partnership with other service providers engaged with the families, coordinate effective communications, and ensure families have an empowering experience while participating in the program.
- Maintain detailed clinical case notes and records for all assigned families participating in the program on a daily basis.
- Manage discharge plans and follow-up services to include but not limited to, warm-handoffs, transfer summary completion, and any required program discharge documentation.
- Provide pathways for program participants to achieve wellness, autonomy, and self-reliance through promotion of income growth opportunities, building social capital, increasing financial acumen, improving self-regulation, and improving mental health.
- Assist members with making informed decisions by acting as their advocate regarding their clinical status, treatment options, and navigation outcomes.
- Support external program matching needs by providing necessary documentation and insights.
- Abide by performance standards stipulated by the funding entity.
- Support the cultivation of a supportive, compassionate, high-achieving, inclusive, and culturally affirming work environment.
- Must be able to personally identify with the lived experiences of our primary constituents and clients.

## Qualifications

- Master's degree in clinical Mental Health Counseling, Counseling, Psychology or equivalent preferred. Other relevant fields of social work, rehabilitation, public health, counseling, psychology etc., are acceptable. Education requirements can be substituted with a combination of education, lived experience, and relevant work experience equal to a master's degree.
- Licensed Graduate (LGPC), Licensed Social Worker, or equivalent strongly preferred.



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- A minimum of 5 years of direct care experience with patients/members/clients through case management within fields such as social work, counseling, and/or care management.
- A minimum of 2 years of supervisory experience within a direct care support environment.
- Excellent knowledge of case management principles (Full support to include, Finance, Career, Housing, Mental, Physical, Emotional).
- Strong working knowledge of Microsoft Teams, Word, Excel, PowerPoint, and Outlook.
- Excellent organizational and time management skills.
- Ability to be adaptable and effectively lead Service Coordination Team.
- Problem solving skills and ability to multitask.
- Must be a legal resident or authorized to work in the United States.
- Must successfully complete a criminal background investigation.
- Must be detail-oriented and possess organization and critical thinking skills.
- Individuals with certifications from the Commission for Case Manager Certification (CCMC) and the American Nurses Credentialing Center (ANCC) or any related current license, certification, or registration preferred.
- Apricot, HMIS, QuickBase, CSS and CATCH systems experience preferred.
- Individual and Family Support Background Experience preferred.
- Mental Health, Healthcare, Workforce, Housing, and Financial Wellness Background preferred.
- Strong working knowledge of homeless programs, case management services for vulnerable populations, such as individuals and families at risk of homelessness.
- Strong verbal and written communication skills; coaching and facilitating skills preferred.

### Working Conditions

The employee will be working in a normal office environment and may meet with program participants in the community when needed. No home visits required.

#### **Physical Requirements**

While performing the duties of this job, the employee will frequently sit, stand, walk, and reach. May need to lift files or packages periodically.

#### **Other Duties**

This job description is intended to describe the general nature and work performed by employees, but is not a complete list of activities, duties or responsibilities required of personnel. Furthermore, other duties, responsibilities and activities may change or be assigned at the discretion of the employer.

#### **Direct Reports**

The incumbent will lead a team of up to 4 Service Coordinators.

The Greater Washington Urban League (GWUL) is an Equal Opportunity Employer (EEO).