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## POSTER ABSTRACT

# Role experiences, organisation, and competencies of care navigators in the space between health and social care: a review of reviews

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**Background:** Navigating health, social, and community care systems is complex, and can overwhelm individuals and lead to poor health and wellbeing outcomes. A growing workforce of care navigators are employed to assist individuals in navigating between health and social care systems, however, the organisation and experiences of this unique workforce are poorly understood.

**Approach:** The aim of this umbrella review is to synthesise the breadth of care navigator roles that operate between health and social care systems, focusing on role scope, challenges, organisation, competencies, and education, training, and support of the care navigator.

A review of reviews was conducted (PROSPERO: CRD42024572605). MEDLINE, CINAHL, Scopus, and PsycINFO were searched from 1 Jan 2019 to 31 May 2024. Additional articles were also identified using snowball methods. Reviews were included if they discussed the role or organisational structure of workers that coordinated services between health and social care systems. Reviews that did not use systematic, scoping, or other rigorous review methodology were excluded.

**Results:** Twenty-seven literature reviews were included in this umbrella review, which mostly used scoping (n=14) or systematic (n=8) review methodology.

Preliminary data indicates that care navigation services were typically delivered in primary care, community health, and hospital settings, and focused on individuals with poor mental health, older age, or with chronic health conditions. The role titles of care navigators varied significantly; common terms were link worker, care coordinator, patient navigator, community connector, and social prescriber. There was large variability in scope of practice, however, navigators commonly facilitated coordination between health and social care services, including linking patients with community-based activities, assisting with housing, financial and legal issues, and providing practical supports such as access to transport and education to build capacity for self-care.

The provision of training differed between reviews, and where provided, included elements of motivational interviewing, behavioural change methods, and cultural awareness. Care navigators

also varied in experience and professional background; nursing, social work, mental health, and occupational therapy were common qualifications of care navigators. Few reviews reported on formalised professional development or organisational support for care navigators. Extensive knowledge of the health and social care systems, relationship and rapport building, teamwork, and adaptability to individual needs were identified as key competencies for care navigator roles. Funding and resource constraints were identified as barriers to successful implementation of navigation programs.

Implications: The high variation in terminology, scope, and organisational support of care navigators implies this growing workforce may operate in program siloes, with few overarching frameworks or guidelines. Scope, qualifications, and barriers and enablers related to care navigation roles are commonly addressed, however, there is little discussion of the experience of the care navigator. As care navigation services continue to spread and be delivered at scale, policy and organisational structures, and guidelines and frameworks, should be developed and implemented to reduce fragmentation and support this growing workforce.