Reports To: Helpline/Contact Center Supervisor

Classification: Full & Part-time, Non-Exempt

Summary: Provides broad human services needs assessment, crisis intervention and appropriate referrals to individuals via telephone, usually in a single contact culminating in provision of agency referrals, mediated contact with an agency or advocacy with an agency on behalf of the individual requesting assistance. May also conduct intake for specialized programs or services.

Date Reviewed/Updated: February 2018

Required Knowledge & Skills

- AA/AS degree desired. Substantial equivalent experience in an applicable field will be considered in lieu of formal education.
- One year work experience in social services or related field strongly preferred
- Excellent communication and interpersonal skills
- Broad general knowledge of human services
- Familiarity with Brevard County health and human services network highly desirable
- Willingness/ability to handle all types of calls/problems in a non-judgmental manner, including those dealing with such potentially sensitive topics as abortion, alcoholism, mental illness or child abuse
- Ability to get along well with others, including persons of different ethnic or cultural backgrounds
- Ability to work independently or in a team setting
- Bilingual (Spanish/English) highly desirable
- PC skills in a Windows environment, including Outlook & navigating the Internet; proficient in word processing/data entry
- Ability to type 35 WPM
- Successful completion of 2-1-1 Brevard training
- AIRS CIRS Certification or AAS CCW Certification desirable

Primary Job Duties:

- Assess human service needs via phone using active listening, crisis intervention &/or suicide risk assessment skills
- Search computer database for appropriate human service provider referrals
- Maintain appropriate documentation of work
- Act as a contributing team member
- Work during times of community disaster (e.g., hurricanes) to provide citizen information
- May participate in community outreach/networking efforts by visiting other agencies, attending meetings or conferences, or otherwise developing working relationships within the community
- Provide on-the-job mentoring/training for new 2-1-1 Brevard staff

~ continued on reverse ~
Job Description: Helpline Specialist

Physical Requirements

- Ability to communicate clearly in person and over the telephone
- Ability to read written material and computer screens.
- Ability to enter data into a computerized record and to spend multiple hours on telephone & computer
- Occasional lifting (up to 40 pounds)

Work Schedule

Helplines are available 24 hours a day and work schedules are offered based on organizational needs and funding constraints. Employees may be required to fill in for other staff & during other times and, while every attempt will be made to accommodate individual needs and preferences, there is no guarantee of preferred scheduling. 2-1-1 Brevard serves as source of citizen information in disaster situations and all employees will be expected to work shifts prior to, during and/or following a community disaster.

Employee Agreement

My signature below confirms that I understand and agree to the following:

- This job description does not create an employment contract, implied or otherwise, other than an “at will” relationship.
- I will read the Operations and Employee Manuals for further clarification of my responsibilities as an employee.
- I must be able to perform the responsibilities and job functions outlined above to continue my employment with the agency.
- 2-1-1 Brevard’s helpline services are operational 24 hours/365 days annually and at times I may be expected and agree to work nights or weekends.
- 2-1-1 Brevard performs contractual functions related to community disasters. I understand that I may be required to work designated pre/during/post disaster shifts.
- I will provide proof of a valid driver’s license annually. My driving record may be checked and a record of violations as delineated in agency policy may result in limitations to my ability to drive on 2-1-1 Brevard business or the termination of my employment if driving is an essential job function.

Employee Name: ______________________________ Signature: ______________________________

Date: ______________________________