

Clearinghouse Connections

The Compassion Coalition Telephone Call Center

Staffed by volunteers from Compassion Coalition partner churches, the clearinghouse connects those in need with churches, ministries and agencies in the community. It is a safety net for hundreds of the most vulnerable in our city, mostly single parents, lower income working families, or the elderly.

Annually the clearinghouse receives thousands of calls and makes thousands of referrals for those needing help. Hundreds of volunteer service hours are mobilized, and thousands of dollars in financial assistance are given in Christ's name.

The Clearinghouse is open Monday – Thursday from 9:30AM to 3:30PM. An average of 30 calls are received each day. Those in need of assistance need to leave a message. Volunteers return calls in the order received. This is a telephone call center only and can not accommodate walk-ins.



The Clearinghouse Process

Request

The Clearinghouse receives requests for help by telephone from churches, pastors, organizations, individuals and families in need (clients).

Analysis

The need is reviewed and analyzed by the Intake Volunteers or staff at the Clearinghouse. The volunteer:

- ✓ Examines the nature, extent, and legitimacy of the client's need.
- ✓ Determines what help the client has already received from agencies or churches by looking them up on Charity Check.
- ✓ Ensures the need is manageable and specific. Verifies the client's circumstances i.e. KUB account, employment, medical crises, etc

Referral

After the client's needs are analyzed and verified, they are referred to the appropriate help:

- ✓ Clients requiring urgent or highly specialized help are referred to appropriate agencies. These types of referrals could include medical, psychiatric, substance abuse, legal, or other services.
- ✓ Clients requiring specific help available through an agency or church ministry are referred to that agency or church.
- ✓ All other needs are referred to volunteers from partner churches in the area where the client lives (if possible).

Service

The client is helped by an agency, church ministry, and/or volunteer and the need is met. The client is asked if they have specific pray requests.

Follow-up

The Clearinghouse follows-up with the client and volunteer or ministry that provided the assistance. A visit from a local pastor or church volunteer is also offered



For more information about the Clearinghouse, contact Gina Whitmore at 251-1591 ext. 2 or gina@compassioncoalition.org

A **Clearinghouse Volunteer Job Description** and a **Volunteer Application** may be found on this web site.



Compassion Coalition
a Love Inc. Affiliate

Intake Worker Job Description

Purpose

Receive telephone requests for help, assess and analyze the need, and make appropriate referrals.

Responsibilities

1. Complete training and attend meetings.
2. Answer incoming calls and listen compassionately to callers.
3. Gather and record vital information regarding client's needs.
4. Verify all information relevant to meeting the client need.
5. Review and analyze information gathered during the intake.
6. Identify needs and possible sources of help.
7. Ensure needs to be referred are manageable and specific.
8. Refer clients to the most appropriate resources.
9. Maintain client confidentiality.
10. Keep volunteer time records.

Qualifications

1. Personal relationship with Jesus Christ and agreement with the Apostles' Creed.
2. Discernment, non-judgmental attitude and the ability to listen, empathize, and accept others.
3. Good telephone and communication skills.
4. Ability to work independently and cooperatively.
5. Reliability and dependability.



VOLUNTEER APPLICATION

Compassion Coalition
A Love Inc Affiliate
1450 Dowell Springs Blvd. Suite 100
Knoxville, TN 37909
Phone 865-251-1591

Today's Date: _____

Name: _____ Date of Birth: _____

Address:

City: _____ State: _____ Zip: _____

Home Phone: _____ Work

Phone: _____

Cell Phone: _____ E-mail Address:

EMERGENCY CONTACT

Name: _____ Relationship: _____

Phone: _____ Address: _____

EMPLOYMENT Full Time Part Time

Business: _____ Position: _____

PERSONAL INFORMATION

Do you have any physical conditions that may affect your activities/abilities to perform any of the various volunteer jobs? Yes No

If yes, please describe how your condition might affect your ability to serve.

Have you ever been convicted of a felony? Yes No

If yes, please explain: (A "yes" response does not automatically disqualify you from volunteering.)

Marital Status (circle one): Married – How Long? _____ Single Divorced Widowed

Spouse's Name: _____ Occupation:

Children: _____

Fluent

Languages: _____

How did you hear about volunteer opportunities at Compassion Coalition?

Why would you like to be involved with our volunteer program?

Name three of your strengths:

_____ Name three of your weaknesses:

Other talents, interests, abilities:

Are you presently attending a church? Yes No

If yes, list church name, phone, pastor's name:

VOLUNTEER EXPERIENCE

List any type of Christian work or volunteer experience:

Please list any information or other experiences relevant to a volunteer position with Compassion Coalition, e.g. inner city ministry, youth work, etc.:

List two references including your pastor.

(1) _____

(2) _____

