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| **CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION** | | | | | | X | PROPOSED | | |
| POSITION DUTY STATEMENT | | |  | | | | | | |
|  | | |  | | |  | CURRENT | | |
|  | | |  | | | | | | |
| **CDCR INSTITUTION OR HEADQUARTERS PROGRAM** | | | **POSITION NUMBER (Agency-Unit-Class-Serial)** | | | | | | **MCR / HCR** |
| Office of Public and Employee Communications | | | 065-150-5595-003 | | | | | |  |
| **DIVISION / UNIT** | | | **CLASSIFICATION TITLE** | | | | | | |
|  | | | Information Officer II | | | | | | |
| **WORKING TITLE** | | | | | | |
| Information Officer II | | | | | | |
| **TIME BASE / TENURE** | **CBID** | **WWG** | | | **COI** | |
| Perm/FT | S01 |  | | | Yes  No | |
| **LOCATION** | | | **INCUMBENT** | | | **EFFECTIVE DATE** | | | |
| 1515 S Street, 113 South, Sacramento, CA 95811 | | | VACANT | | | TBD | | | |
| **CDCR’S MISSION** | | | | | | | | | |
| We enhance public safety through safe and secure incarceration of offenders, effective parole supervision, and rehabilitative strategies to successfully reintegrate offenders into our communities. | | | | | | | | | |
| **COMMITMENT TO DIVERSITY, EQUITY AND INCLUSION** | | | | | | | | | |
| The California Department of Corrections and Rehabilitation (CDCR) and California Correctional Health Care Services (CCHCS) are committed to building and fostering a diverse workplace. We believe cultural diversity, backgrounds, experiences, perspectives, and unique identities should be honored, valued, and supported. We believe all staff should be empowered. CDCR/CCHCS are proud to foster inclusion and representation at all levels of both Departments. | | | | | | | | | |
| **DIVISION OVERVIEW** | | | | | | | | | |
| **BRIEFLY DESCRIBE THE DIVISION/UNIT FUNCTIONS** | | | | | | | | | |
| The Press Office oversees all media outreach and articulates the Department’s position on operations, policies, employees, offenders, programs and issues. The Press Office manages crisis communications, solicits media coverage of departmental activities, serves as a liaison to the media, releases information to the public and facilitates media access to institutions, programs, employees and offenders pursuant to state law and departmental policies. | | | | | | | | | |
| **GENERAL STATEMENT** | | | | | | | | | |
| **BRIEFLY (1 OR 2 sentences) DESCRIBE THE POSITION’S ORGANIZATIONAL SETTING AND MAJOR FUNCTIONS** | | | | | | | | | |
| Under the direction of the Deputy Press Secretary, Office of Public and Employee Communications (OPEC), the Information Officer (IO) II is a key member of a team providing media, public relations, and crisis communications guidance for the department. Acts as a spokesperson for the department on a wide range of correctional issues before statewide, national and international media. | | | | | | | | | |
| **% of time performing duties** | **Indicate the duties and responsibilities assigned to the position and the percentage of time spent on each. Group related tasks under the same percentage with the highest percentage first.** | | | | | | | | |
|  | **ESSENTIAL FUNCTIONS** | | | | | | | | |
| 35%  20%  20%  10%  10% | Researches and gathers facts for both routine and controversial inquiries from the news media, the  public and others with strong personal interests in the department to write/edit briefing papers,  talking points, speeches, news releases, media advisories, fact sheets, strategic responses,  correspondence, reports and other written material. Arranges interviews with the news media for  CDCR Executive Staff. Coordinates with the Press Secretary, Deputy Press Secretary and other departmental  managers to analyze information, identify trends, and develop media strategies consistent with the goals of the  Department.  Conducts complex analysis and research to be able to advise executive management of any notable issues arising from Public Records Act requests from the news media. Processes and reviews filming requests from news and non-news media for CDCR’s institutions, field offices, headquarters, or other state property.  Advises the Press Secretary, Deputy Press Secretary, and Executive Staff on evaluation and implementation of  public information programs, policies, and procedures at correctional facilities and parole regions. Assists in  providing public relations and media policy guidance to, IOs at the Division of Adult Parole Operations, and at  institutions as needed. Provides training to field IOs.  Plans and prepares special events for the Department, groundbreakings, dedications and press  conferences. Attends staff meetings. Other related duties as required. Occasional travel  required to Department work locations and events statewide as necessary.  Develops and assists staff in the development of content for all department communications platforms, including  not limited to social media, internal and external newsletters, website, intranet, podcast, video and photo  production. | | | | | | | | |
| 5% | Perform administrative duties including, but not limited to: adhere to Department policies, rules and procedures; submit administrative requests including leave, travel, and training in a timely and appropriate manner; accurately report time, and submit timesheets by the due date. | | | | | | | | |
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| **SPECIAL REQUIREMENTS** | | | | | | | | | |
| * CDCR does not recognize hostages for bargaining purposes. CDCR has a "NO HOSTAGE" policy and all prison inmates, visitors, nonemployees and employees shall be made aware of this. | | | | | | | | | |
| **To be reviewed and signed by the supervisor and employee:**  **EMPLOYEE’S STATEMENT:**   * *I HAVE DISCUSSED THE DUTIES AND RESPONSIBILITIES OF THE POSITION WITH MY SUPERVISOR AND RECEIVED A COPY OF THIS DUTY STATEMENT.* | | | | | | | | | |
| **EMPLOYEE’S NAME (Print)** | | **EMPLOYEE’S SIGNATURE** | | | | **DATE** | | | |
|  | |  | | | |  | | | |
| **SUPERVISOR’S STATEMENT:**   * *I CERTIFY THIS DUTY STATEMENT REFLECTS CURRENT AND AN ACCURATE DESCRIPTION OF THE ESSENTIAL FUNCTIONS OF THIS POSITION* * *I HAVE DISCUSSED THE DUTIES AND RESPONSIBILITIES OF THE POSITION WITH THE EMPLOYEE AND PROVIDED THE EMPLOYEE A COPY OF THIS DUTY STATEMENT.* | | | | | | | | | |
| **SUPERVISOR’S NAME (Print)** | | **SUPERVISOR’S SIGNATURE** | | | | **DATE** | | | |
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