

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION

POSITION DUTY STATEMENT

PROPOSED

CURRENT

CDCR INSTITUTION OR HEADQUARTERS PROGRAM Facility Support		POSITION NUMBER (Agency-Unit-Class-Serial) 065-212-9662-XXX		MCR / HCR
DIVISION / UNIT Division of Adult Institutions / Statewide Transportation Unit		CLASSIFICATION TITLE CORRECTIONAL OFFICER		
		WORKING TITLE TRANSPORTATION CORRECTIONAL OFFICER		
		TIME BASE / TENURE PFT	CBID R06	WWG
LOCATION HUB LOCATIONS: NTH, CTH, STH		INCUMBENT		EFFECTIVE DATE

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.

CDCR and CCHCS strive to collaborate with the community to enhance public safety and promote successful community reintegration through education, treatment and active participation in rehabilitative and restorative justice programs. Incumbents establish and maintain cooperative working relationships within the department, other governmental agencies, health care partners, and communities.

DIVISION OVERVIEW

BRIEFLY DESCRIBE THE DIVISION/UNIT FUNCTIONS

Under the supervision of a Correctional Sergeant in the incumbent's assigned Unit, the Transportation Unit (TU) Correctional Officer will be responsible for the transportation of California Department of Corrections and Rehabilitation (CDCR) inmates to and from various locations throughout California and other states as required. TU Officers must maintain a "Class B" Commercial Driver's license, a Department of Motor Vehicles Medical Examiner's Certificate, Airbrake Endorsements, Passenger Endorsements, Medical (DL 51), and First Aid/CPR Certificate. These positions also require quarterly qualification of all weapons and annual required training. Transportation Correctional Officers must be able to work at acceptable levels with little to no supervision. In addition, Transportation Correctional Officers must maintain all aspects and operate within accordance of the TU manual. Transportation Correctional Officers interact with the general public and other law enforcement agencies on a daily basis and are expected to present themselves at the highest professional standard at all times, on and off duty. Transportation Correctional Officers are based at any one of the three Transportation Hubs.

GENERAL STATEMENT

BRIEFLY (1 OR 2 sentences) DESCRIBE THE POSITION'S ORGANIZATIONAL SETTING AND MAJOR FUNCTIONS

The Transportation Officer will report directly their assigned Hub's Sergeant. The Transportation Officer will be responsible for the safe transportation of CDCR inmates to and from various locations throughout California and other states as required.

% 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.
35%	<p>ESSENTIAL FUNCTIONS</p> <p>Transporting CDCR inmates to and from various CDCR facilities and local law enforcement facilities throughout California and other states. This requires incumbents to work with little to no supervision, provide security; supervise the conduct of inmates; safely operate Transportation Unit vans and buses; prevent escape; and load and unload inmates. This is done in accordance with State and Federal laws and rules, administrative regulations, and policies and procedures mandated in the Department Operations Manual, the TU Operations Manual, and other sources of government law, policies, and procedures.</p>

30%	Completion and filing of required records and reports associated with statewide transportation within designated time frames, in accordance with the State and Federal laws and rules, administrative regulations, and policies and procedures mandated in the Department Operations Manual, the TU Operations Manual, and other sources of government law, policies, and procedures. Other related duties and participation in training as required. Also special assignments as requested.
25%	Loading and unloading of CDCR inmate property and records associated with statewide transportation in accordance with the administrative regulations, and policies and procedures mandated in the Department Operations Manual, the TU Operations Manual.
10%	Conduct a complete safety and security inspection of the entire assigned vehicle before, during and after operating the vehicle. Inspection to include holding cells, gun locks, gun boxes and all other security features on TU vehicles. Inspect restraint equipment and vehicle safety equipment onboard assigned TU vehicle. Record all assigned equipment for the effectiveness and accountability.

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.
- Maintenance of peace officer standards and training in accordance with Penal Code 832 and Departmental Operations Manual sections 32010.19.1, 33020.13, and 86010.13.

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
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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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