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| **CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION** | | | | | |  | PROPOSED | | |
| POSITION DUTY STATEMENT | | |  | | | | | | |
|  | | |  | | | X | CURRENT | | |
|  | | |  | | | | | | |
| **CDCR INSTITUTION OR HEADQUARTERS PROGRAM** | | | **POSITION NUMBER (Agency-Unit-Class-Serial)** | | | | | | **MCR / HCR** |
| Central California Women’s Facility | | | 381-218-1441-XXX | | | | | | 1 |
| **DIVISION / UNIT** | | | **CLASSIFICATION TITLE** | | | | | | |
| Division of Adult Institutions / Central Ops | | | Office Assistant (G) | | | | | | |
| **WORKING TITLE** | | | | | | |
| Office Assistant (G) - Mailroom | | | | | | |
| **TIME BASE / TENURE** | **CBID** | **WWG** | | | **COI** | |
| P/FT | R03 | 2 | | | Yes  No | |
| **LOCATION** | | | **INCUMBENT** | | | **EFFECTIVE DATE** | | | |
| Chowchilla, California | | |  | | |  | | | |
| **CDCR’S MISSION and VISION** | | | | | | | | | |
| **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.  **Vision**  We enhance public safety and promote successful community reintegration through education, treatment, and active participation in rehabilitative and restorative justice programs. | | | | | | | | | |
| **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** | | | | | | | | | |
| Under the direct supervision of the Office Services Supervisor I (OSSI), the Office Assistant (General) provides clerical support and assistance to the OSSI. The Office Assistant (General) will process incoming and out-going mail for both staff and inmates. Search mail for money orders, visiting forms and contraband. Operate computers, terminals, typewriter, calculator, postage machine, envelope opener, and copier in the performance of duties.  Essential Functions: Must be able to reach, lift and/or carry mail trays, crates, boxes, totes up to 40 pounds. Must be able to bend, stoop, reach and lift when operating various office machines. Must have physical dexterity with hands. Must be able to sit for extended periods of time. | | | | | | | | | |
| **GENERAL STATEMENT** | | | | | | | | | |
| **BRIEFLY (1 OR 2 sentences) DESCRIBE THE POSITION’S ORGANIZATIONAL SETTING AND MAJOR FUNCTIONS** | | | | | | | | | |
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| **% 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%  35%  20%  10% | Open incoming mail via the automated envelope opener. Sort, search and pitch all incoming mail and bulk mail by the date received from the Post Office. Search inmate mail for money orders, cash and to prevent the introduction of materials and substances which may be considered contraband. Maintain accurate records of cash and contraband found by writing a CDC 1819 “NOTICE OF DISAPPROVAL” for those items. On completion forward the CDC 1819 to the Custody Captain for signoff. When the CDC 1819 is returned to the Mailroom, it will be dated accordingly and placed in the totes to go to the inmates. On its return from the inmate, process it accordingly. Locate inmates via SOMS or ERMS computer systems for re-routing mail or forwarding to the appropriate location.  Process all incoming and outgoing mail for staff. Operate the postage machine by placing the correct postage on all out-going mail. Prepare any legal inmate mail. Input all incoming and out-going legal mail in the Inmate Legal Mail Tracking System. Prepare a Report of Collections daily for all money orders received and take to the Accounting Office for processing. Notify supervisor immediately upon finding suspected drug related contraband. Once the suspected drug contraband is confirmed via NIK test, complete any incident report required regarding that contraband.  Perform clerical duties including filing, shredding, duplicating, and ordering supplies. Answer telephone calls, and take messages. Process memos and correspondence relating to the Mailroom  Assist in researching and preparing information required for routine and special projects. Responsible for accurately signing-in and signing-out daily on the 998-A, meeting FLSA laws and rules to ensure no FLSA violations are committed and attaching required documentation for absences to the 998-A. Responsible for meeting the yearly In-Service Training requirement. Attend safety meetings, and ensure safety practices are followed. Assist others and perform miscellaneous duties as required. Provide back-up clerical coverage within the division as required. | | | | | | | | |
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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. | | | | | | | | | |
| **CONSEQUENCE OF ERROR** | | | | | | | | | |
| * Example: Consequences of error may result in loss of time and could cause significant delays in program production. Such delays can result in inefficient use or misdirection of department resources resulting in the inability to meet efficiency and time line goals, and varying degrees of negative financial impacts to the department. | | | | | | | | | |
| **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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