DUTY STATEMENT

CDCR INSTITUTION OR DEPARTMENT	POSITION NUMBER (Agency – Unit – Class – Serial)
California Correctional Health Care Services	xxx-xxx-9283-xxx
UNIT NAME AND CITY LOCATED Mental Health Services Delivery System, Crisis Intervention Team (CIT) - Various	CLASSIFICATION TITLE Psychologist – Clinical, Correctional Facility
	WORKING TITLE

COI	WORK WEEK GROUP	CBID	TENURE	TIME BASE
Yes ☐ No ☐		R19		

SCHEDULE (Telework may be available): _____ AM to _____ PM. (Approximate only for FLSA exempt classifications)	SPECIFIC LOCATION ASSIGNED TO
INCUMBENT (If known)	EFFECTIVE DATE

California Department of Corrections and Rehabilitation (CDCR) and California Correctional Health Care Services (CCHCS) are committed to transforming the correctional landscape to create safer, more professional, and more fulfilling environments for our employees, the incarcerated population, and those supervised in our communities. Through systemwide improvements grounded in proven and emerging practices, we aim to strengthen rehabilitation, enhance workplace satisfaction, and support successful reentry into the community through our institutions, parole, and community partnerships. Our shared mission is to promote safety, wellness, and human dignity while fostering positive change for all those who live and work within our institutions and communities.

CDCR and CCHCS are committed to building an inclusive respectful workplace. We are determined to attract and hire candidates from all communities and empower employees from a variety of backgrounds, perspectives, and personal experiences. We are proud to foster inclusion and drive collaborative efforts at all levels of the Department.

Across our organization, our programs work cooperatively to provide the highest level of health care possible to a diverse correctional population. We encourage creativity and ingenuity while treating others fairly, honestly, and with respect, all of which are critical to the success of the CDCR and CCHCS mission.

PRIMARY DOMAIN:

Under the direction of the Senior Psychologist Supervisor, the incumbent serves as the designated mental health clinician on the institution's Crisis Intervention Team (CIT), an interdisciplinary team established pursuant to departmental policy. The incumbent provides emergent, in-person crisis assessment and intervention services to patients experiencing acute psychiatric distress, including suicidal ideation, self-injurious behavior, psychosis, severe mood or anxiety symptoms, trauma-related symptoms, and behavioral decompensation, as close to the patient's housing unit as operationally feasible, in collaboration with nursing and custody supervisory staff and in consultation with psychiatry. The incumbent exercises independent clinical judgment under strict regulatory timelines, including during operating hours when no clinical supervisor is available on-site. Accordingly, the incumbent must possess and maintain a valid, current license as a Psychologist issued by the California Board of Psychology at the time of appointment. The incumbent's clinical decisions, risk assessments, and documentation are subject to review under the supervisory, quality management, and other monitoring processes.

% 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. *(Use addition sheet if necessary)*
	ESSENTIAL FUNCTIONS

45%	Crisis Intervention Team Response and Emergent Clinical Assessment: Responds as the mental health clinician member of the CIT to emergent mental health referrals during designated CIT operating hours, including third watch as determined by the local SPRFIT Committee. Responds together with nursing and custody team members, interviewing the patient in person, in a confidential setting, as close to the patient's current housing unit as possible, and within four (4) hours of the patient expressing an emergent mental health need. Reviews the patient's health record prior to or upon CIT activation, including all prior CIT contacts, and communicates relevant clinical history to CIT team members. Performs a Mental Status Examination; assesses the patient's capacity to understand and communicate; identifies the type and root cause of the crisis presented. Applies de-escalation and motivational interviewing techniques to assess and stabilize the patient within the patient's current milieu. Identifies and recommends the appropriate course of action related to the reason for CIT contact, including housing considerations, level of care, medical care needs, or other contributing stressors, in collaboration with nursing and custody team members.
20%	Suicide Risk Assessment and Level-of-Care Determination: Completes a Suicide Risk Assessment per policy whenever the patient expresses suicidality or when otherwise clinically indicated. Determines the clinical necessity of referral to a Mental Health Crisis Bed (MHCB); when a referral is warranted, initiates the referral and completes all required documentation per the MHCB Referral Procedure and associated documentation policy. Honors the more conservative clinical approach in cases of clinical disagreement among CIT members; elevates non-unanimous team decisions to institutional leadership per policy. Establishes follow-through plans for any determination requiring later action, ensuring scheduled consults occur and receiving clinicians are informed of precipitating events.
15%	Suicide Prevention Continuity of Care: Conducts clinical contacts for patients placed in alternative housing pending MHCB transfer or rescission, per applicable suicide prevention policy. Completes five-day clinical follow-up contacts for patients discharged from MHCB or removed from suicide watch/precaution status, per Mental Health Services Delivery System Program Guide requirements. Develops and implements individualized safety plans for patients identified as elevated risk, in collaboration with the patient's treatment team.
10%	Clinical Documentation: Documents the clinical evaluation and outcome of each CIT contact in the health record as soon as possible and no later than the end of the workday, including completion of the Mental Health CIT Powerform with relevant clinical information pertaining to the intervention. Documents clinical rationale supporting all risk determinations, referral decisions, and dispositions in sufficient detail to withstand clinical, quality management, and court-monitor review, while meeting strict policy timelines.
5%	Interdisciplinary Consultation, Quality Improvement, and Training: Provides clinical consultation and recommendations to custody, nursing, and mental health staff regarding patient management, de-escalation strategies, and behavioral stabilization. Supports institution SPRFIT Subcommittee monitoring of CIT utilization and crisis-related performance metrics, including identification of referral patterns and trends. Completes headquarters-approved, standardized CIT training conducted by local Training for Trainers (T4T) staff and maintains currency with annual policy updates.
5%	Performs other duties as required consistent with classification.

KNOWLEDGE AND ABILITIES

Knowledge of: Psychological theories and research; principles, techniques, and problems in developing and coordinating a clinical psychological treatment program; principles, techniques, and trends in psychology with particular reference to normal and disordered behavior, human development motivation, personality learning, individual differences, adaptation, and social interaction; methods for the assessment and modification of human behavior; characteristics and social aspects of mental disorders and retardation; research methodology and program evaluation, institutional and social process, group dynamics; functions of psychologists in various mental health services; current trends in the field of mental health; professional training; and community organization and allied professional services.

Ability to: Plan, organize, and work in a specialized clinical psychological treatment program involving members of other treatment discipline; provide professional consultation and program leadership; teach and participate in professional training; recognize situations requiring the creative application of technical skills; develop and evaluate creative approaches to the assessment, treatment, and rehabilitation of mental disorders, to the conduct of research, and to the development and direction of a psychological program; plan, organize, and conduct research, data analysis, and program evaluation; conduct assessment and psychological treatment procedures; secure the cooperation of professional and lay groups; analyze situations accurately and take effective action; and communicate effectively.

Assignments may include sole responsibility for the supervision of inmates and/or the protection of personal and real property.

SPECIAL REQUIREMENTS OR CONTINUING EDUCATION REQUIREMENT

- CCHCS does not recognize hostages for bargaining purposes. CCHCS and CDCR have a “NO HOSTAGE” policy and all incarcerated patients, visitors, nonemployees, and employees shall be made aware of this.

SPECIAL PHYSICAL CHARACTERISTICS

Persons appointed to this position must be reasonably expected to have and maintain sufficient strength, agility, and endurance to perform during stressful (physical, mental, and emotional) situations encountered on the job without compromising their health and well- being or that of their fellow employees or that of inmates.

SPECIAL PERSONAL CHARACTERISTICS

Empathetic understanding of patients of a State correctional facility; willingness to work in a State correctional facility; scientific and professional integrity; emotional stability; patience; alertness; tact; and keenness of observation.

- Influence change and strengthen the community. Set an example each day through positive and pro-social role modeling, utilizing dynamic security concepts.
- Willingness to play a significant role in the collaborative efforts toward rehabilitation and public safety enhancement.
- Ability to facilitate conversations as a coach and mentor, engaging in a respectful and understanding manner.

	• Ability to build trust, improve communication, and assist with the transformation of correctional culture.

SUPERVISOR'S STATEMENT: ***I HAVE DISCUSSED THE DUTIES OF THE POSITION WITH THE EMPLOYEE***		
SUPERVISOR'S NAME (Print)	SUPERVISOR'S SIGNATURE	DATE

EMPLOYEE'S STATEMENT: ***I HAVE DISCUSSED WITH MY SUPERVISOR THE DUTIES OF THE POSITION AND HAVE RECEIVED A COPY OF THE DUTY STATEMENT***		
The statements contained in this duty statement reflect general details as necessary to describe the principal functions of this job. It should not be considered an all-inclusive listing of work requirements. Individuals may perform other duties as assigned, including work in other functional areas to cover absence of relief, to equalize peak work periods or otherwise balance the workload.		
EMPLOYEE'S NAME (Print)	EMPLOYEE'S SIGNATURE	DATE