DUTY STATEMENT

CDCR INSTITUTION OR DEPARTMENT	POSITION NUMBER (Agency – Unit – Class – Serial)
California Correctional Health Care Services	xxx-xxx-9872-xxx
UNIT NAME AND CITY LOCATED Mental Health Services Delivery System, Crisis Intervention Team (CIT), Statewide	CLASSIFICATION TITLE Clinical Social Worker, Correctional Facility
	WORKING TITLE

COI	WORK WEEK GROUP	CBID	TENURE	TIME BASE
Yes ☒ No ☐	2	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, Correctional Facility (Supervisor), or the Supervising Psychiatric Social Worker, Correctional Facility, 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 Licensed Clinical Social Worker issued by the California Board of Behavioral Sciences 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 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. 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, including psychosocial and environmental precipitants such as housing instability, custody status changes, disciplinary actions, family or relationship disruption, loss, and access-to-care barriers. 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 Evaluation and Level-of-Care Determination: Completes a Suicide Risk Evaluation 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. Identifies and coordinates psychosocial supports relevant to risk mitigation, including family and community collateral contacts where clinically indicated and authorized, and coordinates with the Classification and Parole Representative and reentry staff where the crisis presentation is related to release, transfer, or placement.
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 any higher-level 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:* Principles, procedures, techniques, trends, and literature of social work with particular reference to clinical social work; psycho/social aspects of mental and developmental and physical disabilities; community organization principles; scope and activities of public and private health and welfare agencies; characteristics of mental, developmental, and physical disabilities; current trends in mental health, public health and public welfare, and Federal and State programs in these fields. *Ability to:* Utilize and effectively apply the required technical knowledge; establish and maintain the confidence and cooperation of persons contacted in the work; secure accurate psycho/social data and record such data systematically; prepare clear, accurate, and concise reports; work family and community agencies in preparation for discharge; develop and implement programs; provide professional consultation; analyze situations accurately and take effective action; communicate effectively. **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 the class of Clinical Social Worker (Health/Correctional Facility) Safety are reasonably expected to have and maintain sufficient strength, agility, and endurance to perform during physically, mentally, and emotionally stressful situations encountered on the job without compromising their health and well-being or that of their fellow employees, patients, or incarcerated people. Assignments may include sole responsibility for the control of patients, clients, or incarcerated people and the protection of personal and real property. **SPECIAL PERSONAL CHARACTERISTICS** An objective and empathic understanding of individuals with the mental, developmental, or physical disabilities; flexibility to alter hours as needed; tolerance; tact; emotional stability; and respect for persons from diverse backgrounds. • 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