CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION

☐ PROPOSED

POSITION DUTY STATEMENT - General

☐ CURRENT

CDCR INSTITUTION OR HEADQUARTERS PROGRAM	POSITION NUMBER (Agency-Unit-Class-Serial)			MCR / HCR
MULE CREEK STATE PRISON	025-218-1441-VAR			1
DIVISION / UNIT	CLASSIFICATION TITLE			
	OFFICE ASSISTANT (GENERAL)			
	WORKING TITLE			
DIVISION OF ADULT INSTITUTIONS	OFFICE ASSISTANT (GENERAL)			
	TIME BASE / TENURE	CBID	WWG	COI
	P/FT	R04	2	Yes ☐ No ☐
LOCATION	INCUMBENT		EFFECTIVE DATE	
IONE, CA – AMADOR COUNTY				

CDCR'S MISSION, VISION and COMMITMENT

Mission
To facilitate the successful reintegration of the individuals in our care back to their communities equipped with the tools to be drug-free, healthy, and employable members of society by providing education, treatment, rehabilitative, and restorative justice programs, all in a safe and humane environment.

Vision
We enhance public safety and promote successful community reintegration through education, treatment, and active participation in rehabilitative and restorative justice programs.

Commitment
CDCR and 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.

DIVISION OVERVIEW

This is the entry, trainee and journey level for this series. Under close supervision as a trainee, incumbents regularly perform a limited range of duties that become routine, shortly after the initial training period; and/or learn to perform a variety of full journey level general clerical duties.

GENERAL STATEMENT

Under the direct supervision of the Office Services Supervisor II (OSS II), the Office Assistant (OA) (General) is responsible for sorting and searching all incoming and outgoing mail. Complete contraband forms, record visiting forms, money orders and checks.

% 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.
45%	Search incoming mail for contraband. If contraband is discovered, complete contraband form, notifying the incarcerated individual of confiscated items. Remove Visiting Questionnaire, airline or bus ticket, money orders. Scan all incoming mail for unusual information and place mail in mailbags. Tape or staples will be used to prevent contents from falling out. OBIS all regional reroute mail. Complete correspondence approval on DDPS and give to proper facility.
20%	Review all mail and identify incarcerated individual(s) on mail watch to be given to Investigative Services Unit (ISU). Separate envelopes by size and groups, i.e. legal, indigent, institution and stamped mail. Place mail into bins to be processed: legal mail placed on Legal Desk: help separate and forward institutional mail. Separate incoming mail into bins, Facility A, B, C, Minimum, re-route and legal. Answer incarcerated individual appeals at informal level.
20%	Return-to-Sender Form CDC 1819 are to be completed in triplicate. Check for incarcerated individual to incarcerated individual correspondence approval. Open and search approved correspondence. Respond to informal level 602's.
10%	Sort all institutional mail. Process all outgoing mail outs for institutional using the postage machine.
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.

SPECIAL PERSONAL CHARACTERISTICS

- Influence, change, and strengthen the community. Set an example each day through positive and pro-social role modeling, utilizing dynamic security concepts through observation and building rapport.
- 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.

SPECIAL REQUIREMENTS

- CDCR does not recognize hostages for bargaining purposes. CDCR has a "NO HOSTAGE" policy, and all incarcerated people, visitors, non-employees, and employees shall be made aware of this.

CONSEQUENCE OF ERROR

- 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 timeline 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