

# MERIT SYSTEM SERVICES

Invites Applications for

## Social Workers



### Inyo County Department of Health & Human Services

Monthly Salary: \$3,740 - \$4,761

Job Location: Bishop, California

Application Deadline: December 19, 2008

## Inyo County

The name for the County comes from the Paiute Indians. They called it "Inyo, dwelling place of the Great Spirit." Inyo County is home to the lowest and highest points in the contiguous United States. The lowest point is Death Valley at 282 feet below sea level. The highest is Mt. Whitney at 14,496 feet above sea level. Because of mountain barriers the weather is predominantly sunny and dry. The diversity of geography affords a variety of recreational activities at all times. Recreational activities include spring back-country skiing, hang gliding, horse packing, and mountain biking.



## The Position

### **Social Worker III: \$3,740-\$4,540 Monthly**

Under general supervision, the Social Worker III carries a caseload of the more difficult cases; investigates and assess complaints of alleged child and/or adult abuse or neglect; develops and implements service plans; provides case management services; coordinates activities with law enforcement and the legal and court systems; provides information concerning available services; and makes client referrals to appropriate social services resources; performs other related work as assigned. (See Desirable Qualifications and Additional Information)

### **Social Worker IV: \$3,923-\$4,761 Monthly**

Under general direction, the Social Worker IV performs casework of an advanced nature dealing with complex individual and family problems; undertakes intensive treatment plans and counseling requiring professional knowledge and training; performs other related work as assigned. (See Desirable Qualifications and Additional Information)



## Minimum Qualifications

While the following requirements outline the minimum qualifications, the department reserves the right to select applicants for further consideration who demonstrate the best qualifications match for the job. Meeting the minimum qualifications does not guarantee an invitation to the test.

### SOCIAL WORKER III

#### EITHER

One (1) year of full-time experience comparable to the Social Worker II classification;

#### OR

Two (2) years of full-time experience as a Social Worker in a public or private agency and thirty (30) college semester units, including fifteen (15) units in social welfare, social/human services, sociology, or other social or behavioral science behavioral science\*.

\*Examples of social or behavioral science courses include: anthropology, criminal justice, economics, education, ethnic studies, history, human development, law, nursing, nutrition, philosophy, political science, psychology, public health, religion, social welfare, sociology, welfare, women's studies.

### SOCIAL WORKER IV

#### EITHER

A Master's degree in Social Work;

#### OR

A Master's degree from a two (2) year counseling program.

[Qualifying master's degrees from a two - year counseling program are those that included an internship or supervised fieldwork (minimum of 900 hours) and completion of approximately 45 semester or 67 quarter units of graduate level courses with emphasis in vocational rehabilitation, family or marriage counseling, gerontology, or a closely related field. Completion of all of the requirements for a Marriage and Family Therapy (MFT) license program may be substituted upon submission of verifying proof.]

**NOTE:** Applicants who anticipate completing the requirements for one of the Master's degrees described above within six months of the final filing date may apply.

### Desirable Qualifications

Experience working in a Wraparound service delivery model is preferred.

### Additional Information

License: A valid driver's license may be required at the time of appointment. Individuals who do not meet this requirement due to a disability will be reviewed on a case-by-case basis.



The incumbent may be assigned to the Wraparound Service Team in Child Welfare and will provide intensive services to families whose children are at risk of out-of-home placement or are returning from placement.

Current and future vacancies will be filled contingent upon continued state/federal funding.

The existing eligible list for Social Worker III will be abolished upon completion of this examination.

The existing eligible list for Social Worker IV will be merged upon completion of this examination.

## Benefits

Inyo County offers a comprehensive benefits package which includes:

- Dental, vision, short-term and long-term disability insurance, and a comprehensive health plan;
- Participation in a Dependent Care Assistance Plan and a Health Care Spending Account that allows participants to use pre-tax dollars to pay for child care, elder care expenses and/or out-of-pocket health care expenses;
- Ten days annual vacation pay; increases to 15 days after five years of employment; 20 days after ten years of employment; prorated for part-time employees;
- Twelve holidays per year with an additional three days for floating holidays;
- Twelve sick leave days per year with unlimited accumulation. Upon retirement in certain circumstances, unused sick leave is converted to retirement service credit within a PERS formula;
- Life insurance at 100% county contribution for the employee;
- California Public Employee Retirement System (CalPERS) with 2% at 55 and single highest year of salary for retirement benefit calculations; the County pays 100% of the CalPERS contribution. The County also participates in Social Security retirement including the mandatory Medicare contribution;
- The County also offers 457 Deferred Compensation plans to which employees may contribute in order to enhance their retirement and decrease their current taxable income.

## How to Apply

Applicants with internet access are encouraged to apply on line. Log onto <http://www.mss.ca.gov> and apply as instructed. Applicants who do not have internet access must complete and submit the MSS application form (IMS-9) along with the supplemental application that applies to the correct level:

### Social Worker III

Class Course Listing, Supplemental Questionnaire (Depending on which Minimum Qualifications pattern is used to qualify)

### Social Worker IV

Master's Degree Clarification.

Application materials will be evaluated to identify applicants with the most relevant education and experience:

### Social Worker III & IV Oral Examination

Tentatively scheduled for the week of January 5, 2009



Application materials will be evaluated to identify applicants with the most relevant education and experience. Once the Inyo County Department of Health & Human Services determines they have received an adequate number of applications, those candidates meeting the minimum qualifications will proceed to the appropriate testing process. Merit System Services reserves the right to close this recruitment at any time.

Though applicants are encouraged to apply online at <http://www.mss.ca.gov>, you may send your application materials to Merit System Services. **Application documents must be mailed to the address below and received by close of business on the application deadline. POST-MARKS ARE NOT ACCEPTED.** Please mail all appropriate materials to:

Merit System Services  
241 Lathrop Way  
Sacramento, CA 95815

Merit System Services, a division of CPS Human Resource Services, is under contract with the California State Personnel Board to provide comprehensive personnel related services to California county social services departments.

Applications and additional copies of this announcement may be obtained by telephoning Merit System Services at (916) 263-3614; or you can visit our web site at [www.mss.ca.gov](http://www.mss.ca.gov).

**SUPPLEMENTAL QUESTIONNAIRE**

**SOCIAL WORKER II and III  
INYO COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Name:**

**Application Deadline: 12/19/08**

**Address:**

Send this and all application materials to:

MERIT SYSTEM SERVICES  
241 Lathrop Way  
Sacramento, CA 95815

**Daytime Telephone:**

I am or have been a Social Worker in a California County Department of Social Services.

   YES    NO

If your answer to the above question was no, please complete the rest of the questionnaire.

Your responses to this supplemental questionnaire are an integral part of your examination. Your responses will be reviewed and evaluated based on the job requirements. Applicants with the most relevant experience will be invited to the examination. Your responses may be considered as part of the Oral Examination. It is important that your responses be as complete and detailed as possible.

**FAILURE TO RESPOND TO THIS SUPPLEMENTAL QUESTIONNAIRE AND SUBMIT YOUR RESPONSES TO MERIT SYSTEM SERVICES BY THE FINAL FILING DATE WILL ELIMINATE YOU FROM THE EXAMINATION.**

The information you provide on the next page is the most important part of this questionnaire! Briefly and accurately number and describe your essential job functions in terms that anyone reviewing this form will be able to understand. Avoid abbreviated, vague, or abstract words, such as “assists,” “handles,” “keeps,” or “prepares,” unless you describe how you assist, what you prepare, etc. Be specific.

*For example:*

**DO THIS!**

**DON'T DO THIS**

Meets with families to assess their risks initially and an on-going basis.

Meets with families.

Conducts assessments of potential foster homes and families, including relative and non-relative family member homes.

Performs case management.

Conducts initial in-home assessments of the aged and disabled to determine if they qualify for assistance.

Conducts in-home assessments.

**SUPPLEMENTAL QUESTIONNAIRE (Page 2)**

**SOCIAL WORKER II and III  
INYO COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Name:**

**Application Deadline: 12/19/08**

**Address:**

Send this and all application  
material to:

MERIT SYSTEM SERVICES  
241 Lathrop Way  
Sacramento, CA 95815

**Daytime Telephone:**

Provide a description of your social work case management experience in the following areas using the guidelines on the previous page. Please provide as much detail as possible. If an area does not apply to your previous experience, please indicate that this section is not applicable by writing N/A. Please write your responses on 8 ½ X 11 paper, reference your responses to the appropriate questions, and attach them to this cover sheet.

- a. Adoptions
- b. Family Maintenance
- c. Family Reunification
- d. Foster Care
- e. In-Home Supportive Services
- f. Independent Living Program
- g. Linkages Program
- h. Multi-Purpose Senior Services Program
- i. Protective Services
- j. Other



**SUPPLEMENTAL APPLICATION**

**SOCIAL WORKER IV  
 INYO COUNTY DEPARTMENT OF SOCIAL SERVICES**

<b>Name:</b>	<b>APPLICATION DEADLINE: 12/19/08</b>
<b>Address:</b>	<p align="center"><b>Send this and all                  application material to:</b></p> <p align="center"><b>MERIT SYSTEM SERVICES</b>                  241 Lathrop Way                  Sacramento, CA 95815</p>
<b>Phone:</b>	

<b>Do you have an MSW?</b> If yes, you do NOT need to complete the remainder of the form.	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Are you an MFT or do you have an MFT intern number?</b> If yes, please enter your MFT or MFT intern number _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, please complete the remainder of the form.	

<b>Name of school where Master's degree was obtained</b>	
<b>Total number of units required for degree:</b>	<input type="checkbox"/> Quarter <input type="checkbox"/> Semester
<b>Have you completed a field placement or internship as part of                  your Master's program? (If yes, respond to the questions be-                  low.)</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please respond to the following questions by writing your narrative responses on the back of this form or on a separate sheet attached to this form:

<b>A.</b>	<b>Where did you complete your field placement? (Identify the name, nature, and mission of the agency, i.e., public agency, private, type of clients served, et cetera.)</b>	
<b>B.</b>	<b>Was this a closely supervised placement? If yes, attach a description of the method and frequency of supervision.</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>C.</b>	<b>How was your field placement evaluated and by whom? (Name and title of person who performed your evaluation)</b>	
<b>D.</b>	<b>Length of field placement?</b>	From: Month ____/Year ____ To:    Month ____/Year ____  Hours per week _____ Total hours in this placement _____
<b>E.</b>	<b>Did this placement include working with a caseload? If yes, provide a description of your responsibilities.</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>F.</b>	<b>Did this placement include family or child counseling? If yes, provide a description of your responsibilities.</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>G.</b>	<b>Did this placement involve working with child protective services or abused/neglected children? If yes, provide a description of your responsibilities.</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>H.</b>	<b>Did this placement include work with court responsibilities? If yes, provide a description of your responsibilities.</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO