



CONTINUOUS RECRUITMENT
OPEN-COMPETITIVE EXAMINATION

APPLICATIONS ACCEPTED CONTINUOUSLY TESTS HELD PERIODICALLY

Table with 3 columns: Examination No. & Title, Salary Grade, Beginning Salary. Rows include 20-151 and 20-152 Developmental Disabilities Secure Care Treatment Aide Trainee.

NO APPLICATION PROCESSING FEE REQUIRED

*As a Developmental Disabilities Secure Care Treatment Aide Trainee, you would participate in a traineeship ranging from 9 to 15 months, depending on your ability to demonstrate competency in certain critical performance areas of consumer care.

MINIMUM QUALIFICATIONS TO PARTICIPATE IN THIS EXAMINATION: You must have:

- Either 1. graduated from high school or have earned a high school equivalency diploma (such as a GED) or higher;**
Or 2. a Direct Support Professional (DSP) Certificate from an accredited public or private organization.***

**You must include the name and location of the high school or governmental authority that granted the diploma in the "Education" Section of your application.

***You must include the name and location of the organization that granted the DSP Certificate in the "Education" Section of your application and you MUST supply a copy of the Certificate with your application.

There will be a written test administered in English only, which you must pass. If you pass the written test, you must meet the QUALIFICATIONS FOR APPOINTMENT.

QUALIFICATIONS FOR APPOINTMENT:

- 1. License Requirement: You must possess a valid license to operate a motor vehicle in New York State at the time of appointment and continuously thereafter.
2. Physical/Medical Requirements: Your physical and medical condition will be evaluated to ensure that you are able to satisfactorily perform the duties of this position with or without reasonable accommodation.
3. Background Investigation/Justice Center Review: The names of all prospective employees will be:
- Checked against the Staff Exclusion List (SEL) maintained by the Justice Center for the Protection of People with Special Needs.
- Investigated through a Criminal Background Check (CBC).
4. Medicaid and Medicare: In order to be eligible for appointment and to maintain employment, you cannot be listed as an excluded individual or entity on any of the Federal and/or State Medicaid and Medicare exclusion lists.

NOTES:

- 1. Fingerprinting is required at the time of appointment. You will be required to pay the processing fee.
2. Your high school diploma or equivalency diploma must have been awarded by a high school or educational institution accredited by a regional, national, or specialized agency recognized as an accrediting agency by the U.S. Department of Education/U.S. Secretary of Education.
3. Facilities of the Office for People With Developmental Disabilities (OPWDD) operate 24 hours a day, seven days a week.
4. This examination uses the same test as the Direct Support Assistant Trainee examinations.
5. Transition examinations Nos. 10-026 and 10-027 Developmental Disabilities Secure Care Treatment Aide Trainee, are also offered for employees of OPWDD.
6. If you submit an application for No. 20-152 Developmental Disabilities Secure Care Treatment Aide Trainee (Spanish Language), an application for No. 20-151 Developmental Disabilities Secure Care Treatment Aide Trainee will automatically be submitted for you.
7. Language Proficiency: If you are considered for appointment to a language parenthetical position, you will be required to pass a performance test to demonstrate your proficiency in the language.
8. If you are successful on this examination, your name will be placed on the open-competitive list for the facility where you applied for the examination.

DUTIES: As a **Developmental Disabilities Secure Care Treatment Aide Trainee**, you would assist in the habilitation and care of individuals with developmental disabilities living in an OPWDD secure unit. These individuals may exhibit criminal and offending behaviors, have severely deviant behaviors, and/or be dangerous to themselves or others. You would be responsible for providing these individuals with a safe and secure environment and assisting in the implementation of their habilitation plan. You must be able to stand, bend, stretch, lift, and participate in physical interventions. To learn more about what direct support professionals do on the job every day, go to <http://www.youtube.com/watch?v=cnK4z3KAgtE>.

THE POSITIONS: These positions are located **ONLY** in intensive treatment units in certain facilities operated by OPWDD. Refer to "HOW & WHERE TO APPLY" below.

SUBJECT OF EXAMINATION: There will be a **written test** which you must pass in order to be considered for appointment. The **written test** will be administered in English and is designed to test for knowledge, skills, and/or abilities in such areas as:

1. **Dealing with daily situations in an OPWDD setting** - These questions test for the ability to apply common sense in dealing with daily situations encountered by direct care staff in OPWDD settings. No specific knowledge or training is needed to answer these questions.
2. **Observing and recording situations for daily living** - These questions test for the ability to accurately observe and record situations of daily living. Candidates will be given a brief description of a situation of daily living, followed by a number of sentences. Candidates must indicate whether or not the sentences factually and accurately describe the situation presented.
3. **Understanding and applying written instructional material** - These questions test for the ability to understand and apply written instructional material. Each question has two parts. The first part presents a short piece of instructional information. The second part describes a related situation. For each question, candidates must pick the one best answer based on the instructional material and the situation presented.
4. **Arithmetic for daily living** - These questions test for the ability to use basic arithmetic in daily living situations encountered by direct care staff in OPWDD settings. The situations involve the application of simple addition, subtraction, multiplication, or division, as well as interpreting information from simple tables, to answer the problems presented.

Your final score must be 70 or higher in order to pass. Rank on the eligible list will be determined after adding any wartime veterans' and Civil Service Law Section 85-a credits to your final passing score.

Important: OPWDD may communicate with you through email correspondence. This may include the notification of your examination results and canvassing you for interest in appointment. It will be important for you to keep your email address, phone number, and mailing address current by contacting the OPWDD facility where you submitted your examination application.

HOW & WHERE TO APPLY: There is no fee to take this examination. On application form, NYS-APP#4, 20-151 & 20-152, specify the number(s) and title(s) of the examination(s) you wish to take. All statements made on the application are subject to investigation. You may be asked to provide additional information and/or documentation to support statements made on the application. **MAIL THE APPLICATION TO THE FACILITY WHERE YOU WISH TO BE TESTED.** Please note, if you are a current OPWDD employee, you should file the application for transition examination **Nos. 10-026** or **No. 10-027**.

Form NYS-APP#4, 20-151 & 20-152 is an examination application; it is not a job application. You will not receive any notice of the receipt of your application. When a test has been scheduled by the facility, an admission notice, detailing where and when the examination will be held, will be mailed to you approximately two weeks prior to the examination date.

New York State Office for People With Developmental Disabilities:

Broome Developmental Disabilities
State Operations Office
249 Glenwood Road
Binghamton, NY 13905-1695
(607) 770-0241

Sunmount Developmental Disabilities
State Operations Office
2445 State Route 30
Tupper Lake, NY 12986
(518) 359-4150

Within OPWDD, facilities have varying ongoing needs for persons qualified for appointment to these positions. Facilities where these positions are located will accept applications at any time and will schedule the written test whenever additional eligibles are needed. It is anticipated that the examinations will be held on a periodic basis throughout the year. For the testing schedule and other information about this examination, contact the personnel office of the facility where you wish to be tested.

RETEST POLICY: Candidates may file as frequently as once a year, but a new application is required each time.

ADDITIONAL INFORMATION

NEW YORK STATE IS AN EQUAL OPPORTUNITY EMPLOYER: It is the policy of the State of New York to provide for and promote equal opportunity employment, compensation, and other terms and conditions of employment without unlawful discrimination on the basis of age, race, color, religion, disability, national origin, gender, sexual orientation, veteran or military service member status, marital status, domestic violence victim status, genetic predisposition or status, arrest and/or criminal conviction record, or any other category protected by law, unless based upon a bona fide occupational qualification or other exception.

Appointment to many positions in State government require candidates to undergo an investigative screening. This may include a thorough character investigation, a Federal Bureau of Investigation Criminal Record History Check, a Child Abuse Registry clearance, or other similar procedures. Candidates may be fingerprinted and may be required to pay any necessary fees for that procedure. Depending on the nature of the job, the criminal convictions discovered, or any falsified or omitted information revealed, the investigative findings may bar appointment or result in removal after appointment.

ELIGIBILITY FOR EMPLOYMENT: You must be legally eligible to work in the United States at the time of appointment and throughout your employment with New York State. If appointed, you must produce documents that establish your identity and eligibility to work in the United States, as required by the federal Immigration Reform and Control Act of 1986, and the Immigration and Nationality Act.

REASONABLE ACCOMMODATIONS IN TESTING: It is the policy of the Department of Civil Service, in accordance with the New York State Human Rights Law and the Americans with Disabilities Act, to provide qualified persons with disabilities equal employment opportunity and equal opportunity to participate in and receive the benefits, services, programs, and activities of the Department. It is the policy of the Department to provide such persons reasonable accommodations and reasonable modifications as are necessary to provide equal opportunity. Persons with disabilities who require an accommodation to participate in an examination must note this on their application. Further information is available from the Test Administration Unit of the Department of Civil Service. In the Albany area, call 518-457-2487. Outside of the Albany area, call toll free at 1-877-697-5627. For TDD services, call NY Relay at 711 (requires a fee) or 1-800-662-1220.

NEW YORK STATE RESIDENCE IS NOT REQUIRED FOR MOST POSITIONS: However, you must be eligible for employment in the United States.

CONTINUOUS RECRUITMENT/ELIGIBLE LISTS: Candidates who meet the qualifications and pass this examination will have their names placed on the eligible list in the order of final scores, regardless of the date on which they filed or took the test. Generally, the names of qualified candidates will remain on the eligible list for two years. Appeal of ratings will not be allowed as the opportunity for retest exists. The Department of Civil Service reserves the right to terminate this special recruitment program.

CELL PHONES OR ELECTRONIC/COMMUNICATION DEVICES AT THE TEST SITE: Do NOT bring cell phones, beepers, headphones, or any electronic or other communication devices to the test site. The use of such devices at the test site in the test room, hallways, restrooms, building, grounds, or other areas could result in your disqualification.

ADDITIONAL EXAMINATION CREDITS PURSUANT TO CIVIL SERVICE LAW SECTION 85-a

If you are a child or sibling of a firefighter, police officer, emergency medical technician, or paramedic who was killed in the line of duty in the service of New York State, you may be entitled for additional examination credits pursuant to Civil Service Law Section 85-a. For further information, please contact the Department of Civil Service at (518) 473-6077.

EXTRA CREDITS FOR WAR TIME VETERANS

COMPLETE THIS SECTION ONLY IF YOU: Wish to claim War Time Veteran Credits, **AND** have not used **DISABLED** veteran credits for a permanent appointment to a position in New York State or Local Government.

Answering questions in this section means that you are requesting extra credits as either a non-disabled veteran or a disabled veteran. All veterans are encouraged to answer questions in this section of the application to ensure that appropriate points are added to passing examination scores. Veterans who answer "YES" to questions 1, 2, AND 3 may receive tentative credits as a non-disabled veteran; candidates who also answer "YES" to question 4 may receive tentative disabled veteran credits. If you previously used non-disabled veteran credits to obtain a permanent appointment to a position in New York State or Local Government, and subsequent to appointment, were certified as a disabled veteran, you may be eligible to receive additional disabled veteran credits by answering "YES" to BOTH questions 5a **AND** 5b in this section. NOTE: All veterans claiming extra credit will be required to produce eligibility documentation which will be verified at time of interview. Candidates found ineligible for such credit will have the points subtracted from their examination score(s). If it is determined that veteran credits do not increase one's reachability for appointment from an eligible list, the use of veteran credits for such appointment will be waived, and veteran credits can be claimed for future civil service examinations until such time as they are used to receive a permanent appointment as provided by the New York State Constitution.

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| 1. Yes | No | Do you expect to receive or have you already received a discharge which was honorable or release under honorable circumstances from the Armed Forces of the United States? The "Armed Forces of the United States" means the Army, Navy, Marine Corps, Air Force and Coast Guard, including all components thereof, and the National Guard when in the service of the United States pursuant to call as provided by Law, on a full-time active duty basis other than active duty for training purposes. | | | | | | | | | | | | | | | |
| 2. Yes | No | Are you now serving, or have you served, on an active duty basis other than active duty for training purposes during one or more of the following Time of War periods?
<table border="0" style="width: 100%;"> <tr> <td style="width: 33%;">In the Armed Forces:</td> <td style="width: 33%;">or earned the Armed Forces, Navy, or Marine Corps expeditionary medal for service in:</td> <td style="width: 33%;">or in the U.S. Public Health Service:</td> </tr> <tr> <td>• Aug. 2, 1990 until the Persian Gulf hostilities end</td> <td>• (Panama) Dec. 20, 1989 to Jan. 31, 1990</td> <td>• June 26, 1950 to July 3, 1952</td> </tr> <tr> <td>• Feb. 28, 1961 to May 7, 1975</td> <td>• (Lebanon) June 1, 1983 to Dec. 1, 1987</td> <td>• July 29, 1945 to Sept. 2, 1945</td> </tr> <tr> <td>• June 27, 1950 to Jan. 31, 1955</td> <td>• (Grenada) Oct. 23, 1983 to Nov. 21, 1983</td> <td></td> </tr> <tr> <td>• Dec. 7, 1941 to Dec. 31, 1946</td> <td></td> <td></td> </tr> </table> | In the Armed Forces: | or earned the Armed Forces, Navy, or Marine Corps expeditionary medal for service in: | or in the U.S. Public Health Service: | • Aug. 2, 1990 until the Persian Gulf hostilities end | • (Panama) Dec. 20, 1989 to Jan. 31, 1990 | • June 26, 1950 to July 3, 1952 | • Feb. 28, 1961 to May 7, 1975 | • (Lebanon) June 1, 1983 to Dec. 1, 1987 | • July 29, 1945 to Sept. 2, 1945 | • June 27, 1950 to Jan. 31, 1955 | • (Grenada) Oct. 23, 1983 to Nov. 21, 1983 | | • Dec. 7, 1941 to Dec. 31, 1946 | | |
| In the Armed Forces: | or earned the Armed Forces, Navy, or Marine Corps expeditionary medal for service in: | or in the U.S. Public Health Service: | | | | | | | | | | | | | | | |
| • Aug. 2, 1990 until the Persian Gulf hostilities end | • (Panama) Dec. 20, 1989 to Jan. 31, 1990 | • June 26, 1950 to July 3, 1952 | | | | | | | | | | | | | | | |
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| • June 27, 1950 to Jan. 31, 1955 | • (Grenada) Oct. 23, 1983 to Nov. 21, 1983 | | | | | | | | | | | | | | | | |
| • Dec. 7, 1941 to Dec. 31, 1946 | | | | | | | | | | | | | | | | | |
| 3. Yes | No | Are you a United States citizen or an alien lawfully admitted for permanent residence? | | | | | | | | | | | | | | | |
| 4. Yes | No | Do you have a service connected disability rated at 10% or more by the U.S. Department of Veterans Affairs? This disability must have been incurred during a Time of War period listed above. | | | | | | | | | | | | | | | |
| 5a. Yes | No | Have you USED NON-DISABLED veteran credits for a permanent appointment to a position in New York State or Local Government? If you answered "Yes" to "5a" above, you must answer "5b": | | | | | | | | | | | | | | | |
| 5b. Yes | No | After you were permanently appointed using non-disabled veteran credits, were you subsequently certified as having a service connected disability rated at 10% or more by the U.S. Department of Veterans Affairs? | | | | | | | | | | | | | | | |

New York State Residency Requirement for Extra Credits as a War Time Veteran or Disabled Veteran: You will be required to provide proof of current New York State residency at time of appointment.

ADDITIONAL QUESTIONS

Certain job titles, including many law enforcement positions (such as Correction Officer, Parole Officer, and Park Patrol Officer) and direct patient care positions (such as Mental Health Therapy Aide and Secure Care Treatment Aide), are subject to agency criminal history background investigations, as required by law. Applicants should read the official examination announcement for more specific information.

If you answer YES to either of these questions, you MUST provide an explanation in the REMARKS section provided below:

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| 1. Yes | No | Were you ever discharged from any employment except for lack of work, funds, disability or medical condition? |
| 2. Yes | No | Did you ever resign from any employment rather than face a dismissal? |

REMARKS: