

## DUTY STATEMENT

Employee Name:

Classification: C.E.A. (B)	Position Number: 580-801-7500-002
Working Title: Chief, Field Operations North Division	Work Location: 1615 Capitol Avenue Sacramento, CA 95814
Collective Bargaining Unit: M01	Tenure/Time Base: Non-tenure/Full-time
Center/Office/Division: Center for Healthcare Quality	Branch/Section/Unit: Field Operations North Division

All employees shall possess the general qualifications, as described in California Code of Regulations Title 2, Section 172, which include, but are not limited to integrity, honesty, dependability, thoroughness, accuracy, good judgment, initiative, resourcefulness, and the ability to work cooperatively with others.

This position requires the incumbent to maintain consistent and regular attendance; communicate effectively (orally and in writing) in dealing with the public and/or other employees; develop and maintain knowledge and skill related to specific tasks, methodologies, materials, tools, and equipment; complete assignments in a timely and efficient manner; and, adhere to departmental policies and procedures.

### Competencies

The competencies required for this position are found on the classification specification for the classification noted above. Classification specifications are located on the [California Department of Human Resource's Job Descriptions webpage](#).

### Job Summary

This position supports the California Department of Public Health's (CDPH) mission and strategic plan by providing day-to-day supervision and direction to Field Operations North management and staff engaged in investigating complaints and surveying health care facilities to ensure compliance with State and federal laws that protect patient health. The incumbent oversees the northern California region, which includes regional offices in the Central Valley, Bay Area, and areas up to the northern California border and the State Wide Surveyors.

The incumbent works under the general direction the Deputy Director, Center for Health Care Quality (CHCQ).

### Special Requirements

- Conflict of Interest (COI)
- Background Check and/or Fingerprinting Clearance
- Medical Clearance
- Travel:

- Bilingual: Pass a State written and/or verbal proficiency exam in
- License/Certification:
- Other:

### **Essential Functions (including percentage of time)**

30%	Manages, plans, organizes, directs and monitors the work of multidisciplinary staff engaged in investigating complaints and surveying health care facilities and providers to ensure compliance with State and federal laws that protect patient health. Oversees and provides direction for the support of operations and activities of the CHCQ, Licensing and Certification (L&C) Program's field operations services associated with the State's universe of more than 11,000 licensed entities. Including but not limited to the following tasks: initial and periodic licensing surveys for health care facilities and provider agencies; initial and periodic certification surveys for health care facility and provider agency participation in the federal Medicare and State Medicaid programs; conducting investigations in response to complaints and incidents reported by the health care facilities and provider agencies; and validate surveys of work completed by Accrediting Organizations approved by the Centers for Medicare and Medicaid Services (CMS). Unit.
20%	Participates in policy-making decisions that impact the program, staff, providers and the public. This includes but is not limited to proposed legislation, regulations and internal operation policies that drive the program functions and serve the Department's mission. Reviews legislation, laws, and public policy to recommend changes to promote and support the interests of both the general population and special groups. Maintains emergency management readiness in the event of disasters, facility closures and resident transfer. Makes timely and sound decisions in emergencies regarding patient safety. In absence of, or in conjunction with the CHCQ Deputy Director, makes recommendations to the CDPH Executive Management Team.
15%	Reviews, directs, and participates in the most complex and sensitive enforcement action against health care facilities and provider agencies such as license revocations, decertification, receiverships, temporary managers, facility closures, assessment of administrative and civil money penalties, as well as trial and/or settlement preparations and negotiations. Provides the CHCQ Deputy Director with recommendations and options for short-term and long-term corrective actions.
15%	Analyzes and monitors operational performance of staff to ensure both State and federal workload objectives are met, and to monitor and assess areas of potential cost, program improvement, or policy change. Implement policies, objectives, activities, or corrective action plans to ensure continuing operations and increased productivity.
10%	Works closely with other governmental agencies, the private sector, and legislative staff in order to negotiate and effect policy changes on potentially volatile and/or unusually sensitive issues, which could adversely affect the program. Represents the program and serves as a liaison with regional, state, and public agencies. Works with affected stakeholders within and outside CDPH to identify and analyze options, develop recommended approaches, and present to the CHCQ Deputy Director.

5% Develops testimony and attends legislative hearings as the technical expert for licensing and certification. Makes presentations to the legislative staff and committees regarding policies, programs and budgets related to the licensing and certification program. On behalf of the Deputy Director of CHCQ, addresses sensitive press inquiries concerning enforcement actions and other Licensing and Certification program issues.

### **Marginal Functions (including percentage of time)**

5% Performs other work-related duties as assigned.

I certify this duty statement represents an accurate description of the essential functions of this position. I have discussed the duties and have provided a copy of this duty statement to the employee named above.	I have read and understand the duties and requirements listed above, and am able to perform these duties with or without reasonable accommodation. (If you believe reasonable accommodation may be necessary, or if unsure of a need for reasonable accommodation, inform the hiring supervisor.)
Supervisor's Name:	Date
Supervisor's Signature	Date

**HRB Use Only:**  
Approved By: CB

Employee's Name:	Date
Employee's Signature	Date