

DUTY STATEMENT

Employee Name:	Position Number: 580-810-8011-026
Classification: Health Facilities Evaluator Nurse	Tenure/Time Base: Permanent/Full time
Working Title: Nurse Surveyor	Work Location: MULTIPLE
Collective Bargaining Unit: R17	Position Eligible for Telework (Yes/No): Yes
Center/Office/Division: Center for Health Care Quality/Public Policy and Prevention Division	Branch/Section/Unit: Standards Interpretation Branch/Regulatory Review Section/Appeals Unit

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.

All California Department of Public Health (CDPH) employees perform work that is of the utmost importance, where each employee is important in supporting and promoting an environment of equity, diversity, and inclusivity, essential to the delivery of the department's mission. All employees are valued and should understand that their contributions and the contributions of their team members derive from different cultures, backgrounds, and life experiences, supporting innovations in public health services and programs for California.

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 performing independent review of completed state and federal surveys and long-term care complainant appeal investigations. Conducts review of entity reports, surveys, and investigations as needed for oversight of home health agencies and intermediate care facilities for the developmentally disabled participating in Medi-Cal waiver programs. The geographic assignment encompasses the entire state of California. Travel is required

The incumbent works under the direction of the Health Facilities Evaluator Manager I (HFEM I).

Special Requirements

- Conflict of Interest (COI)
- Background Check and/or Fingerprinting Clearance
- Medical Clearance
- Travel: 5%
- Bilingual: Pass a State written and/or verbal proficiency exam in
- License/Certification:
- Other:

Essential Functions (including percentage of time)

- 40% Conducts reviews, investigates, and evaluates facility compliance during appeal reviews requested by complainants dissatisfied with the results of a complaint investigation, develops correspondence to clearly and concisely communicate the final appeal determination to the complainant, and provides justifications to support the Deputy Director’s final determination. Maintains accurate electronic logs, which detail all aspects of work for tracking purposes.
- 40% Conducts independent informal dispute resolutions requested by facilities with imposed civil money penalties. The review includes independently evaluating all facility submitted information and survey documents, and other associated information in formulating a determination.
- 15% Provides oversight for two federal waivers (Continuous Nursing Waiver, and the Assisted Living Waiver) by review of significant event reports and participation in interagency meetings with the Department of Health Care Services to confirm participating provider compliance with state licensing and federal certification requirements, and conditions of waiver participation

Marginal Functions (including percentage of time)

- 5% Other duties as required to support the Center for Health Care Quality Standards Interpretation Branch.

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	Employee’s Name:	Date
Supervisor’s Signature	Date	Employee’s Signature	Date

HRD Use Only:
 Approved By: CP
 Date: 9/12/24