

**DUTY STATEMENT**

Employee Name:	Position Number: <b>580-854-5393-XXX</b>
Classification: Associate Governmental Program Analyst	Tenure/Time Base: Permanent/Full-Time
Working Title: Health Facilities Compliance Surveyor	Work Location: 1741 Technology Drive, Suite 160 San Jose, CA 95110
Collective Bargaining Unit: R01	Position Eligible for Telework (Yes/No): Yes
Center/Office/Division: Center for Health Care Quality/Field Operations North Division	Branch/Section/Unit: Bay Area Region/ San Jose District Office

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.

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**Competencies**


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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](#).

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**Job Summary**


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This position supports CDPH's mission and strategic plan by performing program analysis activities in health facilities licensed by the Department, to determine compliance with state and federal licensing and certification requirements. The Health Facilities Surveyor's primary responsibility is for uniform application and enforcement of state and federal laws, rules, and regulations pertaining to operations, policies, and procedures; contractual agreements, supplies, personnel, Disaster and Quality Assurance programs, environmental conditions, and other non-clinical related services of the health facility to determine compliance with the California Code of Regulations, and Health and Safety Code. Extensive travel is required, and may include overnight stays, evening, weekend, or holiday surveys. Incumbent will travel and wear appropriate Personal Protective Equipment according to guidance

requirements, such as: mask, gown, gloves, safety glasses or face shield during site visits to health care facilities.

The incumbent works under the direction of a Health Facilities Evaluator II (Supervisor) or a Staff Services Manager I. The incumbent may receive guidance from Health Facilities Evaluator Nurse staff during site visits.

### Special Requirements

- Conflict of Interest (COI)
- Background Check and/or Fingerprinting Clearance
- Medical Clearance
- Travel: Up to 45%
- Bilingual: Pass a State written and/or verbal proficiency exam in
- License/Certification: The incumbent is required to take the Surveyor Minimum Qualification Test (SMQT) per Centers for Medicare and Medicaid Services (CMS).
- Other:

### Essential Functions (including percentage of time)

45% Travels to and conducts in-depth surveys of healthcare facilities, individually or as part of a team, to determine healthcare facility compliance with state licensing and federal certification regulations, particularly regarding facility operations, personnel, procedures, programs, physical environment, and other non-clinical/nursing related functions based on observations. Interviews and records statements from healthcare facility residents, staff, and other relevant personnel and fully documents all evidence relating to non-compliance. Applies Division 5, Title 22 of the California Code of Regulations, and other applicable laws, rules, and regulations to determine a healthcare facility's compliance with State licensing requirements. Consults with supervisory or clinical staff as appropriate.

Prepares comprehensive written narrative reports of findings including conclusions and recommendations and prepares written statements of deficiencies. In a lead role, may coordinate the offsite preparation work for survey/investigation team. May act as a liaison and point of contact for health facility staff and CDPH management coordinating facility exit conferences, and collection of relevant facility documents.

20% Independently conducts post-survey activities, including reviewing and responding to health care facility rebuttals, reviewing regulations, and identifying issues that require policy clarification. Conducts follow-up visits at healthcare facilities to verify the facility has corrected cited deficiencies at or above the minimum requirements of applicable rules, laws, and regulations. Fully documents any evidence of noncompliance for further legal action. Prepares comprehensive reports of follow-up findings, including conclusions and recommendations. Consults with supervisory and/or clinical staff as appropriate.

Attends meetings and participates in the improvement of uniform compliance in licensed healthcare facilities. Works with CDPH's Office of Legal Services to prepare statements and testify in administrative hearings.

15% Responds to complaints submitted to CDPH regarding the operations, personnel, procedures, programs, physical environment, or other ancillary functions. Travels to and independently conducts complaint investigations and documents interviews with the complainant, relevant witnesses, facility patients, staff, and other relevant personnel. Consults with supervisory and/or clinical staff as appropriate.

Prepares written comprehensive narrative reports of findings including conclusions and recommendations. Prepares written statements of deficiencies when deemed appropriate.

10% Responds to complex questions and inquiries regarding the status and outcomes of health facility surveys and investigations. Advises administrators of facilities on regulations and licensing requirements. Advises and assists healthcare facility administrators in matters relating to the State and Health and Safety Code requirements for inspections, licensing, and operation of healthcare facilities. Consults with supervisory and clinical staff as appropriate.

5% Develops and presents both written and verbal testimony to support deficiencies cited at state and federal hearings, municipal or superior court proceedings, and arbitration procedures. Responds to these legal actions as an expert witness on matters relating to facility non-compliance with relevant regulations.

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

5% Attends meetings and participates in local programs and workgroups with other state and federal agencies to improve uniform compliance in licensed health care facilities. Works cooperatively and closely with other agencies (both state and county) that are concerned with quality of care. Prepare licensing and complaint packets for staff. Complete special projects 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	Employee’s Name:	Date
Supervisor’s Signature	Date	Employee’s Signature	Date

**HRD Use Only:**  
 Approved By: CJC  
 Date: 11/01/24

**DUTY STATEMENT**

Employee Name:	Position Number: <b>580-854-5157-XXX</b>
Classification: Staff Services Analyst	Tenure/Time Base: Permanent/Full-Time
Working Title: Health Facilities Compliance Surveyor	Work Location: 1741 Technology Drive, Suite 160 San Jose, CA 95110
Collective Bargaining Unit: R01	Position Eligible for Telework (Yes/No): Yes
Center/Office/Division: Center for Health Care Quality/Field Operations North Division	Branch/Section/Unit: Bay Area Region/ San Jose District Office

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.

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**Competencies**


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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](#).

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**Job Summary**


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This position supports CDPH's mission and strategic plan by performing program analysis activities in health facilities licensed by the Department to determine compliance with state and federal licensing and certification requirements. Under general supervision, the Health Facilities Surveyor's primary responsibility is for uniform application and enforcement of state and federal laws, rules, and regulations pertaining to operations, policies and procedures; contractual agreements, supplies, personnel, Disaster and Quality Assurance programs, environmental conditions, and other non-clinical related services of the health facility to determine compliance with the California Code of Regulations, and Health and Safety Code. Extensive travel is required, and may include overnight stays, evening, weekend, or holiday surveys. Incumbent will travel and wear appropriate Personal Protective

Equipment according to guidance requirements, such as: mask, gown, gloves, safety glasses or face shield during site visits to health care facilities.

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### Special Requirements

- Conflict of Interest (COI)
- Background Check and/or Fingerprinting Clearance
- Medical Clearance
- Travel: Up to 45%
- Bilingual: Pass a State written and/or verbal proficiency exam in
- License/Certification: The incumbent is required to take the Surveyor Minimum Qualifications Test (SMQT) per Centers for Medicare and Medicaid Services (CMS).
- Other:

### Essential Functions (including percentage of time)

45% Travel to and conduct low to medium complexity surveys of healthcare facilities, individually or as part of a team, to determine healthcare facility compliance with state licensing and federal certification regulations, particularly in regard to facility operations, personnel, procedures, programs, physical environment, and other non-clinical/nursing related functions based on observations. Interview and record statements from healthcare facility residents, staff, and other relevant personnel and fully document all evidence relating to non-compliance. Apply Division 5, Title 22 of the California Code of Regulations, and other applicable laws, rules, and regulations to make a determination of a healthcare facility's compliance with State licensing requirements. Consult with supervisory or nursing staff as appropriate.

Assist with preparing comprehensive written narrative reports of findings including conclusions and recommendations and prepare written statements of deficiencies when deemed appropriate. Assist with coordinating the offsite preparation work for survey/investigation team. May assist with coordinating facility exit conferences, and collection of relevant facility documents.

20% As part of a team, conduct post-survey activities, including reviewing and responding to healthcare facility rebuttals, reviewing regulations, and identifying issues that require policy clarification. Attend follow-up visits at healthcare facilities to verify the facility has corrected cited deficiencies at or above the minimum requirements of applicable rules, laws, and regulations. Document evidence of noncompliance for further legal action. Prepare comprehensive reports of follow-up findings, including conclusions and recommendations. Consult with supervisory and/or clinical staff as appropriate.

Attend meetings and participate in the improvement of uniform compliance in licensed healthcare facilities. Work with CDPH's Office of Legal Services to prepare statements and

testify in administrative hearings.

15% As part of a team, respond to complaints submitted to CDPH regarding the operations, personnel, procedures, programs, physical environment, or other ancillary functions. Travel to and conduct non-clinical complaint investigations and documents interviews with the complainant, relevant witnesses, facility patients, staff, and other relevant personnel. Consult with supervisory and/or clinical staff as appropriate.

Assist with preparing written comprehensive narrative reports of findings including conclusions and recommendations. Prepare written statements of deficiencies.

10% Respond to questions and inquiries regarding the status and outcomes of health facility surveys and investigations. Consult with supervisory and clinical staff as appropriate.

5% Assist with developing written testimony to support deficiencies cited at state and federal hearings, municipal or superior court proceedings, and arbitration procedures.

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

5% Attend meetings and participate in local programs and workgroups with other state and federal agencies to improve uniform compliance in licensed healthcare facilities. Work cooperatively and closely with other agencies (both state and county) that are concerned with quality of care. Prepare licensing and complaint packets for staff. Complete special projects as assigned.

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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: CJC  
 Date: 11/01/24