

# CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

## **MEDICAL CONSULTANT I**

Schematic Code: SM80 Classification Code: 7787 Exam Code: 7H1AA

## **Examination Type: Open Continuous**

## **FINAL FILING DATES**

Testing is considered continuous as dates can be set at any time. Applications will be reviewed to ensure the minimum requirements for participation in this exam are met. Possession of the entrance requirements does not assure a place on the eligible list. Once you have taken the examination, you may not retest for 12 months from the established list date.

Applications must be submitted by the filing dates indicated below. Applications postmarked, personally delivered, or received via interoffice mail after the final filing date, will be held for the next administration of the exam. The filing dates are:

June 15, 2017

December 15, 2017

June 15, 2018

## SALARY

- Range A: \$9808-\$13454 per month
- Range B: \$10281-\$14106 per month
- Range C: \$10580-\$14517 per month

## EQUAL EMPLOYMENT OPPORTUNITY

The State of California is an equal opportunity employer to all, regardless of age, ancestry, color, disability (mental and physical), exercising the right to family care and medical leave, gender, gender expression, gender identity, genetic information, marital status, medical condition, military or veteran status, national origin, political affiliation, race, religious creed, sex (includes pregnancy, childbirth, breastfeeding and related medical conditions), and sexual orientation.

## WHO CAN APPLY

Persons who meet the minimum qualifications (entrance requirements) as stated on this announcement may take this examination, which is competitive.

## MINIMUM QUALIFICATIONS

Possession of the legal requirements for the practice of medicine in California as determined by the Medical Board of California (formerly known as California Board of Medical Quality Assurance) or the California Board of Osteopathic Examiners. (Applicants who are in the process of securing approval by the Medical Board of California (formerly known as California Board of Medical Quality Assurance) or the Board of Osteopathic Examiners will be admitted to the examination, but the Board to which application is made must determine that all legal requirements have been met before candidates will be eligible for appointment.)

#### AND

One year of experience in the practice of medicine, exclusive of the internship.

## **GENERAL QUALIFICATIONS**

In addition to the scope defined on this announcement, candidates must possess essential personal qualifications including integrity, initiative, dependability, good judgment, ability to work cooperatively with others, and a state of health consistent with the ability to perform the assigned duties of the class. A medical examination may be required.

## **POSITION DESCRIPTION**

#### **TYPICAL TASKS**

Under direction, a Medical Consultant I, Department of Health Services, works either (1) in a region or district office to give professional advice and guidance on the medical aspects of one of the Department's programs; or (2) in a small district office to act as district administrator responsible for one of the Department's programs; or (3) in a staff capacity to assist in the review of the work of the field to assure uniformity and quality of decisions and in the development of policies and standards relative to the Department's programs; and to do other related work.

## **HOW TO APPLY**

To apply for this examination, please complete and return the following:

#### **STANDARD STATE APPLICATION (FORM 678)**

#### COPY OF UNOFFICIAL/OFFICIAL COLLEGE TRANSCRIPTS

Applications and any additional documents must be submitted via the U.S. Postal Service or hand delivered to the Department of Public Health Human Resources Office (hours are 8:00 AM to 5:00 PM). Submit (<u>California State Application STD 678</u>) and any additional documents to:

DEPARTMENT OF PUBLIC HEALTH Examination Services Unit 1615 Capitol Ave., 4<sup>th</sup> floor, Suite 73-430 P.O. Box 997378 MS 1700 – 1702 Sacramento, CA 95899-7378

DO NOT SUBMIT APPLICATIONS TO THE CALIFORNIA DEPARTMENT OF HUMAN RESOURCES (CalHR) THROUGH EMAIL THROUGH FAX THROUGH INTER-AGENCY MAIL

### **CONTACT INFORMATION**

All questions regarding the minimum qualifications, applying for the examination, being scheduled for the examination, reasonable accommodations, the examination components, scoring, etc., may be directed to the contact information below:

#### PHONE NUMBER: 916-650-0436

### **EXAMINATION INFORMATION**

This examination utilizes and evaluation of education and experience (E&E) weighted 100%, and is based solely upon information provided with the application information provided with the applications will be assessed compared to a standard developed in relation to the elements of the job and linked to the knowledge and abilities required on the job.

Special care should be taken to submitting a complete description of your education and experience relevant to the typical tasks, scope and minimum qualifications stated on this announcement. Supplemental information will be accepted but competitors should read the announcement carefully to determine what kind of information will be useful to those individuals completing the evaluation.

The California Department of Public Health reserves the right to revise the examination plan to better meet the needs of the service if the circumstances under which this examination was planned change. Such revision will be in accordance with civil service law and rules and all competitors will be notified.

#### **REQUIREMENTS FOR ADMITTANCE TO THE EXAMINATION**

It is your responsibility to make sure you meet the education and/or experience requirements stated on this announcement on the date you submit your application. Your signature on your application indicates that you have <u>read</u>, <u>understood</u>, and <u>possess</u> the basic qualifications required.

NOTE: Applications must include "to" and "from" dates (month/day/year), time base, job titles and/or civil service class title(s), and range (if applicable) for all work experience. College course Information must include title, number of semester or quarter units, name of institution, completion dates, and degree. Applications received without this information will be rejected. Applicants <u>must</u> submit a copy of unofficial/official transcripts along with the application when using education to meet the entrance requirements for this examination.

**SCOPE OF EXAMINATION:** Ratings will be determined based on the depth and breadth of professional education and experience beyond what is minimally required. Emphasis will be placed on measuring:

#### Knowledge of:

- 1. Principles and practices of general medicine and surgery with particular reference to the techniques and trends in the diagnosis of physical and mental handicaps and in treatment programs for such handicaps.
- 2. Interrelationships of Federal, State, and local professional and voluntary public health and welfare agencies and of the programs and services of such agencies.
- 3. Principles of community organization and skill in their application.
- 4. Principles of preventative medicine.
- 5. Department's Equal Employment Opportunity Program objectives.
- 6. A manager's role in the Equal Employment Opportunity Program and the processes available to meet equal employment opportunity objectives.

#### Ability to:

- 1. Interpret and apply the medical policies and standards of the Department's program of medical care.
- 2. Promote the organization of community health resources and their effective utilization in a medical care program.
- 3. Analyze situations accurately and take effective action.
- 4. Establish and maintain cooperative relations with those contacted in the work.
- 5. Write effectively.
- 6. Communicate effectively before professional and lay groups.
- 7. Effectively contribute to the Department's equal employment opportunity objectives.

## **ELIGIBLE LIST INFORMATION**

In order to obtain a position on the eligible list, a minimum rating of 70% must be attained. Names of successful competitors are merged into a departmental open list established for use by the California Department of Public Health in order of final scores regardless of testing date. Eligibility expires **12** months after it is established unless the needs of the service and conditions of the list warrant a change in this period. All candidates meeting the minimum qualifications will be placed on the eligible list.

## **VETERAN'S PREFERENCE**

Will be awarded in this examination, pursuant to Government Code Section 18973.1, effective January 1, 2014, as follows: 1) Any veteran, widow or widower of a veteran, or spouse of a 100 percent disabled veteran, who achieves a passing score in an entrance examination, shall be ranked in the top rank of the resulting eligibility list. Any veteran who has been dishonorably discharged or released is not eligible for veterans' preference; 2) An entrance examination is defined, under the law, as any open competitive examination; 3) Veterans' Preference is not granted once a person achieves permanent civil service status.

## HOW TO APPLY FOR VETERANS' PREFERENCE

The <u>California State Jobs' website</u> (www.jobs.ca.gov) has information on how to apply for Veterans' Preference on their website and on the <u>Application for Veterans' Preference form (CalHR 1093)</u> (https://jobs.ca.gov/PDF/SPB1093.pdf). Additional information is also available at the <u>Department of Veterans Affairs website</u> (http://www.cdva.ca.gov).

TDD is Telecommunications Device for the Deaf and is reachable only from phones equipped with a TDD device.

The California Relay (Telephone) Service for the deaf or hearing impaired: MCI from TDD: 1-800-735-2929 MCI from voice telephone: 1-800-735-2922 Sprint from TDD: 1-888-877-5378 Sprint from voice telephone: 1-888-877-5379

## **CONDTIONS OF EMPLOYMENT (631)**

## **Examination Title: Medical Consultant I**

Name: \_\_\_\_\_\_ (Print: first, middle initial, last)

Final Filing Dates:

June 15, 2017

December 15, 2017

June 15, 2018

If you are successful in your examination your name will be placed on the active employment list and certified to fill vacancies according to the conditions you specify on this form. If you are unwilling to accept work or do not reply promptly to communications your name will be placed on the inactive list.

Locations in which you are willing to work:

Please check your choices - you will not be offered a job in locations not checked.

Contra Costa County (0700) \_\_\_\_\_ Orange County (3000) \_\_\_\_ Sacramento County (3400) \_\_\_\_ San Diego County (3700) \_\_\_\_ Sonoma County (4900) \_\_\_\_ Fresno County (1000) \_\_\_\_ Riverside County (3300) \_\_\_\_ San Bernardino County (3600) \_\_\_\_ San Mateo County (4100) \_\_\_\_ Ventura County (5600) \_\_\_\_

TYPE OF EMPLOYMENT DESIRED:

ON A PERMANENT BASIS, I AM WILLING TO WORK:

\_\_\_\_Full Time

\_\_\_\_\_ Part Time (regular hours less than 40)

\_\_\_\_Intermittent (on call)

\_\_\_\_Limited Term

ON A TEMPORARY BASIS, I AM WILLING TO WORK:

\_\_\_\_Full Time

\_\_\_\_\_ Part Time (regular hours less than 40)

\_\_\_\_Intermittent (on call)

\_\_\_\_Limited Term

It is your responsibility to notify the Department of Public Health, Examination Services Unit, of any changes in your address or availability for employment. All correspondence must include your name, examination title, and identification number.

Signature:	Date:	
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