

DUTY STATEMENT

Employee Name:

Classification: Health Facilities Evaluator Manager II	Position Number: 580-855-7993-001
Working Title: District Manager	Work Location: 1889 North Rice Avenue Oxnard, CA 93030
Collective Bargaining Unit: S01	Tenure/Time Base: Permanent/Full-time
Center/Office/Division: Center for Health Care Quality/Field Operations South Division	Branch/Section/Unit: Inland Empire Region/ Ventura Regional 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.

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

The Health Facilities Evaluator Manager II (HFEM II)) position supports the California Department of Public Health’s (CDPH) mission and strategic plan by having overall responsibility for overseeing the review, evaluation, inspection, and certification of health facilities and agencies as to their compliance with state and federal laws and regulation and investigation of complaints. The HFEM II is responsible for carrying out program activities in the San Jose region for facilities and agencies under the jurisdiction of the Center. The HFEM II ensures that all department and program mandates, policies and procedures are carried out in an appropriate and consistent manner. Up to 20% travel is required to attend statewide meetings, conferences, and field activities.

The incumbent works under the general direction of the Field Operations Branch Chief.

Special Requirements

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

- Medical Clearance
- Travel: 20 %
- Bilingual: Pass a State written and/or verbal proficiency exam in
- License/Certification:
- Other:

Essential Functions (including percentage of time)

- 25% Responsible for planning, managing, and directing the day-to-day operations of the district office. Provides overall oversight and/or training to Health Facilities Evaluator Manager Is, Health Facilities Evaluator IIs (Supervisor), and Health Facilities Evaluator Nurses in ensuring quality control of survey protocols and policy development related to the safe delivery of patient care services. Approves all personnel actions within the district office (hires, transfers, adverse action, etc). Acts as the primary spokesperson regarding the District's licensing and certification policies and issues.
- 20% Applies clinical knowledge of current nursing practices and standards of clinical care to review and monitor supervisor's workload and performance to ensure that required licensing and certification activities are performed in accordance with mandated policies and procedures and in a timely and professional manner. Make workload adjustments as necessary such as reviewing, monitoring, identifying potential problems, planning strategies, setting priorities, making recommendations, etc. to accomplish the required tasks.
- 20% Meets and confers with representatives from federal, state and local agencies, advocacy and/or consumer groups, public officials, local community members, and providers regarding specific complaints, problems or adverse actions against health facilities within the district. These include license revocations, Medi-Cal/Medicare decertifications, issuance of citations, and general provider and consumer health facility issues and concerns.
- 10% Reviews, approves, and ensures statewide uniformity on all actions taken against healthcare facilities that violate laws and rules related to acceptable patient care standards and scope of practice for a variety of healthcare professionals, including the appropriateness of delivery of health care and services of complex clinical procedures, treatments, diagnostics, and interventions in healthcare facilities and provider entities. Conducts informal dispute resolutions and hold informal conferences for complaint appeals. Review and coordinates approvals/disapprovals of Class A and AA citations and program flexibility requests (alternate method of meeting the intent of the regulation). Assesses and determines the appropriateness of the delivery of health care and services of complex procedures, treatments, diagnostics, and intervention from healthcare facilities and providers.
- 5% Acts as an expert witness in lawsuits against the Department and takes part in depositions and settlement conferences for citations.
- 5% Attends statewide District Manager/Administrator meetings when scheduled by the Field Operations Branch Chiefs. Provides agenda items for meetings and makes presentations as necessary.
- 5% Prepares and conducts staff meetings for district office staff.

5% Implements special activities through staff for new programs such as focused enforcement, special initiatives, and regional survey programs. Reviews and provides recommendations on proposed regulations, legislation and operational procedures to program management.

Marginal Functions (including percentage of time)

5% Acts as Field Operations Branch Chief upon request in their absence. Acts as the Duty Officer when requested, to communicate urgent facility related matters to other liaisons and the headquarters office. Other work-related duties as required.

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
HRB Use Only: Approved By: J.F	Date Jan 21		