


**Department of Health Care Access and Information
Duty Statement**

Employee Name Vacant	Organization Director's Office 
Position Number 441-100-4800-XXX	Telework Option In-Office
Classification Supervisor I	Working Title Operations Manager
Supervision Exercised Directly supervises support staff	Location Sacramento
Conflict of Interest: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Fingerprint/Live Scan: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Revision Date June 2026	Effective Date

Mission and Vision

HCAI is a leader in collecting data and disseminating information about California's healthcare landscape, promoting an equitably distributed health workforce, and publishing valuable information. The Department does this through five program areas - Affordability, Workforce, Data, Facilities, Financing.

HCAI's mission is to expand access to quality, equitable, affordable health care for all Californians by supporting high value delivery systems, resilient health facilities and workforces, and actionable health information and strategies.

HCAI's vision is a healthier California where all receive equitable, affordable, and quality health care.

General Description

Under the general direction of the Chief Deputy Director, the Supervisor I (Sup I) serves as the Operations Manager for the Department of Health Care Access and Information Director's Office. The incumbent is responsible for managing the office's operations, service portfolio, and department staff engagement plan. Supports the department's staff and leadership engagement planning process and leads cross-departmental collaboration efforts focused on creating alignment and implementing best practices. As a representative of the Directorate, the incumbent works in partnership with the offices to support the Department's program objectives.

Essential Job Functions

- 35%** Implements and manages the department staff and leadership engagement plan, serves as project and internal communications manager for the Director's office. Prepares analysis and reports and makes recommendations to facilitate strategic decision-making. Represents the office in designated Department and Agency forums. Identifies leads and implements performance improvement projects to achieve department objectives.

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- 30%** Manages the allocation of the office’s resources to achieve timely outcomes and measurable goals; adjusts plans, schedules, and initiatives to meet emerging or new projects while continuing to address the department's priorities. Proactively identifies, mitigates, and advises the Directorate on the potential impact of administrative changes.

- 20%** Directs all administrative support and business operations for the office, including, but not limited to, human resources, facilities, budget review, expenditure tracking, contracts, and procurements. Formulates and monitors procedures for administrative and Directorate support functions.

- 10%** Manages, coaches, and develops the office’s support staff; provides clear strategic vision and management with an emphasis on delivering valuable service to internal and external stakeholders.

Marginal Job Functions

- 5%** Reviews timesheets and requests for leave, travel requests, and expense claim submittals for executive-level management. Performs other duties as assigned.

Physical Demands

Must possess and maintain sufficient strength, agility, endurance, and sensory ability to perform the duties contained in this duty statement with or without reasonable accommodation.

Working Conditions

Requires prolonged sitting and use of phone and computer devices. Requires frequent contact with employees and the public. Requires frequent mobility in various on-site work areas of the department. Must be available for contact after normal business hours of Monday through Friday, 8:00 a.m. to 5:00 p.m., including weekends and holidays. Some travel is required.

Employee Statement

I have reviewed and discussed the duties and responsibilities of this position with my supervisor and have received a copy of this duty statement.

Employee Name	Employee Signature	Date Signed

Supervisor Statement

I have discussed the duties of this position with and have provided a copy of this duty statement to the employee named above.

Supervisor Name	Supervisor Signature	Date Signed

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