

**DUTY STATEMENT
CALIFORNIA DEPARTMENT OF VETERANS AFFAIRS
VETERANS HOME OF CALIFORNIA - YOUNTVILLE**

PART A	
Position No: 573-365-8212-001	Date:
Class: Nurse Practitioner	Name:
Under direction of the Chief of Medicine, the Nurse Practitioner will plan, provide and evaluate generalized health care services at the Veterans Home of California-Yountville and provide direct and indirect patient care services. The Nurse Practitioner will collaborate with each attending physician to integrate health maintenance, disease prevention, physical diagnosis, and treatment of common, episodic and chronic problems in primary care with equal emphasis on health teaching and management. Incumbent must be linked to Medicare, MediCal / DentiCal, and all other applicable insurance vendors.	
Percentage of time performing duties:	ESSENTIAL FUNCTIONS
35%	Collaborate with the attending physician to provide clinical assessment and case management services to residents in accordance with established protocols. Construct and interpret medical history, perform physical assessment, evaluate resident behavior, perform and interpret selected laboratory tests, identify problems, and develop and implement treatment plans for residents.
20%	Seek expert opinion or advice of a physician when a case falls outside scope of practice; refer residents to physician for consultation and specialized health resources for treatment when necessary but retain responsibility for the clinical management as well as subsequent modification.
20%	Work effectively with residents and families to assist them in solving physical, mental and social health problems. Work as a member of the health team. Prepare clear and concise reports.
15%	Instruct residents in the prevention of disease, good health practices, and the health care of ill or injured persons. Participate in the development of standardized procedures. Other duties as required under the direction of the Chief of Medicine.
5%	Incumbent will complete appropriate charge slips for all resident visits in order for the Veterans Home to be reimbursed for services provided.
NON-ESSENTIAL FUNCTIONS	
5%	Other related duties as assigned.

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PART B - PHYSICAL AND MENTAL REQUIREMENTS OF ESSENTIAL FUNCTIONS					
Activity	Not Required	Less than 25%	25% to 49%	50% to 74%	75% or More
VISION: Evaluate patients; review chart data; proofread documents; prepare various forms; use computer.					X
HEARING: Interact with patients and staff; answer inquiries; answer telephone; provide verbal information.					X
SPEAKING: Interact with patients and staff; answer inquiries; answer telephone; provide verbal information.					X
WALKING: Make patient rounds; attend conferences and meetings.			X		
SITTING: Sit at desk doing chart work; review data; use computer; use telephone.				X	
STANDING: Make patient rounds; attend conferences and meetings.			X		
BALANCING: Make patient rounds; attend conferences and meetings.		X			
CONCENTRATING: Evaluate patients; determine patient treatment plans; interpret data; interview patients; use computer.					X
COMPREHENSION: Evaluate patients; determine patient treatment plans; interpret data; interview patients; use computer.					X
WORKING INDEPENDENTLY: Evaluate patients; determine patient treatment plans; interpret data; interview patients; use computer.					X
LIFTING UP TO 10 LBS : Medical books; medical charts.		X			
LIFTING 10-25 LBS:		X			
LIFTING 25-50 LBS:		X			
FINGERING: Push telephone buttons; computer; copier; fax.		X			
REACHING: Answer telephone; medical charts.		X			
CARRYING: Charts, documents.		X			
CLIMBING: Stairs to other floors.		X			
BENDING AT WAIST: Patient evaluations; physical examinations.		X			
KNEELING: Patient evaluations; physical examinations.		X			
PUSHING OR PULLING: Mail cart or deliveries.		X			
HANDLING: Medical tools and equipment.		X			
DRIVING: Carts, state vehicles, etc.		X			
OPERATING EQUIPMENT: Medical and office equipment.		X			
WORKING INDOORS: Enclosed office environment.					X
WORKING OUTDOORS: Attend special outdoor events and office functions.		X			
WORKING IN CONFINED SPACE: File, supply, storage rooms, etc.		X			

I have read and understand the duties listed on this Duty Statement and I can perform these duties with or without reasonable accommodation.

Employee signature _____ Date _____

Supervisor signature _____ Date _____

Human Resources signature _____ Date _____