

DUTY STATEMENT
DSH3002 (Rev. 01/2020)



California Department of
State Hospitals

Box reserved for Personnel Section

	RPA #	C&P Analyst Approval	Date
Employee Name	Division Standards Compliance Department		
Position No / Agency-Unit-Class-Serial 502-162-5393-704	Unit Quality Improvement Section		
Class Title Analyst II (Licensing Coordinator)	Location Department of State Hospitals - Patton		
Subject to Conflict of Interest ☐ Yes ☒ No	CBID R01	Work Week Group: 2	Pay Differential Other
Briefly describe the position's organizational setting and major functions Under the direction of the Quality Improvement Manager, the Analyst II serves as the Licensing Coordinator and independently performs varied and complex professional analytical, consultative, and regulatory-compliance assignments. The incumbent has independent or lead responsibility for licensing activities, regulatory interpretation, survey readiness, deficiency analysis, corrective-action monitoring, and management consultation. The incumbent evaluates compliance concerns, develops alternatives, and provides recommendations to hospital management concerning Title 22, California Department of Public Health (CDPH), and The Joint Commission (TJC) requirements.			
% of time performing duties	Indicate the duties and responsibilities assigned to the position and the percentage of time spent on each. Group related tasks under the same percentage with the highest percentage first; percentage must total 100%.		
60%	<u>Licensing Coordinator Responsibility</u> • Reviews Heath Services Specialist (HSS) report and submits unusual occurrences/adverse events to CDPH Licensing daily. • Serves as the lead coordinator and liaison for CDPH-Licensing surveyors with surveys, on-site visits, opening new intakes, interviews, and provides documentation as requested. • Plans, leads, and facilitates on-site surveys for CDPH APH/ICF Re-Licensing Surveys, TJC Triennial Surveys, CDPH-Environmental Surveys, Coleman Masters Survey, Infection Control Surveys, and other surveys and/or audits under the responsibility of the Standards Compliance Department. • Develops and implements survey-readiness plans; conducts CDPH and TJC Licensure Surveys preparation activities, assigns escorts, provides chart review, and guides tours in secured treatment areas including patient living quarters. • Ensure the Hospital's Licensing is renewed, and copy is maintained. • Apply and renew CDPH-licensing Flex Requests for Title 22 waivers applicable to the hospital. • Researches and interprets standards/regulations and assess their impact on the facility. Interprets hospital policies, Administrative Letters, Nursing Policy and Procedures, and Administrative Directives.		

	• Maintains current knowledge with all Title 22 Licensing Regulations and ensures Hospital's compliance. Independently research, interprets, and applies licensing requirements with all Title 22 Licensing Regulations; evaluates their operational impact and recommends action to management to maintain hospital compliance. • Maintains CDPH tracking logs for monthly, quarterly, and biannual reports for Environment of Care (EOC) Committee, Quality Counsel, and Governing Body. • Furnishes All Facility Letters (AFL) to administrative and medical personnel. Apprises management on AFL's impacting the hospital. Identifies potential operational and policy impacts and presents findings to administrative and clinical management. • Conducts trend analysis of licensing deficiencies, identifies recurring causes and risk, and recommends corrective or preventive measures to management. • Gathers all information related to Plan of Corrections and conducts analytical studies on Licensing deficiencies and citations. • Consults with program management to evaluate corrective-action progress, determine effectiveness, resolve barriers, and recommend additional action when compliance is not achieved.
30%	<u>Data Analysis, Report Formation, and Meeting Facilitation</u> • Contributes to the hospital's operational needs by gathering, tabulating, and analyzing data. Prepares and generates written reports and/or graphic charts, including the Adverse Event Report and any other departmental analysis and reporting measures required to successfully meet and maintain compliance with reporting agencies. • Maintains the Client Accommodation Analysis and updates hospital space changes, as necessary. • Ensure Health Care Access and Information (HCAI) Annual Utilization Report is completed annually. • Plans and coordinated annual Western Psychiatric State Hospital Association (WPSHA) data collection, validates and analyzes submissions, identifies discrepancies and recommends appropriate corrective actions. Participates in workgroup and meets with DSH-Sacramento. • Coordinates Use of Force meetings for Hospital Police Department. Develops timelines according to Hospital Police reports, Incident Management Reports (IMR), and Treatment Plans. Formulates report to the Executive Director and Chief HPO. Adheres to Special Order 912.04 II B.
10%	<u>Interpersonal Relationship/Leadership</u> • Maintains professionalism and works positively with all levels of management, supervisors, and staff. • Utilizes a high degree of initiative, judgment, and responsibility when dealing with all staff and the public.

	• Serves as a liaison on Licensing Regulations and Joint Commission Standards with Standards Compliance staff, hospital staff, and other outside agencies. • Acts as an advisor/trainer to other staff and provides training and demonstration to staff as needed. • Performs other duties as assigned by supervisor(s) and participates in the ongoing departmental quality improvement process.
Other Information	1. SUPERVISION RECEIVED: The Licensing Coordinator is under the direction of the Quality Improvement Manager, Supervising Registered Nurse. 2. SUPERVISION EXERCISED: None 3. KNOWLEDGE AND ABILITIES: KNOWLEDGE OF: Principles, practices, and trends of public and business administration, management, and supportive staff services such as budgeting, personnel, and management analysis; government functions and organization; and methods and techniques of effective conference leadership. ABILITY TO: Reason logically and creatively and utilize a variety of analytical techniques to resolve complex governmental and managerial problems; develop and evaluate alternatives; analyze data and present ideas and information effectively both orally and in writing; consult with and advise administrators or other interested parties on a wide variety of subject-matter areas; gain and maintain the confidence and cooperation of those contacted during the course of work; coordinate the work of others, act as a team or conference leader; and appear before legislative and other committees. 4. REQUIRED COMPETENCIES: INFECTION CONTROL: Applies knowledge of correct methods for controlling the spread of pathogens appropriate to job class and assignment. HEALTH AND SAFETY: Actively supports a safe and hazard free workplace through practice of personal safety and vigilance in the identification of safety or security hazards. AGE SPECIFIC: Provides services commensurate with age of patients / clients being served. Demonstrates knowledge of growth and development of the following age categories: ☒ Young Adult (18-29) ☒ Early Adult (30-50) ☒ Late Adult (51-79) ☒ Geriatric 80+) THERAPEUTIC STRATEGY INTERVENTION (TSI) / THERAPEUTIC OPTIONS (TO): Supports safe working environment; practices the strategies and interventions that promote a therapeutic milieu; applies

	and demonstrates knowledge of correct methods in the management of assaultive behavior in accordance with policy. CULTURAL AWARENESS: Demonstrate awareness to multicultural issues in the workplace that enable the employee to work effectively. RELATIONSHIP SECURITY: Demonstrates professional interactions with patients and maintains therapeutic boundaries. Maintains relationship security in the work area; takes effective action and monitors, per policy, any suspected employee/patient boundary violations. SITE SPECIFIC COMPETENCIES: Knowledge of Title 22 Licensing Regulations and TJC Standards. Ability to interpret and apply State and Federal regulatory agencies requirements and analyzes how those requirements affect hospital functions; follow directions; keep appropriate records; establish and maintain effective relations with all levels of hospital staff; communicate effectively; and prepare clear and concise reports. TECHNICAL PROFICIENCY (SITE SPECIFIC): Working knowledge of commonly used office material/equipment; proficiency in development and use of automated reports, spreadsheets, and databases; proficiency in use of Microsoft Office (Excel, Word, PowerPoint, and Outlook), Adobe, SharePoint, Microsoft Teams, and WebEx; knowledge of WatchDox, PLATO Software, and WaRMSS System. 5. LICENSE OR CERTIFICATION: N/A 6. TRAINING: Training Category = 2. The employee is required to keep current with the completion of all required training. 7. WORKING CONDITIONS: The employee is required to work any shift and schedule in a variety of settings and security areas throughout the hospital and may be required to work overtime and float to other work locations as determined by the operational needs of the hospital. All employees are required to have an annual health review and repeat health reviews whenever necessary to ascertain that they are free from symptoms indicating the presence of infection and are able to safely perform their essential job functions. EMPLOYEE IS REQUIRED TO: • Report to work on time and follow procedures for reporting absences. • Maintain a professional appearance and comply with hospital dress code. • Appropriately maintain cooperative, professional, and effective interactions with employees, hospital individuals/clients, and the public. • Comply with Hospital policies and procedures. • Enter patient occupied areas in all weather conditions.
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	Regular and consistent attendance is critical to the successful performance of this position due to the heavy workload and time-sensitive nature of the work. The incumbent routinely works with and is exposed to sensitive and confidential issues and/or materials and is expected to maintain confidentiality at all times. The Department of State Hospitals provides support services to facilities operated within the Department. A required function of this position is to consistently provide exceptional customer service to internal and external customers. I have read and understand the duties listed above and I can perform these duties with or without reasonable accommodation. (If you believe reasonable accommodation is necessary, discuss your concerns with the Office of Human Rights). _____ Employee Signature _____ Date I have discussed the duties of this position with and have provided a copy of this duty statement to the employee named above. _____ Supervisors Signature _____ Date _____ Reviewing Officer Signature _____ Date
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