

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES TRAINING AND EXPERIENCE ASSESSMENT WELFARE FRAUD PREVENTION COORDINATOR

This examination will provide you with an opportunity to demonstrate significant aspects of your qualifications for the Welfare Fraud Prevention Coordinator, with the California Department of Social Services (CDSS). The information you provide will be rated based on objective criteria created by Subject Matter Experts. The rating will be used to determine your final score in this examination. If successful, your name will be placed on an eligible list for the classification listed above. The list will be used by CDSS to fill existing vacancies. A "Conditions of Employment" form is included in this examination which will allow you to select the location and time bases you are interested in working. It is required that you personally complete this examination accurately without assistance, and then sign the form.

Read the instructions below carefully before completing the assessment. Failure to do so may result in an inability to process your assessment and disqualification from this examination.

AFFIRMATION STATEMENT

I hereby certify and understand that the information provided on this Training and Experience Assessment Questionnaire is true and complete to the best of my knowledge and contains no willful misrepresentations or falsifications. I also understand that if it is later discovered that I have made any false representations, I may be removed from the examination and/or the eligible list resultingfrom this examination, have adverse action taken against me which could result in loss of State employment, and/or suffer loss of right to compete in any future State examinations.

| Name (Printed): | | |
|-------------------------|-------|--|
| Address: | | |
| City/State/Zip Code: | | |
| Home/Work Phone Number: | | |
| Signature: | Date: | |

CONDITIONS OF EMPLOYMENT

If you are successful in this examination(s), your name will be placed on an active employment list and referred to fill vacancies according to the conditions you specify on this form. Therefore, before you mark this form, there are some things you should consider. If you are not planning to relocate or are not willing to travel to a distant job location, do not select locations that are a long way from your residence.

LOCATION(S) YOU ARE WILLING TO WORK

PLEASE MARK THE APPROPRIATE BOX(ES) OF YOUR CHOICE - YOU WILL ONLY BE ELIGIBLE FOR EMPLOYMENT IN LOCATIONS THAT YOU MARK.

SACRAMENTO County

TYPE OF APPOINTMENT YOU WILL ACCEPT

PLEASE MARK THE APPROPRIATE BOX(ES) OF YOUR CHOICE.

□ (D) Permanent Full-Time

□ (K) Limited-Term Full-Time

- □ (V) Permanent Part-Time

□ (W) Limited-Term Part-Time

□ (T) Permanent Intermittent

□ (X) Limited-Term Intermittent

MAILING INSTRUCTIONS

Mail your completed examination along with a completed State Application Form, STD. 678 to the address listed below. You can print the State Application Form from the California Department of Human Resources (CalHR) website at https://jobs.ca.gov/.

FILE BY MAIL

California Department of Social Services Attention: Examination Unit P.O. Box 944243, MS 8-15-58 Sacramento, CA 94244-2430

FILE IN PERSON

California Department of Social Services Attention: Examination Unit 744 P Street, OB 8, 15th Floor Sacramento, CA 95814 Monday-Friday, 8:00 AM-5:00 PM

CRIMINAL RECORD CLEARANCE INFORMATION

Some positions within various divisions of the California Department of Social Services are subject to fingerprinting and criminal records check requirements. This check will be completed by the Department of Justice. Applicants will be notified during the hiring process if the position is affected by the criminal records clearance procedure. Criminal record clearance is a condition of employment in positions affected by this procedure.

INSTRUCTIONS

This examination is intended to provide candidates the opportunity to demonstrate their knowledge and experience in a variety of areas. It is not expected that you will have experience in all areas.

Respond to each of the following statements by indicating how the statement applies to you. You are required to respond to every statement by marking one option for each of the 2 scales provided.

In responding to each statement, you may refer to your FORMAL EDUCATION, FORMAL TRAINING COURSES, and/or WORK EXPERIENCE whether paid or not paid.

SCALE #1 – KNOWLEDGE RELATED TO PERFORMING THIS ACTION:

Extensive Knowledge

I possess an expert knowledge level to the extent that I have effectively performed tasks related to this knowledge in the most difficult and complex situations **and** I have instructed others on specific aspects of this knowledge.

Moderate Knowledge

I possess an advanced knowledge level to the extent that I could effectively perform this task under the majority of circumstances or situations encountered.

Basic Knowledge

I possess a sufficient knowledge level that would allow me to perform this task successfully in routine situations.

Limited Knowledge

I have some knowledge of how to perform this task, but I may require additional instruction to apply my knowledge effectively.

No Knowledge

I have no knowledge of how to perform this task or what it may entail.

SCALE #2 – EXPERIENCE RELATED TO PERFORMING THIS ACTION:

Extensive Experience

I have at least 5 years of experience in regularly performing this action.

Moderate Experience

I have at least 4 years, but less than 5 years of experience in this action.

Basic Experience

I have at least 3 year, but less than 4 years of experience in this action.

Limited Experience

I have less than 3 years of experience in performing this action.

No Experience

I have never performed this action.

- 1. Plan field reviews to assess agency effectiveness and compliance.
- Knowledge related to performing this action

Experience related to performing this action

2. Coordinate field reviews to assess agency effectiveness and compliance.

Knowledge related to performing this action

Experience related to performing this action

3. Conduct field reviews to assess agency effectiveness and compliance.

Knowledge related to performing this action

4. Review case files, system records and statistical reports.

Knowledge related to performing this action

Experience related to performing this action

5. Obtain documentation and information from investigation and support staff.

Knowledge related to performing this action

Experience related to performing this action

6. Conduct interviews with agency or county staff.

Knowledge related to performing this action

7. Evaluate county programs to recommend improvements related to county policies and/ or procedures, or reporting.

Knowledge related to performing this action

Experience related to performing this action

8. Provide ongoing research, consultation, policy interpretation, and/or guidance related to the administration of public assistance programs.

Knowledge related to performing this action

Experience related to performing this action

9. Develop technical training material to maintain compliance, efficacy, and consistency.

Knowledge related to performing this action

- 10. Provide technical training to staff to maintain compliance, efficacy, and consistency.
- Knowledge related to performing this action

Experience related to performing this action

11. Coordinate with Federal, State, and local entities in the development, implementation, and/ or administration of programs.

Knowledge related to performing this action

Experience related to performing this action

12. Analyze proposed legislation, regulations, policies, and procedures.

Knowledge related to performing this action

13. Provide summaries of analysis of proposed legislation, regulations, policies, and procedures.

Knowledge related to performing this action

Experience related to performing this action

14. Create logs, records, or databases to identify trends and patterns such as fraudulent activity.

Knowledge related to performing this action

Experience related to performing this action

15. Maintain logs, records, or databases to identify trends and patterns such as fraudulent activity.

Knowledge related to performing this action

- Design fraud detection tools and procedures to identify trends and patterns of fraudulent activity.
- Knowledge related to performing this action

Experience related to performing this action

17. Maintain fraud detection tools and procedures to identify trends and patterns of fraudulent activity.

Knowledge related to performing this action

Experience related to performing this action

18. Research and/or evaluate new technologies for use in fraud detection.

Knowledge related to performing this action

19. Lead work groups in cooperation with investigative staff to implement anti-fraud measures.

Knowledge related to performing this action

KNOWLEDGE, SKILL, OR ABILITY (KSA) ASSESSMENT

Rate your knowledge, skill, or ability performing specific job-related actions, using the rating scale below.

Respond to each of the following statements by indicating how the statement applies to you. You are required to respond to every statement by marking one option for the scale provided. Responses may not be changed or added once submitted to the Department of Social Services Examination Unit. Missing responses will result in a lower score.

In responding to each statement, you may refer to your <u>formal education</u>, <u>formal training courses</u>, <u>and/or work experience</u> whether paid or not paid.

SCALE - KNOWLEDGE, SKILL, OR ABILITY RELATED TO THIS STATEMENT

Extensive Knowledge, Skill, or Ability

I have applied this KSA in an actual setting while performing a job.

Limited Knowledge, Skill, or Ability

I have education or training relevant to this KSA, but have not applied it to an actual job.

No Knowledge, Skill, or Ability

I have no experience, education, or training relevant to this KSA

1. General administrative principles and procedures to perform daily work assignments.

Knowledge, Skill, or Ability related to performing this action

2. Criminal, civil, and welfare fraud investigation techniques and procedures.

Knowledge, Skill, or Ability related to performing this action

3. Methods and techniques for the maintenance and security of confidential information.

Knowledge, Skill, or Ability related to performing this action

4. Microsoft Office Applications (e.g., Excel, Word, Outlook, etc.) to complete day-to-day activities.

Knowledge, Skill, or Ability related to performing this action

5. Analyze data and draw sound conclusions.

Knowledge, Skill, or Ability related to performing this action

6. Analyze situations accurately and adopt effective courses of action.

Knowledge, Skill, or Ability related to performing this action

7. Write effectively and prepare clear, complete, concise reports to document and summarize information.

Knowledge, Skill, or Ability related to performing this action

8. Communicate effectively both to individuals and before large groups to deliver pertinent information.

Knowledge, Skill, or Ability related to performing this action

9. Effectively use Microsoft Office Applications (e.g., Excel, Word, Outlook, etc.) to accomplish day-to-day activities.

Knowledge, Skill, or Ability related to performing this action

THIS CONCLUDES THE ASSESSMENT FOR THE

WELFARE FRAUD PREVENTION COORDINATOR

EXAMINATION

Please refer to Page 2 for filing/mailing instructions.