



**LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH
SUBSTANCE ABUSE PREVENTION AND CONTROL**

VACANCY ANNOUNCEMENT

UTILIZATION REVIEW NURSE SUPERVISOR I

Position information:

Substance Abuse Prevention and Control (SAPC) is looking for a highly-qualified Registered Nurse to fill the Utilization Review Nurse Supervisor I position for its Clinical Services and Analytics Branch. The Quality Improvement & Utilization Management (QI & UM) Unit is a multidisciplinary team of health professionals who are responsible for the review and authorization of substance use disorder services delivered within the new Drug Medi-Cal system overseen by SAPC. The Utilization Review Nurse Supervisor I position will supervise a clinical team within the QI & UM Unit and does not involve direct patient care. If you are interested in this opportunity, please join our dedicated team and make a difference in the lives of individuals who are seeking to overcome substance use disorders in Los Angeles County.

Minimum requirements:

- Must currently be a permanent Los Angeles County employee who holds the payroll item of Utilization Review Nurse Supervisor I.

Desirable qualifications:

- At least 2-years' experience with utilization review/utilization management.
- At least 2-years' experience with quality improvement, and familiarity with the continuous quality improvement model.
- At least 2-years' supervisory experience managing staff.
- At least 2 years' experience with behavioral health conditions, particularly substance use disorders.
- Experience with Microsoft Word, Excel, and Outlook.
- Strong clinical judgment and skills
- Organizational skills and the ability to multitask and establish priorities
- Strong verbal and written communication skills
- Good interpersonal and leadership skills

Essential job functions include but are not limited to the following:

- Participates with the Physician, M.D. on routine audit, special studies, and critical reviews of medical records and clinical practices for individuals with Substance Use Disorders. Reviews treatment plans and medical records based on clinical expertise and knowledge garnered from various respected organizations and groups including but not limited to the National Quality Forum, National Voluntary Consensus Standards for the Treatment of Substance Use Conditions, National Committee for Quality Assurance, Commission on Accreditation of Rehabilitation Facilities, Agency for Healthcare Research and Quality, and the Substance Abuse and Mental Health Services Administration.
- Participates in the review and critical analysis of client health disparities, sentinel events, client safety net reports, and assesses for appropriateness and thoroughness based on departmental policies, clinical care standards, laws and regulations, and recommends methods of achieving compliance and improvement of client care. Provides technical assistance to contract providers and AVRC in conducting root case analysis, including presentation to SAPC management for critical analysis, and providing feedback and recommendations relating to accuracy and completeness of the analysis.
- Participates in the implementation of a Performance Management Program, including but not limited to a Quality Improvement and Utilization Management Program, as well as a Clinical Standards and Training Program, which requires the collection and review of data. Participates in the SAPC Quality Improvement related committees as they are formed and implemented.

- Conducts research on the latest findings from studies and prepares reports to management recommending adoption of evidence-based and best practices for promoting good health practices and controlling/preventing the spread of illness and injuries in the context of community-based integrated care. Develop strategies to implement processes informed by findings from research reports.
- Develops collaborative partnerships with various federal, State, County, municipal, and other public, private, and community-based agencies as a means for SAPC to identify and address community trends, emerging needs, and gaps in SAPC integration plans.
- Participates with the Physician, M.D. on projects, research, analysis, and provides reports of findings.
- Attends meetings with SAPC management, community-based organizations, contracted providers, and others as requested on health care practices on comprehensive integrated care.
- Supervises a team of nurses.

Interested candidates: submit a resume, cover letter, last two performance evaluations and 2 years variance time records. This position will be filled as qualified candidates are interviewed.

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