

City of Los Angeles Personnel Department

OCCUPATIONAL HEALTH NURSE (2314)
TRAINING AND EXPERIENCE QUESTIONNAIRE - 2009

DUE DATE	TEST WEIGHT	TYPE OF TEST
At the time of filing	100%	Training and Experience Questionnaire

Instructions

The examination bulletin for Occupational Health Nurse states that all applicants must complete and submit a City of Los Angeles Employment Application and an Occupational Health Nurse Training and Experience Questionnaire together at the time of filing. **Candidates must submit both of these documents at the time of filing to be considered further in the examination process.**

To evaluate your qualifications, it is required that you respond to each question that is asked in this Training and Experience Questionnaire. Indicating "N/A" (Not Applicable) is not considered a response to the question. If you use "N/A" or leave a question blank, your materials will be considered incomplete and you will not be considered a candidate in this examination. There are no appeal rights for individuals who are not candidates in the examination.

Your completed Occupational Health Nurse Training and Experience Questionnaire will be presented to an expert review panel for an assessment of your preparation to perform the duties of an Occupational Health Nurse. Based on the panel's evaluation, you will be assigned a numeric score and placed, in score order, on a list of candidates who are eligible to be considered for appointment as an Occupational Health Nurse with the City of Los Angeles.

The Training and Experience Questionnaire evaluation will focus on your knowledge, experience, professional background, personal qualifications, and abilities. Emphasis will be placed on the candidate's background and experience necessary to provide them with an understanding of: professional nursing practices and procedures, specifically occupational health nursing; theories and concepts of adult education and methods and techniques of teaching to effectively develop a variety of occupational, wellness, and health related training programs; federal, state, and other municipal laws and regulations, such as, OSHA, EPA, California Nurse Practice Act affecting the treatment of clients at City facilities; Freedom of Information Act and the Privacy Act specifically as it relates to the maintenance of confidential medical records; the ability to: act independently; operate medical equipment and a variety of apparatus for the administration of health screening tests, first aid and other medical and emergency treatment; accurately record health screening test results and maintain medical records; communicate effectively with the public and clients; and other necessary skills, knowledge, and abilities.

You must limit your response to each question to a maximum of one page per question. No attachments or additional documents will be considered for submission to the expert review panel. Write in narrative form using complete sentences.

All examination materials are the property of the City of Los Angeles Personnel Department. You may keep a copy of your response if you so desire. You will not be able to obtain a copy from the Personnel Department.

Certification Statement

I certify that the Training and Experience Questionnaire and all of the responses to the questions are true and complete, and were authored, written, and prepared in their entirety solely by me. I understand that false, misleading or incomplete information shall be sufficient cause for disqualification in this examination or dismissal and other penalties as may be prescribed by law.

NAME: LAST	FIRST	MIDDLE INITIAL
SOCIAL SECURITY NUMBER		

If you are experiencing technical problems with this supplemental, please report it at
<http://www.lacity.org/per/exams/suppquest.cfm?ClassCD=2314>

TEST CONTINUES ON NEXT PAGE

Name
Social Security Number
Occupational Health Nurse Training and Experience Questionnaire - 2009

Instructions

The Training and Experience Questionnaire consists of the six questions numbered below. All candidates must answer questions one through six. In responding to the questions, it might be helpful to first review all the questions in order to avoid repeating the same information on your responses to different questions. Your response to each question is limited to one page.

1. Describe your experience, training, and specific skills as they relate to the theories, principles, and practices of occupational health nursing.

Name

Social Security Number

Occupational Health Nurse Training and Experience Questionnaire - 2009

2. Provide a specific example in which you developed an occupational health and wellness training program. Describe the training program. What were some of the challenges in disseminating information? How did you ensure that you captured your audience's attention?

Name

Social Security Number

Occupational Health Nurse Training and Experience Questionnaire - 2009

3. Describe your knowledge of federal, state, and local laws, including confidentiality regulations and documentation practices, as they relate to the delivery of medical treatment.

Name

Social Security Number

Occupational Health Nurse Training and Experience Questionnaire - 2009

4. An Occupational Health Nurse must act independently in a variety of situations on a daily basis. Describe your experience working independently as a nurse. Provide a specific example in which you had to make a critical decision without the support or validation of an administrator. What was the outcome?

Name

Social Security Number

Occupational Health Nurse Training and Experience Questionnaire - 2009

5. Describe your experience in detail relating to the training you have in operating medical equipment and apparatus for the administration of health screening test, first aid, and/or other medical and emergency treatment.

Name

Social Security Number

Occupational Health Nurse Training and Experience Questionnaire - 2009

6. Describe a challenging situation in which you had to communicate with a disoriented patient in order to obtain medical information. How were you able to obtain the information despite your challenges? What actions did you take to resolve the problem? How did you document the incident? What was the outcome?

**THIS CONCLUDES THE TRAINING AND EXPERIENCE QUESTIONNAIRE FOR
OCCUPATIONAL HEALTH NURSE**

Save Form

Submit

Reset

Print Form