

## **Metropolitan Board of Health of Nashville and Davidson County April 11, 2019 Meeting Minutes**

The regular meeting of the Metropolitan Board of Health of Nashville and Davidson County was called to order by Chair Carol Etherington at 4:05 p.m. in the Board Room, on the third floor of the Lentz Public Health Center, 2500 Charlotte Avenue, Nashville, TN 37209.

### **Present**

Carol Etherington, MSN, RN, Chair  
Alex Jahangir, MD, Vice Chair  
Thomas W. Campbell, MD, Member  
Margreete Johnston, MD, MPH, Member  
Tené H. Franklin, MS, Member  
David A. Frederick, MS, Member  
Wendy J. Long, MD, MPH, Director of Health  
Gill C. Wright, III, MD, Civil Service Medical Examiner  
Jim Diamond, MBA, Interim Director, Finance and Administration Bureau  
Alex Dickerson, JD, Metropolitan Department of Law

### **Director's Report**

Dr. Long referred to her update provided in the Board packet (Attachment I).

### **Occupational Health and Wellness Update**

Chair Etherington recognized the staff of the Occupational Health and Wellness Clinic, who were in attendance.

Dr. Wright presented an update on Occupational Health and Wellness Clinic (Attachment II).

### **Open Meetings Presentation**

Alex Dickerson of the Metropolitan Department of Law presented an overview of the Tennessee Open Meetings Act and relevant Metro Code provisions (Attachment III).

### **Approval of Letter Honoring Sam Felker**

**Dr. Jahangir made a motion to approve a letter from the Board thanking Sam Felker for his years of service as a Board member and Board Chair. Dr. Campbell seconded the motion, which passed unanimously.**

### **Approval of Grant Applications**

Jim Diamond presented four items for approval.

#### **1. Safe Coalition – Safety Net**

Term: determined upon award

Amount: \$30,000

#### **2. Safe Coalition – Heartworm Treatment**

Term: determined upon award

Amount: \$15,000

#### **3. Safe Coalition – Spay/Neuter**

Term: determined upon award

Amount: \$15,000

#### **4. National Association of City and County Health Officials (NACCHO) – STD Clinic Fast Track Study**

Term: April 20, 2019-April 20, 2020

Amount: \$30,000

**Dr. Jahangir made a motion to approve the grant applications. Ms. Franklin seconded the motion, which passed unanimously.**

### **Approval of Grants and Contracts**

Jim Diamond presented seven items for approval.

- 1. Agreement with the Food and Drug Administration – Data Sharing**  
Term: July 1, 2019-June 30, 2024  
Amount: NA
- 2. Grant from Tennessee Department of Health – TN Healthy Start Amendment #1**  
Term: July 1, 2018-September 30, 2020  
Amount: \$730,100 (increase of \$405,600)
- 3. Grant from the Health Resources and Services Administration (HRSA) – Healthy Start**  
Term: April 1, 2019-March 31, 2020  
Amount: \$1,070,000
- 4. Grant from the Tennessee Department of Health – Chronic Disease**  
Term: August 1, 2019-June 30, 2023  
Amount: \$151,500
- 5. Memorandum of Understanding between the Board of Health and Friends of Metro Animal Care and Control**  
Term: Execution + 5 years  
Amount: NA
- 6. Contract with the University of Tennessee – Resilient Tennessee Study**  
Term: Execution + 1 year  
Amount: NA
- 7. Grant Amendment #2 – March of Dimes**  
Term: May 1, 2018-June 30, 2019  
Amount: NA

**Dr. Jahangir made a motion to approve the grants and contracts as presented. Ms. Franklin seconded the motion, which passed unanimously.**

### **Approval of the March 14, 2019 Meeting Minutes**

**Dr. Jahangir made a motion to approve the minutes of the March 14, 2019 Board of Health meeting with corrections. Dr. Johnston seconded the motion, which passed unanimously.**

### **Report of the Chair**

Chair Etherington advised Board members that a poll for retreat dates in June would be issued soon.

Chair Etherington congratulated Dr. Michelle Pardue on being awarded the Tennessee Public Health Association's Visionary Award. The award will be presented to her at the TPHA Middle Tennessee Grand Division meeting on April 26.

Chair Etherington reminded Board members that the Department's Council Budget hearing would be held May 15 at the Courthouse, and welcomed Board members to attend.

### **Review of Board Requests**

A history of Davidson County's ranking in immunization data will be shared with the Board.

A summary of the "All-In Speaker Series: How Place Affects Health" event hosted by NashvilleHealth on May 2, 2019 will be provided at the May 9 regular Board meeting.

## **CIVIL SERVICE BOARD**

### **Request to Schedule a Hearing Regarding Changes to the Pay Plan**

Jim Diamond requested the Board schedule a public hearing regarding proposed changes to the Civil Service Rules (Attachment IV).

**Mr. Frederick made a motion to schedule a public hearing regarding changes to the Pay Plan at the May 9, 2019 Board of Health's Civil Service Board meeting. Dr. Campbell seconded the motion, which passed unanimously.**

### **Personnel Changes**

Jim Diamond presented the personnel changes, which were unremarkable.

### **Next Regular Meeting**

The next regular meeting of the Board of Health is scheduled to be held at 4:00 p.m. on Thursday, May 9, 2019, in the Board Room (third floor) at 2500 Charlotte Avenue, Nashville TN 37209.

The meeting adjourned at 5:05 p.m.

Respectfully submitted,

Carol Etherington, MSN, RN  
Chair

## **Director's Update to the Board of Health April, 2019**

### **Protecting Health – Preventing the Spread of Infectious Disease**

#### **Hepatitis A**

As of last week our confirmed hepatitis A cases had reached 198 since the outbreak began 16 months ago, continuing the trend of slow increases we have seen recently (we added two cases from the previous week). We and our partners have delivered more than 12,100 vaccines over the course of the outbreak, and continue our outreach at homeless shelters, drug and alcohol rehabilitation centers and elsewhere. Our latest partners are the emergency rooms at Vanderbilt and St. Thomas Midway hospitals, and we appreciate their participation. Our risk factors remain the same, and the most frequent category for confirmed cases continues to be people who use drugs (84 percent of confirmed cases). Eighty-three of our confirmed cases (62 percent) have been hospitalized.

### **Improving Health - Services to Individuals & Families**

#### **Dr. Michelle Pardue to receive the TPHA Visionary Award**

Please join me in congratulating Dr. Michelle Pardue for being named the 2019 Middle Tennessee TPHA Visionary Award winner. I look forward to being in attendance as she receives the award at the TPHA Middle Tennessee Grand Division Spring Meeting on Friday, April 26 at the Wilson County Expo Center in Lebanon.

#### **WIC**

Recognition for the innovations of our Mobile WIC program continues. Program director Kyra Hood was invited to participate on a panel at the National WIC Association Pre Conference Workshop on Strategies for Retaining WIC Participants last week in Baltimore, Md. Kyra presented “Community Integration: Serving People Where They Are” to share best practices from what we’ve learned here, focusing on our partnerships with community agencies such as the Metro Public Library system. Kyra also received a scholarship to attend the full conference April 7-10, at which we also were represented by Teresa Thomas and Grace Goodwin.

### **Improving Health – Access & Care Coordination**

#### **CHANT**

Our newest program \_ really, a combination of three existing programs \_ is CHANT: Community Health Access and Navigation in Tennessee. This is a restructured approach to identifying and addressing risk factors at both the individual and community population levels. The state Department of Health has chosen the Pathways Community HUB model as the framework for the program’s design. Care coordination and navigation will be used to work with high risk individuals and communities across the state.

TennCare Kids Outreach, Help Us Grow Successfully (HUGS) and Children’s Special Services (CSS) are the current programs combining efforts on care coordination for pregnant and postpartum teens and women, high-risk children under five years of age, TennCare Kids enrollees from birth to 20 years old, and children and youth with special healthcare needs from birth to 21 years of age.

The vision of CHANT is to promote health by:

- Improving access to care by arranging for or providing screening, assessment and navigation of preventive services;
- Increasing awareness of the importance of primary prevention, including Early Periodic Screening, Diagnosis and Treatment (EPSDT);
- Screening for social determinants of health and connecting to resources; and
- Coordinating services for children and youth with special healthcare needs.

MPHD's CHANT Teams have been formed. Training is scheduled for April and May. The start date is July 1.

## **Improving Health – Community Partnerships**

### **Speaker Series – Built Environment and Health**

The next iteration of the All In Speaker Series, which we co-sponsor with NashvilleHealth, will be May 2 from 8:30-10 a.m. at the City Winery on Lafayette St. The series focuses on how the environment we live in affects our health, and in an era of rapid growth seeks to engage city leaders in managing that growth responsibly and in ways that promote better health for the community. Speakers at this event include Bridget Ackeifi from the Bloomberg Sustainability Team; Gary Gaston from the Civic Design Center; and Mary Beth Ikard from the Mayor's office.

## **Organizational Updates**

### **Metro Council Budget Hearing**

Our budget hearing with the Metro Council's Budget & Finance Committee is scheduled for Wednesday, May 15, at 5 p.m. in the main council chamber at the Courthouse. Board members are invited to attend. We have received a series of questions from the committee to which we are to provide written answers at least three days prior to the hearing. Two weeks ago we had our budget discussions with the Mayor. You can view it if you like on Metro's You Tube channel here:

<https://www.youtube.com/watch?v=VDksx2VRDyc>

### **Public Health Week**

Last week was Public Health Week, which we celebrated with a variety of events here and across the department. My thanks to the Steering Committee (Tracy Buck, D'Yuanna Allen-Robb, Fonda Harris, Angie Thompson) and Planning Committee (Morgan Dickie, Linda Nwanso, Priya Patel, Chemyeeka Tumblin, Gia Sanders, Tara Symlar) for all their work, and to everyone who participated.

## NATIONAL FEDERATION OF HUMANE SOCIETIES BASIC ANIMAL STATS MATRIX (vrs 9-2012)

### IMPORTANT NOTES FOR THE BASIC DATA MATRIX

#### Introduction to the Basic Matrix:

This basic matrix was designed to serve as a tool for basic data collection. It is a simple matrix containing what many (including Asilomar, ASPCA, National Federation, American Humane, UC Davis, Maddies Fund, PetSmart Charities and HSUS) have agreed are the minimum data points (along with definitions) an organization should gather. Whether organizations already gather a great deal of data or have only gathered the basics, this matrix should facilitate the roll up or merging of data at the local, regional or national level by providing a common framework. This matrix does not reflect any preference in data analysis or the calculation of rates but is rather simply a tool for data collection.

#### Tracking by Species and Age:

The risks associated with being an adult dog, puppy, adult cat or kitten (or neonate of any kind) in a shelter environment will vary a great deal. To help shelters assess and understand the differing risks for these populations of animals, this basic animal stats matrix includes a break out by species and age. If tracking statistics broken out by species and age is beyond the capacity of an agency, simply tracking statistics by species would be a place to begin. This document defines puppy and kitten as under 5 months of age (see below: Determining Age). Again – given the differing level of risk – breaking age down further to include a neonate category for both dogs and cats can also be very informative.

#### Determining Age:

This basic matrix utilizes 5 months as the break point between puppy/kitten and adult. At or near 5 months of age there are changes in the teeth which can help guide trained staff regarding proper categorization of the animal. For cats, at 4-5 months of age permanent canines, premolars and molars are coming in (all in by 6 months of age). For dogs, at 5-7 months of age permanent canines, premolars and molars are coming in (all in by 7 months of age). Source: "How to . . . series" from Animal Sheltering, [http://www.animalsheltering.org/resources/magazine/may\\_jun\\_1996/how-to-determine-a-dog-or.pdf](http://www.animalsheltering.org/resources/magazine/may_jun_1996/how-to-determine-a-dog-or.pdf) or contact the National Federation of Humane Societies for a copy of the document.

#### Beginning and Ending Shelter Counts:

These numbers help frame the population of the animals sheltered and cared for by the organization. We are recommending that a shelter do a walk through – physically counting the animals sheltered within the organization, and not forgetting to count those animals who have been admitted but who are not currently within the shelter (foster care, in the care of a veterinary hospital, etc).

#### Defining Owner Requested Euthanasia:

Some shelters offer pet euthanasia to the public as a service whose cost may be subsidized and therefore more affordable than local veterinary clinics, thus ensuring access to this service. Defining when euthanasia should be recorded as "at the request of the owner", or not, is the subject of much discussion.

For the purposes of this document, we are choosing to define owner INTENDED euthanasia as the euthanasia of a pet whose owner brought the pet to the shelter for that service. In other words, the owner brought the pet in specifically for that service – it was their intent before arriving.

Any other definition of "owner requested" euthanasia leaves much up to interpretation and therefore a great deal of variation among organizations and their reporting. We believe the simplicity of this definition helps to ensure consistent application and record keeping.

#### Live Admissions Only

For the purposes of this matrix we are tracking LIVE admissions only, i.e. animals who are alive when they come into an agency's possession. Animals who are dead when taken in to an agency's possession may be a data point to track, but that information is not tracked by this matrix.

#### What is Possession?

"Adoption" and "Transferred to another Agency" both make reference to possession. The primary concept here is one of ownership. For example, in foster care, the agency still has possession or ownership. If adopted or transferred to another Agency, possession is now with the new owner, or with another Agency.

#### Where are the "Others"?

This basic data matrix focuses on canines and felines. Many organizations also provide extraordinary services for other pets (pocket pets, rabbits, ferrets) and animals (wildlife), and that good work is not captured here.

#### Why a Basic Matrix?

This basic matrix was designed to serve as a tool for data collection. It is a simple matrix containing what many have agreed are the minimum data points an organization should consider gathering. By agreeing to this basic matrix - we hope organizations will gather AT LEAST this data, or if an organization all ready gathers a great deal of data, that they will consider rolling up their data into this format to help facilitate (if individual agencies are interested) data collection at a local, regional or national level, which would allow participating agencies to benchmark their work against similar agencies around their region or the nation. This matrix does not reflect any preference for the variety of live release rates used in animal sheltering and welfare. Most rates, other than full Asilomar which requires a conditions matrix, should be able to be calculated from the data points included.

**NATIONAL FEDERATION OF HUMANE SOCIETIES**  
**BASIC ANIMAL STATS MATRIX**  
(vrs 9-2012)

Species By Age	Canine		Feline		Total
	Adult	Up to 5 months	Adult	Up to 5 months	
Beginning Animal Count (date: 03/01/2019)	115	6	27	4	152
<b>Intake</b>					
Stray at large	213	42	46	12	313
Relinquished by owner	38	5	47	5	95
Owner requested euthanasia	6	1	5	0	12
Transferred in from agency	2	0	0	0	2
Other Intakes	17	1	0	0	18
<b>TOTAL INTAKE</b>	<b>276</b>	<b>49</b>	<b>98</b>	<b>17</b>	<b>440</b>
<b>Outcomes</b>					
Adoption	146	17	55	0	218
Returned to owner	87	4	7	0	98
Transferred to another agency	33	26	34	2	95
Other live Outcome	0	0	0	0	0
<b>TOTAL LIVE OUTCOMES</b>	<b>266</b>	<b>47</b>	<b>96</b>	<b>2</b>	<b>411</b>
Died in care	0	0	0	0	0
Lost in care (Physical inventory adjustments)	0	0	0	0	0
Shelter Euthanasia	18	0	8	0	26
Owner requested euthanasia	6	1	5	0	12
<b>TOTAL OUTCOMES</b>	<b>290</b>	<b>48</b>	<b>109</b>	<b>2</b>	<b>449</b>
<b>Ending Shelter Count (date: 10/31/2018)</b>	<b>107</b>	<b>10</b>	<b>24</b>	<b>2</b>	<b>143</b>
<b>SAVE RATE:</b>	<b>93.33%</b>	<b>100.00%</b>	<b>91.40%</b>	<b>100.00%</b>	<b>93.93%</b>

# METRO ANIMAL CARE AND CONTROL

## Trailing 12 Monthly – Data Report

		Trailing 12 Month Average
	March 2019	Ending March 31, 2019
Intake Total	546	563
Stray	329	329
Owner Surrender	105	120
Owner Request Euthanasia	12	20
Wildlife	86	31
Other	20	23
Adopted	222	235
Transfer	104	110
RTO	99	112
ORE Euthanized	12	20
Wildlife Euthanized	83	20
Euthanasia Total	123	85
Euthanasia %	5%	10

Data Report Key
Intakes
Outcomes



# OCCUPATIONAL HEALTH

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Gill C. Wright, III, M.D.  
Civil Service Medical Examiner

Presentation to the Board of Health  
April 11, 2019



# OHWC Goal

- To provide efficient, friendly, and high quality occupational health services to all departments of the Metro Government

# Staff

- Bich Thu Johnson Office Support Rep
- Carolyn Acton RN
- Janice Townsend LPN
- Lauren Drukenbrod NP
- Diana Buzby-Soto NP/Manager
- Claire Cobb Program Specialist

# Services

- Pre-Employment Medical Evaluations
- Annual Medical Evaluations (Safety Sensitive Positions)
- Fit For Duty and Metro Employee Benefit Board (MEBB) Evaluations
- Hearing Conservation Program (Public Works)
- Annual Metro Wide Influenza Clinics

# Services Continued

- Annual Employee TB testing
- Initial and Periodic Metro Employee Immunizations
- Medical Recommendations to MEBB and Civil Service Commission (CSC)
- Medical Resource to All Metro Departments and the Injury on Duty (IOD) Clinic
- Training (Residents, Students, Dept. Staff, Public)

# Statistics

	2017	2018	2019 (YTD)
New Evaluation	809	819	186
Annual Evaluation	2581	3388	1091
PPD	478	575	296
Immunizations	1037	938	411

\*Volumes are expected to continue to increase with the rapid increase in Nashville's growth and the increasing rate of Metro employees retiring

# Statistics Continued

	2018	2019 (YTD)
Fit for Duty/MEBB Evaluations	14	15
Civil Service Comm. Waivers	63	40
MEBB New Recommendations	56	27
MEBB Re-Exam Recommendations	76	47
MEBB Other Recommendations	12	7

# Program Evaluation/Quality Improvement

- Personnel Maintain Hearing and Spirometry Certifications
- Monthly Inservices and Staff Meetings
- Time Studies
- Surveys
  - Patient Satisfaction
  - Patient Time Perception
  - Department Satisfaction and Time Perception
  - Student/Resident Satisfaction



# Survey Results

- Net Promoter Score 84
- Time Perceptions No negative responses
- Departments No negative responses

(Comments consistently note: Professional staff, knowledgeable, friendly, efficient, and thoroughly answer all questions)

- Students Very positive

(Comments consistently note: Knowledgeable, friendly, inclusive, good teachers, and great role models)

# Questions?



***Metro Public Health Dept***

Nashville / Davidson County

Protecting, Improving, and Sustaining Health



**TENNESSEE OPEN MEETINGS ACT,  
TENN. CODE ANN. § 8-44-101, *et seq.*  
and relevant Metro Code provisions**

Department of Law  
Metropolitan Government of Nashville and Davidson County  
1 Public Square, Suite 108  
Nashville, TN 37201  
Tel: (615) 862-6341

# What is the purpose of the Tennessee Open Meetings Act?



**“[I]t is the policy of this state that the formation of public policy and decisions is public business and shall not be conducted in secret.”**

- Tenn. Code Ann. § 8-44-101(a).

# What constitutes a “meeting”



- **“the convening of a governing body of a public body for which a quorum is required to make a decision or to deliberate toward a decision.”**
  - Tenn. Code Ann. § 8-44-102.
- **A “governing body” is “any public body [consisting] of two or more members, with the authority to make decisions for or recommendations to a public body on policy or administration.”**
  - Tenn. Code Ann. § 8-44-102.
- **The law is applicable to all meetings of all boards and commissions of the Metropolitan Government.**

# What's not a “meeting”



- 1. On-site inspection**
- 2. Chance meeting/informal assemblage**
- 3. Informational workshop**
- 4. Electronic communication**
  - Tenn. Code Ann. § 8-44-102.

**CAVEAT: These interactions are not considered “meetings” so long as there is no discussion or deliberation toward a decision on a topic that the board could act upon.**

# What's not a "meeting"



**ATTORNEY-CLIENT EXCEPTION** Advisory meetings with attorneys regarding anticipated or ongoing litigation are exempt from the Tennessee Open Meetings Act, but actual decisions regarding litigation must be made at an open public meeting.

# TOMA Public notice provisions



## **Adequate public notice must be given for all meetings. (T.C.A. §8-44-103)**

- Notice informs affected parties of their opportunity to be heard and gives them time to prepare for and anticipate the meeting.
- Adequate public notice is not defined in the Tennessee Open Meetings Act. Tennessee courts have determined that adequate public notice is sufficient notice under the circumstances that would fairly inform the public of the meeting. *Memphis Publ'g Co. v. City of Memphis*, 513 S.W.2d 511, 513 (Tenn. 1974).



# What are the consequences of violating the TOMA?



- **All decisions are void**
- **Court monitoring for one year**
  - **Tenn. Code Ann. § 8-44-105**

# Open Meetings Under Metro Code § 2.68



- **“All meetings of metropolitan boards and commissions shall be open to the public.”**
- **Meetings shall be held “in a suitable place in one of the buildings of the metropolitan government.” Private property meetings are appropriate only if Council has approved such a contract.**
- **Commissions “shall develop a policy, approved by the department of law, for providing adequate notice of all board or commission meeting dates, times, locations and agendas.”**
  - Information must be posted on Nashville.gov calendar by the Friday before the week of the meeting.
  - Boards and Commissions shall keep a list of individuals requesting email or mail notice.

# Open Meetings Under Metro Code § 2.68



- **EXCEPTION: Emergency Notice**
  - "emergency" means any circumstance where compliance with the notice provision in this section would result in significant financial harm to the metropolitan government or applicant, and where neither the metropolitan government nor the applicant is responsible for the delay.
- **An individual applicant's issue can be late added to the agenda under this provision if it only affects the applicant.**

# Public Participation at Meetings



- **The public has the right to attend and observe public meetings, BUT**
- **The public does not have an absolute right to participate or speak at a public meeting. *Souder v. Health Partners, Inc.*, 997 S.W.2d 140 (Tenn. Ct. App. 1998).**

# Summary of Proposed Changes to the Pay Plan of the Metro Public Health Department

## 1. Condense Custodian 1 – Health (Pay Grade ST04) and Custodian 2 – Health (Pay Grade ST05) into a new classification of Custodian (Pay Grade ST05)

**Actions Requested:** Delete Custodian 1 – Health and Custodian 2 – Health

Add: Custodian

**Justification:** Bring salaries for this position to a more competitive level and to comply with Mayor's effort to get all positions to at least \$15/hour.

**Impact:** MPHD has five employees in the Custodian 1 – Health classification. Upon approval of the Board of Health, these employees will be reclassified to the Custodian classification and be placed in the step in the ST05 range closest to their current salary without taking a decrease. All five employees in this classification will make more than \$15.00/hour after this reclassification.

## 2. Restore Research Analyst positions to the Pay Plan

**Actions Requested:** Add Research Analyst 1 and Research Analyst 2

**Justification:** MPHD's Chief Epidemiologist recognized a need for these positions within the division.

**Impact:** Allows Epidemiology division ability to hire employees into this classification.

## 3. Rename Bureau Director Position

**Action Requested:** Change name of Bureau Director position to Bureau Director 1

**Justification:** Requesting addition of Bureau Director 2 to the pay plan in item #4, so this will be consistent with other positions which contain multiple levels.

**Impact:** Only changing the name. The pay grade and job functions will remain the same.

## 4. Create Bureau Director 2 Position

**Action Requested:** Add position of Bureau Director 2 to the Pay Plan at the HD03 salary grade

**Justification:** Department is recognizing the benefit of having physicians/dentists in bureau director positions and to maintain a salary level commensurate with their education, experience, and licensure.

**Impact:** Gives the department flexibility to allow physicians or dentists the ability to function as a bureau director while also seeing patients and supervise medical/dental staff and clinics.

**RESEARCH ANALYST 1**  
**(SAS PROGRAMMER)**

CLASS NUMBER: 7390  
FLSA CATEGORY: Non-Exempt  
EEO CATEGORY: Professional

**SERIES OBJECTIVE**

Performs professional duties involved in the design and implementation of data collection, management of data projects and databases, analysis and design of epidemiology projects related to public health surveillance, community health assessment and planning, program evaluation and health-related research studies. Performs methods for measuring efficiency and effectiveness of administrative and operational problems, programs or policies. Performs related duties as required.

**JOB DESCRIPTION**

Takes responsibility for data collecting, collating, and managing data from multiple sources. This often involves uploading and extracting data, creating, organizing, and updating data files and folders, and developing data dictionaries.

Performs data cleaning, assessing and verifying data quality and integrity, and performing basic statistical analyses based on specific project/program requests.

Performs data presentation and data visualization in formats that others can understand; Specific tasks might include preparing charts, graphs, assembling spreadsheets, and summarizing findings.

Assists in the design and performance of high quality statistical analysis and interpretation to evaluate the implementation and outcomes of projects that address public health problems, programs or policies.

Assists in preparing reports, detailing methods and data summaries, conclusions and recommendations; may present findings to management team.

Participates in the identification of data needed and determination of data collection methods including use of standardized data collection instruments.

Performs literature searches to address specific data and project needs.

Assists with the design, implementation and monitoring of quality assurance or management control procedures.

Performs related administrative duties such as scheduling meetings and coordinating logistical arrangements.

Attends meetings and workshops as needed.

**SUPERVISION EXERCISED/SUPERVISION RECEIVED**

This is a non-supervisory classification.

This classification receives general supervision and reports to a management-level supervisor or his/her designee, who is consulted on unusual or complex matters.

## **WORKING ENVIRONMENT/PHYSICAL DEMANDS**

This classification works primarily in an office setting under generally favorable working conditions. Work is sedentary, however, there may be some walking, standing, bending, carrying of light items, etc. No special physical demands are required to perform the work.

The work environment involves the everyday risks or discomforts which require normal safety precautions typical of such places as offices, meeting and training rooms, etc. The work area is adequately lighted, heated, and ventilated. Some positions may be required to perform observations, studies, or related tasks in the field.

## **EMPLOYMENT STANDARDS**

### **EDUCATION AND EXPERIENCE**

Bachelor's Degree in Public Health, Statistics, Computer Science, Education, Psychology , Sociology or a related field of study from an accredited college or university and one (1) year of work experience in research and analysis techniques.

**OR**

Master's Degree in Public Health, Statistics, Computer Science, Education, Psychology , Sociology or a related field of study from an accredited college or university.

**AND**

At least 1 year of work experience in SAS programming based on multiple datasets, including but not limited to: population census, hospital discharge databases, survey data, birth records, and vital registration.

Experience conducting data cleaning and statistical analyses, particularly of large datasets, using a range of analytic tools and methodologies.

Knowledge of health care data collection methodologies, including their strengths and limitations is desirable.

Ability to self-motivate, operate with minimal supervision, prioritize workloads, manage time and collaborate with a highly-skilled team to deliver a portfolio of projects.

### **PERFORMANCE STANDARDS**

Thorough knowledge of the principles and techniques of organizational management/efficiency studies.

Thorough knowledge of statistics.

Ability to use database software such as Excel and Access.

Ability to use statistical software.

Working knowledge of the various types of analyses used in operational studies and the appropriate circumstances in which to use them.

Basic knowledge of the overall organizational structure of the department.



Basic knowledge of Civil Service and departmental rules, policies, and procedures.  
Skill in working with the public.  
Skill in collecting information from various types of research materials.  
Ability to analyze administrative problems and recommend improvements.  
Ability to develop policies independently.  
Ability to use Microsoft Office suite programs.  
Ability to design and conduct instructional programs.  
Ability to coordinate a large number of activities.  
Ability to evaluate situations effectively.  
Ability to interpret statistical data.  
Ability to communicate effectively, both orally and in writing.  
Ability to train others.  
Ability to establish and maintain effective working relationships.

### **GRADE LEVEL CRITERIA/ILLUSTRATIONS**

The following examples illustrate some of the many combinations of situations, factors, and responsibilities in an ST-10 Research Analyst 1 position:

Performs work requiring different and unrelated processes and methods under general direction of upper level management, Guidelines are available for the work of the employee, but do not cover every possible situation.

Work involves treating a variety of conventional problems, questions, or situations in conformance with established criteria.

Personal contacts may be with individuals or groups within and outside of the government in a moderately unstructured setting.

### **LICENSES REQUIRED**

Valid "Class D" Driver's License may be required for some positions in this classification.

Date Approved: 05/25/93

Date Effective: 07/01/93

Date Revised Metro: 07/01/01

Date Revised MPHD: 04/11/19

## **RESEARCH ANALYST 2**

CLASS NUMBER: 07391

FLSA CATEGORY: Non-Exempt

EEO CATEGORY: Professional

### **JOB OBJECTIVE**

Performs professional duties involved in the design, data collection, analysis, reporting, and program evaluation of public health projects at a high level of complexities, including but not limited to survey and questionnaire development, data collection, data base management, surveillance, needs assessments, descriptive and inferential statistical analysis and report development and dissemination. Performs methods for measuring efficiency and effectiveness of administrative and operational problems, programs or policies. Performs related duties as required.

### **JOB DESCRIPTION**

Takes primary responsibility for data collecting, collating, and managing data from multiple sources. This often involves uploading and extracting data, creating, organizing, and updating data files and folders, and developing data dictionaries.

Performs data cleaning, assessing and verifying data quality and integrity, and performing basic statistical analyses based on specific project/program requests.

Performs data presentation and data visualization in formats that others can understand; Specific tasks might include preparing charts, graphs, assembling spreadsheets, and summarizing findings.

Assists in the design and performance of high quality statistical analysis and interpretation to evaluate the implementation and outcomes of projects that address public health problems, programs or policies.

Assists in preparing reports, detailing methods and data summaries, conclusions and recommendations

Presents findings to management.

Participates in the identification of data needed and determination of data collection methods including use of standardized data collection instruments.

Performs literature searches to address specific data and project needs.

Assists with the design, implementation and monitoring of quality assurance or management control procedures.

Performs related administrative duties such as scheduling meetings and preparing logistic arrangements.

Attends meetings and workshops as needed.

### **SUPERVISION EXERCISED/SUPERVISION RECEIVED**

This classification may supervise the work of a support staff and/or other Research Analysts.

This classification receives general supervision and reports to a management-level supervisor or his/her designee, who is consulted on unusual or complex matters.

## **WORKING ENVIRONMENT/PHYSICAL DEMANDS**

The work environment involves the everyday risks or discomforts which require normal safety precautions typical of such places as offices, meeting and training rooms, etc. The work area is adequately lighted, heated, and ventilated. Some positions may be required to perform observations, studies, or related tasks in the field.

This classification works primarily in an office setting under generally favorable working conditions. Work is sedentary, however, there may be some walking, standing, bending, carrying of light items, etc. No special physical demands are required to perform the work.

## **EMPLOYMENT STANDARDS**

### **EDUCATION AND EXPERIENCE**

Bachelors' Degree in Public Health, Statistics, Computer Science, Education, Psychology, Sociology or a related field of study from an accredited college or university and three (3) years' experience in research and analysis techniques.

**OR**

Master's Degree in Public Health, Statistics, Computer Science, Education, Psychology, Sociology or a related field of study from an accredited college or university and two (2) years' experience in research and data analysis techniques.

**AND**

At least 3 years of work experience in presentation and visualization of data using appropriate graphic designs and techniques.

At least 3 years of work experience in SAS/SQL/R programming based on multiple datasets, including but not limited to: population census, hospital discharge databases, survey data, birth records, and vital registration.

Experience in database management, conducting data cleaning and statistical analyses, particularly of large datasets, using a range of analytic tools and methodologies.

### **PREFERRED**

Knowledge of health care data collection methodologies, including their strengths and limitations is desirable.

Demonstrated ability to communicate data-driven information to management and various audiences.

Ability to self-motivate, operate with minimal supervision, prioritize workloads, manage time and collaborate with a highly-skilled team to deliver a portfolio of projects.

### **PERFORMANCE STANDARDS**

Thorough knowledge of the principles and techniques of organizational management/efficiency studies.

Thorough knowledge of statistics and graphic designs.

Ability to use database software such as Excel, Access, SQL.

Ability to use statistical software such as SAS, R.

Working knowledge of the various types of statistical analysis and the appropriate circumstances in which to use them.

Basic knowledge of the overall organizational structure of the department.

Basic knowledge of Civil Service and departmental rules, policies, and procedures.

Skill in working with the public.

Skill in collecting information from various types of research materials.

Ability to analyze administrative problems and recommend improvements.

Ability to develop policies independently.

Ability to use Microsoft Office suite programs.

Ability to design and conduct instructional programs.

Ability to coordinate a large number of activities.

Ability to evaluate situations effectively.

Ability to interpret statistical data.

Ability to communicate effectively, both orally and in writing.

Ability to train others.

Ability to establish and maintain effective working relationships.

### **GRADE LEVEL CRITERIA/ILLUSTRATIONS**

**The following examples illustrate some of the many combinations of situations, factors, and responsibilities in an OR-05 Research Analyst 2 position:**

Work typically includes varied duties requiring many different and unrelated processes and methods.

Administrative policies and precedents are applicable but are stated in general terms.

Guidelines for performing the work are scarce or of limited use.

The work affects a wide range of departmental activities.

Personal contacts may be with individuals or groups within and outside the government in moderately unstructured settings, and each contact may be conducted under different ground rules and vary in content.

### **LICENSES REQUIRED**

Valid "Class D" Driver's License may be required for some positions in this classification.

Date Approved: 05/25/93

Date Effective: 07/01/93

Date Revised Metro: 07/01/01

Date Revised MPHD: 04/11/19



# Metro Public Health Dept

Nashville / Davidson County

Promoting and Protecting Health

Class Title: Management Series	Fair Labor Standards Act (FLSA): Exempt
Salary Grades: M1:OR05; M2:OR07; M3:OR09; BD1:OR12; BD2:HD03	Revision Date: Effective Date:

### Series Objective:

Leads, manages, organizes, directs, and coordinates service delivery of one or more programs. Supervises staff. Provides strategic and operational planning for program(s). Plans, implements, and evaluates services provided and delivers continuous quality improvement. Prepares reports, proposals, and applications. Plans and provides for cost-effective operational use of resources and participates in budget preparation. Establishes, implements, and modifies strategies, policies and procedures consistent with program and departmental needs and goals.

### Major Responsibilities:

- Leads and manages a program, programs, office or bureau. Takes responsibility for program outcomes as well as effective fiscal and personnel management.
- Interviews, hires, coaches, and trains new employees. Evaluates and reviews employee performance in a timely fashion; approves leave requests; counsels and corrects employees as needed; identifies staff development needs and facilitates training and learning opportunities.
- Reviews financial statements, activity reports, and other performance data to measure productivity and goal achievement and to determine areas needing cost reduction and program improvement.
- Develops and executes program plans and operations in coordination with appropriate stakeholders in the department and the community. Maximizes community benefit by taking a systems approach to service delivery.
- Practices quality improvement, data analysis, program planning and program evaluation.
- Establishes and implements departmental policies, goals, objectives, and procedures in a fair and impartial manner.
- Prepares regular progress reports. Communicates with internal and external stakeholders as needed for visibility and success of the program. Takes initiative to identify and solve problems.
- High verbal and written communication skills and strong problem solving abilities.
- Demonstrates MPH D’s core values of Professionalism, Respect, Integrity, Dedication, and Equality (P.R.I.D.E.) when interacting with the public and employees of the Metropolitan Government.
- Supports and participates in departmental response to disaster/emergency events.
- Regular, reliable and predictable attendance; and
- Performs other duties as assigned.

Classification	Distinguishing Characteristics (Responsibilities and Competencies are Cumulative)
<p><b>Health Manager 1</b></p>	<p>Manages a program or a few small programs. Is expected to also be able to perform the duties in the classification series predominantly managed. Primary focus is on program success. May or may not be qualified to manage other departmental programs that focus on a different subject matter.</p> <p>Promptly evaluates staff and addresses performance/disciplinary issues as needed. Maintains knowledge of core public health functions and their application. May include grant management, which includes financial oversight of grant funds and contracted dollars and delivery of specific grant and contract results and reports.</p> <p>Graduation from an accredited college or university and two (2) years of progressively responsible full-time paid employment in related field required. One (1) year within the past two (2) years in a public administration/supervisory capacity preferred. Completed graduate degree in a directly related field may be substituted for one (1) year of the required experience. Possess required competencies upon hiring.</p> <p>The position has supervisory responsibilities. May report to a Manager or Bureau Director.</p> <p>Required Competencies:</p> <ul style="list-style-type: none"> <li>• <b>Task-Relevant Knowledge:</b> Knowledge of standard practices and procedures necessary to accomplish tasks.</li> <li>• <b>Strategic Task Management:</b> Matching the appropriate people and resources in the organization to maximize task performance. Maintaining task performance through times of turbulence.</li> <li>• <b>Designing Work Systems:</b> Designating the responsibilities of individual jobs and structuring the work of groups in organizations.</li> <li>• <b>Reinforcing Success:</b> Measuring and tracking progress toward goals to evaluate individual and group performance and provide feedback. Rewarding positive work behavior to reinforce activities that are aligned with the goals of the work group and the organization.</li> <li>• <b>Multi-Tasking:</b> Working on a variety of tasks simultaneously and shifting one's resources between multiple systems when needed.</li> <li>• <b>Managing Personnel Policies:</b> Developing and monitoring policies, programs, and procedures related to work practices and compensation.</li> <li>• <b>Instituting and Following Fair Procedures:</b> Instituting and applying rules and procedures in a consistent, unbiased, accurate, and correctable</li> </ul>

	<p>fashion so that subordinates know that fair rules are being used.</p> <ul style="list-style-type: none"> <li>• <b>Financial Ethics:</b> Understanding and following ethical financial management and accounting principles.</li> <li>• <b>Work-Place Ethics:</b> Understanding and following ethical guidelines at one’s work place.</li> <li>• <b>Eliminating Barriers to Performance:</b> Identifying roadblocks and redundancies in work processes. Promoting improvements in task performance.</li> <li>• <b>Follow Through:</b> Maintaining that one’s promises are realized in behavior; doing what one said one would do.</li> <li>• <b>Being Accountable:</b> Accepting responsibility for the effects of one’s own actions.</li> <li>• <b>Honesty and Integrity:</b> Behaving in an honest and ethical manner.</li> <li>• <b>Coaching, Developing, Instructing:</b> Coaching, teaching, and advising others to help them develop their knowledge and skills. Creating individual development plans. Selecting appropriate training courses to address developmental needs.</li> <li>• <b>Personnel Decision Quality:</b> Making good personnel decisions by identifying and assessing the knowledge, skills, and experiences needed to successfully perform a role in the organization.</li> <li>• <b>Seeking Improvement:</b> Constantly looking for ways that one can improve one’s organization.</li> </ul>
<p><b>Health Manager 2</b></p>	<p>In addition to the previous responsibilities and competencies:</p> <p>Manages a sizable program or programs in terms of: number of employee, budget, subject matter complexity and/or operational risk to the organization or the public. Has sufficient training and experience at the time of hiring to lead in the program’s area of focus. Uses data, knowledge of best practices in the program’s area of focus, and uses community stakeholder input to modify program design, improve efficiency or effectiveness, achieve improved program results, and/or promote policy or systems change. Leads continuous quality improvement efforts. Regularly leads a program to operational success, but also serves as a publicly recognized leader in the field and in the community and/or as a leader furthering the goals and strategic plan of the department. May or may not be qualified to manage other departmental programs that focus on a different subject matter.</p> <p>Work at this level usually involves active participation in conferences, meetings, hearings, or presentations involving problems or issues of considerable consequence or importance. May actively and collaboratively participate on the Leadership Team.</p>

Graduation from an accredited college or university and three (3) years of progressively responsible full-time paid employment in related field required. Two (2) years must have been in a public administration/supervisory capacity. Completed graduate degree in a directly related field may be substituted for one (1) year of the required experience. Demonstrated success as a manager, administrator and team builder. Possess required competencies upon hiring.

The position has primary supervisory responsibilities. May report to a Manager or Bureau Director.

Required Competencies:

- **Enhancing Task Knowledge:** Involving the group in discovering methods to enhance task performance and redirecting the group to achieve better task completion
- **Developing and Building Teams:** Managing inertia and conflict during the formative stages of group functioning. Enhancing the performance of a group and the satisfaction of its members by promoting cooperation, trust, and confidence in the group.
- **Adaptability:** Adapting to changing or dynamic situations.
- **Developing External Contacts:** Developing portfolio of external contacts within the professional community.
- **Communicating with the Community:** Communicating organization's intentions and activities to the public (e.g., local press, radio, television) and representing the organization in community affairs and public activities to promote awareness and foster goodwill.
- **Analyzing Data:** Summarizing and making inferences from information through the application of statistics and qualitative analyses.
- **Problem Identification:** Pinpointing the actual nature and cause of problems and the dynamics that underlie them.
- **Creative Problem Solving:** Using novel ideas to solve problems as a leader.
- **Openness to Ideas:** A willingness to listen to suggestions from others and to try new ideas.
- **Research Orientation:** Observing the behavior of others, reading extensively, and keeping your mind open to ideas and solutions from others. Reading and talking to people in related fields to discover innovations or current trends in the field.
- **Valuing Diversity:** Encouraging a wide range of viewpoints among team members in order to avoid groupthink and create more culturally sensitive solutions.
- **Stress Tolerance:** Remaining effective even when situations become



	stressful.
<b>Health Manager 3</b>	<p>In addition to the previous responsibilities and competencies:</p> <p>Manages a sizable program or programs in terms of: number of employee, budget, subject matter complexity and/or operational risk to the organization or the public and/or a program or office requiring highly specialized education or experience. Demonstrated performance achievement in strategic and systems leadership required. Has the training and experience to lead in the program's area of expertise. May or may not be qualified to manage other departmental programs that focus on a different subject matter.</p> <p>May actively and collaboratively participate on the Leadership Team.</p> <p>Graduation from an accredited college or university and four (4) years of progressively responsible full-time paid employment in related field required. Three (3) years must have been in a public administration/supervisory capacity. Completed graduate degree in a directly related field may be substituted for one (1) year of the required experience. Masters or doctoral degree or other specialized credentials in a specific or related field and/or significant leadership and management ability may be required for some positions. Demonstrated success as a manager, administrator and team builder required. Possess required competencies upon hiring.</p> <p>The position has supervisory responsibilities. Generally reports to a Bureau Director.</p> <p>Required Competencies:</p> <ul style="list-style-type: none"> <li>• <b>Coordinating Work Activities:</b> Coordinate the work-related activities necessary for task completion of all relevant constituents (both inside and outside of the group/organization). Adjusting one's own plans in light of how others are acting or how the environment is changing.</li> <li>• <b>Managing Information Resources:</b> Understanding information needs and providing access to efficient tools for project management, data analysis, strategic planning, and process controls.</li> <li>• <b>Maintaining Quality:</b> Evaluating materials and information produced against a set of standards through the use of measures of quality in order to track system and/or group progress.</li> <li>• <b>Benchmarking:</b> Facilitating communication outside of the organization to identify and integrate the best practices in task design and performance.</li> <li>• <b>Generating Ideas:</b> Coming up with a variety of approaches to problem solving.</li> <li>• <b>Collaborating:</b> Working with others and seeking the opinions of others to</li> </ul>

	<p>reach a creative solution.</p> <ul style="list-style-type: none"> <li>• <b>Open-Door Policy:</b> Promoting a climate of openness and trust. Allowing individuals who are upset about an aspect of the organization to voice displeasures without retribution or repercussions.</li> <li>• <b>Nurturing Relationships:</b> Building positive and cooperative working relationships with others. Maintaining relationships over time.</li> <li>• <b>Assessing Others:</b> Evaluating the strengths and weaknesses of others' efforts at learning or performing tasks.</li> <li>• <b>Inspiring:</b> Convincing others to believe in the organization's values and to act in accordance with those values.</li> <li>• <b>Self-Awareness:</b> Assessing one's success in learning or working activities and being honest about said judgments. Knowledge of one's strengths and weaknesses and knowledge of one's boundaries and limits.</li> <li>• <b>Challenging the Status Quo:</b> Willingness to act against the way things have traditionally been done when tradition impedes performance improvements.</li> </ul>
<p><b>Bureau Director 1</b></p>	<p>In addition to the previous responsibilities and competencies:</p> <p>Directs a departmental bureau as defined by the Director of Health. Bureaus provide administrative homes for major organizational units or lines-of-business of the department. May or may not be qualified to manage other departmental bureaus that focus on a different subject matter.</p> <p>Expected to be able to articulate and communicate a clear vision, be a role model in management and development of personnel, regularly practice networking, relationship building and partnership development, and be politically astute. Role models public health leadership. Builds and supports capacity department-wide to facilitate accomplishment of the department's strategic plan. Communicates regularly and effectively with internal and external stakeholders.</p> <p>Utilizes assessments, data, epidemiological or other evaluation processes to do strategic planning and influence the overall direction of the bureau within the department and the larger public health system. Evaluates, prepares and disseminates reports on the effectiveness of programs within bureau. Monitors trends related to bureau activities and makes decisions using quality improvement methods and feedback from the Director of Health, the Executive Management Team, and staff collaboration.</p> <p>Work typically is conducted within a framework of largely undefined issues and elements requiring extensive probing and analysis to determine the nature and scope of the issues and how to effectively problem solve. Strong department-wide</p>

team mentality and an ability to prioritize what is best for the organization, over what is best for the Bureau or its staff members is required. Consults with other agencies and funding sources and provides grant oversight in pursuit of bureau and departmental goals.

Directs the various aspects of strategic planning, key results metrics and essential job functions for the bureau and assures quality in the outcomes and services provided. Collaborates with other Bureau Directors to provide leadership to the department and support for the Director of Health.

Represents the Director of Health and the department at meetings with other departments, regions, agencies, groups and individuals as designated by the Director of Health.

Actively and collaboratively participates on the Executive Management Team (EMT) and Leadership Team.

Graduation from an accredited college or university and five (5) years of progressively responsible full-time paid employment required. Four (4) years must have been in a public administration /supervisory capacity. Completed graduate degree in a directly related field may be substituted for one (1) year of the required experience. Demonstrated success as a manager, administrator, leader and team builder required. Possess required competencies upon hiring.

The position possesses full supervisory responsibilities. Reports to the Director of Health.

Required Competencies:

- ***Visioning:*** Developing an image of an ideal working state of an organization.
- ***Perceiving Systems:*** Acknowledging important changes that occur in a system or predicting accurately when they might occur.
- ***Political Savvy:*** Knowledge of the political climate and how decisions will be affected by the organization's culture.
- ***Managing the Future:*** Evaluating future directions and risks based on current and future strengths, weaknesses, opportunities and threats.
- ***Reinforcing Change:*** Encouraging direct reports to come up with innovative solutions. Recognizing and rewarding those who take initiative and act in a creative manner. Facilitating the institutionalization of change initiatives.
- ***Resolving Conflicts/Negotiating:*** Dealing with complaints, resolving conflicts and grievances of others. Encouraging others to come together and reconcile differences.

	<ul style="list-style-type: none"> <li>• <b>Explaining Decisions in a Respectful Manner:</b> Explaining decisions that affect direct reports thoroughly and in a manner that demonstrates dignity and respect for direct reports.</li> <li>• <b>Supporting Ethical Behavior of Direct Reports:</b> Instituting, training, and reinforcing policies to maintain that direct reports treat each other and the organization fairly and with respect and dignity. Disseminating information about laws and regulations to direct reports and make sure that they follow laws and regulations by overseeing, monitoring, and auditing behavior. Disciplinary action should be taken against those who do not comply with laws and regulations.</li> <li>• <b>Distributing Rewards Fairly:</b> Supporting that pay, recognition, and other rewards are distributed in a fair manner, with clear guidelines and enforcement of those guidelines.</li> <li>• <b>Responsibility for Others:</b> Willingness to be responsible for the behavior of direct reports in one’s organization and correct their unethical behaviors.</li> </ul>
<p><b>Bureau Director 2</b></p>	<p>In addition to the previous responsibilities and competencies:</p> <p>Directs a departmental bureau as defined by the Director of Health while concurrently serving in one or more clinical areas which require the services of a licensed physician or dentist. These activities may involve seeing and treating patients and supervision of clinics or clinical personnel, including but not necessarily limited to nurses, nurse practitioners, dental assistants, and dental hygienists.</p> <p>Graduation from an accredited School of Medicine or School of Dentistry with an M.D., D.D.S, or D.M.D Degree with 5 years of experience in either a generalized or specialized public health program.</p> <p>Possession of a license to practice medicine or dentistry in the State of Tennessee or eligible for licensure.</p> <p>Demonstrated success as a manager, administrator, leader and team builder required. Possess required competencies upon hiring.</p> <p>The position possesses full supervisory responsibilities. Reports to the Director of Health.</p>

### Minimum Qualifications:

- Bachelor's degree required. Graduate degree preferred. Some positions may require specific advanced degrees.
- Valid class "D" driver's license, use of personal vehicle, and maintenance of valid personal vehicle insurance as required by Tennessee Law.
- Possess required competencies upon hiring.
- Skill in oral and written communication
- Ability to establish and maintain effective working relationships

### Working Environment/Physical Demands:

- Work environment generally involves the everyday risks or discomforts that require normal safety precautions typical of such places as offices, meeting and training rooms, etc.
- Works primarily in an office setting. Work is generally sedentary, however, there may be some walking; standing; bending; carrying of light to medium weight items.
- Specific positions may have higher safety and/or physical requirements, in such cases the requirements will be disclosed in the position announcement as vacancies occur.
- Organizing, Planning, and Prioritizing Work

NOTE: This job description is not intended to be all-inclusive. This job description has been designed to indicate the general nature and level of work performed by employees within this classification series. Employee may perform other related duties as needed to meet the ongoing needs of the department.