



**STATE OF VERMONT**  
JOINT FISCAL OFFICE

**MEMORANDUM**

To: Joint Fiscal Committee Members  
From: Nathan Lavery, Fiscal Analyst  
Date: April 19, 2013  
Subject: Grant Requests

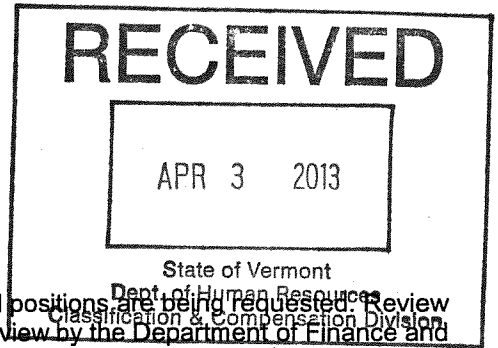
Enclosed please find two (2) items that the Joint Fiscal Office has received from the administration, including the establishment of twenty-three (23) limited service positions.

**JFO #2621** – Request to establish **one (1) limited service position** in the Department of Health. This position will provide case management services to women who test positive during breast cancer screenings. This grant-funded service is currently provided via a personal services contract, but the Attorney General is recommending conversion to a limited service position.  
[JFO received 04/15/13]

**JFO #2622** – \$45,009,480 grant from the U.S. Department of Health and Human Service to the Department of Vermont Health Access. These funds will be used to design and test new savings models that integrate payment and services across providers, and develop pay-for-performance models to improve quality and efficiency of services. **Twenty-two (22) limited service positions** are associated with this request. **Expedited review has been requested. Joint Fiscal Committee members will be contacted by May 3<sup>th</sup> with a request to waive the balance of the review period and accept this grant.**  
[JFO received 04/18/13]

Please review the enclosed materials and notify the Joint Fiscal Office (Nathan Lavery at (802) 828-1488; [nlavery@leg.state.vt.us](mailto:nlavery@leg.state.vt.us)) if you have questions or would like an item held for legislative review. Unless we hear from you to the contrary by May 3 we will assume that you agree to consider as final the Governor's acceptance of these requests.

**STATE OF VERMONT  
Joint Fiscal Committee Review  
Limited Service - Grant Funded  
Position Request Form**



This form is to be used by agencies and departments when additional grant funded positions are being requested. Review and approval by the Department of Human Resources must be obtained prior to review by the Department of Finance and Management. The Department of Finance will forward requests to the Joint Fiscal Office for JFC review. A Request for Classification Review Form (RFR) and an updated organizational chart showing to whom the new position(s) would report must be attached to this form. Please attach additional pages as necessary to provide enough detail.

Agency/Department: AHS/Health Date: 10/3/2012

Name and Phone (of the person completing this request): Al Johnson- (802) 951-0162

Request is for:

- Positions funded and attached to a new grant.
- Positions funded and attached to an existing grant approved by JFO # 1982

*JFO 2621*

1. Name of Granting Agency, Title of Grant, Grant Funding Detail (attach grant documents):  
CDC-VT National Breast & Cervical Cancer Early Detection Program (NBCCEDP)

2. List below titles, number of positions in each title, program area, and limited service end date (information should be based on grant award and should match information provided on the RFR) position(s) will be established only after JFC final approval:

<u>Title* of Position(s) Requested</u>	<u># of Positions</u>	<u>Division/Program</u>	<u>Grant Funding Period/Anticipated End Date</u>
Public Health Nurse II AC:General	1	HPDP/Women's Health	Period: June 30, 2012-June 29, 2013 (Year 1 of 5 ending June 29, 2013) <i>KK</i>

\*Final determination of title and pay grade to be made by the Department of Human Resources Classification Division upon submission and review of Request for Classification Review.

3. Justification for this request as an essential grant program need:

As required by the CDC, the PH Nurse position acts in the capacity of a case manager to work with uninsured women who have abnormal mammograms or pap results, or who have been diagnosed with breast or cervical cancer. Although this work is currently performed by a contractor, the key issue is that the position occupies state office space, works with other state employees and is essentially, a state employee but on contract.

I certify that this information is correct and that necessary funding, space and equipment for the above position(s) are available (required by 32 VSA Sec. 5(b)).

*Al Johnson* \_\_\_\_\_ Date 3/14/2013  
Signature of Agency or Department Head

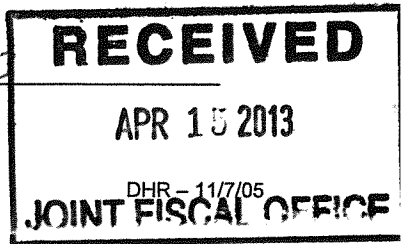
*Molyn Paul* \_\_\_\_\_ Date 2/3/13  
Approved/Denied by Department of Human Resources

*[Signature]* \_\_\_\_\_ Date 4/10/13  
Approved/Denied by Finance and Management

*[Signature]* \_\_\_\_\_ Date 4/10/13  
Approved/Denied by Secretary of Administration

Comments:

*Deputy*



APR 05 2013

## MEMORANDUM

**TO:** Jeb Spaulding, Secretary of Administration  
**THROUGH:** Jim Reardon, Commissioner, Department of Finance and Management  
**FROM:** Emily Byrne, Budget Analyst, Department of Finance and Management *EB*  
**RE:** Health Department grant funded limited service position request  
**DATE:** 4/9/2013

Attached is a position request funded by an existing Health Department grant (approved over 20 years ago). The position was eliminated in FY2010, and the work contracted to a public health nurse. The services that the public health nurse provides are required by the grant. After review by the AG, it was determined that contracting for this position is not appropriate because it does not pass the "ABC test" as outlined in Bulletin 3.5. As a result the Health Department is requesting a limited service position to continue providing services through the grant.

The current grant budget includes funds for the contracted service. If this position request is approved, the funds for the contract will be used to fund the position. The funds for this grant are awarded on an annual basis, this position will continue as long as funding for it is approved through federal award process.

This grant is subject to sequestration; however, the program has been under spending the award and any cuts can be absorbed in FY2014. Budgets for this grant are awarded on an annual basis, and future changes in federal funding will be managed through the award process.

I recommend approval.

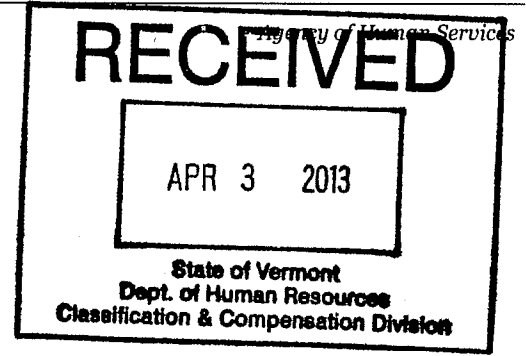
Commissioner,  
Department of Finance and Management  
109 State Street, Pavilion Building  
Montpelier, VT 05620-0401



SFO 2621

State of Vermont  
Department of Health  
Office of the Commissioner  
108 Cherry Street - PO Box 70  
Burlington, VT 05402-0070  
healthvermont.gov

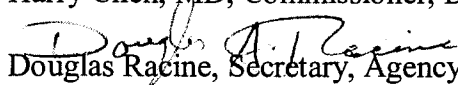
[phone] 802-863-7280  
[fax] 802-951-1275  
[tdd] 800-464-4343



## MEMORANDUM

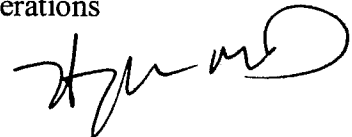
TO: Molly Paulger, Director, Human Resources Services & Operations

FROM: Harry Chen, MD, Commissioner, Department of Health

THROUGH:  Douglas Racine, Secretary, Agency of Human Services

RE: Limited Service – Grant Funded Position Request

DATE: March 19, 2013



ok

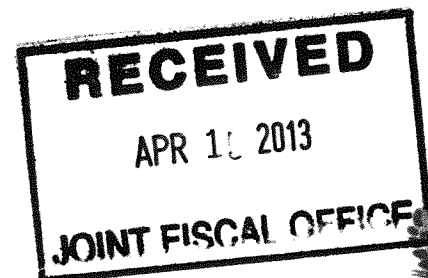
Please find enclosed a position request form and a request for classification review. The Health Department is requesting a limited service position to be funded by an existing grant approved by JFO.

The Centers for Disease Control and Prevention awards Vermont an annual grant from the National Breast and Cervical Cancer Early Detection Program. This program has been in operation for 20 years and provides access to breast and cervical cancer screening for underserved women.

One program activity helps women with positive screening results obtain appropriate follow up and treatment. For many years the program employed a public health nurse to provide these services. The position was eliminated in fiscal year 2010 during a round of position cuts. In order to continue providing case management services, the program entered into a personal services contract with a registered nurse. Because this is an ongoing activity of state government, the department is seeking a limited service position to perform this work.

The costs associated with this new position are included in the SFY 2013 and 2014 budgets for the program. The federal grant is included in the Budget Control Act reductions and is expected to have a 5% budget cut for the program year beginning 30 June 2013. The reduced grant will still fully fund the program staff and activities budgeted for SFY 2014.

Enclosures



APR 05 2013

## 1. Job Duties

This is the **most critical** part of the form. Describe the activities and duties required in your job, **noting changes (new duties, duties no longer required, etc.) since the last review**. Place them in order of importance, beginning with the single most important activity or responsibility required in your job. The importance of the duties and expected end results should be clear, including the tolerance that may be permitted for error. Describe each job duty or activity as follows:

- **What** it is: The nature of the activity.
- **How** you do it: The steps you go through to perform the activity. Be specific so the reader can understand the steps.
- **Why** it is done: What you are attempting to accomplish and the end result of the activity.

For example a Tax Examiner might respond as follows: **(What)** Audits tax returns and/or taxpayer records. **(How)** By developing investigation strategy; reviewing materials submitted; when appropriate interviewing people, other than the taxpayer, who have information about the taxpayer's business or residency. **(Why)** To determine actual tax liabilities.

Public Health Nurse II's are key professional staff in assuring that the health status of Vermonters is improved. The PHN II's use professional nursing and public health knowledge to participate in planning and implementation of department programs and public health initiatives. This requires a broad range of knowledge and skills, including epidemiology, school health, chronic disease prevention, maternal and child health, immunization, emergency preparedness, injury prevention and oral health. Additional knowledge and skill is required in data tracking and analysis, coalition building, cultural and social determinants of health, written and oral communication with individuals and groups, behavioral change theory to facilitate health outcome improvements and quality improvement. All PHN II's must possess a broad range of population focused skills to be strong team partners and to assist other staff in their work setting with understanding population level public health interventions. The scope of professional practice assures delivery of essential public health services for the local communities in which the public health nurses serve.

New/Enhanced Performance Expectations since last review: Because the role of Public Health Nurses in the department has changed, and because the PHN II provides leadership and guidance to the Public Health Nurses, the role of the PHN II has needed to evolve. The PHN II must be able to guide the work of the PHN as their work responsibilities have shifted from a focus on individual interventions (certifying in WIC clinics) to a focus on population level health improvement. The PHN II is responsible for providing technical assistance to the PHNs so must be content area experts in the programs that they administer and must be knowledgeable about multiple VDH programs and state initiatives to ensure that program planning is well coordinated and integrated with other efforts.

Although most of the PHN focus is now at the population level, this expanded focus must be balanced with the need for PHNs to remain knowledgeable about clinical skills such as assessment, collection of subjective and objective data, vaccination, blood sampling, interpretation of data collection or test results and tuberculin skin testing.

Examples of current performance expectations:

- 1) The PHN II develops or assists in the development of department programs/policies/evidence base in order to successfully implement department initiatives

at the state and community levels.

- 2) The PHN II researches best practices and writes state protocols.
- 3) The PHN II may participate in the orientation of new PHN I, PHN III and other VDH staff.
- 4) The PHN II participates on national level committees to learn from peers and leaders in order to inform Vermont policies, procedures and practices.
- 5) The PHN II participates in or leads state level coalitions/workgroups. For example, PHN II's collaborate with the Department of Education and the Tobacco Evaluation and Review Board to develop policy and procedure change recommendations for schools, municipalities housing health services.
- 6) The PHN II creates manuals for PHN I's, other district office staff and community stakeholders to assist in consistent implementation of statewide policies, procedures and guidelines. The PHN II also develops fact sheets and other educational materials to increase the knowledge of policy makers, school health providers and the general public. For instance recommendations for cancer, cardio vascular and heart healthy screenings .
- 7) The PHN II participates in writing and monitoring grants to sub-recipients. The PHN II also monitors program deliverables carried out by PHN I's and other non-clinical staff in the district offices in order to assure that federal grant expectations are met.
- 8) The PHN II carries out their work independently since most of their responsibilities are performed without direct observation/supervision. PHN II's must be comfortable making decisions on their own, taking into account nursing and public health science and must know when an issue rises to a level of concern that requires supervisor or Director of Public Health Nursing consultation.
- 9) The PHN II must be able to effectively collaborate with multiple VDH program colleagues in order to efficiently integrate the program expectations of PHN I's and other non-clinical staff in the district offices. They must also be proficient at communicating program expectations to district offices (including leadership, PHNs and non-clinical staff) and to staff working for state level and community based agencies.
- 10) The PHN II must be proficient at researching best practice strategies from the literature and from state and national level resources. The PHN II then synthesizes the information and, if appropriate, proposes Vermont specific interventions.
- 11) The PHN II provides guidance, leadership and support to district office PHN I and III as they provide consultation, technical assistance and education to health care providers, school personnel, hospitals, home health agencies, child care providers, VDH non-nursing staff and the general public on health promotion and disease prevention topics ranging from infectious disease prevention, chronic disease prevention strategies, immunization, prenatal and parental education, school health and other emerging health issues.
- 12) The PHN II plans projects and precepts students from multiple universities and colleges.
- 13) The PHN II encourages implementation of strategies that will change policies and the environment in order to impact the health of individuals, families and organizations.
- 14) The PHN II must regularly update his/her knowledge base in order to be prepared to react to emergency response situations by providing education to agencies and individuals and by assisting in planning and implementing mass prophylaxis and/or treatment clinics on short notice. The PHN II is expected to participate in oversight of clinical activities in a mass clinic setting.