



STATE OF VERMONT
JOINT FISCAL OFFICE

MEMORANDUM

To: Joint Fiscal Committee members
From: Sorsha Anderson, Senior Staff Associate
Date: March 14, 2024
Subject: LSP Request – JFO #3191

Enclosed please find one (1) item, which the Joint Fiscal Office has received from the Administration.

JFO #3191: One (1) limited-service position to the Agency of Human Services, Department of Health to assess and carry out work related to data on maternal mortality and sudden unexpected infant deaths. Position requires quality assurance of data and transfer to federal data tracking systems. Position is funded through 09/29/2024 through previously approved JFO #1891.
[Received March 12, 2024]

Please review the enclosed materials and notify the Joint Fiscal Office (Sorsha Anderson: sanderson@leg.state.vt.us) if you have questions or would like this item held for legislative review. Unless we hear from you to the contrary by **April 2, 2024**, we will assume that you agree to consider as final the Governor's acceptance of this request.

**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: Human Services – Vermont Department of Health Date: 10/16/23

Name and Phone (of the person completing this request): Megan Hoke 651-1670

Request is for:

- Positions funded and attached to a new grant
- Positions funded and attached to an existing grant approved by JFO #: 1891

1. Name of Granting Agency, Title of Grant, Grant Funding Detail (attach grant documents):

Centers for Disease Control and Prevention: Reducing Maternal Mortality in Vermont: NU58DP007567
Centers for Disease Control and Prevention: Sudden Unexpected Infant Death: NU58DP007689
Health Resources and Services Administration: Maternal and Child Health Services Block Grant: B0447450

<u>Title of Position Requested</u>	<u># of Positions</u>	<u>Division/Program</u>	<u>Grant Funding Period/Anticipated End Date</u>
Public Health Analyst II	1	Health Statistics & Informatics	09/30/2023 – 09/29/2024

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

This position will assess data needs related to family and child injury with a focus on mortality related to maternal deaths and sudden unexpected infant deaths (SUIDs). Identify SUID and pregnancy related deaths, facilitate data transfer to the federal data systems tracking these deaths and conduct quality assurance across data systems used for case abstraction. Complete statistical and epidemiological analysis to better understand populations at risk for pregnancy related death or SUID.

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

 John W. Dwyer 10/26/2023 10/17/2023
Signature of Agency or Department Head Date

 11/20/23
Approved/Denied by Department of Human Resources Date

Adam Greshin Digitally signed by Adam Greshin
Date: 2023.12.20 13:26:21 -05'00'

 12/26/2023 | 6:15:30 EST
Approved/Denied by Finance and Management Date

 Date
Approved/Denied by Secretary of Administration

 Date
Approved/Denied by Governor (required as amended by 2019 Leg. Session)

Comments:




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

Agency of Human Services

MEMORANDUM

To: Jenney Samuelson, Secretary of Human Services

From: Mark Levine, MD, Commissioner of Health 

Re: Maternal Mortality Review Panel Grant Funded Position Request

Date: 10/16/2023

Please find enclosed a request for limited-service positions required to carry out the work required for the Maternal Mortality Review Panel grant (MMRP), Sudden Unexpected Infant Death grant (SUID), and the Maternal and Child Health Block Grant (Title V). The Joint Fiscal Committee previously authorized acceptance of funds from MMRP and SUID grants via JFO #1891. The Maternal and Child Health Block Grant (Title V) has been awarded to the State of Vermont for 30+ years and acceptance of this award predates online JFO archives.

We are requesting one position; Public Health Analyst II, funded in part by each grant.

Thank you in advance for your favorable consideration of this request.

Cc: Rich Donahey, AHS Chief Financial Officer





DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Award

Award# 1 NU58DP007567-01-00

FAIN# NU58DP007567

Federal Award Date: 08/14/2023

Recipient Information**1. Recipient Name**

HUMAN SERVICES VERMONT AGENCY OF
PO BOX 70
Burlington, VT 05402-0070
[NO DATA]

2. Congressional District of Recipient

00

3. Payment System Identifier (ID)

1036000264D4

4. Employer Identification Number (EIN)

036000264

5. Data Universal Numbering System (DUNS)

809376155

6. Recipient's Unique Entity Identifier (UEI)

YLQARK22FMQI

7. Project Director or Principal Investigator

Ms. Emily Fredette
Injury and Violence Prevention Program Mgr
emily.fredette@vermont.gov
802-865-7729

8. Authorized Official

Josef Langevin
Financial Administrator
Josef.Langevin@vermont.gov
802-863-7384

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Darryl Mitchell
dvm1@cdc.gov
770-488-2747

10. Program Official Contact Information

Julie Zaharatos
Program Officer
lyx0@cdc.gov
4044981386

Federal Award Information**11. Award Number**

1 NU58DP007567-01-00

12. Unique Federal Award Identification Number (FAIN)

NU58DP007567

13. Statutory Authority

Public Health Service Act, as amended, Section 301(a) and Section 317K, 42 U.S.C. 241(a), 42 U.S.C. 247b-12

14. Federal Award Project Title

Reducing Maternal Mortality in Vermont

15. Assistance Listing Number

93946

16. Assistance Listing Program Title

Cooperative Agreements to Support State-Based Safe Motherhood and Infant Health Initiative Programs

17. Award Action Type

New

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date	09/30/2023	- End Date	09/29/2024
20. Total Amount of Federal Funds Obligated by this Action	\$295,000.00		
20a. Direct Cost Amount	\$205,244.00		
20b. Indirect Cost Amount	\$89,756.00		
21. Authorized Carryover	\$0.00		
22. Offset	\$0.00		
23. Total Amount of Federal Funds Obligated this budget period	\$0.00		
24. Total Approved Cost Sharing or Matching, where applicable	\$0.00		
25. Total Federal and Non-Federal Approved this Budget Period	\$295,000.00		
26. Period of Performance Start Date	09/30/2023	- End Date	09/29/2024
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance	\$295,000.00		

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Stephane Latham

30. Remarks

OVERALL BUDGET

A.	Personnel	\$119,675
B.	Fringe benefits	\$76,014
C.	Travel.....	\$9,555
D.	Equipment.....	0
E.	Supplies	0
F.	Contractual.....	0
G.	Construction.....	0
H.	Other	0
I.	TOTAL DIRECT.....	\$205,244
J.	Indirect.....	\$89,756
K.	TOTAL.....	\$295,000

JUSTIFICATION

A. PERSONNEL \$119,675

	Annual Salary	% of Effort	# Months	Total
Program Specialist II	\$57,533	0.5 FTE	12	\$28,767

A half-time Fatality Program Specialist will be hired upon receipt of these funds. This position will ensure The Division of Family and Child Health and partners adhere to grant requirements, support the administrative functions of the Maternal Mortality Review Panel, and support the development of protocols and processes for the Team’s case identification and review criteria. This position will be supervised by the Injury and Violence Prevention Program Manager.

	Annual Salary	% of Effort	# Months	Total
Public Health Analyst II	\$64,667	0.5 FTE	12	\$32,334

This position is currently vacant, but this half time data analyst position in the Division of Health Statistics and Informatics sits within the Office of Vital Records. The data analyst would support

data analysis for Vermont’s maternal morbidity and mortality data. This position will establish the infrastructure for data entry into the Maternal Mortality Review Information Application, supporting the Maternal Mortality Review Panel with its data collection practices, and partner with other data systems to ensure alignment. Additionally, this analyst will be dedicated to fatality data entry and analysis to help Vermont better understand the trends of maternal morbidity and mortality data to tailored interventions to decrease the rates of maternal mortality.

	Annual Salary	% of Effort	# Months	Total
OCME Social Worker	\$62,296	0.25 FTE	12	\$15,574

This funding would support a 0.25 FTE social worker position housed within the Office of the Chief Medical Examiner to provide short term bereavement care and coordination for families affected by a perinatal death and support data collection through ongoing work with the family of the decedent. The social worker will conduct informant interviews based on the guidance developed by the clinical abstractor. This will allow Vermont’s MMRP to gather valuable insight in the social determinants of health surrounding a perinatal death as well as incorporate family and community perspectives into the case review.

	Annual Salary	% of Effort	# Months	Total
Nurse Program Coordinator	\$86,001	0.5 FTE	12	\$43,001

Katy Leffel, RN, BSN, IBCLC, RNC-MNN, is currently the clinical abstractor for the MMRP. With expanded funding, The Nurse Program Coordinator will develop infrastructure, policies, and protocols for the team to align with MMRP best practices as outlined by the CDC and Review to Action, including criteria for case review selection and informant interview practices. The Nurse Program Coordinator also fosters the collaborations with key stakeholders involved in perinatal health including the birth hospitals, Vermont Child Health Improvement Project, Vermont’s Perinatal Quality Collaborative, and community supports available to birthing people. The Nurse Program Coordinator will assist with dissemination of information and education to prevent maternal mortality deaths.

	Annual Salary	% of Effort	# Months	Total
Evaluator	In-kind	.1FTE	12	In-Kind

FCH Program Evaluator, Emily Smith, PhD, has developed an evaluation plan for this proposal. Dr. Smith will provide in-kind time to monitor the plan and work with the grant-funded staff to conduct evaluation activities.

	Annual Salary	% of Effort	# Months	Total
Injury and Violence Prevention Program Manager	In-kind	.1FTE	12	In-Kind

Injury and Violence Prevention Program Manager, Emily Fredette, will provide in kind time to supervise the Fatality Program Specialist and oversee adherence to grant requirements.

B. FRINGE BENEFITS \$76,014

The Vermont Department of Health will charge the actual cost of fringe benefits (not a fringe benefit rate) provided to employees working in this grant. The actual cost of fringe benefits varies from employee to employee based on salary, employee choice of health care plan, and employee election of certain benefits. The usual components of these fringe benefits are FICA, retirement, dental, medical and life insurance coverage, and the employee assistance program. The cost of each employee's fringe benefits will be allocated based on hours worked in the Program relative to all hours worked by the employee. Based on the current cost of a typical employee's fringe benefits, it is estimated that the cost of these fringe benefits at 62% of salary.

C. TRAVEL \$9,555

<p>In state travel- <u>MMRP Personnel Travel</u></p> <p>The cost associated with car rental, mileage and incidentals for personnel to travel to/from required exercises, meetings, local district office visits, hospitals, monitoring or evaluation, conferences and hospitals in state in support of grant deliverables and requirements.</p> <p>Costs estimated at 6 trips x 1 people, 250 miles/trip average at \$0.655/mile</p>	<p>\$982</p>
<p>Out of state travel- <u>VDH Travel to MMRIA Conference</u></p> <p>Per the Notice of Funding Opportunity, we are budgeting for 6 individuals from VDH to attend the MMRIA Users Meeting.</p> <p>Lodging: 6 staff x 2 nights \$1,956</p> <p>Airfare: 6 staff x \$700 \$4,200</p> <p>Per Diem: @ \$74.00 per day per staff \$1,332</p> <p>Day One: \$74.00</p> <p>Day Two: \$74.00</p> <p>Day Three: \$74.00</p> <p>Total: \$222.00 x 6 staff</p> <p>Other expenses for 6 staff (baggage, ground travel etc.) \$1,085</p>	<p>\$8573</p>

D. EQUIPMENT	\$0
E. SUPPLIES	\$0
F. TOTAL CONTRACTUAL	\$0
G. CONSTRUCTION	\$0
H. OTHER	\$0
I. TOTAL DIRECT	\$205,244
J. INDIRECT	\$89,756

The Vermont Department of Health uses a Cost Allocation Plan, not an indirect rate. The Vermont Department of Health is a department of the Vermont Agency of Human Services, a public assistance agency, which uses a Cost Allocation Plan in lieu of an indirect rate agreement as authorized by OMB Circular A-87, Attachment D. This Cost Allocation Plan was approved by the US Department of Health and Human Services effective October 1, 1987. A copy of a recent approval letter is attached. The Cost Allocation Plan summarizes actual, allowable costs incurred in the operation of the program. These costs include items which are often shown as direct costs, such as telephone and general office supply expenses, as well as items which are often included in an indirect rate, such as the cost of office space and administrative salaries. These costs are allocated to the program based on the salaries and wages paid in the program. Because these are actual costs, unlike an Indirect Cost Rate, the ratio of allocated costs to salary will vary from quarter to quarter. Based on costs allocated to similar programs during recent quarters, we would currently estimate these allocated costs at 75% of the direct salary line item.

K. TOTAL	\$295,000
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Award

Award# 1 NU58DP007689-01-00

FAIN# NU58DP007689

Federal Award Date: 09/07/2023

Recipient Information

1. Recipient Name

HUMAN SERVICES VERMONT AGENCY OF
280 State Dr
Vocational Rehabilitation
Waterbury, VT 05671-9501
[NO DATA]

2. Congressional District of Recipient

00

3. Payment System Identifier (ID)

1036000264D4

4. Employer Identification Number (EIN)

036000264

5. Data Universal Numbering System (DUNS)

809376155

6. Recipient's Unique Entity Identifier (UEI)

YLQARK22FMQ1

7. Project Director or Principal Investigator

Ms Emily Fredette
Injury and Violence Prevention Program Mgr
emily.fredette@vermont.gov
802-865-7729

8. Authorized Official

Mr Paul Daley
Financial Director
paul.daley@vermont.gov
802-863-7264

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Ms. Robyn Bryant
Grants Management Specialist
ppa4@cdc.gov
404-488-2698

10. Program Official Contact Information

Carri Cottengim
Health Scientist
DRH MHHB
wsh2@cdc.gov
770-488-4290

Federal Award Information

11. Award Number

1 NU58DP007689-01-00

12. Unique Federal Award Identification Number (FAIN)

NU58DP007689

13. Statutory Authority

section 301(a) of the Public Health Service Act, [42 U.S.C. section 241(a)], as amended

14. Federal Award Project Title

Reducing Sudden Unexpected Infant Deaths in Vermont

15. Assistance Listing Number

93 946

16. Assistance Listing Program Title

Cooperative Agreements to Support State-Based Safe Motherhood and Infant Health Initiative Programs

17. Award Action Type

New

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date	09/30/2023	- End Date	09/29/2024
20. Total Amount of Federal Funds Obligated by this Action	\$70,446.00		
20a. Direct Cost Amount	\$49,612.00		
20b. Indirect Cost Amount	\$20,834.00		
21. Authorized Carryover	\$0.00		
22. Offset	\$0.00		
23. Total Amount of Federal Funds Obligated this budget period	\$0.00		
24. Total Approved Cost Sharing or Matching, where applicable	\$0.00		
25. Total Federal and Non-Federal Approved this Budget Period	\$70,446.00		
26. Period of Performance Start Date	09/30/2023	- End Date	09/29/2028
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance	\$70,446.00		

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Ms. Pamela Render
Grants Management Officer

30. Remarks

OVERALL BUDGET FOR COMPONENT A

A.	Personnel.....	\$27,779
B.	Fringe benefits	\$18,090
C.	Travel.....	\$3743
D.	Equipment	0
E.	Supplies	0
F.	Contractual.....	0
G.	Construction	0
H.	Other.....	0
I.	TOTAL DIRECT.....	\$49,612
J.	Indirect	\$20,834
K.	TOTAL.....	\$70,446

JUSTIFICATION

A. PERSONNEL \$27,779

	Annual Salary	% of Effort	# Months	Total
Public Health Analyst II (TBH)	\$64,667	0.25 FTE	12	\$16,167

Receipt of Component A would allow the State of Vermont to fund a data analyst position in the Health Statistic and Informatics division. The data analyst would support entry into the National Fatality Case Review Reporting System by establishing the infrastructure for data entry, supporting the Child Fatality Review Team with its data collection practices, and partnering with other data systems to ensure alignment. Additionally, this analyst would be dedicated to fatality data entry and analysis to help Vermont better understand the trends of SUID to offer effective, tailored interventions to decrease the rates of SUID deaths.

	Annual Salary	% of Effort	# Months	Total
Mike Beyna	\$58,061	0.2 FTE	12	\$11,612

Mike Beyna, Program Technician II, will act as a data manager who will work with the Child Fatality Review team to input any data from case reviews into the registry. The workflow

planned will involve the data manager inputting all data from a Child Fatality meeting prior to the next fatality meeting. As Child Fatality meets monthly, this will ensure the information is input within 30 days of review to meet grant requirements.

B. FRINGE BENEFITS \$18,090

The Vermont Department of Health will charge the actual cost of fringe benefits (not a fringe benefit rate) provided to employees working on the SUID Case Registry grant. The actual cost of fringe benefits varies from employee to employee based on salary, employee choice of health care plan, and employee election of certain benefits. The usual components of these fringe benefits are FICA, retirement, dental, medical and life insurance coverage, and the employee assistance program. The cost of each employee's fringe benefits will be allocated based on hours worked in the Program relative to all hours worked by the employee. Based on the current cost of a typical employee's fringe benefits, it is estimated that the cost of these fringe benefits at 62% of salary.

C. TRAVEL \$3743

Out of state travel for 2 staff to attend the required 3-day annual reverse site visit in Atlanta, Georgia.

Lodging: 2 staff x 3 nights \$1600

Airfare: 2 staff x \$650 \$1300

Per Diem: @ \$74.00 per day per staff/ \$55.50 on travel days

Day One: \$55.50

Day Two: \$74.00

Day Three: \$74.00

Day Four: \$55.50

Total: \$259.00 x 2 staff: \$518

Other expenses for 2 staff (baggage, ground travel etc.): \$325

D. EQUIPMENT \$0

E. SUPPLIES \$0

F. TOTAL CONTRACTUAL \$0

G. CONSTRUCTION \$0

H. OTHER \$0

I. TOTAL DIRECT	\$49,612
J. INDIRECT	\$20,834

The Vermont Department of Health uses a Cost Allocation Plan, not an indirect rate. The Vermont Department of Health is a department of the Vermont Agency of Human Services, a public assistance agency, which uses a Cost Allocation Plan in lieu of an indirect rate agreement as authorized by OMB Circular A-87, Attachment D. This Cost Allocation Plan was approved by the US Department of Health and Human Services effective October 1, 1987. A copy of a recent approval letter is attached. The Cost Allocation Plan summarizes actual, allowable costs incurred in the operation of the program. These costs include items which are often shown as direct costs, such as telephone and general office supply expenses, as well as items which are often included in an indirect rate, such as the cost of office space and administrative salaries. These costs are allocated to the program based on the salaries and wages paid in the program. Because these are actual costs, unlike an Indirect Cost Rate, the ratio of allocated costs to salary will vary from quarter to quarter. Based on costs allocated to similar programs during recent quarters, the current estimate of these allocated costs is at 75% of the direct salary line item.

K. TOTAL	\$70,446
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Department of Health and Human Services
Health Resources and Services Administration

Notice of Award
FAIN# B0447450
Federal Award Date: 09/26/2023

Recipient Information

- 1. **Recipient Name**
Human Services, Vermont Agency Of
280 State Dr
Waterbury, VT 05671-9501
- 2. **Congressional District of Recipient**
00
- 3. **Payment System Identifier (ID)**
103600027488
- 4. **Employer Identification Number (EIN)**
036000264
- 5. **Data Universal Numbering System (DUNS)**
809376155
- 6. **Recipient's Unique Entity Identifier**
YLQARK22FMQ1
- 7. **Project Director or Principal Investigator**
Ilisa Stalberg
ilisa.stalberg@vermont.gov
(802)951-4026
- 8. **Authorized Official**

Federal Agency Information

- 9. **Awarding Agency Contact Information**
Leon L Harrison
Grants Management Specialist
Office of Federal Assistance Management (OFAM)
Division of Grants Management Office (DGMO)
lharrison@hrsa.gov
(301) 443-5809
- 10. **Program Official Contact Information**
Lolita McLean
Maternal and Child Health Bureau (MCHB)
lmclean@hrsa.gov
(617) 849-2090

Federal Award Information

- 11. **Award Number**
6 B04MC47450-01-04
- 12. **Unique Federal Award Identification Number (FAIN)**
B0447450
- 13. **Statutory Authority**
42 U.S.C. § 701(a)(1)
- 14. **Federal Award Project Title**
Maternal and Child Health Services
- 15. **Assistance Listing Number**
93.994
- 16. **Assistance Listing Program Title**
Maternal and Child Health Services Block Grant to the States
- 17. **Award Action Type**
Administrative
- 18. **Is the Award R&D?**
No

Summary Federal Award Financial Information

- 19. **Budget Period Start Date 10/01/2022 - End Date 09/30/2024**
- 20. **Total Amount of Federal Funds Obligated by this Action** \$1,234.00
 - 20a. Direct Cost Amount
 - 20b. Indirect Cost Amount
- 21. **Authorized Carryover** \$0.00
- 22. **Offset** \$0.00
- 23. **Total Amount of Federal Funds Obligated this budget period** \$1,674,448.00
- 24. **Total Approved Cost Sharing or Matching, where applicable** \$926.00
- 25. **Total Federal and Non-Federal Approved this Budget Period** \$1,675,374.00
- 26. **Project Period Start Date 10/01/2022 - End Date 09/30/2024**
- 27. **Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period** \$1,675,374.00

- 28. **Authorized Treatment of Program Income**
Addition
- 29. **Grants Management Officer - Signature**
William Davis on 09/26/2023

30. Remarks

Request for Classification Action
New or Vacant Positions
EXISTING Job Class/Title ONLY
Position Description Form C/Notice of Action
For Department of Personnel Use Only

Notice of Action # _____		Date Received (Stamp)
Action Taken: _____		
New Job Title _____		
Current Class Code _____	New Class Code _____	
Current Pay Grade _____	New Pay Grade _____	
Current Mgt Level _____ B/U _____ OT Cat. _____	EEO Cat. _____	FLSA _____
New Mgt Level _____ B/U _____ OT Cat. _____	EEO Cat. _____	FLSA _____
Classification Analyst _____	Date _____	Effective Date: _____
Comments: _____		Date Processed: _____
Willis Rating/Components:	Knowledge & Skills: _____	Mental Demands: _____
	Working Conditions: _____	Total: _____
		Accountability: _____

Position Information:

Incumbent: **Vacant or New Position**

Position Number: Current Job/Class Title:

Agency/Department/Unit: GUC:

Pay Group: Work Station: Zip Code:

Position Type: Permanent Limited Service (end date)

Funding Source: Core Sponsored Partnership. For Partnership positions provide the funding breakdown (% General Fund, % Federal, etc.)

Supervisor's Name, Title and Phone Number:

Check the type of request (new or vacant position) and complete the appropriate section.

New Position(s):

a. **REQUIRED:** Allocation requested: Existing Class Code Existing Job/Class Title:

b. Position authorized by:

- Joint Fiscal Office – JFO # Approval Date:
- Legislature – Provide statutory citation (e.g. Act XX, Section XXX(x), XXXX session)
- Other (explain) -- Provide statutory citation if appropriate.

Vacant Position:

- a. Position Number:
- b. Date position became vacant:
- c. Current Job/Class Code: Current Job/Class Title:
- d. REQUIRED: Requested (existing) Job/Class Code: Requested (existing) Job/Class Title:
- e. Are there any other changes to this position; for example: change of supervisor, GUC, work station? Yes No If Yes, please provide detailed information:

For All Requests:

1. List the anticipated job duties and expectations; include all major job duties: Assess data needs related to family and child injury with a focus on morbidity and mortality related to maternal deaths and sudden unexpected infant deaths (SUIDs). Identify SUID and pregnancy-related deaths, facilitate data transfer to the federal data systems tracking these deaths and conduct quality assurance across data systems used for case abstraction. Utilize newly entered data into the National Fatality Case Reporting System (SUIDs) and CDC's Maternal Mortality Review Information Application and other known data sources to complete statistical and epidemiological analysis to better understand populations at risk for pregnancy-related death or SUID. Analyze data to identify circumstances and contributing causes of death, disproportionately affected populations and related morbidity measures. Complete analyses to track morbidity and mortality measures. Share key findings in meetings, presentations, reports and data briefs to Vermont's Child Fatality Review Team and Maternal Mortality Review Panel and other partners working to prevent SUIDs and pregnancy-related deaths. Participate in required CDC trainings, monthly grant calls and workgroups, and complete other tasks as required.

2. Provide a brief justification/explanation of this request: VDH was recently awarded funding for the CDC's Sudden Unexpected Infant Death (SUID) and Sudden Death in the Young (SDY) Case Registry grant and the Preventing Maternal Mortality: Supporting Maternal Mortality Review Committees grant. This funding will improve data collection, analysis and dissemination about pregnancy related deaths and SUIDs This will result in improved planning, implementation and evaluation of infant and maternal mortality prevention programs. The work necessary under this grant can not be undertaken by current staff, in addition to their regular duties. Currently, VDH does not have an analyst available to produce the data needed to accomplish the work of this grant. The work required by the new grant is statistically advanced and requires the attention of a PHA II with analytic skills to be able to develop novel analyses and thorough but digestible reports.

3. If the position will be supervisory, please list the names and titles of all classified employees reporting to this position (this information should be identified on the organizational chart as well). n/a



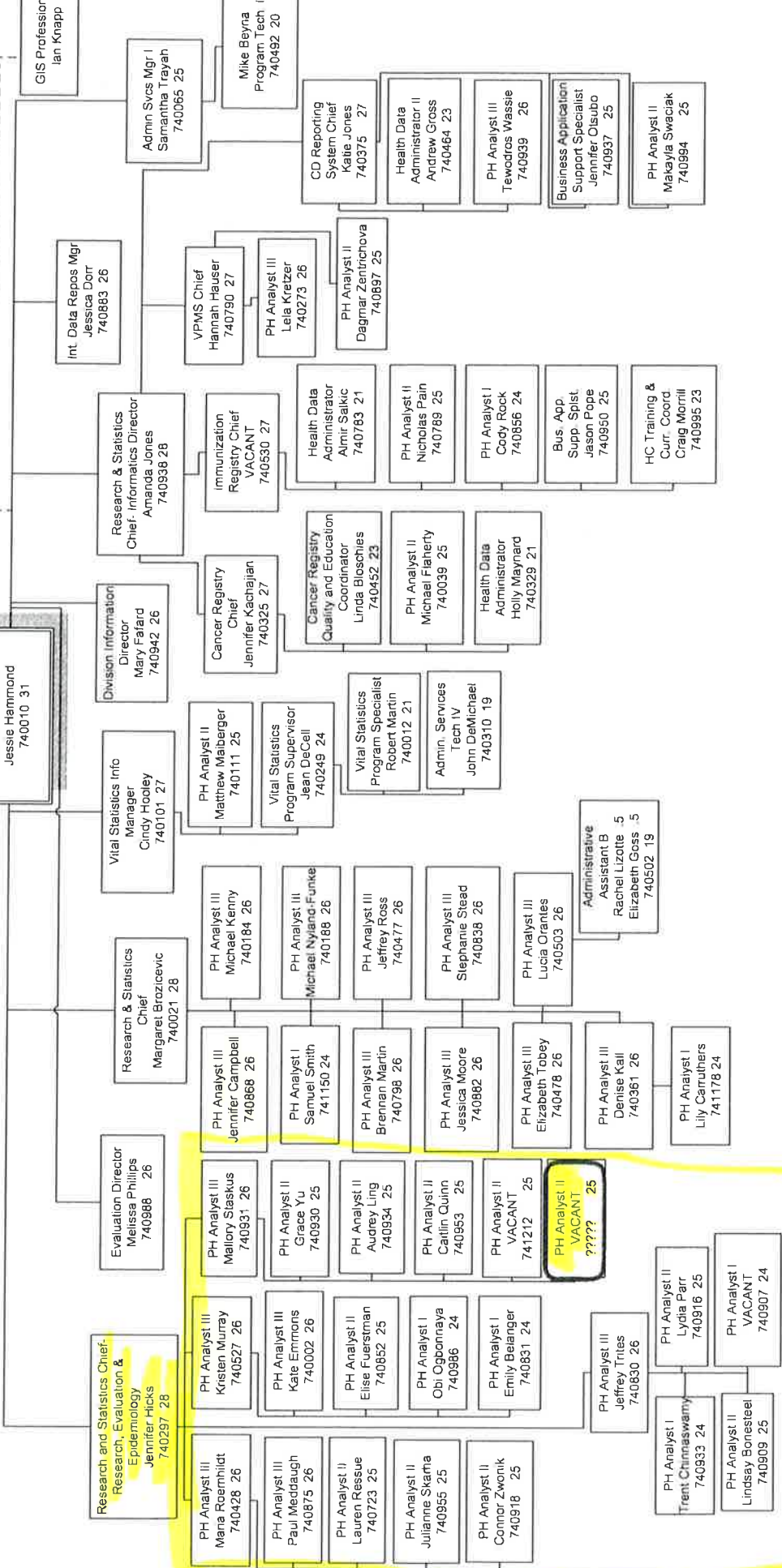
Division of Health Statistics and Informatics

8/1/23

GIS Technology Project Manager
Dan Jarvis

GIS Professional IV
Emily Long

GIS PH Analyst I
Rhannon Kilian
740849 24



Personnel Administrator's Section:

- 4. If the requested class title is part of a job series or career ladder, will the position be recruited at different levels? Yes No
- 5. The name and title of the person who completed this form: Mallory Staskus, Public Health Analyst III
- 6. Who should be contacted if there are questions about this position (provide name and phone number):
Mallory Staskus, 802-793-3574
- 7. How many other positions are allocated to the requested class title in the department: 18
- 8. Will this change (new position added/change to vacant position) affect other positions within the organization? (For example, will this have an impact on the supervisor's management level designation; will duties be shifted within the unit requiring review of other positions; or are there other issues relevant to the classification process.) No

Attachments:

- Organizational charts are **required** and must indicate where the position reports.
- Class specification (optional).
- For new positions, include copies of the language authorizing the position, or any other information that would help us better understand the program, the need for the position, etc.
- Other supporting documentation such as memos regarding department reorganization, or further explanation regarding the need to reallocate a vacancy (if appropriate).

DocuSigned by:
Trishia Brooks
577C7FA8885D4E3...

9/12/2023

Personnel Administrator's Signature (**required**)*

Date

Melby M S

9/11/2023

Supervisor's Signature (**required**)*

Date

DocuSigned by:
Kelly Dougherty
F0CF87D7DFD1420...

9/12/2023

Appointing Authority or Authorized Representative Signature (**required**)*

Date

* Note: Attach additional information or comments if appropriate.