



**STATE OF VERMONT**  
JOINT FISCAL OFFICE

**MEMORANDUM**

To: Joint Fiscal Committee members  
From: Sorsha Anderson, Senior Staff Associate  
Date: February 1, 2024  
Subject: LSP Requests – JFO #3184

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

**JFO #3184:** Three (3) limited-service positions to the Agency of Human Services, Department of Health. One (1) Substance Abuse Program Evaluator, funded through 8/31/28; and one (1) Public Health Specialist II, and one (1) Family Service Specialist both funded through 9/29/2024. The positions are fully funded by previously approved JFO requests #3036 and #1891. These positions will support Vermont's Overdose Data to Action program and the Maternal Mortality Review Panel.

*[Received January 31, 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 **February 20, 2024**, we will assume that you agree to consider as final the Governor's acceptance of this request.




**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: Vermont Overdose Data to Action in States Grant Funded Position

Date: Request 10/10/2023

Please find enclosed a request for limited-service positions required to carry out the work required for the Vermont Overdose Data to Action in States Grant (OD2A) and Maternal Mortality Review Panel grant (MMRP). The Joint Fiscal Committee previously authorized acceptance of funds from these sources via JFO #3036 and JFO #1891 respectively.

We are requesting three positions. One position, Substance Abuse Program Evaluator, will be funded entirely by OD2A; the other two positions, Public Health Specialist II and Family Services Specialist, are funded in part by each grant. The family services specialist position will be .75 FTE.

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

Cc: Rich Donahey, AHS Chief Financial Officer



**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: 10/10/2023

Name and Phone (of the person completing this request): Megan Hoke 802-651-1670

Request is for:

Positions funded and attached to a new grant

Positions funded and attached to an existing grant approved by JFO #: 3036 & 1891

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

Department of Health and Human Services – Vermont Overdose Data to Action in States – NU17CE010213  
 Department of Health and Human Services – Reducing Maternal Mortality in Vermont – NU58DP007567

2.

Title of Position Requested	# of Positions	Division/Program	Grant Funding Period/Anticipated End Date
Substance Abuse Program Evaluator	1	Substance Use Programs	9/1/23-8/31/28
Public Health Specialist II	1	Family & Child Health	9/1/23-9/29/24
Family Services Specialist	1	Chief Medical Examiner	9/1/23-9/29/24

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

The Substance Abuse Program Evaluator is responsible for development, integration and maintenance of evaluation data related to the OD2A grant, including the CDC-mandated Targeted Evaluation Project (TEP) of navigator activities. Assure that programs have been implemented consistent with the plan and that they are effective and efficient.

The Public Health Specialist will focus on coordinating Vermont's legislatively required MMRP, as well as developing and implementing recommendations to prevent maternal mortality and improve the system of care for pregnant and parenting individuals, especially as it relates to substance use and mental health.

The Family Services Specialist will be responsible for providing initial outreach and continue support to families of descendants investigated by the office of CME, for the purposes of determining their information and service needs, assisting them with establishing those services as able and performing a detailed interview to gather additional insight into injury factors and social determinants of health that can inform local start, and federal publish health initiatives and policies.

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))

*[Signature]* Digitally signed by: **Vonna W. Daloz** 10/26/2023 10/16/2023  
Signature of Agency or Department Head Date

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

**Adam Greshin** Digitally signed by Adam Greshin Date: 2023.12.14 17:19:11 -05'00'  
Approved/Denied by Finance and Management Date

*[Signature]* Digitally signed by: **Sarah Clark** 12/20/2023 | 9:25:09 EST  
Approved/Denied by Secretary of Administration Date

*[Signature]* 1/26/24  
Approved/Denied by Governor (required as amended by 2019 Leg. Session) Date

Comments:

DS  
30

10/24/2023



DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Centers for Disease Control and Prevention

## Notice of Award

Award# 1 NU17CE010213-01-00

FAIN# NU17CE010213

Federal Award Date: 08/23/2023

### Recipient Information

**1. Recipient Name**

HUMAN SERVICES VERMONT AGENCY OF  
280 State Dr  
Substance Use Programs  
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 Trutor  
Deputy Director  
AHS.VDHDSUFederalGrants@vermont.gov  
802-651-1550

**8. Authorized Official**

Ms. Megan Hoke  
Financial Director  
megan.hoke@vermont.gov  
802 651-1670

**Federal Agency Information**

CDC Office of Financial Resources

**9. Awarding Agency Contact Information**

Natasha Jones  
Grants Management Officer  
mgz2@cdc.gov  
770-488-1649

**10. Program Official Contact Information**

Ms. Colleen Shaw  
cgd9@cdc.gov  
770-488-8333

### Federal Award Information

**11. Award Number**

1 NU17CE010213-01-00

**12. Unique Federal Award Identification Number (FAIN)**

NU17CE010213

**13. Statutory Authority**

Section 311(c)(1) of the PHS Act (42 USC § 243(c)(1))

**14. Federal Award Project Title**

Vermont Overdose Data to Action in States

**15. Assistance Listing Number**

93.136

**16. Assistance Listing Program Title**

Injury Prevention and Control Research and State and Community Based Programs

**17. Award Action Type**

New

**18. Is the Award R&D?**

No

### Summary Federal Award Financial Information

<b>19. Budget Period Start Date</b>	09/01/2023	- End Date	08/31/2024
<b>20. Total Amount of Federal Funds Obligated by this Action</b>			\$3,272,032.00
20a. Direct Cost Amount			\$2,585,382.00
20b. Indirect Cost Amount			\$686,650.00
<b>21. Authorized Carryover</b>			\$0.00
<b>22. Offset</b>			\$0.00
<b>23. Total Amount of Federal Funds Obligated this budget period</b>			\$0.00
<b>24. Total Approved Cost Sharing or Matching, where applicable</b>			\$0.00
<b>25. Total Federal and Non-Federal Approved this Budget Period</b>			\$3,272,032.00
<b>26. Period of Performance Start Date</b>	09/01/2023	- End Date	08/31/2028
<b>27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance</b>			\$3,272,032.00

**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

**29. Grants Management Officer - Signature**

Ms. Tajsha LaShore

**30. Remarks**

**Vermont Department of Health (VDH) – Division of Substance Use Programs  
CDC Prescription Drug Overdose Prevention in States (CDC-RFA-CE-23-0002)**

**Base Grant Budget Justification and Narrative**

**Surveillance** includes Strategies 1-3 and **Prevention** includes Strategies 6-9

*Separate budgets are available for Strategies 4 & 5*

**9/1/2023 – 8/31/2024**

**A. SALARIES AND WAGES**

**TOTAL: \$654,185**

<b>DIVISION OF SUBSTANCE USE PROGRAMS</b>					
<b>Position Title and Name Requested (If Applicable)</b>	<b>Annual Salary</b>	<b>Time (%) 12 Month Period</b>	<b>Surveillance</b>	<b>Prevention</b>	<b>Total</b>
Substance Abuse Program Manager <i>Newton, Rachel</i>	\$65,936	70%	\$0	\$46,155	\$46,155
Administrative Services Coordinator II <i>Royer, Tina</i>	\$69,938	50%	\$0	\$34,969	\$34,969
Substance Abuse Information Director <i>Trutor, Megan</i>	\$80,533	50%	\$0	\$40,266	\$40,266
OD2A Evaluator, <i>TBD</i>	\$62,296	100%	\$0	\$62,296	\$62,296
Division of Substance Use Programs Director, <i>Emily Trutor</i>	\$104,230	10% In Kind	\$0	\$0	\$0

<b>DIVISION OF HEALTH SURVEILLANCE AND INFORMATICS</b>					
<b>Position Title and Name Requested (If Applicable)</b>	<b>Annual Salary</b>	<b>Time (%) 12 Month Period</b>	<b>Surveillance</b>	<b>Prevention</b>	<b>Total</b>
Essence Administrator <i>Jones, Katie</i>	\$63,400	25% In Kind	\$0	\$0	\$0
Public Health Analyst (PHA) III Lead OD2A Analyst/Surveillance Lead <i>Trites, Jeff</i>	\$78,229	37.5%	\$29,335	\$0	\$29,335
PHA III SUDORS Project Manager <i>Staskus, Mallory</i>	\$81,949	25%	\$20,488	\$0	\$20,488
PHA II – DSU Analyst and Social Autopsy Lead <i>Bonesteel, Lindsay</i>	\$66,747	12.5%	\$8,344	\$0	\$8,344
PHA II – Morbidity Lead <i>Parr, Lydia</i>	\$64,667	75%	\$48,500	\$0	\$48,500

<b>DIVISION OF HEALTH SURVEILLANCE AND INFORMATICS</b>					
<i>PHA I – OD2A Infrastructure Support TBD</i>	\$58,760	100%	\$58,760	\$0	\$58,760
<i>PHA I – SUDORS Abstraction, Trent Chinnaswamy</i>	\$60,882	100%	\$60,882	\$0	\$60,882
<i>Vermont Prescription Monitoring System (VPMS) PHA, Zentrichova, Dagmar</i>	\$71,561	100%	\$0	\$71,561	\$71,561
<i>VPMS Program Manager Hauser, Hannah</i>	\$72,180	25% In Kind	\$0	\$0	\$0
<i>HSI Division Director Hammond, Jessie</i>	\$108,720	10% In Kind	\$0	\$0	\$0

<b>DIVISION OF EMERGENCY PREPAREDNESS AND INJURY PREVENTION</b>					
<b>Position Title and Name Requested (If Applicable)</b>	<b>Annual Salary</b>	<b>Time (%) 12 Month Period</b>	<b>Surveillance</b>	<b>Prevention</b>	<b>Total</b>
Public Health Administrator (Naloxone) <i>Busch, Stephanie</i>	\$71,219	50%	\$0	\$35,610	\$35,610
Emergency Medical Services Data Manager <i>Brouard, Beth</i>	\$67,184	50%	\$0	\$33,592	\$33,592
OD2A Communications Coordinator, TBD	\$58,760	70%	\$0	\$41,132	\$41,132

<b>DIVISION OF FAMILY AND CHILDREN HEALTH</b>					
<b>Position Title and Name Requested (If Applicable)</b>	<b>Annual Salary</b>	<b>Time (%) 12 Month Period</b>	<b>Surveillance</b>	<b>Prevention</b>	<b>Total</b>
CHARM Coordinator, <i>TBD</i>	\$62,296	50%	\$0	\$31,148	\$31,148

<b>OFFICE OF THE CHIEF MEDICAL EXAMINER</b>					
<b>Position Title and Name Requested (If Applicable)</b>	<b>Annual Salary</b>	<b>Time (%) 12 Month Period</b>	<b>Surveillance</b>	<b>Prevention</b>	<b>Total</b>
OCME Investigation Social Worker <i>TBD</i>	\$62,296	50%	\$31,148	\$0	\$31,148

TOTAL SALARY	Surveillance	Prevention	Total
	\$257,457	\$396,728	\$654,185

### Job Descriptions:

Substance Abuse Program Manager (1 FTE): Rachel Newton, Master of Public Health, (Program Manager); primary manager of the grant activities. Oversees the budget, planning, manages grants, contracts, and MOUs, completes CDC reporting, leads meetings, develops work plans, builds and maintains partnerships, oversees surveillance, communication, and evaluation activities to ensure goals are met throughout all strategies and activities proposed. Directly oversees many of the contractual line items identified in this budget narrative.

Administrative Services Coordinator II (0.5 FTE): Tina Royer; provides administrative support to the Program Manager, and other team members, assists with APR, order supplies, schedule meetings, distribute information, assists with grant and contract execution, and any other general administrative duties associated with the grant.

Substance Abuse Information Director (0.5 FTE): Megan Trutor, Bachelor of Arts in Sociology; develop and oversee the market research and media plans and provides guidance on state-wide campaigns focused on opioid overdose and misuse prevention. Acts as the liaison with the central communications office, oversee all educational and informational materials developed and distributed through the grant.

OD2A Communications Coordinator (1 FTE): To be hired; develop and implement a communications plan specific to OD2A data products, program updates, and other relevant overdose prevention work happening at the Health Department. Acts as the liaison with the Information Directors in the Divisions of Substance Use Program, Emergency Preparedness and Response and Injury Prevention, Family and Child Health, Local Health, and Health Surveillance and Informatics to ensure coordination of work.

Substance Abuse Program Evaluator (1 FTE): To be hired; develop and implement an evaluation plan for all prevention activities. This position will work closely with the Program Manager to help inform program implementation to ensure the evaluation plan is in alignment with implementation.

Division Director, Substance Use Programs (.1 FTE In Kind): Trutor, Emily; acts as the Prevention Principal Investigator for Vermont's OD2A grant and will support Department wide coordination of effort.

Essence Administrator (0.25 FTE In Kind): Jones, Katie; maintain ESSENCE database and work with Public Health Analyst II to improve emergency department data quality and coding. Assist and support ongoing ED reporting requirements and participate in ongoing grant management and update meetings as necessary.

Public Health Analyst (1 FTE): Dagmar Zentrichova, Bachelor of Science, (VPMS Analyst); ensure pharmacy compliance by completing ongoing data analysis, outreach, and technical assistance for Vermont licensed pharmacies. Examine other states' policies and procedures for auditing pharmacies reporting to PDMP to ensure data quality; draft policy and procedures for Vermont auditing processes for Vermont licensed pharmacies to ensure compliance.

VPMS Program Manager (.2 FTE In Kind): Hannah Hauser; oversees the programmatic components of VPMS to ensure the system supports clinical best practices and is the supervisor of the VPMS Public Health Analyst.

Public Health Analyst III (0.5 FTE): Jeffrey Trites, Master of Science; Surveillance Lead. Responsible for ensuring all surveillance activities are completed.

Public Health Analyst III (.25FTE): Mallory Staskus, Master of Public Health; SUDORS Project Manager. Responsible



for ensuring data quality of the SUDOR data input.

Public Health Analyst II – Abstractor (0.5 FTE): Lindsay Bonesteel; Social Autopsy Lead and supports all overdose analytics. Works with Public Health Analyst III to create project design, timeline and supports other analysts to ensure project stays on pace. Responsible for de-identification of full dataset and analysis. Support development of Memorandum of Agreements as needed for data use and provide technical assistance to other state departments looking to participate to ensure meaningful data used in the Social Autopsy Project.

Public Health Analyst II – Morbidity Lead (1 FTE): Lydia Parr, Master of Public Health; Lead analyst for morbidity data and will provide support analysis for mortality.

Public Health Analyst I – Abstractor (1 FTE): Trent Chinnaswamy, Master of Public Policy; Collect data for of all accidental and undetermined drug-related fatalities into the State Unintentional Drug Overdose Reporting System (SUDORS) using the CDC case definitions. Provide supportive analysis for the Social Autopsy project.

Public Health Analyst I – Infrastructure Support (1 FTE): To Be Hired; Position will provide support analysis for all surveillance.

Division Director, Health Surveillance and Informatics (.1 FTE): Jessie Hammond; Principal Investigator for Surveillance. This position will provide technical assistance and planning for all surveillance activities, ensuring best practices are utilized and all data products are developed in alignment with CDC requirements and Health Department standards.

Public Health Administrator (Naloxone) (0.5 FTE): Busch, Stephanie, Bachelor of Science; This position will oversee the planning, administrative, and consultative work of the state's naloxone distribution program. This includes training partner agency staff such as first responder agencies and SSPs on naloxone administration, ensuring naloxone distribution sites and first responders have appropriate naloxone supplies, overseeing reporting for program evaluation, and maintaining naloxone training and distribution policies and procedures. To ensure integration of naloxone programming in appropriate activities from across the department, the Public Health Administrator will work with other divisions including Alcohol and Drug Abuse Programs and Health Surveillance. Additionally, this position will interpret and disseminate scientific knowledge regarding naloxone distribution and administration data to target audiences.

Emergency Medical Services Data Manager (0.5 FTE): Brouard, Beth Master in Education, (SIREN Data Manager); This position will oversee the planning, administrative and technical application of Vermont emergency medical services statewide incident reporting network (SIREN). The maintenance of this comprehensive prehospital care database ensures stakeholders near real time access to overdose and opioid use information. This position interfaces with 174 reporting EMS agencies and more than 2,800 emergency medical providers to assure statutory incident reporting occurs in a timely and quality manner. In addition this position facilitates daily and weekly opioid data sharing with law enforcement, the division of Alcohol and Drug Abuse Programs and other key opioid stakeholders. In partnership with the division of Health Surveillance, the SIREN Data Manager also creates and distributes monthly and annual opioid response reporting. The SIREN data manager is also the Department of Health liaison for any and all outside data requests and manages dozens of opioid research inquiries annually. Finally, the SIREN Data Manager coordinates pre-hospital care performance measures as part of a larger systemic quality management plan. These measures examine, among other elements, Vermont emergency medical service's medical response to the opioid crisis and will include the integration work with the IT system upgrade to improve data sharing with hospitals.

CHARM Coordinator (0.5 FTE): To Be Hired; Position will work with Children and Recovering Mothers (CHARM) community response teams to support statewide coordination, best practice guidance, and ongoing support.

OCME Investigation Social Worker (0.5 FTE): To Be Hired; Position will provide in depth interview with family members

of deceased person when death was due to accidental or undetermined overdose. This will improve forensic investigation of drug overdose deaths.

**B. FRINGE BENEFITS****TOTAL: \$369,244**

TOTAL FRINGE BENEFITS	Surveillance	Prevention	Total
	\$163,373	\$205,871	\$369,244

Fringe benefits applied to direct salaries at a rate of 56%

**C. Travel****Total: \$17,079**In-State Travel:

Total: \$1,471

Number of trips	Number of People	Total number of miles	Cost per mile	Surveillance	Prevention	Total
25	2	2,246	\$.655	\$0	\$1,471	\$1,471

Justification for In-State Travel:

Naloxone Administrator to provide naloxone trainings to organizations throughout the state and Program Manager to attend site visits, meetings, and technical assistance for subcontractors/subgrantees.

Out-of-State Travel:

Total: \$15,608

Required Grantee Meeting – Atlanta GA: \$7,804

# of Trips	# of People	Airfare	Luggage	Surveillance Budget	Prevention Budget	Total
1	4	\$800 Round Trip	\$100 Round trip	\$1,800	\$1,800	\$3,600
Per Diem & Lodging	# of People	# of Units	Unit Cost	Surveillance Budget	Prevention Budget	Total
Per Diem	4	4	\$74/day	\$592	\$592	\$1,184
Lodging	4	3	\$225/day	\$1,350	\$1,350	\$2,700
Transportation & Parking	# of People	Cost of transportation per person	Cost of parking per person	Surveillance Budget	Prevention Budget	Total
Transportation	4	\$32 Round Trip (\$16/each way)		\$64	\$64	\$128
Parking	4		\$48 (\$12/day x 4 Days)	\$96	\$96	\$192
Subtotal by Surveillance/Prevention/Total:				\$3,902	\$3,902	\$7,804

Justification for Out-of-State: This is required travel for individuals from the VT Overdose Prevention for States team to join other awarded states to garner more information on how the states will work together to support the state and national goal of this cooperative agreement. The Evaluator, Program Manager, Lead Analyst and one other staff to be determined with our assigned Project Officer will attend this meeting.

RX Summit – Atlanta, GA: \$3,902 Justification for Out-of-State: This conference provides an opportunity for the Overdose Data to Action staff to learn from national leaders in different professions and aspects of the opioid crisis. In attending this conference, staff is able to bring new information and approaches to opioid overdose prevention efforts to the rest of the Overdose Data to Action and Vermont Department of Health teams. Attending this conference will be one person from Prevention team and one person from Surveillance team. Registration is for the maximum access package for government.

# of Trips	# of People	Airfare	Luggage	Surveillance Budget	Prevention Budget	Total
1	2	\$800 Round Trip	\$100 Round trip	\$900	\$900	\$1,800
Per Diem & Lodging	# of People	# of Units	Unit Cost	Surveillance Budget	Prevention Budget	Total
Per Diem	2	4	\$74/day	\$296	\$296	\$592
Lodging	2	3	\$225/day	\$675	\$675	\$1,350
Transportation & Parking	# of People	Cost of transportation per person	Cost of parking per person	Surveillance Budget	Prevention Budget	Total
Transportation	2	\$32 Round Trip (\$16/each way)		\$32	\$32	\$64
Parking	2		\$48 (\$12/day x 4 Days)	\$48	\$48	\$96
Subtotal by Surveillance/Prevention/Total:				\$1,951	\$1,951	\$3,902

Related Out of State Conference: \$3,902

Justification for Out-of-State: This will allow two OD2A program staff and analysts to attend conferences throughout the year that will expand Vermont's understanding of the overdose crisis and provide an opportunity to adjust our programming with new and growing evidence-based approaches other states are utilizing.

# of Trips	# of People	Airfare	Luggage	Surveillance Budget	Prevention Budget	Total
1	2	\$800 Round Trip	\$100 Round trip	\$900	\$900	\$1,800
Per Diem & Lodging	# of People	# of Units	Unit Cost	Surveillance Budget	Prevention Budget	Total
Per Diem	2	4	\$74/day	\$296	\$296	\$592
Lodging	2	3	\$225/day	\$675	\$672	\$1,350

Transportation & Parking	# of People	Cost of transportation per person	Cost of parking per person	Surveillance Budget	Prevention Budget	Total
Transportation	2	\$32 Round Trip (\$16/each way)		\$32	\$32	\$64
Parking	2		\$48 (\$12/day x 4 Days)	\$48	\$48	\$96
Subtotal by Surveillance/Prevention/Total:				\$1,951	\$1,951	\$3,902

TOTAL TRAVEL	Surveillance	Prevention	Total
	<b>\$7,804</b>	<b>\$9,275</b>	<b>\$17,079</b>

**D. EQUIPMENT****TOTAL: \$0**

No equipment will be purchased with this grant.

**E. SUPPLIES****TOTAL: \$16,353**

Item Requested	# Needed	Unit Cost	Surveillance	Prevention	Total
Fentanyl test strips	5,353	\$1	\$0	\$5,353	\$5,353
Printed materials for Harm Reduction Packs (not naloxone)	200	\$25	\$0	\$5,000	\$5,000
Computer for analysts	2	\$3,000	\$6,000	\$0	\$6,000

## Justification:

- Fentanyl test strips: purchased in-house, to be distributed to Vermonters using opioids and stimulants for further awareness of adulterants in their drug supply to help increase utilization of overdose prevention strategies. Purchases will follow state purchasing protocols. This is directly related to Strategy 8.
- Printed materials for Harm Reduction Packs: printed in-house or through in-house procurement procedures, materials such as instructions for naloxone and fentanyl test strips, resource brochures or other materials to be added into Harm Reduction Packs that are distributed to the community. All purchases will follow state purchasing protocols. This is directly related to Strategy 8.
- Computer for analysts: Computer workstation will be used by analyst to perform surveillance functions including monitoring and reporting. Workstations and setup upgrades are provided when necessary following state purchasing protocols. This is related to Surveillance strategies.

**F. CONTRACTUAL COSTS****TOTAL: \$1,160,000.00****STRATEGY 1:***Enhancing emergency medical services (EMS) data and systems through SIREN continuum enhancement - \$40,000*

1. Name of Contractor – Image Trend
2. Method of Selection – Request for Proposal
3. Period of Performance – 9/1/2023 – 8/31/2024
4. Scope of Work – Implementation of enhancement to generate data reports on EMS response to overdose to inform rapid response efforts.
5. Method of Accountability – SIREN Data Manager will manage contract to ensure deliverables are met.
6. Itemized Budget and Justification – Comprehensive and “real time” data to inform ongoing trends with drug overdoses; data will be shared with stakeholders and programs to inform ongoing overdose interventions.
  - Continuum Subscription cost: \$40,000
    - Continuum \$20,000
    - Continuum EMS Package \$10,000
    - Continuum Geocoding \$10,000

**STRATEGY 3:***Enhanced Toxicology Testing for the Office of the Chief Medical Examiner (OCME) - \$50,000*

1. Name of Contractor – National Medical Services Labs
2. Method of Selection – Request for Proposal
3. Period of Performance – 9/1/2023 – 8/31/2024
4. Scope of Work – Comprehensive toxicology testing for individuals who died of an opioid overdose.
5. Method of Accountability – Analysts and Abstractors will be reviewing all overdose cases and will ensure comprehensive toxicology is part of the OCME’s case notes.
6. Itemized Budget and Justification – Comprehensive data to inform ongoing trends with drug overdoses; data will be shared with stakeholders and programs to inform ongoing overdose interventions. Contract is for sample testing billed at an agreed rate per sample based upon requested panel. Most prevalent panel is “expanded blood” panel at ~\$200/sample with range of \$61-326/sample.
  - Sample Testing, 250 samples at \$200/sample, \$50,000
  - Total: \$50,000

**STRATEGY 6:***Clinician Education on Best Practices for Acute, Subacute, and Chronic Pain - \$75,000*

1. Name of Contractor – University of Vermont Area Health Education Center (AHEC)
2. Method of Selection – Sole Source (Subrecipient Grant)
3. Period of Performance – 9/1/2023 – 8/31/2024
4. Scope of Work – VDH will partner with the UVM AHEC’s Office of Primary Care to continue QI work with Vermont prescribers including analysis of prescribing data to identify trends and workflow improvements to ensure prescribers are adhering to the Vermont Pain Rules. They will also promote alternatives to opioid for pain management, use of the Vermont Prescription Monitoring System (VPMS), and referrals to evidence-based treatment.

5. Method of Accountability – The Program Manager will oversee the workplan and deliverables.
6. Justification – This work will provide one-on-one guidance to adhere to the Vermont Pain Rules for Vermont Prescribers increasing compliance with the rules, and decreasing unnecessary opioid prescribing.
  - Salaries: \$52,391
  - Practice stipends: \$4,000 (\$2,000 per practice x 2 practices for the amount of intensive time committed to the project)
  - Indirect rate at federally negotiated 33%: \$18,609
  - Total: \$75,000

Trainings for Clinicians on Screening, Diagnosis, and Referral to Resources -- \$35,000

1. Name of Contractor – AdCare Educational Institute, Inc.
2. Method of Selection – Sole Source (Subrecipient Grant)
3. Period of Performance – 9/1/2023 – 8/31/2024
4. Scope of Work – Assess availability and gaps related to clinician training on screening, diagnosis, and linkage to care for opioid use disorder (OUD) and stimulant use disorder (StUD). Coordinate development and implementation of trainings as identified via assessment and ensure dissemination of training opportunities to clinicians.
5. Method of Accountability – This will be overseen by the Program Manager.
6. Justification – Goal is to support and empower Vermont providers to more effectively identify and support Vermonters at risk of overdose.
  - Salaries: \$16,500
  - Fringe: \$5,445
  - Other: \$9,873 (Event registration, coordination, CEUs)
  - Indirect costs at 10% de minimis: \$3,182
  - Total: \$35,000

Support Hospital System Workflows and Systems to Identify and Treat SUD -- \$75,000

1. Name of Contractor – Windsor Hospital
2. Method of Selection – Sole Source (Subrecipient Grant)
3. Period of Performance – 9/1/2023 – 8/31/2024
4. Scope of Work – Support Emergency Department linkages via multidisciplinary teams; support system-wide inpatient workflows and policies to identify hospitalized patients who are ready to engage in SUD care.
5. Method of Accountability – This will be overseen by the Program Manager.
6. Justification – Goal is to support development and implementation of Clinical and Health System workflows and linkages to care.
  - Salaries: \$45,000
  - Fringe: \$13,950
  - Other: \$9,232 (Marketing, advertising)
  - Indirect costs at 10% de minimis: \$6,818
  - Total: \$75,000

Pediatric Medical Home Case Coordination - \$250,000

1. Name of Contractor – TBD
2. Method of Selection – Sole Source (Subrecipient Grant)
3. Period of Performance – 9/1/2023 – 8/31/2024
4. Scope of Work – Family Specialists will be integrated in pediatric primary care offices and build trusting relationships with families, provide screening and referrals, and connect families to services.

5. Method of Accountability – This will be overseen by the Vermont Department of Health’s Division of Family and Child Health (FCH) in partnership with the Program Manager and Evaluator.
6. Justification – Goal is to increase the number of families connected with services to reduce harm of opioid use, including active referrals to evidence-based treatment providers.

**STRATEGY 7:**

*Training to Improve Knowledge, Attitudes, and Capacity Among PH/PS to Prevent and Respond to Overdose - \$95,000*

1. Name of Contractor – Center for Health and Learning
2. Method of Selection – Sole Source (Subrecipient Grant)
3. Period of Performance – 9/1/2023 – 8/31/2024
4. Scope of Work – The grantee will develop and implement a training or training series for public health and public safety (PH/PS) partners on topics such as motivational interviewing, stigma reduction, opioid use disorder, stimulant use disorder, harm reduction, naloxone administration, trauma-informed care, recovery-oriented approaches, and other overdose prevention strategies.
5. Method of Accountability – This will be overseen by the Program Manager
6. Justification – Goal is to increase active referrals and linkages to care from public safety partners and to reduce stigma associated with Vermonters at risk of an overdose.
  - Salaries: \$50,000
  - Fringe: \$15,000
  - Contracted hours for trainers: \$100/hour for 90 hours: \$9,000
  - Other (costs not included in other categories): \$12,364
    - CEUs: \$5,364
    - Evaluation: \$5,000
    - Cloud hosting space: \$2,000
  - Indirect costs at 10% de minimis: \$8,636
  - Total: \$95,000

**STRATEGY 8:**

*Overdose Prevention and Response and Harm Reduction Trainings - \$55,000*

1. Name of Contractor – Vermont CARES
2. Method of Selection – Sole Source (Subrecipient Grant)
3. Period of Performance – 9/1/2023 – 8/31/2024
4. Scope of Work – The grantee will develop and expand current overdose education that prioritizes education and distribution among those who are at the greatest risk of experiencing or witnessing an overdose.
5. Method of Accountability – This will be overseen by the Program Manager
6. Justification – Goal is to increase the number of Vermonters prepared to respond to an opioid overdose.
  - Salaries: \$34,000
  - Fringe: \$8,500
  - Travel: \$800
  - Other: \$6,700
    - Website training page: \$6,700
  - Indirect costs at 10% de minimis rate: \$5,000
  - Total: \$55,000

Case Management in Syringe Service Programs (SSPs) - \$150,000

1. Name of Contractor – AIDS Project of Southern Vermont
2. Method of Selection – Sole Sourced (Subrecipient Grant)
3. Period of Performance – 9/1/2023 – 8/31/2024
4. Scope of Work – The grantees will embed case managers into their SSP services to support navigation to care such as substance use disorder treatment and HIV/Hepatitis C treatment.
5. Method of Accountability – This will be overseen by the Program Manager
6. Justification – This will support Vermonters utilizing these two SSP services to have more support in navigating systems of care and obtaining resources to help minimize the risk of an opioid overdose. Costs associated with AIDS Project of Southern Vermont:
  - Salaries: \$37,500
  - Fringe: \$7,955
  - Indirect costs at 10% de minimis rate: \$4,545
  - Total: \$50,000

1. Name of Contractor – Vermont CARES
2. Method of Selection – Sole Sourced (Subrecipient Grant)
3. Period of Performance – 9/1/2023 – 8/31/2024
4. Scope of Work – The grantees will embed case managers into their SSP services to support navigation to care such as substance use disorder treatment and HIV/Hepatitis C treatment.
5. Method of Accountability – This will be overseen by the Program Manager
6. Justification – This will support Vermonters utilizing these two SSP services to have more support in navigating systems of care and obtaining resources to help minimize the risk of an opioid overdose. Costs associated with Vermont CARES:
  - Salaries: \$75,000
  - Fringe: \$15,910
  - Indirect costs at 10% de minimis rate: \$9,090
  - Total: \$100,000

Overdose Prevention and Linkage to Care Promotion - \$100,000

1. Name of Contractor – Rescue Agency Public Benefit, LLC
2. Method of Selection – Request for Proposal (Contract)
3. Period of Performance – 9/1/2023 – 8/31/2024
4. Scope of Work – The Division of Substance Use Programs has just completed an RFP for a marketing contract. Within that contract the selected vender will develop and/or implement marketing assets for overdose prevention and response campaigns such as Vermont’s KnowOD campaign, or promoting the utilization of VT Helplink which is Vermont’s clearinghouse for harm reduction, treatment, and recovery services in Vermont.
5. Method of Accountability – This will be overseen by the Program Manager
6. Justification – This will increase Vermonters’ awareness of and potential utilization of overdose prevention and Clinical services.
  - Strategic Planning, Media Planning, Creative Strategy, Creative Direction, Creative Development: \$150/hour for 52 hours: \$7,800
  - Copy Writing, Editing, Proofing, Graphic Design, Production, Coordination, Media Buying, Implementation and Management, Media Analysis, Invoice Reconciliation, Account Management: \$130/hour for 120 hours: \$15,600
  - Media Costs (video, audio, digital and social media channels, out-of-home placements, e.g., regional bus signage): \$71,000
  - Information Cards Printing and Shipping: \$5,600
  - Total: \$100,000



Qualitative Data Collection - \$90,000

1. Name of Contractor – TBD
2. Method of Selection – Request for Proposal (Contract)
3. Period of Performance – 9/1/2023 – 8/31/2024
4. Scope of Work – The Division of Substance Use Programs will develop an RFP to select a vendor to complete an ongoing qualitative data collection effort with those most at risk of an overdose to help inform statewide and local overdose prevention efforts.
5. Method of Accountability – This will be overseen by the Program Manager
6. Justification – This will allow for statewide and local overdose prevention efforts to be more nimble and responsive to new trends or information being provided by those the efforts are looking to serve.

**STRATEGY 9:**

Developing Community Outreach and Linkage to Care Resources - \$145,000

1. Name of Contractor – Rutland United Way
2. Method of Selection – Sole Source (Subrecipient Grants)
3. Period of Performance – 9/1/2023 – 8/31/2024
4. Scope of Work – Grantee will work in the Rutland region to build community resiliency to reduce overdose, increase or strengthen peer navigation systems, and address inequities that increase overdose risk in their communities.
5. Method of Accountability – This will be overseen by the Program Manager.
6. Justification – This will allow individual Vermont communities to partner with the Health Department to address needs for their populations. This will allow for local control which in turn will positively impact statewide efforts to address overdose.
  - Salaries: \$5,500
  - Fringe: \$1,100
  - Supplies: \$218
  - Subcontracts for community-based organizations doing navigation services: \$25,000
  - Indirect costs at 10% de minimis rate: \$3,182
  - Total: \$35,000

1. Name of Contractor – Turning Point of Bennington
2. Method of Selection – Sole Source (Subrecipient Grants)
3. Period of Performance – 9/1/2023 – 8/31/2024
4. Scope of Work – Grantee will work in the Bennington region to build community resiliency to reduce overdose, increase or strengthen peer navigation systems, and address inequities that increase overdose risk in their communities.
5. Method of Accountability: This will be overseen by the Program Manager.
6. Justification – This will allow individual Vermont communities to partner with the Health Department to address needs for their populations. This will allow for local control which in turn will positively impact statewide efforts to address overdose.
  - Salaries: \$25,000
  - Fringe: \$5,000
  - Supplies: \$1,818
  - Indirect costs: \$3,182

- Total: \$35,000

1. Name of Contractor – To Be Determined
2. Method of Selection – Sole Source (Subrecipient Grants)
3. Period of Performance – 9/1/2023 – 8/31/2024
4. Scope of Work – The Health Department’s Division of Substance Use Program will partner with the Health Department’s Office of Local Health to identify community partners to continue to build upon the work of the Community Action Grants developed in the original OD2A grant. Grantees will work to build community resiliency to reduce overdose, increase or strengthen peer navigation systems, and address inequities that increase overdose risk in their communities.
5. Method of Accountability: This will be overseen by the Program Manager.
6. Justification – This will allow individual Vermont communities to partner with the Health Department to address needs for their populations. This will allow for local control which in turn will positively impact statewide efforts to address overdose.
  - \$75,000 to be split up between 1-3 additional community subgrantees to be identified during the first 3 months of the project period.

**G. CONSTRUCTION**

**TOTAL: \$0**

Not applicable.

**H. OTHER**

**TOTAL: \$2,350**

*RX Summit – Atlanta, GA: \$2,350* Registration fees for to individuals to attend this conference. In attending this conference, staff is able to bring new information and approaches to opioid overdose prevention efforts to the rest of the Overdose Data to Action and Vermont Department of Health teams. Attending this conference will be one person from Prevention team and one person from Surveillance team. Registration is for the maximum access package for government.

Category	# of People	Cost of registration per person	Surveillance Budget	Prevention Budget	Total
Registration	2	\$1,175/pp	\$1,175	\$1,175	\$2,350

**I. TOTAL DIRECT COSTS****TOTAL: \$2,219,212**

Sum of Section A through H.

**J. INDIRECT COSTS****TOTAL: \$503,723**

<b>TOTAL INDIRECT COSTS</b>	<b>Surveillance</b>	<b>Prevention</b>	<b>Total</b>
	\$224,748	\$278,975	\$503,723

The Vermont Department of Health uses a Cost Allocation Plan rather than 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 the most 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, these costs will vary from quarter to quarter and cannot be fixed as a rate. **Based on costs allocated to similar programs during recent quarters, we would currently estimate these allocated costs at 77% of the direct salary line item.**

**K. TOTAL COST****TOTAL: \$2,722,934**

Sum of Sections I and J.

**L. COST ALLOCATION**

<b>Budget Category</b>	<b>Surveillance (Strategies 1-3)</b>	<b>Prevention (Strategies 6-9)</b>	<b>Total Budget (excluding Strategies 4 &amp; 5)</b>
<b>Salary</b>	\$257,457	\$396,728	\$654,185
<b>Fringe Benefits</b>	\$163,373	\$205,871	\$369,244
<b>Travel</b>	\$7,804	\$9,275	\$17,079
<b>Supplies</b>	\$6,000	\$10,353	\$16,353
<b>Contractual</b>	\$90,000	\$1,070,000	\$1,160,000
<b>Other</b>	\$1,175	\$1,175	\$2,350
<b>Total Direct Budget</b>	\$525,809	\$1,693,402	\$2,219,211
<b>Indirect</b>	\$224,748	\$278,975	\$503,723
<b>Total Budget</b>	\$750,557	\$1,972,377	\$2,722,934



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)**

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**

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**

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**

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

**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

**29. Grants Management Officer - Signature**

Stephanie 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.	<b>TOTAL.....</b>	<b>\$295,000</b>

**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><u>In state travel- 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><b>\$982</b></p>
<p><u>Out of state travel- 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 <span style="float: right;">\$1,956</span></p> <p>Airfare: 6 staff x \$700 <span style="float: right;">\$4,200</span></p> <p>Per Diem: @ \$74.00 per day per staff <span style="float: right;">\$1,332</span></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><b>\$8573</b></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.

<b>K. TOTAL</b>	<b>\$295,000</b>
-----------------	------------------



## Request for Classification Review Position Description Form A

### For Department of Personnel Use Only

Notice of Action # _____ 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: _____ Accountability: _____ Working Conditions: _____ Total: _____	Date Received (Stamp)
---	-----------------------

#### Incumbent Information:

Employee Name:  Employee Number:   
 Position Number:  Current Job/Class Title:   
 Agency/Department/Unit:  Work Station:  Zip Code:   
 Supervisor's Name, Title, and Phone Number:   
 How should the notification to the employee be sent:  employee's work location  or  other address, please provide mailing address:

#### New Position/Vacant Position Information:

New Position Authorization:  Request Job/Class Title:   
 Position Type:  Permanent or  Limited / Funding Source:  Core,  Partnership, or  Sponsored  
 Vacant Position Number:  Current Job/Class Title:   
 Agency/Department/Unit:  Work Station:  Zip Code:   
 Supervisor's Name, Title and Phone Number:

#### Type of Request:

- Management:** A management request to review the classification of an existing position, class, or create a new job class.
- Employee:** An employee's request to review the classification of his/her current position.

## 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.*

This new position is a result of the new Overdose Data to Action in States (OD2A-S) grant program which included as a requirement one full time evaluator position. This grant will provide funding for this position for the duration of the cycle, September 1, 2023 through August 31, 2028.

### Job Duty #1: Evaluation

Responsible for development, integration and maintenance of evaluation data related to the OD2A-S grant program, including the CDC-mandated Targeted Evaluation Project (TEP) of navigator activities. Assure that programs have been implemented consistent with the plan and that they are effective and efficient. Identify issues and corrective actions.

- Write evaluation components of OD2A-S grant reporting submitted by the state and act as the lead evaluator for OD2A-S grant.
- Write requests for proposal/information (RFP/RFI) to solicit applications for evaluation contractors/grantees, oversee the review process, and write grant deliverable requirements in evaluation grants and contracts for evaluation services.
- Manage all aspects of evaluation/grant contracts and contractors including drafting the contract and coordinating activities between the contractor, DSU and other stakeholders. Assure that providers meet grant/contract deliverables and comply with state and federal grant requirements.
- Prepare program and process evaluations following these steps: engage stakeholders, describe the program, focus the design of the evaluation, gather credible evidence, draw and justify conclusions, present findings and ensure use of these findings. Complete the public health evaluation activities described in detail in this document: <https://www.cdc.gov/eval/guide/CDCEvalManual.pdf>
- Schedule and lead stakeholder meetings to inform the evaluation.
- Identify and assess evaluation options available. Use qualitative, quantitative, and other methods in the design. Research options and past and current program evaluations.
- Determine existing data sources available, additional data needed, and develop tools for collecting data needed to complete evaluations.

- Coordinate evaluation and analysis activities with VDH Health Surveillance and Informatics on behalf of DSU.
- Write evaluation plans which summarize all steps and timing of the evaluation process.
- Write reports and disseminate evaluation findings to stakeholders.
- Provide technical assistance and training to division staff in the areas of evaluation, data retrieval, preparation, analysis, and application of quantitative management techniques.
- Prioritize information requests, and in cooperation with the other DSU personnel, determine the most efficient and effective ways to provide information within resource constraints.

#### Major Duty #2: Performance Management and Program Monitoring

Assure that evaluation information is accurate, complete, timely, and used to monitor and improve services and OD2A-S overall strategies.

- Synthesize data to identify anomalies and take corrective action to improve projects.
- Create, administer, and monitor provider surveys to identify opportunities for improvements to DSU evaluation systems and assess readiness to comply with future initiatives.
- Lead and participate in meetings and workgroups to improve service and data quality as well as associated processes.
- Participate on Agency Improvement Model teams to improve DSU processes.
- Ensure that evaluation data is sufficient, accurate, and received on time to comply with the reporting requirements of the funders as well as internal and external stakeholders.
- Support grant managers by providing data and information to be reviewed with providers at site visits to assure that providers are meeting the deliverables of the grants.

#### Major Duty #3: General Responsibilities

- Act as back up to other DSU Units as needed to support the overall goals and responsibilities of DSU and VDH.
- Support the goals of the Performance Management and Evaluation Unit.
- Provide prompt and accurate preparation or review of written reports and documents.
- Provide data to VDH and DSU staff to allow completion of all grant application reporting.
- Other duties as assigned. Other duties as assigned.

## 2. Key Contacts

This question deals with the personal contacts and interactions that occur in this job. Provide brief typical examples indicating your primary contacts (**not** an exhaustive or all-inclusive list of contacts) other than those persons to whom you report or who report to you. If you work as part of a team, or if your primary contacts are with other agencies or groups outside State government describe those interactions, and what your role is. For example: you may *collaborate, monitor, guide, or facilitate change*.

DSU: Lead and participate in meetings with the DSU Directors, OD2A Program Manager, and other staff working on OD2A-S projects. Provide technical assistance and supporting

data to drive decisions that impact the strategic direction.

VDH: Work with the Business Office around grant application and reporting processes as well as associated budgeting, monitoring, and planning. Collaborate with Health Surveillance and Informatics to develop evaluation plans and data analysis. Support other units that are working on OD2A-S projects including DEPRIP and FCH. Complete contract and grant reviews with the Assistant Attorney General. Summarized findings for VDH Public Affairs for inclusion in publications for media, the legislature, high level policy makers and the general public.

Federal Funders and Other State Evaluators: Primary contact for evaluation activities associated with OD2A-S grant. Participate in multi-state evaluation activities.

External stakeholders: Lead and participate in meetings with, provide technical assistance, quality reporting, data summaries and procedures to, and solicit information from, DSU treatment and prevention provider program directors, CFOs, information technology staff, Recovery Center Directors, and directors of support organizations such as the Recovery Network, and the Vermont Association of Mental Health. Participate in federal site visits with funders such as requested. Work with external IT vendors

### 3. Are there licensing, registration, or certification requirements; or special or unusual skills necessary to perform this job?

Include any special licenses, registrations, certifications, skills; (such as counseling, engineering, computer programming, graphic design, strategic planning, keyboarding) including skills with specific equipment, tools, technology, etc. (such as mainframe computers, power tools, trucks, road equipment, specific software packages). Be specific, if you must be able to drive a commercial vehicle, or must know Visual Basic, indicate so.

Knowledge of Program Evaluation procedures

- Development of evaluation plans, including defining the question to be answered, identifying stakeholders, defining evaluation questions, developing logic models, evaluation design, data collection requirements, data analysis and interpretation, reporting, and follow up.

Leadership and Management Requirements

- Ability to coordinate the needs of DSU and other VDH divisions (HSI, DEPRIP, FCH) to implement shared projects and processes.
- Ability to lead groups to determine evaluation goals
- Strong ability to communicate in writing for internal and external stakeholders.

Knowledge of healthcare data systems and coding

- Knowledge of Health Insurance Portability and Accountability Act (HIPAA) and 42CFR requirements around client confidentiality and use of private health information.

Knowledge of software, data, database structure, and querying systems

- Requires very strong Microsoft Office Suite computer skills including Microsoft Word, Excel, Access, Outlook, Power BI, and PowerPoint.

- Ability to develop, maintain, and use databases to collect data, monitor quality assurance, quality improvement and business functions.
- Ability to develop and implement surveys then analyze, assess and present the results, sometimes using a data collection tool such as Survey Gizmo, sometimes using paper systems.
- Comprehensive and thorough knowledge of statistics and research principles and practices.

Knowledge of quality assurance and improvement principles and practices.

- Ability to develop appropriate provider-level quality and performance improvement measures which are tied to the long-term population-level goals and strategies of the Division, VDH, and AHS.
- Ability to query complex data systems in creative ways in order to develop reports used to set quality measure baselines and assess provider progress against the baseline over time
- Ability to synthesize a wide variety of data and to develop trend analyses based on it.
- Ability to coordinate quality improvement measures with other State programs such as Blueprint for Health, Division of Health Access, Dept. of Mental Health, etc.

#### 4. Do you supervise?

In this question "supervise" means if you direct the work of others where you are held **directly** responsible for assigning work; performance ratings; training; reward and discipline or effectively recommend such action; and other personnel matters. List the names, titles, and position numbers of the classified employees reporting to you:

N/A

#### 5. In what way does your supervisor provide you with work assignments and review your work?

This question deals with how you are supervised. Explain how you receive work assignments, how priorities are determined, and how your work is reviewed. There are a wide variety of ways a job can be supervised, so there may not be just one answer to this question. For example, some aspects of your work may be reviewed on a regular basis and in others you may operate within general guidelines with much independence in determining how you accomplish tasks.

This position requires significant self-direction and prioritization. Assignments may be made by the Overdose Data to Action Program Manager verbally or in writing and is evaluated through monthly face-to-face "Check In" meetings and on an as needed basis. In addition, weekly face-to-face "Unit" meetings are another forum in which the quality of work being done and is evaluated.

The person in the position is largely responsible for setting work priorities. Priorities are determined based on factors such as federal evaluation and reporting requirements, business continuity, information needs of partners, and current DSU strategic priorities. Highest priority activities are around assuring that DSU is meeting the evaluation requirements of the federal demonstration grants. That may require the development of grants and contracts that are consistent with the strategic initiatives, funding priorities, quality assurance and quality improvement activities, and legal requirements of the division,

department, and state. Requests of outside partners, such as the legislature, CDC, the National Association of State Alcohol/Drug Abuse Directors (NASADAD), media, grantees, other state agencies, etc. are prioritized as needed. The effectiveness of this position is assessed through successful and timely completion of evaluations consistent with the evaluation plans that were developed, stakeholder feedback, federal response to evaluation results, and uptake of evaluation recommendations as a result of data dissemination and training.

## 6. Mental Effort

This section addresses the mental demands associated with this job. Describe the most mentally challenging part of your job or the most difficult typical problems you are expected to solve. Be sure to give a specific response and describe the situation(s) by example.

- For example, a purchasing clerk might respond: *In pricing purchase orders, I frequently must find the cost of materials not listed in the pricing guides. This involves locating vendors or other sources of pricing information for a great variety of materials.*
- Or, a systems developer might say: *Understanding the ways in which a database or program will be used, and what the users must accomplish and then developing a system to meet their needs, often with limited time and resources.*

The most challenging part of this job is coordinating the work with stakeholders. Some stakeholders do not receive funding to do the work which requires diplomacy and skill in convincing people that completing the work will be advantageous to them. Another challenge is that grant reporting timing is such that work load may fluctuate leading to high workloads on a periodic basis. Goals and priorities are constantly evolving, and it is often found that they conflict with one another, at the federal, state, agency, department, and division levels that must be evaluated and prioritized. Decisions must be made in conjunction with the Overdose Data to Action Program Manager as well as internal and external stakeholders, some of whom are negatively impacted by the decisions. The programs supported by this position must meet all the legal requirements of the funding sources and State, and any grantee/contractor must use the funds for the services defined in the grants and contracts.

## 7. Accountability

This section evaluates the job's expected results. In weighing the importance of results, consideration should be given to responsibility for the safety and well-being of people, protection of confidential information and protection of resources.

What is needed here is information not already presented about the job's scope of responsibility. What is the job's most significant influence upon the organization, or in what way does the job contribute to the organization's mission?

Provide annualized dollar figures if it makes sense to do so, explaining what the amount(s) represent.

For example:

- A social worker might respond: *To promote permanence for children through coordination and delivery of services;*
- A financial officer might state: *Overseeing preparation and ongoing management of division budget: \$2M Operating/Personal Services, \$1.5M Federal Grants.*

This position evaluates OD2A-S programming of approximately \$3 million/year. Results of this work impacts the services funded and the allocation of current and future funding and must be done in a manner consistent with the strategic initiatives of the federal funder and the division, department, and state and in compliance with state and federal requirements.

The ability to simply and clearly communicate complex information is essential. This position is responsible for writing reports and presenting information to internal and external stakeholders and funders.

This position may also work with HIPAA and 42 CFR Part 2 protected client level claims and treatment data.

## 8. Working Conditions

The intent of this question is to describe any adverse conditions that are routine and expected in your job. It is not to identify special situations such as overcrowded conditions or understaffing.

- a) What significant mental stress are you exposed to? All jobs contain some amount of stress. If your job stands out as having a significant degree of mental or emotional pressure or tension associated with it, this should be described.

Type	How Much of the Time?
Mental Stress	40%
Deadline pressures	40%

- b) What hazards, special conditions or discomfort are you exposed to? (Clarification of terms: **hazards** include such things as potential accidents, illness, chronic health conditions or other harm. Typical examples might involve exposure to dangerous persons, including potentially violent customers and clients, fumes, toxic waste, contaminated materials, vehicle accident, disease, cuts, falls, etc.; and **discomfort** includes exposure to such things as cold, dirt, dust, rain or snow, heat, etc.)

Type	How Much of the Time?
N/A	

- c) What weights do you lift; how much do they weigh and how much time per day/week do you spend lifting?

Type	How Heavy?	How Much of the Time?
Office Materials (books, binders, paper, etc.)	10 lbs	<5%

- d) What working positions (sitting, standing, bending, reaching) or types of effort (hiking, walking, driving) are required?

Type	How Much of the Time?
Sitting/Standing/Walking/Typing/Bending/Reaching	>90%
Driving	<10%

**Additional Information:**

Carefully review your job description responses so far. If there is anything that you feel is important in understanding your job that you haven't clearly described, use this space for that purpose. Perhaps your job has some unique aspects or characteristics that weren't brought out by your answers to the previous questions. In this space, add any additional comments that you feel will add to a clear understanding of the requirements of your job.

Employee's Signature (**required**): \_\_\_\_\_ Date: \_\_\_\_\_



**Supervisor's Section:**

Carefully review this completed job description, but **do not** alter or eliminate any portion of the original response. Please answer the questions listed below.

1. What do you consider the most important duties of this job and why?

This is a new position and RFR was written by the person supervising the position so this is N/A

2. What do you consider the most important knowledge, skills, and abilities of an employee in this job (not necessarily the qualifications of the present employee) and why?

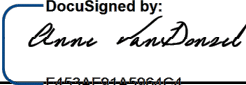
See above

3. Comment on the accuracy and completeness of the responses by the employee. List below any missing items and/or differences where appropriate.

See above

4. Suggested Title and/or Pay Grade:

Substance Use Program Evaluator - Paygrade 25.

Supervisor's Signature (required):  Date: 9/11/2023

**Personnel Administrator's Section:**

Please complete any missing information on the front page of this form before submitting it for review.

Are there other changes to this position, for example: Change of supervisor, GUC, work station?

Yes  No If yes, please provide detailed information.

Attachments:

Organizational charts are **required** and must indicate where the position reports.

Draft job specification is **required** for proposed new job classes.

Will this change affect other positions within the organization? If so, describe how, (for example, have duties been shifted within the unit requiring review of other positions; or are there other issues relevant to the classification review process).

Suggested Title and/or Pay Grade:

[Empty text box for suggested title and/or pay grade]

Personnel Administrator's Signature (required):

DocuSigned by:  
*Kate Minall*  
5E986845FB574DB...

Date: 9/12/2023

**Appointing Authority's Section:**

Please review this completed job description but **do not alter** or eliminate any of the entries. Add any clarifying information and/or additional comments (if necessary) in the space below.

[Empty text box for clarifying information and/or additional comments]

Suggested Title and/or Pay Grade:

[Empty text box for suggested title and/or pay grade]

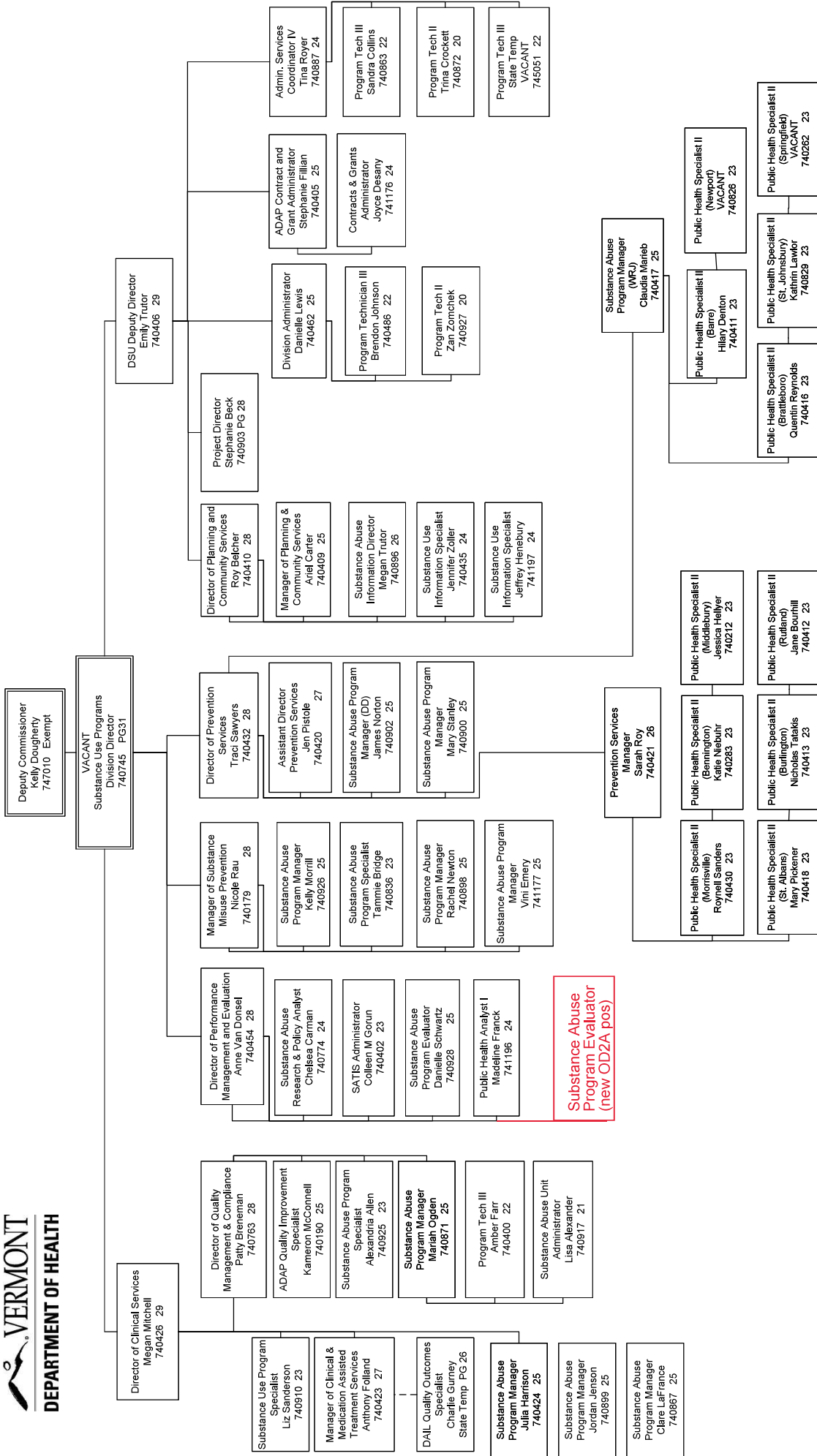
DocuSigned by:  
*Kelly Daugherty*  
FOCF87D7DFD1420...

9/11/2023

Appointing Authority or Authorized Representative Signature (required)

Date

# Division of Substance Use Programs (DSU) – September 2023



**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: _____ Accountability: _____		
Working Conditions: _____ Total: _____		

**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:

Build, maintain and lead community partnerships with goal of identifying and addressing public health needs, including coordination of Vermont's Maternal Mortality Review Panel and community response teams (perinatal substance use).

Organize, and lead the implementation of work plans of federal (CDC) grant funded projects and prepare required progress reports.

Develop and administer subgrants to community partners to carry out public health interventions.

Collect and organize data for needs analysis, program reporting and program evaluation.

Participates in the establishment and operation of quality assurance procedures, including the monitoring of results. Design, plan and/or implement needs analysis, program reporting and program evaluation.

Serves as a subject matter expert in perinatal substance use and mental health.

Represents the Department and Division at local, regional, and national meetings and conferences.

Assists with the development or updating of protocols, manuals, databases, and records.

Designs or assists with the development and presentation of training materials and educational programs.

Duties include a substantial understanding and maintenance of the financial aspects of the program. Maintains internal control systems and directs the input of financial data into multiple computerized systems.

Responsible for complex and diverse program components including reviewing records and reports submitted by program participants or agency staff for compliance with legal, regulatory or policy standards.

Responds to programmatic inquiries from the public, governmental officials, or other jurisdictions.

Will be trained and prepared to carry out assigned roles in public health emergency response.

Performs related duties as necessary.

2. Provide a brief justification/explanation of this request: Vermont is the recipient of two federal CDC awards: Maternal Morality Review Panel (MMRP) and Overdose Data to Action. Funded by both, this position will focus on coordinating Vermont's legislatively required MMRP, as well as developing and implementing recommendations to prevent maternal mortality and improve the system of care for pregnant and parenting individuals, especially as it relates to substance use and mental health.

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). No.

**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: Ilisa Stalberg

6. Who should be contacted if there are questions about this position (provide name and phone number): Ilisa Stalberg

7. How many other positions are allocated to the requested class title in the department: 45

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.) N/A

**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  
577C7FA8685D4E3...

8/9/2023

Personnel Administrator's Signature (required)\*

Date

**Ilisa Stalberg** Digitally signed by Ilisa Stalberg  
Date: 2023.08.08 14:53:00 -04'00'

Supervisor's Signature (required)\*

Date

DocuSigned by:

*Kelly Daugherty*

F0CF87D7DFD1420...

8/9/2023

---

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

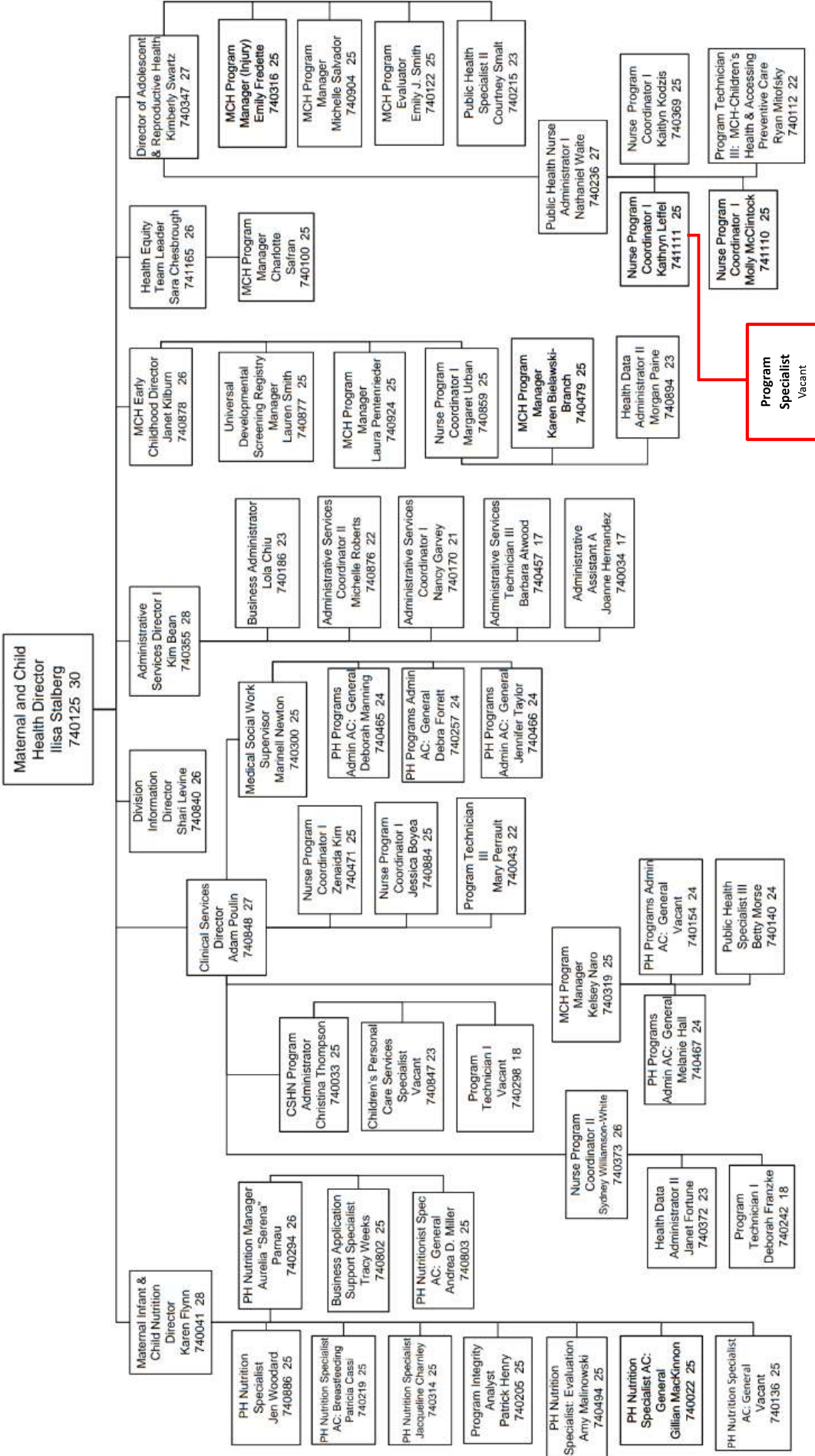
---

Date

\* Note: Attach additional information or comments if appropriate.

# Division of Family and Child Health

July 1, 2023





## Request for Classification Review Position Description Form A

### For Department of Personnel Use Only

Notice of Action # _____ 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 _____ Comments: _____  Willis Rating/Components:    Knowledge & Skills: _____    Mental Demands: _____    Accountability: _____ Working Conditions: _____    Total: _____	Date Received (Stamp)          Effective Date: _____  Date Processed: _____
---	---

**Incumbent Information:**

Employee Name:  Employee Number:   
 Position Number:  Current Job/Class Title:   
 Agency/Department/Unit:  Work Station:  Zip Code:   
 Supervisor's Name, Title, and Phone Number:   
 How should the notification to the employee be sent:  employee's work location  or  other address, please provide mailing address:

**New Position/Vacant Position Information:**

New Position Authorization:  Request Job/Class Title:   
 Position Type:  Permanent or  Limited / Funding Source:  Core,  Partnership, or  Sponsored  
 Vacant Position Number:  Current Job/Class Title:   
 Agency/Department/Unit:  Work Station:  Zip Code:   
 Supervisor's Name, Title and Phone Number:

**Type of Request:**

- Management:** A management request to review the classification of an existing position, class, or create a new job class.
- Employee:** An employee's request to review the classification of his/her current position.

## 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.*

Overview: The Office of the Chief Medical Examiner investigates sudden, violent, and unexpected deaths. The sudden loss of a close relation initiates a complex grief experience that is compounded by a lack of access to support services and information. A social worker-medical examiner collaboration allows us to reach this vulnerable population, potentially impacting their grief process and future mental health, while aiding the death investigation process and acquisition of public health data. Addition of a Family Services Specialist (FSS) to the OCME will allow Vermont to deliver the highest quality of care and compassion to decedent's families. The FSS will be responsible for providing initial outreach and continued support to families of decedent's investigated by the Office of the Chief Medical Examiner (focusing on unnatural and unexplained deaths), for the purposes of determining their information and services needs (e.g. bereavement support, crisis intervention), assisting them with establishing those services as able, and performing a detailed interview to gather additional insight into injury factors and social determinants of health that can inform local, state, and federal public health initiatives and policies.

### I. Directly Support Decedent's Family by Determining the Type of Information and Services Needed

A). Contact family members and/or respond to their inquiries, shortly after the death (day/days) and again weeks/months later, serving as their continued point of contact for general information following the initial scene investigation.

1). Work collaboratively with Medicolegal Death Investigators and Law Enforcement to establish contact (either by phone, email, or mail) with families of OCME decedents after death notification has been made.

2). Assist with answering in-coming calls to the OCME during regular business hours to identify families that need a higher level of support. Triage questions related to OCME process and disposition of remains, working closely with the OCME Medical Records Specialist regarding requests for records and Autopsy Technicians regarding remains release.

3). Offer condolences on behalf of OCME, explain the official function and capacity of the OCME, explain the necessity for and process of postmortem examination, inform the family of factors that may impact their choice for viewing, and answer general questions about next steps or case status.

4). Assist with identification of legal next of kin to inform process for information sharing.

5). Assist next of kin by notifying them of remains release, examination status, death

certification/amendment, case completion, and report release when requested.

6). Assist with developing informational, educational, or outreach materials (e.g., written or web-based) to fulfill the goals of this position.

B). Determine what type of services families need, deliver service as able, or assist them with finding specialized services.

1). Establish a rapport with families that facilitates healthy bereavement and information exchanged and link them with community or professional services

2). Develop and maintain excellent working relationships and coordinate with the state victim services specialists, local hospital social workers/decedent affairs specialists, and local funeral directors to meet the family's needs.

3). Consider their needs for services including but not limited to: Education about OCME procedures, funeral/cremation arrangements, and other disposition processes; Grief and trauma support; Connections with tissue donation services or research groups; Information regarding services for scene clean-up and pet placement; Referrals for other special needs such as crime victim services, survivor support groups, and economic services for decedent disposition, etc.

II. Assist the OCME in gathering additional insight into the behavioral, psychological, or environmental factors contributing to the decedent's injury and their social determinants of health (e.g., socio-economic status, education, employment, transportation, personal safety, food insecurity, housing and basic amenities, social inclusion, access to health services, etc).

A. Identify survivors interested in and willing to participate in additional conversation and data gathering, meeting with them in person, at an agreed upon time and location, weeks to months after the death (some travel required).

B. Identify and/or design screening tools and interview content and procedures for various types of fatalities to supplement the OCME's Medicolegal Death Investigation data used by local, state, and federal initiatives, including but not limited to injury and violence prevention grants and programs, state Fatality Review Teams, or other entities as approved by the Chief Medical Examiner.

C). Perform detailed interviews with engaged survivors following deaths of unnatural manner and undetermined cause (e.g., suicide, overdose, domestic violence-related, maternal and child fatalities) and participate in use of these data for public health initiatives

III. Stay current in and apply the practical knowledge of the theories, practices, and methodologies of trauma-informed care, bereavement support, psychological autopsy, and assessment of social determinants of health.

## 2. Key Contacts

This question deals with the personal contacts and interactions that occur in this job. Provide brief typical examples indicating your primary contacts (**not** an exhaustive or all-inclusive list of contacts) other than those persons to whom you report or who report to you. If you work as part of a team, or if your primary contacts are with other agencies or groups outside State government describe those interactions, and what your role is. For example: you may *collaborate, monitor, guide, or facilitate change*.

Communicate directly with families impacted by OCME investigations. Work in close communication with OCME Medicolegal Death Investigators and office staff and local and state law enforcement agents. Contact community resources and service providers in

partnership with families including but not limited to funeral directors, bereavement support, crisis intervention, victim services, and organ and tissue procurement organizations. Collaborate with Department of Children and Families, law enforcement, State's Attorney and Attorney General's Office victim services specialists.

### 3. Are there licensing, registration, or certification requirements; or special or unusual skills necessary to perform this job?

Include any special licenses, registrations, certifications, skills; (such as counseling, engineering, computer programming, graphic design, strategic planning, keyboarding) including skills with specific equipment, tools, technology, etc. (such as mainframe computers, power tools, trucks, road equipment, specific software packages). Be specific, if you must be able to drive a commercial vehicle, or must know Visual Basic, indicate so.

This position requires strong inter-personal skills and a high level of clinical knowledge regarding trauma, traumatic responses, grief responses, and techniques that mitigate trauma and crisis. An understanding of medicolegal and police investigation procedures and HIPAA compliance is important. A bachelor's or master's degree in a field related to human services and experience working with people experiencing acute trauma, grief, or bereavement are required.

### 4. Do you supervise?

In this question "supervise" means if you direct the work of others where you are held **directly** responsible for assigning work; performance ratings; training; reward and discipline or effectively recommend such action; and other personnel matters. List the names, titles, and position numbers of the classified employees reporting to you:

No

### 5. In what way does your supervisor provide you with work assignments and review your work?

This question deals with how you are supervised. Explain how you receive work assignments, how priorities are determined, and how your work is reviewed. There are a wide variety of ways a job can be supervised, so there may not be just one answer to this question. For example, some aspects of your work may be reviewed on a regular basis and in others you may operate within general guidelines with much independence in determining how you accomplish tasks.

Work is assigned and supervised by the AME Coordinator (direct supervisor) and/or Chief Medical Examiner based on OCME investigations, with priority given to cases of unnatural or undetermined cause of death. Additional special projects may be assigned. Assignments will include both specific instruction and general guidelines, with much independence for the form and timing of family interactions. There will be considerable latitude for independent judgment and clinical activities. Communications will be monitored regularly using a communications log in the OCME's case database. Feedback on performance from OCME staff, families, and contacts from external service partners will be considered.

### 6. Mental Effort

This section addresses the mental demands associated with this job. Describe the most mentally challenging part of your job or the most difficult typical problems you are expected to solve. Be sure to give a specific response and describe the situation(s) by example.

- For example, a purchasing clerk might respond: *In pricing purchase orders, I frequently must find the cost of materials not listed in the pricing guides. This involves locating vendors or other sources of pricing information for a great variety of materials.*
- Or, a systems developer might say: *Understanding the ways in which a database or program will be used, and what the users must accomplish and then developing a system to meet their needs, often with limited time and resources.*

The OCME conducts over 2000 investigations and over 500 postmortem examinations annually, resulting in an average of 36 phone calls from families and stakeholders daily. The Family Services Specialist (FSS) will regularly communicate with and support families experiencing grief and trauma, both remotely and in person. The volume of investigations challenges the FSS to work simultaneously with many families. Interacting with and problem solving for family members that are crying, demanding, distraught, and angry is the most stressful and mentally/emotionally demanding aspect of this work. Daily exposure to stories and images of tragedy and trauma is emotionally challenging. Understanding and communicating information about complex processes such as death investigation and HIPAA restrictions requires concentration and consistency.

## 7. Accountability

This section evaluates the job's expected results. In weighing the importance of results, consideration should be given to responsibility for the safety and well-being of people, protection of confidential information and protection of resources.

What is needed here is information not already presented about the job's scope of responsibility. What is the job's most significant influence upon the organization, or in what way does the job contribute to the organization's mission?

Provide annualized dollar figures if it makes sense to do so, explaining what the amount(s) represent.

For example:

- A social worker might respond: *To promote permanence for children through coordination and delivery of services;*
- A financial officer might state: *Overseeing preparation and ongoing management of division budget: \$2M Operating/Personal Services, \$1.5M Federal Grants.*

To mitigate the negative effects of a medicolegal investigation for families of decedents, thereby reducing their risk for a complex grief response and/or lasting emotional distress.

To improve support for families while enabling OCME administrative and medical staff to work more efficiently towards case completions.

To establish a relationship with families and engage them in efforts to better understand unnatural deaths from a public health and injury prevention perspective, assisting the Dept of Health in satisfying some grant deliverables and developing public health programs and policies.

## 8. Working Conditions

The intent of this question is to describe any adverse conditions that are routine and expected in your job. It is not to identify special situations such as overcrowded conditions or understaffing.

- a) What significant mental stress are you exposed to? All jobs contain some amount of stress. If your job stands out as having a significant degree of mental or emotional pressure or tension associated with it, this should be described.

Type	How Much of the Time?
Interacting with and solving problems for emotionally distraught people, including persons with acute and chronic grief	daily
Exposure to case reports and images for violent and tragic deaths, or deaths of familiar individuals	daily
Trying to assist people with processes you have no control over	daily

- b) What hazards, special conditions or discomfort are you exposed to? (Clarification of terms: **hazards** include such things as potential accidents, illness, chronic health conditions or other harm. Typical examples might involve exposure to dangerous persons, including potentially violent customers and clients, fumes, toxic waste, contaminated materials, vehicle accident, disease, cuts, falls, etc.; and **discomfort** includes exposure to such things as cold, dirt, dust, rain or snow, heat, etc.)

Type	How Much of the Time?
Discomfort of exposure to unpleasant smells (decomposing bodies) and graphic images (scenes and autopsy photos)	Daily
Exposure to clients whose potential for violence is unknown	Rare

- c) What weights do you lift; how much do they weigh and how much time per day/week do you spend lifting?

Type	How Heavy?	How Much of the Time?
Not anticipated		

- d) What working positions (sitting, standing, bending, reaching) or types of effort (hiking, walking, driving) are required?

Type	How Much of the Time?
Sitting at a desk/phone for prolonged periods	8 hours/day
Driving to meet with a family member	Occassional travel

#### Additional Information:

Carefully review your job description responses so far. If there is anything that you feel is important in understanding your job that you haven't clearly described, use this space for that purpose. Perhaps your job has some unique aspects or characteristics that weren't brought out by your answers to the previous questions. In this space, add any additional comments that you feel will add to a clear understanding of the requirements of your job.

The FSS position requires the following knowledge, skills, and abilities:

- Knowledge of trauma and grief symptoms/responses and impacts on individuals and families
- Knowledge of bereavement support techniques
- Knowledge of community, local, and state resources for bereavement support and crisis intervention
- Knowledge of community, local, and state resources for funerary services and economic support for disposition
- Knowledge of HIPAA restrictions on information sharing and local statutes regarding death investigation and disposition of remains
- Ability to interview, speak and write effectively, and explain things clearly, both in person and in a remote environment, and under stressful circumstances.
- Ability to build relationships and rapport quickly using skilled communication
- Skilled mitigation of crisis or trauma through active listening and de-escalation
- Ability to empathize with a suffering or grieving person
- Experience helping people work through crisis, including circumstances of acute loss and violence
- Experience advocating in complex legal and municipal systems
- Skilled management of sensitive and confidential information
- Skilled at educating families and other professionals about grief and crisis
- Ability to respect ethnicity, culture, values, religion, socioeconomic status, and health-related beliefs

Employee's Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_

**Supervisor's Section:**

Carefully review this completed job description, but **do not** alter or eliminate any portion of the original response. Please answer the questions listed below.

1. What do you consider the most important duties of this job and why?

Directly contacting families to give/gather information and link them to support services, to mitigate the negative effects of a medicolegal investigation for families of decedents, thereby reducing their risk for a complex grief response and/or lasting emotional distress.

To improve support for families while enabling OCME administrative and medical staff to work more efficiently towards case completions.

To establish a relationship with families and engage them in efforts to better understand unnatural deaths from a public health and injury prevention perspective, assisting the Dept of Health in satisfying some grant deliverables and developing public health programs and policies.

2. What do you consider the most important knowledge, skills, and abilities of an employee in this job (not necessarily the qualifications of the present employee) and why?

In order to fulfill the most important duties described above, the person will need: Knowledge of trauma and grief symptoms/responses and impacts on individuals and families; Knowledge of local resources for support; Ability to interview, speak and write effectively, and explain things clearly both in person and remotely, and in stressful circumstances

3. Comment on the accuracy and completeness of the responses by the employee. List below any missing items and/or differences where appropriate.

4. Suggested Title and/or Pay Grade:

Family Services Specialist PG 25

Supervisor's Signature (required):  Date: 9/27/23

**Personnel Administrator's Section:**

*Please complete any missing information on the front page of this form before submitting it for review.*

Are there other changes to this position, for example: Change of supervisor, GUC, work station?

Yes  No If yes, please provide detailed information.

Attachments:



- Organizational charts are **required** and must indicate where the position reports.
- Draft job specification is **required** for proposed new job classes.

Will this change affect other positions within the organization? If so, describe how, (for example, have duties been shifted within the unit requiring review of other positions; or are there other issues relevant to the classification review process).

N/A

Suggested Title and/or Pay Grade:

To be determined by Classification

Personnel Administrator's Signature (**required**): DocuSigned by:  
*Trishia Brooks*  
577C7EA8685D4E3 Date: 9/28/2023

**Appointing Authority's Section:**

Please review this completed job description but **do not alter** or eliminate any of the entries. Add any clarifying information and/or additional comments (if necessary) in the space below.

n/a

Suggested Title and/or Pay Grade:

n/a

Appointing Authority or Authorized Representative Signature (**required**): DocuSigned by:  
*Julie Aral*  
B4F263BC82A5444... 10/3/2023  
Date



# Office of the Chief Medical Examiner September 2023

