



REQUEST FOR BOARD ACTION

ITEM NO. 10.

DATE OF MEETING: October 3, 2011

REQUESTED BY: Carolyn Moser, Health Director, Pender County Health Department

SHORT TITLE: Resolution Amending the Pender County Pay & Classification Plan

BACKGROUND: The Pender County Board of Health recommended changing employees in the dental program from contract to permanent health department employees. Contract staff has been isolated from many department policies and expectations and created some organizational difficulties and conflicts. The current situation has the potential to negatively impact the department revenue base. Employees can provide for the services more effectively and maximize the provision of services to citizens.

This request is to add a Dental Hygienist II position and Dental Office Manager to the county pay and classification plan.

The new Dental Hygienist II position is recommended at a salary grade of 68 (\$42,402 – 67,844). The Dental Office Manager will be classified as a Processing Assistant IV at a salary grade of 57 (\$24,792 - \$39,667).

Funds have been budgeted in the FY 11-12 health department budget to support these positions.

SPECIFIC ACTION REQUESTED: To consider a resolution amending the Pender County Pay & Classification Plan to add a Dental Hygienist II at a grade 68 and a Dental Office Manager (as a Processing Assistant IV position) at a grade 57.

STATE OF NORTH CAROLINA
OFFICE OF STATE PERSONNEL
POSITION DESCRIPTION FORM (PD-102R)

APPROVED CLASSIFICATION:

EFFECTIVE DATE:

ANALYST:

(This Space for Personnel Department Use Only)

<p>1. Present Classification Title of Position: Dental Hygienist II</p>	<p>7 Present 15 Digit Position Number:</p>	<p>Proposed 15 Digit Position Number:</p>
<p>2. Usual Working Title of Position: Dental Hygienist II</p>	<p>8. Department, University, Commission, or Agency Pender County Health Department</p>	
<p>3. Requested Classification of Position: Dental Hygienist II</p>	<p>A. Institution & Division: Pender County Health Department</p>	
<p>4. Name of Immediate Supervisor: Dr. Prasad Vasamsetti</p>	<p>10. Section and Unit: Dental Clinic</p>	
<p>5. Supervisor's Position, Title & Position Number: Dentist</p>	<p>11. Street Address, City and County: 803 South Walker Street; Burgaw; Pender</p>	
<p>6. Name of Employee:</p>	<p>12. Location of Workplace, Building and Room Number: 803 South Walker Street Burgaw, NC 28425</p>	

I. A. Primary Purpose of Organizational Unit:

The Pender County Health Department is a tax supported health agency. It is concerned with all the health problems affecting the residents of Pender County. The Health Department's director and the local Board of Health are responsible for organizing and administering the Health Department.

1. to protect its county from disease
2. to detect disease and abnormalities in early stages
3. to lessen the ill effects of disease
4. to promote health
5. to provide a safe and healthful environment
6. to keep the community informed about health matters.

B. Primary Purpose of Position:

The primary purpose of this position is to provide technical dental work in examining, cleaning, and instructing on the general care of the teeth, working under the supervision of a licensed dentist.

C. Work Schedule

Monday-Friday, 8:00 a.m. to 5:00 p.m.

D. Change in Responsibilities or Organizational Relationship:

Contract position to permanent health department employee

II. A. DESCRIPTION OF RESPONSIBILITIES AND DUTIES; Method Used:

Order of importance

Sequential order

80% Direct Patient Care

- seats and prepares patients for procedures
- takes complete and accurate medical histories
- makes sure medical history is reviewed and report findings to the dentist
- take vital signs as necessary
- make sure proper informed consents have been discussed with and signed by patients before procedure(s) is started
- assists in the oral health management of all patients
- obtains baseline oral hygiene data on all patients based on accepted principles of periodontal care
- monitors on-going changes in patient's periodontal condition and reports significant findings to dentist in a timely manner
- provides oral health education and appropriate individual counseling for all dental patients
- provides clinical oral hygiene services including dental prophylaxis, scaling, sealant application, and fluoride application consistent with accepted professional practices and standards and in compliance with applicable state law and dental clinic protocols
- integrates dental hygiene care with patient's complete oral health care needs
- performs independent procedures as delegated and directed by the dentist in accordance with state regulations and law as well as the dental clinic protocol.

10% Assist Dentist

- have proper instruments and supplies ready prior to dentist requests
- have proper knowledge of dental procedures to assure efficient, timely manner for providing care
- apply topical fluoride
- apply sealants
- write lab work orders as dictated by the dentist
- write prescriptions as dictated by the dentist
- properly clean and sterilize all instruments used in patient procedures
- properly disinfect all surfaces exposed to potentially infectious materials
- properly dispose of all disposable items exposed to potentially infectious materials

5% Documentation

- document patient progress notes in patient chart according to dental clinic protocol
- document existing treatment and new treatment according to dental clinic protocol

5% Other

- help monitor patient flow in the clinic
- receive and place necessary telephone calls consistent with professional matters, clinic business and patient care
- participate in appropriate health promotion/disease prevention activities as required
- perform other related and/or necessary tasks to achieve organizational and programmatic goals and objectives

II. B. OTHER POSITION CHARACTERISTICS:

1. Accuracy Required in Work: Accuracy of services rendered is always an expectation of the professional. The hygienist works under the guidance of the dentist and is responsible for completing all assignments given as supervised.
2. Consequence of Error: The employee's work can affect the safety and wellbeing of the patient as they are performing procedures directly on the patient. Employees are subject to job performance evaluations and may be dismissed if inappropriate or unsafe service delivery. The dentist is legally responsible for employee's work.
3. Instructions Provided to Employee: Dental clinic policies and procedures; blood-borne pathogens policy; OSHA; HIPAA; county policies and procedures
4. Guides, Regulations, Policies and References Used by Employee: Dental clinic policies and procedures; blood-borne pathogens policy; OSHA; HIPAA; county policies and procedures
5. Supervision Received by Employee: Direct supervision is provided by the dentist
6. Variety and Purpose of Personal Contacts: Community and dental clinic patients; peers and office staff; other health department program staff; general public
7. Physical Effort: This position requires minimal physical exertion. Light lifting of supplies and extended time periods sitting
8. Work Environment and Conditions: This position is located within a sheltered environment that is temperature regulated. Semi-sterile/aseptic environment. There may be uncooperative or disagreeable patients.
9. Machines, Tools, Instruments, Equipment, and Materials Used: A variety of dental instruments; x-ray equipment; telephone; computer; fax; copier/scanner, computer software; autoclave; dental chairs and lamps
10. Visual Attention, Mental Concentration, and Manipulative Skills: Must have strong manipulative skills and dexterity; requires good visual skills and high levels of mental concentration for extended time periods
11. Safety for Others: With frequent opportunities for bloodborne pathogen and disease exposure, it is critical that a high level of sterility be maintained with instruments, etc
12. Dynamics of Work: Maintaining a professional dental environment while working as a team to assure the highest quality of oral health services.

III. A. KNOWLEDGES, SKILLS, & ABILITIES:

Considerable knowledge of and skill in the application of the techniques and practices of dental hygiene. Ability to secure the cooperation of the patient and to elicit required information. Ability to understand and follow oral and written instructions, and to interpret and maintain records and reports. Ability to deal tactfully with the public and to exercise good judgment in appraising situations and making decisions. Ability to work with other professional and support personnel in the performance of duties typical of dental hygienist and assisting with other duties which may be of lesser complexity. Ability to maintain clinical privileges. General knowledge of office operations and equipment.

- B.**
- 1. Required Minimum Training:** Graduation from a four year college or university with a degree in dental hygiene; or graduation from an approved two-year program of dental hygiene and two years of experience in dental hygiene or health education; or an equivalent combination of education and experience.
 - 2. Additional Training/Experience:** None
 - 3. Equivalent Training and Experience:** See above

IV. License or Certification Required by Statute or Regulation:

Licensed to practice as a dental hygienist in North Carolina

IV. Signatures indicate agreement with all information provided, including designation of essential functions.

Supervisor's Certification: I certify that (a) I am the immediate Supervisor of this position, that (b) I have provided a complete and accurate description of responsibilities and duties and (c) I have verified (and reconciled as needed) its accuracy and completeness with the employee.

Signature: _____ Title: _____ Date: _____

Employee's Certification: I certify that I have reviewed this position description, completed by the above named immediate supervisor, is complete and accurate.

Signature: _____ Title: _____ Date: _____

Section or Division Manager's Certification: I certify that this position description, completed by the above named immediate supervisor, is complete and accurate.

Signature: _____ Title: _____ Date: _____

Personnel Director's Certification: I certify that this is an authorized, official position description of the subject position.

Signature: _____ Title: _____ Date: _____