

## PUBLIC HEALTH PROGRAM MANAGER II

This is managerial and supervisory work in the development and implementation of public health program delivery systems through the integration of non-medical program components. Work involves reviewing recommendations concerning delivery systems structures prepared by subordinate staff, identifying areas of interface critical to the attainment of public health objectives associated with the assigned area including consideration of medical consultation and direction, discussing necessary modifications with supervisor and directing the modification process, and resolving administrative issues affecting multiple program areas. Employees are responsible for ensuring that resource allocation and operational priorities are supportive of and consistent with Division of Health Services goals and policies.

### I. SUPERVISORY/MANAGERIAL FUNCTIONS:

Planning - Work involves participating in the establishment of general goals and objectives for assigned area and providing consultation/supervision to subordinate management staff in the compilation of management data necessary for the identification of needs and the establishment of plans to address long range objectives. Employees direct subordinate management staff in the development of operational priorities.

Organizing and Directing - Work involves the designation of resource allocations in relation to long term objectives, goals, and plans and review of recommendations prepared by subordinate management concerning internal reorganization and restructuring of program services. Employees discuss the implications of major changes in organizational structure or service delivery procedure with supervisor and Division management.

Budgeting - Work involves the analysis of budget proposals and the formulation of a budget design in relation to projected funds and the goals and objectives established for the assigned area. The expenditure of funds for the purchase of equipment and services can be approved or disapproved at this level. Major issues are shared with supervisors prior to implementation.

Training - Employees monitor the training needs of staff through knowledge of program requirements and staff capabilities and review training proposals submitted by subordinate staff. Staff development plans are designed to make effective use of available resources.

Setting Work Standards - Employees participate in the establishment of standards addressing program delivery quality and review work performance standards recommended by subordinate managers and supervisors. Standards are monitored to ensure continued applicability to programs and services. Major modifications in standards would be discussed with supervisor.

Reviewing Work - Employees determine the accomplishments of program objectives/ goals and the quality and effectiveness of program administration through analysis of feedback from service recipients/providers, review of progress reports, and periodic conferences. The daily operational activities are not reviewed unless assistance is requested by subordinate management.

Counseling and Disciplining - Employees resolve informal and formal complaints and grievances of immediate subordinate management staff, issue oral and written warnings as appropriate and recommend to supervisor More serious disciplinary actions. Employees provide consultation to subordinate supervisors on the counseling and disciplining of their staff.

Performing Other Personnel Functions - Employees function with considerable independence in the selection, performance appraisal, promotion, reassignment and salary adjustment of subordinate

non-medical staff. Activities having unit-wide impact such as the allocation of performance increases are shared and approved in conjunction with the supervisor. Other individual personnel related decisions are presented at the discretion of the employees to the supervisor as a final recommendation.

## II. SCOPE AND NATURE OF WORK SUPERVISED:

Dynamics of Work Supervised - The individual programs are relatively stable. However, the multiplicity of programs and the requirement to integrate all changes results in a moderately dynamic work environment in which, frequently, changes are required to meet modifications in the federal and state policies as well as advances in program technology and service delivery considerations.

Variety of Work Supervised - The primary focus of work is on the administration/ management of public health programs. Employees integrate the medical consultation/ direction provided by professional medical staff into the overall administration of the public health programs.

Number of Employees Responsible For - Work involves administrative and technical supervision over program management staff and administrative supervision and technical coordination of professional medical staff. The number of positions supervised would range from 45 to over 100 employees.

III. EXTENT OF SUPERVISION RECEIVED: Employees function with considerable independence. Issues of major significance impacting on long range objectives and goals are initially discussed with supervisor and employees are accountable for implementation of appropriate actions. Employees receive little guidance on work in progress, usually only upon request.

## IV. SPECIAL ADDITIONAL CONSIDERATIONS:

Supervision of Shift Operations - Employees supervised generally observe normal office hours.

Fluctuating Work Force - The work force supervised is basically stable.

Physical Dispersion of Employees - Employees supervised are generally located in the central office; supervision of employees stationed in regional offices is shared with other program staff.

## V. RECRUITMENT STANDARDS:

Knowledges, Skills, and Abilities - Considerable knowledge of: the principles and practices associated with public health program administration; public and private medical facilities resources and personnel; and governmental accounting and budgeting practices. Ability to: interpret and understand information concerning medically oriented programs; analyze data and information concerning program operations in order to evaluate effectiveness; communicate effectively orally and in writing with Division staff and representatives of local health departments, private health care providers, and medical schools; and plan, assign, and coordinate the work of subordinate employees.

Minimum Education and Experience - Master's degree\* in public health administration and two years' administrative experience in a health-related program, one of which must have been supervisory in nature; master's degree in public administration or business administration and three years' administrative experience in a health-related program, one of which must have been supervisory in nature; graduation from a four-year college or university and four years experience in a health related program, three of which must have been administrative in nature and one of which must have included supervisory responsibility; or an equivalent combination of education and experience.

(\* This master's degree is to be obtained in the two-year public health administration program; an individual who obtains the master's degree in the one-year program must have had three years administrative experience in a health-related program.)