



**STATE OF OREGON
Oregon Health Authority (OHA)
POSITION DESCRIPTION**

Position Revised Date:
09/23/2026

Agency: Oregon Health Authority

Division: Oregon State Hospital

☐ New

☒ Revised

This position is:

☐ Classified

☐ Unclassified

☐ Executive Service

☐ Mgmt Svc – Supervisory

☒ Mgmt Svc – Managerial

☐ Mgmt Svc – Confidential

SECTION 1. POSITION INFORMATION

- a. Classification Title: Occupational Health and Safety Manager 1
- b. Classification No: X7485 c. REPR Code: MMS
- d. Position No: WD: ; PPDB:
- e. Working Title: Safety Operations Manager
- f. Agency No: 44300
- g. Section Title: OSH Safety Department
- h. Employee Name: _____
- i. Work Location (City — County): Salem - Marion
- j. Supervisor Name: Marshall Jennings
- k. Position: ☒ Permanent ☐ Seasonal ☐ Limited Duration ☐ Academic Year
☐ Full-Time ☐ Part-Time ☐ Intermittent ☐ Job Share
- l. FLSA: ☒ Exempt If Exempt: ☐ Executive ☐ Professional ☒ Administrative ☐ Computer
☐ Non-Exempt
- m. Eligible for Overtime: ☐ Yes ☒ No

SECTION 2. PROGRAM AND POSITION INFORMATION

- a. Describe the program in which this position exists. Include program purpose, who's affected, size, and scope. Include relationship to agency mission.

OHA values health equity, service excellence, integrity, leadership, partnership, innovation, and transparency. OHA's health equity definition is "Oregon will have established a health system that creates health equity when all people can reach their full potential and well-being and are not disadvantaged by their race, ethnicity, language, disability, age, gender, gender identity, sexual orientation, social class, intersections among these communities or identities, or other socially determined circumstances. Achieving health equity requires the ongoing collaboration of

all regions and sectors of the state, including tribal governments to address: the equitable distribution or redistribution of resources and power; and recognizing, reconciling, and rectifying historical and contemporary injustices.” OHA’s 10-year goal is to eliminate health inequities.

The Oregon State Hospital (OSH) Division is aligned with the Oregon Health Authority’s core values of partnership, service excellence, leadership, integrity, health equity, innovation, and transparency. In our practice, these values are expressed through:

Service Excellence:

- Understanding and responding to Oregon public health needs and the people we serve
- Pursing our commitment to innovation and science-based best practices
- Fostering a culture of continuous improvement

Leadership:

- Building agency-wide and community-wide opportunities for collaboration
- Championing public health expertise and best practices
- Creating opportunities for individual development and leadership

Integrity:

- Working honestly and ethically in our obligation to fulfill our public health mission
- Ensuring responsible stewardship in public health resources

Health Equity:

- Eliminating health disparities and working to attain the highest level of health for all people
- Ensuring the quality, affordability, and accessibility of health services for all Oregonians
- Integrating social justice, social determinants of health, diversity, and community

Partnership:

- Working with partners and communities to protect and promote the health of all Oregonians
- Seeking, learning from, and respecting internal and external ideas and opinions
- Exploring and defining the roles and responsibility of public health staff and partners

Innovation:

- We are not satisfied with the status quo if there are new and better ways to meet the needs of the people we serve. We bring creativity, experience, and openness to our search for solutions to problems. We pursue opportunities to develop new evidence to evolve our practices.

Transparency:

- We communicate honestly and openly, and our actions are upfront and visible. We provide open access to information and meaningful opportunities to provide input and participate in our decision-making.

Oregon State Hospital (OSH), overseen by the Oregon Health Authority, is a Joint Commission and Centers for Medicare and Medicaid Services (CMS) certified psychiatric hospital with campuses in Salem and Junction City. The division operates a 16-bed Secure Residential Treatment Facility (SRTF) in Pendleton. OSH is OHA's largest division, employing more than 2,900 staff and serving over 1,800 people annually.

OSH provides evidence based, patient centered psychiatric treatment to a clinically complex population in a safe, therapeutic environment. Within this setting employees are expected to collaborate effectively, demonstrate empathy, and conduct themselves professionally while upholding the hospital's recovery focused mission.

Every position supports OSH's vision to inspire hope, promote safety, and support recovery for all.

Section/unit description:

The Safety Department functions as a central resource for Oregon State Hospital, supporting safe and reliable operations at the Salem and Junction City campuses. The department is responsible for occupational and environmental safety, fire and life safety, emergency management and continuity planning, workplace violence prevention, injury and incident investigation, hazard assessment and correction, regulatory readiness, and related training and consultation. These functions directly affect the safety of patients, staff, visitors, and hospital operations at both campuses. The department's work supports compliance with Oregon OSHA, The Joint Commission, Centers for Medicare & Medicaid Services, Oregon hospital licensing, and other applicable requirements.

b. Describe the primary purpose of this position, and how it functions within this program. Complete this statement. The primary purpose of this position is to:

The primary purpose of this position is to manage the daily operations, staff, resources, and safety programs of a multidisciplinary Safety Department team serving Oregon State Hospital. The position plans and assigns work, coordinates staffing and coverage across both campuses, develops and evaluates employees, provides program management and direction for safety programs administered by assigned staff, including establishing priorities and objectives, evaluating program performance, and directing improvement efforts.

The Safety Manager works in partnership with a second Safety Manager and the Director of Safety to implement department priorities, maintain compliance with major regulatory frameworks including Oregon OSHA, The Joint Commission, CMS, Oregon hospital licensing requirements, and applicable fire and life safety standards, strengthen staff capability through cross-training, and provide coordinated safety support throughout the hospital. Each manager retains direct accountability for an assigned team while also supporting department-wide operations and continuity of leadership.

SECTION 3. DESCRIPTION OF DUTIES

List the major duties of the position. State the percentage of time for each duty. Mark “N” for new duties, “R” for revised duties or “NC” for no change in duties. Indicate whether the duty is an “Essential” (E) or “Non-Essential” (NE) function.

Note: If additional rows of the below table are needed, place cursor at end of a row (outside table) and hit “Enter”.

% of Time	N/R/NC	E/NE	DUTIES
30%	R	E	Department Operations and Safety Coverage • Manage daily work of an assigned Safety staff and programs across the Salem and Junction City Campuses. • Plan, prioritize, assign, coordinate, and approve work; monitor workflow, deadlines, service quality, and completion of corrective actions. • Coordinate schedules and deployment of staff to maintain onsite Safety presence in Salem, routine Safety support in Junction City, and cross-campus response as needed. • Coordinate inspections, drills, fit testing, risk and hazard assessments, investigations, regulatory-readiness activities, training, and follow-up associated with assigned programs. • Allocate staff, equipment, and supplies among competing needs and adjust assignments in response to incidents, absences, emerging hazards, and hospital priorities. • Provide operational direction for department activities when the other Safety Manager or Director is unavailable, within delegated authority, to maintain continuity and shared accountability. • Lead and reinforce a culture of safety by ensuring team activities, work priorities, resource decisions, and management practices align with the mission, values, and operational needs of Oregon State Hospital. • Respond to significant emergency situations outside regularly scheduled work hours, including nights, weekends, and holidays, as operational needs require. • Serve in assigned Incident Command System roles during emergency response and may act as Incident Commander when the Emergency Operations Center (EOC) is activated, based on availability and delegated authority.
25%	R	E	Personnel Management and Staff Development • Supervise assigned Safety Department staff by establishing clear performance, conduct, and customer-service expectations; communicating individual and shared responsibilities; and

			holding employees accountable for the quality, timeliness, and completion of assigned work. - Recruit, interview, select, onboard, train, coach, and develop staff in accordance with OHA policy, collective bargaining agreements, and established personnel practices. - Review and evaluate staff performance; prepare and sign required performance evaluations and feedback; recognize effective performance and address performance or conduct concerns. - Approve time and leave, coordinate schedules, respond to grievances, and initiate corrective or disciplinary action in consultation with the Director, Human Resources, and Labor Relations. - Identify training needs and implement cross-training, mentoring, succession planning, and team-based work practices that preserve technical specialties while expanding department capability.
15%	R	E	Program Development, Performance, and Systems - Develop, implement, evaluate, and continually improve assigned safety programs, work plans, objectives, procedures, protocols, standard work, and performance measures. - Analyze injury, incident, inspection, audit, drill, and corrective-action data to identify trends, measure program effectiveness, and establish improvement priorities. - Prepare reports, dashboards, briefings, and recommendations for the Director, hospital leadership, committees, and regulatory reviewers. - Ensure effective use and data quality of safety information systems, including incident, inspection, corrective-action, chemical, respiratory-protection, and related platforms. - Identify resource and budget needs, monitor assigned resources, and recommend purchases or investments through established approval processes.
10%	R	E	Regulatory Compliance - Interpret and apply occupational and environmental safety laws, accreditation standards, licensing requirements, fire and life safety codes, and OHA/OSH policies within assigned authority. - Monitor changes in requirements, assess operational impact, communicate needed actions, and recommend revisions to programs, policies, protocols, training, and work practices. - Evaluate compliance through audits, inspections, record reviews, observations, and performance measures; ensure

			findings are documented, assigned, tracked, verified, and elevated when unresolved. • Support surveys, inspections, inquiries, and enforcement matters involving Oregon OSHA, The Joint Commission, CMS, licensing bodies, fire authorities, and other oversight agencies. • Maintain accurate, complete, accessible, and confidential program records in accordance with legal, regulatory, and records-retention requirements.
10%	R	E	Consultation, Collaboration, and Training • Advise managers, staff, committees, and leaders on safety requirements, risk controls, program expectations, and practical implementation of corrective actions. • Collaborate closely with the other Safety Manager and Director to align priorities, balance workload, standardize practices, and provide consistent direction across teams and campuses. • Represent the Safety Department on hospital committees and workgroups, providing safety expertise, communicating department priorities, supporting collaborative decision-making, and coordinating follow-up on identified risks and assigned actions. • Maintain constructive relationships with regulatory agencies, emergency-response partners, insurers, consultants, vendors, labor representatives, and peer organizations. • Partner with hospital leadership, departments, and other stakeholders to identify and mitigate risks, remove barriers, coordinate cross-departmental responses, and improve hospital-wide safety outcomes. • Develop or coordinate safety education, exercises, tools, and communications appropriate to the audience, risk, and regulatory requirement.
10%	R	E	Hazard Assessment, Incident Review, and Corrective Action • Direct and support reviews of employee injuries, safety incidents, environmental hazards, emergency events, complaints, and high-risk conditions. • Evaluate immediate and underlying causes; determine or recommend interim controls, corrective actions, escalation, and verification necessary to reduce risk and prevent recurrence. • Provide timely guidance during urgent safety situations and coordinate with clinical, security, operations, emergency management, and executive leaders as appropriate.

			• Apply the hierarchy of controls, trauma-informed principles, and operational knowledge when evaluating hazards and proposed solutions.
Ongoing	R	E	Cultural Competency and Diversity • Consistently treats customers, patients, consumers, stakeholders, community partners, vendors, and colleagues with dignity and respect. Demonstrates recognition of the value of individual and cultural differences and creates a work environment that is respectful and accepting of diversity, where talents, abilities, and experiences are valued. • Proactively creates and maintains an inclusive work environment for all Safety Department staff, including those from diverse backgrounds. • Models inclusive and equitable recruitment, onboarding, promotion, and management practices that support advancement of OHA Affirmative Action Plan goals. • Demonstrates understanding and application of principles related to eliminating health inequities. Supports culturally responsive, anti-racist, inclusive, and trauma-informed services, policies, and practices, including continued development of personal cultural awareness and humility. • Ensures that services are provided in a culturally and linguistically responsive manner. Ensures that materials are available in different languages or alternate formats when needed and that services and facilities are accessible to patients, families, and community members. • Promotes and fosters a respectful, psychologically safe, and inclusive work environment that is free from discrimination and harassment and in which employees are accountable for their work and share responsibility for department outcomes.
Ongoing	R	E	Core Values • Demonstrates awareness, understanding, and alignment with the OSH Core Values of Humanity, Equity, Wellness, Partnership, Transparency, Performance Excellence.

SECTION 4. WORKING CONDITIONS

Describe any on-going working conditions. Include any physical, sensory, and environmental demands. State the frequency of exposure to these conditions.

Due to the responsibilities and significance of this position, onsite presence is expected. Remote work is available on an infrequent basis as coordinated with and approved by the Director of Safety. Regular work at both the Salem and Junction City campuses is required, and travel between campuses is essential.

Most work is performed in an office environment and during routine inspections, investigations, drills, and hazard assessments throughout OSH. Work may involve confidential and sensitive information and exposure to adverse physical or environmental conditions. The position works in a secure psychiatric hospital and may encounter individuals experiencing emotional or behavioral dysregulation, including physical aggression.

Work hours include weekends and are subject to change with limited notice. The position is subject to emergency response needs 24 hours a day, seven days a week, and may be required to respond outside regularly scheduled work hours, including nights, weekends, and holidays.

In-state travel may be required. The employee must maintain a valid driver's license with an acceptable driving record or provide an acceptable alternative method of transportation.

SECTION 5. GUIDELINES

a. List any established guidelines used in this position, such as state or federal laws or regulations, policies, manuals, or desk procedures.

Federal and state laws governing occupational and environmental safety, and related hospital safety requirements.

Oregon OSHA and federal OSHA regulations and requirements.

The Joint Commission Standards for Environment of Care

Centers for Medicare & Medicaid Services requirements and Oregon hospital licensing standards.

Oregon Revised Statutes and Oregon Administrative Rules.

State Fire Marshal requirements and applicable fire, life safety, building, and NFPA codes and standards.

DAS, OHA, and OSH policies, procedures, and protocols.

Safety Department plans, procedures, protocols, and standard work.

Applicable collective bargaining agreements.

b. How are these guidelines used?

These guidelines provide the framework for managing Safety Department programs and staff. The Safety Manager interprets and applies laws, regulations, standards, policies, and technical requirements; develops practical processes and controls; provides direction and consultation; evaluates compliance; and ensures identified deficiencies are corrected. When requirements are unclear, conflicting, or involve significant organizational risk, the Safety Manager consults appropriate resources and elevates the matter to the Director of Safety as needed.

SECTION 6. WORK CONTACTS

With whom, outside of co-workers in this work unit, must the employee in this position regularly come in contact? When applicable, please identify contacts that might be virtual/in-person, or both.

Note: If additional rows of the below table are needed, place cursor at end of a row (outside table) and hit "Enter".

Who Contacted	How	Purpose	How Often?
Other State Agencies	Phone/In person/Written	Information/Direction	Daily
OSH Management/Human Resources	Phone/In person/Written	Information/Direction	Daily
OSH Staff	Phone/In person/Written	Information/Direction	Daily
OSH Managers	Phone/In person/Written	Information/Direction	Daily
Vendors and Contractors	Phone/In person/Written	Information/Direction	Daily

SECTION 7. POSITION-RELATED DECISION MAKING

Describe the typical decisions of this position. Explain the direct effect of these decisions.

The Safety Manager independently makes operational, program-management, and supervisory decisions within established laws, policies, and delegated authority. These decisions include prioritizing and assigning work, coordinating staffing and campus coverage, allocating available resources, approving work products, directing inspections, investigations, drills, training, and program reviews, interpreting safety requirements, evaluating hazards, establishing interim controls and corrective actions, and addressing employee performance or conduct.

The position determines when conditions require immediate intervention, additional technical expertise, cross-departmental coordination, or escalation to the Director of Safety. Decisions involving significant legal, regulatory, personnel, budgetary, or hospital-wide impact are referred to the Director.

These decisions directly affect patient, employee, and visitor safety, continuity of hospital operations, staff performance and development, timely correction of hazards, regulatory readiness, and the

effectiveness of Safety Department programs. Inadequate or delayed decisions may result in injury, operational disruption, unresolved hazards, regulatory findings, financial liability, or loss of public trust.

SECTION 8. REVIEW OF WORK

Who reviews the work of the position?

Note: If additional rows of the below table are needed, place cursor at end of a row (outside table) and hit "Enter".

Classification Title	Position Number	How	How Often	Purpose of Review
Occupational Health and Safety Manager 2	000000027734	Phone/In person/ other methods (email/memo), regular confers, staff meetings, customer feedback, employee feedback and observation	daily, weekly, quarterly	Consultation on work progress as appropriate, discuss problem-solving as needed, assures appropriate decisions; performance review

SECTION 9. OVERSIGHT FUNCTIONS *(Supervisory positions only)*

a. How many employees are directly supervised by this position? 6

How many employees are supervised through a subordinate 0

b. Which of the following activities does this position do?

- | | |
|---|--|
| ☒ Plan work | ☒ Coordinates schedules |
| ☒ Assigns work | ☒ Hires and discharges |
| ☒ Approves work | ☒ Recommends hiring |
| ☒ Responds to grievances | ☒ Gives input for performance evaluations |
| ☒ Disciplines and rewards | ☒ Prepares and signs performance evaluations |

SECTION 10. ADDITIONAL POSITION-RELATED INFORMATION

ADDITIONAL REQUIREMENTS: List any knowledge and skills needed at time of hire that are not already required in the classification specification.

All positions in OHA require a Criminal Background Check and an Abuse/Neglect Check. Fingerprints may be required.

- Knowledge of management and supervisory principles, including staffing, work planning and assignment, performance evaluation, conflict resolution, personnel policies, and collective bargaining agreements.
- Complete and maintain required emergency management and Incident Command System training and maintain working knowledge of OSH emergency operations plans, procedures, Incident Command System structure, and assigned emergency response responsibilities.

- Ability to lead a multidisciplinary team, establish clear expectations, balance competing priorities, allocate resources, promote shared accountability, and maintain service continuity during organizational or operational change.
- Skill in coaching and developing employees through regular feedback, training, cross-training, mentoring, and identification of professional-development opportunities.
- Ability to address employee performance and conduct concerns promptly, fairly, and consistently and to consult with Human Resources, Labor Relations, and the Director of Safety when appropriate.
- Knowledge of occupational and environmental safety principles, hazard identification and control, incident investigation, corrective-action management, and safety program administration.
- Ability to interpret and apply complex laws, regulations, accreditation standards, policies, and technical guidance to hospital operations.
- Skill in analyzing incidents, hazards, compliance findings, and performance data and developing practical, risk-based recommendations.
- Effective leadership, communication, facilitation, and relationship-building skills, including the ability to manage disagreement constructively and clearly communicate technical information, expectations, risks, and recommendations to varied audiences.

BUDGET AUTHORITY: If this position has authority to commit agency operating money, indicate the following:

Note: If additional rows of the below table are needed, place cursor at end of a row (outside table) and hit "Enter".

Operating Area	Biennial Amount (\$00,000.00)	Fund Type
Safety Department	Delegation on file	General

SECTION 11. ORGANIZATIONAL CHART

Attach a current organizational chart. Be sure the following information is shown on the chart for each position: classification title, classification number, salary range, employee name and position number.

SECTION 12. SIGNATURES

Employee Signature

Date

Supervisor Signature

Date

Appointing Authority Signature

Date