

or redistributing of resources and power; and recognizing, reconciling, and rectifying historical and contemporary injustices.” OHA’s 10-year goal is to eliminate health inequities.

The Public Health 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
- Pursuing 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 stakeholders and communities to protect and promote the health of all Oregonians
- Seeking, listening to, 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.

Make Oregon one of the healthiest states by preventing tobacco use; decreasing obesity/overweight; reducing suicide; preventing or reducing heart disease and stroke and increasing survivability; preventing family violence and increasing community resilience to emergencies.

Make Oregon’s public health system into a national model of excellence by transforming the public health system through accreditation; supporting coordinated care organizations (CCOs) in achieving community health goals; increasing the use of health impact assessments as a tool in communities; establishing mechanisms that ensure health in all policies; and maintaining excellence in epidemiology and surveillance.

The Office of the State Public Health Director

The Office of the State Public Health Director (OSPHD) guides the strategy, operations, and policy of public health programs within the division, and assures an effective and coherent public health system for Oregon. This includes extensive interactions with a range of state and local agencies and organizations, health care providers, federal agencies, and the private sector.

Under the leadership of the Office of the State Public Health Director, the Division is organized by three centers:

The Center for Health Protection

The Center for Public Health Protection protects the health of individuals and communities through establishing, applying and ensuring reliable compliance with regulatory and health-based standards. The Center's diverse programs work closely with other federal, state and local agencies, regulated entities and active stakeholder groups. The Center's work emphasizes continuous process improvement, technical assistance, scientific assessment, ongoing monitoring and risk communication to protect the health of all people in Oregon.

The Center for Prevention and Health Promotion

The Center for Prevention and Health Promotion houses community-oriented preventive clinical and community health services and supports the policy, systems and environmental changes that promote good health. This Center guides and supports healthy communities through data collection, analysis and reporting; by supporting the Governor's priorities around tobacco, obesity and early learning; and, by acting as a point of contact with the healthcare system on certain key clinical prevention practices. This center will work with many partners, including local public health, child care facilities, schools, worksites, healthcare providers, transportation, and the private sector to ensure that we reduce preventable injury, illness, and death and promote good health.

The Center for Public Health Practice

The Center for Public Health Practice provides services to prevent and control diseases, monitor vital events, and assure an effective statewide public health system. CPHP programs work closely with local and tribal governments, community partners, and the public to protect and improve the health of all people in Oregon. Special emphasis is placed on communicable diseases, including epidemiology, laboratory testing, immunization, and other community control measures. CPHP screens all newborn infants for biochemical disorders to prevent disability or death, and collects and analyzes vital record data to monitor health trends. The quality of statewide public health services is assured through consultation, planning, review, and accreditation of state and local agencies.

This Center's work affects all Oregonians. Many of the programs overseen by this Center are administered in collaboration with Oregon's local health departments. This center has approximately 245.9 FTE and a total estimated biennial budget of \$93.9 million.

Human Immunodeficiency Virus (HIV), Sexually Transmitted Disease (STD), Tuberculosis (TB) Section

The HIV, STD and TB (HST) Section is committed to early identification and response to health events through surveillance and epidemiologic studies, intervention, education and direct

preventive action. HST programs serve all Oregonians and work directly with local health departments, private physicians, other health care providers, community based organizations, and other state agencies.

There are six functional programs within HST: HIV Data and Analysis, HIV Community Services/OHOP, HIV Prevention, STD Prevention, TB Control and CAREAssist. The Section is responsible for planning and implementing surveillance for HIV, STD and TB, assuring accurate disease reporting, conducting epidemiologic analysis including defining populations at risk, participating in community prevention and care planning for HIV, coordinating disease intervention and contact notification, managing disease treatments for TB and STD, providing access to HIV medication and health care, managing HIV client services and education and technical assistance associated with these areas of emphasis.

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 conduct day-to-day activities to support HIV surveillance activities. These include gathering and compiling data by recruiting and interviewing special surveillance study participants, abstracting data from medical records, and conducting data cleaning and collection activities to support routine disease surveillance.

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	N	E	<p>CONTACT AND RECRUIT STUDY PARTICIPANTS:</p> <ul style="list-style-type: none"> • Recruit participants for study participation via mail, telephone, text, and email following project protocols • Use program databases and other approved tools to locate contact information for study participants (lead searches). Maintain/update accurate information in MMP Tracking Module. • Determine study eligibility of people sampled • Schedule telephone or face-to-face interviews with participants • Coordinate language interpreters for recruitment and interviewing of participants when needed • Answer incoming calls on project toll free 800 project number
30	N	E	<p>CONDUCT AND VALIDATE INTERVIEWS OF PROJECT PARTICIPANTS</p> <ul style="list-style-type: none"> • Conduct hour-long, confidential interviews with HIV-positive project participants about health behaviors by phone or occasionally in person, including interviews at homes, clinics, jails or other venues. • Follow procedures to obtain informed consent from project participants • Use computer-aided personal interview (CAPI) software to

			<p>gather interview data on laptops</p> <ul style="list-style-type: none"> • Link participants to medical care or ancillary services as needed • Upload personal interview data onto a secure network to maintain confidentiality. • Distribute and track participant tokens of appreciation, adhering to CDC protocols and agency fiscal management standards
15	N	E	<p>ABSTRACT DATA FROM MEDICAL RECORDS</p> <ul style="list-style-type: none"> • Following study protocols, abstract complex medical record data (labs, encounters, medications, diagnoses, etc.) into an approved, secure database. • Follow all local, state, and CDC protocols for privacy and confidentiality when handling patient records. • Use national and local project abstraction guide to ensure the integrity of the data collected.
20	N	E	<p>CORE SURVEILLANCE</p> <ul style="list-style-type: none"> • Follow up with other State surveillance programs to collect case information and resolve discrepancies. • Ensure daily electronic lab reports have been cleaned and uploaded to the disease reporting database. • Assist in working on out of care related projects and activities.
5	N	E	<p>RESEARCH AND CONSULTATION</p> <ul style="list-style-type: none"> • Answer requests from agency personnel, other agencies, medical groups, and the public for information relating to the HIV Medical Monitoring Project and other surveillance activities. • Review reports, papers, memos, and articles of staff to ensure proper use of data and offer consultation. <p>REPORT PREPARATION/PRESENTATION OF DATA</p> <ul style="list-style-type: none"> • Produce tables of estimates and other data for use in presentations and online data dashboards. • Summarize data into various formats and write short reports, simple research monographs or sections of major reports.
At All Times	N	E	<p>Consistently treats customers, stakeholders, partners, vendors and co-workers with dignity and respect.</p> <p>Creates and maintains a work environment that is welcoming and respectful of diversity.</p> <p>Sets clear guidelines and models expected professional behaviors.</p> <p>Approaches work from health equity lens seeking to address disparities which exist in communities most impacted by HIV/STD/TB</p>

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.

This work requires working on a computer screen and using a telephone for extended periods of time. This work may be conducted remotely. Some work must be conducted in the program office at the Portland State Office Building because of the confidential nature and logistics of the tasks.

An interviewer who is comfortable speaking directly about difficult topics will be more successful in helping the participant feel at ease. The work of this role may be conducted remotely with full access to the needed operating systems and technology. There are times that the work will need to be conducted onsite.

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:

- Oregon Administrative Rules
- Oregon Revised Statutes
- CDC and HST data security and confidentiality guidelines
- HIV Medical Monitoring Project Operations Manual, including the current study cycle Interview Guide and Medical Record Abstraction Guide
- Oregon Health Authority and Department of Administrative Services Policies
- Database Manuals and user guidelines to include Orpheus
- Center for Public Health Practice Investigative Guidelines
- Ryan White program policy and guidance

b. How are these guidelines used?

All work conducted for the HIV medical Monitoring Project, including participant recruitment, data collection via interview or medical record abstraction, and data management and transfer must adhere to the standards delineated in the HIV Medical Monitoring Project Operations Manual and associated training manuals. Position uses guidelines to advise their efforts to administer HIV Surveillance practices and to ensure strict program adherence to the highest standards of confidentiality and data maintenance regarding sensitive information.

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?
Study Participants	Letter, Phone, In person	To recruit for surveillance study, determine eligibility, and collect informed consent and interview data	Daily/weekly
Medical record/health	Letter, Phone, In	To coordinate medical record	Daily/weekly

system personnel	person	abstraction activities	
Members of the public	Letter, Phone, In person	To answer questions about the study, to conduct disease surveillance activities	Daily/weekly
CDC employees	Phone, online	Monthly data calls and trainings	Monthly, ad hoc

SECTION 7. POSITION-RELATED DECISION MAKING

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

A large part of the RA2's tasks are determined by study protocols. However, typical decisions that require personal judgment calls include the ethical and safe management of study participants and members of the public during study recruitment or data collection – for example, individuals may have questions, express anger, or exhibit erratic behaviors. The RA2 must always prioritize the safe and confidential handling of participant data. Although there are detailed guidelines for abstraction, medical records vary, and independent judgment may be needed to determine which data should be collected. Healthcare training and familiarity with medical charts are important assets.

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
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HIV Surveillance Manager	00000014529	Direct supervision, informal huddles, team meetings, supervisory meetings	Monthly or as needed	To discuss problems as they arise, develop solutions and next steps as needed and the accomplishment of work in general. Review progress on current task list, prioritize future assignments. Evaluate performance. Set expectations.
MMP Project Coordinator	0000212	In person, phone, email, IM	Daily	Project guidance, collaboration
MMP Principal Investigator	0000591	In person, phone, email, IM	Weekly or as needed	Project guidance, collaboration

SECTION 9. OVERSIGHT FUNCTIONS

- a. How many employees are directly supervised by this position? 0
- How many employees are supervised through a subordinate supervisor? 0
- b. Which of the following activities does this position do?
- | | |
|--|---|
| <input type="checkbox"/> Plan work | <input type="checkbox"/> Coordinates schedules |
| <input type="checkbox"/> Assigns work | <input type="checkbox"/> Hires and discharges |
| <input type="checkbox"/> Approves work | <input type="checkbox"/> Recommends hiring |
| <input type="checkbox"/> Responds to grievances | <input type="checkbox"/> Gives input for performance evaluations |
| <input type="checkbox"/> Disciplines and rewards | <input type="checkbox"/> 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.

To administer interviews in a language other than English, the interviewer must be a native speaker and/or demonstrate fluency and accuracy in reading, listening, and speaking in that language. Bilingual Spanish/English is highly desired and employees with this additional skill will be offered a bilingual differential.

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
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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