

Policy: Special salary adjustments and classification actions are required to be submitted to the Division personnel office, from which they are forwarded to the DHHS Deputy Administrator (with certain exceptions), who forwards them to Department of Personnel for action. Division and agency decisions on classification issues are governed by the current version of the DHHS Classification Policy and Procedures.

Purpose: To ensure that classification actions and special salary adjustments within the Division comply with state and DHHS policy and regulation, maintain equity among employees, and align with funding authorizations.

Procedures:

- I. Attachment A is a detailed DHHS policy on classification actions, covering both new and existing positions, and agency- and employee-initiated reclassifications. It makes many requirements of both management and personnel staff.
- II. Division agencies periodically make special salary adjustments (known as +5%'s) as authorized in NAC 284.206, sections 2, a - d. Like classification actions, these are to be analyzed in terms of funding authorizations.
- III. Each agency shall formulate policies and procedures to implement the provisions in this policy or shall incorporate this policy into its policy and procedure manual.



Administrator

ATTACHMENT A: DHHS Classification Policy and Procedures

ATTACHMENT B: DHHS Position Classification Checklist

Effective Date: 11/1/97
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Date Reviewed: 11/1/99, 3/10/05
Date Approved by MHDS Commission:

ATTACHMENT A

DEPARTMENT OF HEALTH AND HUMAN SERVICES CLASSIFICATION POLICY AND PROCEDURES

POLICY:

The policy of the Department of Health and Human Services (DHHS) requires divisions to:

- 1) plan in advance for their staffing needs
- 2) operate within the staffing requirements represented and authorized in their budgets
- 3) periodically review the appropriateness of the classification of positions
- 4) ensure the sum of duties supervisors assign to each position is consistent with the classification of the position
- 5) ensure changes in classification actions are based on organizational needs and not based upon the incumbent in the position
- 6) ensure supervisors obtain appropriate authorization for proposed classification actions prior to assignment/removal of duties which are anticipated to result in the reclassification of a position
- 7) ensure, to the extent possible, consistency in classification of positions with comparable duties among divisions within DHHS and other state departments

GENERAL OVERVIEW & REQUIREMENTS:

The purpose of position classification is to ensure jobs which are assigned duties and responsibilities similar in nature and level are placed in the same class.

The process for reviewing a position involves the analysis of classification factors required of the individual in order to perform the duties and responsibilities of a position. The **classification factors** used in this analysis are: nature and complexity of work; supervisory responsibility; scope of responsibility/consequence of error; independence; authority to take action; personal contacts; degree of knowledge, skills, and abilities required. Positions allocated to the same class are not expected to be identical. Typically there are weak and strong positions in each class.

The Department of Personnel is responsible for determining the appropriate classification of positions and their classification decision may differ from the grade level authorized in the agency's/division's budget.

The purpose of position classification is **not** to serve as a method to: motivate an employee who is at the top of his/her salary range; reward an employee with outstanding performance or superior qualifications; retain an employee who is considering another position; reward an employee for educational accomplishments; recognize an increase in the volume of workload comprised of the same level of duties.

The reclassification of an existing position requires that "**significant change**" to the duties and responsibilities of the position has occurred since the last time the position was reviewed and the duties and responsibilities are outside the scope of the current classification and result in the preponderance of duties being allocated to a different class.

A classification study may result in a position remaining in the same classification or in the position being allocated to a new or existing class at a higher grade, a lower grade or the same grade as determined by the Department of Personnel.

The appointing authority is responsible for long-term and short-term planning to determine the organizational structure and staffing necessary to carry out the mission of the agency/division effectively and efficiently within available financial resources. Requests for new positions and proposed reclassification of existing positions are to be included in the proposed budget for the agency/division. Proposed new positions and reclassifications may or may not be approved. Agencies/divisions must operate within the authorized staffing levels.

Requests for reclassifications, beyond those approved through the legislative process, will only be considered by DHHS quarterly commencing December 1 following adjournment of the legislature, absent exigencies. Divisions should contact DHHS to schedule a meeting with the Deputy Director, Administrative Services to discuss such requests.

If an agency/division anticipates a reorganization or the assignment of duties to a position that will likely result in the reclassification of the position, approval of the DHHS and of the Budget Division of the Department of Administration must be obtained **prior** to assigning the duties to the employee. This approval is documented on the position questionnaire/position classification checklist prior to the position questionnaire (NPD-19) being forwarded to the Department of Personnel for processing.

The agency/division is also responsible for ensuring the incumbent in a position proposed for reclassification meets the minimum qualifications for the proposed classification. Positions will not be reclassified to a higher grade through the individual classification process if the incumbent does not meet the minimum qualifications for the higher level position.

For agencies required to use the equipment or services of the Department of Information Technology (DoIT), proposed classification of information technology positions requires the approval of the Director of DoIT. The Department of Personnel will secure this approval prior to processing the classification or reclassification request (NRS 284.172).

The reclassification of a position from one occupational group to another requires the approval of the legislature or the interim finance committee.

PROCEDURES:

I. Classification

A. Position Description Questionnaire

All sections of the position description questionnaire (NPD-19) must be completed. The duties performed in the job must be clear and complete and reflect what the incumbent does as well as how and why it is done. The frequency with which the duty is performed must be reflected and all percentages added together must total 100%. Related factors and personal traits such as cooperativeness, confidentiality, dependability, etc. are not duties and therefore should not be listed as such. For reclassifications, an asterisk must be placed next to each new duty.

Organizational charts are required with the position description questionnaire and must be the official organizational chart authorized by the division administrator, current, an accurate reflection of reporting relationships, and in the prescribed DHHS organizational chart format (*see organizational chart conventions effective 2/7/06*) to include for each position displayed, the incumbent's name, official class title, grade, budget account and position control number. The organizational chart and information contained in sections 7 and 10 of the position description questionnaire must correspond.

B. Position Classification Checklist

The position classification checklist (attached) is a tool to document the following:

- 1) A preliminary analysis of a new position or the proposed reclassification of a position has been conducted.
- 2) In the case of a proposed reclassification, the preliminary analysis has resulted in a determination that significant change has occurred.
- 3) A comparison of the position has been made with the class specification and similar positions have been identified within the division, the DHHS, and, to the extent knowledgeable, other departments.

The position classification checklist is initiated by the supervisor/manager by completing Section 1 and, for reclassification requests, Section 2. Section 2 is to describe, from a divisional perspective, the justification for a change in duties. The division personnel officer is responsible for completing Section 3 of the form, to include an analysis of comparable positions. For reclassifications, Section 4 must contain the division administrator's explanation of his/her position on the request in addition to funding information.

The checklist must be signed by both the division personnel officer and the division administrator. **Signature authority may not be delegated.** The signatures denote that the checklist and position description questionnaire have been reviewed, all required information is present, complete, accurate and in compliance with regulation and policy. The signed and completed checklist and position questionnaire is to be forwarded to the DHHS Deputy Director, Administrative Services.

C. New Positions

At the time a position description questionnaire for a new position is prepared the appointing authority, in consultation with the agency and division personnel officer, will determine the appropriate classification to request for the position based upon a review of the information included in the position description questionnaire, a review of class specifications, and identification of comparable positions.

After the end of the legislative session, the position classification checklist (Sections 1 and 3 and signatures) must be completed and submitted with the position description questionnaire (NPD-19) to the DHHS Deputy Director, Administrative Services who will forward it to the Department of Personnel or to the Budget Division if the NPD-19 has not yet been signed by the budget analyst. The division personnel officer is responsible for retaining a copy of the NPD-19 for the division's position description file.

It is not necessary to submit a position classification checklist nor to submit the NPD-19 to DHHS for new positions in "short form" classes with standardized duties (e.g., Social Worker 2; Mental Health Technician 3; Family Services Specialist 2, Psychiatric Nurse 2; Developmental Specialist 3) provided the division has used these classes in the past and is using them in the same manner. These classifications are authorized by the Department of Personnel to be submitted on an NPD-19s (short form) along with a copy of the class specification and applicable organizational chart.

D. Proposed Reclassification

When a change in duties is contemplated by a supervisor or appointing authority to better meet organizational needs or due to newly established program requirements, the position(s) which will be affected by the change in duties must be identified. A preliminary analysis must be completed to determine the effect the reassignment of duties has on the position(s) receiving or giving up duties. The analysis must include the business necessity for the assignment or reassignment of job duties. Supervisors are accountable for ensuring positions are functioning within the parameters of the class to which the position is currently allocated. Prior to adding, changing or removing duties from a position, the supervisor/appointing authority must consult with the agency and division personnel officer to analyze the effect, if any, on the position's level of classification. The position description questionnaire should indicate that changed responsibilities will be effected "upon approval". Duties which may warrant reclassification to a higher grade level must not be assigned until such time as the position questionnaire has been approved by the division administrator, DHHS, and the Budget Division.

If the preliminary analysis reveals the proposed changes will result in "significant change" to a position, a position description questionnaire and position classification checklist must be completed identifying the appropriate classification based upon the information review, a review of the class specification, and identification of comparable positions. After the division administrator has approved the proposed reclassification, the checklist and NPD-19 are to be submitted to the DHHS Deputy Director, Administrative Services. The division personnel officer is responsible for retaining a copy of the NPD-19 for the division's position description file.

E. Employee-Initiated Reclassification Requests

An employee may complete and submit a Position Description Questionnaire (NPD-19) if he/she believes there has been significant change to his/her position. The employee may submit the NPD-19 directly to the Department of Personnel. If the employee submits the NPD-19 to the supervisor, appointing authority or division personnel officer, the NPD-19 should be forwarded immediately through the division personnel officer to the Department of Personnel and a copy retained by the division for processing regardless of whether or not the division approves of the reclassification.

In instances where the agency/division does not agree the duties and responsibilities described by the employee are completely accurate, the appointing authority shall prepare a memorandum to submit through the division administrator to the Department of Personnel outlining the areas of concern with a copy to the DHHS Deputy Director, Administrative Services.

Upon receipt of notification from the Department of Personnel that an employee has submitted a reclassification request or upon transmittal by the division of the employee's NPD-19 to the Department of Personnel, Sections 1, 2 & 3 of the Position Questionnaire Checklist must be completed and signed. The checklist must be submitted with the copy of the NPD-19 and copy of any explanatory memo to the DHHS, Deputy Director, Administrative Services. The DHHS Deputy Director, Administrative Services will forward the checklist to the Department of Personnel.

If duties were inappropriately assigned to a position, the appointing authority may remove the duties and must provide written notification to the Department of Personnel with a copy to the DHHS Deputy Director, Administrative Services. Based on the information received by all parties, the Department of Personnel will render a classification decision. If the NPD-19, prior to the removal of duties, was accurate and supported the reclassification of the position, the result may be the need to provide a special adjustment to salary for working out-of-class or to provide for a temporary reclassification of the position prior to downward classification to the authorized level. Appropriate action must be taken by the division administrator to ensure supervisors/managers do not work employees out-of-class. When developing budget requests, division should also keep in mind that sometimes significant change is not the result of duties being assigned/removed but rather a result of gradual change that has occurred to a position over a period of years.

The division personnel officer is responsible for maintaining a copy of the NPD-19 and related correspondence in the division's position description file.

F. Comparisons

The division personnel officer is responsible for identifying positions which are comparable to the position under review based on similarity of duties performed and on the classification factors:

- Nature and complexity of work
- Supervisory responsibilities
- Scope of responsibility/consequence of error
- Independence/supervision received
- Authority to take action/decision-making
- Personal contacts
- Degree of knowledge, skills and abilities required

This would include, for example, counterparts in other agencies/divisions, positions currently in the same classification and in the requested classification, with identifiable differences noted, and other positions which should be considered to maintain internal equity. Positions identified should be those which the division personnel officer wants the Department of Personnel to consider in their analysis.

Based on the preliminary analysis, the division personnel officer should be able to identify and understand in sufficient detail to engage in meaningful discussion with DHHS and the Department of Personnel: the change that has occurred and whether it is "significant" within the context of the regulations; the positions with which the position compares (budget account, position control number, class title, name); the reasons the position compares favorably or unfavorably in terms of duties and classification factors; the class specifications with which the position has been compared and the reasons the position compares favorably or unfavorably.

The preliminary analysis may require the agency/division personnel officer to clarify the duties of the position through discussion with the supervisor and/or employee. Review of the division's organizational chart, the division's position description file, and work performance standards may assist in identifying positions for comparison. Other resources available at the Department of Personnel and accessible to their analysts are class specification history files and position description questionnaires from occupational studies and individual studies.

While the agency/division personnel officer should be prepared to discuss the agency's/division's perspective, it is **not** expected that the agency/division personnel officer will conduct the classification analysis for the Department of Personnel. Agency/division officers must defer from assuming such a role.

G. Results of the Study

It is the responsibility of the agency personnel officer to promptly provide a copy of correspondence regarding classification determinations from the Department of Personnel to the division personnel officer and DHHS Deputy Director, Administrative Services and also to provide them with a copy of the cover page of all NPD-19s for new and reclassified positions, designating the final classification determination.

Allocation decisions may be appealed by the employee or by the appointing authority within 20 working days after receipt of written notice from the Department of Personnel of the determination by filing a written appeal with the Director of the Department of Personnel. The written appeal must address the points outlined in the Department of Personnel's recommendation and indicate the points and reasons for disagreement.

If the appeal is not resolved at the Director of Personnel's level, a written appeal may be filed with the Personnel Commission within 30 calendar days after receipt of the Director's written decision.

II. Requested Changes to Class Specifications

Any requests for changes to class specifications must be submitted to the Deputy Director, Administrative Services prior to submission to the Department of Personnel. Changes which can be requested include updates to terminology, changes to minimum qualifications, or the creation/revision of a class or class series. Such requests should include the reasons for the requested changes and identification of which positions will be impacted. Some changes may also require submission of a NPD-19 to support the request.

References: NRS 284.160; 284.165; 284.170; 284.171; 284.172; 353.224
NAC 284.126 - 284.152

Effective Date: 8/22/00
Revised: 7/6/05
Revised: 10/10/07

ATTACHMENT B

DEPARTMENT OF HEALTH AND HUMAN SERVICES POSITION CLASSIFICATION CHECKLIST

*This form is to be completed **before assigning duties** that could result in reclassification or upon notification from the Department of Personnel that they are in receipt of a NPD-19. Refer to DHHS Classification Policy & Procedures.*

SECTION 1 – POSITION INFORMATION (To be completed by **Supervisor/Manager**)

Employee's Name:

Division:

Bureau/Section:

Current Classification:

Class Code:

Grade:

Requested Classification:

Class Code:

Grade:

Budget Account No.:

Position Control No.:

New Position: YES NO

SECTION 2 – JUSTIFICATION FOR CHANGE IN DUTIES (To be completed by **Supervisor/Manager** for reclassification requests)

1. What is the purpose of assigning/removing duties to/from this position: What organizational need do you propose to accomplish by this action?
2. When are you proposing the duties be reassigned/removed, or when were they assigned/removed?
3. Have these duties previously been performed by any other positions? Which ones? (indicate budget account, position control, class title and grade)
4. Are there other positions that should be established or which were established to complete duties? Which positions? (Indicate budget account, position control, class title and grade)

5. What would be the consequences to the agency of this position not being reclassified?

SECTION 3 – FISCAL/PERSONNEL INFORMATION (To be completed by **Division Personnel Officer**)

1. Is this request agency or employee initiated? Agency Employee

2. Is this reclassification approved in the current budget? YES NO

If YES, approval effective:
If NO, state reason.

3. Is this reclassification requested in the budget for the next biennium? YES NO

If YES, approval effective:
If NO, state reason .

4. Has this request been approved by your budget analyst? YES NO

5. If reclassification is approved, is IFC approval required? YES NO

6. Is approval of the Director of DoIT required? YES NO

7. If occupied, does incumbent meet the minimum qualifications of requested class:

YES NO UNKNOWN

8. The following positions in this division, DHHS or other state departments have been identified as those which should be considered by the Department of Personnel in their analysis. Include comments regarding comparability to the subject position.
(Complete for new positions and reclassification requests)

9. Other comments:

SECTION 4 – DIVISION’S POSITION (To be completed by the **Division Administrator** for reclassification requests)

1. The Division:

Supports the request. Explain:

Does not support the request. Explain:

Is unable to determine appropriate classification. Indicate comments/concerns:

2. How will the Division fund the request if it is approved?

Supervisor’s Signature: _____ Date: _____

Agency Personnel Officer’s Signature _____ Date: _____

Division Personnel Officer’s Signature (*only*) _____ Date: _____

Division Administrator’s Signature: (*only*) _____ Date: _____

DHHS Deputy Director, Adm. Svcs.’s Signature: _____ Date: _____

Comments: