

### POSITION RECLASSIFICATION QUESTIONNAIRE

**To Employees:** Review your current job description (find it on SnoLink or ask HR) then complete the Position Description Questionnaire. Attach your current job classification and any extra pages to provide any other information you believe will be helpful in understanding the job duties assigned to your position. Keep a copy of the questionnaire for your records, and give the completed form to your supervisor for review and sign-off.

**To Supervisors/Managers:** Review the employee's statements and complete the "Supervisor Review" section and forward the completed form to your Director for review and sign-off. Once that is completed, send the form to the Human Resources.

#### SECTION I – EMPLOYEE INFORMATION

Employee Last Name: Bruce		First Name: Hollianne		Middle: N.
Work Telephone: 425-339-5213	Work Email Address: hbruce@snohd.org		Employee ID Number: 23073	<b>Work Days and Work Hours :</b> Monday: 7:30-4
Time with Organization: 18 years	Time in Current Job: 17 Years	Regular worked hours per week: 40		Tuesday: 7:30-4
Division: Prevention Services	Program: Assessment and Epidemiology	Position: Full Time X Part Time		Wednesday: 7:30-4
Supervisor/Manager Name: Carrie Parker		Extension: 8634	Email Address: cparker@snohd.org	Thursday: 7:30-4
Working Title – If different than the current job classification, please state what it is: Epidemiologist II				Friday: 7:30-4
				Sat/Sun:

#### SECTION II – CURRENT POSITION INFORMATION

<p><b>1. Summarize the main reason(s) your current position exists</b>, in three to four sentences. This statement should include the position's general function and overall level of responsibility.</p> <p>My current position exists to serve as the regional and local communicable disease epidemiologist. I provide epidemiological expertise in the area of communicable disease, including consultation, data analyses and reporting. I serve as a point of contact and am responsible for coordinating communicable disease surveillance and outbreak response.</p>
<p><b>2. Specify the job classification you think provides the best match for your position.</b> <i>***Please submit supporting documents with questionnaire.</i></p> <p>Epidemiologist III – Communicable Disease Epidemiologist</p>
<p><input type="checkbox"/> <b>Do Not Know</b> (Check this space if you do not have an opinion about the proper classification for your position)</p>

**NOTE:** The % Time columns in Questions #3 and #4, must equal 100%.

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<ul style="list-style-type: none"> <li>• Conduct in-depth surveillance activities and case investigations, including medical record data abstraction for suspected or confirmed disease cases and for disease-free persons for comparison</li> </ul>	5		
<ul style="list-style-type: none"> <li>• Collect and organize health-related data. Check data for completeness, accuracy and compliance with survey protocols including follow-up data sampling audits. Review medical records to confirm appropriate diagnosis and treatment</li> </ul>	5		
<ul style="list-style-type: none"> <li>• Coordinate and conduct follow-up investigation of cases with health district and other staff</li> </ul>	2		
<ul style="list-style-type: none"> <li>• Participates in development of program disease investigation/surveillance protocols and program policies as needed.</li> </ul>	2		
<ul style="list-style-type: none"> <li>• Collaborates with community healthcare providers to provide education regarding communicable disease testing, disease protocols, and reporting.</li> </ul>	1		

**4. Examples of Work Performed NOT listed in current job description:** Describe job duties that you do that are not included in your current job description (those which take at least 5% or 2 hours per week to perform, in order of most important to least important.) *Attach additional sheets if necessary.*

NOTE: The % Time columns in Questions #3 and #4, must equal 100%.

Job Duties	*% Time Total (with above) Must Equal 100%
<ul style="list-style-type: none"> <li>Coordinates communicable disease work assignments within the Assessment and Epidemiology and CDSR teams, including delegating assignments and providing project deadlines</li> </ul>	5
<ul style="list-style-type: none"> <li>Lead communicable disease investigation activities within CDSR and Assessment and Epidemiology teams, including assuring proper public health interventions have been implemented.</li> </ul>	10
<ul style="list-style-type: none"> <li>Lead communicable disease epidemiology outbreak response activities, including work assignments within CDSR and Assessment/Epidemiology; coordinating internal team interactions when response requires CDSR/Assessment/Epidemiology to response along side other SHD teams/programs; and reporting outbreak response activities to Health Officer and within Incident Command.</li> </ul>	10
<ul style="list-style-type: none"> <li>Serve as communicable/infectious disease epidemiology subject matter expert</li> </ul>	2
<ul style="list-style-type: none"> <li>Leads and conducts case investigations of cases of highly communicable or newly emerging infectious diseases</li> </ul>	3
<ul style="list-style-type: none"> <li>Serve as lead point of contact for Snohomish Health District Health Officer regarding epidemiological activities, analyses, and reports, including accepting projects and work assignments from the Health Officer and assigning to the Epidemiology/Assessment team to assure completion of the project</li> </ul>	5
<ul style="list-style-type: none"> <li>Serve as lead point of contact for Washington State Department of Health (DOH), other LHJs, and community partners regarding communicable disease surveillance and response activities</li> </ul>	3
<ul style="list-style-type: none"> <li>Partners with DOH and other community partners on investigation and research manuscripts for publication</li> </ul>	1
<ul style="list-style-type: none"> <li>Snohomish County datasteward for access to DOH data systems</li> </ul>	1

**5. How long have you performed the duties that you believe fall outside your current job classification?**

I have been leading communicable disease surveillance and outbreak response activities since April 2016 when the long-term CDSR Supervisor retired. In interims between CDSR supervisors, I have coordinated CDSR surveillance and response activities. I have continued in this leadership role assisting new CDSR supervisors and have become a lead within the Assessment and Epidemiology team regarding communicable disease surveillance and response.

**6. What training and/or experience have you acquired to perform your current duties?**

I have a Master of Public Health degree in epidemiology. I have been working in communicable diseases epidemiology and public health emergency preparedness for 18 years at the Snohomish Health District. During this time I have had increasing responsibility and gained expertise in the field of communicable disease epidemiology. I also have a degree in Health Information Administration, and have worked in the field of clinical research. This experience have given me a solid background in disease pathology and acute care. I have worked with DOH, infection preventionists, healthcare providers and facilities, schools, and other community partners. I have collaborated on published public health research articles including influenza H1N1 and COVID-19.

**7. Decision-making Authority:** Provide some examples of decisions you make without consulting with your supervisor.

- Assigning communicable disease related work to other CDSR and Assessment and Epidemiology team members during outbreak response
- Collecting and analyzing communicable disease data
- Providing data and reports to internal and external partners
- Created trainings/presentations for internal and external partners
- Coordinated with community partners on infection prevention and outbreak response
- Providing guidance and expertise on communicable diseases to internal and external partners
- Partnering and consulting with DOH on communicable disease surveillance and response activities
- Working directly with the Snohomish Health District Health Officer on epidemiological projects and reports

### SECTION III – REVIEW & SIGN-OFF

#### EMPLOYEE REVIEW & SIGN-OFF

☐ The information I have provided is accurate and complete.

**EMPLOYEE SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

#### SUPERVISOR/MANAGER REVIEW & SIGN-OFF

The information on the position questionnaire is accurate and complete. ☐ Yes ☐ No

If you do not agree with information on this Position Questionnaire, please note.

**Check the statement that most accurately describes the level of supervision you exercise over this position:**

- ☐ Work assignments are generally recurring and/or the employee receives instructions and deadlines for each work assignment. Tasks are reviewed upon completion.
- ☐ Work assignments vary. The employee is given general priorities but determines work methods and the order in which tasks will be completed.
- ☐ The employee is given general job goals and responsibilities and determines tasks to be completed and work methods.

**Give examples of decisions that the employee is authorized to make without your prior review:**

**Add any additional information that you believe should be considered in the review of this position:**

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (print or type)

#### DIRECTOR REVIEW & SIGN-OFF

**Do you agree with the employee's description of his/her work, job, and its requirements? Yes/No**

**IF NO, PLEASE EXPLAIN.**

**Use this space to add information or clarification to the employee's questionnaire.**

**Except as noted above, the employee's questionnaire is an accurate and complete representation of his/her work.**

\_\_\_\_\_  
Department Administrator Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (print or type)