

# REQUEST FOR BOARD ACTION

## HENDERSON COUNTY BOARD OF COMMISSIONERS

**MEETING DATE:** November 16, 2016

**SUBJECT:** Public Health Nurse II positions – Health Department  
Recommendation to Maintain Exempt Status

**PRESENTERS:** Steve Smith, Health Director  
Jan Prichard, Human Resources Director

**ATTACHMENTS:** 1. PHN II Classification – Exempt Designation Considerations  
2. Human Resources Salary Detail for current PHN II 10 month positions  
3. 2015-2016 School Health End of Year Report, 2015-2016, pgs. 9-11

### **SUMMARY OF REQUEST:**

The Henderson County Department of Public Health recommends expanding the current 10 month school nurse positions (6) to full time to meet the increased demands for student populations in the summer months. This action would provide a consistent staffing model for all Public Health Nurse II positions and would facilitate the maintenance of their exempt status. The proposal would protect and expand public health nursing capacity without adding another position.

The additional expense can be covered by lapsed salaries within the current FY 17 budget, but the additional salary would need to be incorporated for the FY 18 budget.

### **BOARD ACTION REQUESTED:**

The Board is requested to approve the proposed expansion of six 10 month Public Health Nurse II positions to full time.

### **SUGGESTED MOTION:**

*I move that the Board of Commissioners approve the proposal to expand six 10 month Public Health Nurse II positions to full time and to make the necessary adjustments within Henderson County Human Resources to maintain exempt status for Public Health Nurse II positions.*



**Public Health**  
Prevent. Promote. Protect.

# Henderson County Department of Public Health

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October 12, 2016

## Public Health Nurse II Classification – Exempt Designation Considerations

Public Health Nurse II positions within the Department of Public Health are the single largest category of all position types (exempt or non-exempt) comprising over 25% of the public health workforce. The majority of public health services have always been centered on the core concept of nursing level deliverables. Although public health nurses are all required to have the same baseline education and experience levels to work within a health department, public health nursing practice is complex with unique training and certification levels for different functions. Public health nursing services within the department are divided into 4 primary operations which include care management, school health, immunizations/communicable disease and clinical services. All of these functions are embodied in mandated services for public health.

The fundamental justification for maintaining the exempt status for this classification is related to capacity. Analysis of various work efforts have identified limited opportunities for time management within a weekly context and many public health demands are not planned and must be addressed within a compressed timeframe. Two examples include communicable disease outbreaks and the flu vaccination campaign within the public school system. When we evaluated these two scenarios in detail, they consistently required more than 40 hours of work within a week and there was no opportunity to reduce time to offset the demand.

In an analysis of program time documentation from all public health nurse II positions with pay periods from 6/27/2015 to 12/26/2015, there were 294 values with complete time for the particular pay period, 112 (38%) of those values exceeded 75 hours and 43 (15%) of those were 80 hours or greater. The range for those exceptional values was from 75.50 to 93.75 hours. Currently, we are able to manage and provide consideration for additional work hours over the course of a year. Non-exempt status obligations limit any adjustments to a singular week (for overtime) and to 2 weeks (for comp time). In most of our cases, these kinds of adjustments would not have been possible within those timeframes. An approximate hourly wage for these positions is \$25.82 which would increase to \$38.73 for any overtime which could not be avoided in a non-exempt scenario.

From a financial perspective, the starting salary for this particular pay grade (79) is \$47,424 which is just under the new FLSA exempt salary threshold of \$47,476. Given the relatively small pay scale adjustment for starting salaries in the pay grade, the maintenance of capacity and flexibility for these particular nurse positions and their work efforts would appear to be in the best interests of the community we serve and the mission of Henderson County to provide services.

A unique consideration within this context are the school nurse positions that are structured to work only 10 months a year. Based on recent discussions with Human Resources and the increased demands on these positions in the summer, the desired solution would be to expand these commitments to full time 12 month positions (see Human Resources detail for this calculated cost for a complete fiscal year). This expansion cost is significant and will need to be considered from a short and long term perspective. Based on our past and current salary consumption rates in the General Health budget, the additional cost associated with the expanded salaries for these positions within this fiscal year could be covered with projected lapsed salaries (through June 30, 2016). For subsequent fiscal years, these additional costs would need to be budgeted.

As an example of additional demands on school nurses, the public school system has added or expanded a multitude of programmatic options during the summer season including RTA (Read to Achieve), summer school and PSPlus. Please reference the table below:

<b>2014</b>	<b>2016</b>
RTA & Summer School - 1198	RTA & Summer School - 9922
PSPlus - 478	PSPlus - 6345
3 sites	23 sites

Although there is some duplication among these numbers and the census doesn't imply that all of these students are in school throughout the entire summer, even a conservative approach using just RTA/Summer School counts (not PSPlus) indicates a 10 fold increase in 2 years. That increase is further exacerbated by the need to now cover 23 different sites on a simultaneous basis. To gain additional insights about the types of demands within the student population, please reference pages 9-12 from the 2015-2016 End of Year Report for School Health Services.

Summary

- Public Health Nurse II positions represent the single largest category of all position types (exempt or non-exempt) within the Department of Public Health
- Categorical nursing operations of communicable disease/immunizations, clinical services, care management and school health are specialized and capacity from one can not be readily exchanged with another (all nursing activities generate revenue with the exception of school health)
- Daily obligations are tied to mandated services and/or contractual obligations
- Surge demands like vaccination initiatives, preparedness activities and communicable disease outbreaks are unpredictable and would be challenging to time manage given the application of non-exempt status requirements without reducing or eliminating services in other operations for a period of time
- There is practically no up front cost for maintaining the majority of public nurse II positions in an exempt status with the exception of the various considerations related to 10 month school nurse positions
- Expanding the 10 month school nurse positions to 12 months is a reasonable response to the increased obligations school nurses now have with the higher student census numbers in those summer months
- Recommendation from Department of Public Health to provide every consideration for maintaining public health nurse II positions in an exempt status to sustain capacity and flexibility for public health operations in order to meet the needs of the community



2015-2016 End of Year Report, Section Two  
**Table 13: Identified Health Conditions\***

58. Total number of individual students with one or more chronic health conditions. \_3895

The following chart is also available in a formatted Excel chart for individual nurse use. Please record the number of individual students with one or more identified health conditions below. **An identified health condition is one which requires some degree of action at school: medication available, emergency and/or individual health care plan, health related accommodations, etc. Parental listing of a history of a condition that is not addressed by services at school should not be included.**

An individual student may have dual/multiple diagnoses, so the total number of diagnoses will be larger than the total number of students with chronic health conditions (question 58). A care plan or 504 may not be necessary for each student. The totals in this table will not be the same as the number of individual students in item 58 above. **All plans related to the same diagnosis for an individual student should be counted together (Ex: A student with a diabetes IHP, who also has an EAP for emergency needs related to diabetes, should have those plans counted together as one, since all are considered a component of the overall nursing care plan for that student).**

Condition	Elementary (K-5)	Middle (6-8)	High (9-12)	Number of related plans of care	Number of health-related 504 plans
ADD/ADHD	272	149	195	0	58
Allergies (severe)	226	76	134	133	0
Asthma	520	255	322	332	1
Autistic disorders (ASD) including Asperger's Syndrome, PDD	67	14	27	0	15
Blood disorders not listed elsewhere: (e.g. chronic anemia, Thalassemia)	3	3	6	2	0
Cancer, including leukemia	3	2	7	8	4
Cardiac condition	44	16	17	30	3
Cerebral Palsy	4	9	11	15	0
Chromosomal/genetic conditions not otherwise listed including Down Syndrome, Fragile X, Trisomy 18	21	11	10	5	2
Chronic encopresis	7	0	0	7	0
Chronic infectious diseases: including Toxoplasmosis, Cytomegalovirus, Hepatitis B, Hepatitis C, HIV, Syphilis, Tuberculosis	2	0	1	0	0
Concussion	6	0	5	11	4
Cystic Fibrosis	2	1	0	3	3
Diabetes Type I	8	10	20	38	36
Diabetes Type II	0	1	3	1	0

2015-2016 End of Year Report, Section Two

Condition	Elementary (K-5)	Middle (6-8)	High (9-12)	Number of related plans of care	Number of health- related 504 plans
Eating Disorders (including anorexia, bulimia)	1	0	5	0	0
Emotional/behavior and/or psychiatric disorder not otherwise listed	37	32	64	15	12
Fetal Alcohol Syndrome	3	0	0	0	0
Gastrointestinal disorders (Crohn's, celiac disease, IBS, gluten intolerance, etc.)	40	16	28	17	5
Hearing loss	27	10	6	0	0
Hemophilia	0	0	0	0	0
Hydrocephalus	2	0	1	0	0
Hypertension	2	1	8	0	0
Hypo/Hyperthyroidism	0	1	4	0	0
Integumentary (skin)	15	0	2	0	0
Metabolic conditions or endocrine disorders not otherwise listed	5	3	3	3	0
Migraine headaches	27	18	38	7	5
Multiple Sclerosis	0	0	0	0	0
Muscular Dystrophy	2	1	3	4	0
Obesity (> 95 <sup>th</sup> % BMI)	25	1	0	0	0
Orthopedic disability (permanent)	8	3	11	5	0
Other neurological condition not otherwise listed	24	12	18	12	6
Other neuromuscular condition not otherwise listed	4	2	5	5	2
Renal / Adrenal / Kidney condition including Addison's	6	5	3	2	2
Rheumatological conditions (including Lupus, JRA)	2	1	3	5	5
Seizure Disorder/Epilepsy	34	16	41	55	22
Sickle Cell Anemia	0	0	0	0	0
Sickle Cell Trait (only)	0	0	0	0	0
Spina Bifida (myelomeningocele)	3	1	0	4	0
Traumatic Brain Injury	2	2	4	3	2
Visually impaired (uncorrectable)	19	9	8	0	0

2015-2016 End of Year Report, Section Two

**Table 14: Health Care Procedures\***

Please indicate the **number of students** in each grade category who have orders for the following health care procedures at school.

Type of Procedure	Elementary (K-5)	Middle (6-8)	High (9-12)	Total
Blood glucose monitoring	08	10	20	38
Clean intermittent catheterization	2			2
Central Venous Line monitoring				
Dressing change/Wound Care				
Insulin injection	8	10	20	38
Insulin pump	2	5	10	17
Nebulizer treatment				
Oxygen Therapy	2	3	2	7
Pulse oximeter	2	3	2	7
Respirator care				
Shunt care		1		1
Tracheal suctioning (include tracheostomy care)	1	1	1	1
Stoma care (other than tracheal)	4	6	8	18
Tube feeding	4	6	8	18
Reinsertion of feeding tube	4	6	8	18
Vagal Nerve Stimulator	2	6	10	18

59. List other health care procedures not included above: \_\_\_\_\_

**Screening, Referrals and Secured Care- Refer to definitions**

Please complete the attached Excel spreadsheet to indicate the number of PreK-12 students screened, referred and those who secured care by the School Nurses, school health staff, school personnel, or volunteers in each category at any time during the school year. Please email this spreadsheet to your Regional School Health Nurse Consultant along with this report.

**School Nurse Encounter Outcomes\***

- 60. Number of student encounters/health office visits, for any purpose, to the school nurse resulting in the student returning to class? 9463
- 61. Number of student encounters/health office visits, for any purpose, to the school nurse resulting in 911 being called? 55
- 62. Number of student encounters/health office visits, for any purpose, to the school nurse resulting in the student being sent home? 994