|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  | |  | | --- | | **State of Michigan Civil Service Commission** | |  |  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **Position Code** | |  | |  |  | | |  | | --- | | 1. PLNURSEE | | | | |  | |  | | --- | | Capitol Commons Center, P.O. Box 30002 Lansing, MI 48909 | | | | | |  | |  |  |  | |  |  |  |  |  |  |  |  | |  |  | |  | | --- | | **POSITION DESCRIPTION** | | | |  |  |  | |  |  |  |  |  |  |  |  | |  |
|  |  |  |  |  |
|  |  | |  |  | | --- | --- | | |  | | --- | | This position description serves as the official classification document of record for this position. Please complete the information as accurately as you can as the position description is used to determine the proper classification of the position. | | |  | | |  |  | | --- | --- | | **2. Employee's Name (Last, First, M.I.)** | **8. Department/Agency** | |  | DOC-MUSKEGON FACILITY | | **3. Employee Identification Number** | **9. Bureau (Institution, Board, or Commission)** | |  | Bureau of Health Care Services | | **4. Civil Service Position Code Description** | **10. Division** | | PRACTICAL NURSE LICENSED-E | Health Care – Kinross Administration/Northern Facilities | | **5. Working Title (What the agency calls the position)** | **11. Section** | | Practical Nurse Licensed | Nursing | | **6. Name and Position Code Description of Direct Supervisor** | **12. Unit** | | ; REGISTERED NURSE MANAGER-2 13 | Muskegon Correctional Facility | | **7. Name and Position Code Description of Second Level Supervisor** | **13. Work Location (City and Address)/Hours of Work** | | WILKINSON, MICHAEL E; REGISTERED NURSE MANAGER-4 15 | 2400 S Sheridan, Muskegon, MI 49442 / 80 hours per pay period | | |  | | |  |
|  | |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  | |  | |  | | --- | | **14. General Summary of Function/Purpose of Position** | |  |  | |  |  |  |  | | |  | | --- | | This employee performs a full range of practical nurse assignments.  The work requires considerable knowledge of the proper methods and procedures for performing assignments as well as considerable knowledge of basic nursing techniques and methods.  He/she works at the Muskegon Correctional Facility providing practical nursing assignments to convicted felons  under the supervision of a Registered Nurse at all times. | | | |  | |  |  |  |  | | | |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **15. Please describe the assigned duties, percent of time spent performing each duty, and what is done to complete each duty.  List the duties from most important to least important. The total percentage of all duties performed must equal 100 percent.** | | | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | **Duty 1** | | | | **General Summary:** | **Percentage:** | **35** | | Follows policy and procedure related to the procurement, receipt, storage, control, distribution, return and disposal of medications. | | | | **Individual tasks related to the duty:** |  |  | | * Updates Medication Administration Record (MAR) for restricted/KOP medication and Medication Tracking Record on refill orders for medication prescribing, making appropriate determination for restricted medication, and changed dosages/alternative medication, medications for release or parole. * Documents examination and verbal orders obtained from MP/DDS, forwarding same to MP/DDS for approval. * Receives/verifies medications from pharmacy. Stores and maintains perpetual inventory of controlled substances, emergency drug box and other medications as required. Inventories and orders non-narcotic medication. Returns and disposes of medication as appropriate. * Administers prescribed medication in restricted medication lines, in housing/segregation areas, for KOP, for urgent/emergent or missing medications, for replacement medications, and for medication during transport as appropriate. * Document medication administration, makes referral for non-adherence/refusal, takes appropriate action for adverse reactions/medication incidents. | | | | **Duty 2** | | | | **General Summary:** | **Percentage:** | **35** | | Performs emergency first aid, routine nursing procedures, and routine health care tasks. | | | | **Individual tasks related to the duty:** |  |  | | * Picks up requests for services from designates sites. * Assists RN with emergency situations. * Completes lab requisitions and other paperwork. * Preps patients for laboratory and other diagnostic studies and other procedures. * Completes AHS and intake screens * Assists with telemedicine appointments. * Provides patient education. * Performs a variety of patient appointments (lab draws, dressing changes, measure and dispense equipment, apply splints, EKS’s Vital signs, CPR gives PPD’s, and other injections, etc.) * Assists RN as needed. * Assists MP as needed. | | | | **Duty 3** | | | | **General Summary:** | **Percentage:** | **15** | | Interdisciplinary/Collaborative Responsibilities.  Promotes the MPRI process from the time of intake at the facility to the time of parole. | | | | **Individual tasks related to the duty:** |  |  | | * Participates as a team member in the provision of nursing and health care, interacting with professional colleagues to provide comprehensive care. * Actively works to identify offender health needs prior to release into the community and communicates their health needs to the Nursing Supervisor, HUM and facility MP. * Ensures at the exit interview that the offender has medications for parole and that his health care needs have been addressed and appropriate community referrals have been initiated. * Communicates with patient, criminal justice system, personnel, and other health care providers. * Makes appropriate and timely referrals to other health care professionals. * Acts as patient advocate for provisions of care and ethical issues. * Accepts referrals from other health care professionals and departments. * Attends staff, Quality/Performance Improvement meetings, and in-service training as assigned. * Assists RN/MP with duties/procedures as assigned. * Reads and documents significant and routine events in communication book. * Monitors and orders clinic supplies and equipment. * Completes required reports related to statistical data collection, critical incident reports, etc. * Performs other duties as assigned. | | | | **Duty 4** | | | | **General Summary:** | **Percentage:** | **10** | | Communication/Accurate and timely documentation and reporting of patient status and care. | | | | **Individual tasks related to the duty:** |  |  | | * Maintains accurate legible and confidential records * Documents in a timely and legible manner. * Provides information regarding patients to other health care members as needed. * Consults with supervisor/manager, other health care professional and departments as required. * Documents in appropriate logs. * Develops therapeutic relationships with patients, demonstrating respect for the patient’s individuality. * Uses the electronic medical record system to document patient encounters. * Attends case management meetings as assigned. * Enters special accommodations into OMNI as appropriate. * Assists with reviewing off-site specialty services documents and schedules appointments as needed. | | | | **Duty 5** | | | | **General Summary:** | **Percentage:** | **5** | | Quality Assurance/Improvement.  Maintains safe environment. | | | | **Individual tasks related to the duty:** |  |  | | * Participates in quality assurance/improvement on ongoing basis, including systematic review of records and treatment plans evaluating the quality and effectiveness of the nursing process. * Maintenance of current knowledge by attending educational programs. * Maintenance of licensure in compliance with current state law. * Complies with Michigan Department of Corrections policies, procedures, and applicable guidelines. * Demonstrates competency as required annually. * Maintains standards of nursing practice. * Maintains safe environment including control of keys, narcotics and critical tools. * Maintains accurate tool count (critical tools, controlled drugs, caustics/flammable, and emergency bag/emergency equipment). * Maintains standard precautions related to infectious disease control. * Recognizes, takes appropriate actions and reports risk issues to supervisor/manager. | | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  | |  |  | | --- | --- | |  |  | |  | |  | | --- | | **16. Describe the types of decisions made independently in this position and tell who or what is affected by those decisions.** | | |  |  | | |  | | --- | | Basic nursing decisions. | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  | |  |  | | --- | --- | |  |  | |  | |  | | --- | | **17. Describe the types of decisions that require the supervisor's review.** | | |  |  | | |  | | --- | | Those that have potential legal or financial impact on the agency. | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  | |  |  |  | | --- | --- | --- | |  | |  | | --- | | **18. What kind of physical effort is used to perform this job? What environmental conditions in this position physically exposed to on the job? Indicate the amount of time and intensity of each activity and condition. Refer to instructions.** | | |  |  | | |  | | --- | | Hazards associated with work within a correctional institution and with prisoners.  The job duties require an employee to work under stressful conditions.  Must be able to walk long distances, stand for prolonged periods, sit and bend.  Must be able to lift 30 pounds and carry 10 feet.  Must be able to walk up and down two flights of stairs.  Must be able to push a stretcher or wheelchair, position patients, and perform CPR.  Work involves shift, weekend, and holiday assignments as well as mandatory or voluntary overtime on any shift.  Must be able to work longer than eight hours in a day, if required.  This position is inside the secure perimeter of a correctional facility and has regular unsupervised contact with prisoners. | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | |  |  |  |  | | --- | --- | --- | --- | | |  | | --- | | **19. List the names and position code descriptions of each classified employee whom this position immediately supervises or oversees on a full-time, on-going basis.** | | | | |  |  |  | | |  | | --- | | **Additional Subordinates** | | |  | |  |  |  | |  | |  | | --- | |  | |  | |  |  |  | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  | | --- | | **20. This position's responsibilities for the above-listed employees includes the following (check as many as apply):** | | | | | | | | | | |  |  |  |  |  |  |  |  |  | |  | |  | | --- | | N | |  | |  | | --- | | Complete and sign service ratings. | |  | |  | | --- | | N | |  | |  | | --- | | Assign work. | |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  | |  | | --- | | N | |  | |  | | --- | | Provide formal written counseling. | |  | |  | | --- | | N | |  | |  | | --- | | Approve work. | |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |  |  |  | |  | | --- | | N | |  |  |  | |  | |  | | --- | | N | |  | |  | | --- | | Approve leave requests. | |  |  | |  | | --- | | Review work. | |  | |  |  |  |  |  |  | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  | |  | | --- | | N | |  | |  | | --- | | Approve time and attendance. | |  | |  | | --- | | N | |  | |  | | --- | | Provide guidance on work methods. | |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  | |  | | --- | | N | |  | |  | | --- | | Orally reprimand. | |  | |  | | --- | | N | |  | |  | | --- | | Train employees in the work. | |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  | | --- | --- | --- | | |  | | --- | | **22. Do you agree with the responses for items 1 through 20? If not, which items do you disagree with and why?** | | | |  |  | |  | |  | | --- | | Yes | | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  | | --- | --- | --- | | |  | | --- | | **23. What are the essential functions of this position?** | | | |  |  | |  | |  | | --- | | To provide a full range of practical nursing care to prisoners in a correctional ambulatory clinic or infirmary, maintain the medical inventory, and provide medications. | | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **24. Indicate specifically how the position's duties and responsibilities have changed since the position was last reviewed.** | | | |  |  | |  | |  | | --- | | The Regional Health Care has reviewed all LPN positions and updated the duties according to current practices; the last PD in PARIS is outdated. | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **25. What is the function of the work area and how does this position fit into that function?** | | | |  |  | |  | |  | | --- | | To provide a full range of health care services to a prison population.  Licensed Practical Nurses provide medication administration, emergency, and routine nursing care for both the physical and mental health of prisoners.  Employee may coordinate specialty services and medical inventory. | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | |  | | --- | | **26. What are the minimum education and experience qualifications needed to perform the essential functions of this position.** | | | | | | |  | |  |  |  |  |  |  |  | | |  | | --- | | **EDUCATION:** | | |  |  |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | Possession of a certificate from a practical nursing education program accepted for licensure by the Michigan Board of Nursing. | | | | | | | | |  |  |  |  |  |  |  | | |  | | --- | | **EXPERIENCE:** | | |  |  |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | **Practical Nurse-Licensed E9** No specific type or amount is required. | | | | | | | | |  |  |  |  |  |  |  | | |  | | --- | | **KNOWLEDGE, SKILLS, AND ABILITIES:** | | | |  |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | Ability to practice nursing under supervision.  Ability to deal with change effectively.  Ability to deal with stress effectively.  Skill to deal with difficult individuals.  Ability to communicate effectively with others verbally and in writing. | | | | | | | | |  |  |  |  |  |  |  | | |  | | --- | | **CERTIFICATES, LICENSES, REGISTRATIONS:** | | | | |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | Licensure in Michigan as a Practical Nurse. | | | | | | | | |  |  |  |  |  |  |  | |  | |  | | --- | | ***NOTE: Civil Service approval does not constitute agreement with or acceptance of the desired qualifications of this position.*** | | | | |  |  | |  |  |  |  |  |  |  | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | |  | |  | | --- | | ***I certify that the information presented in this position description provides a complete and accurate depiction of the duties and responsibilities assigned to this position.*** | | | |  | |  | |  | | --- | |  | |  | |  | | --- | |  | |  | |  |  |  |  |  | |  | |  | | --- | | **Supervisor** | |  | |  | | --- | | **Date** | |  | |  |  |  |  |  | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  | |  | | --- | | **TO BE FILLED OUT BY APPOINTING AUTHORITY** | |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  | |  |  |  | | --- | --- | --- | |  |  |  | |  | |  | | --- | | **Indicate any exceptions or additions to the statements of employee or supervisors.** | |  | |  |  |  | |  | |  | | --- | | None. | |  | |  |  |  | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | |  | |  | | --- | | ***I certify that the entries on these pages are accurate and complete.*** | | | |  | |  |  |  |  |  | |  | |  | | --- | |  | |  | |  | | --- | |  | |  | |  |  |  |  |  | |  | |  | | --- | | **Appointing Authority** | |  | |  | | --- | | **Date** | |  | |  |  |  |  |  | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | |  | |  | | --- | | ***I certify that the information presented in this position description provides a complete and accurate depiction of the duties and responsibilities assigned to this position.*** | | | |  | |  | |  | | --- | |  | |  |  |  | |  |  | |  | | --- | |  | |  | |  |  |  |  | |  |  |  |  |  | |  | |  | | --- | | **Employee** | |  |  |  | |  |  | |  | | --- | | **Date** | |  | |  |  |  |  | |  |  |  |  |  | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |