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|  |  | |  |  | | --- | --- | | |  | | --- | | 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** | | Vacant | LEO-LABOR AND ECON OPPORTUNITY | | **3. Employee Identification Number** | **9. Bureau (Institution, Board, or Commission)** | |  | Unemployment Insurance (UI) | | **4. Civil Service Position Code Description** | **10. Division** | | UNEMPLOY INSURANCE ANALYST-E | Internal Controls | | **5. Working Title (What the agency calls the position)** | **11. Section** | | Unemployment Insurance Analyst 9-P11 | Special Programs | | **6. Name and Position Code Description of Direct Supervisor** | **12. Unit** | | Vacant; STATE ADMINISTRATIVE MANAGER-15 | Advocacy | | **7. Name and Position Code Description of Second Level Supervisor** | **13. Work Location (City and Address)/Hours of Work** | | BURNS, TERESA; STATE DIVISION ADMINISTRATOR | Cadillac Place, 3024 West Grand Boulevard, Detroit, MI 48202 / 8:00AM – 5:00PM | | |  | | |  |
|  | |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  | |  | |  | | --- | | **14. General Summary of Function/Purpose of Position** | |  |  | |  |  |  |  | | |  | | --- | | The UIA Advocacy unit administers the Advocacy Program as provided in the Michigan Employment Security Act, Section 5a.  The analyst position will assist with the development of procedures and forms used in the administration of the Advocacy Program and will determine and implement appropriate solutions to problems and assure resolution to them.  Monitors, reviews, and provides suggestions for updates to the Program contract, framework, policies, and procedures for revisions to reflect new trends, processes and Agency or legislative mandates to measure service delivery and customer satisfaction.  Responsible for weekly and monthly production reports, analytical reports, and mandated legislative reports.  Assists with the development of written operating procedures for staff and advocates, development of unit training manuals and internal operating procedures, and assists with workflow plans.  Assists in the processing of the daily workload including answering telephone calls. | | | |  | |  |  |  |  | | | |  |

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|  |  |  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **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:** | **50** | | Analysis of advocacy program performance through data gathering and reports. Reviews and monitors service delivery and effectiveness of the automated system to reflect performance and service delivery. Develops, maintains, and completes Program reports accurately and timely. | | | | **Individual tasks related to the duty:** |  |  | | * Review, evaluate, update, and recommend revisions to guidelines, contracts, framework, methods, and procedures as necessary to identify, reflect trends or patterns and interpret statistical case data information. * Recommend, suggest, and implement actions to improve Program efficiency and customer satisfaction using analytical findings and trends discovered. * Review and analyze data compiled through use of automated systems and create reports to identify new trends and processes. * Recommend, establish, develop, and enhance computer programming and application changes to reflect analysis of data for all operational aspects and to obtain specific data information for Program reports.  Interact with vendors and IT service providers. * Provide support for the automated system processes. * Recommend solutions to administrative problems resulting from analysis. * Under direction of Program manager, completes routine and special reports including in-depth reports to comply with agency and/or legislative mandates. * Assures required reports are completed timely and accurately. * Prepare various reports of findings. | | | | **Duty 2** | | | | **General Summary:** | **Percentage:** | **30** | | Assist in all operational aspects of the Advocacy Program.  Monitor, review, and update contract, framework, policies, and procedures to reflect new trends and/or processes.  Serve as liaison for system programming updates, revisions, other developmental procedures, and otherwise participate in working groups involving the Advocacy Program. Track advocate invoice payment. Assist with the processing of daily work. | | | | **Individual tasks related to the duty:** |  |  | | * Produce, review, and monitor activity reports for Program incoming and closed cases. * Review staff and advocates processes to identify changes required for data collection methods and systems.  Retrieve and verify data. * Identify most efficient data collections methods, recommend program and systems changes or updates to reflect changes in contract, framework, policies or procedures. * Provide training to staff and advocates.  Assist with the preparation of training manuals and internal operating procedures for unit. * Data enter invoices and track amount paid to individual advocates as well as total paid for claimant and employer advocates during the fiscal year. * Maintain advocate list. * Answers telephone calls to the unit, process invoices, verify eligibility and enter advocate information into the system. | | | | **Duty 3** | | | | **General Summary:** | **Percentage:** | **10** | | Determines workflow methods, current contract and framework, work processes and policies to reflect agency or legislative mandated compliance to collect data to identify, update and improve customer satisfaction with the Program and service delivery. | | | | **Individual tasks related to the duty:** |  |  | | * Determines additions or enhancements to workflow and data systems to identify and retrieve data and make recommendations for methods to revise or improve processes and delivery of services.  Analyze system needs and interact with IT personnel for new programs. * Assist in the development and implementation of new workflow methods and update computer systems for reports to measure customer satisfaction. * Train staff in updated or new workflow methods. * Provide contract suggestions for change. | | | | **Duty 4** | | | | **General Summary:** | **Percentage:** | 5 | | Identify and establish new standards for Advocate performance and monitor advocate statewide availability. | | | | **Individual tasks related to the duty:** |  |  | | * Oversee arrangements to establish and provide mandatory Continuing Education seminars for Advocates. * Assist in recruiting and testing of potential Advocates. * Monitor adherence to the advocate contract.  |  |  |  | | --- | --- | --- | | **Duty 5** | | | | **General Summary:** | **Percentage:** | **5** | | Other duties as assigned | | | | **Individual tasks related to the duty:** |  |  | | * Other duties as assigned | | | | | | | | | | | | | |  |
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|  |  |  |  | |  |  | | --- | --- | |  |  | |  | |  | | --- | | **16. Describe the types of decisions made independently in this position and tell who or what is affected by those decisions.** | | |  |  | | |  | | --- | | Maintain existing relationships and developing new relationships with other Agency departments, programs, services, and Advocacy activities.  Be aware of other Agency departments, programs and services decisions, changes, and mandates which may affect the eligibility or delivery of services for the Advocacy Program | | | | | | | | |  |
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|  |  |  |  |  |  | |  |  | | --- | --- | |  |  | |  | |  | | --- | | **17. Describe the types of decisions that require the supervisor's review.** | | |  |  | | |  | | --- | | Decisions that require interpretation or implementation of a new policy, procedure or action on an Advocates’ performance or contract service or service delivery. | | | | | | |  |
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|  |  |  | |  |  |  | | --- | --- | --- | |  | |  | | --- | | **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.** | | |  |  | | |  | | --- | | Physical effort is that commensurate with typical office positions.  Environmental conditions are those routinely found in an office setting. | | | | | | | | | |  |
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|  |  |  |  |  | |  |  |  |  | | --- | --- | --- | --- | | |  | | --- | | **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** | | |  | |  |  |  | |  | |  | | --- | |  | |  | |  |  |  | | | | | |  |
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|  | |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  | | --- | | **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. | |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | | | | | | | | | |  |
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|  | |  |  |  | | --- | --- | --- | | |  | | --- | | **22. Do you agree with the responses for items 1 through 20? If not, which items do you disagree with and why?** | | | |  |  | |  | |  | | --- | | Yes. | | | | | | | | | | |  |
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|  | |  |  |  | | --- | --- | --- | | |  | | --- | | **23. What are the essential functions of this position?** | | | |  |  | |  | |  | | --- | | The essential duties of this position include analysis of Program requirements, developing documents that report the results of those analyses; contributing to updating work related level documents (contracts, etc.); developing program policies and procedures; arranging for Continuing Education Seminars and recruiting potential Advocates; assisting with telephones, set ups, and advocate sign-on to cases and other duties as assigned. | | | | | | | | | | |  |
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|  |  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **24. Indicate specifically how the position's duties and responsibilities have changed since the position was last reviewed.** | | | |  |  | |  | |  | | --- | | N/A | | | | | | | | |  |
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|  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **25. What is the function of the work area and how does this position fit into that function?** | | | |  |  | |  | |  | | --- | | The function of the work area is to provide qualified Advocates to eligible clients for consultation and possible representation at the Michigan Office of Administrative Hearings and Rules (MOAHR) and the Unemployment Insurance Appeals Commission (UIAC) hearings.  The Analyst executes the directives of the agency and unit management as well as provides oversight, guidance, and direction to agency staff as well as Advocates in the program towards those goals. | | | | | | | | | |  |
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|  |  | |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | |  | | --- | | **26. What are the minimum education and experience qualifications needed to perform the essential functions of this position.** | | | | | | |  | |  |  |  |  |  |  |  | | |  | | --- | | **EDUCATION:** | | |  |  |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | Possession of a bachelor’s degree in any major. | | | | | | | | |  |  |  |  |  |  |  | | |  | | --- | | **EXPERIENCE:** | | |  |  |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | **Unemployment Insurance Analyst 9** No specific type or amount is required.  **Unemployment Insurance Analyst 10** One year of professional experience involving the evaluation, planning and implementation of unemployment insurance programs equivalent to an Unemployment Insurance Analyst 9.  **Unemployment Insurance Analyst P11** Two years of professional experience involving the evaluation, planning and implementation of unemployment insurance programs equivalent to an Unemployment Insurance Analyst, including one year equivalent to an Unemployment Insurance Analyst 10. | | | | | | | | |  |  |  |  |  |  |  | | |  | | --- | | **KNOWLEDGE, SKILLS, AND ABILITIES:** | | | |  |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | * Knowledge of the tools of management, such as methods development, cost analysis, procedural manuals, training materials, operating controls, records and reports, and studies applicable in evaluating programs or services. * Knowledge of the principles and methods of research, statistics, operational analysis, cost analysis, and finance of public and private programs. * Knowledge of the initiation, development, accomplishment, and evaluation of public programs or services. * Knowledge of the economic, social, political, and business conditions of the state. * Knowledge of the legislative process and governmental organization and structure. * Ability to analyze, synthesize, and evaluate a variety of data for use in program developmental and analysis. * Thorough ability to establish program or service procedures, policies, or guidelines and to relate these to objectives. * Ability to organize, evaluate, and present information effectively. * Ability to interpret laws, rules, and regulations relative to the work. * Ability to formulate plans, procedures, and controls in a program or service area. * Ability to learn and utilize computer processes. * Ability to maintain favorable public relations. * Ability to organize and coordinate the work of others. * Ability to set priorities and assign work to other professionals. | | | | | | | | |  |  |  |  |  |  |  | | |  | | --- | | **CERTIFICATES, LICENSES, REGISTRATIONS:** | | | | |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | None | | | | | | | | |  |  |  |  |  |  |  | |  | |  | | --- | | ***NOTE: Civil Service approval does not constitute agreement with or acceptance of the desired qualifications of this position.*** | | | | |  |  | |  |  |  |  |  |  |  | | | | | | | | |  |
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|  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | |  | |  | | --- | | ***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** | |  | |  |  |  |  |  | | | | | | | | |  |
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|  |  |  |  |  |  |  |  | |  | | --- | | **TO BE FILLED OUT BY APPOINTING AUTHORITY** | |  |  |
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|  |  |  |  |  |  |  | |  |  |  | | --- | --- | --- | |  |  |  | |  | |  | | --- | | **Indicate any exceptions or additions to the statements of employee or supervisors.** | |  | |  |  |  | |  | |  | | --- | | N/A. | |  | |  |  |  | | | |  |
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