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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** | |  | ATY GNRL CENTRAL OFFICE | | **3. Employee Identification Number** | **9. Bureau (Institution, Board, or Commission)** | |  | Criminal Justice Bureau | | **4. Civil Service Position Code Description** | **10. Division** | | Departmental Analyst | Criminal Trials and Appeals Division | | **5. Working Title (What the agency calls the position)** | **11. Section** | | Departmental Analyst 9-P11 |  | | **6. Name and Position Code Description of Direct Supervisor** | **12. Unit** | | Karen Hall, Department Manager 13 | Address Confidentiality Program | | **7. Name and Position Code Description of Second Level Supervisor** | **13. Work Location (City and Address)/Hours of Work** | | Rebekah Snyder Cox, State Administrator 15 | Cadillac Place, 3040 W. Grand Blvd., Detroit MI 48202/ Williams Building, Lansing, MI / Monday-Friday; 8 a.m. to 5 p.m. | | |  | | |  |
|  | |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  | |  | |  | | --- | | **14. General Summary of Function/Purpose of Position** | |  |  | |  |  |  |  | | |  | | --- | | This position will serve as a Departmental Analyst for the Address Confidentiality Program (ACP). Duties include database maintenance, system monitoring and troubleshooting, ticket submission and approvals and technical support and assistance. This Departmental Analyst will work closely with the ACP Coordinator and Advocate and provide backup support when needed. The ACP functions to better serve victims of domestic violence, human trafficking, stalking, sexual violence, and others by allowing them to participate in the program that keeps their legal residence confidential. | | | |  | |  |  |  |  | | | |  |

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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** | | Database Maintenance | | | | **Individual tasks related to the duty:** |  |  | | * Regularly clean up and organize data. * Monitor data input processes to ensure accurate information is entered into the system by the Application Assistants/Victim Advocates. * Conducts analysis of data and prepares reports for program manager about efficiency of Applicant Assistants for training considerations. * Responsibility for vetting and approving Application Assistants/Victim Advocates requesting assess to the portal. * Ensure the ACP portal is working properly, ensure program needs are being met and recommend solutions to program manager. | | | | **Duty 2** | | | | **General Summary:** | **Percentage:** | **30** | | Troubleshooting and Analysis | | | | **Individual tasks related to the duty:** |  |  | | * Assist the Application Assistants/Victim Advocates with Milogin and ACP Portal issues. * Assist Participants and Applicants with Milogin and external ACP Portal issues. * Develop and recommend alternative strategies to assisting applicants with ongoing issues. * Work closely with the Milogin Team to address and resolve technical issues. * Work closely with the DTMB Team to address and resolve technical issues. * Submit tickets for system maintenance, upgrades and enhancement as needed. * Review and approve tickets related to system maintenance and improvements. * Schedule and conduct regular office hours via online platform to provide technical support and assistance to users * Answer questions regarding the program by phone or email and design operation manual or supporting instructions for participant benefit. * Analyze on-going ACP operations and recommends modifications of procedures to ensure maximum efficiency and effectiveness. * Evaluate ACP operational needs and recommend solutions based on user feedback and experience. | | | | **Duty 3** | | | | **General Summary:** | **Percentage:** | **20** | | Miscellaneous duties | | | | **Individual tasks related to the duty:** |  |  | | * Monitor ACP email mailbox, conduct correspondence to interested parties and state-wide stakeholders. * Monitor the File Transfer System (FTS). * Input applications into the ACP database. * Design and implement staff training on the ACP Portal (Microsoft Dynamics) based on program policies and operational needs. * Develop, design, and implement training material for users. Evaluate materials available to state-wide stakeholders and users. * Design and implement methods for review, create reports, and considerations for changes from database. * Develop methods for program review and evaluation in line with current legislation, policies, and procedures of program. * All other activities, tasks and duties that may be assigned for the good of the program and the organization. | | | | | | | | | | |  |
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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.** | | |  |  | | |  | | --- | | The most physical requirement is traveling from the Detroit/Lansing office. The ability to travel is the most strenuous physical activity. | | | | | | | | | |  |
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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?** | | | |  |  | |  | |  | | --- | | This position will serve as a Departmental Analystresponsible for the day-to-day technical operations of the department’s Address Confidentiality Program. | | | | | | | | | | |  |
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|  |  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **24. Indicate specifically how the position's duties and responsibilities have changed since the position was last reviewed.** | | | |  |  | |  | |  | | --- | | New position. | | | | | | | | |  |
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|  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **25. What is the function of the work area and how does this position fit into that function?** | | | |  |  | |  | |  | | --- | | The position will, at a minimum, ensure compliance with the duties under the Address Confidentiality Act. The ACP functions to better serve victims of domestic violence, sexual violence, stalking, human trafficking, and others in fear of threat or harm by allowing them to participate in the program that keeps their legal residence confidential and out of public records. Individuals enrolling in the program are in fear or have experienced some form of trauma. The Departmental Analyst will be trained to work with these individuals using a victim-centered and trauma-informed approach. | | | | | | | | | |  |
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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:**   |  | | --- | | **Departmental Analyst 9** No specific type or amount is required.  **Departmental Analyst 10**  One year of professional experience.  **Departmental Analyst 11**  Two years of professional experience, including one year of experience equivalent to the intermediate (10) level in state service. | | | | | | | | |  |  |  |  |  |  |  | | |  | | --- | | **KNOWLEDGE, SKILLS, AND ABILITIES:** | | | |  |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | Ability to adequately plan for and prioritize multiple work assignments, Ability to use Microsoft Office suite for applications (e.g., Outlook, Teams, OneDrive, SharePoint, Word, Excel, PowerPoint). Knowledge of information technology, including but limited to computers and software. Demonstrate an understanding and commitment to the needs of victims seeking to use or using the ACP, excellent organizational skills, written and oral communication skills, and the ability to work independently with supervision. The position requires good “people skills” and the ability to work with diverse populations. Knowledge of basic computer software and applications. | | | | | | | | |  |  |  |  |  |  |  | | |  | | --- | | **CERTIFICATES, LICENSES, REGISTRATIONS:** | | | | |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | Must maintain a valid Michigan driver’s license. | | | | | | | | |  |  |  |  |  |  |  | |  | |  | | --- | | ***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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