

**COMMONWEALTH OF MASSACHUSETTS  
CIVIL SERVICE COMMISSION**

**SUFFOLK, ss.**

**One Ashburton Place - Room 503  
Boston, MA 02108  
(617) 727-2293**

**JOANNE TRUELLE,**  
*Appellant*

**CASE NO: C-17-035**

v.

**DEPARTMENT OF PUBLIC HEALTH,**  
*Respondent*

Appearance for Appellant:

Pro Se

Appearance for DPH

David Markowitz, Esq.  
Department of Public Health  
250 Washington Street- 2<sup>nd</sup> Floor  
Boston MA 02198

Commissioner:

Paul M. Stein

**DECISION**

The Appellant, Joanne Trudelle, appealed to the Civil Service Commission (Commission) pursuant to G.L.c.30,§49, from the denial of the Massachusetts Human Resources Division (HRD) of her request for reclassification from Management Analyst II (MA-II) to Program Coordinator II (PC-II) at Tewksbury State Hospital of the Department of Public Health (DPH) within the Executive Office of Human Services (EOHHS). The Commission held a pre-hearing conference on March 7, 2017 and a held full hearing on April 10, 2017, both at the Commission's offices in Boston.<sup>1</sup> Witnesses were sequestered. The full hearing was digitally recorded and the parties received a copy of the CD.<sup>2</sup> Twenty-six exhibits (JExh.1through JExh16; AppExh.1. through App.Exh.10) were introduced into evidence. On May 12, 2017, the parties submitted Proposed Decisions. (The Appellant attached 108 pages of new documents, marked for identification, AAPH11-ID).

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<sup>1</sup> The Standard Adjudicatory Rules of Practice and Procedure, 801 CMR §§ 1.00, *et seq.*, apply to adjudications before the Commission with and conflicting provisions of G.L. c.30,§49, or Commission rules, taking precedence.

<sup>2</sup> If there is a judicial appeal of this decision, the plaintiff in the judicial appeal becomes obligated to use the CDs to supply the court with the written transcript of the hearing to the extent that he/she wishes to challenge the decision as unsupported by the substantial evidence, arbitrary and capricious, or an abuse of discretion.

## **FINDINGS OF FACT**

Based on the Exhibits entered into evidence and the testimony of the following witnesses:

*Called by EOHHS:*

- Margaret Sydolowski, DPH Employment Staffing Coordinator, Tewksbury State Hospital
- Veronica Gjino, EOHHS, Human Resources Classification Coordinator
- Mary Corsetto, Director of Quality Management, Tewksbury State Hospital
- Christy Beauregard, Quality Risk Manager, Tewksbury State Hospital

*Called by the Appellant:*

- Joanne Trudelle, Appellant

and taking administrative notice of all matters filed in the case, pertinent law and reasonable inferences from the credible evidence, a preponderance of evidence establishes these facts:

1. The Appellant, Joanne Trudelle is currently employed as an MA-II, with the functional title of Data Coordinator, in the Quality Management Department (QMD) at Tewksbury Hospital, one of four state-operated facilities in the Bureau of Hospitals of the Department of Public Health (DPH) within the Executive Office of Health and Human Services (EOHSS).

*(Stipulated Facts; <https://www.mass.gov/orgs/bureau-of-hospitals>)*

2. Tewksbury Hospital is a 370-bed acute and chronic multi-specialty hospital that provides comprehensive treatment, care, and comfort to adults with medical and/or mental illnesses. Tewksbury Hospital is one of four such state-operated hospitals which provide medical care to individuals for whom community facilities are not available or access to health care is restricted. *(Stipulated Facts; <https://www.mass.gov/orgs/bureau-of-hospitals>;*

*<https://www.mass.gov/locations/tewksbury-hospital>)*

3. Ms. Trudelle has been continuously employed in Tewksbury Hospital's QMD since 1994, first as a Clerk IV. She was reclassified in 1999 as an EDP Systems Analyst and, again, reclassified in 2004 to her current title of MA-II. *(Stipulated Facts; JExhs.5 &15)*

4. The QMD's core mission is to ensure that Tewksbury Hospital complies with all internal and externally imposed accreditation and regulatory standards imposed on it. This includes, in particular, the Joint Commission, which surveys the hospital for accreditation every three years and the hospital's clinical laboratory for accreditation every two years, and the Centers for Medicaid and Medicare Services (CMS) which grants the hospital "deemed status" that enables the hospital to bill and receive reimbursement from Medicaid and Medicare, a critical component of the hospital's operating budget. (*JExh.7; AppExh.10; Testimony of Corsetto*)<sup>3</sup>

5. The QMD is managed by a Director of Quality Management, currently Mary Corsetto, who supervises a staff of approximately twenty personnel, including two Quality Risk Managers (Program Manger IV) (one with two subordinates,(including an MA-II (Ms. Trudelle) and an MA-III);<sup>4</sup> and another (also known as the Quality Systems Manger) with four subordinates (a PC-II who supervises three clerical staff; a Compliance Manger (PC-III), currently with one clerical subordinate,, a MA-II (patient complaint investigator and a Compliance Officer II [patient advocate]); and three registered nurses who serve as UM/QM Coordinators. (*JExh.16; AppExh.2;Testimony of Corsetto & Beauregard*)

6. The unit within the QMD to which Ms. Trudelle is assigned has responsibility to provide data collection, development of data infrastructure and data analysis services. This includes, in substantial part, all data required by the Joint Commission required to receive accreditation, data used to qualify for deemed status by the CMS, as well as data critical to the hospital's clinical and management decision makers. (*AppExh.10; Testimony of Corsetto & Beauregard*)

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<sup>3</sup> The Joint Commission is an independent, not-for-profit, that certifies nearly 21,000 health care organizations and programs in the United States. Joint Commission accreditation and certification is recognized nationwide as a symbol of quality that reflects an organization's commitment to meet performance standards (*JExh.7; Testimony of Corsetto; <https://www.jointcommission.org/about-us/about-the-joint-commission-main.aspx>*)

<sup>4</sup> The functional title of the Program Manger IV under whom Ms. Trudelle works also was formerly known as the Data Management & Analysis Manager. (*JExhs..2 12 & 15;AppExh.. 10*)

7. The Classification Specification for the Management Analyst series provides three levels, MA-I, the entry-level position; MA-II, the first level supervisory position; and MA-III, a second-level supervisor. The Summary of Duties for the Management Analyst Series states:

“Incumbents of positions in this series review and analyzes data including operating procedures confer with agency staff to identify problems and needs; determines the need for and conduct special studies; determine the methods to be used in conduction studies; recommend changes in agency operations, methods, procedures and programs; compile information for management use; and perform related work as required.”

“The basic purpose of this work is to analyze and review organizational structures, agency policies and practices and management systems in order to recommend changes in organization, programs, methods, policies, procedures and practices.”

Examples of specific duties common to all levels include:

- “Reviews and analyzes data, including operating procedures” to devise efficient method of accomplishing work, to recommend organizational changes and/or to integrate functions thereby providing more effective and efficient agency operations.
- “Confers with agency staff to identify problems and needs” and “reviews and recommends changes in agency operations in response to changes in program objectives, regulations procedures or policies.”
- “Determines in consultation with management the need for special studies” and defines the purpose, scope and methodology of the study; “conducts studies . . . and analysis of financial, personnel and other administrative data”,and recommends changes based on the results.
- “Designs the forms and instruments to be used in collecting information” and “evaluates results to ensure the validity and reliability of data.”
- “Compiles information for management” use from automated records, cost accounting reports and other sources, and “disseminates this information” in the form of “reports, manuals, charts, graphs, tables, etc.”

At the MA-II level, incumbents also:

- “Monitor activities” to “ensure proper implementation of if changes in administrative methods and procedures.”
- “Evaluate or compare data in order to provide information to management for making sound conclusions” in planning, problem-solving and formulating policies and procedures.

The minimum entrance requirement for a position in the Management Analyst series includes

“two years of full time, or equivalent part-time, professional experience in work simplification,

management analysis, program analysis, methods analysis, economic analysis, fiscal analysis, financial analysis, budget analysis or in program administration or program management . . . . “  
(JEx.13)

8. In Ms. Trudelle’s Form 30 Position Description, her Detailed Statement of Duties and Responsibilities in the position title of MA-II is summarized as follows: “Reviews, analyzes and compiles data concerning the services, practices and operations of the Quality Management Department. Performs database-operations for the Quality Management Department including but not limited to data maintenance, data-analysis and entry, software applications, and report generation. Performs related duties as necessary and required.” (JExh.12; see also JExh.3)

9. Since 2008, Ms. Trudelle annual Performance Evaluation Report System (EPRS) assessments have consistently rated her “Exceeds” or “Meets”, both in overall performance and as to the five specific job duties assigned to her during this period:

- Duty 1: Coordinate the collection of Utilization Management (U/M) data, including managing the Clinical Variance system
- Duty 2: Assists in the data collection, aggregation, analysis and presentation process.
- Duty 3: Provides methodological support to the Quality Management Department
- Duty 4: Supports the hospital’s efforts in maintaining Joint Commission Accreditation and external regulatory reporting.
- Duty 5: Adheres to HIPPA regulations and confidentiality policies as applicable to the role of Data Coordinator

As her EPRS evaluations reflect, Ms. Trudelle does not, and has never, had any direct or indirect staff reporting to her. (JExhs.3 through 6 & 15; Testimony of Corsetto)

10. On January 5, 2016, Ms. Trudelle submitted a request to EOHHS for reclassification of her position from the title of MA-II to a PC-II. Upon receipt, Margaret Sydlowski, the DPH Employment and Staffing Coordinator for Tewksbury Hospital, provided Ms. Trudelle with an Interview Guide, which she completed and returned to Ms. Sydlowski on or about February 1, 2016. (Stipulated Facts; JExh.1 through 3; Testimony of Appellant & Sydlowski)

11. The gravamen of Ms. Trudelle's reclassification request centered on two changes that had occurred to her duties: (a) filling in for the Quality Systems Manager (a Program Manager IV) in her absence in July 2013, in particular, expanded responsibility for Joint Commission survey and accreditation matters; and (b) the newly-assigned responsibility for roll-out of PolicyTech, a software program for tracking personnel matters, in November 2013. Ms. Trudelle estimated that she spent most of her time on these additional assignments:

- PolicyTech 40% - "The majority of my time is spent tracking employee hiring's [sic], terminations and moves, adding new manuals, forms, creating surveys, questionnaires, report writing, staff education for competency and professional development."
- Joint Commission 30% - "Continuously researching and reviewing intensive Joint Commission requirements in preparation for the triennial survey in order to maintain a continued state of readiness. I assure continued readiness for the Joint Commission survey by maintaining a data base which provides data in support of all hospital wide quality improvement/performance initiatives as well as external regulatory reporting requirements. . . ."
- Current Duties 30% - "The majority of the new duties have moved to the foreground, however, I am still completing the duties [EPRS Duties 1 through 5] in a consistently timely fashion and have had no issues to date."

*(JExhs.3, 4 & 7; Testimony of Appellant & Gjino)*

12. Ms. Sydlowski conducted the initial review of Ms. Trudelle's reclassification request she reviewed the Interview Guide, which contained Ms. Trudelle's recent Form 30s and EPRSs along with some half-dozen recommendations from hospital colleagues, and the Classification Specifications for the titles involved (MA-II and PC-II). On April 20, 2016, Ms. Sydlowski met for two hours with Ms. Trudelle, who was accompanied by her supervisor, Christy Beauregard, for the purposes of conducting an "Interview Audit". *(JExh.3; Testimony of Appellant & Sydlowski)*

13. On or about July 26, 2016, Ms. Sydlowski prepared an Appeal Audit Report Form, recommending that Ms. Trudelle's position was properly classified. Ms. Sydlowski supported

her recommendation with a detailed analysis of the basis for Ms. Trudelle's appeal, including the work she performed and, how it had changed over time. In summarizing her conclusion, Ms. Sydlowski stated:

“Joanne’s role and responsibilities . . . have always included key elements of coordinating the collection of data and managing the application/system, organizing and assisting in the collection of data for QM activities and involvement. This includes being involved in the aggregation and analysis of data and report generation and presentation of such data to committees, staff members and hospital administration. She is also . . . the webmaster and Policy Tech System Coordinator and is actively involved in supporting the hospital’s [Joint Committee] accreditation and regulatory reporting. Joanne is a motivated and self-directed employee who takes her role seriously. . . .It is important to note that while departments have lost positions and staff to the ERIP incentive, this may result in an increased volume or reassignment of work for current employees. It is important to look closely at the work being performed, at what level, and how it has changed. In looking closely at Ms. Trudelle’s duties and responsibilities, the majority, if not all, continue to involve working with databases/applications/systems for data collection, analysis, aggregation, reporting and presentation as a result of contributing to an supporting the activities and objectives of the {QMD} and [Joint Commission] accreditation. Based on the review of Ms. Trudelle’s duties and responsibilities as presented in the appeal process . . . it is the recommendation that her function has predominately remained the same and her position is appropriately classified as a [MA-II]. This recommendation is not to reflect negatively on Ms. Trudelle personally, professionally nor on her performance and contributions as an employee.”

*(JExhs.1, 3 & 5; Testimony of Sydlowski)*

14. On July 29, 2016, Tewksbury Hospital CEO, Debra Tosti, signed the Appeal Audit Report Form with the endorsement; “Recommendation is Supported by Appointing Authority”.

*(JExh.3)*

15. By letter dated October 20, 2016, EOHSS Classification Coordinator Veronica Gjino, informed Ms. Trudelle that a preliminary decision had been made that she was properly classified. Ms. Trudelle was afforded the opportunity to submit further documentation by way of a rebuttal, which she did on or about October 24, 2016. *(Stipulated Facts; JExhs/6 & 7)*

16. After review of Ms. Trudelle's rebuttal by Ms. Sydlowski and Ms. Gjino, by letter dated December 2, 2016, EOHHS informed Ms. Trudelle that the final decision had been made that she was appropriately classified in her current title of MA-II. (*Stipulated Facts; JExhs. 8 & 9*)

17. Ms. Trudelle duly appealed the decision by EOHHS to the Massachusetts Human Resources Division (HRD). By letter dated January 27, 2017, HRD informed Ms. Trudelle that her duties did not warrant reclassification and that HRD denied her appeal. (*Stipulated Facts; J.Exhs.10 & 11*)

18. This appeal to the Commission duly ensued. (*Stipulated Facts; Claim of Appeal*)

19. PolicyTech is a software product of NAVEX Global, Inc. which Tewksbury Hospital purchased in 2013. The PolicyTech software enabled the hospital to replace its prior paper-based system (in which clinical and operating policies and procedures were maintained in binders) with an automated electronic policy and procedure management system that streamlined the review and approval of policies and procedures and the management, publication, distribution, tracking and updating them, as well as simplified access through the hospital's website by the 1,120 clinical and operations staff users who are subject to these policies and procedures, which now comprise a data base of nearly 2,000 separate documents. (*JExhs.3 & 5; AppExhs.3 through 5 & 7; Testimony of Appellant & Corsetto*)

20. Ms. Trudelle originally was assigned as the QMD point person for the PolicyTech "project" as part of the requirements of the agency's "Aspiring Supervisor" course she was then taking as it was thought to be a good fit with her experience working with data. She took on the responsibility for learning about the software program, adapting it to the specific requirements at Tewksbury Hospital, collecting existing administrative policies and plans and moving them from Microsoft Word format to an electronic format that was then uploaded into the PolicyTech



software program. Ms. Trudelle also compiled data to identify and correlate particular hospital staff to particular policies that required their review or attention. Ms. Trudelle also performed the initial training and credentialing of employees in the new system. (*JExhs.3, 5 & 7; AppExhs.3 through 5; Testimony of Appellant, Sydlowski & Corsetto*)

21. The initial upload of policies and procedures into PolicyTech was completed in 2016. Thereafter, Ms. Trudelle has continued to be responsible for maintaining the PolicyTech system as the “system administrator”, entering policy and procedure revisions/updates into the system as instructed by management responsible for developing and approving the substantive changes/updates involved, generating reports, and implementing updates to the PolicyTech software provided by NAVEX Global. She provides similar support to the Nursing Staff Education Department who develop education and training modules that Ms. Trudelle adapts and uploads to the PolicyTech system. Ms. Trudelle serves on the three-member PolicyTech Committee that provides an interface with the clinical and operating departments on PolicyTech matters. She also was assigned to help with the rollout of the PolicyTech system at the Lemuel Shattuck Hospital, another DHS hospital. (*JExhs.3 & 15; AppExhs.3 through 5 & 8; Testimony of Appellant, Sydlowski, Corsetto & Beauregard*)

22. Ms. Trudelle was consistently cited by her supervisors in her EPRS for her effort on the PolicyTech project, commending her on a “very successful rollout” of this “giant project” and she is “managing it very well.” (*J.Exh.15*)

23. Ms. Trudelle also points to changes in her duties that arose as a result of staff turnover, in particular, assuming the duties of a PC-II who had retired as well as receiving additional duties formerly performed by her supervisor relating to the Joint Commission accreditation process. (*JExhs.3, 5 & 7; Testimony of Appellant*)

24. The PC-II to which Ms. Trudelle refers was transferred to QMD by the outgoing hospital CEO, for whom he had served as an executive assistant, and was allowed to keep his title of PC-II. This employee subsequently retired and the position is currently vacant and will not be backfilled. Instead, the duties of the position were temporarily reassigned to her staff, including Ms. Trudelle, pending the approval for a new MA-II position to perform most of these duties. (*JExhs.3, 5, 7 & 16; Testimony of Sydlowski & Corsetto*)

25. Ms. Trudelle also has responsibility to support the hospital's efforts to maintain Joint Commission accreditation, working on both Hospital Accreditation and Laboratory Accreditation. In her words, she maintains the database which serves as the source of all data collection; assembles, analyzes and reports data to support hospital wide quality initiatives which are necessary for compliance with the Joint Commission survey, and assists in training staff on Joint Commission requirements. She assists hospital management to assure that an effective and comprehensive Joint Commission readiness program is in place and that the appropriate information is collected and recorded to comply with Joint Commission requirements. During the survey process, she works with senior management to ensure the survey documents are complete and accurately reflect hospital practices. (*JExh.3 & 7; Testimony of Appellant & Corsetto*)

26. Ms. Trudelle consistently received praise for her work on the Joint Commission survey:

- FY2008 EPRS – “Joanne has been very involved in not only the [Joint Commission] Lab PPR but has been instrumental in the Hospital one.”
- FY2014 – “Joanne continues to be a resource in this area [referring to role as liaison to Clinical Laboratory department] and collection of information needed for [Joint Commission survey] and she continues to do an excellent job.”
- FY2015 EPRS – “Joanne played a major role in the Joint Commission Unannounced Lab survey . . . Her support was integral & appreciated by senior management.”

- FY2016 EPRS – “Joan played an integral part in our very successful Joint Commission survey. She diligently assembled documents for the survey binders and was a hands-on assistant to senior management during the four day survey.

*(JExhs.3 & 15; See also JExh.5)*

27. The Classification Specification for the Program Coordinator Series into which Ms. Trudelle seeks reclassification provides three levels, all of which are supervisory positions: PC-I is a first-level direct and functional supervisory job; PC-II is a second-level direct and indirect level supervisor; PC-III is a third level direct and indirect supervisor. The “Summary of Series” describes the essential nature of the job of a Program Coordinator as follows:

“Incumbents of positions in this series coordinate and monitor assigned program activities; review and analyze data concerning agency programs; provide technical assistance and advice to agency personnel and others; respond to inquiries; maintain liaison with various agencies; and perform related work as required.”

“The basic purpose of this work is to coordinate, monitor, develop and implement programs for an assigned agency.”

Examples of the duties common to all levels include:

- “Coordinates and monitors assigned program activities to ensure effective operations and compliance with established standards.”
- “Reviews and analyzes data concerning assigned agency programs to determine progress and effectiveness, to make recommendations for changes in procedures, guidelines, etc. and to devise methods of accomplishing program objectives.”
- “Provides technical assistance and advice to agency personnel and others concerning assigned programs to exchange information, resolve problems and to ensure compliance with established policies, procedures and standards.”
- “Responds to inquiries from agency staff and others to provide information concerning assigned agency programs.”
- “Maintains liaison with various private, local, state, and federal agencies and others to exchange information and/or to resolve problems.”
- “Performs related duties such as attending meetings and conferences, maintaining records; and preparing reports.”

At the second-level of PC-II, examples of additional duties performed include:

- “Provide on-the-job training and orientation for employees.”
- “Develop and implement procedures and guidelines to accomplish assigned agency program objectives and goals.”
- “Review reports, memoranda, etc. for completeness, accuracy and content.”
- “Confer with management staff and other agency personnel in order to determine program requirements and availability of resources and to develop the criteria and standards for program evaluation.”

- “Evaluate program activities in order to determine progress and effectiveness and to make recommendations concerning changes as needed.”

The minimum entrance requirements for a position in the Program Coordinator series includes “at least two years of full-time, or equivalent part-time, professional, administrative or managerial experience in business administration, business management or public administration the major duties of which involved program management, program administration, program coordination, program planning and/or program analysis . . . .”  
(*JExh.14*)

28. Some “crossover” in the specific duties for positions found in different Classification Specifications is not unusual. For example, the Clerk Series, the Management Analyst Series and the Program Coordinator Series include duties that involve analyzing and aggregating data. What distinguishes these series from each other is the overall “essence” of the job series, e.g., technical and clerical support and coordination to an agency’s operational data systems, or support, supervision and coordination of an agency’s “mission oriented” program activities. In this respect, the development, implementing and monitoring of a software “program” is not the type of “agency program” encompassed within the Program Coordinator Series. The “essence of the Program Coordinator Series is intended to apply to an agency’s “mission oriented” program activities, as opposed to internal administrative or operational activities. (*JExhs 3 & 5; Testimony of Sydlowskik & Gjino*)<sup>5</sup>

### **APPLICABLE CIVIL SERVICE LAW**

G.L.c.30, §49 provides:

Any manager or employee of the commonwealth objecting to any provision of the classification affecting his office or position may appeal in writing to the personnel

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<sup>5</sup> DPH points to the “mission oriented” essence of other Program Coordinator positions that Ms. Trudelle asserted as equivalent to her own. For example, one coordinated DPH activities of the HRSA Oral Health Grant program, one was responsible for developing outreach plans for the Occupational Health Surveillance Program (OSHP), and one was responsible to support the DPH’s Health and Disability Program grant. (*AppExh.7*)

administrator. . . Any manager or employee or group of employees further aggrieved after appeal to the personnel administrator may appeal to the civil service commission. Said commission shall hear all appeals as if said appeals were originally entered before it. If said commission finds that the office or position of the person appealing warrants a different position reallocation . . . it shall be effective as of the date of appeal . . .

“The determining factor of a reclassification is the distribution of time that an individual spends performing the function of a job classification.” Roscoe v. Department of Environmental Protection, 15 MCSR 47 (2002). In order to justify a reclassification, an employee must establish that she is performing distinguishing duties encompassed within the higher level position the majority (i.e., at least 50% or more) of the time. See, e.g., Pellegrino v. Department of State Police, 18 MCSR 261 (2005) (at least 51%); Morawski v. Department of Revenue, 14 MCSR 188 (2001) (more than 50%); Madison v. Department of Public Health, 12 MCSR 49 (1999) (at least 50%); Kennedy v. Holyoke Community College, 11 MCSR 302 (1998) (at least 50%).

## **ANALYSIS**

As is often true in most classification appeals, Ms. Trudelle, by all accounts, comes before the Commission with many colleagues to vouch for her as a dedicated public servant who works hard at her job and has never shirked from taking on new tasks in the environment of an ever shrinking state workforce. However, reclassification of a position requires proof that specified distinguishing duties of a higher title are, in fact, actually being performed as the major part of her current work. Accordingly, the issue before the Commission is limited to that narrow question.

The evidence establishes that Ms. Trudelle’s job duties fit squarely within the Management Analyst Series. While there is some overlap in the duties she performs common to both MA-II and PC-II work, Ms. Trudelle does not perform level-distinguishing duties of a PC-II at least 50% of the time, and, therefore, she does not fit the classification specification for a PC-II.

First, the PolicyTech automated, web-based system that replaced the hospital's antiquated paper-based system for maintaining policy and procedure information certainly increased Ms. Trudelle's work and may well now comprise 40% of her time, as she reports, implementing and maintaining that new system. Nevertheless, this additional work on PolicyTech did not materially change the essential nature of her work as a data coordinator, which had always included coordinating the collection, manipulation, aggregating and reporting of data required for the hospital's operations. Ms. Trudelle did not develop the PolicyTech software or its updates. She did not have primary responsibility for the substantive content of the policies and procedures that she uploaded into the system, which was the purview of the hospital's senior management and the clinical and administrative staff. In sum, most, if not all, of the work Ms. Trudelle performed on PolicyTech fit within the job specifications as a MA-II.

Second, PolicyTech is a proprietary product purchased from a third-party vendor and it is not comparable to the type of agency "program activities" that come within the scope of the Program Coordinator Series. As explained by both personnel experts who testified (Ms. Sydlowski and Ms. Gjino), the Program Coordinator Series is intended to apply to programs that require coordination and supervision of others assigned to deliver "mission oriented" agency program "activities", i.e., some form of government services. It does not apply to the type of individual contributions performed by Ms. Trudelle to coordinate Tewksbury Hospital's internal rollout and periodic updating of the NAVEX Global PolicyTech software "program" (and assisting in its roll out at one other DPH hospital).

Third, Ms. Trudelle's work in preparation for and coordination of the hospital's submissions to the Joint Commission, similarly, have increased over time but remain substantially consistent with her long-established duty to provide QMD support to this exercise through the

development, maintenance and improvement of the system for collection and analysis of data submitted by the hospital's clinical and operational staff, presenting the data in reports to both internal and external sources, and ensuring the reliability of the data collected and reported. All this work, which Ms. Trudelle estimates consumes 30% of her time, squarely fits within the scope of the job specification of a MA-II.

Fourth, as Ms. Trudelle and DPH both point out, the Classification Specifications for Management Analyst and Program Coordinator, do appear to have some overlapping duties, most notably, each call for the incumbent to "collect and analyze data". The fact that some duties performed by Ms. Trudelle could, arguably, fit either job title is not the basis to reclassify her. What must be shown is that Ms. Trudelle performs the "distinguishing duties" of the PC-II position at least 50% of the time and, in making this calculation, duties which fall within both job titles do not count as "distinguishing duties." See Lannigan v Department of Developmental Services, 30 MCSR 494 (2017)

Fifth, while it may be true that DPH has employed others in the position of a PC-II who were performing no differently than Ms. Trudelle and may have been misclassified, that fact is not relevant to the question before the Commission and it does not justify the Commission allowing a reclassification appeal of any employee that has not proved entitlement to such reclassification of her position based on the duties she performs.. See, e.g., McKinnon v. EOHHS, 30 MCSR 272 (2017); Pizzi v. Department of Public Health, 29 MCSR 233 (2016) Palmieri v. Department of Revenue, 26 MCSR 180 (2013)

Sixth, I note that, as defined in the Classification Specification, a PC-II is a second-level supervisor, i.e., the job involves both supervision of direct reports and indirect supervision of subordinates who report to those direct reports. Ms. Trudelle contends that, at least at DPH, the

supervisory requirement is not enforced in the case of all PC-II positions (or, as to MA-II or MA-III positions within QMD, including Ms. Trudelle and one of her peers). DPH does not press this issue and, as the appeal can be decided on other grounds, the Commission need not address this point in its Decision in this matter.

In sum, EOHHS and HRD correctly determined that Ms. Trudelle does not perform the duties of a PC-II rather than her current title of MA-II more than half of her time and, therefore, the Commission is not authorized to order that her position be reclassified to a PC-II. I have not overlooked that Ms. Trudelle does appear to be one of the “go to” people within the QMD and her desire for advancement and recognition of her workload is certainly understandable. However, while there may be good reason to contest the logic and equity of various job titles and pay grades vis-à-vis each other within an agency, the proper forum, if any, in which to raise those concerns lies elsewhere.

Accordingly, for the reasons stated above, the appeal of the Appellant, Joanne Trudelle, under Docket No. C-17-035, is *dismissed*.

Civil Service Commission

/s/ Paul M. Stein

Paul M. Stein  
Commissioner

By vote of the Civil Service Commission (Bowman, Chairman; Camuso, Ittleman, Tivnan & Stein, Commissioners) on March 15, 2018.

Either party may file a motion for reconsideration within ten days of the receipt of this Commission order or decision. Under the pertinent provisions of the Code of Mass. Regulations, 801 CMR 1.01(7)(l), the motion must identify a clerical or mechanical error in this order or decision or a significant factor the Agency or the Presiding Officer may have overlooked in deciding the case. A motion for reconsideration does not toll the statutorily prescribed thirty-day time limit for seeking judicial review of this Commission order or decision.

Under the provisions of G.L. c. 31, § 44, any party aggrieved by a final decision or order of the Commission may initiate proceedings for judicial review under G.L. c. 30A, § 14 in the superior court within thirty (30) days after receipt of such order or decision. Commencement of such proceeding shall not, unless specifically ordered by the court, operate as a stay of the Commission’s order or decision. After initiating proceedings for judicial review in Superior Court, the plaintiff, or his / her attorney, is required to serve a copy of the summons and complaint upon the Boston office of the Attorney General of the Commonwealth, with a copy to the Civil Service Commission, in the time and in the manner prescribed by Mass. R. Civ. P. 4(d).



Notice to:  
Joanne Trudelle (Appellant)  
David Moskowitz, Esq. (for Respondent)  
John Marra, Esq. (HRD)