

YOUTH SERVICES POLICY

Title: Position Descriptions	Type: A. Administrative Sub Type: 2. Personnel Number: A.2.23
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References: State Civil Service Rules – Chapter 5; ACA Standard 2-CO-1C-01 and 2-CO-1C-08 (Administration of Correctional Agencies); 4-JCF-6D-01 (Performance-Based Standards for Juvenile Correctional Facilities); YS Policy No. A.2.45 “Performance Evaluation System (PES) and Market Rate Adjustments”	
STATUS: Approved	
Approved By: <i>Otha “Curtis” Nelson, Jr., Deputy Secretary</i>	Date of Approval: 10/06/2023

I. AUTHORITY:

Deputy Secretary of Youth Services (YS) as contained in La. R.S. 36:405. Deviation from this policy must be approved by the Deputy Secretary.

II. PURPOSE:

To provide for the development of position descriptions for all State Civil Service (SCS) positions, and to ensure that the duties and qualifications for all YS positions are reviewed annually to ensure that organizational objectives and the agency’s mission are being met.

III. APPLICABILITY:

Deputy Secretary, Assistant Secretary, Undersecretary, Deputy Undersecretary, Chief of Operations, Probation and Parole Director - Juvenile, Youth Facilities Director – Statewide, Executive Management Advisor, Regional Administrators, Regional Managers, Facility Directors, and all YS employees.

Unit Heads shall ensure that procedures are in place to comply with the provisions of this policy.

IV. DEFINITION:

Supervisor - A staff member assigned to supervise, manage or direct the work of another staff member(s).

Unit Head - For the purposes of this policy, the Unit Head consists of the Deputy Secretary, Facility Directors, and Regional Managers.

V. POLICY:

It is the Deputy Secretary's policy that written position descriptions and job qualifications be developed for all positions within YS.

VI. PROCEDURES:

It is the responsibility of each supervisor to ensure that position descriptions (SF-3) are reviewed on an annual basis when completing an employee's performance evaluation and planning documents, as well as on the employee's anniversary hire date, to determine if duties described therein are current and accurate.

- A. In conjunction with the employee's anniversary hire date, the "Position Description Review Form", [see Attachment A.2.23 (a)] shall be completed, signed and dated by the employee and supervisor for submission to Office of Management and Finance/Human Resources (OMF/HR).
- B. If a revised "Position Description Form" is required based on the information noted in D. below, the attached "Position Description Review Form" shall also be completed for submission with the Position Description Form.

The Position Description Form, dated July 2021, is attached and is also available on the State Civil Service website at <https://civilservice.louisiana.gov/SCS/Forms.aspx>.

The attached Completing the PD Form shall be used as a guideline to filling out the Position Description Form and is also available on the State Civil Service website at <https://www.civilservice.louisiana.gov/HRProfessionals/HRHandbook/Chapter5.aspx>.

- C. Employees and supervisors shall ensure the accuracy of all statements presented on position descriptions.
- D. Position descriptions shall be updated as follows:
 - 1. At least every five (5) years;
 - 2. When major duty changes have taken place; and
 - 3. Prior to filling a vacant position at the supervisory level or above, unless the position description has been updated within the last 12 months, or is encompassed by a master job description in a high volume hiring situation such as Juvenile Justice Specialist (JJS).

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- E. All completed Position Description Forms with corresponding attachments shall be submitted to OMF/HR for submission to State Civil Service for final review and approval.

Previous Regulation/Policy Number: A.2.23

Previous Effective Date: 08/03/2022

Attachments/References: A.2.23 (a) Position Description Review Form October 2023.doc
Position Description Form July 2021.docx
Completing the PD Form July 2021.pdf

Youth Services Position Description Review Form

This is to certify that the annual position description review of the employee has been completed by the supervisor.

- ☐ Position description does not need revision
- ☐ Position description needs revision and will be forwarded within 14 calendar days
- ☐ Position description has been revised and is attached

Supervisor Signature/Date

Employee Signature/Date

For use by OMF/HR Office:

- ☐ Position description revisions reviewed and returned for:
_____ Date Returned: _____
- ☐ Position description revision processed

(OMF/HR Staff Member Signature/Date)

Revised: **October 2023**

Position allocations begin with the [Position Description Form](#). When requesting or determining allocations for new positions, it may be necessary for HR personnel to speak with an employee and/or supervisor to identify the duties and responsibilities that will be associated with the new position. Allocation updates and appeals usually require modifying an existing position description for submission to State Civil Service.

Requirements for updating positions:

- At minimum Position Descriptions must be updated every five years.
- Position Descriptions must be updated when major duty changes have taken place.
- Position Descriptions must be updated prior to filling a vacant position at the supervisory level or above, unless the position description has been updated within the last twelve months.

The components of the Position Description Form require the user to provide information on the existing status of the position and its incumbent, if applicable and the requested change to the position's allocation. This information is used to help determine the status of a position, such as whether it is filled or vacant. It also helps in providing information such as the type of request being made, general qualities or characteristics of the position, employee and supervisor, other comparative positions, whether it has supervisory elements or not. It requires the user to provide supporting attachments such as organizational charts and of utmost importance is a description of the duties and activities that are expected to be conducted by the position.

The following steps will assist you in completing the position description.

1. Type of Request:

This section involves determining the nature of the request, listing the current official job title and the requested official job title.

The following chart provides guidance on determining the nature of the request. Indicate the one choice that best applies to your situation on the position description form.

Type of Request	What is it?	When is it used?
New Position	Typically, a collection of duties and responsibilities that did not exist prior to the creation of the New Position.	<ol style="list-style-type: none"> 1. To create a new job for which a position has never existed. 2. To allow for competition when a position's duties have changed drastically. 3. When a position is moving three or more pay levels 4. When a position is moving between pay schedules

Type of Request	What is it?	When is it used?
		5. When a position is moving from a Non-supervisory job to a supervisory job 6. When a position is moving from a Non-professional job to a professional job 7. When a position is moving from a Non-DCL job to a DCL job
Update	An allocation review requested by either the agency or the employee when duties have or have not changed.	When duties have or have not changed or a reallocation is being requested.
Agency Appeal	An appeal that is initiated by the agency's Appointing Authority (or his or her designee) to change the allocation of a position to a different job title.	When the Appointing Authority disagrees with an allocation decision made previously by State Civil Service.
5.3 Appeal	Under State Civil Service Rule 5.3(b), an employee affected by the allocation or reallocation of a position to a job shall be afforded a reasonable opportunity to have his case reviewed by the State Civil Service Director (case may be reviewed by the Director's designee).	When an employee disagrees with an allocation decision made previously by State Civil Service, he may file a 5.3 Appeal. The process involves an interview with the employee, after which the State Civil Service consultant provides a recommendation on the allocation of the position to the Director. The Director reviews the report and makes the final allocation decision.
Job Correction	A change in the allocation of a position as a result of a State Civil Service Job Study.	When revisions to a job specification and/or related allocation criteria require the position be allocated to a different job.
The boxes for Career Progression Group and Master in the Type of Request section on the position description may be checked in addition to any of the above requests.		
Career Progression Group	A pre-defined list of job titles that may be used to hire and reallocate employees for recruiting, training and retention purposes. Initial placement and movement within the group is based on a combination of experience, duty assignments, competencies and performance.	When a position is assigned a higher level of duties but the agency decides to hire an employee at a lower level for training purposes.
Master	A single position description encompassing the identical duties of two (2) or more employees under the same supervisor	When two (2) or more positions are assigned to the same supervisor and are performing identical duties.

Type of Request	What is it?	When is it used?
<p>When submitting master job descriptions that include new positions, please follow the procedures that apply to your situation as shown below:</p> <ul style="list-style-type: none"> • To create new positions as a new master job description that does not exist: <ul style="list-style-type: none"> ○ Check “New Position” and “Master” as the type of request. Notate the number of new positions requested in the “# requested” field next to the Master check box. Please also reflect the requested new positions on the organizational chart. The new position numbers will be included on the position description approval sheet by SCS. • To create new positions as part of a master job description that already exists: <ul style="list-style-type: none"> ○ Check “New Position” and “Master” as the type of request. Notate the number of new positions requested in the “# requested” field next to the Master check box. Leave the position number field blank and include a list of current master job description numbers as an attachment to the position description form. Please also reflect all existing and requested new position numbers on the organizational chart. The new position numbers will be included on the position description approval sheet by SCS. 		

- Current and Requested Official Job Title
 - When listing the current and requested official job titles, use the job title, pay level and job code that has been assigned to the job by State Civil Service. This information can be found on the State Civil Service website under [Job Test Information Finder](#).
 - For a new position, the “Current Official Job Title” line should be left blank. The requested job title may be best determined after completing the position description form, particularly following completion of the Duties and Responsibilities attachment (see section 6, below).
- Personnel Area Code
 - The agency personnel code is the four-digit code used to identify each individual agency, office, institution, facility, board, university, etc. in the LaGov HCM statewide personnel management system. This information can be found on the State Civil Service website [here](#).

2. Information Required for a New Position

This section will provide SCS with the necessary information to create new position numbers within the LaGov HCM System. The following information is required:

- Organizational Unit Number
- Work Parish
- Personnel Subarea
- Employee Group
 - FT Hourly
 - FT Salary
 - PT Hourly

The following information may be provided on the position description form but is not required.

- Cost Center Number
- Fund Number
- Grant Number

- WBS Element
- Order Number

3. General Information:

In this section, record information about the employee, supervisor and agency where indicated. If the position is not currently occupied, indicate "Vacant" in the "Employee's Name" section. For filled positions, it is important to check the minimum qualifications on the State Civil Service job specification for the requested job to determine if the employee will qualify. Document this by checking "yes" or "no" under "Employee Qualifies for Job."

4. Comparative Positions:

As part of your request in determining the appropriate job title, you may look at existing positions within your agency with duties that are a close match for the duties and responsibilities that are assigned to the position in question.

5. Supervisory Elements:

This section is designated for those positions that exercise direct supervision. Check off all functions that the position will perform, as well as the number of employees the position supervises.

NOTE: Direct supervision over a position can be claimed ONLY if the incumbent approves leave, signs the performance evaluation document and recommends hiring/promotions for that subordinate. Positions that do not meet the definition of direct supervision but perform one or more of the other supervisory elements (determining work assignments, training staff, reviewing and approving work) exercise functional supervision. This does not count as direct supervision. The number of functional subordinates are not reported on the position description, but may be indicated on the organizational chart with a dotted line connecting them to the functional supervisor.

6. Attachments:

Position descriptions submitted without the required attachments will not be logged in and will be returned to the agency. Required attachments include the following:

- A comprehensive organizational chart that shows all reporting relationships in the unit where the subject position is located. Organizational charts must include official State Civil Service job titles, position numbers, pay levels and incumbent names. Direct subordinates are indicated by a solid line connecting to the supervisor.
- Duties and responsibilities must be submitted with every position description.
- If the position description is to be used as a Master Job Description for multiple positions (2 or more) having the same supervisor, a list of each position number and employee name that will be covered by the Master Job Description is required.

Optional attachments for the position description include the following:

- If comments are indicated next to the signature blocks, please attached appropriate letters/memos.
- The Contracted Personnel Form is used when a supervisor/manager allocation does not meet the necessary criteria of direct supervision but the position exerts substantial ongoing regulatory authority over contracted personnel. This form must be submitted with the

position description for State Civil Service to determine whether or not the contracted personnel are adequate to equate salary amounts of the contract personnel to pay levels within the classified pay schedules.

7. Signatures:

In accordance with [Rule 5.2\(d\)](#), the Appointing Authority/Designee signature is always required. Employee and direct supervisor signatures are strongly requested as checks and balances, but are not required.

NOTE: When updates are requested by an employee or a 5.3 appeal is requested, the employee, supervisor and Appointing Authority signatures are all required prior to processing.

Position descriptions with an Appointing Authority signature with a date older than 90 days will not be accepted. SCS POD staff will contact the agency to notify them and return the position description(s) without action until a more recent signature and date are provided on the position description.

For additional information regarding the procedures for submitting position descriptions to State Civil Service, please refer to [Submitting the Position Description Policy Standards](#) or contact your Agency Relationship Manager.



POSITION DESCRIPTION

Form Revision Date: 7/2021

1 TYPE OF REQUEST

Check appropriate request boxes. If master job description, please attached master list of positions.

☐ UPDATE ☐ AGENCY APPEAL ☐ MASTER ____ # requested☐ JOB CORRECTION ☐ 5.3 APPEAL☐ CAREER
PROGRESSION GROUP☐ NEW POSITIONMAJOR AGENCY CODE &
PERSONNEL AREA CODE

POSITION NUMBER

CURRENT OFFICIAL JOB TITLE (IF POSITION IS IN A CPG, LIST CAP OF ALLOCATION)

CURRENT PAY LEVEL

CURRENT OFFICIAL JOB CODE

REQUESTED OFFICIAL JOB TITLE

REQUESTED PAY LEVEL

REQUESTED OFFICIAL JOB CODE

2 INFORMATION REQUIRED FOR NEW POSITION FOR LA GOV HCM AGENCIES ONLY

ORGANIZATIONAL UNIT NUMBER

WORK PARISH

PERSONNEL SUBAREA

EMPLOYEE GROUP (CHOOSE ONE)

☐ FT HOURLY☐ FT SALARY☐ PT HOURLY

COST CENTER

GRANT

FUND

WBS ELEMENT

ORDER

3 GENERAL INFORMATION

EMPLOYEE'S NAME – LAST, FIRST

Employee Qualifies For Job

☐ Yes ☐ No

HUMAN RESOURCES CONTACT

AGENCY/DEPARTMENT – OFFICE – DIVISION

HUMAN RESOURCES TELEPHONE

()

OFFICIAL TITLE OF SUPERVISOR

DIRECT SUPERVISOR'S POSITION NUMBER

HUMAN RESOURCES EMAIL

4 COMPARATIVE POSITIONS

List positions that have similar or identical duties to this position.

INCUMBENT NAME

POSITION NUMBER

OFFICIAL JOB TITLE / AGENCY

5 SUPERVISORY ELEMENTS

ORGANIZATIONAL CHART MUST BE ATTACHED

- ☐
- DETERMINES WORK ASSIGNMENTS
- ☐
- RECOMMENDS HIRING/PROMOTIONS
- ☐
- TRAINS STAFF
-
- ☐
- REVIEWS AND APPROVES WORK
- ☐
- PREPARES & SIGNS PES RATING
- ☐
- APPROVES LEAVE

NUMBER OF DIRECT
SUBORDINATES

6 ATTACHMENTS

Check to indicate attachments.

- ☐
- Organizational Chart (required)
- ☐
- Duties / Responsibilities (required)
- ☐
- Comments
- ☐
- MJD Position Numbers
- ☐
- Contracted Personnel Form

7 SIGNATURES

Sign and print below.

EMPLOYEE	DATE	<input type="checkbox"/> I certify that the information in this document is true and correct to the best of my knowledge. <input type="checkbox"/> I certify that I have reviewed the position description. I disagree with a portion of the contents and have attached comments.
DIRECT SUPERVISOR	DATE	<input type="checkbox"/> I certify that I agree with this document. <input type="checkbox"/> I certify that I have reviewed the position description. I disagree with a portion of the contents and have attached comments.
APPOINTING AUTHORITY (Required)	DATE	<input type="checkbox"/> I certify that I agree with this document. <input type="checkbox"/> I certify that I have reviewed the position description. I disagree with a portion of the contents and have attached comments.
PRINT NAME AND TITLE OF APPOINTING AUTHORITY		

8 JOB DUTIES AND RESPONSIBILITIES

Provide a brief statement describing the function of work or reason why the position exists. List duties indicating the percent of time spent for each area of responsibility. If applicable, describe any unusual physical demands and/or unavoidable hazards of the position. Attach additional pages if necessary.

PERCENTAGES MUST TOTAL 100% LIST DUTIES IN DECREASING ORDER OF IMPORTANCE / COMPLEXITY. THE NEED FOR SPECIAL LICENSE, POLICE COMMISSION, KNOWLEDGE OR TRAINING MUST BE INDICATED BELOW, IF APPLICABLE.
