



24-5564

DATE: May 7, 2024 (Item No. {{item.number}})

TO: Board of Supervisors

FROM: James R. Williams, County Executive

SUBJECT: Salary Ordinance amendment related to the classification study of Psychosocial Occupational Therapist Series

RECOMMENDED ACTION

Introduce and preliminarily adopt Salary Ordinance No. NS-5.24.74, an Ordinance amending Santa Clara County Salary Ordinance No. NS-5.24 relating to compensation of employees increasing the salary of the Psychosocial Occupational Therapist classification by approximately 10 percent and the Senior Psychosocial Occupational Therapist classification by approximately 11 percent.

FISCAL IMPLICATIONS

Approval of the recommended action will result in a Fiscal Year (FY) 2023-2024 cost increase of approximately \$3,000 for the Behavioral Health Services Department (BHSD) and \$8,000 for Santa Clara Valley Healthcare (SCVH). The FY 2023-2024 cost will be covered using existing salaries and benefits budget.

The estimated FY 2024-2025 (ongoing) cost increase of this reclassification is approximately \$45,000 for BHSD and \$110,000 for SCVH. The ongoing cost for BHSD will be covered using 2011 Realignment. Approximately \$90,000 of the SCVH ongoing cost will be reimbursed by BHSD for Barbara Arons services. The remaining \$20,000 will be covered by General Fund Investment in SCVH.

REASONS FOR RECOMMENDATION AND BACKGROUND

During the 2022 Service Employees International Union (SEIU) Local 521 Classification Study Window, four (4) Psychosocial Occupational Therapists and one (1) Senior Psychosocial Occupational Therapist (POT) submitted for a classification study. The incumbents requested to be reclassified to an Occupational Therapist and to adjust their salaries to align with other Occupational Therapists at the County of Santa Clara. In accordance with the Memorandum of Understanding between the County and Service Employees International Union (SEIU) Local 521, the joint labor-management committee

reviewed the request and accepted it, and Employee Services Agency - Human Resources (ESA-HR) conducted the classification study.

The Psychosocial Occupational Therapist classification series consists of a total of eight (8) Psychosocial Occupational Therapists and one (1) Senior Psychosocial Occupational Therapist. Four (4) Psychosocial Occupational Therapists at Barbara Arons Pavilion report to a Senior Psychosocial Occupational Therapist; two (2) Psychosocial Occupational Therapists at Mental Health Juvenile Hall report to a Program Manager I; one (1) Psychosocial Occupational Therapist at KidScope Behavioral Health Clinic reports to a Behavioral Health Division Director; one (1) Psychosocial Occupational Therapist at Valley Health Clinic-Bascom Pediatrics reports to a Developmental Behavioral Pediatrician; and one (1) Senior Psychosocial Occupational Therapist at Barbara Arons Pavilion reports to a Behavioral Health Medical Director.

Based on the Position Classification Questionnaires (PCQs) and desk audits, the following is a summary of tasks performed by the Psychosocial Occupational Therapist incumbents:

A majority of the time (65%) is spent in Patient Care. Specifically, the POTs clinically supervise/instruct patients with psychiatric illnesses, including 5150 holds and Murphy Conservatorships, in coping skills, symptom management, direct care planning, perceptual motor, activities of daily living (ADLs), sensory integration, and functional life skills; observe actual performance of occupations and tasks to identify what hinders or supports performance, including cognitive and motor skills; integrate patient goals, problems, and concerns with an analysis of patient performance; and identify patient problems and concerns about daily occupations.

Thirty percent (30%) of their time is spent on administrative responsibilities. They prepare medical record documentation in compliance with professional and regulatory guidelines and coordinate and present reports in multi-disciplinary treatment team meetings to provide input regarding patients' treatment, progress, and discharge planning needs.

The remaining five percent (5%) is spent on keeping current on new treatment techniques, including assessment and management of client assaultive behavior.

Based on the PCQs and desk audits, Senior Psychosocial Occupational Therapist incumbents are responsible for the following summary of tasks performed:

Forty-two percent (42%) of the time is spent on administrative tasks, including undertaking recruitment, orientation, and hiring of staff, and program planning and monitoring for a seven-day Occupational Therapy program (days and evenings), as well other non-related and specialized groups; using hospital computerized time keeping system for scheduling and staffing independently; covering staff during temporary absences, such as short of staff days, vacation, and sick time for both weekdays and weekend coverage; and providing written, verbal, and performance evaluations to staff to ensure staff competency and compliance with hospital and county policies/procedures.

Thirty-two percent (32%) is spent on supervisory responsibilities, such as providing direct supervision to Occupational Therapy team daily; coordinating staff day-to-day operation; researching and supporting program development; identifying educational needs and providing consultation for the team; and participating in internal and external professional activities.

Eleven percent (11%) of their time is spent on budgetary oversight, including program budgeting recommendations, writing proposals and making requests for codes, ordering supplies and equipment, determining space needs, and recruiting for donations; implements, conducts, and collects data; and presenting quarterly Quality Improvement projects and utilization reviews.

Ten percent (10%) is spent providing direct occupational therapy care, including daily groups, documentation, covering both units when needed, evaluating level of function, life skills, cognitive functions, and ADL skills needs, tasks, and analysis of patients' performance and behavior.

The remaining five percent (5%) is spent on educational endeavors, such as participating in research as needed, keeping current with Occupational Therapy treatments, and staff development in managing assaultive behavior.

The incumbents are requesting to be reclassified as Occupational Therapists.

The Psychosocial Occupational Therapist and Occupational Therapist classifications share similar tasks and employment standards. However, the scope of work for Psychosocial Occupational Therapist is specialized in mental health, whereas Occupational Therapists specialize in rehabilitation of the body. All the duties performed by the POTs were within the scope, definition, and distinguishing characteristics of their current job specification. Therefore, it was found that the incumbents are properly classified.

However, the job specifications for the Psychosocial Occupational Therapist and Senior Psychosocial Occupational Therapist have not been updated since 2008 and 2016, respectively. Therefore, the job specifications were updated to reflect the County's current language and to clarify the years of experience needed to perform the job duties at each level. Upon approval, the job specification revisions will be implemented administratively.

Salary

To determine if the Psychosocial Occupational Therapist classification is properly compensated, an external salary survey was conducted using the five (5) surrounding counties (Alameda, Contra Costa, San Francisco, San Mateo, and Santa Cruz). The survey found that the County of Santa Clara's Psychosocial Occupational Therapist classification is approximately eight percent (8%) higher than the comparable classifications. Santa Clara County's Senior Psychosocial Occupational Therapist classification is approximately four percent (4%) higher than the equivalent Supervising and Senior Therapist classifications in the surrounding counties.

An internal salary survey was also conducted. Based on educational requirements, licensure, and experience required, the Psychosocial Occupational Therapist was compared to the Occupational Therapist II, and the Senior Psychosocial Occupational Therapist was compared to the Occupational Therapist III. The Psychosocial Occupational Therapist is compensated approximately ten percent (10%) less than the Occupational Therapist II. The Senior Psychosocial Occupational Therapist is compensated approximately eleven percent (11%) less than the Occupational Therapist III.

Based on the salary surveys, it is recommended to adjust the salary of the Psychosocial Occupational Therapist classification series to align with the salary of the Occupational Therapist classification series, as they share similar education and licensure requirements. Both classification series focus on specialized treatment, one in mental health and the other in rehabilitation. The Psychosocial Occupational Therapist salary should increase by approximately ten percent (10%). The Senior Psychosocial Occupational Therapist salary should increase by approximately eleven percent (11.1%). This recommendation does not create a tie between the classifications.

SEIU Local 521 organization concurs with this recommendation.

CHILD IMPACT

The recommended action will have no/neutral impact on children and youth.

SENIOR IMPACT

The recommended action will have no/neutral impact on seniors.

SUSTAINABILITY IMPLICATIONS

The recommended action will have no/neutral sustainability implications.

STEPS FOLLOWING APPROVAL

The Clerk of the Board of Supervisors is requested to send OneMeeting notifications of completed processing to Lucinda Woodson, Staci Bjerk, Jennifer Paredes-Fricano, and Zullay Rodriguez, Employee Services Agency, Human Resources Department.

ATTACHMENTS:

- NS 5 24 74 ESA Salary Realignment for Psychosocial Occupational Therapist Series
- Class Report Psychosocial Occupational Therapist Series