

STATE OF WISCONSIN

PERSONNEL COMMISSION

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MARY CONROY and JEANNETTE
NELSON,

Appellants,

v.

Secretary, DEPARTMENT OF
EMPLOYMENT RELATIONS

Respondent.

Case Nos. 84-0047, 0048-PC

* * * * *

DECISION
AND
ORDER

NATURE OF THE CASE

This is an appeal from respondent's decision reallocating the appellants' positions from Social Services Specialist 3 to 2. At the prehearing conference held on April 9, 1984, before Kurt M. Stege, Hearing Examiner, the parties agreed to the following issue for hearing:

Whether or not the decisions of the respondent reallocating the appellants' positions from Social Services Specialist 3 (PR 12-08) to Social Services Specialist 2 (PR 12-07) were correct.

Hearing in the matter was held on June 4, 1984, before Dennis P. McGilligan, Commissioner. The parties completed their briefing schedule on August 24, 1984.

FINDINGS OF FACT

1. Appellant Conroy is in a position which is currently classified as a Social Services Specialist 2 (PR 12-07) and which has a working title of Child/Adolescent Mental Health Specialist.

2. According to appellant Conroy's position summary, her position "entails professional, consultative and administrative work in the initiation, development and implementation of the appropriate delivery of services to meet the identified needs of mentally ill children/adolescent populations throughout Wisconsin." Significant issues dealt with by appellant Conroy in this area include: underservice of the population, the shift of treatment from predominance of inpatient care to less restrictive alternatives, early identification and treatment and the needs of correctional clients. The service delivery agencies whose work she coordinates are: Ch. 51 Boards, county departments of social services, schools, private treatment agencies, correctional facilities and the courts. The treatment settings of the children and adolescents are: home, foster home, school, psychiatric inpatient and prison. The types of service which require coordination are: early identification and prevention, outpatient treatment, family counseling, inpatient treatment and correctional treatment.

3. The functions performed by appellant Conroy on a statewide basis in coordinating this range of mental health services for children and adolescents are: data analysis and identification of program gaps and underservice; initiation, development, planning, liaison and implementation of services, including coordination of mental health services with numerous other agencies and groups concerned with children's services; monitoring and evaluation of 51 Board mental health plans and budgets and grouping community mental health services for the aforesaid populations under this system; coordination of regional office staff efforts on child/adolescent mental health; management and technical staff training; development of Community Support Program initiatives and budget proposals to supplant inpatient treatment; reallocation of mental health funding to

child/adolescent services and analysis and alteration of federal and state funding formulas; development of primary prevention service proposals and writing grants for federal funding; broad advocacy of child/adolescent services, including co-direction of a "watch-dog" group, the Child/- Adolescent Mental Health Consortium composed of mental health professionals and community organizations and direction of the Juvenile Corrections Mental Health Task Group; revision and development of child/ adolescent mental health standards to conform with the new standard program categories. Conroy is the only person in her office who is responsible for and who acts as an advocate on behalf of the mentally ill children/- adolescent populations in Wisconsin.

4. Appellant Conroy was appointed to her current position in approximately November of 1970 at which time the position was classified as a Social Services Administrator 3, with a working title of Children's Program Development Consultant, and was supervised by the director of the Bureau of Mental Health through the assistant director.

5. In 1972 appellant Conroy's position was reallocated to Social Services Specialist 3 as a result of a personnel management survey.

6. Appellant Nelson is in a position which is currently classified as a Social Services Specialist 2 (PR 12-07) and which has a working title of Elderly Mental Health Specialist.

7. Appellant Nelson was appointed to her current position in 1978 at which time it was classified at the Social Services Specialist 3 (PR 12-08) level and was supervised by the director of the Bureau of Mental Health through the deputy director.

8. According to appellant Nelson's position summary, her position "entails professional, consultative and administrative work in the

initiation, development and implementation of the appropriate delivery of services to meet the identified needs of the mentally ill elderly populations throughout Wisconsin." Significant issues in elderly mental health are: depression, suicide, Alzheimer's and other irreversible dementias, elder abuse, medication, alcohol abuse, chronic physical problems and budget cutbacks which make handling these issues more difficult. The service delivery agencies whose work Ms. Nelson coordinates are: regional offices of DHSS, 51 Boards, county departments of social services, county ageing units, local service delivery agencies on contract and nursing homes. The treatment settings of the elderly are: own home, relative's home, adult foster home, group home, inpatient facility and nursing home. Some of the types of service which require coordination include: outreach and education, assessment, physical care, cognitive stimulation, daily living skills training, peer counseling, family assistance and counseling, family respite care, adult day care, supportive home care, nursing care, outpatient and inpatient psychiatric treatment, housing, transportation, congregate meals, crisis intervention and protective placement and guardianship.

9. The functions performed by appellant Nelson on a statewide basis in coordinating the aforesaid range of services for the elderly mentally ill are: data collection and analysis to identify service gaps; initiation, development and implementation of coordinated services; review of county 51 Board plans and budgets; assist local communities in the development and implementation of programs to meet specific needs of the mentally ill elderly population; development and oversight of regional office monitoring of counties; drafting of Administrative Code, technical assistance to task forces studying the needs of the mentally ill elderly

populations of Wisconsin and legislative liaison; management and technical staff training; increasing program funding from a variety of sources (this is achieved by analysis of Medicaid/Medicare reimbursement rules, development of service proposals and writing federal grants and centralization of multi-agency federal grants); evaluate and monitor community programs for the mentally ill elderly on a regular basis for compliance with state and federal statutes and recommend appropriate measures to bring the agency into compliance; replicate in other counties the existing 6-county pilot federal grant to develop cost-effective, acceptable and accessible models of mental health services to the elderly and in doing so, encourage cooperative planning between county aging units and 51 Boards; and develop, as appropriate, mental health standards for the elderly to conform with the new standard program categories. Nelson is the only person in her office responsible for the needs of the mentally ill elderly populations throughout Wisconsin.

10. Sometime after 1978 and before May, 1981, the appellants' positions were organizationally moved so that they performed the same functions but reported to the chief of the program planning and evaluation section who reported to the director of the Bureau of Mental Health.

11. In September of 1982, the Bureau of Mental Health became an office within the Bureau of Community Programs. The appellants' positions were moved organizationally under a section chief (Dan Crossman, Social Services Supervisor 3 PR 1-16) who reported to the Office Director (David Goodrick, Human Services Administrator 1 PR 1-17) who reported to the Bureau Director (Gerald Born, Human Services Administrator 3 PR 1-19). Although appellants are under the supervisory authority of Dan Crossman (he approves, for example, leave slips) and report to his position in the organizational chain of command, functionally (from a programmatic or

substantive policy perspective) they report to the Office of Mental Health, Director Goodrick and/or to the Bureau Director, Gerald Born. For example, appellant Nelson gets only one or two work assignments a year from Mr. Crossman. Ms. Nelson generally gets her work assignments from Mr. Goodrick and Mr. Born in addition to those she initiates on her own. Ms. Nelson has independent authority for her work within the Department to develop and implement policy, with occasional review by Mr. Goodrick and Mr. Born. Policy emanating from her work on multi-divisional task force groups is formally reviewed by the Division of Community Services Administrator, and sometimes the DHSS Secretary, with occasional prior comment by Mr. Goodrick. Ms. Nelson does not receive any work review or performance evaluation from Mr. Crossman. Appellant Conroy likewise receives her programmatic or substantive policy review elsewhere. Ms. Conroy receives "most" of her work assignments from Mr. Goodrick, having received only two from Mr. Crossman in the three years she has formally worked under him. Review is exercised by Mr. Goodrick's review and approval of her work plan and work products. Ms. Conroy was unable to recall any instance of her attendance at a meeting of Mr. Crossman's section or even an instance that such a meeting was held. Ms. Conroy also did not receive any work review or performance evaluation from Mr. Crossman.

12. The Social Services Specialist position standard provides, in relevant part, as follows:

* * *

Inclusions

This series encompasses a wide range of functional activities geared to providing the full spectrum of professional social services for the state. These activities include the administration and supervision of social welfare programs directly or through county and local agencies, the provision of consultative services to be administrative staff and the community, and the maintenance of a professional staff concerned with social

services operations management. The positions for which this series was designed are found primarily in the Department of Health and Social Services in the Divisions of Family Services, Corrections, and Mental Hygiene, with other similar programs identified in closely related agency operations. The majority of positions both in the central office and in the field units are included, except those listed below under Exclusions.

* * *

Allocation Factors

The State of Wisconsin's involvement in social services at various levels and in different fields creates situations wherein no single allocation or classification factor can be universally applied. For example, it is impossible to develop such a factor which could apply equally to casework supervisors and community consultants since their duties are extremely dissimilar. As a result the following factors can be applied and reviewed only in terms of similar positions.

1. Organizational Status - The most revealing and useful allocation factor available is an analysis of the position's relative rank in the organization, in both the departmental and the divisional environment. In general, this factor can appropriately place any position within the classification plan for this series, allowing a one level margin of error. Further refinement and adjudication depends on the remaining allocation factors.
2. Planning, Policy and Budgeting Responsibilities - This may be the second most encompassing factor since it touches nearly all positions at the higher levels. Positions responsible for program planning and corresponding policy making must be evaluated in terms of their relative influence in the areas of program size, budget, impact, complexity and scope. Quite frequently, responsibility for budget preparation and control rests at the same level as the responsibility for program planning and development as it is difficult to separate these aspects of the managerial role.
3. Program Direction and Employee Supervision - A further refinement of the allocation factors involves the analysis of the elements of program direction and the position's functional relationship in regard to the supervision of employes. Consideration should be given to supervisory responsibilities, number of services offered, program size, complexity and impact and the finances and resources involved.
4. Coordination, Specialization and Consultation Responsibilities - Positions responsible for providing coordinative, consultative and specialized services to the administration of the social services program must be evaluated in terms of the total impact of these services, the exclusivity of the function and the level of decision-making involved. Also an analysis should be made of the type of contacts necessitated in the providing of these services and whether or not the position has line responsibility in addition to its staff role.

SPECIFIC ALLOCATIONS AND EXAMPLES OF WORK PERFORMED

SOCIAL SERVICES SPECIALIST SERIES

* * *

Social Services Specialist 2 SR 12-07

This level represents the primary functional area of responsibility for providing social services consultation in specialized program areas. Specialized staff consultative service in a district or region can be included at this level depending upon the organizational relationship, the duties assigned and the depth and scope of the program involved. Central office consultants and program specialists at this level, in addition to their consultative roles, are involved in the planning, development and implementation of services and service related programs under the direction of higher level program supervisors or administrators. A limited number of field consultants are allocated to this level on the basis of providing consultative services in selected program areas which require highly specialized training and skills.

Representative Positions

County Liaison Specialist - Division of Family Services - provides program supervision to counties in the delivery of services.

Special Program Consultants - Divisions of Family Services and Mental Hygiene - provide consultative services to counties and community agencies in a highly specialized program area which requires advanced technical knowledge and competency.

Unit Coordinators - Division of Family Services - Responsible for directing and coordinating the activities of a program unit (day care or social services) in a region.

Central Office Consultants and Program Specialists, including Recruitment and Stipend Coordinators, and Staff Development Coordinators - all positions responsible for planning and administering, and providing consultative services for a major statewide program at the division level except those as specified in the next higher level in the series.

Field Consultant - Division on Aging - plans, promotes and organizes demonstration projects and other activities to develop effective programs for services to the aging at the community level.

Social Services Specialist 3 - SR 12-08

Most central office program specialists and district administration specialists are allocated to this level. District personnel at this level have on-going responsibility for the direction and coordination of all components of a distinct social services program (according to divisional identification of program areas) in their geographic area of jurisdiction. Program specialists at this level have relatively independent statewide responsibility for highly specialized services which cut across geographic

and functional program boundaries. These positions typically are delegated policy - and decision-making authority in their specialty area, and equate to the section chief level in the division's central office administrative structure.

Representative Positions

Program Specialists - Divisions of Mental Hygiene and Corrections - specifically, the following positions are allocated to this level:

Corrections

Foster Care Specialist
Classification Specialist
Work Release Specialist

Mental Hygiene

Day Care Consultant
Community Clinic Consultant
Mental Health Center Program Specialist
Children's Program Development Consultant
Community Residential Services Specialist
Drug Dependence Program Specialist

* * *

13. The total reorganization of the Bureau of Mental Health as it affected the appellants' positions was finalized in the summer, 1983. The appellants' positions were reallocated down to Social Services Specialists 2 (PR 12-07) effective October 2, 1983. Pay range 12-07 is counterpart to pay range 1-15.

14. On March 14, 1984, appellants filed timely appeals of their reallocations with the Commission.

15. The duties and responsibilities of appellants' positions are more accurately described by the class specifications for Social Services Specialist 3 and appellants' positions are more appropriately classified as Social Services Specialist 3.

CONCLUSIONS OF LAW

1. These appeals are properly before the Commission pursuant to §230.44(1)(b), Wis. Stats.
2. The appellants have the burden of proof.

3. The appellants have sustained their burden of proof.

4. The respondent's decision reallocating appellants' positions to Social Services Specialist 2 was incorrect.

OPINION

At issue herein is whether the appellants' positions should be classified at level 2 or level 3 of the Social Services Specialist series. In order for the appellants to prevail, they must satisfy their burden of proving that their positions meet the Social Services Specialist 3 definition and are more properly classified in that classification.

Parties' Positions:

The appellants argue that respondent erred when it reallocated them to the Social Services Specialist 2 level.

In support thereof appellants maintain that two factors constitute the essential difference between level 2 and level 3 of the Social Services Specialist series. The first criterion is the programmatic breadth of the specialized service area. The second is the level of responsibility and authority exercised in policy and decision-making. Appellants claim that a review and analysis of the evidence for each of the two classification criteria supports their classification at the higher level.

In regard to the first criterion, appellants claim the Specialist 2 level is silent on this question. However, appellants argue that the 3 level stresses both that the services are highly specialized and that they cut across geographic and functional program boundaries. Appellants maintain that their testimony and position descriptions outline this breadth. Appellants conclude that their statewide responsibilities which cut across geographic and functional program boundaries put them at the 3

level according to the Position Standard notwithstanding respondent's assertion to the contrary.

On the question of responsibility and authority, appellants contend that the Position Standard draws a clear distinction between levels 2 and 3. In this regard appellants note at level 2, program specialists"... are involved in the planning, development and implementation of services and service-related programs under the direction of higher level program supervisors or administrators." On the other hand, appellants point out that positions at level 3"... typically are delegated policy and decision-making authority in their specialty areas and equate to the section chief level." The parties agree that crucial to making the above distinction is the determination of the person and organizational level to whom the appellants directly report. The parties differ over the outcome of that determination.

Contrary to respondent, appellants maintain that they report functionally to Office of Mental Health Director David Goodrick, rather than Section Chief Dan Crossman. Also contrary to respondent, appellants maintain their authority is comparable to a Section Chief, placing them at level 3 according to the aforesaid Position Standard. In support thereof appellants argue that insofar as they answer to Mr. Goodrick, they exercise responsibility comparable to Mr. Crossman, who is a "Social Services Specialist 3," with respect to their programs.

"Having proven that their positions correspond to the Social Services Specialist standard on the two criteria," appellants request that the Commission find that respondent's decision to reallocate them to the 2 level was incorrect.

Respondent, on the other hand, argues simply that appellants' positions do not fit the class definition for the Social Services Specialist 3 in at least one essential factor: to be at the 3 level their positions must equate to a section chief while appellants' "positions equate only to unit heads." In support thereof, respondent offers the following rationale:

Mr. Goodrick's position as director of an office within a bureau is classified as a Human Services Administrator 1 (PR 1-17). Mr. Crossman, who is supervised by Mr. Goodrick, holds a position classified as a Social Services Supervisor 3 (PR 1-16). The supervisor 3-level is used primarily to classify section chief positions. Therefore, Mr. Crossman's unit is equated organizationally to a section. Mr. Crossman technically and organizationally supervises the appellants. Therefore, their positions cannot be equated to section chiefs and do not fit the class definition of Social Services Specialist 3.

Respondent adds that it is a well-established personnel practice and policy that a subordinate may not be at the same or higher pay range as his or her supervisor except under some very specific circumstances that relate primarily to the need to compensate a few occupations with unusually high salaries in the labor market (for example, a program manager supervising a medical doctor). Applying the principle to the instant case, respondent argues that since Mr. Crossman's position is classified at PR 1-16, the appellants can only be classified at most at PR 1-15. Respondent claims this principle "is clearly embodied in the Social Services Specialist and supervisor position standard by the placement of section chiefs who are supervisors at PR 1-16 and section-level specialists who are not supervisors at PR 1-16." Respondent further claims that no situation such as that which the appellants request is contemplated or provided for in the specification and that for the Commission "to agree with the appellants' contention in this case is to overturn the vast preponderance of state

classification practice and destroy the internal logic of the Social Services Specialist and supervisor class series."

Finally, respondent contends that appellants' positions are defined in the class specifications at the 2 level and are identified at that level by a representative position. Respondent claims that said positions are, in fact, central office consultants and program specialists which are "responsible for planning and administering, and providing consultative services for a major statewide program at the division level...."

Based on all of the above, the respondent urges the hearing examiner to conclude that the respondent's decision to reallocate the appellants' positions to Social Services Specialist 2 was correct and to dismiss the appeals.

Discussion:

A determination as to whether the appellants should be classified at level 2 or level 3 of the Social Services Specialist series can be based on two factors which constitute the essential difference between the two levels, as outlined in the Specialist position standards.

The first criterion is the breadth and content of program services. The second is the level of responsibility and authority exercised in policy and decision-making.

At both class levels, Social Services Specialists are involved in the planning, development and implementation of service delivery programs. The essential difference between the levels hinges on the breadth of programs involved in the delivery of services.

The Specialist 2 level is largely silent on this question although the class specifications do state that "this level represents the primary functional area of responsibility for providing social services

consultation in specialized program areas." The Specialist 3 level, however, stresses that "program specialists at this level have relatively independent statewide responsibility for highly specialized services which cut across geographic and functional program boundaries." (emphasis added)

The record clearly indicates the breadth of appellants' program service. The record also indicates the highly specialized nature of appellants' services. Finally, the record reveals that appellants' responsibilities cut across geographic and functional program boundaries.

Respondent does not attach much significance to this criterion because it feels most central office program specialists inherently have statewide responsibilities. However, the class specifications make it clear that where this is true and said specialists have statewide responsibilities the second criterion becomes more important. And on this question of responsibility and authority, the position standards draw a clear distinction between levels 2 and 3.

At level 2, program specialists "...are involved in the planning, development and implementation of services and service-related programs under the direction of higher level program supervisors or administrators."

At level 3, the positions "...typically are delegated policy- and decision-making authority in their speciality area and equate to the section chief level."

Again the record is clear. Appellants have been delegated policy and decision-making authority in their specialty area. There is no persuasive evidence in the record that they perform their duties under the direction of Mr. Crossman as argued by respondent. To the contrary they act independently subject to review by Mr. Goodrick and Mr. Born. Thus, the only question remaining in order for appellants' positions to fit the class definition for the Social Services Specialist 3 is whether their positions equate to the section chief level.

Crucial to making the above decision is the determination of the person and organizational level to whom the appellants directly report.

Respondent bases its conclusion that appellants report to Mr. Crossman on the August 1983 organizational chart (Respondent's Exhibit 8) and conversations with DHSS persons involved in the personnel aspects of the DCS reorganization. Appellants testified, on the other hand, while Mr. Crossman signs the leave slips and receives some copies of their work, Mr. Goodrick and others higher up in the chain of command, conduct first-line programmatic and substantive policy review of the decisions made by appellants in the operation of their specialized programs. Appellants argue that their unambiguous and unrebutted first-hand testimony is more persuasive than respondent's third-hand rendition.¹ The Commission would agree.²

Having established that appellants report to Mr. Goodrick and others at a higher level than Mr. Crossman, the question remains as to the proper characterization of appellants' authority regarding the position standards. Is it, or is it not, comparable to a section chief?

¹ No DHSS people involved in the survey were called. Thus, the value of their opinions were not examined by direct and cross-examination. Likewise, if Mr. Crossman and Mr. Goodrick had been called, additional first-hand information could have been ascertained.

² Although the current organizational chart indicates that physically appellants report to Mr. Crossman even this may not accurately reflect the reality of the situation. The various organizational charts contained in respondent's exhibit 8 reveal a "checkered" history of the mental health programs in the Division of Community Services and the relationship of positions therein. The record also indicates that it was often difficult to determine where positions, including Conroy's and Nelson's, report to on said organizational charts. Apparently, although the lines on the various organization charts showed what the Department wanted in terms of the chain of command or how the system was supposed to work in practice the situation was much different. As noted above, appellants have very little contact with Mr. Crossman and there is a real question whether he is responsible for them in any manner.

First, according to respondent's August 1983 organizational chart (Respondent's Exhibit 8) Mr. Goodrick is the Office Director. The Human Services Administrator 1 classification is reserved for regional directors, office directors and bureau directors.

Mr. Crossman, as a Social Services Supervisor 3, is functionally a section chief answering to Mr. Goodrick. Insofar as they also answer to Mr. Goodrick, appellants exercise responsibility comparable to Mr. Crossman with respect to their programs. The class specifications for a Social Services Specialist do not define what is meant by the work "equate." However, a comparison of the class specifications for level 2 and 3 of the Social Services Specialist series indicates the relevancy of examining the degree of responsibility and decision-making authority in making this determination. As noted above, appellants have a great deal of independence and authority in this area which, in the opinion of the Examiner, is comparable to that of a section chief like Mr. Crossman who on an organizational basis is apparently responsible to Mr. Goodrick for the physical supervision of employees under him, including the appellants. Certainly, there is nothing in the class specifications prohibiting such a conclusion. To the contrary, a reading of the class specifications as a whole supports such a determination.

Anthony Milanowski's testimony is most illuminating on this point.³

³ At all time material herein, Mr. Milanowski was a Personnel Specialist and Classification Analyst for the Division of Personnel, now Department of Employment Relations. His duties included evaluation of the classification level of positions on reclassifications, reallocations and original appointments. His areas of speciality included the Social Services and Human Services Administrator series. He was DER's representative on the survey and testified on behalf of the respondent.

In discussing the differences between the various levels of the Social Services Specialist series, Mr. Milanowski stated:

"...Social Services Specialist 3's would be 'super' program coordinators in the sense that they are section chiefs without subordinates. They have the same level of accountability and level of importance as section chiefs who would normally be Social Services Supervisor 3's in the (position) specification, but they did not have subordinates."

Mr. Milanowski went on to assert that since appellants report to Mr. Crossman, they function at the unit level.

However, having previously established that appellants report functionally to Mr. Goodrick, both the literal wording of the Social Services Specialist 3 standard and Milanowski's interpretation of it clearly describe the nature of appellants' level of authority: equal to a section chief with respect to their programs.

Having established that appellants' positions correspond to the Social Services Specialist 3 standard on two key criteria, the Commission finds it reasonable to conclude that respondents decision to reallocate them to the 2 level was incorrect. Such a conclusion is also supported by an application of the allocation factors for the Social Services Specialist position standard to the disputed positions. It has already been noted that from an organizational viewpoint appellants' positions should be located at level 3. This is perhaps the most important factor, "allowing a one level margin of error." The other factors also support appellants' classification at the higher level. The record is clear that appellants' planning, policy and budgeting responsibilities are significant and highly specialized and cut across program and geographic boundaries. (Factor 2 which "may be the second most encompassing factor.") Finally, appellants' program direction and "coordination, specialization and consultation responsibilities" are

carried out on an independent and policy-making basis. (Factors 3 and 4.) It is undisputed that appellants have primary, if not sole, responsibility for their specialty areas: mental health services for children/adolescents and elderly.

Respondent raises several other concerns that should be addressed. Respondent argues that appellants are really Central Office Consultants and Program Specialists at level 2 as noted above. At first glance the language in the class specifications could support such an interpretation. However, said language excepts from level 2 positions "specified in the next higher level in the series." As noted above, appellants satisfy the class specifications for level 3. The representative positions listed therein could easily be the appellants' own. Therefore, the Commission rejects this argument of respondent.

Respondent also argues that for appellants to be placed at the same pay level as Mr. Crossman would play havoc with the state's classification system. While it is true that this practice is somewhat unusual, as the respondent itself points out in its brief, it (the practice) does take place. Copies of respondent's various organizational charts contained in respondent's exhibit 8 indicate the practice was prevalent in appellants' own section. Perhaps this why the Social Services Specialist 3 position standard states "Most central office program specialists and district administration specialists are allocated to this level."

Finally, respondent claims that the Social Services Specialist and supervisor position standard excludes the appellants' request from being granted. However, the aforesaid position standards do permit "central office program specialists" who "have relatively independent statewide responsibility for highly specialized services which cut across geographic

and functional program boundaries" and who "are delegated policy - and decision-making authority in their speciality area, and equate to the section chief level" to be placed at level 3 of the Social Services Specialist level. Therefore, the Commission likewise rejects this argument of respondent.

Based on all of the foregoing, the Commission finds that the answer to the issue as stipulated to by the parties is NO, the respondent's decisions reallocating the appellants' positions from Social Services Specialists 3 (PR 12-08) to Social Services Specialist 2 (PR 12-07) were incorrect and should be reversed.

ORDER

The respondent's reallocation decisions are reversed and these matters are remanded for action in accordance with this decision.

Dated: November 21, 1984 STATE PERSONNEL COMMISSION

DPM:jab
FORMS


LAURIE R. McCALLUM, Commissioner


DENNIS P. MCGILLIGAN, Commissioner

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