



CITY OF BRIDGEPORT, CONNECTICUT



The City of Bridgeport is now accepting submissions for the position of

NURSE PRACTITIONER

Health Department - Communicable Disease Clinic

Salary and Benefits: \$110,396.00 annually. This position includes a comprehensive benefits package. This summary provides a brief overview of the benefits available to regular full-time municipal employees; depending on the employee group some of these benefits include retirement pension administered by CMERS (Connecticut Municipal Employees Retirement System), health insurance (medical, dental, vision, prescription), life, disability, paid leave, paid holidays, 457(a) deferred compensation plan (employee paid), and other voluntary employee paid benefits. This is a unionized position.

To Apply: Please email a cover letter, resume, supplied application, license verification and three (3) professional references (name & contact only) to COB.Jobs@BridgeportCT.gov.

Accepting complete submissions until the position is filled.

(Any/all changes to this opening shall be at the discretion of the City of Bridgeport).

Municipal Profile

The City of Bridgeport is in Fairfield County at the mouth of the Pequonnock River on Long Island Sound. It is bordered by the towns of Trumbull to the north, Fairfield to the west, and Stratford to the east; with an approximate population of 147,000, 50,367 households, and a population density of 9,226 residents per square mile. The city has a Mayor-City Council form of government. The City's Mayor is the chief executive officer of the City and serves four-year term(s). The City Council, which acts as the City's legislative body, consists of twenty (20) members elected for two-year terms.

GENERAL STATEMENT OF DUTIES:

Professional nursing work of more than ordinary difficulty and responsibility, assessing the health status of clients to detect the presence of health problems. Manages health problems by counseling and education of clients and, if necessary, by referral to other health providers or to other agencies; carries out diagnostic and therapeutic procedures, including the administration of medication and immunizations under physician-approved standing orders; performs these functions in clinic, home, school and other authorized settings; works with other nurses, health aides and outreach workers and performs related work as required, under the supervision of the City Medical Health Officer.

ESSENTIAL DUTIES AND RESPONSIBILITIES:

The essential functions or duties described below are the primary functions and duties of the position. There may be other types of work that may be performed, and the omission of a particular duty or function does not exclude that duty or function from the position provided the duty or function is similar in work, related to the work or logically assigned to the position.

- Interviews clients and/or their relative to obtain a complete personal, family, social and medical history.
- Performs physical examinations using basic skills of inspection palpation, percussion, and auscultation; and using stethoscope, otoscope, ophthalmoscope, percussion hammer and

sphygmomanometer. May use other diagnostic modalities if approved in writing by the Medical Health Officer.

- Distinguishes abnormal physical findings and other indications of suspected disease or defect which require medical consultation.
- Performs tests for vision, hearing, tuberculosis, blood pressure and urine; obtains blood samples for various test and performs other tests approved by and under the supervision of the Medical Health Officer.
- Performs home visits as required for health surveillance, case management or follow-up, constructs from the assessment data a list of all health problems.
- Develops and records for each problem a plan of management, differentiates between situations to be referred to a physician, a nurse, the emergency room of a hospital or to a specialized agency; follows up referrals to agencies or providers.
- Recognizes need for medical reassessment or altered regime; counsels and advises clients on good health practices, for early signs of disease and regarding the care and management of acute and chronic medical problems.

MINIMUM EDUCATIONAL REQUIREMENTS

- Graduation from an accredited school of nursing with a bachelors' degree.
- Graduation from a nationally recognized nurse practitioner training course.
- Current licensure as a registered professional nurse in Connecticut.
- Two years of satisfactory experience as a public health nurse in a community public health agency can substitute for the bachelor's degree.
- Any satisfactory equivalent combination of education, training, /;.and experience.

KNOWLEDGE, SKILLS, AND ABILITIES

- A good knowledge of human development and of health patterns and problems of all stages of life (from birth to old age).
- A good knowledge of common pediatric health problems such as diseases of infancy and childhood emotional problems, venereal diseases, teenage pregnancy, and substance abuse.
- A good knowledge of health maintenance and disease prevention and health surveillance.
- Skills in interviewing clients, recording medical and social data, and in performing physical examinations using a variety of medical instruments.
- Skills in performing injections, obtaining blood specimens, and in performing various medical tests.
- Ability to work well and to get along with others.
- Responsible administrative and instructional ability.
- Ability to make regular and special reports related to his or her work.
- Must possess a valid driver's license.

PHYSICAL DEMANDS AND WORK ENVIRONMENT

The physical demands and work environment characteristics described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations which do not cause undue hardship may be made to enable individuals with disabilities to perform the essential functions.

- While performing the duties of this job, the employee is frequently required to walk, sit and talk or hear. The employee is occasionally required to use hands to finger, handle, feel or operate objects, tools, or controls; and reach with hands and arms. The employee is occasionally required to climb or balance; stoop, kneel, crouch or crawl. The employee must

frequently lift and/or move up to 50 pounds and occasionally lift weights up to 75 pounds. Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception and the ability to adjust focus.

- While performing the duties of this job, the employee occasionally works near and possible contact with medicinal preparations, bodily fluids, communicable diseases, and any other conditions common in a nursing environment.

This job description is not, nor is to be intended to be, a complete statement of all duties, functions, responsibilities, and qualifications which comprise this position.

This position will require a pre-employment medical examination and drug testing.

An Equal Opportunity Employer MF/AA/DIS

For further information and contact:
CIVIL SERVICE COMMISSION
45 LYON TERRACE
BRIDGEPORT, CT 06604
TELEPHONE: (203)576-7103



CITY OF BRIDGEPORT, CONNECTICUT
CIVIL SERVICE COMMISSION

CITY HALL • 45 LYON TERRACE • BRIDGEPORT, CONNECTICUT 06604

Employment Application

Position Applied for		Date	
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APPLICANT INFORMATION							
Last Name		First Name		M.I.			
Mailing Address				Apartment/Unit #			
City		State		ZIP			
Phone			E-mail Address				
Commercial Drivers License (CDL) (Yes/No)			CT Drivers License (Yes/No)				
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Have you ever worked for the City of Bridgeport before?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?				

EDUCATION							
High School				Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
College				Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
Other				Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		

REFERENCES			
<i>Please list three professional references.</i>			
Full Name			Relationship
Company			Phone
Address			
Full Name			Relationship
Company			Phone
Address			
Full Name			Relationship
Company			Phone
Address			

PREVIOUS EMPLOYMENT					
Company				Phone	
Address				Supervisor	
Job Title					
Responsibilities					
From		To		Reason for Leaving	
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>

Company				Phone	
Address				Supervisor	
Job Title					
Responsibilities					
From		To		Reason for Leaving	
May we contact your previous supervisor for a reference?				YES	NO

Company				Phone	
Address				Supervisor	
Job Title					
Responsibilities					
From		To		Reason for Leaving	
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>

DEMOGRAPHICS				
<p>For purposes of Affirmative Action, we are requesting that you fill out the data below. This data will in no way be used to influence your possible selection for any position. The purpose of collecting this data is statistical and may help this office to determine whether advertising is reaching all segments of the community.</p>				
GENDER:	FEMALE <input type="checkbox"/>	MALE <input type="checkbox"/>	HISPANIC or LATINO	
ETHNICITY:	WHITE <input type="checkbox"/>	ASIAN <input type="checkbox"/>	BLACK or AFRICAN AMERICAN <input type="checkbox"/>	AMERICAN INDIAN or ALASKA NATIVE <input type="checkbox"/>
NATIVE HAWAIIAN or PACIFIC ISLANDER <input type="checkbox"/>		TWO or MORE RACES <input type="checkbox"/>		OTHER <input type="checkbox"/>

IN CASE OF EMERGENCY, PLEASE NOTIFY:			
Name:			Name:
Relationship:			Relationship:
Home Phone:			Home Phone:
Work Phone:			Work Phone:
Cell Phone:			Cell Phone:

DISCLAIMER AND SIGNATURE

Signature		Date	
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I certify that all information supplied on this application is accurate and truthful to the best of my knowledge. I understand that any misrepresentation of facts is cause for refusal of employment and/or termination of employment.

I understand that, if I am hired as a seasonal or part-time employee, I am not eligible for any City of Bridgeport sponsored benefits.

In the case of an emailed application, entering your name above will constitute an electronic signature. You may be asked to sign this application in person if you are offered a position with the City of Bridgeport.

It is the policy of the City of Bridgeport to employ, train, compensate, and promote individuals without regard to race, religion, national origin, sex, sexual orientation, age, disability, veteran status, or other characteristics protected by law.