## **POSITION ADJUSTMENT REQUEST**

NO. <u>20999</u> DATE <u>9/20/11</u>

Department No./
Budget Unit No. <u>0450</u> Org No. <u>6377</u> Agency No. <u>A18</u>

Action Requested: Add one (1) Community Health Worker I (VKV Clerk (9QWA) at salary level QS5 1026 (\$2,950-\$3,586), one (1) I (\$8,147-\$9,903), one (1) Registered Nurse-Experienced (VWXD) Health Education Specialist (VMWD) at salary level QT5 1207 (\$3	Family Nurse Prac at salary level L3I	titioner (VWSB	) at salary level L35 1873
(40	•	Effective Date:	10/1/2011
Classification Questionnaire attached: Yes ☐ No ☒ / Cost is v	•	_	
Total One-Time Costs (non-salary) associated with request:	Manin Boparanone	o baagott 100	A [
Estimated total cost adjustment (salary / benefits / one time):	-		
	Net County Cost	\$0.00	
	-	\$0.00	
SOURCE OF FUNDING TO OFFSET ADJUSTMENT Federally G	<u> zuaimeu neaim Ge</u>	enter Funds	
Department must initiate necessary adjustment and submit to CAO. Use additional sheet for further explanations or comments.			
·		Teji	i O'Malley
		(for) Der	partment Head
		(, = 0)	
REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCES	S DEPARTMENT		
	Dorothy San	soe	9/20/2011
De	eputy County Adm	inistrator	Date
ADD one (1) Community Health Worker I (VKWC) at salary level Q salary level QS5 1026 (\$2,950-\$3,586), one (1) Family Nurse Practione (1) Registered Nurse-Experienced (VWXD) at salary level L3H Specialist (VMWD) at salary level QT5 1207 (\$3,530-\$4,290) in the Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Basic / Effective: Day following Board Action.	titioner (VWSB) a I 0400 (\$7,091-\$7 e Health Services	t salary level L3 ,903), and one	35 1873 (\$8,147-\$9,903),
(Date)			
——————————————————————————————————————	Director of Huma	n Resources	Date
(10.7)			
COUNTY ADMINISTRATOR RECOMMENDATION:		DATE	<u>11/28/2011</u>
Approve Recommendation of Director of Human Resources Disapprove Recommendation of Director of Human Resources		Dorothy Sansoe	
Other:	_	(for) Co	unty Administrator
BOARD OF SUPERVISORS ACTION: Adjustment is APPROVED ☐ DISAPPROVED ☐	David .		the Board of Supervisors nty Administrator
DATE	BY	_	
APPROVAL OF THIS ADJUSTMENT CONSTITUTES A PE	RSONNEL / SALA	ARY RESOLUT	TON AMENDMENT
POSITION ADJUSTMENT ACTION TO BE COMPLETED BY HUMAN RE	SOURCES DEPAR	TMENT FOLLOV	VING BOARD ACTION

Adjust class(es) / position(s) as follows:

Department Health Services/Public Health

## **REQUEST FOR PROJECT POSITIONS**

De	Department	Date <u>12/1/2011</u>	No. <u>xxxxxx</u>
1.	I. Project Positions Requested:		
2.	2. Explain Specific Duties of Position(s)		
3.	8. Name / Purpose of Project and Funding Source (do not ι	use acronyms i.e. SB40	Project or SDSS Funds)
4.	. Duration of the Project: Start Date End Is funding for a specified period of time (i.e. 2 years) or o	l Date n a year-to-year basis?	Please explain.
5.	. Project Annual Cost		
	a. Salary & Benefits Costs:	b. Support Costs: (services, supplies, equ	ipment, etc.)
	c. Less revenue or expenditure:	d. Net cost to Genera	l or other fund:
6.	Briefly explain the consequences of not filling the project a. potential future costs b. legal implications c. financial implications		
7,	Briefly describe the alternative approaches to delivering the alternatives were not chosen.	he services which you h	ave considered. Indicate why these
8.	Departments requesting new project positions must submarked halfway point of the project duration. This report is to be seforward the report to the Board of Supervisors. Indicate the	ubmitted to the Human	Resources Department, which will
9.	How will the project position(s) be filled?  a. Competitive examination(s)  b. Existing employment list(s) Which one(s)?  c. Direct appointment of:  1. Merit System employee who will be placed.	ced on leave from curre	nt job

USE ADDITIONAL PAPER IF NECESSARY

Provide a justification if filling position(s) by C1 or C2