POSITION ADJUSTMENT REQUEST

NO. <u>21237</u> DATE <u>1/30/2013</u>

Department No./
Budget Unit No. 0540 Org No. 6517 Agency No. A18

Department Health Services- Hospital Enterprise Budget Unit No. 0540 Org No. 6517 Agency No. A18				
Action Requested: CANCEL two (2) Clerk-Experienced Level (JV \$3236.32), and ADD one (1) Medical Records Technician (VNTB the Health Services Department.				
	Proposed	d Effective Date:	: <u>2/13/2013</u>	
Classification Questionnaire attached: Yes \square No \boxtimes / Cost is	within Departmen	it's budget: Yes	⊠ No □	
Total One-Time Costs (non-salary) associated with request:	•	Ü		
Estimated total cost adjustment (salary / benefits / one time):				
,	Net County Cost	\$0.00		
Total this FY (\$221.00)	N.C.C. this FY	\$0.00		
SOURCE OF FUNDING TO OFFSET ADJUSTMENT Cost Savi		<u> </u>		
Department must initiate necessary adjustment and submit to CAO.				
Use additional sheet for further explanations or comments.		Eni	id Mendoza	
	_	(for) De	epartment Head	
REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCE	ES DEPARTMEN	Γ		
	Dorothy Sa	insoe	2/4/2013	
	Deputy County Ad		Date	
	Deputy County Au	IIIIIIStrator	Date	
HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS Exempt from review under delegated authority		I	DATE	
Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Basi Effective: Day following Board Action. (Date)	ic / Exempt salary schedu	le.		
(fc	or) Director of Hun	nan Resources	Date	
COUNTY ADMINISTRATOR RECOMMENDATION: Approve Recommendation of Director of Human Resources		DATE	<u>2/4/2013</u>	
☐ Disapprove Recommendation of Director of Human Resource ☐ Other: _Approve as requested by Department	es	Dorothy Sansoe		
		(for) C	County Administrator	
BOARD OF SUPERVISORS ACTION: Adjustment is APPROVED DISAPPROVED	Davi	David J. Twa, Clerk of the Board of Supervisors and County Administrator		
DATE	BY _			
APPROVAL OF THIS ADJUSTMENT CONSTITUTES A F	PERSONNEL / SA	LARY RESOLU	JTION AMENDMENT	
POSITION ADJUSTMENT ACTION TO BE COMPLETED BY HUMAN F Adjust class(es) / position(s) as follows:	RESOURCES DEPA	ARTMENT FOLLO	OWING BOARD ACTION	

P300 (M347) Rev 3/15/01

REQUEST FOR PROJECT POSITIONS

Эе	partment
۱.	Project Positions Requested:
2.	Explain Specific Duties of Position(s)
3.	Name / Purpose of Project and Funding Source (do not use acronyms i.e. SB40 Project or SDSS Funds)
1 .	Duration of the Project: Start Date End Date Is funding for a specified period of time (i.e. 2 years) or on a year-to-year basis? Please explain.
5.	Project Annual Cost
	a. Salary & Benefits Costs: b. Support Costs: (services, supplies, equipment, etc.)
	c. Less revenue or expenditure: d. Net cost to General or other fund:
6.	Briefly explain the consequences of not filling the project position(s) in terms of: a. potential future costs b. legal implications c. financial implications
7.	Briefly describe the alternative approaches to delivering the services which you have considered. Indicate why these alternatives were not chosen.
3.	Departments requesting new project positions must submit an updated cost benefit analysis of each project position at thalfway point of the project duration. This report is to be submitted to the Human Resources Department, which will forward the report to the Board of Supervisors. Indicate the date that your cost / benefit analysis will be submitted
).	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 on leave from current job 2. Non-County employee
	Provide a justification if filling position(s) by C1 or C2

USE ADDITIONAL PAPER IF NECESSARY