## POSITION ADJUSTMENT REQUEST

NO. <u>22012</u> DATE 12/2/2016

David J. Twa, Clerk of the Board of Supervisors

BY \_\_\_\_

and County Administrator

Department No./

Department Health Services Budget Unit No. 0450 Org No. 5890 Agency No. A18 Action Requested: Add one (1) full-time Clerk-Senior Level (JWXC) in the Health Services Department. Proposed Effective Date: 1/11/2017 Classification Questionnaire attached: Yes 🗌 No 🖂 / Cost is within Department's budget: Yes 🗍 No 🔀 Total One-Time Costs (non-salary) associated with request: \$0.00 Estimated total cost adjustment (salary / benefits / one time): Total annual cost \$86,487.00 Net County Cost \$12,973.05 Total this FY \$36,036.25 N.C.C. this FY \$5,405.43 SOURCE OF FUNDING TO OFFSET ADJUSTMENT 85% State CCS Fund and 15% General Fund Department must initiate necessary adjustment and submit to CAO. Use additional sheet for further explanations or comments. Arlene J. Lozada (for) Department Head REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCES DEPARTMENT Enid Mendoza 1/3/2017 **Deputy County Administrator** Date DATE \_\_\_\_\_ HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS Exempt from Human Resources review under delegated authority. Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Basic / Exempt salary schedule. Effective: ☐ Day following Board Action. (Date) (for) Director of Human Resources Date COUNTY ADMINISTRATOR RECOMMENDATION: DATE 1/3/2017 Approve Recommendation of Director of Human Resources Disapprove Recommendation of Director of Human Resources Enid Mendoza Other: Approve as recommended by the department. (for) County Administrator

APPROVAL OF THIS ADJUSTMENT CONSTITUTES A PERSONNEL / SALARY RESOLUTION AMENDMENT

POSITION ADJUSTMENT ACTION TO BE COMPLETED BY HUMAN RESOURCES DEPARTMENT FOLLOWING BOARD ACTION Adjust class(es) / position(s) as follows:

P300 (M347) Rev 3/15/01

DATE \_\_\_\_

BOARD OF SUPERVISORS ACTION:

Adjustment is APPROVED DISAPPROVED

## **REQUEST FOR PROJECT POSITIONS**

De	partment
1.	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)
4.	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 d. political implications e. organizational 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.
8.	Departments requesting new project positions must submit an updated cost benefit analysis of each project position at the halfway 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
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 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