POSITION ADJUSTMENT REQUEST

NO. <u>22224</u> DATE <u>1/3/2018</u>

Department Health Services	Department N Budget Unit N		g No. <u>6418</u> Agenc	v No. A18	
tion Requested: Add two (2) permanent full-time Sterile Processing Distribution Technician (1EWA) positions at salary plan d grade TA5-1015 (\$3,257.28 - \$3,959.25) in the Health Services Department. (Represented)					
		Proposed	Effective Date:		
Classification Questionnaire attached: Yes No D Total One-Time Costs (non-salary) associated with r Estimated total cost adjustment (salary / benefits / or	equest: <u>\$0.00</u>	•		No 🗌	
Total annual cost <u>\$169,550</u>	,	ounty Cost	\$0.00		
Total this FY <u>\$84,775.0</u>		. this FY	<u>\$0.00</u>		
SOURCE OF FUNDING TO OFFSET ADJUSTMEN	Γ Federally Qualif	ied Health C	Care (FQHC) reven	ue	
Department must initiate necessary adjustment and submi Use additional sheet for further explanations or comments.					
			Arlene J	l. Lozada	
		-	(for) Depai	rtment Head	
REVIEWED BY CAO AND RELEASED TO HUMAN	RESOURCES DE	PARTMEN	Г		
		Susan Sr	oith	1/5/2018	
		Susan Si		1/3/2010	
	Deputy	County Ad	ministrator	Date	
HUMAN RESOURCES DEPARTMENT RECOMMENT Exempt from Human Resources review under delega			TE		
Amend Resolution 71/17 establishing positions and resolutions allocating c Effective: Day following Board Action.	asses to the Basic / Exem	pt salary schedu	le.		
	(for) Dire	ector of Hun	nan Resources	Date	
COUNTY ADMINISTRATOR RECOMMENDATION:			DATE	<u>1/9/18</u>	
 Approve Recommendation of Director of Human R Disapprove Recommendation of Director of Humar Other: <u>Approve as recommended by the Dept.</u> 			/s/ Julie DiMaggio Enea		
			(for) County Administrator		
BOARD OF SUPERVISORS ACTION: Adjustment is APPROVED DISAPPROVED		David J. Twa, Clerk of the Board of Supervisors and County Administrator			
DATE		BY _			
APPROVAL OF THIS ADJUSTMENT CONST	TITUTES A PERSO	ONNEL / SA	LARY RESOLUTIO	ON AMENDMENT	
POSITION ADJUSTMENT ACTION TO BE COMPLETED	BY HUMAN RESOL	IRCES DEPA	RTMENT FOLLOWI	NG BOARD ACTION	

P300 (M347) Rev 3/15/01

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

REQUEST FOR PROJECT POSITIONS

Department		Date <u>1/9/2018</u>	No. <u>xxxxxx</u>				
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.	I. 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, equ	uipment, etc.)				
	c. Less revenue or expenditure:	d. Net cost to Genera	al or other fund:				
6.		the project position(s) in terms of: d. political implications e. organizational 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