POSITION ADJUSTMENT REQUEST

NO. <u>22275</u> DATE <u>4/17/2018</u>

Department No./

Department Health Services Budget Unit No. 0450 Org No. 5826 Agency No. A18

Action Requested: Add one Senior Health Education Specialist (VMWE) position at salary plan and grade level TC5-1543 (\$5,494 - \$6,678) and cancel one Health Education Specialist (VMWD) position #16084 at salary plan and grade level TC5-1207 (\$3,939 - \$4,788) in the Health Services Department. (Represented)

1207 (\$3,939 - \$4,788) in the Health Services Department. (Rep	resented)		
	Proposed Effective Date:	<u></u>	
Classification Questionnaire attached: Yes \square No \boxtimes / Cost is	s 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 \$33,339.00	Net County Cost		
Total this FY \$5,556.00	N.C.C. this FY		
SOURCE OF FUNDING TO OFFSET ADJUSTMENT 50% Fam	nily Maternal & Child Health fund, 50%	Prop 56 funds	
Department must initiate necessary adjustment and submit to CAO. Use additional sheet for further explanations or comments.			
	Jo-Anne	Jo-Anne Linares	
	(for) Departi	ment Head	
REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCE	ES DEPARTMENT		
	Susan Smith	4/23/2018	
	Deputy County Administrator	Date	
HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS Exempt from Human Resources review under delegated authorit	DATE		
Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Base Effective: Day following Board Action. Day (Date)	sic / Exempt salary schedule.		
	for) Director of Human Resources	Date	
COUNTY ADMINISTRATOR RECOMMENDATION: Approve Recommendation of Director of Human Resources Disapprove Recommendation of Director of Human Resource Other: Approve as recommended by the Department.	DATE es		
ZS Other. Approve as recommended by the Department.	(for) Count	y 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 CONSTITUTES A	PERSONNEL / SALARY RESOLUTION	N AMENDMENT	
POSITION ADJUSTMENT ACTION TO BE COMPLETED BY HUMAN	RESOURCES DEPARTMENT FOLLOWIN	G BOARD ACTION	

P300 (M347) Rev 3/15/01

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

REQUEST FOR PROJECT POSITIONS

De	partment Date <u>4/23/2018</u> No. <u>xxxxxxx</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.	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.
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