POSITION ADJUSTMENT REQUEST

NO. <u>22397</u> DATE 12/4/2018

Department No./

Department Health Services

Budget Unit No.0466 Org No 5933. Agency No. A18

Action Requested: Add one Mental Health Clinical Specialist (VQSB) position and cancel one vacant Substance Abuse Counselor (VHVC) position #17212 in Health Services Department.

Classification Questionnaire attached: Yes \(\subseteq \) No \(\subseteq \) / Cost Total One-Time Costs (non-salary) associated with request: \(\frac{9}{2} \) Estimated total cost adjustment (salary / benefits / one time): Total annual cost \(\frac{\$22,370}{} \) Total this FY \(\frac{\$9,320}{} \) SOURCE OF FUNDING TO OFFSET ADJUSTMENT \(\frac{50\%}{20} \) Residual Residua	Net County Cost N.C.C. this FY
Department must initiate necessary adjustment and submit to CAO. Use additional sheet for further explanations or comments.	Sabrina Pearson
	(for) Department Head
REVIEWED BY CAO AND RELEASED TO HUMAN RESOUR	CES DEPARTMENT
	Deputy County Administrator Date
HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS	DATE
Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Effective: Day following Board Action. [Basic / Exempt salary schedule.
	(for) Director of Human Resources Date
COUNTY ADMINISTRATOR RECOMMENDATION: Approve Recommendation of Director of Human Resource Disapprove Recommendation of Director of Human Resource Other: Approve as recommended by the department.	
ZS Other. <u>Αρρίονε as recommended by the department.</u>	(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 CONSTITUTES	A PERSONNEL / SALARY RESOLUTION AMENDMENT

POSITION ADJUSTMENT ACTION TO BE COMPLETED BY HUMAN RESOURCES DEPARTMENT FOLLOWING BOARD ACTION

P300 (M347) Rev 3/15/01

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

REQUEST FOR PROJECT POSITIONS

De	partment Date <u>12/4/2018</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 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