POSITION ADJUSTMENT REQUEST

NO. 22550 DATE 10/25/2019

	rtment No./ et Unit No. <u>0503</u> Org No. <u>5311</u> Agency	No. A19	
Action Requested: Add five (5) full time Social Worker (X0VC)	(represented) positions at salary plan ar		
(\$5,463 - \$6,641) in the Employment and Human Services Dep		- / / -	
	Proposed Effective Date: 11/		
Classification Questionnaire attached: Yes ☐ No ☒ / Cost		No 🗆	
Total One-Time Costs (non-salary) associated with request: §	<u>0.00</u>		
Estimated total cost adjustment (salary / benefits / one time):			
Total annual cost <u>\$677,000.00</u>	Net County Cost \$88,010.00		
Total this FY \$338,500.00	N.C.C. this FY \$44,005.00		
SOURCE OF FUNDING TO OFFSET ADJUSTMENT 48% Fe	deral, 39% State, 13% County		
Department must initiate necessary adjustment and submit to CAO. Use additional sheet for further explanations or comments.			
	(for) Departr	ment Head	
REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCE	CES DEPARTMENT		
	Julia Taylor	10/25/2019	
	Deputy County Administrator	Date	
	Deputy County Administrator	Date	
HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS Add five (5) full time Social Worker (X0VC) (represented) posit Employment and Human Services Department.		5,463 - \$6,641) in the	
Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Effective: Day following Board Action.	Basic / Exempt salary schedule.		
Day following Board Action:	Amanda Monson	10/28/2019	
	(for) Director of Human Resources	Date	
COUNTY ADMINISTRATOR RECOMMENDATION: Approve Recommendation of Director of Human Resources Disapprove Recommendation of Director of Human Resources Other:			
	(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	A PERSONNEL / SALARY RESOLUTION	I AMENDMENT	
POSITION ADJUSTMENT ACTION TO BE COMPLETED BY HUMAN Adjust class(es) / position(s) as follows:	RESOURCES DEPARTMENT FOLLOWING	G BOARD ACTION	

P300 (M347) Rev 3/15/01

REQUEST FOR PROJECT POSITIONS

De	Ppartment Date <u>10/28/2019</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.	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