

POSITION ADJUSTMENT REQUEST

NO. _____
DATE 10/5/20

Department PUBLIC DEFENDER Department No./
Budget Unit No. 0243 Org No. 2918 Agency No. 43

Action Requested ADOPT Position Adjustment Resolution No. XXXX to add three (3) Deputy Public Defender II (25VA) (represented) positions at Salary plan and Grade JD5 1872 (\$8,855-\$10,763) in the Public Defenders Office with an effective date of October 20, 2020. If approved, The Public Defenders Office will eliminate three (3) Deputy Public Defender Fixed-Term (25WB) (represented) positions when filled. (100%AB109 funded) Proposed Effective Date: 10/20/2020

Classification Questionnaire attached: Yes No / Cost is within Department's budget: Yes No

Total One-Time Costs (non-salary) associated with request: \$ _____

Estimated total cost adjustment (salary / benefits / one time):

Total annual cost	\$ 506,080	Net County Cost	\$ _____
Total this FY	\$ _____	N.C.C. this FY	\$ _____

SOURCE OF FUNDING TO OFFSET ADJUSTMENT AB109

Department must initiate necessary adjustment and submit to CAO.
Use additional sheet for further explanations or comments.

Joanne Sanchez
(for) Department Head

REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCES DEPARTMENT

Deputy County Administrator Date _____

HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS DATE _____

ADOPT Position Adjustment Resolution No. 25636 to add three (3) Deputy Public Defender II (25VA) (represented) positions at Salary Plan and Grade JD5 1872 (\$8,855-\$10,763) in the Public Defenders Office (100% AB109 funded).

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

COUNTY ADMINISTRATOR RECOMMENDATION DATE _____

Approve Recommendation of Director of Human Resources
 Disapprove Recommendation of Director of Human Resources
 Other: _____
(for) County Administrator

BOARD OF SUPERVISORS ACTION: David Twa, Clerk of the Board of Supervisors
Adjustment APPROVED DISAPPROVED 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
Adjust class(es) / position(s) as follows:

REQUEST FOR PROJECT POSITIONS

Department _____ Date _____ No. _____

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

- | | | | |
|--------------------------------|----------|---------------------------------------|----------|
| 1. Salary & Benefit Cost | \$ _____ | 2. Support Cost | \$ _____ |
| | | (services, supplies, equipment, etc.) | |
| 3. Less revenue or expenditure | \$ _____ | 4. 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?

- | | |
|--------------------------|---|
| <input type="checkbox"/> | a) Competitive Examination(s) |
| <input type="checkbox"/> | b) Existing employment list(s) Which one(s) |
| <input type="checkbox"/> | c) Direct appointment of |
| <input type="checkbox"/> | 1. Merit system employee who will be placed on leave from current job |
| <input type="checkbox"/> | 2. Non-County employee |

Provide a justification if filling position(s) by C1 or C2