POSITION ADJUSTMENT REQUEST

NO. <u>25657</u> DATE <u>12/3/2020</u>

Department Health Services

Department No./

Budget Unit No. 0540 Org No.6547 Agency No. A18

Action Requested: Add one Disability Benefits Coordinator (VATC) (represented) position at salary plan and grade ZB5 1631 (\$6,614-\$8,039), one Personnel Technician (AP7B) (unrepresented) position at salary plan and grade B85 1308 (\$5,298-\$6,440), and one Departmental Human Resources Supervisor (unrepresented) (APFB) position at salary plan and grade B85 1012 (\$7,285-\$9,763); and cancel one vacant Departmental Personnel Officer-Exempt (APG1) position at salary plan and grade B85-1876 (\$8,846-\$10,752) in the Health Services Department.

	Proposed Effective D	Proposed Effective Date: 12/16/2020			
lassification Questionnaire attached: Yes ☐ No ☒ / Cost is 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 <u>\$290,083.10</u>	Net County Cost \$0				
Total this FY \$0	N.C.C. this FY \$0				
SOURCE OF FUNDING TO OFFSET ADJUSTMENT 100% Ho					
Department must initiate necessary adjustment and submit to CAO. Use additional sheet for further explanations or comments.					
	(for) Department Head			
REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCE	ES DEPARTMENT				
	Enid Mendoza	12/7/2020			
	Deputy County Administrator	Date			
HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS	DATE				
Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Base Effective: Day following Board Action.	sic / Exempt salary schedule.				
Day following Board Action.	Tina Pruett	12/7/2020			
(f	or) Director of Human Resource	ces Date			
COUNTY ADMINISTRATOR RECOMMENDATION: Approve Recommendation of Director of Human Resources	DATE	12/8/2020			
☐ Disapprove Recommendation of Director of Human Resourc ☐ Other:	es	Enid Mendoza			
	(fc	(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 RES	OLUTION AMENDMENT			
POSITION ADJUSTMENT ACTION TO BE COMPLETED BY HUMAN	RESOURCES DEPARTMENT FO	DLLOWING BOARD ACTION			

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

REQUEST FOR PROJECT POSITIONS

De	Department	Date	No. <u>xxxxxx</u>		
1.	1. Project Positions Requested:				
2.	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.	5. Project Annual Cost				
	a. Salary & Benefits Costs:	b. Support (services,	Costs:supplies, equipment, etc.)		
	c. Less revenue or expenditure:	d. Net cost	to General or other fund:		
6.	a. potential future costs d. politic	ject position(s) in cal implications izational implicati			
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 Resource's Department, which will forward the report to the Board of Supervisors. Indicate the date that your cost / benefit analysis will be submitted				
9.	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 2. Non-County employee		from current job		
	Provide a justification if filling position(s) by C1 or C2				

USE ADDITIONAL PAPER IF NECESSARY