POSITION ADJUSTMENT REQUEST

NO. <u>25665</u> DATE <u>11/20/2020</u>

Department No./

Department <u>EHSD-CSB</u> Budget Unit No. <u>0588</u> Org No. <u>1417</u> Agency No. <u>19</u>

Action Requested: Reallocate in the Salary Schedule the following classifications: Teacher Assistant Trainee-Project, Infant Toddler Associate Teacher-Prjct, Child Nutrition Food Services Transporter-Prjct, Community Services Building Services Worker-Project in the Employment and Human Services, Community Services Bureau.

| Worker Froject in the Employment and Human Cervices, Comm | drifty October Buil | cau. | | |
|---|------------------------------------|--|-----------------------|--|
| | Proposed Effective Date: 12/3/2020 | | | |
| Classification Questionnaire attached: Yes \square No \boxtimes / Cost is | s within Department | t's budget: Yes 🏻 | ☑ No □ | |
| Total One-Time Costs (non-salary) associated with request: \$0 | <u>.00</u> | | | |
| Estimated total cost adjustment (salary / benefits / one time): | | | | |
| Total annual cost \$389,173.00 | Net County Cost | <u>\$0.00</u> | | |
| Total this FY <u>\$227,017.58</u> | N.C.C. this FY | <u>\$0.00</u> | | |
| SOURCE OF FUNDING TO OFFSET ADJUSTMENT N/A | | | | |
| Department must initiate necessary adjustment and submit to CAO. Use additional sheet for further explanations or comments. | | _ | | |
| | | Ev | a Gaipa | |
| | (for) D | | Pepartment Head | |
| REVIEWED BY CAO AND RELEASED TO HUMAN RESOURC | ES DEPARTMENT | | | |
| | Dennis Bozanich | | 12/17/2020 | |
| | Deputy County Ad | ministrator | Date | |
| Reallocate the salaries of the following classifications on the sal Teacher-Project, Infant Toddler Associate Teacher-Project; Chil- Services Building Service Worker-Project in the Employment ar (100% Offset) | d Nutrition Food Se | ervices Transporte | er-Project, Community | |
| Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Ba Effective: Day following Board Action. | sic / Exempt salary schedu | ıle. | | |
| Day following Board Action: | Amanda Monson | | 1/6/2021 | |
| (1) | for) Director of Hun | nan Resources | Date | |
| COUNTY ADMINISTRATOR RECOMMENDATION: Approve Recommendation of Director of Human Resources Disapprove Recommendation of Director of Human Resource Other: | es | DATE | | |
| | (for) County Administrator | | | |
| BOARD OF SUPERVISORS ACTION: Adjustment is APPROVED DISAPPROVED | David | David J. Twa, Clerk of the Board of Supervisors and County Administrator | | |
| DATE | BY _ | | | |
| APPROVAL OF THIS ADJUSTMENT CONSTITUTES A | PERSONNEL / SA | LARY RESOLUT | ON 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

| De | epartment No. xxxxxx | |
|----|---|----|
| 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 | he |
| 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