POSITION ADJUSTMENT REQUEST

NO. <u>25880</u>

DATE <u>1/14/2022</u>

Department No./

Department <u>Board of Supervisors</u>   Budget Unit No. <u>0001</u> Org No. <u>1102</u> Agency No. <u>01</u>

Action Requested: Increase Board of Supervisors Assistant-Specialist (J994) position number 2477 from 20/40 to 40/40 and cancel Board of Supervisors Assistant-Specialist (J994) position number 14748.

Proposed Effective Date: <u>2/7/2022</u>

Classification Questionnaire attached: Yes ☐   No ☒   / Cost is within Department's budget: Yes ☒   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>$14,129.00</u>)   Net County Cost   (<u>$14,129.00</u>)

Total this FY   (<u>$5,887.00</u>)   N.C.C. this FY   (<u>$5,887.00</u>)

SOURCE OF FUNDING TO OFFSET ADJUSTMENT <u>General Fund, one-time cost</u>

Department must initiate necessary adjustment and submit to CAO.

Use additional sheet for further explanations or comments.

Gayle Israel, Chief of Staff

_____

(for) Department Head

REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCES DEPARTMENT

Timothy M. Ewell   1/14/2022

_____   _____

Deputy County Administrator   Date

HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS   DATE 1/19/2022

Increase the hours of one (1) Board of Supervisors Assistant-Specialist (J994) (unrepresented) position #2477 at salary plan and grade B85 1652 ($6957.98 - $8054.73) from part time (20/40) hours to full time (40/40) and cancel one (1) vacant part time (20/40) hours Board of Supervisors Assistant-Specialist (J994) position #14748.

Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Basic / Exempt salary schedule.

Effective: ☐ Day following Board Action.

☒ 2/7/2022

Melissa Moglie   1/19/2022

_____   _____

(for) Director of Human Resources   Date

COUNTY ADMINISTRATOR RECOMMENDATION: DATE   1/27/22

☒ Approve Recommendation of Director of Human Resources

☐ Disapprove Recommendation of Director of Human Resources   Timothy M. Ewell

☐ Other: _____   _____

(for) County Administrator

BOARD OF SUPERVISORS ACTION: Monica Nino, Clerk of the Board of Supervisors

Adjustment is 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:

P300 (M347) Rev 3/15/01

REQUEST FOR PROJECT POSITIONS

Department_____   Date <u>9/30/2021</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   d. political implications
    b. legal implications   e. organizational 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