



Multnomah County Agenda Placement Request Budget Modification

(Revised 9/23/13)

Board Clerk Use Only

Meeting Date: _____

Agenda Item #: _____

Est. Start Time: _____

Date Submitted: _____

Agenda Title: BUDGET MODIFICATION # DCM-13-17: Reclassification from Human Resources Analyst 2 to Human Resources Analyst Senior

Requested Meeting Date: _____ **Time Needed:** _____

Department: 72 - County Management **Division:** Finance and Risk Management

Contact(s): Eric Arellano, Mark Campbell and Debra Anderson

Phone: 503-988-6355 **Ext.** 86355 **I/O Address** 503/5

Presenter Name(s) & Title(s): Consent Agenda

General Information

1. What action are you requesting from the Board?

Approval of reclassification of #3712 as recommended by the Class Comp section of Central HR. A Human Resources Analyst 2 is being reclassified to a Human Resources Analyst Senior with an effective date of October 6, 2016.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

This filled position within the Finance/Risk Management in DCM is submitted for reclassification from Human Resources Analyst 2 to Human Resources Analyst Senior. The assigned responsibilities has continued to grow as this position manages the insurance programs for the county, including first part insurance coverage for county-wide losses, contractual risk transfer indemnification vendor insurance requirements, and self-insurance liability.

3. Explain the fiscal impact (current year and ongoing).

This action will increase the salary and benefits for position 701856 by \$9,272. The increase will be covered within existing resources within Program Offer 72006-17. The current top of range for the new classification is 14.5% higher than the current classification's top step. It is anticipated that in subsequent fiscal years the financial impact of the new classification will be funded within the department's budget.

4. Explain any legal and/or policy issues involved.

None.

5. Explain any citizen or other government participation.

None.

Budget Modification

6. What revenue is being changed and why? If the revenue is from a federal source, please list the Catalog of Federal Assistance Number (CFDA).

Risk Fund increased by \$483 due to personnel budget changes.

7. What budgets are increased/decreased?

The Risk Fund increases by \$483 due to personnel budget changes.

8. What do the changes accomplish?

Reclassification

9. Do any personnel actions result from this budget modification?

NA

10. If a grant, is 100% of the central and department indirect recovered? If not, please explain why.

NA

11. Is the revenue one-time-only in nature? Will the function be ongoing? What plans are in place to identify a sufficient ongoing funding stream?

NA

12. If a grant, what period does the grant cover? When the grant expires, what are funding plans? Are there any particular stipulations required by the grant (e.g. cash match, in kind match, reporting requirements, etc)?

NA

Required Signature

**Elected Official or
Dept. Director:** _____

Date: _____

Budget Analyst: _____

Date: _____

Department HR: _____

Date: _____

Countywide HR: _____

Date: _____