



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 # HD-28-15: Authorizing two position re-classifications within the Health Department

Requested Meeting Date: _____

Time Needed: N/A - Consent

Department: 40 - Health Department

Division: Community Health Services,
Integrated Clinical Services

Contact(s): Robert Stoll – Budget & Finance Manager

Phone: (503) 988-8445

Ext. 88445

I/O Address 167/2/210

Presenter Name(s) & Title(s): N/A (Consent Agenda)

General Information

1. What action are you requesting from the Board?

Approval of staffing adjustments resulting from the reclassification of two positions. This change will not impact the Health Department's total FTE for FY 2015.

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.

Reclassify a 1.00 FTE Physician Clinical Lead Provider to a 1.00 FTE Deputy Medical Director, position 708823, in the Integrated Clinical Services Division of the Health Department. Class Comp approved the reclassification effective 11/24/2014 (reclassification #2717). This position will be responsible for providing medical services to patients, providing medical consultation to nurse practitioners and community health nurses, directing the development and implementation of best clinical practices, monitoring the performance of other health care professionals, and developing provider in-service training. This position will also be responsible for functioning as a liaison between providers and management; in conjunction with the Medical Director, coordinating the Provider Leadership Team; working with Primary Care Services Director, ICS Director, and other senior leadership for operational, clinical and strategic planning; and assuming the duties of Medical Director in his/her absence.

This change impacts program offer 40030 – Medical Directors (Physician, Nurse Practitioner and Nursing)

Reclassify a 1.00 FTE Program Coordinator to a 1.00 FTE Program Specialist Senior, position 712330, in the Community Health Services Division of the Health Department. Class Comp approved the reclassification effective 7/12/2014 (reclassification #2749). This position is responsible for providing leadership, technical supervision and expertise, training and coordination of DIS Surveillance, Partner Services, and STD Clinic's Results Desk. This position is also responsible for leading and overseeing communication technologies and social media activities with clients, community members, and community partner agencies; managing collaborative internal and inter-agency projects; and providing strategic direction by developing, defining and conceptualizing joint ventures.

This change impacts program offer 40011 – STD/HIV/Hep C Community Prevention Program

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

This budget modification has no fiscal impact in the current year. Budgeted personnel costs are within the pay scales of the new classifications or other budgeted line items have been adjusted so that the changes are budget neutral.

The reclassification of position 708823 to a Deputy Medical Director decreased budgeted personnel cost by \$103,759, because the step at which the Deputy Medical Director is budgeted is lower than the step at which the Physician Clinical Lead Provider is budgeted. The decrease in cost is offset by an increase in Temporary, Non Base Fringe, and Non Base Insurance for no net fiscal impact this fiscal year.

The reclassification of position 712330 to a Program Specialist Senior is budget neutral as the current budgeted pay for the position falls within the pay scale of the new classification.

In subsequent fiscal years, the reclassified positions will be subject to approved cost of living adjustments (COLA) and step and merit pay increases in accordance with collective bargaining agreements and county personnel rules. Increased costs will be funded within the department's budget

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

N/A

5. Explain any citizen or other government participation.

N/A

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).

No change in revenues

7. What budgets are increased/decreased?

The Health Department's budget will have the following changes:

- Permanent personnel budget will decrease by \$74,427

- Salary related expense budget will decrease by \$23,936
- Insurance benefits budget will decrease by \$5,396
- Temporary personnel budget will increase by \$74,427
- Non Base Fringe budget will increase by \$23,936
- Non Base Insurance budget will increase by \$5,396

These changes will have no financial impact on the budget and do not change the Health Department's total FTE.

8. What do the changes accomplish?

Changes of classification for positions 708823, and 712330 better fit the duties of these positions as determined by the Class/Comp Unit of Central Human Resources.

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

- Reclassify a 1.00 FTE Physician Clinical Lead Provider to a 1.00 FTE Deputy Medical Director, position 708823, in the Integrated Clinical Services Division of the Health Department. Class Comp approved #2717.
- Reclassify a 1.00 FTE Program Coordinator to a 1.00 FTE Program Specialist Senior, position 712330, in the Community Health Services Division of the Health Department. Class Comp approved #2749.

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

N/A

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?

N/A

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)?

N/A

Required Signature

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

Date: _____

Budget Analyst: _____

Date: _____

Department HR: _____

Date: _____

Countywide HR: _____

Date: _____