



Multnomah County Agenda Placement Request Budget Modification (FY 2018)

Board Clerk Use Only

Meeting Date: _____

Agenda Item #: _____

Est. Start Time: _____

Date Submitted: _____

Agenda Title: BUDGET MODIFICATION # NOND-03-18: Reclassifies a Graphic Designer to a Public Affairs Coordinator in the Communications Office.

Requested Meeting Date: _____ **Time Needed:** N/A

Department: 1000 - Nondepartmental - All Other **Division:** Communications Office

Contact(s): Julie Sullivan-Springhetti

Phone: 503-709-9858 **Ext.** _____ **I/O Address** 503/6

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

General Information

1. What action are you requesting from the Board?

The Communications Office request approval to reclassify a 1.00 FTE Graphic Designer to a Public Affairs Coordinator as determined by Central Human Resources Classification Compensation Unit.

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.

The position responsibilities include acting as the primary point of contact interfacing with media, government agencies and the public. Other duties include working with print, broadcast and online journalist to promote the county's story, responding to public records request and providing media training and coaching to county representatives. The changes impacts program offer 10007 Communications Office.

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

The fiscal impact for the current year is \$28,909 (\$31,537 annualized). The salary range of the new classification is (\$71,420 - \$87,902) compared to the current classification (\$48,657 - \$59,870). 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.

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).

N/A

7. What budgets are increased/decreased?

The professional services and on-call budgets have been reduced to support the increased position costs.

The Risk Fund was adjusted for the increased costs.

8. What do the changes accomplish?

Approval of a classification decision from the Central Human Resources Classification Compensation unit that best reflects the duties of the position.

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

Yes, reclassification of a Graphic Designer to a Public Affairs Coordinator.

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: _____