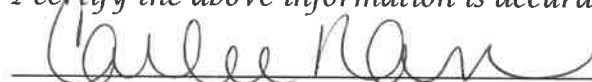


# Agenda Summary Report (ASR)

## Franklin County Board of Commissioners

<b>DATE SUBMITTED:</b> 10/21/2021	<b>PREPARED BY:</b> Carlee Nave
<b>Meeting Date Requested:</b> 11/2/2021	<b>PRESENTED BY:</b> Carlee Nave and Sheriff Jim Raymond
<b>ITEM:</b> (Select One)      x Consent Agenda	Brought Before the Board Time needed:
<b>SUBJECT:</b> Approval to Hire Corrections Deputy at Step 3	
<b>FISCAL IMPACT:</b> \$5,773 annual impact / \$962 2021 impact (\$0 2021 budget impact) The vacancy being filled is budgeted at a Step 1, however, the minimal fiscal impact will be offset by other vacancies in the budget, so no additional funds will need to be requested for the Corrections budget as a result of this request.	
<b>BACKGROUND:</b> The Sheriff currently has five openings in Corrections. One of these openings will be filled by R Sandoval on 11/1/2021. The Sheriff is requesting to hire R Sandoval at Step 3 of the salary schedule (\$24.25/hour) to recognize his background and experience.  Sandoval is a lateral entry with about 3.5 years of correctional experience with the Department of Corrections. He has completed the Washington State Department of Corrections Academy, which may provide a savings to the County of about \$1,400 in direct travel and training costs.  The Step 1 salary for Corrections is \$45,750 so this request amounts to a base salary increase of \$4,698 over the entry level in recognition of education, training, and prior service with another agency. The vacancy being filled is budgeted at a Step 1, and the minimal impact is absorbed by other vacancies in the budget.	
<b>RECOMMENDATION:</b> Parties below recommend approval of the Step 3 entry and authorization for the Chair to sign the Personnel Action Form (PAF).	
<b>COORDINATION:</b> The Sheriff brought the request to Human Resources, and upon review it was determined that the request is appropriate given Sandoval's training and experience in corrections work. Approval of the request is consistent with other step entry exceptions granted in the Corrections Center.	
<b>ATTACHMENTS:</b> (Documents you are submitting to the Board)  1. Personnel Action Form	
<b>HANDLING / ROUTING:</b> (Once document is fully executed it will be imported into Document Manager. Please list <u>name(s)</u> of parties that will need a pdf)  Original to HR for processing and retention.	

*I certify the above information is accurate and complete.*



Carlee Nave, HR Director



# Franklin County Personnel Action Form

(Check personnel action below, then fill out corresponding section)

RECEIVED BY:  
OCT 13 2021  
Franklin County  
Human Resources

**New Hire**    **Re-Hire**    **Position Change**    **Pay Change**    **Employment Separation**    **Leave**

Employee Name: Rene Sandoval      Effective Date of Change: November 01, 2021

Department: CORRECTIONS      Submitted Date: 10/13/2021

**New Hire**    **Position Change**    **Action Type:** Select one- Required  
 **Re-Hire**    **Pay Change**    **Performance Evaluation:** Select one- Required

For position changes/new hire/re-hire  
Please select at least one from each column

Job Title:	Deputy
Department Title:	Corrections
Department ID #:	001-000-540
Grade/Step: <small>(If N/A, enter Salary or Hourly rate)</small>	U9 / 13 / 3
Resolution #: <small>(If Applicable)</small>	

**Employment Type**

Full-Time  
 Part-Time  
 Seasonal/ Temporary  
# of Months: \_\_\_\_\_  
(Maximum 120 Working Days)  
 Variable/ On-call  
 Provisional

**Schedule**

7.5 Hours/Day  
 8 Hours/Day  
 Public Safety  
 Flex  
 Hourly  
# Hours/Days: \_\_\_\_\_  
# Hours/Week: \_\_\_\_\_

Comments:  
Start date November 01, 2021

### Employee Separation:

### Separation Code:

### Reason Code:

Last Date Physically Worked: \_\_\_\_\_  
Leave hours to Pay Out?  
 Yes\*       No

(Select one, then select reason code)

Resignation (Attach Resignation Notice)  
 Involuntary Termination (Attach Termination Letter)  
 End of Assignment  
 Retirement (Attach Retirement Notice)  
 Quit in Lieu of Involuntary Termination  
(Attach Resignation Notice)  
 Reduction of Force (Attach RIF Notice)  
 Death

(Select One)

Attendance  
 Gross Misconduct  
 Probation  
 Job Abandonment  
 Separation (Employer Initiated)  
 N/A

\* Please submit payout form to HR following employee's last date physically worked

### Leave:

Last Date Physically Worked: \_\_\_\_\_  
Leave Begin Date: \_\_\_\_\_  
Leave End Date: \_\_\_\_\_

FMLA (Report hours used to HR for tracking)  
 Military (Report hours used to HR for tracking)  
 Administrative  
 Other (Please Specify): \_\_\_\_\_

Paid  
 Unpaid

### Authorization/Approval Signatures

Commissioner (If Applicable)	X	_____/_____/20__
Elected Official/Department Head	X	10/13/2021
Supervisor (If Applicable)	X	10/13/2021
Human Resources	X	_____/_____/20__

### For Human Resources Use Only:

Original Document- HR    Electronic Copy- Payroll    Electronic Copy- EO/Dept. Head    Salary Matrix Wage Verification - Matrix Resolution #: \_\_\_\_\_  
 Entered into One Solution - PCN #: \_\_\_\_\_    Entered into Benefits Admin System  
 HR Audit \_\_\_\_\_