



Legislation Details (With Text)

**File #:** 20-614      **Version:** 1      **Name:**

**Type:** Action Item      **Status:** Agenda Ready

**File created:** 6/23/2020      **In control:** BOARD OF SUPERVISORS

**On agenda:** 7/7/2020      **Final action:**

**Title:** Approve Advance Step Increase of Client Support Assistant I/II, Step 5 for Ms. Hailey Keller

**Sponsors:** Behavioral Health Services

**Indexes:**

**Code sections:**

**Attachments:**

Date	Ver.	Action By	Action	Result
7/7/2020	1	BOARD OF SUPERVISORS		

**Memorandum**

**Date:** July 7, 2020

**To:** The Honorable Moke Simon, Chair, Lake County Board of Supervisors

**From:** Todd Metcalf, MPA  
Behavioral Health Services Director

**Subject:** Approve Advance Step Increase of Client Support Assistant I/II, Step 5 for Ms. Hailey Keller

**Executive Summary:**

As this candidate possesses an Associates degree in psychology, she also has a strong background in case management and development of client treatment plans. She has been trained and certified by the QPR Institute in the suicide prevention gatekeeper program. She is also currently CPR certified. I am requesting hiring approval to advance Ms. Keller to salary step level 5 at \$15.15 per hour. The Human Resources Director is in agreement.

Ms. Keller’s background and specialized experience are extremely valuable to us and warrants the request for the advanced pay step.

Adequate funds exist in wages and benefits object codes for this request and is accounted for in the existing budget due to unfilled positions resulting in staff salary savings.

**If not budgeted, fill in the blanks below only:**

Estimated Cost: Amount Budgeted: Additional Requested: \$0.00 Future Annual Cost: \$0.00

**Consistency with Vision 2028 and/or Fiscal Crisis Management Plan** (check all that apply):

- |  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> Well-being of Residents | <input type="checkbox"/> Public Safety               | <input checked="" type="checkbox"/> Infrastructure | <input type="checkbox"/> Not applicable             |
| <input type="checkbox"/> Economic Development    | <input type="checkbox"/> Disaster Recovery           | <input type="checkbox"/> County Workforce          | <input type="checkbox"/> <i>Technology Upgrades</i> |
| <input type="checkbox"/> Community Collaboration | <input type="checkbox"/> Business Process Efficiency | <input type="checkbox"/> Clear Lake                | <input type="checkbox"/> <i>Revenue Generation</i>  |
|  |  |  | <input type="checkbox"/> <i>Cost Savings</i>        |

**If request for exemption from competitive bid in accordance with County Code Chapter 2 Sec. 2-38, fill in blanks below:**

Which exemption is being requested?  
How long has Agreement been in place?  
When was purchase last rebid?  
Reason for request to waive bid?

**Recommended Action:** Approve Advance Step Increase of Client Support Assistant I/II, Step 5 for Ms. Hailey Keller