#### 202501-xx Reclassification of Positions 25004508 and 25004823

## McHenry County Mental Health Board Decision Memorandum

### **Background:**

In January 2025, the Executive Director of the McHenry County Mental Health Board reviewed, in conjunction with the McHenry County Director of Human Resources, the MHB employee roster and related job descriptions. Based on the review performed, it has been determined that two position reclassifications are needed to bring the position classifications more in line with the job duties being performed and MHB personnel needs. The positions to be reclassified have been identified as follows:

Reclassification of position 25004508 Executive Assistant (Grade 10E) to Building and Operations Manager (Grade 12E).

Reclassification of position 25004823 Training Assistant (Grade 3N) from Part Time (20 hours per week) to Full Time (30 hours per week).

Per Exhibit I and II, the annual cost of these position changes will be \$17,125. A FY2025 budget adjustment is needed to accommodate the changes. See Exhibit III for the budget adjustment to support the position changes.

#### **Recommendation and Motion:**

The McHenry County Mental Health Board authorizes the Executive Director to take the steps necessary to work with the County Administration and Human Resources to approve changes to the MHB Roster to reclassify positions as stated above and in the attached Exhibit I and II.

#### **Attachments:**

Exhibit I – Position Change Form – Position #25004508 Exhibit II – Position Change Form – Position #25004823 Exhibit III – FY2025 Budget Adjustment to Support Position Changes

# COUNTY OF MCHENRY Budget Adjustment Request

This form must be completed and returned to the Finance Division for all emergency appropriations, budget line item transfers, position reclassifications and new position requests (required for position reclassification and new positions even if there is no budget impact.)

Er	mergency Appropri	iation		Position Recla	ssification	<b></b>		
Ві	udget Line Item Tra	ansfer		New Position F	Request			
	Budget C	ategor	y Transfers (be	etween 400's and 500's)				
REQUES	STING DEPAR	TMEN	IT:	Dept 25 Me	ntal Heal	th		
	Financials				Fir	nancials		
From:				To:				
304010-30-25-25	00-211	\$	5,000.00	301010-30			\$	15,051.00
400700-40-25-25		\$	2,125.00	310510-30				1,151.00
443500-40-25-25		\$	5,000.00	311010-30	-25-2500-	211		923.00
443800-40-25-25	00-211	\$	5,000.00					
state what p	osition, why the relca	assificat	ion is justified an ncluding benefit	nergency appropriation neede d the impact on the departme s). If requesting a new position	ental budget (b	udget neutral n	neans i	the
T	-1	Ci .l.		the position will be funded.	la a ima ar use = =		- l !	
I o support s	salary and bene	tit cha	anges related	d to position changes	peing mad	ie, buaget i	s pei	ng

moved from other admin accounts - Overtime \$5,000, Employee Tuition \$2,125, Consultants

\$5000, and Special Studies \$5,000.

Dept. Head Signature \_\_\_\_\_

For Administration Use Only								
County Administrator Review		Associate County Administrator Review						

FY 2025 POSITION HOURS CHANGE							
CTION REQUESTED:							
	☑ RECI	LASSIFICATION	☑ SALARY	ADJUSTMENT			
DEPARTMENT		Menta	al Health				
DIVISION	SION 25000						
CURRENT GRADE			[	3N			
PROPOSED GRADE			[	3N			
CURRENT CLASSIFIC	CATION	Training As	ssistant Part Time (20 ho	ours per week)			
CURR	O HOURS (required for calc	culation):  PROPOS	ssistant Full Time (30 ho	ours per week)			
ECLASSIFICATION/SALARY				us als)			
EMPLOYEE RECLASS		aining Assitant F	Full Time (30 hours per v	week)			
CURRENT CLASSIFIC REG SLEP	PT         \$20.70           PT         \$0.00		Rate of Pay FT \$0.00 FT \$0.00	\$21,528.00 \$0.00			
PROPOSED CLASSIF	CATION						
	PT \$0.00 PT \$0.00	_	FT \$20.70 FT \$0.00	\$32,292.00 \$0.00			
DDITIONAL SALARY COST			ANNUAL IMPACT	\$10,764.00			
SUMONAL SALANT GOOT	<i>,</i>	FICA IMRF IMRF SLEP		\$823.45 \$659.56 \$0.00			
HEALTH CARE COSTS	S		[	\$0.00			
ADDITIONAL COSTS (computer, phone, equipment, etc.): \$0.00							
TOTAL			[	\$12,247.01			
FUNDING SOURCE:		S	Sales Taxes				
APPROPRIATE EXIST	ING SPACE FOR POS	ITION	☑ YES □ NO				
COMMENTS/JUSTIFIC							
of \$22,969. Requesting an increas	nealth insurance at this se in weekly hours for t on updating service dire	his position to m	neet additional MHB sta				
DEPARTMENT HEAD SIGNA	ATURE:		DA	TE:			

FY 2025 POSITION HOURS CHANGE							
TION REQUESTED:	_		=				
	☑ RECLA	SSIFICATION		ADJUSTMENT			
DEPARTMENT		Mental Health					
DIVISION		25	000				
CURRENT GRADE				10E			
PROPOSED GRADE				12E			
CURRENT CLASSIFIC	ATION [	Exe	cutive Administrative Ass	sistant			
PROPOSED CLASSIFI	ICATION/CHANGE [	Buil	ding and Operations Ma	nager			
ANNUAL SCHEDULED CURR	O HOURS (required for calculation) ENT 1950	ation): PROPOS	ED 1950	i i			
CLASSIFICATION/SALAR	Y INCREASE - HOURLY	SALARY		-			
EMPLOYEE RECLASS	SIFIED:	Building and	d Operations Manager				
	CATION         Rate of Pay           PT         \$0.00           PT         \$0.00	REG SLEP	Rate of Pay FT \$36.65 FT \$0.00	\$71,465.00 \$0.00			
PROPOSED CLASSIF	ICATION						
	PT \$0.00 PT \$0.00	REG SLEP	FT \$38.85 FT \$0.00	\$75,752.00 \$0.00			
DITIONAL SALARY COST			ANNUAL IMPACT	\$4,287.00			
DITIONAL SALARY COSTS		FICA IMRF IMRF SLEP		\$327.96 \$262.69 \$0.00			
HEALTH CARE COSTS	S			\$0.00			
ADDITIONAL COSTS ( TOTAL	(computer, phone, equipm	nent, etc.):	[	\$0.00 <b>\$4,877.64</b>			
FUNDING SOURCE:		S	ales Taxes	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
APPROPRIATE EXIST	ING SPACE FOR POSIT	ION (	☑ YES □ NO				
COMMENTS/JUSTIFIC	CATION:						
EPARTMENT HEAD SIGNA	 ATURE:		DAT	`E:			