



# Baldwin County Commission

## Legislation Details (With Text)

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**File #:** 19-1640      **Version:** 1

**Type:** Consent      **Status:** Passed

**File created:** 7/9/2019      **In control:** Baldwin County Commission Regular

**On agenda:** 7/16/2019      **Final action:** 7/16/2019

**Title:** Emergency Management Agency - Updated Position Description for Deputy EMA Director

**Indexes:**

**Attachments:** 1. Final - Updated Position Description for Deputy EMA Director, 2. Updated Position Description for Deputy EMA Director

Date	Ver.	Action By	Action	Result
7/16/2019	1	Baldwin County Commission Regular	Approved	

**Meeting Type:** BCC Regular Meeting

**Meeting Date:** 7/16/2019

**Item Status:** New

**From:** Zach Hood, EMA Director

Deidra Hanak, Personnel Director

**Submitted by:** Deidra Hanak, Personnel Director

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### ITEM TITLE

Emergency Management Agency - Updated Position Description for Deputy EMA Director

### STAFF RECOMMENDATION

Approve the updated position description for Deputy EMA Director.

### BACKGROUND INFORMATION

**Previous Commission action/date:** July 2, 2019

**Background:** During the July 2, 2019, Regular Meeting, the Commission approved item BO3 with a replacement attachment for the updated Deputy EMA Director position description. The replacement attachment corrected typos, but also contained a typo of an incorrect salary grade. The Personnel Director respectfully requests that the above recommendation is approved to be corrected for the record.

### FINANCIAL IMPACT

**Total cost of recommendation:** N/A

**Budget line item(s) to be used:** N/A

**If this is not a budgeted expenditure, does the recommendation create a need for funding?**  
N/A

### **LEGAL IMPACT**

**Is legal review necessary for this staff recommendation and related documents?**  
N/A

**Reviewed/approved by:** N/A

**Additional comments:** N/A

### **ADVERTISING REQUIREMENTS**

**Is advertising required for this recommendation?** N/A

**If the proof of publication affidavit is not attached, list the reason:** N/A

### **FOLLOW UP IMPLEMENTATION**

**For time-sensitive follow up, select deadline date for follow up:** N/A

**Individual(s) responsible for follow up:** Personnel - Implement Change

**Action required (list contact persons/addresses if documents are to be mailed or emailed):**  
N/A

**Additional instructions/notes:** N/A