



# Baldwin County Commission

## Legislation Details (With Text)

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<b>File #:</b>	22-1068	<b>Version:</b>	1
<b>Type:</b>	Consent	<b>Status:</b>	Agenda Ready
<b>File created:</b>	6/8/2022	<b>In control:</b>	Baldwin County Commission Regular
<b>On agenda:</b>	6/21/2022	<b>Final action:</b>	
<b>Title:</b>	Council on Aging - Creation of Positions		
<b>Indexes:</b>			
<b>Attachments:</b>	1. Position Description for Part-Time Center Assistant, 2. Updated Organizational Chart for Council on Aging		

Date	Ver.	Action By	Action	Result
6/21/2022	1	Baldwin County Commission Regular		

**Meeting Type:** BCC Regular Meeting

**Meeting Date:** 6/21/2022

**Item Status:** New

**From:** Ron Cink, Budget Director

Kelly Childress, Council on Aging Coordinator

Deidra Hanak, Personnel Director

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

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### **ITEM TITLE**

Council on Aging - Creation of Positions

### **STAFF RECOMMENDATION**

Take the following actions:

- 1) Approve the creation of two (2) part-time Center Assistant positions (PID #TBD) at a grade 302; and
- 2) Approve the position description for the part-time Center Assistant (Part-time); and
- 3) Approve the updated organizational chart for the Council on Aging Department.

### **BACKGROUND INFORMATION**

**Previous Commission action/date:** N/A

**Background:** Due to the addition of a senior center in North Baldwin and Loxley, the Council on Aging Coordinator respectfully requests that the above recommendations are approved.

### **FINANCIAL IMPACT**

**Total cost of recommendation:** \$36,584.08 - approximate maximum annual cost

**Budget line item(s) to be used:** 14056200.51130

**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 Changes

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

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