

New Position Request Form

This form is designed to assist you in describing the new position you are requesting and the justification for creating the new position. As the user department and knowledgeable of the position, it is important that the needs for the duties and responsibilities of the position are outlined to Human Resources and the Office Management and Budget in the following form.

Department: Pinal County Adult Probation		Division: Superior Court
Contact Information	Name: Saul Schoon	Email: saul.schoon@pinal.gov
	Title: Chief Probation Officer	Phone: 602-826-0804

1. Introduction and Background:

<p>Position Purpose and Background: the principal purpose or function of the requested new position.</p>
<p>A. Provide background detail as to why an additional position is needed. (i.e.: changes to law, changes in work demand, department reorganization?)</p> <p>We have been awarded a new Surveillance Officer position to be assigned to the Intensive Probation Services unit.</p> <p>Due to the caseload sizes of the department's existing Intensive Probation Supervision (IPS) caseloads exceeding the statutory requirement, the Administrative Office of Courts agreed to fund a growth surveillance officer position.</p> <p>This position is necessary to keep the IPS caseload sizes at or near their statutory requirement.</p>
<p>B. What will the position do? Please provide a detailed description of the position's duties and responsibilities, the estimated percentage of time spent in each, and any prerequisites necessary to perform the essential functions of this new position.</p> <p>100% of this position's time will be devoted to supervising a caseload of probationers who have been placed on Intensive Probation Supervision (IPS) by the Court.</p>

C. Are these duties and responsibilities currently being performed in the department? Yes No

If yes, provide the classification code and title for the position already performing these duties.

The department currently has seven IPS funded positions filled.

D. What alternatives were considered? Please provide a description of alternative solutions considered before deciding on a new position. (i.e. change to a process, redistribution of work) and why the new position is considered the best solution.

Due to the AOC requirement that IPS probationers can only be supervised by IPS funded officers, no alternative solutions are available. No county funding is required.

E. Please provide a department organizational chart showing how this position will fit into the current departmental structure.

Attached Organizational Chart?

Yes No (If no, please explain in an attachment)

2. Position Justification:

If the new position were not to be approved what impact would it have on your department and County business? What are the consequences for failing to have this new position created?

The department's IPS caseload sizes would remain above the statutory requirements. Probationers on IPS would not receive the level of supervision and intervention necessary to promote behavior change and public safety.

3. Department Funding:

Department: Adult Probation – Intensive Probation Services	Fund Number: 52
Cost Center: 2620212	Fund Type:
Will this be newly funded or will funds be redistributed within the current budget? New <input checked="" type="checkbox"/> Redistribution <input type="checkbox"/>	
If new funding, anticipated meeting date in which Board of Supervisors will review.	7/5/23
If position elimination, please provide position number and budgeted salary.	PCN: Budgeted Salary \$
Will this position be funded with an Intergovernmental Agreement or Grant?	Grant

5. Additional Comments or Attachments:

If additional room is needed to answer any of the sections of this form or you would like to provide any supplementary information or comments, please do so below or on an attachment. Indicate any attachments (i.e.: memo, comments, charts, graphs, data)

Additional attachments? Yes No

6. Department Approval:

I have reviewed and approve the contents of this new position description. I find the information provided is accurate and complete.

Elected Official/Department Director or Designee Signature:



Date:

05/16/2023

7. Human Resources and Budget Review

A. Human Resources Review and Recommendation

Human Resources has reviewed the new position request and is recommending:

A current job classification exists within the Pinal County Classification system that is an appropriate job classification for the newly requested position based on the essential duties and responsibilities provided.

Classification code and title: _____

A new job classification is necessary as there is not an existing job classification that adequately depicts the essential functions of the newly requested position. Please be aware that all new job classifications must be approved by the Board of Supervisors subsequent to the process of classification development and market analysis of similar classifications.

Human Resources Director or Designee Signature:

Date:

B. Office of Management and Budget Review

OMB has reviewed and found:

There is sufficient funding within the current department budget to fund this new position.

New funding is needed to fund this new position.

Budget Director or Designee Signature:	Date:
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8. County Manager Approval

Approved <input type="checkbox"/> Denied <input type="checkbox"/>	
County Manager or Designee Signature:	Date:

Submitted By:	Department: Pinal County Adult Probation
	Requestor Name: Saul Schoon
	Position Request Date: 05/16/2023