

Request to Fill Position

Submit this form, a memorandum and current position description via email to the City Administrator for review and submittal to the Administration and Finance Committee. To ensure adequate time for review, submit the Friday prior to the Council Agenda Deadline day.

Department/Division: Health/Community Health Position Title: Public Health Nurse
Reason for Request: New Position OR
□ Replacement to Staff - Date of Vacancy: Person Replaced: consolidated hire
Position Status: ☑ Full-time ☐ Part-time AND ☐ Regular ☐ Temporary ☐ Provisional ☐ Special ☐ Other
• If other than Full-time or Regular, indicate work schedule (hours per week, days to be worked, etc.)
and anticipated duration of employment:
Funding Source: ☑ Operating ☑ Grant ☐ Other:
Anticipated Date for Filling Position: 11/02/2020
Is the position required for fiduciary, legal or compliance requirements? ⊠No ☐ Yes, describe:
Why is it necessary that this position be filled? What operational needs does this position fulfill? To assure effective response to the clinical and programmatic needs of the Department/City.
What will be the impacts on service functions to the public if the position is not filled? Lack of capacity to assure effective and efficient interaction with and delivery of service to the community.
What will be the impacts on service to city staff if the position is not filled? Many staff are city residents and could be impacted by not filling the position due to limited capacity and/or subject matter expertise.
What reorganization possibilities have been considered, such as elimination of the position or combining duties with other existing positions? (If none, provide rationale.) This position is the result of consolidating 2 positions.
How has this vacancy/need been covered so far?
How many other similar positions exist in this department? 5
Requestor Information
Name: Robert Leischow Title: Health Commissioner Department: Health
Signature: Date: October 7, 2020
Attached: ⊠ Memorandum ⊠ Current JDQ