

TRANSFER POLICY

PURPOSE: To comply with the County Code and applicable collective bargaining agreements.

SCOPE: This policy applies to all regular and probationary Clackamas County employees. Temporary employees are not eligible.

POLICY STATEMENT: The transfer of an employee to a different position in the same classification may occur either within the same department (intradepartmental) or to another department under a different appointing authority (interdepartmental). Whether the move is decided by the department or employee, it is defined in this policy as a transfer.

An intradepartmental transfer occurs when an appointing authority assigns an employee to another position in the same classification within the department. For example, an Office Specialist 1 may be appointed to another Office Specialist 1 budgeted position within the same department.

An interdepartmental transfer occurs when an employee is transferred from a position in one department to a position in the same classification in another department under a different appointing authority. A transfer cannot occur between different classifications. A move from Deputy Sheriff to a Probation and Parole Officer would not be a transfer.

PROCEDURES

A. Intradepartmental Transfers

An intradepartmental transfer may be either voluntary or involuntary. An appointing authority may transfer an employee within his/her department without the employee's consent, but must give the employee ten (10) working days notice of this action. The employee may request that the Personnel Division investigate the transfer if he/she believes the transfer was carried out improperly. The transfer must be recorded on a personnel action form and submitted to Personnel. Recording even these minor changes is necessary for fund and labor distribution, benefit administration, record keeping, mass mailing and data base integrity.

B. Interdepartmental Transfers

If an employee wishes to be considered for a transfer to another department, he/she must request in writing to the Personnel Division to be placed on the appropriate transfer list. (See attachment for request procedure and transfer request form.) The employee may be placed on a list for a classification in which he/she is an incumbent, or the list for a lower level position within the same classification series or a lower level classification previously held. If an employee is placed on a lower level transfer list and the incumbent accepts the lower level position this would constitute a voluntary demotion rather than a transfer. Supervisors are not notified when an employee is placed on a transfer list; however, they may be contacted as a reference if considered by another county supervisor. Employees will be removed from the transfer list one year after they have

requested placement, when they request removal of their name from the list, or after rejecting three job offers, whichever comes first. Employees are responsible for knowing if they are on the transfer list.

Request for placement on a transfer list must be approved by the Personnel Division. The Personnel Division will review the employee's knowledge, skills, and abilities against those that are required of a particular position. For instance, an Engineering Technician 3 recruited for and hired in the Surveyor's Office via a specialized recruitment cannot be placed on transfer lists for other Engineering Technician 3 positions unless the Personnel Division has given written approval prior to the transfer effective date. Requests for placement on transfer lists will be considered on a case-by-case basis.

Any transfer of an employee either intradepartmentally or interdepartmentally requires that a personnel action form be submitted. A transfer between departments may result in a different benefit package, bargaining unit, employment contract provisions and payroll procedures. For this reason transfers require discussion with and the written approval of the Personnel Division.

POLICY

The following policies shall apply unless otherwise specified in a collective bargaining agreement.

A. Vacation, Sick and Compensatory Time

A transferred employee retains all such benefits and privileges earned as of the date of transfer. A transferred employee will retain his/her accrued sick leave and vacation as allowed by bargaining contracts. Please be aware of the potential budget impact. Compensatory time may be transferred with the employee, paid by the appointing authority prior to transfer, or used prior to transfer, as agreed upon by the two appointing authorities. An employee shall not lose any accrued compensatory time as a result of a transfer.

B. Pay Range/Step

Normally when an employee is transferred, the rate of pay remains the same. An appointing authority does have the discretion to pay another step in the range with the approval of the Director of Employee Services and the Budget Officer. Monies must be available to pay the specified rate of pay for the remaining budget year.

C. Probation

1. Intradepartmentally transferred employees who are on probation may serve out their probation in the new position. If they are a regular status employee, they may maintain that status.
2. Interdepartmental transfers: Regular status employees may be required to serve a six month probation in the new position. This will be determined by the new appointing authority. Probationary status employees with more than six months remaining on their probation will serve out the remainder of their probation in the new position. For probationary status employees with less than six months probation remaining, they may have their probation extended to no more than six months.

D. Salary Increase Date

1. Intradepartmental transfers: Employees transferring intradepartmentally shall maintain their current salary increase date.
2. Interdepartmental transfers: A new supervisor and/or appointing authority needs an opportunity to review an employee's work performance prior to making a determination about the employee's eligibility for a salary increase. For this reason, the anniversary date for salary increases may be adjusted to six (6) months from the date of transfer, as determined by the new appointing authority.

E. Longevity Credit

Longevity credit is subject to collective bargaining agreements. Language found in the applicable collective bargaining agreement for the new position applies to this situation. For a transferred employee who remains within the same nonrepresented or bargaining group, the longevity dates and credit remain the same.

F. Seniority

For bargaining unit members, seniority is covered under the terms of the applicable collective bargaining agreement for the new position.

G. Insurance Benefits

As a result of a transfer, an employee may have a change in insurance benefits. The new benefits package will be effective the first of the month following the date of the transfer or the first of the month following receipt of the Personnel Action form, whichever is later. The new benefits package will reflect the benefits available for the bargaining group or nonrepresented group covering the new position.

OTHER EMPLOYMENT STATUS CHANGES

Some changes in employment status have been called transfers, but in fact are not.

It is a reassignment when an employee moves from a position in one classification to a position in another classification with the same pay range. Once again, the action would have to be affected through a personnel action form and normally is the result of an employee voluntarily applying for another position via a recruitment process. Those who have already acquired regular status employment shall serve a six month probationary period in the new position. The employee would be able to retain any accrued benefits and privileges earned as of the date of reassignment.

It is a demotion when an employee moves from one classification to another classification having a lower salary range. An employee who moves from one classification to another classification having a higher salary range, is considered promoted and is subject to rules governing promotion. (Refer to Chapter 2.05.140 of the Personnel Ordinance.)

When a division reorganizes, and the duties of the position change, this would result in a reclassification of that position rather than a transfer. Whenever a department or unit is reorganized, the classification of positions within the department must be reviewed by the Personnel Division.

INTERNET LINKS

County Ordinance (<http://www.clackamas.us/docs/about/title2.pdf>)

Attachments

To: All Employees
From: DES/Personnel Division
Subject: Transfers

Any movement of an employee from one position to a different position in the same classification is considered a transfer. The Personnel Division believes it is important for employees to understand and consider the implication of changing jobs within the same classification.

- 1) Initially, your transfer request will be held in confidence by our office. However, upon the event of your name being referred out to division/department hiring authorities, your transfer status becomes known to one or more managers.
- 2) We encourage all employees to view transfers as tools for professional development and positive employment change.
- 3) Before formally requesting a transfer, we ask you to consider taking the initiative to directly request of your supervisor for a transfer or job change.
- 4) The Personnel Staff is available to assist staff and managers with alternatives to transfers as a means to solve work problems.
- 5) Through a transfer:
 - a) You may become a member of a different collective bargaining unit (union) and subject to those terms and/or conditions including benefits package, insurance, longevity, vacation, sick accrual rates, etc.
 - b) A probationary period of six months may be imposed for interdepartmental transfers since you will be performing a different job and working for a different department.
 - c) In cases of voluntary interdepartmental transfers, the hiring department may choose to compensate you at a level other than your current salary level. This may be result of budget levels, hours worked, etc.
 - d) As a result of an interdepartmental transfer, your salary increase date may change to six (6) months from the date of transfer to allow a new supervisor and/or appointing authority the opportunity to review your work performance.
 - e) You will be on the transfer list for one year, unless a request is made for removal before that time, or you have rejected three job offers.
- 6) Transfer request procedures:
 - a) Read and consider the above information.
 - b) Complete the attached form.
 - c) Return the completed form to the Personnel Division.
 - d) Personnel will confirm your transfer status and expiration date in writing.
 - e) A copy of your completed form will be sent to the hiring authority at the time your name is referred to a department.
 - f) Periodically confirm your transfer interest with Personnel.

DEPARTMENT PREFERENCES. Please indicate the departments for which you would be interested in transferring. You will only be referred to those departments which you have checked below.

<input type="checkbox"/> (A)	ASSESSMENT & TAXATION.	<input type="checkbox"/> (N)	HUMAN SERVICES.
<input type="checkbox"/> (B)	BOARD OF COUNTY COMMISSIONERS.	<input type="checkbox"/> (O)	HUMAN SERVICES - Community Health – Mental Health
<input type="checkbox"/> (C)	COUNTY CLERK.	<input type="checkbox"/> (P)	HUMAN SERVICES – Community Health - Public Health
<input type="checkbox"/> (D)	COUNTY COUNSEL/DISTRICT ATTORNEY	<input type="checkbox"/> (Q)	HUMAN SERVICES - Social Services.
<input type="checkbox"/> (E)	COUNTY SHERIFF.	<input type="checkbox"/> (R)	INFORMATION SERVICES.
<input type="checkbox"/> (F)	COUNTY SHERIFF - Jail/Community Corrections.	<input type="checkbox"/> (S)	JUVENILE.
<input type="checkbox"/> (G)	COUNTY SURVEYOR.	<input type="checkbox"/> (T)	NORTH CLACKAMAS PARKS.
<input type="checkbox"/> (H)	COUNTY TREASURER.	<input type="checkbox"/> (U)	PUBLIC & GOVERNMENT RELATIONS.
<input type="checkbox"/> (I)	EMERGENCY COMMUNICATIONS (9-1-1).	<input type="checkbox"/> (V)	TRANSPORTATION & DEVELOPMENT - Administration/Planning/Dog Control.
<input type="checkbox"/> (J)	EMPLOYEE SERVICES.	<input type="checkbox"/> (W)	TRANSPORTATION & DEVELOPMENT - Building Codes/Community Environment/Transportation, Engineering & Parks.
<input type="checkbox"/> (K)	FAMILY COURT SERVICES.	<input type="checkbox"/> (X)	TRANSPORTATION & DEVELOPMENT - Transportation Maintenance (Roads).
<input type="checkbox"/> (L)	FINANCE.	<input type="checkbox"/> (Y)	WATER ENVIRONMENT SERVICES.
<input type="checkbox"/> (M)	LIBRARY SERVICES		

Transfer Request Form

For Personnel Use only

Date Active: ____/____/____

Date Inactive: ____/____/____

NAME:	(Last)	(First)	(MI)
ADDRESS:	(Street)	(City, ST)	(ZIP)
HOME PHONE (Include area code):		WORK PHONE/EXT:	
EMPLOYEE ID:			
CURRENT CLASSIFICATION:			
REQUESTED CLASSIFICATION:			
FULL-TIME <input type="checkbox"/>		PART-TIME <input type="checkbox"/>	
		PROBATIONARY <input type="checkbox"/>	
		REGULAR <input type="checkbox"/>	

PLEASE LIST MOST RECENT JOB EXPERIENCE. ATTACH ADDITIONAL SHEETS AS NEEDED. (EMPLOYEES MAY ATTACH A CURRENT RESUME IN LIEU OF FILLING OUT JOB EXPERIENCE PAGES.)

YOUR CURRENT JOB TITLE:	FROM (month/year):
DEPARTMENT/DIVISION:	TO (month/year):
FULL-TIME <input type="checkbox"/> PART-TIME <input type="checkbox"/> PROBATIONARY <input type="checkbox"/> REGULAR <input type="checkbox"/>	HOURS PER WEEK (if varied, indicate average):
DUTIES AND RESPONSIBILITIES (Be specific):	

EDUCATION/TRAINING/OR COURSE WORK:	
SPECIAL SKILLS (COMPUTERS, CAD, LICENSES, ETC.):	
OTHER PERTINENT INFORMATION:	

SIGNATURE: _____ EFFECTIVE DATE: _____

COMPLETE FOR OFFICE SPECIALIST 1 & 2 ONLY

EMPLOYEE ID	NAME (FIRST, MI, LAST)
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COMPUTER SKILLS. Please list software programs (word processing, spreadsheet, database administration, financial, custom, etc.) and specify your proficiency level (beginning, intermediate or advanced). For custom software, include a brief description.

SOFTWARE PROGRAM	PROFICIENCY	SOFTWARE PROGRAM	PROFICIENCY
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

BUSINESS RELATED TERMINOLOGY (check all that apply):

- | | | |
|----------------------------------|--|--|
| <input type="checkbox"/> Legal | <input type="checkbox"/> Data Processing | <input type="checkbox"/> Human Resources |
| <input type="checkbox"/> Medical | <input type="checkbox"/> Engineering | <input type="checkbox"/> Medical Insurance |

WORD PROCESSING/TYPING. Please describe your education, training and work experience in word processing and/or typing. Specify the percentage of time spent performing these duties and the types of documents produced. **Typing speed:** _____ **WPM**

EMPLOYER/SCHOOL and JOB TITLE	BEGINNING AND ENDING DATES	LENGTH OF EMPLOYMENT
JOB DUTIES, RESPONSIBILITIES AND/OR COURSE WORK RELATED TO WORD PROCESSING/TYPING		
EMPLOYER/SCHOOL and JOB TITLE	BEGINNING AND ENDING DATES	LENGTH OF EMPLOYMENT
JOB DUTIES, RESPONSIBILITIES AND/OR COURSE WORK RELATED TO WORD PROCESSING/TYPING		

DATA ENTRY & RETRIEVAL/DATA BASE ADMINISTRATION. Please describe your education, training and work experience in data entry and retrieval and/or data base administration. Specify the percentage of time spent performing these duties.

EMPLOYER/SCHOOL and JOB TITLE	BEGINNING AND ENDING DATES	LENGTH OF EMPLOYMENT
JOB DUTIES, RESPONSIBILITIES AND/OR COURSE WORK RELATED TO DATA ENTRY & RETRIEVAL AND/OR DATA BASE ADMINISTRATION		
EMPLOYER/SCHOOL and JOB TITLE	BEGINNING AND ENDING DATES	LENGTH OF EMPLOYMENT
JOB DUTIES, RESPONSIBILITIES AND/OR COURSE WORK RELATED TO DATA ENTRY & RETRIEVAL AND/OR DATA BASE ADMINISTRATION		

You may attach additional sheets as necessary. Please include your name and Employee ID on each additional sheet attached.

COMPLETE FOR OFFICE SPECIALIST 1 & 2 ONLY

EMPLOYEE ID	NAME (FIRST, MI, LAST)
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RECORD KEEPING, FILING, BILLING AND/OR BOOKKEEPING. Please describe your education, training and work experience in record keeping, filing, billing and/or bookkeeping. Specify the percentage of time spent performing these duties.

10 Key: by touch by sight none

EMPLOYER/SCHOOL and JOB TITLE	BEGINNING AND ENDING DATES	LENGTH OF EMPLOYMENT
JOB DUTIES, RESPONSIBILITIES AND/OR COURSE WORK RELATED TO RECORD KEEPING, FILING, BILLING AND/OR BOOKKEEPING		
EMPLOYER/SCHOOL and JOB TITLE	BEGINNING AND ENDING DATES	LENGTH OF EMPLOYMENT
JOB DUTIES, RESPONSIBILITIES AND/OR COURSE WORK RELATED TO RECORD KEEPING, FILING, BILLING AND/OR BOOKKEEPING		

RECEPTION. Please describe your education, training and work experience in reception. Specify the average number of telephone calls and walk in visitors received each day.

EMPLOYER/SCHOOL and JOB TITLE	BEGINNING AND ENDING DATES	LENGTH OF EMPLOYMENT
JOB DUTIES, RESPONSIBILITIES AND/OR COURSE WORK RELATED TO RECEPTION		
EMPLOYER/SCHOOL and JOB TITLE	BEGINNING AND ENDING DATES	LENGTH OF EMPLOYMENT
JOB DUTIES, RESPONSIBILITIES AND/OR COURSE WORK RELATED TO RECEPTION		

You may attach additional sheets as necessary. Please include your name and Employee ID on each additional sheet attached.