



STATE OF VERMONT
JOINT FISCAL OFFICE

MEMORANDUM

To: Joint Fiscal Committee members
From: Sorsha Anderson, Senior Staff Associate
Date: February 27, 2024
Subject: LSP Request – JFO #3187

Enclosed please find one (1) item, which the Joint Fiscal Office has received from the Administration. *The Department of Public Service has requested an expedited review. Please respond by Friday, March 1, 2024.*

JFO #3187: Two (2) limited-service positions to the Public Service Department, Vermont Community Broadband Board: Administrative Services Manager III and Data and Information Project Manager. Positions will carry out work related to the federal Broadband Equity, Access and Deployment (BEAD) program. This program has the potential to bring in additional Broadband investment, provided local applications are successful. Positions are fully funded through 11/30/2027 and are funded by previously approved JFO #3136.
[Received February 26, 2024]

Please review the enclosed materials and notify the Joint Fiscal Office (Sorsha Anderson: sanderson@leg.state.vt.us) if you have questions or would like this item held for legislative review. If we do not have a response by **March 1, 2024**, members will be polled.

STATE OF VERMONT Joint Fiscal Committee Review Limited Service - Grant Funded Position Request Form

This form is to be used by agencies and departments when additional grant funded positions are being requested. Review and approval by the Department of Human Resources must be obtained prior to review by the Department of Finance and Management. The Department of Finance will forward requests to the Joint Fiscal Office for JFC review. A Request for Classification Review Form (RFR) and an updated organizational chart showing to whom the new position(s) would report must be attached to this form. Please attach additional pages as necessary to provide enough detail.

Agency/Department: Public Service Department- Vermont Community Broadband Board Date: 1/8/2024

Name and Phone (of the person completing this request): Robert Fish, 802-522-2617

Request is for:

- Positions funded and attached to a new grant.
- Positions funded and attached to an existing grant approved by JFO # 3136

1. Name of Granting Agency, Title of Grant, Grant Funding Detail (attach grant documents):

National Telecommunications and Information Administration
Broadband Equity, Access, and Deployment (BEAD) Program
\$5,000,000 in technical support to VCBB for BEAD deployment

2. List below titles, number of positions in each title, program area, and limited service end date (information should be based on grant award and should match information provided on the RFR) position(s) will be established only after JFC final approval:

<u>Title* of Position(s) Requested</u>	<u># of Positions</u>	<u>Division/Program</u>	<u>Grant Funding Period/Anticipated End Date</u>
Administrative Services Manager III	1	VCBB/BEAD	12/1/2022 to 11/30/2027
Data and Information Project Manager	1	VCBB/BEAD	12/1/2022 to 11/30/2027

Note: These are a result of changing capacity needs for the BEAD program. They were not initial requested when the grant was approved.

*Final determination of title and pay grade to be made by the Department of Human Resources Classification Division upon submission and review of Request for Classification Review.

3. Justification for this request as an essential grant program need:

The Vermont Community Broadband Board requires additional support to carry out the deployment of the federal BEAD program, which will bring over \$200,000,000 in additional broadband investment to the state, provided local applications are successful. The Executive Staff Assistant is required to manage an ever-increasing administrative workload, as the VCBB is required to assist not only the growing expansion of the CUD network via the ARPA program throughout Vermont, but the acquisition of BEAD funding as well. A Data and Information Project Manager is required to perform the research tasks necessary to ensure acquisition and deployment of BEAD.

I certify that this information is correct and that necessary funding, space and equipment for the above position(s) are available (required by 33 VSA Sec. 5(b)).

Jane E. Tierney 1/30/2024

Signature of Agency or Department Head Date

David Fuller 2/2/2024

Approved/Denied by Department of Human Resources Date

Adam Greshin
Digitally signed by Adam Greshin
Date: 2024.02.22 19:02:16 -05'00'

Approved/Denied by Finance and Management Date

Sarah Clark 2/23/2024 | 12:37:41 EST

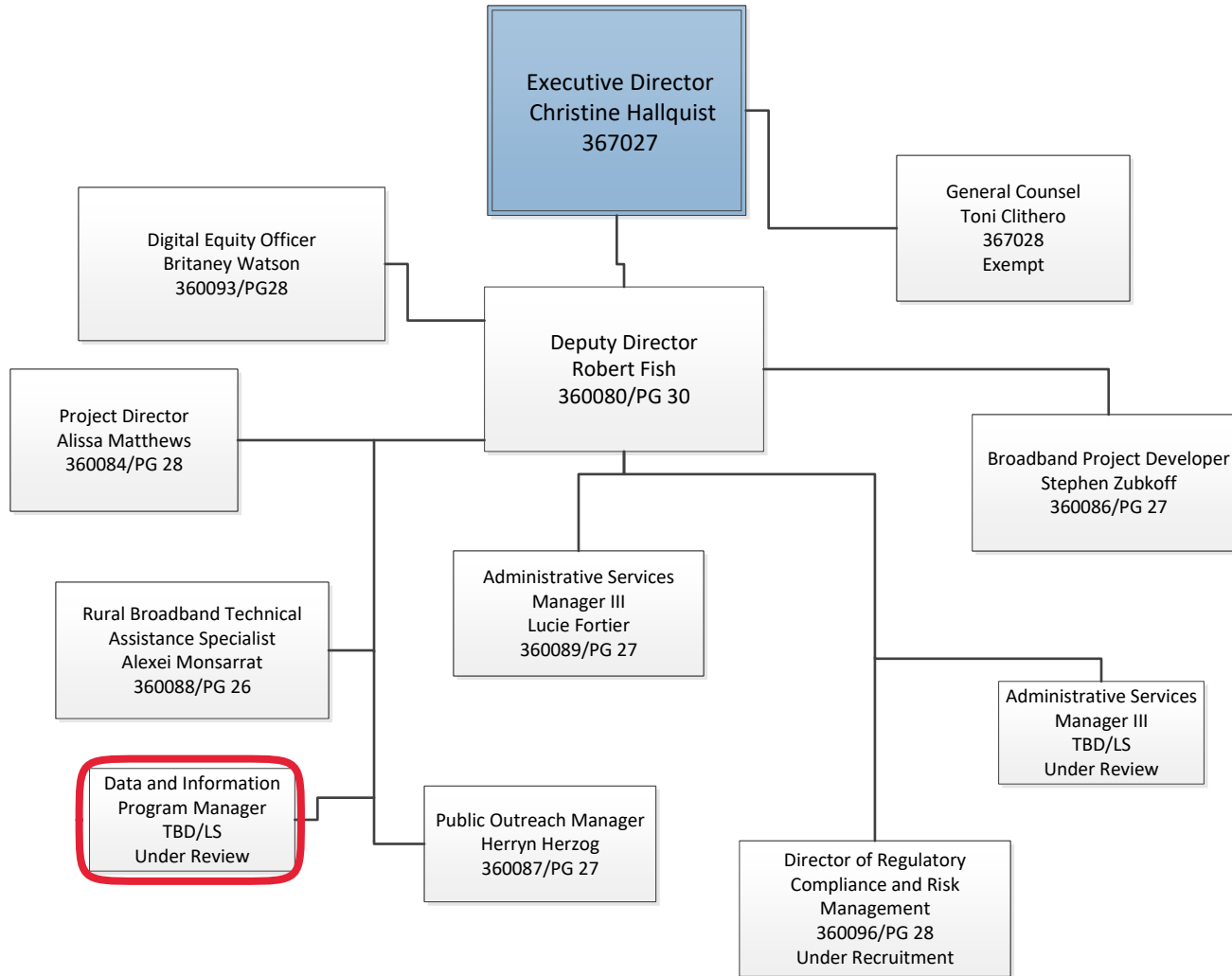
Approved/Denied by Secretary of Administration Date

[Signature] 2/23/24
Date

Approved/Denied by Governor (required as amended by 2019 Leg. Session)

Comments:

Chart I Vermont Community Broadband Board



VERMONT DEPARTMENT OF PERSONNEL
Request for Classification Action
New or Vacant Positions
Existing Job Class/Titles ONLY
Position Description Form C

- **This form is to be used by management to request the allocation of a new position, or reallocation of a vacant position, to an EXISTING class title.**
- Employee requests must be submitted on the separate "Position Description Form A."
- Requests for full classification, to determine the appropriate pay grade for any job class must be submitted on "Position Description Form A."
- This form was designed in Microsoft Word to download and complete on your computer. This is a form-protected document, so information can only be entered in the shaded areas of the form.
- To move from field to field use your mouse, the arrow keys or press Tab. Each form field has a limited number of characters. Use your mouse or the spacebar to mark and unmark a checkbox.
- Where additional space is needed to respond to a question, you will need to attach a separate page, and number the responses to correspond with the numbers of the questions on the form. Please contact your Personnel Officer if you have difficulty completing the form.
- All sections of this form are required to be completed unless otherwise stated.
- The form must be complete, including required attachments and signatures or it will be returned to the department's personnel office.

Request for Classification Action
New or Vacant Positions
EXISTING Job Class/Title ONLY
Position Description Form C/Notice of Action
For Department of Personnel Use Only

Notice of Action # _____	Date Received (Stamp)
Action Taken: _____	
New Job Title _____	
Current Class Code _____	New Class Code _____
Current Pay Grade _____	New Pay Grade _____
Current Mgt Level ____ B/U ____ OT Cat. ____ EEO Cat. ____ FLSA ____	
New Mgt Level ____ B/U ____ OT Cat. ____ EEO Cat. ____ FLSA ____	
Classification Analyst _____	Date _____
Effective Date: _____	
Comments: _____	
Date Processed: _____	
Willis Rating/Components: Knowledge & Skills: _____ Mental Demands: _____ Accountability: _____	
Working Conditions: _____ Total: _____	

Position Information:Incumbent: **Vacant or New Position**Position Number: TBD Current Job/Class Title: Admin Services Manager IIIAgency/Department/Unit: PSD GUC: 2240020000Pay Group: Work Station: Home-Based Zip Code: 05602Position Type: Permanent Limited Service (end date) 202^Funding Source: Core Sponsored Partnership. For Partnership positions provide the funding breakdown (% General Fund, % Federal, etc.) 100% federalSupervisor's Name, Title and Phone Number: Robert Fish 802-522-2617**Check the type of request (new or vacant position) and complete the appropriate section.** **New Position(s):**a. **REQUIRED:** Allocation requested: Existing Class Code 089280 Existing Job/Class Title: Admin Services Manager III

b. Position authorized by:

Joint Fiscal Office – JFO # Approval Date:

Legislature – Provide statutory citation (e.g. Act XX, Section XXX(x), XXXX session)

Other (explain) -- Provide statutory citation if appropriate.

Vacant Position:

a. Position Number:

b. Date position became vacant:

c. Current Job/Class Code: Current Job/Class Title:

d. REQUIRED: Requested (existing) Job/Class Code: Requested (existing) Job/Class Title:

e. Are there any other changes to this position; for example: change of supervisor, GUC, work station? Yes No If Yes, please provide detailed information:

For All Requests:

1. List the anticipated job duties and expectations; include all major job duties:

2. Provide a brief justification/explanation of this request:

3. If the position will be supervisory, please list the names and titles of all classified employees reporting to this position (this information should be identified on the organizational chart as well).

Personnel Administrator's Section:

4. If the requested class title is part of a job series or career ladder, will the position be recruited at different levels? Yes No

5. The name and title of the person who completed this form:

6. Who should be contacted if there are questions about this position (provide name and phone number): **Rob**

Fish 802-522-2617

7. How many other positions are allocated to the requested class title in the department: **4**

8. Will this change (new position added/change to vacant position) affect other positions within the organization? (For example, will this have an impact on the supervisor’s management level designation; will duties be shifted within the unit requiring review of other positions; or are there other issues relevant to the classification process.) **No**

Attachments:

- Organizational charts are **required** and must indicate where the position reports.
- Class specification (optional).
- For new positions, include copies of the language authorizing the position, or any other information that would help us better understand the program, the need for the position, etc.
- Other supporting documentation such as memos regarding department reorganization, or further explanation regarding the need to reallocate a vacancy (if appropriate).

DocuSigned by:

Trishia Brooks

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1/25/2024

Personnel Administrator’s Signature **(required)***

Date

DocuSigned by:

Robert Fish

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1/24/2024

Supervisor’s Signature **(required)***

Date

DocuSigned by:

Jane E. Tierney

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1/24/2024

Appointing Authority or Authorized Representative Signature **(required)***

Date

* Note: Attach additional information or comments if appropriate.

VERMONT DEPARTMENT OF PERSONNEL
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Notice of Action # _____		Date Received (Stamp)
Action Taken: _____		
New Job Title _____		
Current Class Code _____	New Class Code _____	
Current Pay Grade _____	New Pay Grade _____	
Current Mgt Level _____ B/U _____ OT Cat. _____ EEO Cat. _____ FLSA _____		
New Mgt Level _____ B/U _____ OT Cat. _____ EEO Cat. _____ FLSA _____		
Classification Analyst _____	Date _____	Effective Date: _____
Comments:		Date Processed: _____
Willis Rating/Components:	Knowledge & Skills: _____	Mental Demands: _____
	Working Conditions: _____	Accountability: _____
	Total: _____	

Position Information:

Incumbent: **Vacant or New Position**

Position Number: TBD Current Job/Class Title: Data and Information Project Manager

Agency/Department/Unit: PSD GUC: 2240020000

Pay Group: Work Station: Home-Based Zip Code: 05602

Position Type: Permanent Limited Service (end date) 2027

Funding Source: Core Sponsored Partnership. For Partnership positions provide the funding breakdown (% General Fund, % Federal, etc.) 100% federal

Supervisor's Name, Title and Phone Number: Robert Fish 802-522-2617

Check the type of request (new or vacant position) and complete the appropriate section.

New Position(s):

a. **REQUIRED:** Allocation requested: Existing Class Code 053010 Existing Job/Class Title: Data and Information Project Manager

b. Position authorized by:

Joint Fiscal Office – JFO # Approval Date: Legislature – Provide statutory citation (e.g. Act XX, Section XXX(x), XXXX session) Other (explain) -- Provide statutory citation if appropriate. **Vacant Position:**a. Position Number: b. Date position became vacant: c. Current Job/Class Code: Current Job/Class Title: d. REQUIRED: Requested (existing) Job/Class Code: Requested (existing) Job/Class Title: e. Are there any other changes to this position; for example: change of supervisor, GUC, work station? Yes No If Yes, please provide detailed information:**For All Requests:**

1. List the anticipated job duties and expectations; include all major job duties:

2. Provide a brief justification/explanation of this request:

3. If the position will be supervisory, please list the names and titles of all classified employees reporting to this position (this information should be identified on the organizational chart as well). N/A

Personnel Administrator’s Section:

4. If the requested class title is part of a job series or career ladder, will the position be recruited at different levels? Yes No

5. The name and title of the person who completed this form: Robert Fish, Deputy Director

6. Who should be contacted if there are questions about this position (provide name and phone number): Rob Fish 802-522-2617

7. How many other positions are allocated to the requested class title in the department: 0

8. Will this change (new position added/change to vacant position) affect other positions within the organization? (For example, will this have an impact on the supervisor’s management level designation; will duties be shifted within the unit requiring review of other positions; or are there other issues relevant to the classification process.) No

Attachments:

- Organizational charts are **required** and must indicate where the position reports.
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1/25/2024

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1/24/2024

Supervisor’s Signature **(required)***

Date

DocuSigned by:
Jane E. Tierney
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1/24/2024

Appointing Authority or Authorized Representative Signature **(required)***

Date

* Note: Attach additional information or comments if appropriate.