

Meeting Date
08-23-16



AGENDA	
Section	Consent
Item No.	II, C, 4.

AGENDA REPORT
 BREVARD COUNTY BOARD OF COUNTY COMMISSIONERS

SUBJECT:	Employee Innovations Program
DEPT/OFFICE:	Human Resources Office

Requested Action:
 It is requested that the Brevard County Board of County Commissioners approve payment of award to the employee below who submitted the attached recommendation (EIP # 413) under Brevard County's Employee Innovations Program.

Summary Explanation & Background:

The purpose of the Employee Innovations Program is to reward employees for making suggestions that result in: (1) improved productivity; (2) enhanced health/safety; or (3) operating cost savings for the County. The attached recommendation (EIP # 413) is being recommended for a monetary reward under this program.

The recommended monetary award is for a total of \$1224.00. This recommended awarded amount is 25% of the net savings to the County of \$4896.41 per Item X, Paragraph A, of Administrative Order Number AO-06 approved May 13, 2005. The recommended award should be dispersed to the following Employee:

Marvena Petty, Special Projects Coordinator, Brevard County Fire Rescue

Explanation of how the above suggestion saves money and improves service:

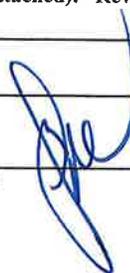
Each year Fire Rescue is required to provide private, secure space in which annual Fire Fighter Physicals are conducted. Traditionally, hotel rooms are rented from local facilities. However, it was suggested by Ms. Petty that Eastern Florida State College be contacted regarding allowing Brevard County Fire Rescue the use of vacant office space within their facility. Eastern Florida allowed Brevard County to use their open offices at zero charge, saving the county \$4,896.41.

See attached E.I.P. Evaluation Checklist and/or supporting documentation for further information regarding this recommendation.

Fiscal Impact: A total of \$1224.00 will be awarded to employee from the Fire Rescue Budget

Clerk to the Board Instructions:

Exhibits Attached: EIP Suggestion # 411 Package

Contract /Agreement (If attached): Reviewed by County Attorney		Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	PR	<input type="checkbox"/>
County Manager	Assistant County Manager						
Stockton Whitten	Assistant County Manager			Department Director / Extension: Jerry Visco, Director Human Resources / 5-5446 Mark Schollmeyer, Chief Fire Rescue /5-2056			



Tammy Rowe, Clerk to the Board, 400 South Street • P.O. Box 999, Titusville, Florida 32781-0999

Telephone: (321) 637-2001
Fax: (321) 264-6972
Tammy.Rowe@brevardclerk.us

August 29, 2016

MEMORANDUM

TO: Jerry Visco, Human Resources Director

RE: Item II.C.4., Payment of Award (EIP# 413) for Employee Innovations Program

This is to correct the memo dated August 24, 2016. The Board of County Commissioners, in regular session on **August 23, 2016**, approved payment of award to Marvena Petty in the amount of \$1,224.

Your continued cooperation is greatly appreciated.

Sincerely yours,

BOARD OF COUNTY COMMISSIONERS
SCOTT ELLIS, CLERK

for *Donna Scott*
Tammy Rowe, Deputy Clerk

/cm

cc: Finance
Budget



Return By: 8 / 15 / 16 Suggestion Name: FF Physicals - Faculty Savings Suggestion #: 43

EMPLOYEE INNOVATIONS PROGRAM

E.I.P. EVALUATION CHECKLIST

ATTENTION EVALUATOR! PLEASE COMPLETE & SIGN THIS FORM.

Please TYPE or PRINT clearly. You may attach a memorandum or additional sheet if necessary, however, please include all the following information.

TO YOUR KNOWLEDGE IS THIS AN ORIGINAL IDEA?

Yes (Please evaluate as follows, providing any additional comments to clarify your evaluation)
 No (Please provide any documentation, sign and return this form to the Office of Human Resources)

WHAT ARE THE ADVANTAGES OR DISADVANTAGES - IF ANY - OF ADOPTING THIS SUGGESTION? (Attach additional sheet if necessary)

SELECT THE DEGREE OR NATURE OF THE BENEFIT (Minor, Moderate, or Substantial Improvement).

SELECT THE AREA OF BENEFIT (Productivity, Enhanced Health/Safety, Operating Savings, Program Enhancement)

SELECT THE STRATEGIC FOCUS AREA OF IMPROVEMENT (Financial Management, Employee Development, Operational Effectiveness/Efficiency, or Customer Focus)

WHAT IS THE COST OF ADOPTION? (Please explain all factors involved)

0

WHAT ARE THE ESTIMATED OR ACTUAL SAVINGS IF ADOPTED? (Please note, if savings are intangible and what saving includes) Estimated \$ _____ - OR - Actual \$ 4,896.41

WHAT DEPARTMENT HAS THE FINAL AUTHORITY TO IMPLEMENT THIS SUGGESTION?

PROFESSIONAL STANDARDS

BASED ON THIS EVALUATION, WILL THIS SUGGESTION BE IMPLEMENTED?

Yes (Date of implementation 04/18/16) Partially (Please Explain) No

DIRECTOR MAY RECOMMEND A MONETARY REWARD UP TO \$100 or Special Recognition, for an improvement which no monetary savings can be readily ascertained, or based on the value and creativity of the innovation although partially or not accepted based on this evaluation. Special Recognition may be granted in lieu of monetary award. (AO-06,X.B.)

Amount _____ (Please Explain) -OR- No Monetary Reward _____ -OR- Special Recognition _____

Thank you for improving Brevard County through innovation.

7/10/16

SIGNATURE OF OFFICE/DEPARTMENT DIRECTOR

DATE

***** PLEASE RETURN THIS FORM TO THE OFFICE OF HUMAN RESOURCES ON OR BEFORE THE DATE NOTED AT THE TOP OF THIS FORM *****



Date Received: 7/20/16 Suggestion Name: FF Physicals Facilities Savings Suggestion #: 413

EMPLOYEE INNOVATIONS PROGRAM SUGGESTION SUBMITTAL FORM

ATTENTION SUBMITTER! PLEASE COMPLETE & SIGN THIS FORM.

Please TYPE or PRINT clearly. You may attach a memorandum or additional sheet if necessary, however, please include all the following information.

EMPLOYEE(S) NAME(S): <u>MARVENA PETTY</u>	TELEPHONE: <u>321-633-2056</u> FAX: <u>321-637-5383</u> MAILSTOP:
JOB TITLE(S): <u>SPECIAL PROJECTS COORD. II</u>	LOCATION: <u>HEADQUARTERS</u>
DEPARTMENT: <u>FIRE RESCUE</u>	DEPARTMENT(S) AFFECTED BY SUGGESTION: <u>FIRE RESCUE</u>
WHAT IS YOUR SUGGESTION? Provide a statement of existing problem to be resolved or a procedure that the suggestion would modify. <u>HOTEL ROOM RENTAL FOR ANNUAL FIREFIGHTER PHYSICALS IS EXPENSIVE. I SUGGESTED USING OPEN OFFICES AT EASTERN FLORIDA STATE COLLEGE PALM BAY CAMPUS FOR SOUTH END AREA EXAMS. EFSC PROVIDED THE SPACE AT NO CHARGE.</u>	
SELECT THE DEGREE OR NATURE OF THE BENEFIT (Minor, Moderate, or <u>Substantial</u> Improvement).	
SELECT THE AREA OF BENEFIT (Productivity, Enhanced Health/Safety, <u>Operating Savings</u> , Program Enhancement)	
SELECT THE STRATEGIC FOCUS AREA OF IMPROVEMENT (<u>Financial Management</u> , Employee Development, Operational Effectiveness/Efficiency, or Customer Focus)	
HOW DIFFICULT WOULD IT BE TO IMPLEMENT SUGGESTION? 1 <u>X</u> (Can happen quickly) 2 ____ (Require some research) 3 ____ (Require significant research)	
WHAT IS THE COST OF ADOPTION? (Please explain all factors involved) <u>Ø</u>	
WHAT ARE THE ESTIMATED OR ACTUAL SAVINGS IF ADOPTED? (Please note, if savings are intangible and what saving includes) Estimated \$ _____ - OR - Actual \$ <u>4816.41</u>	

Thank you for improving Brevard County through innovation.

Marvena Petty

EMPLOYEE SIGNATURE

7/21/16

DATE

*****PLEASE RETURN THIS FORM TO THE OFFICE OF HUMAN RESOURCES
AFTER COMPLETION*****

RCVD-BCHR-11-19-16