

**MILWAUKEE COUNTY FISCAL NOTE FORM**

**DATE:** November 13, 2024

Original Fiscal Note

Substitute Fiscal Note

**SUBJECT:** A report from the Director, Department of Health and Human Services (DHHS), requesting the creation of 1.0 FTE Community Intervention Specialist in paygrade 24

**FISCAL EFFECT:**

- |   |  |
|---|--|
| <input type="checkbox"/> No Direct County Fiscal Impact   | <input type="checkbox"/> Increase Capital Expenditures |
| <input type="checkbox"/> Existing Staff Time Required   | <input type="checkbox"/> Decrease Capital Expenditures |
| <input checked="" type="checkbox"/> Increase Operating Expenditures<br>(If checked, check one of two boxes below) | <input type="checkbox"/> Increase Capital Revenues     |
| <input checked="" type="checkbox"/> Absorbed Within Agency's Budget   | <input type="checkbox"/> Decrease Capital Revenues     |
| <input type="checkbox"/> Not Absorbed Within Agency's Budget  |  |
| <input type="checkbox"/> Decrease Operating Expenditures  | <input type="checkbox"/> Use of contingent funds       |
| <input checked="" type="checkbox"/> Increase Operating Revenues   |  |
| <input type="checkbox"/> Decrease Operating Revenues  |  |

*Indicate below the dollar change from budget for any submission that is projected to result in increased/decreased expenditures or revenues in the current year.*

	<b>Expenditure or Revenue Category</b>	<b>Current Year - 2024</b>	<b>Subsequent Year</b>
<b>Operating Budget</b>	Expenditure	\$0	\$68,620
	Revenue	\$0	\$68,620
	Net Cost	\$0	\$0
<b>Capital Improvement Budget</b>	Expenditure	\$0	\$0
	Revenue	\$0	\$0
	Net Cost	\$0	\$0

## DESCRIPTION OF FISCAL EFFECT

In the space below, you must provide the following information. Attach additional pages if necessary.

- A. Briefly describe the nature of the action that is being requested or proposed, and the new or changed conditions that would occur if the request or proposal were adopted.
  - B. State the direct costs, savings or anticipated revenues associated with the requested or proposed action in the current budget year and how those were calculated.<sup>1</sup> If annualized or subsequent year fiscal impacts are substantially different from current year impacts, then those shall be stated as well. In addition, cite any one-time costs associated with the action, the source of any new or additional revenues (e.g. State, Federal, user fee or private donation), the use of contingent funds, and/or the use of budgeted appropriations due to surpluses or change in purpose required to fund the requested action.
  - C. Discuss the budgetary impacts associated with the proposed action in the current year. A statement that sufficient funds are budgeted should be justified with information regarding the amount of budgeted appropriations in the relevant account and whether that amount is sufficient to offset the cost of the requested action. If relevant, discussion of budgetary impacts in subsequent years also shall be discussed. Subsequent year fiscal impacts shall be noted for the entire period in which the requested or proposed action would be implemented when it is reasonable to do so (i.e. a five-year lease agreement shall specify the costs/savings for each of the five years in question). Otherwise, impacts associated with the existing and subsequent budget years should be cited.
  - D. Describe any assumptions or interpretations that were utilized to provide the information on this form.
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- A. DHHS is requesting the creation of 1.0 FTE Community Intervention Specialist in paygrade 24.
  - B. The total current annual cost for 1.0 FTE Community Intervention Specialist is between \$63,415 - \$73,825 (including salary and social security). This position is being funded by 80% Bureau of Justice Assistance grant revenue and 20% Youth Aids revenue. Ongoing annualized costs for the Community Intervention Specialist position is projected to be \$68,620.
  - C. As noted above, these costs are 100% offset by grant and Youth Aids revenues and has no tax levy impact. When grant funding is completed, the department will utilize Youth Aids funding to support the position.
  - D. This fiscal note assumes that the position is filled at the middle of the range in early 2025. Actual costs will be determined depending upon when the position is hired and the placement in the pay range. The accompanying resolution authorizes the position action upon approval by the County Board at its December 2024 meeting to ensure timely recruitment.

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<sup>1</sup> If it is assumed that there is no fiscal impact associated with the requested action, then an explanatory statement that justifies that conclusion shall be provided. If precise impacts cannot be calculated, then an estimate or range should be provided.

<sup>2</sup> Community Business Development Partners' review is required on all professional service and public work construction contracts.

Department/Prepared By Pam Matthews, Sr. Budget & Management Analyst

Authorized Signature Shakita LaGrant-McClain

Did DAS-Fiscal Staff Review?  Yes  No

Did CBDP Review?  Yes  No  Not Required