

County of Milwaukee  
INTEROFFICE MEMO

DATE: February 18, 2013  
TO: Supervisor Dimitrijevic, County Board Chairwoman  
FROM: Kerry Mitchell, Director, Department of Human Resources  
SUBJECT: **Capital Improvement Committee Process**

Issue

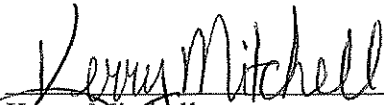
Milwaukee County Ordinance 36.04 requires all Departments to submit five-year capital improvement program (Program) requests to their respective standing committees. Standing committees shall then submit Programs along with recommendations to the newly created Capital Improvements Committee (CIC).

Background

The purpose of the CIC is to develop a Program for the entire County and establish criteria on how each capital project will be evaluated. The ordinance also requires Departments to submit Programs to their respective standing committees, which will then forward their recommendations to the CIC.

Request

The Department of Human Resources has evaluated its anticipated maintenance and technology needs. The attached includes the Department's outstanding capital needs, listed in priority order. Requested capital projects assume current operations.



Kerry Mitchell  
Director, Department of Human Resources

Cc: Chris Abele, County Executive  
Amber Moreen, Chief of Staff, County Executive's Office  
Kelly Bablitch, Chief of Staff, County Board  
Michael Mayo, Sr., Chair, Transportation, Public Works, and Transit Committee  
Willie Johnson, Jr., Co-Chair, Finance Personnel, and Audit Committee

David Cullen, Co-Chair, Finance Personnel, and Audit Committee  
TBD, Chair, Capital Improvements Committee  
TBD, CEX Appointee #1, Capital Improvements Committee  
TBD, CEX Appointee #2, Capital Improvements Committee  
Craig Kammholz, Fiscal & Budget Director, DAS  
Brian Dranzik, Interim Director, Department of Transportation  
Scott Manske, Comptroller  
Vince Masterson, Strategic Asset Coordinator, DAS  
Chris Lindberg, CIO, IMSD  
Laurie Panella, Deputy CIO, IMSD  
Pamela Bryant, Capital Finance Manager, Comptroller's Office  
Justin Rodriguez, Capital Finance Analyst, Comptroller's Office  
Gregory High, Director, AE&ES-FM-DAS

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(ITEM \*) A resolution to authorize the attached Five Year Capital Improvements Program for the Department of Human Resources to be recommended to the Capital Improvement Committee (CIC):

**A RESOLUTION**

WHEREAS, the 2013 Adopted Capital Improvements Budget includes the creation of a Capital Improvements Committee (CIC); and

WHEREAS, ordinance 36.04 was also approved in 2013, which codified the creation, composition, duties, reports, and staffing of the CIC; and

WHEREAS, the purpose of the CIC is to develop a Five Year Program for the entire County and establish criteria on how each capital project will be evaluated; and

WHEREAS, the ordinance also requires Departments to submit Five Year Programs to their respective standing committees, which will then forward their recommendations to the CIC; and

WHEREAS, The Department of Human Resources has evaluated its anticipated maintenance and facility needs; and

WHEREAS, the attached Five Year Program includes the department's outstanding capital needs, listed in priority order; now, therefore,

BE IT RESOLVED, the attached Five Year Program (Exhibit A) is recommended to the CIC.

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### Attachment A

Department of Human Resources 2014						
Rank	Project Number	Project Name	Total Cost	Reimbursement Revenue	County Financing	Project Description/Annual Operating Impact
1	New	HR Ceridian Upgrade to Dayforce	\$1,000,000	\$0	\$1,000,000	Upgrade Milwaukee County's human resource system to the latest offering through a hosted solution provided by Ceridian. Annual operating costs estimated at \$250,000 (for software maintenance and support).
2	New	Electronic Personnel Files	TBD		TBD	Reduce the paper files in HR and provide a better archive and retrieval solution through record digitization in Milwaukee County's Onbase product.
Total			\$1,000,000	\$0	\$1,000,000	
Department Name 2015						
Rank	Project Number	Project Name	Total Cost	Reimbursement Revenue	County Financing	Project Description
1	-	Example	\$0	\$0	\$0	
Total			\$0	\$0	\$0	
Department Name 2016						
Rank	Project Number	Project Name	Total Cost	Reimbursement Revenue	County Financing	Project Description
1	-	Example	\$0	\$0	\$0	
Total			\$0	\$0	\$0	
Department Name 2017						
Rank	Project Number	Project Name	Total Cost	Reimbursement Revenue	County Financing	Project Description
1	-	Example	\$0	\$0	\$0	
Total			\$0	\$0	\$0	
Department Name 2018						
Rank	Project Number	Project Name	Total Cost	Reimbursement Revenue	County Financing	Project Description
1	-	Example	\$0	\$0	\$0	
Total			\$0	\$0	\$0	

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## MILWAUKEE COUNTY FISCAL NOTE FORM

**DATE:** 2/18/13

Original Fiscal Note

Substitute Fiscal Note

**SUBJECT:** Submission of the Milwaukee County Department of Human Resources 5 Year (2014 – 2018) Capital Improvement Program

**FISCAL EFFECT:**

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

*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.*

	Expenditure or Revenue Category	Current Year	Subsequent Year
<b>Operating Budget</b>	Expenditure		
	Revenue		
	Net Cost		
<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.

- A. Milwaukee County Ordinance 36.04 requires all Departments to submit 5 Year Capital Improvement Program requests to their respective standing committee. The standing committee shall then submit the Program along with its recommendations to the Capital Improvements Committee (CIC).

This fiscal note is for initial submission of the Milwaukee County Department of Transportation's 5 Year (2014 – 2018) Capital Improvement Program.

- B. There are no direct costs or savings associated with the 5 Yr. Capital Improvement Program at this time as this item is only proposed for initial policymaker consideration. Any formal appropriation related to this 5 Year Program would occur in the future as part of the 2014 Capital Budget process.
- C. There are no budgetary costs or savings associated with the 5 Yr. Capital Improvement Program at this time as this item is only proposed for initial policymaker consideration. Any formal appropriation related to this 5 Year Program would occur in the future as part of the 2014 Capital Budget process.
- D. The projects included in the 5 Year Program are estimated based upon information that is currently available. The projects proposed and the final projects adopted as part of the 2014 Capital Budget process may vary. Refer to Items B and C for additional assumptions regarding formal appropriation of the projects proposed.

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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 Kerry Mitchell

Authorized Signature *Kerry Mitchell*

Did DAS-Fiscal Staff Review?  Yes  No

Did CDBP Review?<sup>2</sup>  Yes  No  Not Required