

**MILWAUKEE COUNTY FISCAL NOTE FORM\_**

**DATE:** November 7, 2022

Original Fiscal Note

Substitute Fiscal Note

**SUBJECT:** Report from the Director, Department of Health and Human Services, requesting authorization to execute non-professional service contracts with caterers that support the Senior Dining Program for a total cost not to exceed \$3,085,100 for the period of January 1, 2023 through December 31, 2023

**FISCAL EFFECT:**

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> No Direct County Fiscal Impact                                     | <input type="checkbox"/> Increase Capital Expenditures |
| <input checked="" type="checkbox"/> Existing Staff Time Required                                       | <input type="checkbox"/> Decrease Capital Expenditures |
| <input type="checkbox"/> Increase Operating Expenditures<br>(If checked, check one of two boxes below) | <input type="checkbox"/> Increase Capital Revenues     |
| <input 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 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</b>	<b>Subsequent Year</b>
<b>Operating Budget</b>	Expenditure	\$0	\$0
	Revenue	\$0	\$0
	Net Cost	\$0	\$0
<b>Capital Improvement Budget</b>	Expenditure		
	Revenue		
	Net Cost		

## 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. DHHS is requesting authorization to execute various 2023 non-professional service contracts with Milwaukee County DHHS Area Agency on Aging to provide catering services to meet the growing demand for meals and help older adult residents achieve food security amid economic stress.
  - B. The total contract amount of \$3,085,100 is included in the 2023 budget and is funded by various State and Federal grants for addressing the needs of Milwaukee County older adults to live as independently as possible.
  - C. Sufficient grant funds are budgeted and include traditional Older American Act grant funds and Older American Act American Rescue Plan Act (ARPA) grant funds issued during the COVID-19 pandemic, including:

---

<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.

Caterer	Funding Source	Amount
D&S Food Services, Inc.	ARPA Title III-C2	\$1,377,500
Aramark	Title III-C1	\$1,302,500
Anmol LLC	Title III-C-2	\$87,000
Jimbo's Lodge Catering, LLC	Title III-C-2	\$162,500
Sweet Fix, Inc.	Title III-C-2	\$29,000
Krazy Kitchen	Title III-C-2	\$29,000
Antigua-Latin Inspired Kitchen	Title III-C-2	\$8,000
Daddy's Soul Food & Grille Inc	Title III-C-2	\$60,000
Leva Enterprises LLC/Orenda Café	Title III-C-2	\$9,600
Pass da Peas	Title III-C-2	\$15,000
Catering Contingency	Title III-C-2	\$5,000
	<b>Total</b>	<b>\$3,085,100</b>

D. The fiscal note assumes the 2023 DHHS Budget is adopted as recommended.

Department/Prepared By: Mary Proctor Brown, Budget Manager, Aging & Disabilities Services

Authorized Signature *Shakita LaGrant-McClain*

Did DAS-Fiscal Staff Review?  Yes  No

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