## MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: April 15, 2022
Original Fiscal Note
Substitute Fiscal Note
SUBJECT: Report from the Director, Department of Health and Human Services, requesting authorization to execute contract amendments for the Milwaukee County Accountability Program (MCAP) and Shelter Care Program in Children Youth and Family Services (CYFS) and to transfer $\$ 538,128$ from the unallocated contingency to finance these items

## FISCAL EFFECT:

$\square$ No Direct County Fiscal Impact
$\square$ Existing Staff Time Required
Increase Operating Expenditures (If checked, check one of two boxes below)Absorbed Within Agency's Budget
Not Absorbed Within Agency's BudgetDecrease Operating Expenditures
$\square$ Increase Operating RevenuesDecrease 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.

|  | Expenditure or <br> Revenue Category | Current Year | Subsequent Year |
| :--- | :--- | :---: | :---: |
| Operating Budget | Expenditure | $\$ 538,128$ | 0 |
|  | Revenue | $\$ 0$ | 0 |
|  | Net Cost | $\$ 538,128$ | 0 |
|  | Expenditure |  |  |
|  | Revenue |  |  |
|  | Net Cost |  |  |

## 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. ${ }^{1}$ 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. The Director, Department of Health and Human Services (DHHS) is requesting authorization to execute contract amendments for the Milwaukee County Accountability Program (MCAP) and Shelter Care Program in Children Youth and Family Services (CYFS) and to transfer \$538,128 from the unallocated contingency.

Approval of this request would allow programming and services to continue uninterrupted and help reduce and stabilize the detention center census.
B. Total 2022 expenditures included in this request are $\$ 538,128$ which would support contract amendments with the Running Rebels Community Organization and Wisconsin Community Services.
C. Given the critical nature of this programming on relieving the increased census in detention, DHHS worked with the Department of Administrative Services(DAS)-Strategy, Performance and Budget (SPB) to discuss options for moving forward with the requested amendments. As a result, with SPB's support, DHHS is requesting $\$ 538,128$ from the unallocated contingency.
D. This fiscal note assumes expenditures will not exceed the amounts authorized for these purchase of service contract amendments.

Department/Prepared By: Clare O'Brien, DHHS Budget \& Policy Director


[^0]
[^0]:    ${ }^{1}$ 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.

