## MILWAUKEE COUNTY FISCAL NOTE FORM

DATE	E: N	lovember 8, 20	023	Original Fiscal No		e 🖂			
				Subst	itute Fiscal N	lote			
SUBJECT:		Report from the Director, Department of Health and Human Services, requesting authorization to execute a 2024 professional services contract totaling \$78,000 with Jennifer Lefeber to coordinate and facilitate Evidence-Based Disease Prevention and Health Promotion Programs (EBPP) for older adults age 60 and older							
FISC	AL EF	FECT:							
No Direct County Fis			scal Impact		Increase Capital Expenditures				
		Existing Staff	Time Required		Decrease Capital Expenditures				
	Incre	ease Operating	g Expenditures		Decrease Capital Expenditures				
(	(If che	cked, check or	ne of two boxes below)		Increase C	Capital Revenues			
		Absorbed with	hin Agency's Budget		Decrease (	Capital Revenues			
		Not Absorbed	d Within Agency's Budge	t					
	Decrea	ase Operating	Expenditures		Use of con	tingent funds			
☐ Increase Operating Revenues									
	Decrea	ase Operating	Revenues						
			ange from budget for any su tures or revenues in the cur		t is projected	to result in			
mereaseu/decreased expendi			Expenditure or	Current Ye	ear	Subsequent Year			
			Revenue Category			•			
Operating Budget			Expenditure	\$0		\$0			
			Revenue	\$0		\$0			
			Net Cost	<u> </u>		\$0			
Care	4-1 1			•	U	φυ			
Capital Imp   Budget		provement	Expenditure						
Duu	acı		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. The resolution would authorize a professional service agreement with Jennifer Lefeber to coordinate and facilitate evidence-based prevention programs, serving seniors 60 and older from January 1, 2024 through December 31, 2024.

Programing continues with evidence-based prevention classes/workshops to address root causes of health disparities, including supporting healthy lifestyles and promoting healthy behaviors. The contract will continue through 2024 to recommit to in-person events and increase enrollment participation for evidence-based classes. Evidence-based prevention services continue demonstrating positive results for older adults, keeping them active, healthy and able to live independently in communities.

- B. The professional service contract of \$78,000 is funded with Older Americans Act Title III-D Prevention Health grant funds.
- C. This agreement has no tax levy impact.
- D. No assumptions have been made.

Department/Prepared By: Mary Proctor Brown, Budget Manager (Aging)

Authorized Signature Shakita LaGrant-McClain

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

Did DAS-Fiscal Staff Review?	Yes	$\boxtimes$	No		
Did CBDP Review? <sup>2</sup>	Yes		No	$\boxtimes$	Not Required