

Public Health Madison Dar

Function: Public Safety & Health

Budget Overview

Agency Budget by Fund

	2018 Actual	2019 Adopted	2019 Actual	2020 Adopted	2021 C2C	2021 Request
Permanent	10,224	-	79,701	-	-	-
Public Health Madison Dane	17,530,678	18,035,879	20,103,616	19,863,933	21,215,459	21,354,459
TOTAL	\$ 17,540,902	\$ 18,035,879	\$ 20,183,317	\$ 19,863,933	\$ 21,215,459	\$ 21,354,459

Agency Budget by Service

	2018 Actual	2019 Adopted	2019 Actual	2020 Adopted	2021 C2C	2021 Request
Administration	3,713,507	2,902,318	3,505,112	3,469,789	4,781,891	4,782,295
Animal Services	1,084,917	1,056,552	1,318,303	1,162,309	1,163,499	1,150,336
Community Health	7,150,444	7,910,596	8,095,362	8,471,535	8,535,029	8,661,669
Environmental Protection	893,606	1,085,365	945,508	1,120,924	1,122,180	1,130,700
Emergency Response Planning	289,048	146,415	265,344	224,801	224,729	210,934
Licensed Establishments	1,703,696	1,760,932	2,537,941	2,326,624	2,321,809	2,325,904
Laboratory	760,144	634,391	852,792	526,995	501,706	542,403
Policy Programming & Eval	1,945,540	2,539,310	2,662,954	2,560,955	2,564,615	2,550,217
TOTAL	\$ 17,540,902	\$ 18,035,879	\$ 20,183,317	\$ 19,863,933	\$ 21,215,459	\$ 21,354,459

Agency Budget by Major-Revenue

	2018 Actual	2019 Adopted	2019 Actuals	2020 Adopted	2021 C2C	2021 Request
Intergov Revenues	(7,564,101)	(8,660,529)	(8,981,392)	(9,633,566)	(10,379,386)	(10,518,386)
Charges For Services	(823,439)	(798,413)	(671,297)	(897,158)	(897,158)	(897,158)
Licenses & Permits	(2,477,313)	(2,465,520)	(2,519,979)	(3,048,235)	(3,048,235)	(3,048,235)
Investments & Other Contributions	(132,900)	-	(175,080)	(39,000)	(39,000)	(39,000)
Misc Revenue	(3,075)	(4,500)	(4,650)	(12,500)	(12,500)	(12,500)
Other Financing Source	(2,302,010)	(722,234)	(2,446,236)	-	-	-
Transfer In	(4,238,062)	(5,384,683)	(5,384,686)	(6,233,474)	(6,839,180)	(6,839,180)
TOTAL	(17,540,901)	(18,035,879)	(20,183,320)	(19,863,933)	(21,215,459)	(21,354,459)

Agency Budget by Major-Expenses

	2018 Actual	2019 Adopted	2019 Actuals	2020 Adopted	2021 C2C	2021 Request
Salaries	9,944,615	10,236,452	10,687,938	11,487,975	12,766,208	12,766,208
Benefits	4,192,441	4,815,775	4,720,166	5,248,579	5,248,538	5,248,538
Supplies	557,559	380,229	577,372	524,249	516,449	547,356
Purchased Services	2,583,545	2,328,840	2,479,441	2,156,225	2,262,964	2,371,057
Debt & Other Financing	183,146	183,147	1,651,803	357,056	357,056	357,056
Inter Depart Charges	79,595	91,436	66,597	89,848	64,243	64,243
TOTAL	\$ 17,540,902	\$ 18,035,879	\$ 20,183,317	\$ 19,863,933	\$ 21,215,459	\$ 21,354,459

2021 Operating Budget Service Budget Proposal

IDENTIFYING INFORMATION

SELECT YOUR AGENCY:

Public Health

SELECT YOUR AGENCY'S SERVICE:

Administration

SERVICE NUMBER:

321

SERVICE DESCRIPTION:

This service provides overall leadership and administrative support for Public Health. This service includes the full City and County funding for Public Health.

Part 1: Base Budget Proposal

BUDGET INFORMATION

	2018 Actual	2019 Adopted	2019 Actual	2020 Adopted	2021 C2C	2021 Request
<i>Budget by Fund</i>						
General-Net	\$4,238,063	\$5,384,683	\$5,384,683	\$6,223,474	\$6,839,180	\$6,839,180
Other-Expenditures	\$3,723,731	\$2,902,318	\$3,505,111	\$3,469,789	\$4,781,891	\$4,782,295
<i>Total</i>	<i>\$7,961,794</i>	<i>\$8,287,001</i>	<i>\$8,889,794</i>	<i>\$9,693,263</i>	<i>\$11,621,071</i>	<i>\$11,621,475</i>
<i>Budget by Major</i>						
Revenue	(\$3,375,373)	(\$1,571,094)	(\$2,173,888)	(\$7,243,801)	(\$7,989,621)	(\$7,989,621)
Personnel	\$2,697,578	\$2,086,083	\$2,422,214	\$2,531,047	\$3,809,404	\$3,809,404
Non-Personnel	\$961,867	\$739,515	\$1,010,400	\$863,610	\$922,960	\$923,364
Agency Billings	\$64,286	\$76,720	\$52,497	\$75,132	\$49,527	\$49,527
<i>Total</i>	<i>\$348,358</i>	<i>\$1,331,224</i>	<i>\$1,311,223</i>	<i>(\$3,774,012)</i>	<i>(\$3,207,730)</i>	<i>(\$3,207,326)</i>
FTEs						0.00

PRIORITY

Citywide Element

Describe how this service advances the Citywide Element:

The goal of this service is clear, accessible, and efficient systems and well-documented processes for all administrative functions.

ACTIVITIES PERFORMED BY THIS SERVICE

Activity	% of Effort	Description
Budget and Finance	25	Manage all budgeting and accounting functions including development and monitoring of budgets, purchasing, payroll, billing, and contract monitoring.
Administrative and Facilities Support	25	Manage operations and administrative support for all office locations.
Communications and Strategic Initiatives	25	Develop and implement internal and external communications, oversee quality improvement and performance management activities, and direct emergency preparedness efforts.
Workforce Development	15	Manage all human resources and workforce development functions, including the hiring process, orientation and on boarding, professional development, and performance management.
2021 Operating Budget: Agency Reuquests		10
		412

Health and Racial Equity

Develop, implement, and support a framework to build agency capacity so that (1) Public Health will be a highly effective organization that operates with health and racial equity as a guiding principle; and (2) health outcomes in Dane County will not be determined by race, class, gender, income, or other group status.

Insert item

SERVICE BUDGET CHANGES

Service Impact

What is the proposed change to the service's budget from cost to continue to agency request?

What are the service level impacts of the proposed funding changes?

Personnel-Permanent Positions

Are you proposing an allocation change to the FTEs for this service?

Type	Fund	Amount	Description
Perm Wages	<input type="text"/>	<input type="text"/>	<input type="text"/>
Benefits	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		\$0	

Explain the assumptions behind the allocation change.

What is the justification behind the allocation change?

Personnel-Other Personnel Spending

Are you requesting additional personnel spending for non-annualized pay?

Type	Fund	Amount	Description
Overtime	<input type="text"/>	<input type="text"/>	<input type="text"/>
Premium Pay	<input type="text"/>	<input type="text"/>	<input type="text"/>
Hourly	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		\$0	

Explain the assumptions behind the requested funding.

What is the justification behind the increased funding?

Revenue

Are you proposing a change to the service's budgeted revenue?

Are you proposing an increase or a decrease to the budgeted revenue?

Fund	Major	Amount	Description
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Insert item

Explain the assumptions behind the change to budgeted revenue.

What is the justification behind the proposed change?

Non-Personnel

Are you requesting additional non-personnel funding for this service?

Select... ▼

Fund	Major	Amount	Description
[]	[]	[]	[]

Insert item

Explain the assumptions behind the requested funding.

[]

What is the justification behind the increased funding?

[]

Part 2: Proposed Budget Reduction

What is 5% of the agency's net budget?

\$1,067,700

What is the proposed reduction to this service's budget?

\$0

Explain how you would change the activities and the level of service as a result of implementing the funding decrease to this service. List changes by service activity identified above. Add a separate line for each reduction.

Activity	\$Amount	Description
[]	[]	[]

Insert item

Total	\$0	[]
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Explain the changes by major expenditure category that your agency would implement as a result of the funding decrease to this service.

Name	\$ Amount	Description
Personnel	[]	[]
Non-Personnel	[]	[]
Agency Billings	[]	[]
Total	\$0	[]

Is the City mandated to perform the activities of this service? If so, explain the mandate and mandated service level. If not, are there other local organizations also involved in performing these activities.

[]

Has this reduction been proposed in prior years?

Select... ▼

Does the proposed reduction result in eliminating permanent positions?

Select... ▼

If yes, what is the decrease in FTEs:

[]

Does the proposed reduction impact other agencies (i.e. Fleet Services)?

Select... ▼

If yes, which agencies:

[]

Describe why the proposed reduction was chosen.

[]

Explain the impacts of the proposed reduction on the end user of the service. How can impacts of this reduction be mitigated?

Submit

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2021 Operating Budget Service Budget Proposal

IDENTIFYING INFORMATION

SELECT YOUR AGENCY:

Public Health

SELECT YOUR AGENCY'S SERVICE:

Animal Services

SERVICE NUMBER:

322

SERVICE DESCRIPTION:

This service is responsible for enforcing animal-related laws, educating the public about responsible animal ownership, and providing pickup services for the stray, abandoned, impounded, injured, and orphaned animals of Madison and Dane County. The total as presented here represents the City and County share of the total expenditures for the service.

Part 1: Base Budget Proposal

BUDGET INFORMATION

	2018 Actual	2019 Adopted	2019 Actual	2020 Adopted	2021 C2C	2021 Request
<i>Budget by Fund</i>						
General-Net	\$0	\$0	\$0	\$0	\$0	\$0
Other-Expenditures	\$1,084,917	\$1,056,552	\$1,318,304	\$1,162,309	\$1,163,499	\$1,150,336
<i>Total</i>	<i>\$1,084,917</i>	<i>\$1,056,552</i>	<i>\$1,318,304</i>	<i>\$1,162,309</i>	<i>\$1,163,499</i>	<i>\$1,150,336</i>
<i>Budget by Major</i>						
Revenue	(\$269,315)	(\$244,500)	(\$506,251)	(\$485,073)	(\$485,073)	(\$485,073)
Personnel	\$668,302	\$630,339	\$655,111	\$729,678	\$729,513	\$729,513
Non-Personnel	\$415,039	\$424,627	\$662,223	\$431,045	\$432,400	\$419,237
Agency Billings	\$1,576	\$1,586	\$970	\$1,586	\$1,586	\$1,586
<i>Total</i>	<i>\$815,602</i>	<i>\$812,052</i>	<i>\$812,053</i>	<i>\$677,236</i>	<i>\$678,426</i>	<i>\$665,263</i>
FTEs						

PRIORITY

Citywide Element Healthy and Safe

Describe how this service advances the Citywide Element:

The goals of the service are immediate follow-up on all reported bites, mitigation and prevention of dangerous animal issues, reduced numbers of stray cats and dogs in the community, and prevention of animal neglect and cruelty.

ACTIVITIES PERFORMED BY THIS SERVICE

Activity	% of Effort	Description
Domestic animal bite investigation and quarantine	35	Respond to reports of bites to people or other domestic animals to ensure proper rabies vaccination, quarantine, and enforcement of laws related to controlling animal behavior and licensing.
Wild animal bites and rabies exposure	20	Respond to calls related to bites or potential exposure to potentially rabid wild animals. Advise victims and medical providers on rabies risk. Facilitate testing of wild animals for rabies.
	5	
2021 Operating Budget: Agency Reuquests		416

Animal Welfare complaints		Respond to complaints of mistreatment of domestic and wild animals. Response includes investigation, education of persons involved and enforcement of local and state laws as appropriate.
Dangerous animals	5	Act to eliminate the threat to public health and safety from dangerous animals by investigating potential dangerous animals and ordering restrictions or euthanasia of the animal as appropriate.
Stray animal response	25	Collect domestic animals found running at large and return to their owner or deliver to the shelter for care until they are claimed. Enforce regulations on licensing and containing domestic animals as appropriate.
Other complaints and requests for information	10	Respond to complaints and requests for information from the general public.

Insert item

SERVICE BUDGET CHANGES

Service Impact

What is the proposed change to the service's budget from cost to continue to agency request?

What are the service level impacts of the proposed funding changes?

Personnel-Permanent Positions

Are you proposing an allocation change to the FTEs for this service?

Type	Fund	Amount	Description
Perm Wages	<input type="text"/>	<input type="text"/>	<input type="text"/>
Benefits	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		<input type="text" value="\$0"/>	

Explain the assumptions behind the allocation change.

What is the justification behind the allocation change?

Personnel-Other Personnel Spending

Are you requesting additional personnel spending for non-annualized pay?

Type	Fund	Amount	Description
Overtime	<input type="text"/>	<input type="text"/>	<input type="text"/>
Premium Pay	<input type="text"/>	<input type="text"/>	<input type="text"/>
Hourly	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		<input type="text" value="\$0"/>	

Explain the assumptions behind the requested funding.

What is the justification behind the increased funding?

Are you proposing a change to the service's budgeted revenue?

No

Are you proposing an increase or a decrease to the budgeted revenue?

Select...

Fund	Major	Amount	Description
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Insert item

Explain the assumptions behind the change to budgeted revenue.

What is the justification behind the proposed change?

Non-Personnel

Are you requesting additional non-personnel funding for this service?

Select...

Fund	Major	Amount	Description
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Insert item

Explain the assumptions behind the requested funding.

What is the justification behind the increased funding?

Part 2: Proposed Budget Reduction

What is 5% of the agency's net budget?

What is the proposed reduction to this service's budget?

Explain how you would change the activities and the level of service as a result of implementing the funding decrease to this service. List changes by service activity identified above. Add a separate line for each reduction.

Activity	\$Amount	Description
<input type="text"/>	<input type="text"/>	<input type="text"/>

Insert item

Total	<input type="text" value="\$0"/>	<input type="text"/>
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Explain the changes by major expenditure category that your agency would implement as a result of the funding decrease to this service.

Name	\$ Amount	Description
Personnel	<input type="text"/>	<input type="text"/>
Non-Personnel	<input type="text"/>	<input type="text"/>
Agency Billings	<input type="text"/>	<input type="text"/>
Total	<input type="text" value="\$0"/>	<input type="text"/>

Is the City mandated to perform the activities of this service? If so, explain the mandate and mandated service level. If not, are there other local organizations also involved in performing these activities.

Has this reduction been proposed in prior years?

Does the proposed reduction result in eliminating permanent positions?

If yes, what is the decrease in FTEs:

Does the proposed reduction impact other agencies (i.e. Fleet Services)?

If yes, which agencies:

Describe why the proposed reduction was chosen.

Explain the impacts of the proposed reduction on the end user of the service. How can impacts of this reduction be mitigated?

Submit

2021 Operating Budget Service Budget Proposal

IDENTIFYING INFORMATION

SELECT YOUR AGENCY:

Public Health

SELECT YOUR AGENCY'S SERVICE:

Community Health

SERVICE NUMBER:

323

SERVICE DESCRIPTION:

This service is made up of the following program areas: Outbreak Management — including investigations of communicable disease; The Women, Infants, and Children Supplemental Nutrition Program (WIC); Health Promotion; and Chronic Disease Prevention. The total as presented here represents the City and County share of the total expenditures for the service.

Part 1: Base Budget Proposal

BUDGET INFORMATION

	2018 Actual	2019 Adopted	2019 Actual	2020 Adopted	2021 C2C	2021 Request
<i>Budget by Fund</i>						
General-Net	\$0	\$0	\$0	\$0	\$0	\$0
Other-Expenditures	\$7,140,221	\$7,910,596	\$8,015,662	\$8,471,535	\$8,535,029	\$8,661,669
<i>Total</i>	<i>\$7,140,221</i>	<i>\$7,910,596</i>	<i>\$8,015,662</i>	<i>\$8,471,535</i>	<i>\$8,535,029</i>	<i>\$8,661,669</i>
<i>Budget by Major</i>						
Revenue	(\$4,118,622)	(\$5,054,580)	(\$5,159,645)	(\$2,146,579)	(\$2,146,579)	(\$2,200,579)
Personnel	\$5,897,729	\$6,921,086	\$6,786,270	\$7,392,948	\$7,392,948	\$7,392,948
Non-Personnel	\$1,229,362	\$976,380	\$1,216,262	\$1,065,457	\$1,128,951	\$1,255,591
Agency Billings	\$13,130	\$13,130	\$13,130	\$13,130	\$13,130	\$13,130
<i>Total</i>	<i>\$3,021,599</i>	<i>\$2,856,016</i>	<i>\$2,856,017</i>	<i>\$6,324,956</i>	<i>\$6,388,450</i>	<i>\$6,461,090</i>
FTEs						

PRIORITY

Citywide Element

Effective Government

Describe how this service advances the Citywide Element:

This service incorporates a variety of program areas which work collectively to positively impact and improve the health of the Madison and Dane County residents. Program areas include: (1) communicable disease monitoring, surveillance and intervention; (2) immunizations; (3) Women, Infants, and Children Supplemental Nutrition Program (WIC); (4) Maternal and Child Health services (MCH); (5) sexual and reproductive health; (6) Fetal and Infant Mortality Review (FIMR); and (6) perinatal nurse home visiting programs.

ACTIVITIES PERFORMED BY THIS SERVICE

Activity	% of Effort	Description
Women Infants and Children (WIC) Supplemental Nutrition Program	15	Improve the health of women, infants and children who may be nutritionally at risk by providing healthy foods, health information, and referrals to health care.
Wisconsin Well Woman Program	5	Coordinate programs that provide free or low cost breast and cervical cancer screenings and treatment for people with limited income and little or no health insurance.
Immunizations	5	Provide immunizations to reduce the spread of disease in our community and to protect the health of current and future generations.
	15	

Sexual and Reproductive Health:		Provide testing and treatment for sexually transmitted infections in an inclusive, stigma-free environment for people of all ages, gender identities, gender expressions, and sexual orientation.
Communicable Disease	25	Monitor, treat and prevent the spread of infectious disease.
Perinatal	15	Provide programs for people who are pregnant living in Dane County that give support and information needed to have a healthy pregnancy and healthy baby.
Fetal and Infant Mortality	5	Coordinate a Fetal and Infant Mortality Review (FIMR) process to improve understanding of the conditions that contribute to stillbirth and infant death.
Maternal and Child Health	10	Address barriers women face in their decision, ability, and desire to breastfeed in order to provide equal opportunities for everyone to live the healthiest life possible.
Community Based Public Health Nursing Team	5	Partnership between Dane County Human Services and Public Health that entails the placement of three public health nurses into various Joining Forces for Families (JFF) offices throughout the county to be rooted in community engagement, strengthen linkages between available services and infuse more data and evaluation into practice.

 Insert item


SERVICE BUDGET CHANGES

Service Impact

What is the proposed change to the service’s budget from cost to continue to agency request?

What are the service level impacts of the proposed funding changes?

Personnel-Permanent Positions


Are you proposing an allocation change to the FTEs for this service? 

Type	Fund	Amount	Description
Perm Wages	<input type="text"/>	<input type="text"/>	<input type="text"/>
Benefits	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		\$0	

Explain the assumptions behind the allocation change.

What is the justification behind the allocation change?

Personnel-Other Personnel Spending

Are you requesting additional personnel spending for non-annualized pay? 

Type	Fund	Amount	Description
Overtime	<input type="text"/>	<input type="text"/>	<input type="text"/>
Premium Pay	<input type="text"/>	<input type="text"/>	<input type="text"/>
Hourly	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		\$0	

Explain the assumptions behind the requested funding.

What is the justification behind the increased funding?

Revenue

Are you proposing a change to the service's budgeted revenue?

Yes

Are you proposing an increase or a decrease to the budgeted revenue?

Increase

Fund	Major	Amount	Description
6100	Revenue	\$54,000	WIC Interpreter and outreach reimbursements

Explain the assumptions behind the change to budgeted revenue.

What is the justification behind the proposed change?

Non-Personnel

Are you requesting additional non-personnel funding for this service?

Select...

Fund	Major	Amount	Description
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Explain the assumptions behind the requested funding.

What is the justification behind the increased funding?

Part 2: Proposed Budget Reduction

What is 5% of the agency's net budget?

What is the proposed reduction to this service's budget?

Explain how you would change the activities and the level of service as a result of implementing the funding decrease to this service. List changes by service activity identified above. Add a separate line for each reduction.

Activity	\$Amount	Description
<input type="text"/>	<input type="text"/>	<input type="text"/>

Total	\$0	
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Explain the changes by major expenditure category that your agency would implement as a result of the funding decrease to this service.

Name	\$ Amount	Description
Personnel	<input type="text"/>	<input type="text"/>
Non-Personnel	<input type="text"/>	<input type="text"/>
Agency Billings	<input type="text"/>	<input type="text"/>
Total	\$0	

Is the City mandated to perform the activities of this service? If so, explain the mandate and mandated service level. If not, are there other local organizations also involved in performing these activities.

Has this reduction been proposed in prior years?

Does the proposed reduction result in eliminating permanent positions?

If yes, what is the decrease in FTEs:

Does the proposed reduction impact other agencies (i.e. Fleet Services)?

If yes, which agencies:

Describe why the proposed reduction was chosen.

Explain the impacts of the proposed reduction on the end user of the service. How can impacts of this reduction be mitigated?

Submit

2021 Operating Budget Service Budget Proposal

IDENTIFYING INFORMATION

SELECT YOUR AGENCY:

Public Health

SELECT YOUR AGENCY'S SERVICE:

Emergency Response Planning

SERVICE NUMBER:

325

SERVICE DESCRIPTION:

This service plans for the initiation of response activities during the first 24 hours of an emergency or disaster. This is done so in conjunction with existing emergency operations, plans, procedures, guidelines, resources, assets and incident management systems. The total as presented here represents the City and County share of the total expenditures for the service.

Part 1: Base Budget Proposal

BUDGET INFORMATION

	2018 Actual	2019 Adopted	2019 Actual	2020 Adopted	2021 C2C	2021 Request
<i>Budget by Fund</i>						
General-Net	\$0	\$0	\$0	\$0	\$0	\$0
Other-Expenditures	\$289,048	\$146,415	\$265,344	\$224,801	\$224,729	\$210,934
<i>Total</i>	<i>\$289,048</i>	<i>\$146,415</i>	<i>\$265,344</i>	<i>\$224,801</i>	<i>\$224,729</i>	<i>\$210,934</i>
<i>Budget by Major</i>						
Revenue	(\$356,136)	(\$236,845)	(\$355,774)	(\$242,590)	(\$242,590)	(\$242,590)
Personnel	\$144,615	\$82,513	\$158,180	\$154,303	\$154,303	\$154,303
Non-Personnel	\$143,829	\$63,902	\$107,164	\$70,498	\$70,426	\$56,631
Agency Billings	\$603	\$0	\$0	\$0	\$0	\$0
<i>Total</i>	<i>(\$67,089)</i>	<i>(\$90,430)</i>	<i>(\$90,430)</i>	<i>(\$17,789)</i>	<i>(\$17,861)</i>	<i>(\$31,656)</i>
FTEs						0.00

PRIORITY

Citywide Element Healthy and Safe

Describe how this service advances the Citywide Element:

This service is funded by a federal preparedness grant administered by the Wisconsin Department of Health Services to modify emergency plans, coordinate trainings and exercises, and disseminate information to the public and incident management responders in the case of a public health emergency using a whole community approach.

ACTIVITIES PERFORMED BY THIS SERVICE

Activity	% of Effort	Description
Emergency Plan and Policy Creation	30	Create and update mass care, medical countermeasure dispensing and administration, medical material management and distribution, and medical surge plans.
Emergency Response Training and Exercises	30	Participate in exercises and trainings with community partners and hold exercises for Public Health staff to test response plans
Risk Communications Planning and Response	25	Coordinate and disseminate information to the public regarding emergency response.
Coordinate with Community Agencies/Businesses	15	

Work with businesses and community partners to leverage their resources in an emergency response to improve overall response to the entire community.

Insert item

SERVICE BUDGET CHANGES

Service Impact

What is the proposed change to the service's budget from cost to continue to agency request?

What are the service level impacts of the proposed funding changes?

Personnel-Permanent Positions

Are you proposing an allocation change to the FTEs for this service?

Type	Fund	Amount	Description
Perm Wages	<input type="text"/>	<input type="text"/>	<input type="text"/>
Benefits	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		<input type="text" value="\$0"/>	

Explain the assumptions behind the allocation change.

What is the justification behind the allocation change?

Personnel-Other Personnel Spending

Are you requesting additional personnel spending for non-annualized pay?

Type	Fund	Amount	Description
Overtime	<input type="text"/>	<input type="text"/>	<input type="text"/>
Premium Pay	<input type="text"/>	<input type="text"/>	<input type="text"/>
Hourly	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		<input type="text" value="\$0"/>	

Explain the assumptions behind the requested funding.

What is the justification behind the increased funding?

Revenue

Are you proposing a change to the service's budgeted revenue?

Are you proposing an increase or a decrease to the budgeted revenue?

Fund	Major	Amount	Description
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Insert item

Explain the assumptions behind the change to budgeted revenue.

What is the justification behind the proposed change?

Non-Personnel

Are you requesting additional non-personnel funding for this service?

Select... ▼

<i>Fund</i>	<i>Major</i>	<i>Amount</i>	<i>Description</i>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Insert item

Explain the assumptions behind the requested funding.

What is the justification behind the increased funding?

Part 2: Proposed Budget Reduction

What is 5% of the agency's net budget?

What is the proposed reduction to this service's budget?

Explain how you would change the activities and the level of service as a result of implementing the funding decrease to this service. List changes by service activity identified above. Add a separate line for each reduction.

Activity	\$Amount	Description
<input type="text"/>	<input type="text"/>	<input type="text"/>

Insert item

Total	<input type="text" value="\$0"/>	
--------------	----------------------------------	--

Explain the changes by major expenditure category that your agency would implement as a result of the funding decrease to this service.

Name	\$ Amount	Description
Personnel	<input type="text"/>	<input type="text"/>
Non-Personnel	<input type="text"/>	<input type="text"/>
Agency Billings	<input type="text"/>	<input type="text"/>
Total	<input type="text" value="\$0"/>	

Is the City mandated to perform the activities of this service? If so, explain the mandate and mandated service level. If not, are there other local organizations also involved in performing these activities.

Has this reduction been proposed in prior years?

Select... ▼

Does the proposed reduction result in eliminating permanent positions?

Select... ▼

If yes, what is the decrease in FTEs:

Does the proposed reduction impact other agencies (i.e. Fleet Services)?

Select... ▼

If yes, which agencies:

Describe why the proposed reduction was chosen.

Explain the impacts of the proposed reduction on the end user of the service. How can impacts of this reduction be mitigated?

Submit

v. 06-01-20

2021 Operating Budget Service Budget Proposal

IDENTIFYING INFORMATION

SELECT YOUR AGENCY:

Public Health

SELECT YOUR AGENCY'S SERVICE:

Environmental Protection

SERVICE NUMBER:

324

SERVICE DESCRIPTION:

This service protects environmental health for the City of Madison. The total as presented here represents the City and County share of the total expenditures for the service.

Part 1: Base Budget Proposal

BUDGET INFORMATION

	2018 Actual	2019 Adopted	2019 Actual	2020 Adopted	2021 C2C	2021 Request
<i>Budget by Fund</i>						
General-Net	\$0	\$0	\$0	\$0	\$0	\$0
Other-Expenditures	\$893,606	\$1,085,365	\$945,508	\$1,120,924	\$1,122,180	\$1,130,700
Total	\$893,606	\$1,085,365	\$945,508	\$1,120,924	\$1,122,180	\$1,130,700
<i>Budget by Major</i>						
Revenue	(\$1,510,783)	(\$2,293,393)	(\$2,153,536)	(\$761,412)	(\$761,412)	(\$761,412)
Personnel	\$822,052	\$994,224	\$862,265	\$1,040,952	\$1,040,952	\$1,040,952
Non-Personnel	\$71,554	\$91,141	\$83,243	\$79,972	\$81,228	\$89,748
Agency Billings	\$0	\$0	\$0	\$0	\$0	\$0
Total	(\$617,177)	(\$1,208,028)	(\$1,208,028)	\$359,512	\$360,768	\$369,288
FTEs						

PRIORITY

Citywide Element Healthy and Safe

Describe how this service advances the Citywide Element:

The goals of the service are the prevention of groundwater contamination by improperly installed, abandoned or neglected wells and private waste water treatment systems in Dane County and clean up and prevention of human health hazards such as household hygiene, mold, lead and radon.

ACTIVITIES PERFORMED BY THIS SERVICE

Activity	% of Effort	Description
Sanitary Permit Review and Inspection	45	Review permits and perform onsite inspections to ensure systems are built to comply with state laws.
Onsite Soil Test	15	Perform onsite evaluation and review of soil test reports to confirm proper waste water disposal for the site.
Well Location Permitting and Inspection	10	Review permits and perform onsite inspections to ensure wells are constructed in appropriate locations and follow-up on complaints of unused or contaminated wells that require abandonment.
Transient Non-community Well Regulation	20	Inspect wells and monitor private wells that serve the community through churches, commercial establishments, and other public facilities.
Environmental Nuisance and Hazardous Materials Investigation	10	Investigate childhood lead hazard investigations, household hygiene, mold, indoor air quality, etc.

SERVICE BUDGET CHANGES

Service Impact

What is the proposed change to the service's budget from cost to continue to agency request?

What are the service level impacts of the proposed funding changes?

Personnel-Permanent Positions

Are you proposing an allocation change to the FTEs for this service? ▼

Type	Fund	Amount	Description
Perm Wages	<input type="text"/>	<input type="text"/>	<input type="text"/>
Benefits	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		\$0 <input type="text"/>	

Explain the assumptions behind the allocation change.

What is the justification behind the allocation change?

Personnel-Other Personnel Spending

Are you requesting additional personnel spending for non-annualized pay? ▼

Type	Fund	Amount	Description
Overtime	<input type="text"/>	<input type="text"/>	<input type="text"/>
Premium Pay	<input type="text"/>	<input type="text"/>	<input type="text"/>
Hourly	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		\$0 <input type="text"/>	

Explain the assumptions behind the requested funding.

What is the justification behind the increased funding?

Revenue

Are you proposing a change to the service's budgeted revenue?

 ▼

Are you proposing an increase or a decrease to the budgeted revenue?

 ▼

Fund	Major	Amount	Description
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Insert item

Explain the assumptions behind the change to budgeted revenue.

What is the justification behind the proposed change?

Non-Personnel

Are you requesting additional non-personnel funding for this service?

 ▼

Fund	Major	Amount	Description
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Insert item

Explain the assumptions behind the requested funding.

What is the justification behind the increased funding?

Part 2: Proposed Budget Reduction

What is 5% of the agency's net budget?

\$1,067,700

What is the proposed reduction to this service's budget?

\$0

Explain how you would change the activities and the level of service as a result of implementing the funding decrease to this service. List changes by service activity identified above. Add a separate line for each reduction.

Activity	\$Amount	Description

Insert item

Total	\$0	
--------------	-----	--

Explain the changes by major expenditure category that your agency would implement as a result of the funding decrease to this service.

Name	\$ Amount	Description
Personnel		
Non-Personnel		
Agency Billings		
Total	\$0	

Is the City mandated to perform the activities of this service? If so, explain the mandate and mandated service level. If not, are there other local organizations also involved in performing these activities.

Has this reduction been proposed in prior years?

Select... ▼

Does the proposed reduction result in eliminating permanent positions?

Select... ▼

If yes, what is the decrease in FTEs:

Does the proposed reduction impact other agencies (i.e. Fleet Services)?

Select... ▼

If yes, which agencies:

Describe why the proposed reduction was chosen.

Explain the impacts of the proposed reduction on the end user of the service. How can impacts of this reduction be mitigated?

Submit

2021 Operating Budget Service Budget Proposal

IDENTIFYING INFORMATION

SELECT YOUR AGENCY:

Public Health

SELECT YOUR AGENCY'S SERVICE:

Laboratory

SERVICE NUMBER:

327

SERVICE DESCRIPTION:

This service provides sample collection, analysis, interpretation and advice on environmental sample quality; responds to environmental spills and hazardous materials releases; and collaborates with other municipal, state and federal agencies on environmental projects. The total as presented here represents the City and County share of the total expenditures for the service.

Part 1: Base Budget Proposal

BUDGET INFORMATION

	2018 Actual	2019 Adopted	2019 Actual	2020 Adopted	2021 C2C	2021 Request
<i>Budget by Fund</i>						
General-Net	\$0	\$0	\$0	\$0	\$0	\$0
Other-Expenditures	\$760,144	\$634,391	\$852,793	\$526,995	\$501,706	\$542,403
<i>Total</i>	<i>\$760,144</i>	<i>\$634,391</i>	<i>\$852,793</i>	<i>\$526,995</i>	<i>\$501,706</i>	<i>\$542,403</i>
<i>Budget by Major</i>						
Revenue	(\$214,356)	(\$124,648)	(\$343,049)	(\$100,900)	(\$100,900)	(\$100,900)
Personnel	\$679,850	\$522,916	\$631,923	\$410,583	\$410,583	\$410,583
Non-Personnel	\$80,295	\$111,475	\$220,870	\$116,412	\$91,123	\$131,820
Agency Billings	\$0	\$0	\$0	\$0	\$0	\$0
<i>Total</i>	<i>\$545,789</i>	<i>\$509,743</i>	<i>\$509,744</i>	<i>\$426,095</i>	<i>\$400,806</i>	<i>\$441,503</i>
FTEs						

PRIORITY

Citywide Element Healthy and Safe

Describe how this service advances the Citywide Element:

The goal of the service is prevention of waterborne illness due to surface water contamination, identifying sources of contamination and trends that will impact human health, and prevention of illegal discharge of harmful substances.

ACTIVITIES PERFORMED BY THIS SERVICE

Activity	% of Effort	Description
Water Sampling	50	Sample and analyze private water well samples, sample public water, sample and monitor beaches.
Illicit Discharge Detection and Elimination Program	25	Monitor and sample outfalls and elimination of illicit discharges.
Hazardous Spills/Application Follow-up	25	Respond to complaints of hazardous spills, PAH applications, and sales/use of phosphorus containing materials.

 Insert item

SERVICE BUDGET CHANGES

Service Impact

What is the proposed change to the service's budget from cost to continue to agency request?
2021 Operating Budget: Agency Requests

432

What are the service level impacts of the proposed funding changes?

Personnel-Permanent Positions

Are you proposing an allocation change to the FTEs for this service?

Type	Fund	Amount	Description
Perm Wages	<input type="text"/>	<input type="text"/>	<input type="text"/>
Benefits	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		\$0	

Explain the assumptions behind the allocation change.

What is the justification behind the allocation change?

Personnel-Other Personnel Spending

Are you requesting additional personnel spending for non-annualized pay?

Type	Fund	Amount	Description
Overtime	<input type="text"/>	<input type="text"/>	<input type="text"/>
Premium Pay	<input type="text"/>	<input type="text"/>	<input type="text"/>
Hourly	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		\$0	

Explain the assumptions behind the requested funding.

What is the justification behind the increased funding?

Revenue

Are you proposing a change to the service's budgeted revenue?

Are you proposing an increase or a decrease to the budgeted revenue?

Fund	Major	Amount	Description
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Insert item

Explain the assumptions behind the change to budgeted revenue.

What is the justification behind the proposed change?

Non-Personnel

Are you requesting additional non-personnel funding for this service?

Fund	Major	Amount	Description
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Insert item

Explain the assumptions behind the requested funding.

What is the justification behind the increased funding?

Part 2: Proposed Budget Reduction

What is 5% of the agency's net budget?

What is the proposed reduction to this service's budget?

Explain how you would change the activities and the level of service as a result of implementing the funding decrease to this service. List changes by service activity identified above. Add a separate line for each reduction.

Activity	\$Amount	Description
<input type="text"/>	<input type="text"/>	<input type="text"/>

Insert item

Total	\$0	
--------------	-----	--

Explain the changes by major expenditure category that your agency would implement as a result of the funding decrease to this service.

Name	\$ Amount	Description
Personnel	<input type="text"/>	<input type="text"/>
Non-Personnel	<input type="text"/>	<input type="text"/>
Agency Billings	<input type="text"/>	<input type="text"/>
Total	\$0	

Is the City mandated to perform the activities of this service? If so, explain the mandate and mandated service level. If not, are there other local organizations also involved in performing these activities.

Has this reduction been proposed in prior years?

Does the proposed reduction result in eliminating permanent positions?

If yes, what is the decrease in FTEs:

Does the proposed reduction impact other agencies (i.e. Fleet Services)?

If yes, which agencies:

Describe why the proposed reduction was chosen.

Explain the impacts of the proposed reduction on the end user of the service. How can impacts of this reduction be mitigated?

2021 Operating Budget

Service Budget Proposal

IDENTIFYING INFORMATION

SELECT YOUR AGENCY:

Public Health

SELECT YOUR AGENCY'S SERVICE:

Licensed Establishments

SERVICE NUMBER:

326

SERVICE DESCRIPTION:

This service inspects all restaurants, retail food stores, school food programs, public pools, hotels, motels, Bed and Breakfasts, recreational-educational camps, campgrounds, body art establishments and mobile home parks in Madison and Dane County. The total as presented here represents the City and County share of the total expenditures for the service.

Part 1: Base Budget Proposal

BUDGET INFORMATION

	2018 Actual	2019 Adopted	2019 Actual	2020 Adopted	2021 C2C	2021 Request
<i>Budget by Fund</i>						
General-Net	\$0	\$0	\$0	\$0	\$0	\$0
Other-Expenditures	\$1,703,696	\$1,760,932	\$2,537,942	\$2,326,624	\$2,321,809	\$2,325,904
<i>Total</i>	<i>\$1,703,696</i>	<i>\$1,760,932</i>	<i>\$2,537,942</i>	<i>\$2,326,624</i>	<i>\$2,321,809</i>	<i>\$2,325,904</i>
<i>Budget by Major</i>						
Revenue	(\$2,093,649)	(\$2,038,585)	(\$2,815,594)	(\$2,368,193)	(\$2,368,193)	(\$2,368,193)
Personnel	\$1,584,726	\$1,645,844	\$1,834,577	\$2,192,681	\$2,192,681	\$2,192,681
Non-Personnel	\$118,970	\$115,088	\$703,365	\$133,943	\$129,128	\$133,223
Agency Billings	\$0	\$0	\$0	\$0	\$0	\$0
<i>Total</i>	<i>(\$389,953)</i>	<i>(\$277,653)</i>	<i>(\$277,652)</i>	<i>(\$41,569)</i>	<i>(\$46,384)</i>	<i>(\$42,289)</i>
FTEs						

PRIORITY

Citywide Element

Healthy and Safe

Describe how this service advances the Citywide Element:

The goal of this service is prevention of foodborne and other communicable disease outbreaks.

ACTIVITIES PERFORMED BY THIS SERVICE

Activity	% of Effort	Description
Food Program	80	Licensing, regulation and enforcement for all restaurant and retail food establishments. Promoting health and racial equity within program, with operators and within community. Administrative support for licensing, complaints, and operator inquiries.
Pool Program	10	Licensing, regulation and enforcement of all public pools. Includes sampling and testing of pool water. Promoting health and racial equity within program, with operators and within community. Administrative support for licensing, complaints, and operator inquiries.
Lodging Program	5	

Licensing, regulation and enforcement for hotels, motels, bed and breakfast, and tourist rooming houses. Promoting health and racial equity within program, with operators and within community. Administrative support for licensing, complaints, and operator inquiries.

Tattoo and Body Piercing

2.5

Licensing, regulation and enforcement for tattoo and body piercing establishments. Promoting health and racial equity within program, with operators and within community. Administrative support for licensing, complaints, and operator inquiries.

Licensed Establishment Other

2.5

Licensing and regulation for campgrounds, recreational and educational camps, manufactured home parks and beaches. Promoting health and racial equity within program, with operators and within community. Administrative support for licensing, complaints, and operator inquiries.

Insert item

SERVICE BUDGET CHANGES

Service Impact

What is the proposed change to the service's budget from cost to continue to agency request?

What are the service level impacts of the proposed funding changes?

Personnel-Permanent Positions

Are you proposing an allocation change to the FTEs for this service?

Type	Fund	Amount	Description
Perm Wages	<input type="text"/>	<input type="text"/>	<input type="text"/>
Benefits	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		\$0	

Explain the assumptions behind the allocation change.

What is the justification behind the allocation change?

Personnel-Other Personnel Spending

Are you requesting additional personnel spending for non-annualized pay?

Type	Fund	Amount	Description
Overtime	<input type="text"/>	<input type="text"/>	<input type="text"/>
Premium Pay	<input type="text"/>	<input type="text"/>	<input type="text"/>
Hourly	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		\$0	

Explain the assumptions behind the requested funding.

What is the justification behind the increased funding?

Revenue

Are you proposing a change to the service's budgeted revenue?

Are you proposing an increase or a decrease to the budgeted revenue?

Fund	Major	Amount	Description

Insert item

Explain the assumptions behind the change to budgeted revenue.

What is the justification behind the proposed change?

Non-Personnel

Are you requesting additional non-personnel funding for this service?

Select...

Fund	Major	Amount	Description

Insert item

Explain the assumptions behind the requested funding.

What is the justification behind the increased funding?

Part 2: Proposed Budget Reduction

What is 5% of the agency's net budget?

\$1,067,700

What is the proposed reduction to this service's budget?

\$0

Explain how you would change the activities and the level of service as a result of implementing the funding decrease to this service. List changes by service activity identified above. Add a separate line for each reduction.

Activity	\$Amount	Description

Insert item

Total	\$0	
--------------	-----	--

Explain the changes by major expenditure category that your agency would implement as a result of the funding decrease to this service.

Name	\$ Amount	Description
Personnel		
Non-Personnel		
Agency Billings		
Total	\$0	

Is the City mandated to perform the activities of this service? If so, explain the mandate and mandated service level. If not, are there other local organizations also involved in performing these activities.

Has this reduction been proposed in prior years?

Select...

Does the proposed reduction result in eliminating permanent positions?

Select...

Does the proposed reduction impact other agencies (i.e. Fleet Services)?

If yes, which agencies:

Describe why the proposed reduction was chosen.

Explain the impacts of the proposed reduction on the end user of the service. How can impacts of this reduction be mitigated?

2021 Operating Budget Service Budget Proposal

IDENTIFYING INFORMATION

SELECT YOUR AGENCY:

Public Health

SELECT YOUR AGENCY'S SERVICE:

Policy Program and Evaluation

SERVICE NUMBER:

328

SERVICE DESCRIPTION:

This service provides program planning, surveillance and analysis, research, and evaluation and is the defacto technical assistance branch of PHMDC.

Part 1: Base Budget Proposal

BUDGET INFORMATION

	2018 Actual	2019 Adopted	2019 Actual	2020 Adopted	2021 C2C	2021 Request
<i>Budget by Fund</i>						
General-Net	\$0	\$0	\$0	\$0	\$0	\$0
Other-Expenditures	\$1,945,540	\$2,539,310	\$2,662,954	\$2,560,955	\$2,564,615	\$2,550,217
<i>Total</i>	<i>\$1,945,540</i>	<i>\$2,539,310</i>	<i>\$2,662,954</i>	<i>\$2,560,955</i>	<i>\$2,564,615</i>	<i>\$2,550,217</i>
<i>Budget by Major</i>						
Revenue	(\$1,364,607)	(\$1,087,551)	(\$1,211,195)	(\$281,911)	(\$281,911)	(\$366,911)
Personnel	\$1,642,205	\$2,169,222	\$2,057,566	\$2,284,362	\$2,284,362	\$2,284,362
Non-Personnel	\$303,335	\$370,088	\$605,388	\$276,593	\$280,253	\$265,855
Agency Billings	\$0	\$0	\$0	\$0	\$0	\$0
<i>Total</i>	<i>\$580,933</i>	<i>\$1,451,759</i>	<i>\$1,451,759</i>	<i>\$2,279,044</i>	<i>\$2,282,704</i>	<i>\$2,183,306</i>
FTEs						

PRIORITY

Citywide Element Healthy and Safe

Describe how this service advances the Citywide Element:

The goal of this service is to ensure that Public Health has the information and support needed to guide its work.

ACTIVITIES PERFORMED BY THIS SERVICE

Activity	% of Effort	Description
Policy Analysis/Planning/Evaluation	25	Provide policy analysis and position statement support, program planning and coordination, and evaluation services to Public Health staff, other government entities and community stakeholders.
Data Collection and Analysis	25	Collect, analyze, and communicate health-related data to assess community health status, track trends, prevent diseases, and inform policies and programs to improve health.
Community Health Assessment/Health Improvement Plan	20	Gather input from community on health issues, analyze health data, and prioritize health issues to guide development of a Community Health Improvement Plan (CHIP).
Opioid/Violence Prevention	10	Remove silos and bring together the strengths of stakeholders with both lived experience and content expertise to move towards systems-level change and improved health outcomes.

Accreditation

20

Standardize procedures and protocols within Public Health to align with best practices around the planning, implementation, and evaluation of public health programs and policies to support the health, wellbeing, and safety of Dane County residents.

Insert item

SERVICE BUDGET CHANGES

Service Impact

What is the proposed change to the service's budget from cost to continue to agency request?

What are the service level impacts of the proposed funding changes?

Personnel-Permanent Positions

Are you proposing an allocation change to the FTEs for this service? No

Type	Fund	Amount	Description
Perm Wages	<input type="text"/>	<input type="text"/>	<input type="text"/>
Benefits	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		\$0	

Explain the assumptions behind the allocation change.

What is the justification behind the allocation change?

Personnel-Other Personnel Spending

Are you requesting additional personnel spending for non-annualized pay? No

Type	Fund	Amount	Description
Overtime	<input type="text"/>	<input type="text"/>	<input type="text"/>
Premium Pay	<input type="text"/>	<input type="text"/>	<input type="text"/>
Hourly	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		\$0	

Explain the assumptions behind the requested funding.

What is the justification behind the increased funding?

Revenue

Are you proposing a change to the service's budgeted revenue?

Yes

Are you proposing an increase or a decrease to the budgeted revenue?

Increase

Fund	Major	Amount	Description
6100	Revenue	\$85,000	Overdose Data 2 Action

Insert item

Explain the assumptions behind the change to budgeted revenue.

What is the justification behind the proposed change?

Non-Personnel

Are you requesting additional non-personnel funding for this service?

Select... ▼

Fund	Major	Amount	Description
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Insert item

Explain the assumptions behind the requested funding.

What is the justification behind the increased funding?

Part 2: Proposed Budget Reduction

What is 5% of the agency's net budget?

What is the proposed reduction to this service's budget?

Explain how you would change the activities and the level of service as a result of implementing the funding decrease to this service. List changes by service activity identified above. Add a separate line for each reduction.

Activity	\$Amount	Description

Insert item

Total	\$0	
--------------	-----	--

Explain the changes by major expenditure category that your agency would implement as a result of the funding decrease to this service.

Name	\$ Amount	Description
Personnel	<input type="text"/>	<input type="text"/>
Non-Personnel	<input type="text"/>	<input type="text"/>
Agency Billings	<input type="text"/>	<input type="text"/>
Total	\$0	

Is the City mandated to perform the activities of this service? If so, explain the mandate and mandated service level. If not, are there other local organizations also involved in performing these activities.

Has this reduction been proposed in prior years?

Select... ▼

Does the proposed reduction result in eliminating permanent positions?

Select... ▼

If yes, what is the decrease in FTEs:

Does the proposed reduction impact other agencies (i.e. Fleet Services)?

Select... ▼

If yes, which agencies:

Describe why the proposed reduction was chosen.

Explain the impacts of the proposed reduction on the end user of the service. How can impacts of this reduction be mitigated?

Submit

v. 06-01-20