



**City of Milwaukee
Budget and Policy Division
Intra-Office Memo**

To: Mark Nicolini

From: Eric Pearson

Date: October 15, 2009

Subject: Staff Nurses Council Information on Position Reductions

At the October 13, 2009 Finance and Personnel Committee budget hearing on the Milwaukee Health Department's 2010 Proposed Budget, a member of the SEIU, Staff Nurses Council, Local 1199 provided information on position changes in various city departments. This information states that the Health Department has experienced a 31.24% staffing reduction since 1996 while the Department of Administration had a 23.36% increase and DPW Administration had a 34.04% increase.

The documentation provided by the individual identified authorized positions in the 1996 budget and 2008 budget and calculated the percentage reduction between these budgets. The position numbers for the Health Department, Department of Administration, and DPW Administration shown in the document all have either significant errors, or require significant qualifications, in order to accurately compare the changes between 1996 and 2008. These are explained below.

Department of Administration: The DOA positions are in error because the union did not include positions in DOA Internal Service Agencies (ISAs) in 1996. In 1996, DOA consisted of the tax-levy supported operating budget and two ISAs which were supported from billings to other departments. The two DOA ISAs in 1996 were the DOA-Standards & Procurement, Central Reproduction and City Records Center (CRD), which had 13 positions, and the DOA-Information Systems Division (ISD), which had 96 positions. CRD is now in the Business Operations Division of DOA and ISD is now the Information and Technology Management Division of DOA. Including the ISAs, DOA had 195 total positions in 1996. In 2008, DOA had 106 positions. The change is not an increase of 23.26%. The change is a decrease of 45.6%, a reduction of 89 positions.

DPW Administrative Services Division: The DPW Administration position increase is overstated because most of the increase is the result of the DPW Administrative Services Reorganization process that began in the 1998 budget. The 1998 reorganization moved 34 positions from the DPW operating divisions into the DPW Administrative Services Division by centralizing planning, budgeting, accounting, payroll, personnel and inventory functions that were formerly handled independently by the operating divisions. Transferring positions from operating divisions into DPW Administrative Services did not create new positions, as the union's information would indicate. After 1998, there were additional administrative reorganizations within DPW that centralized more positions in DPW Administrative Services. These reorganizations enabled DPW to reduce overall positions and achieve operating efficiencies. In 2001, DPW Administrative Services had 73 positions. In 2008, positions were 63, a reduction of 10 positions or 13.7% from 2001.

Health Department: The change in Health Department positions is overstated primarily because it does not account for the transfer of numerous positions to the Department of Neighborhood Services. In 1996, the Health Department had 445 authorized positions. In 1999, 42 positions transferred from the Health Department to the new Department of Neighborhood Services. These positions were not eliminated; they were transferred to a new department. Accurately comparing the change in Health positions between 1996 and 2008 requires excluding these positions from the 1996 position count. When this is done, the position reduction is 91 or a 22.6% decrease, significantly lower than the 31.24% reduction cited by the union.

Position changes in the Health Department since 1996 include position reductions that result from reduced grant funding and from operating efficiencies. The city's policy has been to eliminate positions created to implement grants when grant funding is not available to maintain the positions. In addition, all departments are encouraged to implement operating efficiencies that allow for the reduction of positions, and these efficiencies do not necessarily translate into reduced service levels to the public. Moreover, staffing changes in the Health Department since 1996 include reductions to positions that are not health professionals, such as clerical and custodial staff. These reductions do not result in decreased health services to the public.

In short, the information presented by the individual significantly overstates the actual reduction in health professional staff. While there has been a reduction in these staff, the magnitude of the reduction is lower than asserted. Determining the actual reduction would require a more detailed analysis of changes in each budget since 1996, in order to identify changes to non-health professional staffing, changes that result from technology improvements and operating efficiencies, and changes that result from reduced grant funding.

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