

GRANT ANALYSIS FORM
OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS

Department/Division: Health/Maternal and Child Health

Contact Person & Phone No: Amy Murphy, #8028

Category of Request

New Grant

Grant Continuation

Change in Previously Approved Grant

Previous Council File No.

Previous Council File No.

Project/Program Title: Comprehensive Home Visiting Grant

Grantor Agency: Wisconsin Department of Health and Family Services

Grant Application Date: 03/11/05

Anticipated Award Date: July 1, 2005

Please provide the following information:

1. Description of Grant Project/Program (Include Target Locations and Populations):

The purpose of the Milwaukee Comprehensive Home Visiting Grant is to serve 700 families in need of services related to: 1- improving pregnancy outcomes; 2- enhancing family functions; 3- preventing child abuse and neglect; and 4- assuring child readiness for school. Families in six zip code target areas will be identified and served over a 5 ½ year period in cooperation with multiple agencies and community based organizations in Milwaukee. Services will be delivered by a multi-faceted case management team comprised of a social worker, community health worker and public health nurse. In addition to direct service provision, the Milwaukee Health Department (MHD) will provide leadership for community collaboration and a centralized intake/referral system to assure coordination of services for families in need.

2. Relationship to City-wide Strategic Goals and Departmental Objectives:

Infant mortality reduction and assuring child health readiness for school is a major goal of the MHD.

3. Need for Grant Funds and Impact on Other Departmental Operations (Applies only to Programs):

Adequate resources currently do not exist in Milwaukee to intensively reduce the health disparities related to infant mortality and other child health indicators.

4. Results Measurement/Progress Report (Applies only to Programs):

- Changes in the Infant Mortality Rate
- Reduction in the cases of Child Abuse and Neglect

5. Grant Period, Timetable and Program Phase-out Plan:

July 1, 2005 through December 31, 2006

6. Provide a List of Subgrantees:

N/A

7. If Possible, Complete Grant Budget Form and Attach to Back.

CITY OF MILWAUKEE OPERATING GRANT BUDGET

PROJECT/PROGRAM TITLE: Milwaukee Comprehensive Home Visiting Program
 CONTACT PERSON: Janet Nell, #2251

PROJECT/PROGRAM YEAR: 2005-2006

NUMBER OF POSITIONS		LINE DESCRIPTION	PAY RANGE NO.	GRANTOR SHARE	IN-KIND SHARE	CASH MATCH A/C #	TOTAL
NEW	EXISTING						
		PERSONNEL COSTS					
1		Program Manager (X)	007	62,368			62,368
1		Project/Systems Coordinator (X)	005	58,528			58,528
1		Data Manager	558	49,600			49,600
1		Office Assistant II	410	30,688			30,688
2		Public Health Nurses (X)	666	89,216			89,216
		TOTAL PERSONNEL COSTS		290,400	0	0	290,400
		FRINGE BENEFITS					
		42%		121,968			121,968
		TOTAL FRINGE BENEFITS		121,968			121,968
		SUPPLIES AND MATERIALS					
		Office and Program Supplies		7,500			7,500
		TOTAL SUPPLIES AND MATERIALS		7,500	0	0	7,500
		SERVICES					
		Printing		3,000			3,000
		Misc. Services		1,500			1,500
		Travel and Training		7,500			7,500
		Phone Charges		6,000			6,000
		Mileage		8,500			8,500
		Participant Incentives		30,000	15,000		45,000

