

S T A T E O F M I C H I G A N

BOARD OF COMMISSIONERS OF THE COUNTY OF ALLEGAN

ADMINISTRATION - APPROVE ANIMAL SHELTER DONATION PLAN

WHEREAS, the Animal Shelter receives donations to support animal care; and

WHEREAS, the County Animal Shelter staff seeks to use donations and, as such, developed a donation plan as required by the budget policy.

THEREFORE, BE IT RESOLVED that the Board of Commissioners hereby approves the Animal Shelter donation plan as received; and

BE IT FINALLY RESOLVED that the County Administrator is authorized to make the necessary budget adjustments and create any financial accounts.



Project Scoping Animal Shelter Donation Plan

Version 2.0

PURPOSE: The purpose of this document is to gauge the value this project idea has in reaching a desired future state, gauging the project’s impact on budget and resources, and charting a course for next steps.

| | |
|--------------------------------------|-------------------------------------|
| Project Name: | Animal Shelter Donation Plan |
| Project Sponsor: | Dan Wedge |
| Project Manager: | Dan Wedge |
| Date Initial Scope Submitted: | June 21, 2024 |
| Date Scope Completed: | June 26, 2024 |

PART A – PROJECT SUMMARY

1. CURRENT STATE

Fully describe the current state and list all associated issues, concerns and/or deficiencies.

In November 2023, the Allegan County Animal Shelter operation transitioned from Wishbone Pet Rescue Alliance back to the County. Prior to this date, Wishbone Pet Rescue Alliance received and used donations to support operations at the shelter. Since the transition, donations have continued to be made to the County. Without a donation plan, there is no way of determining how donations are used.

2. DESIRED FUTURE STATE

Describe the action(s) desired to address or change the current state, your expectations, proposed solution and the desired outcomes.

Consistent with the budget policy, Donation and Surplus Programs, section 4.20 requirements, this document represents a donation plan and outlines the acceptance and use of Allegan County Animal Shelter donations. As stated in the Budget policy section 4.20: Acceptance and use of any donation (money, goods, or services) shall be consistent with the nature of the County’s Services and Programs, Strategic Goals, and internal controls and subject to the approval or rejection by the Board of Commissioners or County Administrator. As such this plan is being submitted in accordance with this policy. The desired outcome

would be authorization to accept future donations, including restricted donations and expend these funds in a manner consistent with the budget policy, internal controls, and this plan.

3. ADDITIONAL BACKGROUND

Provide any additional background information relevant to this project not already mentioned above if necessary to give a broader context for this project.

This plan includes an Appendix A with a list of current needs. The list of identified operational and capital needs will be reviewed annually as part of the budget submission process or as needed. Any changes to the approved list will be sent to the CAO for review and approval. The categories on the list are divided into three sections. 1.) Operational Items \$4,999 or less, 2.) Capital or operational items from \$5,000 to \$49,999 and Capital items over \$50,000.

4. SCHEDULING CONSIDERATIONS

List any scheduling factors to be considered such as new regulations coming into effect, timing project with cyclical business processes, seasonal requirements, increasing risk, etc. that have an impact on when this project is started, completed and/or work on it may be performed.

Capital projects and purchases requiring an RFP or contracts will be scheduled in advance with Project Management and Facilities Management as their capacity allows.

5. PRIORITY CONSIDERATIONS

Is the primary objective of this project to (check one or both):

- address an **operational** need necessary to maintain the status quo.
- address a **strategic** desire to change or enhance the status quo.

Fill out the Priority Matrix in Part D to help prioritize this project and enter the score here: **Score**

Items on Appendix A will be prioritized by the following priority levels: 1. Safety & Security, 2. Cost Savings or Service Enhancement, and 3. Capital Improvements. Priority levels are based on staff recommendations and final approved by the County Administrator or designee.

6. ATTACHMENTS AND REFERENCES

- 6.1 List any relevant supporting or reference materials such as product quotes, legislation, photos, budget calculations, etc., and attach them to the track it requests as separate documents.
 - Appendix A List of Current Needs

PART B – PROJECT DETAIL

7. PROJECT BUDGET

Does your project involve expenditures, revenues or fees? **Yes** **No** - If “Yes”:

Donation revenues and associated approved expenditures.

7.1 Initial Project Funding:

Where is the proposed initial funding for this project coming from?

- Existing budgeted operational funds to be used
- New operational funds requested in next year's budget
- Capital / project / contingency funds requested
- Existing grant funds available
- New grant funding to be applied for
- Other: Donations

This plan would seek to expend donation funds for approved projects. See Appendix A for list of identified operational and capital needs, which will be reviewed annually as part of the budget submission process or as needed. Any changes to the approved list will be sent to the County Administrator for review and approval.

7.2 How was the cost estimate determined? Was the full scope considered in estimating cost? Attaching quotes or cost breakdowns from other projects is desirable.

Describe: Consistent with budget policy. As new donations arrive, cost estimates and procurement path will be determined in accordance with the purchasing policy.

7.3 **Operational Expenditure Changes if Any (include year's 1 – 5 if applicable):**

| Expenditure Item | Year | Budget Account | Estimated Change |
|-------------------|------|----------------|------------------|
| None (or itemize) | 1 | | \$0 |

The purchase of items on Appendix A with donations may decrease planned general fund or CIP expenditures.

7.4 If project has associated operational expenditures, are they incorporated and sufficiently funded in your most recent or pending five-year budget submittal? Yes No N/A

7.5 **Estimated Revenue Changes if Any (include year's 1-5 if applicable):**

| Revenue Item | Year | Budget Account | Estimated Change |
|-------------------|------|----------------|------------------|
| None (or itemize) | 1 | | \$0 |

Anticipated donations.

7.6 Are anticipated revenues incorporated in your most recent or pending five-year budget submittal? Yes No N/A Budgeted for donation account line and capital projects have been submitted within the budget process.

7.7 **Funding Approval Authority:**

What levels of approval are needed to authorize funding for this project?

- Manager / Director / Elected Official
- Commission, Committee, Team or other group:
- County Administrator
- Board of Commissioners

7.8 Funding Approval Process:

What process will be used to approve project funding?

- Internal to Service Area / Department
- Through Annual Budget Process - Year: 2025-2029
- Budget Adjustment - Request for Action (RFA)
- Personnel Request - Request for Action (RFA)
- Other: County Administrator

The list of identified operational and capital needs will be reviewed annually as part of the budget submission process or as needed. Any changes to the approved list will be sent to the County Administrator for review and approval.

8. ASSET MANAGEMENT

Will your project result in a change to the assets owned by the County? Yes No - If "YES":

8.1 Assets Added:

| Asset description and detail | Quantity | Useful Life |
|--|----------|-------------|
| Capital assets and building improvements | | |

Asset addition notes and clarifications: See Appendix A, List of Needed Items

9. PROCUREMENT AND CONTRACTING

Will you need to procure products and/or contract for services? Yes No - If "YES":

- 9.1 What is the estimated cost of products or services to be procured? This will be based on donations received. Estimates will be gathered in accordance with the purchasing policy.
- 9.2 If this an emergency purchase, provide a rationale supported by the Purchasing Policy:
Not Applicable (or provide a rationale) N/A
- 9.3 Which procurement strategy is being proposed? All that apply at the time of purchase.
 - Sole Source
 - Reverse Auction
 - Cooperative Purchase (note Coop Agency and Contract #)
 - Product/services procured through quotes
 - Request for Proposal (RFP) for products and/or services
 - Other

Project Management will provide recommendations procurement process.

- 9.4 What level of approval will be needed to purchase product and/or award service contract based on account authority and approval thresholds?
 - Manager / Director / Elected Official

- Commission, Committee, Team or other group:
- County Administrator (RFA needed)
- Board of Commissioners (RFA needed)

This will be based on the account authority and approval thresholds in the budget policy.

10. PROCESS, PROCEDURE, POLICY and PERSONNEL CHANGES

If any processes, procedures or policies will be impacted by pursuing this project, please describe and elaborate:

Not Applicable

If any personnel changes will be needed to realize this project, please describe and elaborate:

Not Applicable

PART C – PROJECT MANAGEMENT SECTION

11. RESOURCE NEEDS ESTIMATES

- 11.1** Taking into consideration all other sections of this Project Scoping Form, estimate the number of months to complete each stage of the project, including lag times. If the project has multiple phases, add additional tables. PMT will assist you in putting together an Activity Schedule to estimate resource needs.

Time and resources for capital projects will be in a project-scoping form as they are identified.

12. MISCELLANEOUS PROJECT MANAGEMENT NOTES

- Prioritization of expenditures will be recommended by staff as donations are received and for items on Appendix A, with final approval by CAO or designee.
 - Items will be assigned Priority levels in three categories;
 - 1. Safety & Security
 - 2. Cost Savings or Service Enhancement
 - 3. Capital Improvements
- As stated above in the plan, the donation plan identified needs in three categories:
 - \$1,000 - \$4,999 (Operational items)
 - \$5,000 - \$49,999 (Capital and Operational items)
 - \$50,000 and above (Capital items)
- Allegan County Animal Shelter staff may solicit low-cost donations like collars, leashes, rawhide, treats, toys, etc. These donations may be made at the shelter, on social media, or through an Amazon wish list. Social media posts soliciting donations will be vetted by Administration.

PART D – PROJECT PRIORITIZATION MATRIX

| Legislative Compliance | | | |
|-------------------------------|--|---|---------------|
| Category | Scoring Criteria | Project Relevance | Points |
| State/Federal Mandate | 20 = Complies with a State or Federal mandate / ordinance / law, 0 = not applicable or not mandated | The donation plan itself is not mandated by State or Federal process. (only by County Policy) | 0 |

| Employee Impact | | | |
|---|--|--------------------------|---------------|
| Category | Scoring Criteria | Project Relevance | Points |
| Safety and Security | 5 = increases or would result in a decrease without this action, 0 = not applicable or no impact | N/A | 0 |
| Capabilities of employees (skills, abilities and knowledge) | 10 = increases or would result in a decrease without this action, 0 = not applicable or no impact | N/A | 0 |
| Employee Wellness | 5 = increases or would result in a decrease without this action, 0 = not applicable or no impact | N/A | 0 |

| Operational Impact | | | |
|---------------------------|--|--|---------------|
| Category | Scoring Criteria | Project Relevance | Points |
| Efficiency / Capacity | 10 = increases or would result in a decrease without this action, 0 = not applicable or no impact | It is anticipated that all project would result in efficiency or capacity. | 10 |
| Scope | 5 = impact multiple service areas 2 = impacts a single service area | Some items may impact other areas, like animal control. | 2 |
| Prevention Planning | 5 = Aligns to an existing plan (i.e. maintenance, improvement, replacement), or prolongs/preserves the life of an asset and prevents greater expenditure later, 0 = Not applicable or no impact | This Donation plan would take into account and align with the budget capital plan. | 5 |

| Financial Impact | | | |
|----------------------------|---|---|---------------|
| Category | Scoring Criteria | Project Relevance | Points |
| Expenditures | 5 = Decreases expenditures or would result in an increase without this action, 0 = Not applicable or no impact | Decreases expenditures from County General Funds. | 5 |
| Return on Investment (ROI) | 5 = ROI within 2 years, 2 = ROI within 5 years 0 = Not applicable or no impact | Possible | |

| | | | |
|-----------------------------|--|--|---|
| Revenue | 5 = Increases revenue or would result in a decrease without this action, 0 = Not applicable or no impact | This plan offers an avenue to approve and receive donation revenues. | 5 |
| Risk Management & Liability | 5 = decreases liability or would result in an increase without this action, 0 = not applicable or no impact | | |

| Service Impact | | | |
|--------------------------|---|---|---------------|
| Category | Scoring Criteria | Project Relevance | Points |
| Level of Service | 5 = increases or would result in a decrease without this action, 0 = not applicable or no impact | Seeking to invest in items or services that result in an increased level of service to animal welfare. | 5 |
| Quality of Service | 5 = increases or would result in a decrease without this action, 0 = not applicable or no impact | Seeking to invest in items or services that result in an increased quality of service for animal welfare. | 5 |
| Accessibility of Service | 5 = increases or would result in a decrease without this action, 0 = not applicable or no impact | Accessibility of Service will be considered where possible. | |
| Collaboration | 5 = increases or would result in a decrease without this action, 0 = not applicable or no impact | Collaboration with partner agencies will be considered where possible. | |

Appendix A

Donation Plan - Items Needed

| Item | Budget Category | Description |
|---------------------------|-----------------|--|
| Category 1 | | |
| \$1.00 - \$4,999 | | |
| Low Cost Items | Category 1 | Collars, Leashes, Specialty food, Rawhide, Treats, toys, etc. |
| Chip Scanner | Category 1 | Additional scanners for Deputies on Road Patrol |
| Centerfuse 1 | Category 1 | Basic Spin blood test |
| Centerfuse 2 | Category 1 | Stat Spin blood test |
| Microscope | Category 1 | Diagnostic tool |
| Microchip | Category 1 | Clinics for low cost Microchips |
| Surgical light | Category 1 | Ceiling mount |
| Pulseoximeter | Category 1 | Anesthetic monitoring |
| Evacuation system | Category 1 | Removes Anesthetic in surgical room |
| Category 2 | | |
| \$5,000 - \$49,999 | | |
| Storage Shed | Category 2 | Pre-built Storage Shed |
| Surgical Table | Category 2 | Adjustable Surgical Table |
| Locking refrigerator | Category 2 | Locking refrigerator for medical supplies (vaccines) |
| Category 3 | | |
| \$50,000 and up | | |
| Kennels with Dog run | Category 3 | Outdoor kennel space including additional dog run |
| Medical Expansion | Category 3 | Expand the current shelter with additional medical and storage |