

**GASTON COUNTY
BUDGET CHANGE REQUEST (BCR)**

TO: Dr. Kim S. Eagle, County Manager

FROM:

EMS

Dept. Code

GEMS

Department Name

Mark Lamphiear

Department Director

5/28/2024

Date

REQUEST TYPE:

- ☐ Line-Item Transfer Within Department & Fund
☐ Project Transfer Within Department & Fund
☐ Line-Item Transfer Between Departments

- ☐ Line-Item Transfer Between Funds*
☒ Additional Appropriation of Funds*

*Requires resolution by the Board of Commissioners

ACCOUNT DESCRIPTION

As it appears in Munis
Ex. Employee Training

ACCOUNT NUMBER

Fund-Dept-Div-SubDiv-Prog-SubProg-Future-Obj-Proj
XXXX-XXX-XXX-XXXX-XXXXXX-XXXXXX-XXXX-XX-XXXXXX-XXXX
Ex. 1000-BGT-000-00000-000000-0000000-0000-01-520011-

AMOUNT**

Whole dollars only
Ex. (\$5,000)
Ex. \$5,000

Opioid Settlement	2055-000-000-00000-000000-0000000-0000-05-410211-	\$ (39,206.00)
Salaries	2055-EMS-000-00000-ATIMAT-Strgt11-0000-02-510001-	\$ 12,211.00
FICA	2055-EMS-000-00000-ATIMAT-Strgt11-0000-02-510100-	\$ 935.00
Retirement	2055-EMS-000-00000-ATIMAT-Strgt11-0000-02-510101-	\$ 1,573.00
401K	2055-EMS-000-00000-ATIMAT-Strgt11-0000-02-510102-	\$ 611.00
Health Insurance	2055-EMS-000-00000-ATIMAT-Strgt11-0000-02-510103-	\$ 1,917.00
Dental Insurance	2055-EMS-000-00000-ATIMAT-Strgt11-0000-02-510104-	\$ 40.00
Life Insurance	2055-EMS-000-00000-ATIMAT-Strgt11-0000-02-510105-	\$ 20.00
Medication	2055-EMS-000-00000-ATIMAT-Strgt11-0000-02-520003-	\$ 4,999.00
Uniforms	2055-EMS-000-00000-ATIMAT-Strgt11-0000-02-520006-	\$ 2,000.00
Miscellaneous Supplies/Expense	2055-EMS-000-00000-ATIMAT-Strgt11-0000-02-520007-	\$ 2,900.00
Employee Training	2055-EMS-000-00000-ATIMAT-Strgt11-0000-02-520011-	\$ 1,000.00
Furn/Equip<\$5K	2055-EMS-000-00000-ATIMAT-Strgt11-0000-02-520020-	\$ 11,000.00

Check cell- Amounts must sum to \$0 \$ -

** Decreases in expenditures and increases in revenue accounts require brackets. Increases in expenditures and decreases in revenue do not require brackets. Please note that transfers between funds require inter-fund transfer accounts.

JUSTIFICATION FOR REQUEST:

This Board Action appropriates \$1,047,985 in Opioid Settlement funds for a Gaston County Jail MAT program, and setup Year 1 budget in the amount of \$39,206. Two Community Paramedics and one peer support specialist will be in the Gaston County jail and administer MAT to those who enter with a prescription as well as pregnant individuals who meet the criteria to initiate MAT. Detention officers will be responsible for movement of patients throughout the jail facility for the purposes of MAT. All program staff will also be responsible for providing education to inmates as well as jail staff. Outcomes to be measure include number of inmates receiving MAT, impact on overdose post-release, recidivism rates, and continuing participation in treatment post-release. Program Staff will report data weekly to the County Manager and the County Manager will report data monthly to the Commissioners. Gaston County jail and administer MAT to those who enter with a prescription as well as pregnant individuals who meet the criteria to initiate MAT. Detention officers will be responsible for movement of patients throughout the jail facility for the purposes of MAT. All program staff will also be responsible for providing education to inmates as well as jail staff. Outcomes to be measured include number of inmates receiving MAT, impact on overdose post-release, recidivism rates, and continuing participation in treatment post-release. Program Staff will report data weekly to the County Manager and the County Manager will report data monthly to the Commissioners.

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BUDGET CHANGE REQUEST (BCR)

TO: Dr. Kim S. Eagle, County Manager

FROM: SHF Sheriff Department
 Dept. Code Department Name

Chad Hawkins 5/28/2024
 Department Director Date

Chad Hawkins	5/28/2024
Department Director	Date

REQUEST TYPE:

<input checked="" type="checkbox"/>	Line-Item Transfer Within Department & Fund	<input type="checkbox"/>	Line-Item Transfer Between Funds*
<input type="checkbox"/>	Project Transfer Within Department & Fund	<input type="checkbox"/>	Additional Appropriation of Funds*
<input type="checkbox"/>	Line-Item Transfer Between Departments		*Requires resolution by the Board of Commissioners

[illegible]

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Dept. Code	Department Name

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