



Gaston County

Gaston County
Board of Commissioners
www.gastongov.com

Sheriff's Office

Board Action

File #: 21-011

Commissioner Worley - Sheriff's Office - To Appropriate Funding for Inmate Off-Site Medical Expenses (**\$345,000 Estimate**)

STAFF CONTACT

Alan Cloninger - Sheriff - 704-869-6860

BUDGET IMPACT

Appropriate from Fund Balance \$345,000 Estimate.

BUDGET ORDINANCE IMPACT

Appropriate from Fund Balance.

BACKGROUND

The Gaston County Jail has experienced an exponential increase with inmate off-site medical costs during fiscal year 2021. Off-site medical expenses were trending as expected (\$102,000) until November. There were two inmates that were extremely ill and required hospital stays. The stays ranged from 15-21 days and one inmate required two surgeries. The annual off-site budget is \$175,000. The two hospital stays alone totaled over \$208,000. Therefore, the off-site budget is currently over \$135,000 with seven months remaining for billing.

While there is no way to know for certain the type and quantity of injuries that will occur or illness an inmate may have, it is projected the Sheriff's Office will need approximately \$345,000 for off-site medical costs. This is an estimate to cover the current shortfall and remaining expenses through year-end.

POLICY IMPACT

N/A

ATTACHMENTS

Budget Change Request (BCR)

DO NOT TYPE BELOW THIS LINE

I, Donna S. Buff, Clerk to the County Commission, do hereby certify that the above is a true and correct copy of action taken by the Board of Commissioners as follows:

NO.	DATE	M1	M2	CBrown	AFraley	BHovis	KJohnson	TKeigher	TPhilbeck	RWorley	Vote
2021-034	01/26/2021	CB	AF	A	A	A	A	A	AB	A	U

DISTRIBUTION:

Laserfiche Users

A=AYE, N=NAY, AB=ABSENT, ABS=ABSTAIN, U=UNANIMOUS

GASTON COUNTY BUDGET CHANGE REQUEST

TO: Dr. Kim S. Eagle COUNTY MANAGER

FROM: 4315 SHERIFF'S OFFICE
Dept. # Department Name

Sheriff Alan Cloninger 1/8/21
Department Director's Name Date

TYPE OF REQUEST:

☐ Line Item Transfer Within Department & Fund

☐ Line Item Transfer Between Funds *

☐ Project Transfer Within Department & Fund

☒ Additional Appropriation of Funds *

☐ Line Item Transfer Between Departments*

* Requires resolution by the Board of Commissioners

ACCOUNT DESCRIPTION (As it appears in the budget)	ACCOUNT NUMBER	AMOUNT
	Fund - Function - Dept - Division - Object - Project	Whole Dollars Only
	xxx - xx - xxxx - xxxx - xxxxx - xxxxxx	(See Note Below)
FUND BALANCE APPROPRIATED	010-99-9900-0000-490000	{345,000}
PROFESSIONAL SERVICES	010-02-4315-4323-530010	345,000

JUSTIFICATION FOR REQUEST:

The Gaston County Jail has experienced an exponential increase with inmate off-site medical costs during fiscal year 2021. Off-site medical expenses were trending as expected (\$102,000) until November. There were two inmates that were extremely ill and required hospital stays. The stays ranged from 15-21 days and one inmate required two surgeries. The annual off-site budget is \$175,000. The two hospital stays alone totaled over \$208,000. Therefore, the off-site budget is currently over \$135,000 with seven months remaining for billing. While there is no way to know for certain the type and quantity of injuries that will occur or illness an inmate may have, it is projected the Sheriff's Office will need approximately \$345,000 for off-site medical costs. This is an estimate to cover the current shortfall and remaining expenses through year-end.

Note: Decreases in expenditures & increases in revenue accounts require brackets. Increases in expenditures & decreases in revenue do not require brackets. Please note that transfers between funds require interfund transfer accounts.