


**KENOSHA COUNTY
BOARD OF SUPERVISORS**

RESOLUTION NO. _____

Subject: Resolution to modify the Division of Aging, Disability and Behavioral Health Services 2022 Budget using American Rescue Plan Act Funds (ARPA) - Resource Center			
Original <input checked="" type="checkbox"/>	Corrected <input type="checkbox"/>	2nd Correction <input type="checkbox"/>	Resubmitted <input type="checkbox"/>
Date Submitted:		Date Resubmitted:	
Submitted By: Human Services Committee			
Fiscal Note Attached <input type="checkbox"/>		Legal Note Attached <input type="checkbox"/>	
Prepared By: Rebecca Dutter		Signature: 	

WHEREAS, Kenosha County received the Coronavirus State and Local Recovery Funds, a part of the American Rescue Plan Act (ARPA); and

WHEREAS, these APRA funds can be used for governments to provide resources for behavioral health care, such as mental health treatment, substance use treatment and other behavioral health services; and

WHEREAS, the Kenosha County Department of Human Services, Division of Aging, Disability & Behavioral Health Services, has experienced an increase in adult crisis contacts over the last several years including 10,440 crisis calls in 2021 of which a significant amount were calls for information and resource assistance/support; and

WHEREAS, the National Suicide Hotline, 988, is expected to launch in 2022 and will connect the caller to our local crisis unit; and,

WHEREAS, in 2021, crisis only received 14 calls from national suicide hotlines and it is projected that the impact of 988 to local resources is expected to increase significantly and place additional strain on the crisis system; and

WHEREAS, The Kenosha County Division of Aging, Disability & Behavioral Health Services has embarked on a marketing campaign to raise awareness and accessibility to behavioral health resources; and

WHEREAS, The Kenosha County Division of Aging, Disability & Behavioral Health will use ARPA funds, up to \$150,000 to enhance our behavioral health resource and crisis system by adding resource center workers to accept non-crisis calls, and using our marketing campaign to publish and promote the resource number;

NOW, THEREFORE, BE IT RESOLVED that the Kenosha County Department of Human Services, Division of Aging, Disability & Behavioral Health Services, be authorized to spend up to \$150,000 to enhance the behavioral health resource and crisis system and response.

HUMAN SERVICES COMMITTEE:

	<u>Aye</u>	<u>Nay</u>	<u>Abstain</u>	<u>Excused</u>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Laura Belsky, Chairman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Andy Berg, Vice Chairman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sandra Beth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Erin Decker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jerry Gulley	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kim Lewis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Terry Rose				

FINANCE/ADMINISTRATION COMMITTEE:

	<u>Aye</u>	<u>Nay</u>	<u>Abstain</u>	<u>Excused</u>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jeff Gentz, Chairman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ron Frederick, Vice Chairman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
John Franco	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ed Kubicki	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jeff Wamboldt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Monica Yuhas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vacant				

KENOSHA COUNTY EXPENSE/REVENUE BUDGET MODIFICATION FORM

DEPT/DIVISION: DADBHS DOCUMENT # _____ G/L DATE _____
 BATCH # _____ ENTRY DATE _____

PURPOSE OF BUDGET MODIFICATION (REQUIRED): For enhancement of Crisis/Mental Health Resource Center system

(1) ACCOUNT DESCRIPTION	(2)			(3)		(4) EXPENSE DECREASE (-)	(5) ADOPTED BUDGET	(6) CURRENT BUDGET	(7) ACTUAL EXPENSES	(8)		(9) EXPENSE BAL AVAIL	
	FUND	DIVISION	SUB DIVISION	MAIN ACCOUNT	EXPENSE INCREASE (+)					REVISED BUDGET	AFTER TRANSFER		
Behavioral Health	200	480	4830	571770	150,000		14,277,594	14,277,594		14,427,594		14,427,594	
EXPENSE TOTALS							150,000.00				14,427,594.00		14,427,594.00

REVENUES	(2)			(3)		(4) REVENUE INCREASE (+)	(5) ADOPTED BUDGET	(6) CURRENT BUDGET	(7) ACTUAL EXPENSES	(8)		(9) EXPENSE BAL AVAIL	
	FUND	DIVISION	SUB DIVISION	MAIN ACCOUNT	REVENUE DECREASE (+)					REVISED BUDGET	AFTER TRANSFER		
ARPA Federal Grant	100	100	1030	443293		150,000							
REVENUE TOTALS							150,000.00						150,000.00

COLUMN TOTALS (EXP TOTAL + REV TOTAL)

150,000.00	150,000.00
------------	------------

Please fill in all columns:

- (1) & (2) Account information as required
- (3) & (4) Budget change requested
- (5) Original budget as adopted by the board
- (6) Current budget (original budget w/past mods.)
- (7) Actual expenses to date
- (8) Budget after requested modifications
- (9) Balance available after transfer (col 8 - col 7).

SEE BACK OF FORM FOR REQUIRED LEVELS OF APPROVAL FOR BUDGET MODIFICATION.

PREPARED BY: Teri Peterson FINANCE DIRECTOR: _____ Date _____
 DIVISION HEAD: [Signature] (required) Date 1/28/22
 DEPARTMENT HEAD: [Signature] Date 1-28-22 COUNTY EXECUTIVE: _____ Date _____