

BOARD OF SUPERVISORS

Brown County



305 E. WALNUT STREET
P. O. BOX 23600
GREEN BAY, WISCONSIN 54305-3600
PHONE (920) 448-4015 FAX (920) 448-6221

HUMAN SERVICES COMMITTEE

Patrick Evans, Chair
Dan Robinson, Vice Chair
Erik Hoyer, Dan Haefs, Pat La Violette

SPECIAL HUMAN SERVICES COMMITTEE

Wednesday, March 16, 2016

6:45 p.m.

Room 207, City Hall

100 N. Jefferson Street, Green Bay, WI

**NOTICE IS HEREBY GIVEN THAT THE COMMITTEE MAY TAKE
ACTION ON ANY ITEM LISTED ON THE AGENDA**

- I. Call Meeting to Order.
- II. Approve/Modify Agenda.

Comments from the Public

1. Resolution to Approve Support of Family Access Solutions Program.

Other

2. Such other matters as authorized by law.
3. Adjourn.

Patrick Evans, Chair

Notice is hereby given that action by Committee may be taken on any of the items which are described or listed in this agenda. Please take notice that it is possible additional members of the Board of Supervisors may attend this meeting, resulting in a majority or quorum of the Board of Supervisors. This may constitute a meeting of the Board of Supervisors for purposes of discussion and information gathering relative to this agenda.

March 16, 2016

TO THE HONORABLE CHAIRMAN AND MEMBERS
OF THE BROWN COUNTY BOARD OF SUPERVISORS

Ladies and Gentlemen:

**RESOLUTION TO APPROVE SUPPORT OF
FAMILY ACCESS SOLUTIONS PROGRAM**

WHEREAS, Family Access Solutions (FAS) has been fulfilling an important gap in child services for Brown County Court through facilitation of court-ordered visitations since 2012; and

WHEREAS, Family Access Solutions provides services to families who are experiencing changes due to separation, divorce, custody disputes, establishing or re-establishing parent/child relationships; and

WHEREAS, Family Access Solutions serves these families by providing supervised visits, Skype visits, telephone visits, supportive visits, and monitored exchanges and offering these arrangements during challenging times for families and individuals; and

WHEREAS, for the last three years, a federal grant entitled Safe Haven has completely funded the program in Brown County; and

WHEREAS, the funding for this grant will be exhausted in fiscal year 2016 and funding for the program must be found in order for the program to continue to offer these services to the families in Brown County; and

WHEREAS, Family Access Solutions has attempted to secure funding without success and will continue efforts to secure sustainable funding during 2016; and

WHEREAS, Brown County has set aside \$1.1 million dollars for Mental Health Initiatives and there will be a projected surplus of \$100,000.

NOW, THEREFORE, BE IT RESOLVED, that the Brown County Board of Supervisors will provide Family Access Solutions \$60,000 from the Human Services' Mental Health fund for the continuation of family visitation services during 2016 offered to Brown County families after the publication date of this resolution.

Respectfully submitted,

HUMAN SERVICES COMMITTEE

Approved By:

COUNTY EXECUTIVE

Date Signed: _____

Authored by: Administration Department
Approved as to form by Corporation Counsel

Fiscal Note: This resolution does not require an appropriation from the General Fund. The \$60,000 will come from the Human Services' Mental Health fund account.

DEPARTMENT OF ADMINISTRATION

Brown County

305 E. WALNUT STREET
P.O. BOX 23600
GREEN BAY, WI 54305-3600

CHAD WEININGER

PHONE (920) 448-4037 FAX (920) 448-4036 WEB: www.co.brown.wi.us

DIRECTOR

RESOLUTION/ORDINANCE SUBMISSION TO COUNTY BOARD

DATE: March 3, 2016
REQUEST TO: County Board of Supervisors
MEETING DATE: March 16, 2016
REQUEST FROM: Chad Weininger
Department of Administration

REQUEST TYPE: New resolution Revision to resolution
 New ordinance Revision to ordinance

TITLE: Resolution to Approve Support of Family Access Solutions Program

ISSUE/BACKGROUND INFORMATION:

FAS requires additional funding to continue family visitation services to Brown County, families, and courts.

ACTION REQUESTED:

Approval of \$60,000 for 2016.

FISCAL IMPACT:

NOTE: This fiscal impact portion is initially completed by requestor, but verified by the DOA and updated if necessary.

- 1. Is there a fiscal impact? Yes No
 - a. If yes, what is the amount of the impact? \$60,000
 - b. If part of a bigger project, what is the total amount of the project? \$ _____
 - c. Is it currently budgeted? Yes No
 - 1. If yes, in which account? _____
 - 2. If no, how will the impact be funded? H.S. Detoxification Account – 201.076.180.182.700

COPY OF RESOLUTION OR ORDINANCE IS ATTACHED

