

THE BOARD OF SUPERVISORS OF THE COUNTY OF STANISLAUS
ACTION AGENDA SUMMARY

DEPT: DISTRICT ATTORNEY

BOARD AGENDA # *B-4

Urgent

Routine

AGENDA DATE May 18, 2010

CEO Concurs with Recommendation YES NO

4/5 Vote Required YES NO

(Information Attached)

SUBJECT:

Approval of Amendment #1 to the Contract for July 1, 2009 through June 30, 2011 between the Victim Compensation and Government Claims Board and the District Attorney's Office for a Paralegal to Track, Research and Report on Restitution to Victims of Violent Crimes

STAFF RECOMMENDATIONS:

1. Approve the amendment to the contract between the Victim Compensation and Government Claims Board and the District Attorney's Office.
2. Authorize the District Attorney to sign the contract and approve the grant award agreement including any extensions, or amendments.
3. Approve a formal resolution to be submitted to the Victim Compensation and Government Claims Board accepting the grant award.

FISCAL IMPACT:

The contract amendment extends the term for an additional 12 month period through June 30, 2011 and increases the total amount of the existing contract from \$61,000 to \$127,000, an increase of \$66,000. This amount is included in the 2010-2011 Proposed Budget. The grant amount is not adequate to cover the full cost of the Paralegal position that is allocated to this program due to increased salary, and benefit costs. The funded amount of \$66,000 covers 86% of the funded position, leaving a projected shortfall of \$10,510. The commitment of the District Attorney's Office in providing services to victims will continue as the shortfall will be funded from the Department's General Fund 2010-2011 Proposed Budget.

BOARD ACTION AS FOLLOWS:

No. 2010-295

On motion of Supervisor Chiesa, Seconded by Supervisor Monteith, and approved by the following vote,

Ayes: Supervisors: O'Brien, Chiesa, Monteith, DeMartini, and Chairman Grover

Noes: Supervisors: None

Excused or Absent: Supervisors: None

Abstaining: Supervisor: None


1) Approved as recommended

2) Denied

3) Approved as amended

4) Other:

MOTION:



ATTEST:

CHRISTINE FERRARO TALLMAN, Clerk

File No.

Approval of Amendment #1 to the Contract for July 1, 2009 through 2011 between the Victim Compensation and Government Claims Board and the District Attorney's Office for a Paralegal to Track, Research and Report on Restitution to Victims of Violent Crimes

DISCUSSION:

The Victim Compensation and Government Claims Board assists victims of violent crimes by providing for the payment of medical bills and other losses. The Victim Compensation and Government Claims Board receives funding through the State Restitution fund, which is collected through fines and restitution orders levied against individuals convicted of crimes. In order to continue assisting these victims, the Victim Compensation and Government Claims Board must insure that restitution fines and orders are requested by the District Attorney's offices and imposed on defendants by the courts. To accomplish this, the Victim Compensation and Government Claims Board requested that the Stanislaus County District Attorney's office enter into a contract to provide a position of paralegal to research, track and report data to the Revenue Recovery and Compliance Division of the Victim Compensation and Government Claims Board. This collaboration was initiated in Fiscal Year 1999-2000 and has been a successful program. The Victim Compensation and Government Claims Board has requested that the program be continued for 2010-2011.

Victims of violent crimes deserve to be made whole, as much as humanly possible, by the perpetrator. To do this, these cases must receive the appropriate attention at their onset in the criminal justice system. The paralegal assigned to this contract identifies and tracks offenders, determines the amount of loss the victim has incurred, notifies the Deputy District Attorney of the amount and requests that an appropriate order be requested of the court.

POLICY ISSUES:

Acceptance of this contract will help the District Attorney's office continue to meet the Board's priority of A Safe Community by providing assistance to victims of violent crimes in receiving appropriate restitution from the perpetrators.

STAFFING IMPACTS:

There are no staffing impacts at this time.

CONTACT INFORMATION:

Birgit Fladager, District Attorney (209) 525-5550

THE BOARD OF SUPERVISORS OF THE COUNTY OF STANISLAUS
STATE OF CALIFORNIA

Date: May 18, 2010

No. 2010-295

On motion of Supervisor Chiesa Seconded by Supervisor Monteith
and approved by the following vote,

Ayes: Supervisors: O'Brien, Chiesa, Monteith, DeMartini, and Chairman Grover

Noes: Supervisors: None

Excused or Absent: Supervisors: None

Abstaining: Supervisor: None

Item # *B-4

THE FOLLOWING RESOLUTION WAS ADOPTED:

WHEREAS, the Stanislaus County Board of Supervisors desires to continue a certain project designated the VICTIM RESTITUTION PROGRAM to be funded from funds made available through the VICTIM RESTITUTION PROGRAM administered by the VICTIMS COMPENSATION AND GOVERNMENT CLAIMS BOARD (hereafter referred to as VCGCB).

NOW, THEREFORE, BE IT RESOLVED that the District Attorney of Stanislaus County is hereby authorized, on its behalf to accept an agreement from VCGCB, for the period July 1, 2010 through June 30, 2011, and is authorized to sign and approve on behalf of the Stanislaus County Board of Supervisors the Grant Award Agreement including any extensions or amendments thereof.

IT IS AGREED that any liability arising out of the performance of this Grant Award Agreement, including civil court actions for damages, shall be the responsibility of the grant recipient and the authorizing agency. The State of California and VCGCB disclaim responsibility for any such liability.

BE IT FURTHER RESOLVED that grant funds received hereunder shall be used consistent with the grant award and shall not be used to supplant expenditures controlled by this body.

ATTEST: CHRISTINE FERRARO TALLMAN, Clerk
Stanislaus County Board of Supervisors,
State of California



File No.

STANDARD AGREEMENT AMENDMENT

STD. 213 A (Rev 6/03)

 CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED 4 Pages

AGREEMENT NUMBER

VCGC9082

AMENDMENT NUMBER

1

REGISTRATION NUMBER

1. This Agreement is entered into between the State Agency and Contractor named below:

STATE AGENCY'S NAME

Victim Compensation and Government Claims Board

CONTRACTOR'S NAME

COUNTY OF STANISLAUS

2. The term of this

Agreement is July 1, 2009 through June 30, 2011

3. The maximum amount of this \$127,000.00

Agreement after this amendment is: One hundred twenty seven thousand dollars and no cents.

4. The parties mutually agree to this amendment as follows. All actions noted below are by this reference made a part of the Agreement and incorporated herein:

Effective May 1, 2010, this agreement is hereby amended as follows:

The term of the agreement is extended for an additional 12 months period through June 30, 2011. The cost of the contract shall be increased by \$66,000.00 for a total not to exceed \$127,000.00.

Exhibit B.1.D:

The District Attorney's Office shall submit a final year-end closeout invoice within forty-five (45) calendar days after June 30, 2010 for fiscal year 2009/10, and within forty-five (45) days after June 30, 2011 for fiscal year 2010/2011. The final reimbursement to the District Attorney's Office shall be contingent upon the receipt and approval of the close out invoices by VCGCB.

(continued on Page 2)

IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.

CONTRACTOR

CONTRACTOR'S NAME (If other than an individual, state whether a corporation, partnership, etc.)

BY (Authorized Signature)

DATE SIGNED (Do not type)


 PRINTED NAME AND TITLE OF PERSON SIGNING

5-3-10

Birgit Fladager

ADDRESS

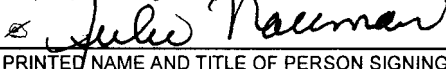
832 12th Street, Suite 300
Modesto, CA 95354**STATE OF CALIFORNIA**

AGENCY NAME

VICTIM COMPENSATION AND GOVERNMENT CLAIMS BOARD

BY (Authorized Signature)

DATE SIGNED (Do not type)


 PRINTED NAME AND TITLE OF PERSON SIGNING
 JULIE NAUMAN, EXECUTIVE DIRECTOR

6-14-10

ADDRESS

400 "R" STREET, SUITE 500, SACRAMENTO, CA 95811

CALIFORNIA
Department of General Services
Use Only

2011 OCT 28 A 10:46

BOARD OF SUPERVISORS

APPROVED

29

DEPT OF GENERAL SERVICES

 Exempt per:

Exhibit B.4:

The total amount of this agreement shall not exceed \$61,000.00 for fiscal year 2009/ 2010 and \$66,000.00 for fiscal year 2010 / 2011. Funding shall be contingent upon availability of funds and shall be at the sole discretion of the VCGCB. The funding of this contract may be changed by written amendment to the contract.

Exhibit B-1:

Exhibit B-1, Budget Page for FY 2010/2011 shall be completed and included as part of the contract (see attachment Exhibit B-1). Exhibit B-1, Budget Page for FY 2009/10 shall remain a part of the contract.

Exhibit D.7:

The period of performance for the contract will be July 1, 2009 through June 30, 2011.

Exhibit D.8

Electronic Data Processing equipment, capitalized assets and non-capitalized assets, shall remain the property of the VCGCB and shall bear identification tags supplied by the VCGCB. The District Attorney's Office shall prepare an inventory listing as of June 30th of each year for the term of this contract, in accordance with instructions provided by the VCGCB. The VCGCB County Inventory Form must be used to report all VCGCB asset inventory (Attachment VI). The completed forms shall be submitted to the Business Services Section, Victim Compensation and Government Claims Board, P. O. Box 48, Sacramento, CA 95812.

Attachment VI:

Attachment VI, VCGCB County Inventory Form, must be used to report all VCGCB asset inventory in accordance with the terms of Section D.8.

All other terms and conditions shall remain unchanged, and in full force and effect.

BUDGET WORKSHEET
 FY 2010/11
 (Standard Agreement)

Exhibit B-1
 County of
 Agreement Number VCGCXXXX

| County and Agency: XXXXX COUNTY DISTRICT ATTORNEY | | | |
|--|-------------------------|---|-----------------|
| Personnel Expenses | 2010-2011 BUDGET | Salary / Hourly Rate Range | Timebase |
| SALARIES AND WAGES | | | |
| Name: Barbara Roehrick | \$48,686.14 | 3,745.60/month | 100% |
| Name: | | (award amt covers 86% salary) | |
| Name: | | | |
| Name: | | | |
| Name: | | | |
| FRINGE BENEFITS | | | |
| | | PERCENTAGE OF SALARY / DESCRIPTION | |
| Name: Barbara Roehrick | \$17,313.86 | 86%/Paralegal | |
| Name: | | | |
| Name: | | | |
| Name: | | | |
| Name: | | | |
| TOTAL PERSONNEL EXPENSES | | \$66,000.00 | |
| Operating and Overhead Expenses | | | |
| | | DESCRIPTION OF EXPENSES | |
| Rent | | | |
| Utilities | | | |
| Postage | | | |
| Data Processing (SPECIFY) | | | |
| *Office Supplies | | | |
| Telephone | | | |
| Training | | | |
| Travel (Reimbursed @ current DPA rates) | | | |
| **Equipment | | | |
| Mileage | | | |
| Indirect Costs (≤ 10% salary/fringe) | | | |
| ***Other (SPECIFY) | | | |
| TOTAL OPERATING EXPENSES | | | |
| TOTAL BUDGET | | \$66,000.00 | |

* A request for Office Supplies in excess of \$500 per PY requires a justification for the entire amount of expenditures.

**Although equipment is included in the budget, ALL equipment for which the county requests reimbursement from the Board must be requested in writing by the county and approved in writing by the Board prior to purchase. All requests must be submitted on the *Equipment Authorization/Justification* form. Note: The Board reserves the option of not reimbursing for equipment that is not requested and approved in writing prior to purchase.

*, **, and *** In detail, please specify what expenses are included for each of these line items.

VCGCB County Inventory Form

In accordance with Exhibit D of the Victim Compensation and Government Claims Board (VCGCB) contract with the County, the VCGCB Inventory Form must be completed and returned to the VCGCB no later than June 30th of each year.

Please complete all requested information. The only assets to be inventoried on this form are those purchased by the VCGCB or with funds from the VCGCB. For a list of assets that must be inventoried, please see details at the bottom of this form. For any questions on this form, please contact your VCGCB County Analyst.

Return the completed form to VCGCB at: BSSSupport@vcgcb.ca.gov.

| County Name | VCGCB Contract Number | Date | Address | Contact Information |
|-------------|-----------------------|------|---------|---------------------|
| | | | | Name: |
| | | | | Phone Number: |
| | | | | Email Address: |

Asset Inventory

| *Asset Type | Location | Serial / Model Number | Manufacturer | Asset Tag # | Comments |
|-------------|----------|-----------------------|--------------|-------------|----------|
| | | | | | |
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| | | | | | |
| | | | | | |

*The following assets must be inventoried: IT Assets (computer, monitor, fax machine, desktop or network printer, scanner, laptop) Non-IT Assets (copier, shredder, recorder, TV, any type of furniture – chair, bookcase, cart, credenza, file cabinet, hutch, etc.)

For additional assets, please include on a separate document using the same format as this form.