

SANTA BARBARA COUNTY BOARD AGENDA LETTER



Clerk of the Board of Supervisors
105 E. Anapamu Street, Suite 407
Santa Barbara, CA 93101
(805) 568-2240

Agenda Number:

Prepared on: 07/31/2006
Department Name: District Attorney
Department No.: 021
Agenda Date: 08/15/2006
Placement: Administrative
Estimate Time:
Continued Item: NO
If Yes, date from:

TO: Board of Supervisors

FROM: Thomas W. Sneddon, Jr.
District Attorney

STAFF CONTACT: Marnie B. Pinsker
DA Assistant Director

SUBJECT: Execution of Agreement with American Corrective Counseling Services, Inc.,
to Provide a Non-Sufficient Fund Bad Check Diversion Program

Recommendation(s):

That the Board of Supervisors:

a) Execute a three year agreement with American Corrective Counseling Services, Inc. to provide a Non-Sufficient Fund (NSF) Bad Check Diversion Program on behalf of the District Attorney, effective August 15, 2006 through August 31, 2009.

Alignment with Board Strategic Plan:

The recommendation(s) are primarily aligned with our organizational values regarding economy in government.

Executive Summary and Discussion:

The Santa Barbara District Attorney's Check Restitution / Recovery Program was initiated in the mid-80s to address merchant losses due to NSF bad checks, while promoting public and community awareness of this problem. The program was designed to accept NSF bad checks directly from merchants and obtain recovery of their losses at no cost to the merchants, while diverting offenders from prosecution through alternative measures for recovering funds. Case referrals for prosecution were limited to offenders who violated the provisions of Penal Code 476a and did not respond to other collection efforts.

The District Attorney's Bad Check Restitution / Prosecution Units was established in-house, and utilized a case management system developed by Computer Support Services, Inc. (CSSI). In 1995 the District Attorney's Office began exploring the option of privatizing the enterprise. Based on the cost-effectiveness of

their services, the Board of Supervisors authorized the District Attorney to contract with CSSI for full services. Under the contract, CSSI assumed responsibility for the actual processing, handling and investigation of the bad check referrals to the office, as well as offender diversion classes. For the last eleven years they provided effective delivery of service to the merchants of Santa Barbara County, returning over \$2 million to merchants and roughly \$60,000 to the DA annually. This has financed the cost to coordinate the NSF Check Program and to file 75% of the 150 cases returned yearly for criminal prosecution

Unfortunately, CSSI has informed us that they are no longer able to sustain their operations and terminated their contract effective July 31, 2006. The District Attorney has notified merchants of this change and implemented procedures to manage this program on an interim basis. American Corrective Counseling Services, Inc. (ACCS), with principal offices in San Clemente, has proposed to contract with the District Attorney for a check diversion program. They provide educational seminars, consulting and administrative support services for the District Attorney's pre-trial bad check diversion program. It allows offenders to avoid the prospect of criminal prosecution through attendance at a mandatory educational seminar the addresses the causes and the prevention of bad check writing, along with payment of fees and restitution.

A growing number of California District Attorney Offices contract with ACCS and have found the company to be responsive, tailoring services to each county based on local merchant needs. An agreement has been negotiated that satisfies our service expectations, while continuing to provide a steady revenue stream .

Mandates and Service Levels:

Execution of this agreement will sustain the service level that both the business community and local law enforcement agencies have relied on for over twenty years.

Fiscal and Facilities Impacts:

Execution of this service agreement has a positive fiscal impact by providing the District Attorney's Office with an estimated \$60,000 in annual revenue included in the District Attorney's budget account 5739, while continuing to provide merchants with recovery of losses experienced due to bad checks. This also relieves local law enforcement agencies of the burden to accept bad checks for investigation unless they exceed \$2,000.00.

Special Instructions: Please return an executed copy of agreement to District Attorney, ATT: Marnie Pinsker

[Concurrences:](#)
[Auditor Controller](#)
[County Counsel](#)

Contract Summary Form: Contract Number : _____ - _____ - _____ - _____

Complete data below, print, obtain signature of authorized departmental representative, and submit this form (and attachments) to the Clerk of the Board (>\$25,000) or Purchasing (≤\$25,000). See also "Contracts for Services" policy. Form not applicable to revenue contracts.

D1. Fiscal Year: FY 2006-2009
 D2. Budget Unit Number (plus -Ship/-Bill codes in paren's) : 021
 D3. Requisition Number:
 D4. Department Name.....: District Attorney
 D5. Contact Person: Marnie Pinsker
 D6. Phone: 568-2304

K1. Contract Type (check one): Personal Service Capital Project/Construction
 K2. Brief Summary of Contract Description/Purpose : NSF Check Diversion & Restitution Service
 K3. Original Contract Amount: n/a
 K4. Contract Begin Date.....: August 15, 2006
 K5. Original Contract End Date.....: August 31, 2009
 K6. Amendment History (leave blank if no prior amendments):

Seq#	EffectiveDate	ThisAmndtAmt	CumAmndtToDate	NewTotalAmt	NewEndDate	Purpose (2-4 words)
		\$	\$	\$		

K7. Department Project Number:

B1. Is this a Board Contract? (Yes/No).....: yes
 B2. Number of Workers Displaced (if any).....: n/a
 B3. Number of Competitive Bids (if any).....: n/a
 B4. Lowest Bid Amount (if bid): \$
 B5. If Board waived bids, show Agenda Date.....:
 B6. ... and Agenda Item Number.....: #
 B7. Boilerplate Contract Text Unaffected? (Yes / or cite ¶¶) :

F1. Encumbrance Transaction Code:
 F2. Current Year Encumbrance Amount: n/a
 F3. Fund Number.....: 0001
 F4. Department Number.....: 021
 F5. Program Number (if applicable).....:
 F6. Account Number.....:
 F7. Cost Center number (if applicable).....:
 F8. Payment Terms: n/a. Contractor provides % of restitution fees to County.

V1. Vendor Numbers (A=uditor; P=urchasing):
 V2. Payee/Contractor Name.....: American Corrective Counseling Services, Inc.
 V3. Mailing Address.....: 180 Avenida LaPata, Suite 200
 V4. City State (two-letter) Zip (include +4 if known): San Clemente, CA 92673
 V5. Telephone Number.....:
 V6. Contractor's Federal Tax ID Number (EIN or SSN) : (on file)
 V7. Contact Person.....:
 V8. Workers Comp Insurance Expiration Date: n/a
 V9. Liability Insurance Expiration Date[s] (G=enl; P=rofl): n/a
 V10. Professional License Number: #
 V11. Verified by (name of County staff):
 V12. Company Type (Check one): Individual Sole Proprietorship Partnership Corporation

I certify: information complete and accurate; designated funds available; required concurrences evidenced on signature page.
 Date : _____ Authorized Signature _____ :