



CDSS

WILL LIGHTBOURNE
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF SOCIAL SERVICES

744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



EDMUND G. BROWN JR.
GOVERNOR

May 1, 2012

Charlene Reid, Director
Tehama County Department of Social Services
310 S. Main Street
P.O. Box 1515
Red Bluff, CA 96080

Dear Ms. Reid:

This revised letter is to inform you that the Corrective Action Plan you submitted on September 7, 2011 in response to the results of our December 8-10, 2010 Civil Rights Compliance Review is approved.

We will be monitoring the implementation of your corrective action items through your Civil Rights Coordinator.

If you have any questions, please contact Analyst at (916) 654-2107. You may also contact us by e-mail at crb@dss.ca.gov.

Sincerely,

JIM TASHIMA, Chief
Civil Rights Bureau
Human Rights and Community Services Division

c: Sue Schild, Civil Rights Coordinator

Linda Patterson, Branch Chief
CDSS CalFresh Program M.S. 8-9-32

Mike Papin, Chief
CalFresh Policy Bureau M.S. 8-9-32

Marlene Fleming, Chief
Field Operations Bureau M.S. 8-9-32

Brian Tam, Chief
CalFresh Management Operations Section M.S. 8-9-32

Paul Gardes
CalFresh Policy Bureau M.S. 8-9-32

Thuan Nguyen
Refugee Programs Bureau, M.S. 8-8-46

Joe Torres, Office of Civil Rights
USDA Food and Nutrition Services
Supplemental Nutrition Assistance Program (SNAP)
Western Region

Hope Rios,
USDA Food and Nutrition Services
Supplemental Nutrition Assistance Program (SNAP)
Western Region

Jodie Berger, Regional Counsel
Legal Services of Northern California

SEP 09 2011



Charlene Reid, Director

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Social Services

www.tcdss.org

September 7, 2011

Mr. Jim Tashima, Chief
Civil Rights Bureau
Human Rights and Community Services Division
CDSS
744 P. Street, M.S. 8-16-70
Sacramento, CA 95814

Dear Mr. Tashima,

First, please allow me to congratulate you on your recent promotion to Chief. You have always been knowledgeable and helpful when I called upon you as my contact, so I know you will do a wonderful job for the Civil Rights Bureau.

Secondly, enclosed, please find our Corrective Action Plan (CAP) for the Civil Rights Compliance Review of December 8 – 10, 2010. As you indicated in your letter, dated July 10, 2011, to my Director, Charlene Reid, we are submitting the CAP within 60 days. As you will see in our CAP, we have addressed all issues, and have corrections in place.

Thank you for your help and guidance over the last couple years. If you have any questions, please do not hesitate to contact me at 530-528-4060. You may also contact me by e-mail at sschild@tcdss.org.

Kind Regards,

Sue Schild
Staff Services Analyst II
Tehama County Dept. of Social Services
310 S. Main St. * P. O. Box 1515
Red Bluff, CA 96080
Phone 530-528-4060
Fax 530-527-2982



TEHAMA COUNTY

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Social Services

Charlene Reid, Director

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CIVIL RIGHTS COMPLIANCE REVIEW - CORRECTIVE ACTION PLAN

Prepared by Sue Schild, Civil Rights Coordinator, Staff Services Analyst

August 26, 2011

<p>A: Findings Section IV. Facility Accessibility For Individuals With Disabilities:</p>	<p>Corrective Actions</p>
<p>Parking: (page 7 of compliance review) For both posted and wall mounted signage, additional language on symbol sign and an additional sign below the symbol sign shall state "Minimum Fine \$250.00"</p>	<p>New signs, with the required language were ordered and installed. See photos 1 and 2 below</p>
<p>Men's Restroom: (page 7 of compliance review) Door pressure too high at 16 lbs.</p>	<p>Interior Doors were lowered to no more than 5 lbs of pressure by our maintenance worker</p>
<p>B: Findings Section V. Program Manager Surveys, Staff Interviews and Case File Reviews:</p>	<p>Corrective Actions</p>
<p>Tehama County must ensure that bilingual/interpretive services are prompt and without undue delay. (page 11 of compliance review)</p>	<p>Between AT&T Language line and our Bilingual workers, we have been able to provide prompt services without undue delay, and will continue to do so. Bilingual workers are available in each division, and can provide coverage to other divisions, should there be a need.</p>

B: Findings

Section VI. Documentation of applicant/recipient case records

Corrective Actions

Documentation if client provided own interpreter. (page 13 of compliance review)

We developed a new form, see attached, Attachment A, for use whenever there is anyone who is not an employee of TCDSS or California Relay Services (per your office) used as Interpreter, and employees were given trainings on it in their unit meetings.

Photo 1



Photo 2



Attachment A
RELEASE AND EXCHANGE OF CONFIDENTIAL INFORMATION- INTERPRETER

Name _____

Date of Birth _____

I, _____ authorize the Tehama County Department of Social Services to release and/or exchange information regarding myself and my family to the persons and/or agencies listed below:

For the purpose of:

_____ Interpretation

This form was completed and read by me (or read to me) prior to signing. This consent is valid for today only.

Signature _____ Date _____

Name (printed) _____

(A photocopy of this document is as valid as the original)

COUNTY USE ONLY

In ALL non-English speaking cases, the agency shall:

- Consent for the release of information shall be obtained from applicants/recipients when individuals **other than TCDSS** employees are used as interpreters and the case record shall be so documented. This is needed EVERY contact, if by other than TCDSS employee.
- Document the method used to provide bilingual services, *e.g., bilingual TCDSS staff, client provided interpreter, AT&T Language Line, Sign Language interpreter.* When a minor (under 18 years of age) is used as an interpreter, document the circumstances requiring temporary use of minors in the case record.
- When applicants/recipients provide their own interpreter, ensure that the applicants/recipients are informed of the potential problems for ineffective communication. Document in the case record that the applicants/recipients were so informed.
- Document the individual's acceptance or refusal of forms or other written material offered in the individual's primary language.