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GAVIN NEWSOM
GOVERNOR

January 29, 2025

Via Email only: trent.rhorer@sfgov.org

Trent Rhorer
Executive Director
San Francisco County Human Services Agency
P.O. Box 7988
San Francisco, CA 94120-7988

SUBJECT: CORRECTIVE ACTION PLAN APPROVED

Dear Director Trent Rhorer:

This letter is to advise you that the Corrective Action Plan (CAP) submitted by your office on 09/24/2024, in response to the results of our August/2021 Civil Rights Compliance Review is approved. We note the original date of the CAP submission as 11/10/2022, since which time some components of the CAP have been reported as implemented. The approved CAP will be posted on CDSS' website.

We continue to monitor full implementation of the final remaining CAP items through your Civil Rights Coordinator. We have been working with M'kia McCright, Civil Rights Coordinator, regarding progress and updates on corrective actions. We appreciate M'kia's consistent responsiveness, timely and clear communication, and commitment to this work.

As a reminder, many civil rights obligations are ongoing and dynamic in nature, such as requirements to maintain bilingual staffing levels. If you have any questions, please contact Ajmal Ahrar at (916) 225-7041 or Ajmal.Ahrar@dss.ca.gov. You may also contact our office at crb@dss.ca.gov.

Sincerely,

Anne Marx

Anne Marx, Manager
Civil Rights Compliance Unit
Civil Rights Section
Office of Equity

c: M'kia McCright, Civil Rights Coordinator

Andrea Brayboy, Chief
CalFresh and Nutrition Branch

Tami Gutierrez, Chief
CalFresh Operations Bureau

Francisco Verduzco, Chief
CalFresh Management Evaluation Section

Abdi Abdillahi, Chief
Refugee Programs Bureau

Veronica Perez, Manager
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Refugee Programs Bureau

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CORRECTIVE ACTION PLAN

III. DISSEMINATION OF INFORMATION

Threshold Languages

Corrective Action: “Counties must ensure that effective bilingual/interpretive services are provided to serve the needs of the non-English speaking persons. Div. 21- 115. As part of the CAP, the County shall complete the Corrective Action in Section XI (“Civil Rights Compliance Plan Review and Approval”) regarding the use of Filipino and Tagalog in County-generated materials.”

Response: Corrective actions for this section are addressed in Section XI.

Dissemination of Information

Corrective Action: “The County shall keep civil rights information posted on the County webpage up to date. Div. 21-107.1.”

Response: In response to the CDSS’s compliance report regarding the accessibility of civil rights information on the SF SFHSA’s website, SF SFHSA has created a dedicated “Civil Rights, Appeals, Hearings” webpage. This page can be found directly from the drop down menu section titled, “About”; therefore, it is in a location where applicants/recipients are more likely to look for public complaint information. This webpage includes a link to the new “Complaint of Discriminatory Treatment” form (Form 8019), which was updated to include a complete list of protected bases, as well as required verbiage regarding consent for release of information. The form is available in English, Spanish, Russian, Chinese, Filipino, and Vietnamese. The webpage also includes the telephone numbers for SF SFHSA’s Multilingual Complaint Line in Spanish, Vietnamese, Russian, Filipino, Cantonese and Mandarin.

Directional and Instructional Signage

Corrective Action: “The County shall ensure that instructional and directional signs are posted in waiting areas and other places that are frequented by applicants/recipients and that where such areas are frequented by a substantial number of non-English-speaking applicants/recipients, such signage shall be translated into appropriate languages. Div. 21-107.212. A substantial number of non-English-speaking clients encompasses languages spoken by 5 percent or more of persons visiting each location. It also encompasses languages spoken by 5 percent or more of persons in a program that is administered at each location. Div. 21-104(s)(2).”

“As part of the CAP, the County shall confirm that missing translated signage has been posted at 170 Otis Street and clarify the language(s) of the translation.”

Response: SFHSA has ensured that instructional and directional signs are posted in all waiting areas and other places that are frequented by applicants/recipients as required by Div. 21-107.212. All instructional and directional signs are posted in threshold languages at facility entrances and in reception areas used by applicants/recipients. The missing Tagalog signage at 170 Otis Street has been posted.

Translated PUB 13

Corrective Action: “As part of the CAP, the County shall ensure that the PUB 13 is available in all lobbies in all languages translated by CDSS. Div. 21-115.2, 21-107.22. The County shall also revise Section 6 of the Civil Rights Handbook to update the PUB 13 languages listed. The PUB 13 must be available in the most recent revision. The County may access the most recent translated versions of the PUB 13 on the CDSS website. Please note that revisions to the PUB 13 were made in 2021. Civil Rights Coordinators will be made aware when revised versions are available.”

Response: SFHSA has ensured that waiting rooms and reception areas at 170 Otis Street and 1235 Mission Street are making the current PUB 13 available in CDSS translated languages, including Hindi and Thai. Additionally, Section 6 of the Civil Rights Handbook has been updated to reflect the 17 languages that the PUB 13 is translated into.

PUB 13 in Alternate Formats

Corrective Action: “The County shall ensure the availability of large print, braille, and audio formats for participants in all programs for which CDSS has oversight responsibility. Div. 21-115.4. The County shall furnish all offices with braille, large print, and audio recordings of the PUB 13 based on the most recent revision of the PUB 13.”

Response: SFHSA has ordered current version of the PUB 13 in braille and large print (English) for 170 Otis as well as 1235 Mission. SFSFHSA was also provided an audio version of the most current PUB 13 by CDSS in English. This file has been posted in the Agency’s Intranet and is easily accessible by staff to provide to clients. SFHSA has ordered the interpretation of the audio format in the threshold languages (Spanish, Cantonese, Mandarin, Vietnamese, Russian, and Tagalog).

Distribution of PUB 13

Corrective Action: “The County shall ensure the PUB 13 is both given and explained to program applicants/recipients in all programs for which CDSS has oversight responsibility. Div. 21-107.221. The PUB 13 must be distributed at intake and renewal/recertification because these bear on eligibility. The County shall ensure that the available translated versions are given to applicants/recipients in their primary language and shall document when the PUB 13 is distributed and explained to applicants/recipients and in what language. As part of the CAP, the County shall revise Section 6 of the Civil Rights Handbook to reflect these requirements and include operational detail to support their implementation.”

Response: SFHSA has communicated with program management to take necessary steps to ensure the proper distribution, explanation, and documentation of the PUB 13 to applicants/recipients, particularly at intake and renewal/recertification. Specific instructions have been updated in the Civil Rights Handbook.

IV. FACILITY ACCESSIBILITY FOR INDIVIDUALS WITH DISABILITIES

Facility Location: 77 Otis Street

Building Entrance

The height of the outside edge of the International Symbol of Accessibility (ISA) sign is 6 inches. See attached floorplans of 77 Otis St (Attachment A).

Lobby

77 Otis Street is an office where IHSS applicants/recipients can drop off/pick up necessary forms. This office is a single room with some space dividers. There is no public lobby other than a front desk where an SFHSA staff member assists applicants/recipients. No interviews are conducted at this facility.

Restrooms

As previously stated, 77 Otis Street is a single large room. It is not equipped with restrooms; however, 77 Otis is directly connected to 1640 Mission Street building which is where employees or applicants/recipients would use restroom if needed. The restrooms are directly behind the 77 Otis Street office, in a corridor that connects to 1640 Mission Street.

Each sign on the restroom doors meets applicable requirements. Men's restroom sign is an equilateral triangle symbol that is ¼ inch thick with edges 12 inches long and a vertex pointing upward. The color of the triangle symbol (dark) contrasts with the color of the door (light). Women's restroom sign has a circle symbol that is ¼ inch thick and 12 inches in diameter. The color of the circle symbol (dark) contrasts with the color of the door (light). The height of the signs mounted on the door of both the women's and the men's restrooms is 59 inches from ground to centerline of the symbols, which meets applicable requirements.

Both men's and women's restrooms are equipped with ADA automatic door openers for handicap accessibility.

FORCE REQUIRED TO OPEN FAUCET

The sink faucets in both the men's restrooms and women's restrooms are single handle Delta faucets. The faucets are ADA compliant, require 2.8 pounds to activate, and can easily be operated with one hand.

The distance of the toilet to the sidewall measured from centerline of toilet to sidewall in both men's and women's restrooms is 17.5 inches, which meets applicable requirements. The 42 and 43-inch measurement previously provided was erroneous.

The distance from the front edge of the toilet to the toilet paper dispenser measured from centerline of toilet paper dispenser is 7 inches in both the men's and women's restrooms.

The men's restroom has an accessible urinal, which is a wall-hung type and measures 17 inches from the finish floor to the rim.

Flush controls in both the men's and women's restrooms have automatic flushing systems. The hand-operated controls addressed in the Compliance Review Report are not applicable.

The width of the doorway to the women's restroom is 33 inches, which meets applicable requirements. There are two towel/sanitary napkin dispensers in the women's restroom. One of them is placed next to

the sink at a height of 40 inches above the finish floor.

Facility Location: 170 Otis Street

Building Entrance

The doorway threshold measurement was marked as inapplicable because the doorway has a ramp and meets applicable requirements.

The height of the outside edge of the International Symbol of Accessibility (ISA) sign is 6 inches.

Lobby

Knee clearance in the accessible counter is 21 inches deep from the finish floor to 28 inches above the finish floor.

Current versions of PUB 13 can be found in the lobby, including Thai and Hindi. SFHSA has connected with CDSS to obtain current versions of alternate formats (e.g., cassette tapes, large print, etc.).

Tagalog informational signage has been ordered. It will be mounted in the 170 Otis Street building lobby upon arrival.

Interview Rooms

The height of the counter in both interview rooms ranges since they are equipped with a sit/stand desk. The height of the counter meets applicable regulations. The knee clearance is at 9 inches is indefinite as there is no obstruction at that height. At 27 inches of height, the knee clearance is 8 inches deep, which meets applicable requirements.

See attached pictures of both interview rooms at 170 Otis St (Attachment B, C).

Restrooms

The height of the signs mounted on the door of both the women's and the men's restrooms is 59 inches from ground to centerline of the symbols, which meets applicable requirements.

The width of the door opening to both the women's and men's restroom is 35 inches, which meets applicable requirements.

Knee clearance in both the women's and men's restrooms have depth of 18 inches at 9 inches of height from the floor finish and 9 inches of depth at 27 inches of height from the floor finish, which meets applicable requirements.

The width of the knee clearance was previously incorrectly reported at 18 inches. The width of knee clearance is 31 inches in both women's and men's restrooms.

The sink faucets in both the men's restrooms and women's restrooms are single handle Delta faucets. The faucets are ADA compliant, require less than 5 pounds to activate, and can easily be operated with one hand.

The distance from the front edge of the toilet to the toilet paper dispenser measured from centerline of toilet paper dispenser, in both women's and men's restrooms, has been adjusted to 8 inches.

Facility Location: 1235 Mission Street

Building Entrance

The height of the outside edge of the International Symbol of Accessibility (ISA) sign is 6 inches.

Signs at Main Entrance 1 have been moved to be at a minimum of 40 inches above the finish floor.

Lobby

Designated ADA service desks are equipped with sit/stand desks and can easily be adjusted in height. At 9 inches in height, they have an indefinite depth, as they are unobstructed. At 27 inches in height, they are 8 inches in depth.

Program materials required for the provision of aid or services are available and offered in all the CDSS-translated languages to the applicant/recipient in the individual's primary language.

In Lobbies 1 and 2, the County makes the current version of the PUB 13 pamphlet available in all CDSS-translated languages including Hindi and Thai. SFHSA has connected with CDSS to obtain current versions of alternate formats (e.g., cassette tapes, large print, etc.).

The PUB 86 "Everyone is Different, but Equal under the Law" poster is on display in both lobbies with the updated Civil Rights Coordinator contact information.

In Lobby 2, knee clearance beneath the counter at 9 inches high off the finish floor is insufficient at 9 inches. Per CA T24 11B-306.3.3; ADAS 306.3.3, where knee clearance is required under an element as part of a clear floor space, the knee clearance shall be 11 inches deep minimum at 9 inches above the finish floor or ground, and 8 inches deep minimum at 27 inches above the finish floor or ground. While the required depth is met at 27 inches above the finish, at 9 inches off the floor the knee clearance should be at least 2 inches deeper. SFHSA OCR has notified the Senior Stationary Engineer at the 1235 Mission Street building about the need to modify this counter to meet applicable regulations. OCR is currently in waiting to hear back from the Senior Stationary Engineer regarding estimated time of completion.

Interview Rooms

Designated ADA interview rooms are equipped with sit/stand desks and can easily be adjusted in height. At 9 inches in height, they have an indefinite depth, as they are unobstructed. At 27 inches in height, they are 8 inches in depth.

Restrooms

The men's restroom is equipped with an accessible urinal, which is a wall-hung type and measures 16 inches from the finish floor to the rim.

Both men's and women's restrooms are not equipped with doors but do have the required signage next to the entryway, and each sign meets applicable requirements. The men's restroom sign is an equilateral triangle symbol that is ¼ inch thick with edges 12 inches long and a vertex pointing upward. The color of the triangle symbol (dark) contrasts with the color of the wall (light). The women's restroom sign has a circle symbol that is ¼ inch thick and 12 inches in diameter. The color of the circle symbol (dark) contrasts with the color of the wall (light). The height of the signs mounted on the door of both the women's and the men's restrooms is 59 inches from ground to centerline of the symbols, which meets applicable requirements.

SFHSA did not provide an exact measurement regarding the force required to open the men's or women's restroom doors because the restrooms do not have doors.

The sink faucets in both the men's restrooms and women's restrooms are low arc, push Chicago faucets. The faucets are ADA compliant, require 4.6 pounds to activate, and can easily be operated with one hand.

The width of the entryway to both the men's and women's restrooms is 39 ¼ inches.

The distance of the toilet to sidewall measured from centerline of toilet to sidewall 17.5 inches in both the men's and women's restrooms. The 45-inch measurement was erroneous.

The distance from the front edge of the toilet to the toilet paper dispenser measured from centerline of toilet paper dispenser is 7 inches. The 22-inch measurement previously provided was erroneous.

The measurement of the height of the men's and women's restroom hand dryers is 39 ½ inches from the finish floor to the dryer's operable parts.

Stairs and Elevators

The accessible elevator buttons have square shoulders and are raised 3/8 inch. They measure 3.5 inches across and 1 ¾ in height.

See attached pictures of accessible elevator at 1235 Mission St (Attachment D).

V. PROVISION FOR SERVICES TO APPLICANTS AND RECIPIENTS WHO ARE NON-ENGLISH-SPEAKING

Timely Services

Corrective Action: "The County must ensure that bilingual/interpretive services are prompt and provided without undue delays. Div. 21-115. Given the relatively lengthy wait times for telephone interpreters reported by surveyed staff across programs, the County shall take steps to identify the source(s) of these delays; update its protocol for the use of vendor-provided telephone interpreter services to eliminate or reduce wait times as much as possible; and inform staff of any relevant changes."

Response: Upon review of the data showing wait times for telephone interpreters, SFHSA found that among the threshold languages, average wait times to connect to an interpreter is less than 30 seconds. The language that requires the longest wait is Oromo at 3 minutes and 50 seconds on average. Based on the data, bilingual/interpretive services are being provided in a prompt manner and without undue delays.

Bilingual Staff

Corrective Action: "The County shall ensure that a sufficient number of qualified bilingual employees are assigned to positions and locations serving a substantial number of non-English-speaking persons. Div. 21-115.1. A "qualified bilingual employee" is defined as an employee who, in addition to possessing the necessary qualifications for the particular classification, is certified through a process approved or administered by CDSS to be proficient in oral and/or written communication in the non-English language of the persons to be served. Div. 21-104(q)(1). The County shall, as part of the CAP, complete the Corrective Action under Section XI ("Civil Rights Compliance Plan Review and Approval"), below, regarding "Section 8 Primary Language Data Statistics, Staffing, and Hiring Goals."

Response: Corrective actions for this section are addressed in Section XI.

Documentation that Bilingual Services were Provided

Corrective Action: "The County shall document the method used to provide bilingual services (i.e. assigned worker is certified bilingual, other certified bilingual employee acted as interpreter, volunteer certified interpreter was used, or recipient-provided interpreter). Div. 21-116.22. Applicants/recipients

must be informed of the potential problems for ineffective communication when providing their own interpreters. The County shall document that the applicants/recipients were so informed in the case record. Div. 21-116.23. The County shall, as part of the CAP, submit a plan and timeline (or summary of steps taken) to revise the Civil Rights Handbook, language services forms, and any other relevant materials to reflect the requirements of ACL 21-128. The plan (or summary) shall include a description of specific instructions, standardized language or other templates to support staff in all CDSS-covered programs in implementing consistent, legally compliant documentation for language services. See explanation of documentation requirements summarized in ACL 08-65 and ACL 21-128.”

Response: Upon review of ACL 21-128, SFHSA has updated its Civil Rights Handbook to reflect the use of Form 6181 instead of the OCR 3 when applicants/recipients wish to use a self-provided interpreter. The Civil Rights Handbook provides specific instructions and standardized language for implementing consistent, legally compliant documentation of language services.

Written Materials

Corrective Action: “The County must use and provide translated forms in an applicant/recipient’s primary language when translated by CDSS. Div. 21-115.2. When the County uses translated forms and materials, such as NOAs containing space in which the County must insert information for the applicant/recipient, such information must be in the primary language of the applicant/recipient. Div. 21-115.2. As part of the CAP, the County shall revise the Civil Rights Handbook, “Section 8: Providing Services to non- or Limited-English Speaking Persons (LEPs)” to clarify the distinction between circumstances under which translations must be provided and those under which provision of the GEN 1365 is an acceptable alternative method of communication.”

Response: The Civil Rights Handbook, Section 8 was revised to provide clear instruction regarding circumstances under which translations must be provided in written materials (such as in NOAs, where SFHSA needs to insert information in the applicant’s/recipient’s primary language) and those under which provision of the GEN 1365 is an acceptable alternative method of communication. The Civil Rights Handbook explains that SFHSA is required to translate vital documents, forms and notices into SFHSA’s threshold languages. When SFHSA uses a form, notice or other written material required by CDSS in the county’s delivery of services, benefits and programs, and that translated form, notice or other written material has been provided by CDSS, SFHSA must use the translated form, notice or material when serving non- or Limited-English speaking clients. The rule applies regardless of the number of non- or Limited-English-speaking clients who are served by SFHSA.

In addition, if using a translated Notice of Action, any added information that is unique to the client or any explanation of the action that is not printed on the notice must be written on the notice by SFHSA staff in the language of the client either with the use of certified bilingual staff that are able to translate the material or by reaching out to OCR for a translation request. SFHSA staff may also use interpretive services to explain information verbally to an applicant/recipient when written translation is unavailable. OCR has also worked with programs to have the reason codes for NOAs translated into the threshold languages for insertion or attachment to forms sent to clients. If these are not available electronically, workers communicate with the client in his/her language and include notes on the form in the client’s language.

VI. PROVISION FOR SERVICES TO APPLICANTS AND RECIPIENTS WHO HAVE DISABILITIES

Reasonable Accommodation Policy

Corrective Action: “The County shall revise its Civil Rights Handbook sections regarding the provision of reasonable accommodations to reflect the requirements set forth in ACL 19-45. To the extent programs

have different practices, the policy shall contain program-specific guidance. The County is encouraged to consult the resources provided in Section VI of ACL 19-45 and may also contact CDSS for feedback and technical assistance. The County shall also inform staff of the revised policy, including via staff training (discussed in further in Section VII, below).”

Response: The Civil Rights Handbook, Section 7, “Accessibility: Providing Accessible Services to People with Disabilities (PWDs)”, was revised to include a reasonable accommodation policy in accordance with the requirements set forth in ACL 19-45. The revisions include comprehensive operational detail, key RA concepts, guidance for staff to identify and assist applicants/recipients to self-identify as having a disability, a definition of “qualified individual with a disability” and procedures for offering, receiving, documenting and responding to RA requests.

SFHSA is in the process of gathering feedback from staff regarding the revised policy, which is subject to edits, prior to final implementation. Staff will be given until November 30, 2022 to submit feedback regarding the ADA policy and any proposed revisions. The policy will be implemented shortly thereafter, with notification and training provided to staff on the new policy on or before February 1, 2023.

Identification of Disabilities

Corrective Action: “When the County has actual knowledge of an individual’s disability, or when an individual’s need for an accommodation is obvious, staff shall offer to assist the individual in self-identifying the disability and/or appropriate disability-specific accommodations. See *Duvall v. County of Kitsap*, 260 F.3d 1124, 1139 (9th Cir. 2001) cited in ACL 19-45. As part of the CAP, the County shall revise its Civil Rights Handbook sections regarding the provision of services for individuals with disabilities to include the following:

- Protocol for staff to assist an individual in self-identifying a disability and related needs when a disability is known or the need for RA is obvious. This might involve requiring staff to initiate inquiries or offer RA when certain indicators are present such as specific aid type(s) in electronic case records.
- To the extent programs have different practices and considerations related to the identification of disabilities, the policy shall contain program-specific guidance.
- Inform staff of the new policy/protocol, including via revised staff training (discussed in Section VII).

Response: The Civil Rights Handbook was revised to include protocol for staff to assist an individual in self-identifying a disability and related needs when a disability is known or the need for RA is obvious. SFHSA is in the process of gathering feedback from staff regarding the revised policy, which is subject to edits, prior to final implementation. Staff will be given until November 30, 2022 to submit feedback regarding the ADA policy and any proposed revisions. The policy will be implemented shortly thereafter, with notification and training provided to staff on the new policy on or before February 1, 2023.

Documentation of a Disability

Corrective Action: “The County shall ensure that an applicant’s/recipient’s case record identifies the applicant/recipient as disabled. Div. 21-116.3. The County shall document an applicant’s/recipient’s request for services in writing. Div. 21-116.3. The County must ensure that proper and consistent documentation identifying all the required elements to ensure compliance is present in an applicant’s/recipient’s case file. Div. 21-116. As part of the CAP, the County shall: “

- Return to case files reviewed during this Compliance Review to correct records containing errors in the documentation of disability and/or RA and address any deficiencies in the provision of needed accommodations and/or services to those applicants/recipients;
- Develop protocol for staff to document individuals' disabilities and related RA needs in electronic case management systems in a manner that is accurate, internally consistent, and easily identifiable, including reviewing case management system functionality for under-utilized tools and options, such as the accommodation indicator in CalWIN;
- To the extent programs have different considerations related to documentation of disabilities, the revisions shall contain program-specific guidance while emphasizing the need to capture information about disabilities and RAs in a systematic and readily identifiable manner so that it can travel between the various County programs in which a person may participate. This is true even for programs for which provision of individualized assistance and services to individuals with disabilities is a core function, such as IHSS.
- The protocol shall be consistent with any applicable requirements regarding documentation of Reasonable Accommodation requests. See ACL 19-45.
- The County shall inform staff of the new protocol, including via staff training (discussed in Section VII).

Response: The Civil Rights Handbook was revised to include protocol for staff regarding consistent documentation of disabilities and reasonable accommodations. SFHSA is in the process of gathering feedback from staff regarding the revised policy, which is subject to edits, prior to final implementation. Staff will be given until November 30, 2022 to submit feedback regarding the ADA policy and any proposed revisions. The policy will be implemented shortly thereafter, with notification and training provided to staff on the new policy on or before February 1, 2023.

VII. STAFF DEVELOPMENT AND TRAINING

Division 21, Civil Rights Training:

Corrective Action: "The County shall ensure that employees receive Division 21 civil rights training at the time of orientation, as well as ongoing training to ensure that public contact staff has knowledge of Division 21, including familiarization with the discrimination complaint process. Div. 21-117.1. As part of the CAP, the County shall revise its NEO Training to address deficiencies and key areas of concern noted above. Revisions shall include:

- Provide a correct and up-to-date list of protected bases (included removing "(over 40)" as a qualifier for the protected category of age (see the Age Discrimination Act of 1975, 42 U.S.C. 61.1 *et seq*); see also protected bases list on CDSS website);
- Provide California's legal definition of a "qualified individual with a disability";
- Provide information and detailed guidance on identifying individuals with disabilities and assisting applicants/recipients to self-identify disabilities (see ACL 19-45);

- Provide clear, comprehensive explanation of required procedures for offering RA and receiving, documenting, and responding to RA requests (see ACL 19-45);
- Expand information on Language Access Resources to include greater operational detail regarding options staff members have and procedures to follow to access interpretive services and written translations;
- Provide detailed information and guidance on the County's discrimination complaint policy and procedure, including training on how to receive complaints regardless of how they are submitted and how to assist applicants/recipients with filing complaints. The information and guidance should include: A revised version of the "Client Complaint Process," which as currently presented appears to require complainants to go through an early resolution process before they can file a complaint with OCR; and A revised version of the "Options for Filing Complaints" slide, which as currently written appears to limit options for filing complaints.

Alternatively, if incorporating the above revisions is not feasible in the context of the NEO given the broad scope of that overall orientation, the County shall develop separate annual Division 21 civil rights training to address those areas that are beyond the scope of the NEO, while making all identified corrections to the NEO for conformity with existing laws and regulations."

Response: The NEO Training slides/presentation has been revised and modified to reflect the corrective action items, including correct and up-to-date list of protected bases (included removing "(over 40)" as a qualifier for the protected category of age, California's legal definition of a "qualified individual with a disability, detailed guidance on identifying individuals with disabilities and assisting applicants/recipients to self-identify disabilities, expanded information on Language Access Resources to include greater operational detail regarding options staff members, detailed information and guidance on the County's discrimination complaint policy and procedure, a revised version of the "Client Complaint Process" without the requirement that complainants to go through an early resolution process before they can file a complaint with OCR, and a revised version of the "Options for Filing Complaints" slide. SFHSA is currently working to determine what the best approach would be for annual Division 21 training would be.

Cultural Awareness Training

Corrective Action: "The County shall ensure that all public contact employees receive cultural awareness training to ensure that public contact staff have an understanding of, and sensitivity to, various cultural groups including individuals with disabilities, to ensure equal delivery of services in the County's population. Div. 21-117.2. As part of the CAP, the County shall:

- Review the process by which Cultural Awareness training is provided to public contact staff across all departments and programs to identify gaps in training delivery; and
- Submit a plan to close all gaps and ensure that training is provided to all public contact staff."

Response: SFHSA currently offers a *Communicating Across Cultures* training available to employees, which provides an overview of broad concepts in cultural awareness that are applicable to clients and employees alike, in addition to multiple diversity trainings. PSWs participate in the State Core Training, which includes *Cultural Humility in Child Welfare Interviews*. All PSWs also participate in the Safety Organized Practice (SOP) series, Structured Decision Making (SDM), and Core Practice Model (CPM) Training, which all acknowledge cultural awareness and humility in working with families and children. A CPM eLearning is also available to all staff, although it's not a requirement to participate in it. All staff also participate in the five required HSA trainings. In addition, our Clerks and Technicians also just

participated in a Customer Service Training, which covered the points you mentioned below. SFHSA is working to identify any possible improvements or additions to its training requirements with respect to cultural awareness.

Additionally, SFHSA offers mandatory trainings: *Appreciating Diversity, Connecting Multi-Generations in the Workplace, LGBTQ: Promoting Respect Among HSA*. Most mandatory training courses are completed by staff within the first months of employment. In addition, there are courses such as *Communication Across Cultures* and *Emotional Intelligence* available to all staff as optional offerings. Staff must also comply with Citywide training requirements which include relevant courses such as *Equitable, Fair, and Respectful Workplace* and *Gender Inclusion Training*.

SFHSA have taken it a step further and have established an annual mandatory racial equity training requirement through the Agency's Racial Equity Action Plan. The DEIB and L&OD teams work to provide and host racial equity trainings year-round. These trainings and resources support and empower the extended learning of our staff and improve the ways in which we support clients in our communities. Currently, there are mini training series available on this topic and self-paced eLearning modules will be available to all staff beginning May 1, 2024.

MEPA Training

Corrective Action: "The County shall ensure that CSWs receive MEPA training to ensure that public contact staff have knowledge of, and properly apply, placement prohibitions contained in MEPA. 42 U.S.C. 672, 674, and 1996(b). As part of the CAP, the County shall:

- Review the process by which MEPA training is provided to CSWs to identify gaps in training delivery; and
- Submit a plan to close all gaps to ensure that training is provided to all CSWs."

Response: All 2940 FCS staff complete common core training in their first three months of employment. This includes a self-paced eLearning course called Federal and State Laws that provides an overview of laws and regulations specific to children and youth and explores the primary goals of child welfare practice in California. Content includes: legal definitions of maltreatment, reporting laws, and laws regulating children and youth placed in out of home care. MEPA is included. Furthermore, the County includes MEPA in its internal Child Welfare 101 class that is delivered to all new child welfare workers.

VIII. DISCRIMINATION COMPLAINT PROCEDURES

Employee Awareness of Complaint Process

Corrective Action: "The County shall ensure staff can identify a discrimination complaint. The County shall ensure staff have knowledge of the discrimination complaint process and their role in assisting applicants/participants to file civil rights complaints. Div. 21-117 and Div. 21-203. As part of the CAP, the County shall send a written reminder to all staff of their complaint handling responsibilities and to notify them of forthcoming revisions to the Civil Rights Handbook and the OCR Service Reference Guide regarding complaint handling. The written reminder should specifically address the misconceptions identified by the staff survey results."

Response: SFHSA has taken measures to ensure that staff are well informed about identifying and handling a discrimination complaint. SFHSA has amended the Civil Rights Handbook to provide clear instruction on staffs' role in assisting applicants/participants to file civil rights complaints. SFHSA has also revised the OCR Service Reference Guide (OCR 4) and created an additional guide specific to providing

clear instruction on identifying and handling a discrimination complaint. As part of the corrective actions, SFHSA has updated the list of protected bases in the Civil Rights Handbook and Form 8019. SFHSA has clarified all methods by which complaints may be submitted in compliance with Division 21 in the Civil Rights Handbook as well as the OCR Reference Guide. SFHSA has also 1. Corrected information about applicant's/recipients' appeal rights; 2. Removed the "early resolution" mandate in the complaint process; 3. Incorporated instructions with robust operational detail explaining how to receive civil rights complaints through all available methods and how to route these complaints to ensure their prompt receipt by OCR in the Civil Rights Handbook. Furthermore, instructions for OCR staff have been updated regarding timely complaint handling.

SFHSA has added specific steps that need to be taken in the event of an emergency to ensure that SFHSA continues to meet its civil rights obligations. The plan to ensure that civil rights continue to be met during an emergency was devised from the recommendations found in the ACIN 1-69-20.

A written reminder shall be sent all staff of their complaint handling responsibilities and to notify them of forthcoming revisions to the Civil Rights Handbook and the OCR Service Reference Guide regarding complaint handling on or about November 30, 2022.

Complaint Processing Procedure

Corrective Action: "The County shall ensure policies addressing discrimination complaint handling are clear, consistent, and comport with the required complaint processing obligations. Div. 21-203. As part of the CAP, the County shall revise its Civil Rights Handbook and OCR Service Reference Guide to address the concerns raised in this Report, including but not limited to:

- Correcting the list of protected bases (see CDSS website for list);
 - Clarifying all methods by which complaints may be submitted in compliance with Division 21 (Div. 21-203.22);
 - Correcting information about applicants'/recipients' appeal rights (Div. 21-203.26);
 - Removing or revising instructions that appear to insert a required "early resolution" mandate into the complaint process that is not supported by Division 21; and
 - Incorporating instructions with robust operational detail explaining how to receive civil rights complaints through all available methods (including those left on the Complaint Line voicemail system); how to route these complaints to ensure their prompt receipt by OCR; and how to provide assistance and/or correct referral information to applicants/recipients who wish to file a complaint.
- In addition, the County shall take the following steps to address identified deficiencies in its OCR procedures that negatively impact timely and appropriate complaint handling:
- Develop or revise existing policies/procedures for OCR staff that set forth Division 21 requirements including timelines for complaint handling and explain how this information should guide OCR's timely complaint handling, including timely responses to CDSS; and
 - Develop a plan to ensure the County continues to meet its civil rights obligations during emergencies. See ACIN 1-69-20."

Response: See response to Employee Awareness of Complaint Process

Complaint Log

Corrective Action: The County shall keep a control log in which all complaints of discrimination are entered by year and date the complaint was received. The County shall ensure that all required information is entered for each complaint. Div. 21-203.21.

The CAP shall provide a Complaint Log to CDSS containing all complaints received from 2020 through the

date of this Report, applying all categories as defined and required by Division 21. Div. 21-203.21. All civil rights complaints, regardless of origin, must be contained in the Log. Div. 21-203.21. CDSS requests the Log be submitted in an Excel spreadsheet format.

Response: See attached complaint log.

Discrimination Complaint Form

Corrective Action: “The County shall immediately cease using Form 8019. The County shall use the GEN 1179 unless and until Form 8019 is corrected. To the extent the County intends to continue using Form 8019, the County must revise Form 8019 to include an accurate list of protected bases and required verbiage regarding consent for release of information. Div. 21-203.32.

The CDSS Complaint of Discrimination Form GEN 1179 includes an area for individuals to indicate any other bases they believe apply, which Auditors advance as a best practice. To the extent the County revises and resumes using Form 8019 and does not translate the form into all languages provided by CDSS, the County must use the GEN 1179 in those languages. Div. 21-115.2.”

Response: The Form 8019 was revised to include an accurate list of protected bases and required verbiage regarding consent for release of information. Div. 21-203.32. It also includes an area for individuals to indicate any other bases they believe apply.

Multilingual Complaint Line

Corrective Action: “The County shall add a Complaint Line for Mandarin (a threshold language for all programs and locations) and make corresponding updates wherever the list of Complaint Lines appears, including the County’s website, its Civil Rights Handbook, and the OCR Service Reference Guide. Div. 21-115.3.”

Response: A Complaint Line for Mandarin was added with corresponding updates.

XI. CIVIL RIGHTS COMPLIANCE PLAN REVIEW AND APPROVAL -

Section 4 Dissemination of Information:

Corrective Action: “After the first reference to the County’s threshold languages on page 7 of the Compliance Plan, incorporate an explanation of the County’s usage of Tagalog and Filipino. The explanation must resolve all discrepancies or inconsistencies as well as demonstrate how the County’s approach ensures the provision of appropriate language access services to its NEP/LEP applicants/recipients.

Relatedly, review and (as necessary) revise all sections of the Compliance Plan and its Appendices to ensure that references to Tagalog and Filipino reflect the explanation above.”

Response: The San Francisco Language Access Ordinance (LAO) as amended by the Board of Supervisors in 2009 mandates that Office of Civic Engagement & Immigrant Affairs (OCEIA) determine which languages meet the thresholds for Limited English-Speaking Persons (LESP) who speak a shared language other than English. The LAO specifies that this determination be made by “referring to the best available data from the United States Census Bureau or other reliable source” and that this determination be certified by OCEIA to all City Departments and the Immigrant Rights Commission. On April 2, 2014, the

Office of Civic Engagement & Immigrant Affairs (OCEIA) certified Filipino as a language required under the San Francisco Language Access Ordinance (LAO). The certification included Tagalog and noted the certification as “Filipino (Tagalog)”.

When discussing the CDSS Civil Rights Compliance Review Report with OCEIA, they clarified that the County’s use of the two terms is interchangeable. As subject matter experts, they explained that Filipino is an inclusive version of Tagalog because Filipino is largely based on Tagalog but also includes letters and words from other Filipino dialects. They agreed that the section on their website which states in relevant part, that the languages, “are often used interchangeably, but are not the same”, without context, this statement may lead to confusion among the public, especially when the City essentially uses the terms interchangeably. Because of this, OCEIA agreed that to avoid confusion among the public, they would remove the aforementioned section on their website, which states that the two terms are not the same. The last update from them on October 27, 2022, stated that OCEIA’s senior communications specialist is in the process of removing the Filipino/Tagalog key terms section of content from their online dashboard page, while they work internally to adjust their communications strategy on this topic.

Section 5 Services to Non-English-Speaking, Limited-English-Proficient Applicants/Recipients and Applicants/Recipients with Disabilities:

Corrective Action: “In addition to the review and revision noted above, conduct a comprehensive review of all County policies and procedures, handbooks, job aids, webpages, Intranet resources, and other relevant materials containing information about language access services to ensure that references to Filipino and Tagalog reflect the County’s explanation above. Provide a summary of the results of this review, including a plan with a timetable for making any needed revisions.”

Response: See Section 4.

Section 7 County Services Provided by Contractors, Subcontractors, and Vendors:

Corrective Action: “The County’s procedure for ensuring and monitoring vendor compliance with nondiscrimination laws and regulations requires revision. In particular, the County’s “Standard Contractor Monitoring Form” does not (as the Annual Plan reports) address civil rights protections for program applicants/recipients. Revise this form or develop a separate form to explicitly address, at a minimum, the monitoring policies and procedures identified in the Compliance Plan Guidelines and submit a draft form to CDSS for review.”

Response: See Attached.

The City and County of San Francisco met with our City Attorney to revise the CDSS’ *Assurance of Compliance* Form. The form will be incorporated into our Professional Services Contracts and the Grant Agreements.

B. If services to applicants/recipients are provided by county contractors or subcontractors, such providers of service must also certify compliance with all civil rights laws, rules and regulations using an Assurance of Compliance Agreement from each such provider of service with the contractor’s administrator’s original signature. Such agreements shall be made available to CDSS for review upon request. The following language is part of both the Professional Services Contracts and the Grant Agreements to ensure that contractors with the Agency are complying with civil rights laws in the

provision of service to their clients. It is the recommendation of the City Attorney and the Contracts Manager to incorporate this language into the contracts and revise the CDSS Assurance of Compliance Form.

39. Compliance with Americans with Disabilities Act

Contractor acknowledges that, pursuant to the Americans with Disabilities Act (ADA), programs, services and other activities provided by a public entity to the public, whether directly or through a contractor, must be accessible to the disabled public. Contractor shall provide the services specified in this Agreement in a manner that complies with the ADA and any and all other applicable federal, state, and local disability rights legislation. Contractor agrees not to discriminate against disabled persons in the provision of services, benefits or activities provided under this Agreement and further agrees that any violation of this prohibition on part of Contractor, its employees, agents or assigns will constitute a material breach of this Agreement.

Division 21-100 Nondiscrimination in State and Federally Assisted

Programs require that contractors administer their program(s) in nondiscriminatory manner and in compliance with civil rights obligations and to accommodate non-English-speaking or limited-English-proficient individuals with disabilities or impairments. At a minimum contractors must provide the following:

- Procedures for informing clients of their civil rights;
- Policies and procedures for handling complaints filed with or against a Contractor;
- Policies and procedures that ensure Contractor's accommodate individuals with hearing impairments, visual impairments, and other disabilities;
- Policies and procedures that ensure that Contractors provide appropriate language services, including a breakdown of bilingual/interpreter staff and a description of how written information is communicated to non-English-speaking clients; and policies and procedures for ensuring that Contractor staff are adequately trained in the requirement of s Division 21 (http://www.dss.cahwnet.gov/ord/CDSSManual_240.htm)

The following is the boilerplate language from the HSA G-100 "Grant Agreement":

16.1 Compliance with ADA.

Grantee acknowledges that, pursuant to the ADA, programs, services another activities provided by a public entity to the public, whether directly or through a grantee or contractor, must be accessible to the disabled public. Grantee shall not discriminate against any person protected under the ADA in connection with all or any portion of the Grant Plan and shall comply at all times with the provisions of the ADA.

Division 21-100 Nondiscrimination in State and Federally Assisted Programs require that contractors administer the program(s) in a nondiscriminatory manner and in compliance with civil rights obligations and to accommodate non-English-speaking or limited-English- proficient individuals and individuals with disabilities or impairments. At a minimum, contractors must provide the following:

- Procedures for informing clients of their civil rights;
- Policies and procedures for handling complaints filed with or against a Contractor;

- Policies and procedures that ensure Contractor's accommodate individuals with hearing impairments, visual impairments, and other disabilities;
- Policies and procedures that ensure that Contractors provide appropriate language services, including a breakdown of bilingual/interpreter staff and a description of how written information is communicated to non-English-speaking clients; and policies and procedures for ensuring that Contractor staff are adequately trained in the requirement of s Division 21.
(http://www.dss.cahwnet.gov/ord/CDSSManual_240.htm)

The HSA Contracts Office has incorporated the above language into all service contracts. In order to ensure compliance, the City's Controller's Office has developed a Non-Profit contractor Review Standard Monitoring Form. HSA Contracts Office staff ensures that contractors comply with the contract, and will review the checklist with each contractor to ensure compliance and to establish a baseline standard for contract oversight and management. The contract monitoring form covers four civil rights areas: ADA Compliance, Involvement of Diverse Populations, Written materials; and Effective Communication. With this oversight by the Contract Monitors, the civil rights' requirement are part of the ongoing monitoring and reporting processes of the contracted service providers.

Section 8 Primary Language Data Statistics, Staffing, and Hiring Goals:

Corrective Action: "Division 21-115.14 specifies the calculation for determining the required number of bilingual employees in a program and/or location as well as the related information that must be provided by the County. Revise this section of the Annual Plan (and related Appendix as needed) to incorporate that information, including the application of the Division 21 formula to show the required number of bilingual certified employees in each program and public contact occupational group as well as identified staffing level gaps and hiring goals."

Response:

CalFresh

1. Non-English language cases that equal or exceed five percent of the total cases:
 - Cantonese = 24.4%
 - Spanish = 7.8%
2. Number of public contact positions in each major occupational group
 - a. Major Occupational Groups:
 - i. Eligibility Workers = 295 total public contact positions
3. Multiply the percentage of non-English-language cases by the number of public contact positions in each major occupational group
 - a. $24.4\% \times 295 = 72$ required certified bilingual (Cantonese) Eligibility Workers
 - b. $7.8\% \times 295 = 23$ required certified bilingual (Spanish) Eligibility Workers
4. Current staffing figures show CalFresh currently employs:
 - 80 certified bilingual (Cantonese) Eligibility Workers
 - 90 certified bilingual (Spanish) Eligibility Workers

CalFresh employs more than the required amount of certified bilingual (Spanish) Eligibility Workers. CalFresh also employs more than the required amount of certified bilingual (Cantonese) Eligibility Workers. Additionally, CalFresh currently has 17 budgeted, vacant positions that have a Cantonese requirement.

CalWORKs

1. Non-English language cases that equal or exceed five percent of the total cases:

- Spanish = 24.8%
2. Number of public contact positions in each major occupational group
 - a. Major Occupational Groups:
 - i. Eligibility Workers = 37 total public contact positions
 - ii. Employment & Training Specialists = 47 total public contact positions
 - iii. Social Workers = 43 total public contact positions
 3. Multiply the percentage of non-English-language cases by the number of public contact positions in each major occupational group
 - a. $24.7\% \times 37 = 9$ required certified bilingual (Spanish) Eligibility Workers
 - b. $24.7\% \times 47 = 12$ required certified bilingual (Spanish) Employment & Training Specialists
 - c. $24.7\% \times 43 = 11$ required certified bilingual (Spanish) Social Workers
 4. Current staffing figures show CalWORKs currently employs:
 - 12 certified bilingual (Spanish) Eligibility Workers
 - 8 certified bilingual (Spanish) Employment & Training Specialists
 - 12 certified bilingual (Spanish) Social Workers

CalWORKs currently meets Division 21 staffing requirements for certified bilingual (Spanish) staff for the Eligibility Worker and Social Worker occupational groups. CalWORKs does not currently meet the minimum required certified bilingual (Spanish) staff for the Employment & Training Specialists group. However, CalWORKs has two budgeted, vacant Employment & Training Specialist public facing positions that have a Spanish requirement. Furthermore, there are at least five certified bilingual (Spanish) clerks with CalWORKs at the same office location that could serve as interpreters.

IHSS

1. Non-English language cases that equal or exceed five percent of the total cases:
 - Cantonese = 41%
 - Russian = 9%
 - Spanish = 7%
2. Number of public contact positions in each major occupational group
 - a. Major Occupational Groups:
 - i. Social Workers = 91 total public contact positions
3. Multiply the percentage of non-English-language cases by the number of public contact positions in each major occupational group
 - a. $41\% \times 91 = 37$ required certified bilingual (Cantonese) Social Workers
 - b. $9\% \times 91 = 8$ required certified bilingual (Russian) Social Workers
 - c. $7\% \times 91 = 6$ required certified bilingual (Spanish) Social Workers
4. Current staffing figures show IHSS currently employs:
 - 36 certified bilingual (Cantonese) Social Workers
 - 5 certified bilingual (Russian) Social Workers
 - 7 certified bilingual (Spanish) Social Workers

IHSS currently meets the Division 21 certified bilingual (Spanish) staffing requirements, but it does not meet the certified bilingual (Russian) Social Workers staffing requirements by three. Position Control data shows that IHSS currently has three budgeted, vacant public facing positions that have Russian as a requirement. Similarly, there are three vacant, budgeted Social Work positions with a Cantonese requirement. Once the vacant positions are filled, IHSS will be compliant with the minimum bilingual staffing requirements.

CAPi

1. Non-English language cases that equal or exceed five percent of the total cases:

- Cantonese = 24.3%
 - Russian = 5.6%
 - Spanish = 36.8%
 - Mandarin = 6.7%
2. Number of public contact positions in each major occupational group
 - a. Major Occupational Groups:
 - i. Eligibility Workers = 5 total public contact positions
 3. Multiply the percentage of non-English-language cases by the number of public contact positions in each major occupational group
 - a. $24.3\% \times 5 = 1$ required certified bilingual (Cantonese) Eligibility Worker
 - b. $5.6\% \times 5 = 0$ required certified bilingual (Russian) Eligibility Workers
 - c. $36.8\% \times 5 = 2$ required certified bilingual (Spanish) Eligibility Workers
 - d. $6.7\% \times 5 = 0$ required certified bilingual (Mandarin) Eligibility Workers
 4. Current staffing figures show CAPI currently employs:
 - 3 certified bilingual (Cantonese) Eligibility Workers
 - 0 certified bilingual (Russian) Eligibility Workers
 - 2 certified bilingual (Spanish) Eligibility Workers
 - 1 certified bilingual (Mandarin) Eligibility Worker

CAPI currently meets the Division 21 certified bilingual staffing requirement for Cantonese, Mandarin, Russian, and Spanish. While CAPI does not currently employ any certified bilingual (Russian) Eligibility Workers, CAPI is administered at 1440 Harrison Street, where 2 certified bilingual (Russian) Medi-Cal eligibility workers work. Per Division 21-115.141, "when the computation (to determine required bilingual staffing) results in a need for less than one full-time position for a major occupational group in a program and/or location, the agency may provide services through the use of a qualified bilingual employee from another program within the same location."

FCS

1. Non-English language cases that equal or exceed five percent of the total cases:
 - Spanish = 14.3%
2. Number of public contact positions in each major occupational group
 - a. Major Occupational Groups:
 - i. Social Workers = 59 total public contact positions
 - ii. Protective Services Workers = 118 total public contact positions
3. Multiply the percentage of non-English-language cases by the number of public contact positions in each major occupational group
 - a. Social Workers
 - i. $14.3\% \times 59 = 8$ required certified bilingual (Spanish) Social Workers
 - b. Protective Service Workers
 - i. $14.3\% \times 118 = 17$ required certified bilingual (Spanish) Protective Service Workers
4. Current staffing figures show CAPI currently employs:
 - 23 required certified bilingual (Spanish) Social Workers
 - 36 certified bilingual (Spanish) Protective Services Workers

FCS currently meets the Division 21 certified bilingual staffing requirement for Spanish for the Social Worker and Protective Services Worker occupational groups.