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GAVIN NEWSOM
GOVERNOR

June 22, 2021

Ethan Dye, Acting Director
Sacramento County Department of Human Assistance
1825 Bell Street
Sacramento, CA 95825

Dear Mr. Dye:

Thank you and the Sacramento County Department of Human Assistance (DHA) staff for your cooperation and assistance during the March 2021 Civil Rights Compliance Review (Review). Please find the final report (Report) attached to this correspondence.

Compliance issues (deficiencies) identified in the Report require the development of a Corrective Action Plan (CAP) within 60 days of the date of this letter. Please address each deficiency, including proposed actions and timelines for completion of all corrective actions and recommendations listed in the Report. For any deficiency corrected within 60 days, please explain the steps taken and the date of completion.

Please submit your CAP and any required revisions to your Annual Plan and policies electronically to the [Civil Rights Unit email \(crb@dss.ca.gov\)](mailto:crb@dss.ca.gov). In an effort to comply with the Web Content Accessibility Guidelines (WCAG), we require the CAP and all other materials to be submitted as a PDF document. The PDF documents must be accessible. See *California Government Code 7405*. The Report and CAP will be published on the California Department of Social Services [Civil Rights Unit website \(http://www.cdss.ca.gov/inforesources/Civil-Rights/Compliance-Reports-and-Corrective-Action-Plans\)](http://www.cdss.ca.gov/inforesources/Civil-Rights/Compliance-Reports-and-Corrective-Action-Plans).

If you need technical assistance developing a CAP, please contact Laura Watry at (916) 809-6411 or by email at laura.watry@dss.ca.gov. You may also contact our office by email using the [Civil Rights Unit email \(crb@dss.ca.gov\)](mailto:crb@dss.ca.gov).

Sincerely,

Christina Teixeira

CHRISTINA TEIXEIRA, Manager
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SACRAMENTO DEPARTMENT OF HUMAN ASSISTANCE CIVIL RIGHTS COMPLIANCE REVIEW REPORT

**Conducted on
March 22 – March 26, 2021**

California Department of Social Services

Office of Equity

Civil Rights Unit

744 P Street, M.S. 9-7-041

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Reviewer: Laura Watry

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I. INTRODUCTION

The purpose of this review by the California Department of Social Services (CDSS) Civil Rights Unit (CRU) staff is to assess the Sacramento Department of Human Assistance (CWD or County) compliance with CDSS' Manual of Policies and Procedures (MPP) Division 21 Regulations (Div. 21), and other applicable state and federal civil rights laws and regulations.

A remote compliance review was conducted on March 22 to March 26, 2021. An exit conference was held on March 26, 2021 to review preliminary findings.

Key Findings of the Report

Overall, the Auditors found substantial compliance concerns. The main concerns are summarized below. Specific findings and corrective action related to these concerns can be found in Sections III-IX and XI of this report.

- **Dissemination of Information:** The PUB 13 "Your Rights Under California Welfare Programs" is not available in all translations provided by CDSS in the most recent revision. Availability of the PUB 13 in alternate formats (such as braille and audio) is inconsistent. Some locations distribute outdated revision of the PUB 13, disproportionately in alternate formats.
- **Accessible Facilities:** All facilities reviewed had inaccessible features, including barriers to safe entry in parking areas and equal, safe use of bathroom facilities.
- **Interpretive Services:** Lack of clear and comprehensive policies on providing interpretive services to Non-English Proficient/Limited-English Proficient (NEP/LEP) applicants/recipients coupled with findings that some NEP/LEP applicants/recipients do not consistently receive interpretive services.
- **Documentation of Applicant/Recipient Case Records:** All programs reviewed had gaps and/or errors in documentation of applicant/recipient case records. Most notably, many staff appear unfamiliar with documenting information related to reasonable accommodation. Staff are inconsistent in the manner in which they document information about interpretive services.
- **Reasonable Accommodation Policy:** The County does not have a comprehensive policy on accommodating applicants/recipients with disabilities by modifying rules, policies, or practices to offer equal access. All County Letter (ACL) 19-45. Auditors found little evidence that staff offer, provide, or document reasonable accommodations.
- **Civil Rights Complaint Processes:** Counties are required to maintain a control log of all complaints received. Div. 21-203.21. Entries in the County's complaint log are incomplete, and the template omits several categories required by Division 21. The County's policy for handling discrimination complaints lacks operational detail.

- **Civil Rights Staff Training:** Findings suggest that civil rights training is not adequately effective or comprehensive, especially in the area of reasonable accommodation and auxiliary aids.

Organization of this Report

Section II of this report summarizes the method used by the Auditors to inform their findings.

Sections III, V, VI, VII, VIII, and IX of this report contain specific regulatory requirements from Division 21, Section 504 of the Rehabilitation Act of 1973, and the ADA. Findings in these sections are based on information gathered from case review, facility walk-throughs, and staff surveys. Each section is formatted to first provide findings, then required corrective actions, and ends with any Auditor recommendations.

Section IV is a review of the facilities and references Division 21, the United States Department of Justice's ADA Standards, Title 24 of California Code and Regulations, and the California Accessibility Reference Manual. This section is divided by facility locations and each sub-section includes findings, corresponding regulations, and any Auditor observations. There are no suggested corrective actions or recommendations because the County should use the findings and regulations to inform their corrective actions.

Section X highlights issues identified by community and advocacy organizations.

Section XI reviews the County's compliance plan and identifies modifications required prior to approval.

Section XII of the report provides a statement of overall compliance and concluding remarks.

Appendix 1 of this report contain detailed observations from case review. Appendix 2 of this report contains a sample question from the staff survey.

II. SUMMARY OF METHODOLOGY

Documents Reviewed

To prepare for this review, Auditors reviewed the following documents:

- 2021 Civil Rights Compliance Plan (Annual Plan) and attachments
- Civil rights-related policies and procedures, including:
 - Department Procedure 16-3, "Dissemination of Information to Customers"
 - Department Procedure 16-6, "Prohibited Discriminatory Practices and Applicant/Recipient Complaint Procedure"

- Department Procedure 16-9E, “Access Language Services for Applicants/Recipients”
- Department Procedure 16-11, “Alternative Services for Customers with Disabilities”
- Department Procedure 16-12D, “Language and Auxiliary Aid Requirements for Customers”
- Special Accommodation CalWIN Action Tip
- Civil rights discrimination complaint database for a complete listing of complaints filed 12 months prior to the review
- Previous County Compliance Review reports and corresponding Corrective Action Plans (CAP)

Locations Reviewed

- Administrative Hearings Office – 444 N. 3rd Street, Sacramento
- Fulton Bureau – 2700 Fulton Avenue, Sacramento
- Galt Office – 210 N. Lincoln Way, Galt

Programs Reviewed

- CalFresh
- CalWORKs
- CAPI
- Program Integrity

Review Procedures

- Electronic surveys of public contact staff, the civil rights coordinator, and program managers
- Reviewing case files
- Reviewing CWD-reported information about facilities and parking areas
- Receiving feedback from community groups. The following organizations were contacted for feedback:
 - [River City Foodbank](#) (1800 28th Street, Sacramento, CA 95816)
 - [Legal Services of Northern California](#) (515 13th Street, Sacramento, CA 95814)
 - [California Coalition of Welfare Rights Organizations](#) (CCWRO) (1111 Howe Avenue #635, Sacramento, CA 95825)
 - [Public Interest Law Project](#) (449 15th Street, Suite 301 Oakland, California 94612)
 - [Asian Pacific American Legal Center](#) (1145 Wilshire Boulevard, Los Angeles, CA 90017)
 - [Western Center on Law and Poverty](#) (1107 Ninth Street, Suite 700, Sacramento, CA 95814)

Compliance Review Areas

- Dissemination of information
- Facility accessibility for individuals with disabilities
- Program accessibility for individuals with disabilities
- Bilingual staffing/services for non-English-speaking individuals
- Documentation of applicants'/recipients' case records
- Staff development and training
- Discrimination complaint procedures

Staff Survey Summary

- Auditors distributed a total of 43 surveys to County staff, including certified bilingual staff. Thirty-seven surveys were completed. Six surveys were not completed by staff, despite multiple reminders from Auditors.
 - Eligibility workers: 30 of 35 surveys distributed to eligibility workers were completed.
 - Lobby receptionists/navigators: 4 of 5 surveys distributed to lobby receptionists/navigators were completed.
 - Program supervisors: 3 of 3 surveys distributed to program supervisors were completed.

III. DISSEMINATION OF INFORMATION

Counties are required to disseminate information about programs, program changes, and Division 21 protections for applicants and recipients. This dissemination should occur through outreach and information to all applicants, recipients, community organizations, and other interested persons, including all NEP/LEP persons and persons with disabilities.

Findings: Access to Services, Information and Outreach

Does the County accommodate clients by modifying business hours or accepting applications by mail? Can clients, including those with disabilities, access services when they are unable to go to an office?

Yes. The County accepts applications by mail, by phone, online, and in person. When clients are unable to go to an office, including due to a disability, clients can access services by requesting a home visit. "Home Visits for CalWORKs" is a written policy that describes when and how to conduct a home visit. The policy states that a home visit can be offered upon the participant's request, however the policy does not mention that a home visit may be required as a reasonable accommodation due to a disability.

Does the County ensure the awareness of available services to individuals in remote areas?

Yes. The County uses advertising on social media, television, and radio to reach potentially eligible persons in all parts of the County. The County's website uses Google Translate to translate webpages into over 50 languages.

How does the County make services and outreach available to applicants/recipients who cannot read or write?

Procedure 16-11 describes how the County assists and accommodates applicants/recipients with disabilities. If an individual cannot read or write due to a disability, 16-11 would apply to make services available. Other than the reasonable accommodation protocol, the County does not have a policy addressing applicants/recipients who cannot read or write for reasons unrelated to a disability.

The County reaches applicants/recipients who cannot read or write with outreach via radio and television advertising.

Does the County ensure the awareness of information related to the civil rights program?

Yes. The Civil Rights Coordinator's information is prominently displayed on the County website on a [webpage called "Civil Rights Information"](#). Auditors note that different phone numbers are associated with the Civil Rights Coordinator in the Annual Plan, suggesting that the webpage may need to be revisited for accuracy. The Civil Rights Information webpage contains an incomplete list of legally recognized protected bases of discrimination, which limits applicant/recipient understanding of their rights and may have a chilling effect on complaint filing for persons belonging to the omitted protected bases (e.g., gender identity and gender expression).

Does the County have a Call Center/Service Center? If so, does the Call Center/Service Center answer calls for the entire County, by district, regional office, other? Does the Call/Service Center have an Interactive Voice Response (IVR) system? If so, does the IVR system have language options for all County threshold languages? Does the IVR system have an option to request free interpretive services?

The County has two service centers which answer calls for the entire County. The service center has an IVR system with language options for English, Spanish, and Russian. These options are not inclusive of all programmatic threshold languages. The IVR system lacks an option to request free interpretive services in other languages. Callers who speak other languages must select one of the three available options (English, Spanish, or Russian) and ask for an interpreter in their language.

Did the County ensure continuous access to services during office closures due to Covid-19?

Somewhat. Office closures due to Covid-19 exacerbated barriers to accessing County services for many applicants/recipients. According to staff surveys and community input, phone lines were extremely busy during the first six months of office closures, making it difficult or impossible for participants to reach the County. This has a foreseeable disproportionate impact on persons with cognitive disabilities, older adults, and NEP persons. These populations may have difficulty using call trees (such as IVR), especially when needing to call multiple times due to excessive wait times or dropped calls.

Community input also identified concerns regarding mail retrieval for homeless individuals and other applicants/recipients without a fixed mailing. Advocates commented that mail retrieval was initially unavailable following office closures, and in some cases mail retrieval was made available only via drive-through pick-up, which requires access to a personal vehicle.

Lack of access to mail retrieval may foreseeably reduce participation in the civil rights complaint process, which relies on mail to reach complainants. The County must enable access to the complaint process for complainants without a fixed mailing address. This may involve facilitating access to mail retrieval at County offices or conducting communication in other accessible ways (such as email or phone). Barriers to mail retrieval may have a disproportionate impact on persons belonging to protected classes, such as disabled persons, LGBTQ individuals, and people of color, who are overrepresented in the homeless population in California.

Findings: Signage, Posters and Pamphlets

Are instructional and directional signs posted in waiting areas and other places frequented by a substantial number of non- English-speaking clients translated into appropriate languages?

Mostly. The County has posted translated instructional and directional signs based on identified threshold languages in two of three reviewed locations. Threshold languages for most DHA office locations were identified through a foot traffic study conducted in January 2020. Based on this study, the Fulton and Galt offices have identified English and Spanish as threshold languages. Threshold languages have not yet been identified for the Hearings office, which opened to the public for the first time in March 2021 (the same month as this Review).

Division 21 is broad and states that threshold language should be considered by location *and* program. Div. 21-104(s)(2) (emphasis added). This means that an office's threshold languages consist of threshold languages for that site *and* for programs administered at that site. Applying this standard, the Galt office is missing instructional and directional signs in its threshold languages for its programs (such as CAPI).

Is the CDSS pamphlet “Your Rights under California Welfare Programs” (PUB 13) available in all waiting rooms and reception areas? Is the current version (rev. 08/20) of the PUB 13 available in Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hindi, Hmong, Japanese, Korean, Lao, Mien, Portuguese, Punjabi, Russian, Spanish, Tagalog, Thai, Ukrainian, and Vietnamese? Is the PUB 13 (rev. 08/20) available in alternate formats?

Sometimes. According to Procedure 16-3, “Dissemination of Information to Customers,” the PUB 13 shall be available in all waiting rooms and reception areas and available in the translations provided by CDSS. Procedure 16-3 also states that the PUB 13 shall be available in braille, large print, and CD (audio recording). CDSS requires the PUB 13 to be available in languages identified as thresholds for the location and all programs administered at that location. Office locations that have not identified location-specific threshold languages can meet this requirement by applying all County-wide threshold languages to their site.

The Review found that the PUB 13 is not consistently available in all translations. The Review also found that where available, braille and audio recordings are not the most recent revisions, and audio recordings are not available for all languages.

- At the Fulton Branch, the PUB 13 (rev. 08/20) is available in the lobby in English, Arabic, Farsi, Russian, and Spanish. The PUB 13 (rev. 08/20) is missing in Armenian, Cambodian, Chinese, Hindi, Hmong, Japanese, Korean, Lao, Mien, Portuguese, Punjabi, Tagalog, Thai, Ukrainian, and Vietnamese. The PUB 13 (rev. 2012) is available by request from the reception desk in braille (English) and audio recording (English, Chinese, Russian, Spanish, and Vietnamese). The PUB 13 (rev. 03/10) is available outside the building in English, Arabic, Farsi, Russian, and Spanish. The PUB 13 is not available in large print.
- At the Galt Office, the PUB 13 (rev. 08/20) is available in the lobby in English, Arabic, Armenian, Cambodian, Chinese, Farsi, Hindi, Hmong, Japanese, Korean, Mien, Punjabi, Lao, Tagalog, Portuguese, Spanish, Ukrainian, and Vietnamese. The PUB 13 (rev. 8/20) is missing in Russian and Thai. Braille and audio recordings of the PUB 13 (rev. 2012) are available. Audio recordings are not available for all languages. The PUB is not available in large print.
- At the Hearings Office, the PUB 13 (rev. 08/20) is available in the lobby in English, Armenian, Cambodian, Chinese, Farsi, Hmong, Japanese, Laotian, Mien, Punjabi, Portuguese, Russian, Spanish, Ukrainian, Vietnamese. The PUB 13 (rev. 08/20) is missing in Arabic, Hindi, Korean, Tagalog, and Thai. The PUB 13 is not available in alternate formats, such as braille, audio, or large print.

Is the PUB 13 distributed and explained to each client at intake and reinvestigation of eligibility?

Yes. According to Procedure 16-3, “Dissemination of Information to Customers,” the PUB 13 shall be distributed and explained to each applicant/recipient at intake and reinvestigation / recertification by staff assigned to determine eligibility. However,

Auditors found that distribution and explanation of the PUB 13 is not documented in case records in the CalWORKs, CalFresh, and CAPI programs. Without documentation, Auditors were unable to verify that the PUB 13 was distributed and explained in the applicant's/recipient's primary language. Documentation that the PUB 13 is distributed and explained is required to demonstrate compliance.

The County reported that the PUB 13 is provided based on the primary language indicated in CalWIN if translations are available from CDSS. Observed errors in documenting primary written language in CalWIN (see Section V of this Report) raise concerns that not all applicants/recipients receive the PUB 13 in their primary language.

The PUB 13 is not distributed at termination from benefits.

The PUB 13 is not distributed by the Program Integrity (Fraud) unit. During case review, Auditors learned that it is not the policy or practice of the Program Integrity unit to distribute and/or explain the PUB 13 at any point. Auditors did not encounter any Program Integrity cases that documented distribution of the PUB 13.

Are current versions of the required posters present in the lobbies?

Yes. Based on facility reviews, current versions of required posters are present in office lobbies of all reviewed locations (Fulton Branch, Galt Office, and Hearings Office).

Corrective Action

Translated PUB 13: The CWD shall ensure the PUB 13 is available in all program lobbies in all languages translated by CDSS. Div. 21-115.2, 21-107.22. The PUB 13 must be available in the most recent revision (rev. 08/20). To the extent that program materials are available outside (i.e., due to office closures), the PUB 13 should be available in all languages translated by CDSS. The County may access the most recent translated versions of the PUB 13 on [CDSS' website](#). Please note that revisions will be made to the English and translated versions of the PUB 13 before the end of 2021. Civil Rights Coordinators will be made aware when they are available.

PUB 13 in Alternate Formats: The CWD shall ensure the availability of large print, braille, and auditory aids for participants in all of the programs for which CDSS has oversight responsibility. Div. 21-115.4. The CWD 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.

Distribution of PUB 13: The CWD shall ensure the PUB 13 is distributed and explained to program applicants/recipients in all programs for which CDSS has oversight responsibility. Div. 21-107.22. The PUB 13 must be distributed at intake and renewal/recertification because these bear on eligibility. Program Integrity investigations also bear on an individual's eligibility therefore distribution and explanation of the PUB 13 is also required at key junctures in a fraud case (this also recognizes the potentially

significant consequences associated with fraud referrals). Div. 21-107.1, 21-107.221. The CWD shall ensure that the available translated versions are given to applicants/recipients in their primary language and document when the PUB 13 is distributed and explained to participants and in what language. Programs shall document that the contents of the PUB 13 were explained and whether the individual had any questions. As part of the CAP, please:

- Update Procedure 16-3, “Dissemination of Information to Customers,” to include the following information to ensure compliance with civil rights obligations:
 - Create a procedure for offices to request new braille copies of the PUB 13 if a supply runs out and/or when revisions are issued.
 - Create a procedure to replace outdated versions from offices when revisions are issued.
 - Update the list of languages in which CDSS translates the PUB 13.
 - For each CDSS-covered program, explain when and how the PUB 13 is provided and explained to applicants/recipients (including Program Integrity).
- Designate the individual(s) in each office responsible for ensuring the PUB 13 is available in office lobbies and outside, as applicable.

Directional and Instructional Signage: The CWD shall ensure that instructional and directional signs are posted in waiting areas and other places that are frequented by clients 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% or more of persons visiting each location. It also encompasses languages spoken by 5% or more of persons in a program that is administered at each location. Div. 21-2014(s)(2). As part of the CAP, please:

- Identify threshold languages for the Hearings Office location, such as through a foot traffic study, or meet this requirement by treating all programmatic threshold languages as thresholds for the Hearings Office location.
- Determine threshold languages for each office by location *and* programs administered at that location (i.e., develop a list of each publicly-accessible facility (i.e., facilities with open lobbies) indicating the threshold language based on location (i.e., foot traffic) and the threshold languages of the programs administered at that location). Based on this analysis, post directional/informational signs in applicable threshold languages in all offices.

Dissemination of Information: The County shall keep contact information posted on the County webpage for the Civil Rights Coordinator up-to-date. Div. 21-107.1.

Notices: The County shall implement procedures to ensure that applicants/recipients, including persons disabilities, are notified of and can obtain information about programs or program changes. Div. 21-107.24.

As part of the CAP, the County shall cross-reference the Reasonable Accommodation policy in the Home Visit Policy. If an applicant/recipient requests a home visit due to a disability, the County must treat that as a Reasonable Accommodation request. The County is reminded that applicants/recipients may request a home visit as an accommodation due to disability in programs other than CalWORKs. The County may consider whether the Home Visit Policy should be broadened to address home visit protocol more generally.

Recommendations

Dissemination of Information: Consider posting the discrimination complaint form on the County website so complainants know what information to provide when filing a complaint. Update the protected bases on the County website, referring to the GEN 1179 Discrimination Complaint Form for applicable protected bases.

Distribution of PUB 13: Consider distributing the PUB 13 at termination and denial. The PUB 13 has unique information which is absent from the Notice of Action (also known as NA Back 9). If a barrier to distributing the PUB 13 at termination and denial is related to CalWIN system functionality, Auditors encourage the County to engage in CalSAWS development opportunities to address modifications to facilitate dissemination of the PUB 13 in the future.

Documentation of PUB 13 Distribution: Auditors recommend standardizing language used in case journal entries to indicate that the PUB 13 was provided at intake/application, recertification, and any points where benefits are reduced or terminated. Consider providing template language to staff and adding documentation of distribution to checklists or job aids for case processing and supervisor review to support compliance with documentation obligations. Illustrative language:

On [date] provided applicant/recipient with PUB 13 in [primary written language]. Explained contents and instructed applicant/recipient about how to make a discrimination complaint. Confirmed applicant's/recipient's understanding by asking for questions. Applicant/recipient had [none].

Service Center: Consider adding more languages to the Interactive Voice Response (IVR) system, especially for threshold languages in any program and/or location that are not currently supported by the IVR. Auditors encourage the County to consider adding greetings in additional languages and an “other language” option. These changes would help inform callers that free interpretive services are available in their language.

Emergency Circumstances: Consider developing a policy and/or protocol for ensuring access to services during emergency circumstances. Such a policy would address phone access, digital access, and mail retrieval for populations facing barriers to communication. Auditors encourage the County to consider guidance provided in [All County Information Notice \(ACIN\) I-76-20](#), “Continued Provision of Timely Access to and Receipt of Benefits and Services to Clients During an Emergency or Disaster” and

[ACIN I-69-20](#), “Reminder of Counties’ Civil Rights Obligations During States of Emergencies” when developing a policy and/or protocol for emergency circumstances.

IV. FACILITY ACCESSIBILITY FOR INDIVIDUALS WITH DISABILITIES

The Americans with Disabilities Act (ADA) requires public accommodations to provide goods and services to people with disabilities on an equal basis with the rest of the general public. The goal is to afford every individual the opportunity to benefit from the services available. The federal regulations require that architectural and communication barriers that are structural must be removed in public areas of existing facilities when their removal is readily achievable; in other words, easily accomplished and able to be carried out without much difficulty or expense.

The facility review is based on four priorities supported by the ADA regulations for planning achievable barrier removal projects. The priorities include ensuring accessible approach and entrance to the facility, access to goods and services, access to restrooms, and any other measures necessary.

Regulations referenced in this section include Division 21, the [United States Department of Justice’s ADA Standards \(ADAS\)](#), and [Title 24 of California Code and Regulations \(CA T24\)](#). This section also references the [California Accessibility Reference Manual \(CARM\) 2019 7th edition](#), developed by the California Division of the State Architect. The [United States Access Board’s Americans with Disabilities Act Accessibility Guidelines](#) (ADAAG) is an additional facility accessibility resource.

The County must ensure that programs and activities are readily accessible to individuals with disabilities, including building accessibility and the availability of accessible parking accessible public restrooms.

Auditors remind the County that they are encouraged and expected to self-monitor facility accessibility on a regular basis to ensure all locations visited by members of the public are safe and accessible. Auditors observed that facility staff did not demonstrate familiarity in ramp and stair elements or using a level tool. It is important that staff are trained and familiar with the applicable standards and the steps necessary to ensure accessibility so members of the public are not denied safe and equal access to services.

Relatedly, the County discovered that rearranging furniture to allow for social distancing impacted facility accessibility. The County learned that three interview rooms at the Fulton Branch which were designated as accessible no longer met standards for accessibility. Self-monitoring is important so that the County is continuously alert to accessibility requirements. This is especially relevant now, as social distancing necessitates changes in how CWDs use space.

The County must take action to correct each of the findings identified below, using the citations provided to ensure all facilities visited by applicants/recipients conform to applicable structural and physical requirements. The County must describe corrective actions for each of the findings identified below in the CAP.

Facility Location: Fulton Branch

Parking

Width of van accessible spaces is too narrow at 103 inches (Space 1 and Space 2) and 98 inches (Space 3). Applies to Parking Spaces 1, 2, and 3.

- **Regulation:** Van parking spaces shall be 144 inches wide minimum. Van parking spaces shall be permitted to be 108 inches wide minimum where the access aisle is 96 inches wide minimum. CA T24 11B-502.2; CARM pg. 163.

Distance between the hatched line of access aisle surface identification is too wide at 42 inches. Applies to all access aisles.

- **Regulation:** Access aisles shall be marked with a painted borderline around their perimeter. The area within the borderlines shall be marked with hatched lines a maximum of 36 inches on center in a color contrasting with that of the aisle surface. CA T24 11B- 505.4; ADAS 505.4; CARM pg. 286.

Stairways

Top gripping surface of handrails is too high at 41 inches above the stair nosing. Applies to handrails for Stairways 1, 2, and 3.

- **Regulation:** Top of gripping surfaces of handrails shall be 34 inches minimum and 38 inches maximum vertically above walking surfaces, stair nosings, and ramp surfaces. Handrails shall be at a consistent height above walking surfaces, stair nosings, and ramp surfaces. CA T24 11B- 505.4; ADAS 505.4; CARM pg. 286.

Interview Rooms

Width of counter in interview rooms is inadequate at 24 inches long. Applies to all Interview Rooms 40, 41, and 114.

- **Regulation:** A portion of the counter surface that is 36 inches long minimum and 34 inches high maximum shall be provided. CA T24 11B-904.4.2; CARM pg. 322.
- **Regulation:** Sales counters and service counters shall comply with Section 11B-904.4.1 or 11B-904.4.2. CA T24 11B-904.4; CARM pg. 322.

Women's Restroom

Diameter of circle symbol at entrance to women's restroom is too small at 11 ¾ inches.

- **Regulation:** A circle symbol shall be located at entrances to women's toilet and bathing facilities. The circle symbol shall be ¼ inch thick and 12 inches in diameter. CA T24 11B-703.7.2.6.2; CARM pg. 376; CA T24 11B-703.7.2.6.2; CARM pg. 376.

Hand dryer (operable parts) is too high above the finish floor at 41 inches.

- **Regulation:** Where towel or sanitary napkin dispensers, waste receptacles, or other accessories are provided in toilet facilities, at least one of each type shall be located on an accessible route. All operable parts, including coin slots, shall be 40 inches maximum above the finish floor. CA T24 11B-603.5; CARM pg. 382.

Distance from center-line of the toilet to side wall is too far at 33 inches.

- **Regulation:** The water closet shall be positioned with a wall or partition to the rear and to one side. The center-line of the water closet shall be 17 inches minimum to 18 inches maximum from the side wall or partition. CA T24 11B-604.2; ADAS 604.2; CARM pg. 387.

Distance from the front edge of toilet to toilet tissue dispenser is too far at 24 inches.

- **Regulation:** Toilet paper dispensers shall comply with Section 11B-309.4 and shall be 7 inches minimum and 9 inches maximum in front of the water closet measured to the center-line of the dispenser. CA T24 11B-604.7.1; ADAS 604.7; CARM pg. 389.

Toilet tissue dispenser outlet is too low at 14 ½ inches above finish floor.

- **Regulation:** The outlet of the dispenser shall be below the grab bar, 19 inches minimum above the finish floor and shall not be located behind grab bars. CA T24 11B-604.7.1; ADAS 604.7; CARM pg. 389.

Height of grab bars on side wall of toilet are too low at 32 ¼ inches above the finish floor.

- **Regulation:** Grab bars shall be installed in a horizontal position, 33 inches minimum and 36 inches maximum above the finish floor measured to the top of the gripping surface. CA T24 11B-609.4; ADAS 609.4; CARM pg. 428.

Men's Restroom

Length of sign sides of restroom door signage is too short at 11 ¾ inch. Sign thickness is inadequate at 1/8 inch.

- **Regulation:** A triangle symbol shall be located at entrances to men's toilet and bathing facilities. The triangle symbol shall be an equilateral triangle ¼ inch thick with edges 12 inches (305 mm) long and a vertex pointing upward. CA T24 11B-703.7.2.6.1; CARM pg. 376; CA T24 11B-703.7.2.6.1; CARM pg. 376.

Hand dryer is too high at 41 inches above the finish floor.

- **Regulation:** Where towel or sanitary napkin dispensers, waste receptacles, or other accessories are provided in toilet facilities, at least one of each type shall be located on an accessible route. All operable parts, including coin slots, shall be 40 inches maximum above the finish floor. CA T24 11B-603.5; CARM pg. 382

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Toilet tissue dispenser outlet is too low at 14 ½ inches above finish floor.

- **Regulation:** The outlet of the dispenser shall be below the grab bar, 19 inches minimum above the finish floor and shall not be located behind grab bars. CA T24 11B-604.7.1; ADAS 604.7; CARM pg. 389.

Height of grab bars on side wall of toilet are too low at 32 ¼ inches above the finish floor.

- **Regulation:** Grab bars shall be installed in a horizontal position, 33 inches minimum and 36 inches maximum above the finish floor measured to the top of the gripping surface. CA T24 11B-609.4; ADAS 609.4; CARM pg. 428

Facility Location: Galt Office

Parking

No van-accessible parking space is available.

- **Regulation:** For every 6 or fraction of 6 parking spaces required by Section 11B-208.2 to comply with Section 11B-502, at least one shall be a van parking space complying with Section 11B-502. CA T24 11B-208.2.4; ADAS 208.2.4; CARM pg. 167.

Height of parking stall signage is too short at 79 inches above the finish floor.

- **Regulation:** Parking space identification signs...located within a circulation path shall be a minimum of 80 inches above the finish floor or ground surface measured to the bottom of the sign. CA T24 11B-502.6; ADAS 502.6; CARM pg. 158.

Ground surface on the route to the building entrance contains a change in level $\frac{1}{4}$ and $\frac{1}{2}$ inch without edge treatment.

- **Regulation:** Changes in level between $\frac{1}{4}$ inch (6.4 mm) high minimum and $\frac{1}{2}$ inch (12.7 mm) high maximum shall be beveled with a slope not steeper than 1:2. CA T24 11B-303.2-303.4; ADAS 303.2-303.4; CARM pg. 207.

Lobby

Depth of knee clearance under accessible table or counter at 9 inches and 27 inches off the finished floor was requested, but not provided.

Interview Rooms

Width of counter is too small at 12 inches.

- **Regulation:** Sales counters and service counters shall comply with Section 11B-904.4.1 or 11B-904.4.2. CA T24 11B-904.4; CARM pg. 322.
- **Regulation:** A portion of the counter surface that is 36 inches long minimum and 34 inches high maximum shall be provided. CA T24 11B-904.4.2; CARM pg. 322.

Women's Restroom

Knee clearance under sink at 9 inches above the finish floor is too low at 9 inches.

- **Regulation:** 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. CA T24 11B-306.3.3; ADAS 306.3.3; CARM pg. 305.

Soap dispenser is too high at 41 inches above the finish floor.

- **Regulation:** Where towel or sanitary napkin dispensers, waste receptacles, or other accessories are provided in toilet facilities, at least one of each type shall be located on an accessible route. All operable parts, including coin slots, shall be 40 inches maximum above the finish floor. CA T24 11B-603.5; CARM pg. 382.

Men's Restroom

Soap dispenser is too high at 41 inches above the finish floor.

- Where towel or sanitary napkin dispensers, waste receptacles, or other accessories are provided in toilet facilities, at least one of each type shall be located on an accessible route. All operable parts, including coin slots, shall be 40 inches maximum above the finish floor. CA T24 11B-603.5; CARM pg. 382.

Depth of accessible urinal is too short at 13 inches.

- **Regulation:** Urinals shall be 13 ½ inches deep minimum measured from the outer face of the urinal rim to the back of the fixture. CA T24 11B-605.2; ADAS 605.2; CARM pg. 407.

Width of clear ground space in front of accessible urinal is too narrow at 29 inches.

- **Regulation:** The clear floor or ground space shall be 30 inches (762 mm) minimum by 48 inches (1219 mm) minimum. CA T24 11B-305.3; ADAS 305.3; CARM pg. 303.
- **Regulation:** A clear floor or ground space complying with Section 11B-305 positioned for forward approach shall be provided. CA 11B-605.3; ADAS 605.3; CARM pg. 407.

Facility Location: Hearings Office

Parking

Length of the van accessible parking space is too short at 16 feet.

- **Regulation:** Car and van parking spaces shall be 216 inches [18 feet] long minimum. CA T24 11B-502.2; CARM pg. 163.

Length of the access aisle adjacent to the van accessible parking space is too short at 16 feet.

- **Regulation:** Access aisles shall extend the full required length of the parking spaces they serve. CA T24 11B-502.3.2; ADAS 502.3.2; CARM pg. 165-167.

Slope of the curb ramp is too steep at 1:10.

- **Regulation:** The running slope of the curb ramp segments shall be in-line with the direction of sidewalk travel. Ramp runs shall have a running slope not steeper than 1:12. CA T24 11B-406.3.1; ADAS 405.2; CARM pg. 192.

Lobby

PUB 13 is placed too high at 6 feet above the finish floor.

- **Regulation:** Where a forward reach is unobstructed, the high forward reach shall be 48 inches maximum and the low forward reach shall be 15 inches minimum above the finish floor or ground. CA T24 11B-308.2.1; ADAS 11B-308.2.1; CARM pg. 309.

Restrooms

Sign thickness is too thick at ½ inch. Applies to Restrooms A and B.

- **Regulation:** The combined circle and triangle symbol shall consist of a circle symbol ¼ inch thick and 12 inches in diameter with a ¼ inch thick equilateral triangle symbol superimposed on and geometrically inscribed within the 12-inch diameter of the circle symbol. CA T24 11B-703.7.2.6.3; CARM pg. 376; CA T24 11B-703.7.2.6.3; CARM pg. 377; CA T24 11B-703.7.2.6.3; CARM pg. 377.

Soap dispenser is too high at 44 inches above the finish floor. Applies to Restrooms A and B.

- **Regulation:** Where towel or sanitary napkin dispensers, waste receptacles, or other accessories are provided in toilet facilities, at least one of each type shall be located on an accessible route. All operable parts, including coin slots, shall be 40 inches maximum above the finish floor. CA T24 11B-603.5; CARM pg. 382.

Hand dryer is too high at 41 inches above the finish floor. Applies to Restrooms A and B.

- **Regulation:** Where towel or sanitary napkin dispensers, waste receptacles, or other accessories are provided in toilet facilities, at least one of each type shall be located on an accessible route. All operable parts, including coin slots, shall be 40 inches maximum above the finish floor. CA T24 11B-603.5; CARM pg. 382.

Distance of toilet to side wall or partition measured from center-line of the toilet is too short at 10 inches. Applies to Restrooms A and B.

- **Regulation:** The water closet shall be positioned with a wall or partition to the rear and to one side. The center-line of the water closet shall be 17 inches minimum to 18 inches maximum from the side wall or partition. CA T24 11B-604.2; ADAS 604.2; CARM pg. 387.

Distance from front edge of toilet to toilet tissue dispenser is too short at 6 inches. Applies to Restrooms A and B.

- **Regulation:** Toilet paper dispensers shall comply with Section 11B-309.4 and shall be 7 inches minimum and 9 inches maximum in front of the water closet measured to the center-line of the dispenser. CA T24 11B-604.7.1; ADAS 604.7; CARM pg. 389.

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

Division 21 requires that Counties ensure non-English-speaking individuals receive effective interpretive services without undue delays.

Counties must collect primary language from applicants and recipients (primary language must be self-identified). Counties should use this information to determine 1) the number of public contact staff necessary to provide effective bilingual services, 2) how to best provide interpretive services absent bilingual staff, and 3) the language needs of individual applicants and recipients.

Counties must employ an appropriate number of certified bilingual public contact employees in each program and/or location serving a substantial number of non-English-speaking persons. Effective bilingual services must also be provided through an interpreter or other means in offices where bilingual staff are not required because non-English-speaking persons do not represent a substantial number. Translated written materials must be made available in individuals' primary languages if the materials are provided by CDSS in that language, and counties must ensure that information inserted in notices of action (NOA) is in individuals' primary languages.

Counties must also collect ethnic origin data from applicants and recipients.

Findings: Language Services

Does the County identify applicants'/recipients' language needs at first contact? How?

Yes. Applicants/recipients typically self-identify their language by requesting an interpreter in their language or via the primary language form or program application. Surveyed staff, especially lobby receptionists and navigators, use language cards when necessary to identify applicants'/recipients' language needs at first contact.

Does the County use a primary language form? Do applicants/recipients self-declare on the County's primary language form?

Yes. The County uses a County-generated form called "Language Preference and Assisted Listening and Reading Identification" (SC 106) to identify language needs and auxiliary aids/service needs. Applicants/recipients self-declare their preferences on the SC 106. In some cases, the SC 106 is completed by an employee on the participant's behalf (e.g., during phone appointments, if the applicant/recipient requests assistance with forms, or if the SC 106 is not available in the applicant's/recipient's primary language). The SC 106 is available in English, Arabic, Armenian, Chinese, Farsi, Hmong, Korean, Lao, Mien, Punjabi, Russian, Spanish, Tagalog, and Vietnamese.

Auditors found the SC 106 language and formatting to be unclear. The SC 106 contains a list of 14 yes/no statements that are not separated by headings, such that an individual completing the form may be confused about what services they are accepting or declining. The form also uses overly complex and indirect language to ask about primary written and spoken languages. Auditors viewed numerous cases where the SC 106 was filled out incorrectly, which supported the observation that the form creates confusion for applicants/recipients.

Unclear formatting may be especially confusing for the populations who most need the services offered on the SC 106, including participants with low literacy, visual/hearing impairments, learning disabilities, or no/limited English proficiency. It is important for forms of this nature to be clear and written in simple language to promote accurate and thorough completion.

Auditors also observed several instances where NEP/LEP applicants/recipients used an English SC 106, even when a translated version was available, suggesting that the translated versions of the SC 106 are not known to staff or not made readily available to applicants/recipients. The County should ensure that applicants/recipients can access the SC 106 in their primary language, where available. It may be effective for County policies to list the available SC 106 translations and reinforce staff obligations to provide the translated version to applicants/recipients.

Applicants/recipients are asked to complete the SC 106 at intake and at renewal, or yearly. Auditors observed that some applicants/recipients do not return the SC 106 at renewal, or they return a blank/incomplete form. Staff do not consistently follow up with applicants/recipients to collect the missing information. Without the completed SC 106, staff are unable to accurately document the applicant's/recipient's primary language, as required by Procedure 16-12D and in order to comply with civil rights obligations.

Are primary written and spoken languages documented?

Mostly. In CalFresh, primary language was correctly documented in nine of nine cases reviewed by Auditors. In CalWORKs, primary language was correctly documented in five of seven cases reviewed by Auditors. In CAPI, primary language was correctly

documented in five of seven cases reviewed by Auditors. In Program Integrity, primary language was correctly documented in ten of ten cases reviewed by Auditors.

Auditors observed that several documentation errors were attributable to mistakes in transferring primary language information from the written application and/or SC 106 into CalWIN. For example, one CalWORKs recipient's primary written language was documented in CalWIN as English, even though they indicated a need for written documents in Farsi on the SC 106 and program application. In another case, the primary written and spoken languages were documented in CalWIN as "other non-English" for a recipient whose primary language is Dari. Dari is an option on the drop-down menu in CalWIN and therefore should not be coded as "other non-English".

Relatedly, County documentation of primary language information is not clearly visible in all case records. Auditors reviewed several cases coded in CalWIN as "other non-English" but the name of the language was not recorded in CalWIN (such as in case comments). To identify the primary language, Auditors had to search out the SC 106 or program forms in a different application (FileNet). Additionally, because recipients do not reliably complete and return the SC 106 each year, Auditors found it necessary in some cases to look back multiple years to confirm the language. This is excessively time-intensive in light of clear documentation obligations and the importance of ensuring language access. Primary language information should be prominent and clearly visible in CalWIN so that workers can immediately identify the applicant's/recipient's language, in order to obtain and provide appropriate interpretive services.

Auditors observed inconsistent use of case comments to explain when and how applicants/recipients changed their primary language selection. Procedure 16-12 states that the County must document "any time the customer requests a change in either his/her oral or written language preference" (pg. 6). This documentation is also required by ACL 08-65. Auditors did not observe that this requirement is consistently followed, which creates confusion in the case record and may result in an interruption of services.

After it has been determined that an applicant/recipient is limited-English or non-English speaking, is there a County process for procuring an interpreter? Does the County have a contracted language line provider, a county interpreter list, or any other interpreter process?

Yes. According to Procedure 16-9, staff should first use a bilingual staff member to provide interpretive services, if available, but does not explain how staff locate or determine if a certified bilingual staff member is available (pg. 2); Div. 21-104(q). Procedure 16-9 also states that if bilingual staff are unavailable, staff should use a telephonic interpreter. The Civil Rights Coordinator reported that calls to the service center in Spanish and Russian are automatically assigned to bilingual workers, if available. Callers speaking other languages (i.e., languages without explicit options on the IVR System) are directed to choose any available language option and inform the worker of their language. That worker transfers the caller manually to an available bilingual staff member or assists them directly using a language line.

Supervisors are responsible for assigning tasks (such as renewals) to certified bilingual workers who speak the applicant's/recipient's language, or to other staff (who would use a language line) if bilingual workers are unavailable.

Procedure 16-12 states that the County provides interpretive services by assigning some cases to a certified bilingual worker (referred to as a special skills worker by the County) in CAPI and Welfare to Work/Employment Services for CalWORKs only.

Are non-English- or limited- English-speaking applicants/recipients provided bilingual services?

Mostly. Auditors found variation between programs in the degree to which LEP/NEP applicants/recipients are consistently provided bilingual services. In CalFresh, interpretive services were offered/provided in one of four LEP/NEP cases reviewed. In CalWORKs, interpretive services were offered/provided in four of five LEP/NEP cases reviewed. In CAPI, interpretive services were offered/provided in six of six LEP/NEP cases reviewed. In Program Integrity, interpretive services were offered/provided in nine of ten LEP/NEP cases reviewed.

Counties are unable to demonstrate compliance with language access obligations without identifying the certified bilingual staff providing the services or how services were otherwise provided by a qualified source. Auditors observed several case comments that failed to explain if and how bilingual services were provided to LEP/NEP applicants/recipients. This shortcoming was observed among case comments made by both certified bilingual staff and non-bilingual staff.

Auditors remind the County that "once the county has been informed that the client wants an interpreter, the county must offer and provide an interpreter at each substantive client contact." ACL 08-65. This requirement applies to all applicant/recipient whose primary spoken language is not English, including participants who may have a moderate degree of English proficiency.

Is there a delay in providing interpretive services? If so, why?

No. Staff appear proficient and accustomed to using telephonic interpreters with 83% of surveyed eligibility workers having utilized the language line in the past 12 months.

Procedure 16-9 contains instructions for contacting the County's two language line providers, CTS Language Link and Pacific Interpreters, Inc (pg. 3). Staff access telephonic interpreters directly. Procedure 16-9 also contains instructions for procuring an on-site interpreter through four vendors, Carmazzi Inc., Language World Services, Eastern European Interpreters, and All Global Solutions. Procedure 16-9 does not explain which languages are available from which service.

There are small disparities in the amount of time to provide interpretive services based on language. When asked how long it takes to obtain interpretive services on average, 60% of staff said less than three minutes, 33% said 3-10 minutes, 3% said 10-15

minutes, and 3% said more than 15 minutes. Several surveyed staff commented that it can take more time to find an interpreter for “less common” languages, such as Dari or Farsi. This is attributable to language line services having fewer interpreters available for these languages, resulting in longer wait times. Revising Procedure 16-9 to contain information about which languages are available from which service may avoid delays.

Does the County have adequate bilingual staffing levels?

Mostly. The County employs bilingual staff for threshold languages in all programs, with one exception.

According to the Annual Plan (Exhibit N), Korean is a threshold language in the CAPI program, making up 6.2% of cases and triggering the requirement to have Korean-speaking bilingual staff in public contact positions. Div. 21-21-115. The County does not have Korean bilingual staff according to the Annual Plan (Exhibit O).

When asked if there are sufficient bilingual public contact staff, 33% of surveyed supervisors were satisfied, 33% were neither satisfied nor dissatisfied, and 33% were dissatisfied. All surveyed supervisors identified an opportunity to benefit from additional Farsi-speaking bilingual staff. Auditors note the County employs bilingual staff in Farsi, which is a threshold language in Welfare to Work and CAPI.

Surveyed supervisors also identified opportunities to benefit from bilingual staff who speak Arabic, Chinese, Dari, Korean, Pashto, Punjabi, and Urdu. With the exception of Korean (addressed above), auditors note that these languages are not thresholds in any County program. The County may meet their obligation to provide interpretive services in non-threshold languages through contracted interpreters (such as language lines) or other non-employee interpreters. Div. 21-115.15. Auditors note the County employs bilingual staff in Arabic, Chinese, and Punjabi.

Are County interpreters certified?

Mostly. Staff who provide bilingual services are mostly certified. During case review, Auditors encountered one case where an LEP/NEP participant was provided bilingual services by a staff member who is not certified in their language. The County reported that the staff member speaks multiple languages and is certified in another language. County policy provides that staff can only be certified in one language.

Staff Survey comments also suggest that non-certified employees occasionally provide bilingual services. This may result from County policy that preferences bilingual staff to language line without stressing that only certified staff are allowed to interpret. Other factors could be limited available interpretive services, inadequate staff training on utilizing the language line, or inadequate staff training on the importance of appropriate and accurate interpretation.

Does the County allow minors to be interpreters? If so, under what circumstances?

Yes. Two Department policies, Procedure 16-9 and Procedure 16-12D, address the circumstances under which minors can be used as interpreters. However, these policies are inconsistent and neither policy addresses that minors may only be allowed to act *temporarily* as interpreters. Div. 21-115.16. Auditors noted the following inconsistencies:

- Whether use of minor interpreters is allowed only under extenuating circumstances or also at the specific request of the applicant/recipient;
- What qualifies as an extenuating circumstance; and
- Whether, when, and where documentation of use of a minor interpreter is required.

Auditors did not encounter any instances where a minor was used as an interpreter during Case Review.

Does the County allow applicants/recipients to provide their own interpreters?

Yes. Procedure 16-09 provides “Applicants/recipients may provide their own interpreter but are not required to do so. It is preferable to use our own interpreters to avoid problems with miscommunication.”

Procedure 16-09 and Procedure 16-12 address use of applicant/recipient-provided interpreters. Procedure 16-12 requires the following documentation when a recipient-provided interpreter is used: that the applicant/recipient authorized the release of their confidential information to the interpreter; that the interpreter was made aware that the information being given is confidential and is not to be discussed outside of the interview; and that the applicant/recipient was advised that there may be potential problems of ineffective communication. Procedure 16-09 does not address documentation obligations and does not refer to Procedure 16-12, where documentation is addressed.

How does the County document interpretive services provided using bilingual staff/interpretive services? How does the County document interpretive services provided using a client-provided interpreter?

Auditors observed several interlinked documentation issues.

Auditors found that documentation practices are inconsistent. Auditors encountered numerous cases across programs lacking clear documentation regarding whether and how interpretive services were provided. County policies, Procedure 16-09 and Procedure 16-12, addressing documentation are not comprehensive and contain inconsistencies. The Auditors observed that overreliance on the SC 106 for documentation underlies the above concerns.

Procedure 16-09 says “always document [language services] by completing an SC106 when using interpreter services, even over the telephone” (pg. 2). Procedure 16-09 says to use the SC 106 to document the applicant’s/recipient’s consent to release information

to the interpretive service, the interpreter's confidentiality statement, and the language that was requested and used during the appointment (pg. 4). Procedure 16-12D states that initial use of a language line must be documented in the SC 106 to include the name of the provider and the language of interpretation (pg. 7). If a different provider is used, it must be documented; if the same provider is used, it does not require additional documentation. Auditors did not see any examples of the SC 106 used to document use of contracted interpretive services.

The Quick Reference Guide Procedure 16-12D also states that the method of providing interpretive services and the language in which the conversation was conducted must appear in narrative case comments if services are not provided by bilingual worker (pg. 8). Auditors observed that case comments were used to document interpretive services. It is unclear whether this requirement is *in addition to* or *an alternative for* the obligation to document using the SC 106.

To document interpretive services provided by an applicant/recipient-provided interpreter, Procedure 16-12D requires the SC 106 to document that the applicant's/recipient's release of confidentiality to the interpreter, that the applicant/recipient was informed about potential problems of ineffective communication, that the applicant/recipient was offered free interpretive services, and that the applicant/recipient was informed of their availability to switch to a County-provided interpreter at any time. Procedure 16-12D states that once that information is documented, the County does not have to inform the applicant/recipient of these disclosures for another year unless another interpreter is used.

Auditors have the following concerns/feedback for the County:

- Instructions for documentation are dispersed between two procedures.
- Requiring use of the SC 106 for telephonic interpreters adds administrative burdens (scanning and uploading signed documents) which may hinder appropriate documentation. This step may be especially burdensome for staff who are teleworking without access to appropriate equipment.
- Scanned copies of the applicant's/recipient's SC 106 are stored in FileNet. Relying on FileNet to verify what interpreter is on file or to perform quality control checks is cumbersome. The platform does not allow eligibility workers to find and verify information about how the County has provided interpretive services at previous contacts without undue delays. Using FileNet to perform quality control checks is much less efficient than reviewing case comments, which are accessible on one screen. Documenting use of interpretive services in case comments facilitates supervisors' ability to conduct quality control assessments, which are encouraged.
- The SC 106 is used for too many purposes, which contributes to this form being confusing.
- Auditors found the SC 106 to be confusing (addressed above). Narrowing the uses of the form may make it less confusing and more helpful in fulfilling its primary purpose.

- Consent for release of information or confidentiality agreements are not required for contracted interpretive services if the County's contract includes language protecting the client's privacy and confidentiality. ACL 08-65.

Does the County ensure that applicant/recipient-provided interpreters understand what is being interpreted?

Mostly. According to staff surveys, almost all eligibility workers (93%) check for understanding of what is being interpreted. Staff check for understanding in the following ways: by asking the interpreter to interpret everything said by the applicant/recipient; by asking the applicant/recipient and interpreter to confirm whether they understood; by providing many opportunities for the applicant/recipient and interpreter to ask any questions; by speaking slowly and clearly to allow time for interpretation; by listening for verbal cues of confusion; and checking for comprehension by requesting that the interpreter repeat back what the staff person said.

Two surveyed eligibility workers said they were unsure or did not know how to ensure that applicant/recipient-provided interpreters understand what is being interpreted.

County policies do not address how to ensure that applicant/recipient-provided interpreters understand what is being interpreted. Training (including peer-to-peer training) and/or adding tips in County policies may help close small gaps in staff knowledge.

Does the County use CDSS-translated forms in applicant's/recipient's primary language?

Yes. According to the Annual Plan, the County maintains a Client Correspondence Index of translated forms (pg. 12). The Index is a web-based application that links to translated forms on the CDSS website and provides forms translated by the County. Staff use the Index to access translated forms as needed. Staff surveys confirm that eligibility workers provide CDSS-translated forms to applicants/recipients in their primary languages.

The County's Client Correspondence team is also responsible for identifying documents that need translations.

When limited- or non-English-speaking clients receive Notices of Action (NOA), is the standard NOA form provided in clients' primary written languages?

Sometimes. According to staff surveys, NOAs are provided in the applicant's/recipient's primary language *if available* in that language. The Notice of Language Services (GEN 1365) is sent out with all batch mailing so that applicants/recipients can access language assistance when NOAs (and other correspondence) are not provided in their primary language.

Is the information that is to be inserted into NOA translated into a recipient's primary language? If language to be inserted into NOA is not available, is there a procedure to ensure information translated to recipient's primary language?

Yes. According to the Annual Plan, information that is to be inserted into NOAs is translated by bilingual staff or, if none are available, by an interpreting vendor (pg. 12).

Findings: Ethnic Origin Information

The County documents ethnic origin information when it is provided by the applicant/recipient. However, there are disparities across programs. Ethnic origin was unable to be determined in 35% of CalFresh cases and 20% of CalWORKs cases, compared to 4% of CAPI cases (Annual Plan, pg. 9). Applicants/recipients may decline to provide ethnic origin information. In these situations, the County does not follow-up with the applicant/recipient to collect the missing information.

The CRC explained that waivers of intake interview requirements during Covid-19 may have contributed to this gap since applications submitted without ethnic origin information can still be approved if they are otherwise complete.

Corrective Action

Identification of primary language: The County shall collect primary language data for each applicant/recipient. Div. 21-201.21. As part of the CAP, the County shall:

- Update the SOC 106 primary language form.
- Develop protocol for following-up with applicants/recipients when their SC 106 is incomplete or missing at each intake/recertification. Inform staff of the new protocol.

Documentation of primary language: The County shall ensure that case records identify applicants'/recipients' ethnic origin and primary language. Div. 21-201.21. As part of the CAP, the County shall:

- Return to case files reviewed during the Review to correct records that contained errors in the documentation of primary language.
- Select a sample of 30 "other-non English" cases from CDSS-covered programs to spot-check whether those cases are correctly coded and whether the language is documented in CalWIN. If over 25% are incorrectly coded, create a plan for verifying coding for all other-non English cases.

Interpreter Services: The County must offer and provide free interpreter services using qualified interpreters. Div. 21-104(q)(1), Div. 21-115. As a part of the CAP, the County shall:

- Revise policies addressing language access to incorporate the following:

- An NEP/LEP applicant/recipient is not required to affirmatively request an interpreter. The County is obligated to offer free interpretive services, regardless of whether the applicant/recipient affirmatively requests interpretive services.
- Staff should ensure that applicant/recipient-provided interpreters understand what is being interpreted.
- Train staff on revised policies

Documentation that bilingual services were provided: 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. To ensure compliance with documentation requirements, the County shall:

- Develop and provide standardized language or other templates to staff in all CDSS-covered programs to assist with consistent documentation for: primary language identification, method of providing interpretive services, and procedure followed when an applicant/recipient-provided interpreter is used. Instruct staff on where to insert language in case comments so that documentation is easily found by supervisors and other staff. The following information should be contained in standardized language:
 - Free interpretive services were offered;
 - Whether the applicant/recipient accepted or declined free interpretive services;
 - Method of providing interpretive services (i.e., certified bilingual staff and name; or telephone interpretive services vendor name);
 - Applicant/recipient preferred to use their own interpreter, staff explained the potential problems for ineffective communication related to the use of their own interpreter, and obtained a signed confidentiality agreement; and
 - What language the services were provided in.

Bilingual Staff: 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). As part of the CAP, the County shall:

- Address whether bilingual staffing for Korean in CAPI is sufficient. Provide calculations to demonstrate if bilingual staffing is required, or if the computation results in a need for less than one full-time position, such that the County may provide interpretive services by another means. Div. 21-115.141.

Temporary Use of a Minors as an Interpreter: The County shall only allow the use of a minor (under the age of 18 years) to temporarily act as an interpreter under

extenuating circumstances or at the specific request of the applicant/recipient. Div. 21-115.16. When a minor (under 18 years of age) is used as an interpreter, the County shall document the circumstances requiring temporary use of a minor interpreter in the case record. Div. 21-116.22. In the CAP, the County shall revise the policies addressing temporary use of a minor as an interpreter for alignment with Division 21. Auditors recommend addressing consolidating these procedures so that rules relating to interpretation are addressed in one policy document only. Additional reference materials or job aids addressing this issue should refer back to the official policy.

Recommendations

Bilingual Staff: The Review uncovered that non-certified bilingual staff are providing interpretive services. The County should consider:

- Reminding non-certified bilingual to use the language line, even if they speak the applicant's/recipient's language.
- Reminding staff of the certification process.
- Pursuing opportunities to certify additional bilingual staff so that the County can more fully leverage the skills of its employees.
- Collecting feedback from non-certified bilingual staff who use the language line to provide interpretive services. Their use of the language line presents an opportunity to collect feedback on the quality of contracted interpretive services, which could inform vendor selection.

Effective Services: Given supervisor-identified language services needs for languages that do not meet the required 5% threshold (Arabic, Chinese, Dari, Pashto, Punjabi, and Urdu), the County may consider further surveying supervisors (i.e., Are there problems of ineffective communication with language line contractors, such that bilingual staff provide a better quality service? Is there another reason that use of language lines are an ineffective substitute for bilingual staffing? Do staff need more training to effectively use the language line? Are resources for obtaining written translations inadequate for these languages?).

Auditors remind the County that bilingual staffing is one component of providing effective and compliant language services. The County must be able to provide equally effective services through various means of interpretation because of the impossibility of employing bilingual staff in all languages spoken by applicants/recipients.

Auditors encourage the County to engage community-based organizations to inform and support County language access efforts. Organizations such as REDA Center and Al-Misbaah may be relevant to consult in considering how to expand and improve language services for groups that were observed to face more challenges with language access.

Applicant/recipient provided interpreters: [ACL 8-65](#) addresses CWDs' obligations to provide certain admonishments to an applicant/recipient who chooses to provide their

own interpreter (“admonishments” is used broadly to refer to informing the applicant/recipient of their right to free interpretive services, of the potential problems of using their own interpreter, of the need to disclose confidential information, of the availability of County-provided interpretive services when their interpreter is unavailable, and of their right to switch to a County-provided interpreter at any time). CWDs are required to inform applicants/recipients of this information yearly and document the case record. ACL 08-65 states that “The County does not have to inform the client again until reverification.” Auditors found that County policies were consistent with ACL 08-65’s requirements to provide this information on a yearly basis. However, Auditors encourage the County to provide this information more frequently, such as at each occurrence when an applicant/recipient-provided interpreter is used.

The requirement in ACL 08-65 reflects minimum obligations. Auditors believe there are numerous reasons why it is prudent and beneficial for more frequent reminders, including: many NEP/LEP persons may be unaware of their right to free interpretive services; applicants/recipients may have forgotten the admonishments with the passage of time; when an applicant/recipient is not initially correctly informed an opportunity to identify and rectify the issue is missed; and the confusing nature of the SC 106 form (addressed above) which contains some of these admonishments. Additionally, if County employees experience difficulty understanding the client-provided interpreter or believe there may be misunderstandings, it is be appropriate to provide the admonishments more frequently. If the County decides to pursue this policy change, Auditors recommend revising relevant policies and providing staff training on this policy change.

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

Division 21 requires that Counties ensure individuals with disabilities receive effective communication and disability-related services without undue delays.

Counties must provide auxiliary aids and services, including braille material, taped text, qualified interpreters, large print materials, telecommunication devices for the deaf (TDD), and other effective aids and services for persons with hearing, speech, vision, manual skills and other disabilities.

Counties have a responsibility to ensure that people with disabilities are not excluded from participation in or denied the benefits of the County’s programs, services or activities, or otherwise subject to discrimination. This includes the obligation to provide reasonable accommodations to qualified individuals with disabilities.

Findings: Auxiliary Aids and Services for Persons with Disabilities

Does the County have a policy and/or procedure for assisting applicants/recipients with a disability? Does the County have a policy describing how it provides reasonable accommodation?

Yes. The County has two procedures for assisting applicants/recipients with a disability. Procedure 16-11, "Alternative Services for Customers with Disabilities," describes the County's protocol for assisting applicants/recipients with disabilities. While this policy addresses reasonable accommodations, it does not address all areas addressed in ACL 19-45 and therefore does not fully comply with the that letter's requirement to adopt a written policy detailing how the County will accommodate individuals with disabilities.

Procedure 16-12D, "Language and Auxiliary Aid Requirements for Customers," describes the County's obligation to provide auxiliary aids and services and documentation requirements for information related to requests for alternate services from individuals with visual or hearing impairments.

The Civil Rights FAQ brochure for staff is a quick-reference guide addressing identifying disability-related needs, assisting individuals with disabilities, and other related issues.

Does the County provide auxiliary aids and services, TDD's, and/or other effective aids and services for persons with impaired hearing, speech, vision or manual skills, including braille material, taped text, and/or large print materials (excluding the PUB 13)?

Sometimes. Procedure 16-12D, "Language and Auxiliary Aid Requirements for Customers," states the County "shall provide auxiliary aids and services to persons who are deaf or hearing impaired, or persons with impaired speech, vision, or manual skills where necessary to afford them an equal opportunity to participate in and enjoy the benefits and services of programs or activities." The policy lists examples of auxiliary aids but does not explain how staff access or request available or other auxiliary aids such as American Sign Language (ASL) interpreters or braille transcriptions, while serving clients over the phone. The policy does not specify what auxiliary aids are suitable/available for over-the-phone or in-person communication. The Procedure does not suggest appropriate substitutes for phone communication when in-person auxiliary aids are unavailable.

Staff awareness of auxiliary aids and tools is mixed. When asked what auxiliary aids and services are available to assist clients with disabilities, 12% of surveyed staff said they were unsure or that none were available. Other staff demonstrated a strong awareness of auxiliary aids, such as braille, large print, and audio tape.

When asked what auxiliary aids staff provided to applicants/recipients within the last 12 months, 65% of surveyed staff said they have not provided auxiliary aids or services in the last 12 months. Several staff connected this to the fact that they have been serving customers over the phone due to Covid-19. Of staff who provided auxiliary aids or

services in the last 12 months, staff exclusively mentioned relay services or large print materials.

Auditors remind the County that their obligation to ensure effective communication and provide auxiliary aids and services is unchanged regardless of remote or in-person services. The County must ensure it can provide effective communication in whichever manner the County is interacting with individuals with disabilities (currently, most clients are served via phone and digital services), and that staff understand and can access aids to serve applicants/recipients. For example, several surveyed staff identified a magnifying glass as a County-provided in-person auxiliary aid. With office closures and the shift to telephone appointments, the County may no longer be able to provide a magnifying glass and must contemplate what aids can be provided to assist applicants/recipients in their homes. Though the operating circumstances have changed, disabilities-related needs, and particularly those already known to the County, persist.

Does the County identify an applicant/recipient with a disability? Does the County assist applicants/recipients to self-identify a disability?

Sometimes. Procedure 16-11 does not address how the County identifies applicants/recipients with disabilities. However, 65% of surveyed staff responded that the County helps applicants to self-identify disabilities, indicating that staff relies on the SC 106 form, reasonable accommodation requests, disclosure of a disability, or use of the ADA window/counter in office locations. In programs such as CalWORKs, where information related to disabilities may be required for eligibility reasons, staff also use eligibility information to identify disabilities.

No surveyed staff reported using responses on application/renewal forms to identify disabilities. For example, the SAWS 2 Plus form (used for CalFresh and CalWORKs applicants) asks several questions that elicit information about a disability. The form asks the following questions: “if you are deaf or hard of hearing please check here;” and “do you have a disability and need help applying?” and “please check this box if you need other arrangements [for the application interview] due to a disability.” The County should use any affirmative responses provided in response to these questions to identify individuals with disabilities. The County could also establish a practice to review these questions with *all* applicants to provide additional opportunity for staff to identify disabilities.

Staff survey results indicate that staff are not trained to identify disabilities (e.g., based on observations) unless the applicant/recipient discloses a disability, which may tend to exclude particularly vulnerable persons with disabilities.

Is there an established process for offering screening for disabilities, including screening for learning disabilities?

Not consistently across programs. According to staff surveys, applicants/recipients in the Welfare to Work (WTW) program complete the Online CalWORKs Appraisal Tool (OCAT), which screens for learning disabilities and other disabilities.

Procedure 16-11 does not mention or provide any information about screening for learning disabilities or other disabilities. There is no explanation of how, if at all, results from WTW screening should be used to offer auxiliary aids and services and/or reasonable accommodations.

Does the County offer reasonable accommodations to applicants/recipients with a disability?

No. Procedure 16-11 states a “reasonable accommodation is offered and provided to customers as needed.” However, other than providing ASL interpretation, Auditors did not see evidence during CalFresh, CalWORKs, or CAPI case reviews that the County is offering or providing reasonable accommodations. Auditors reviewed several cases in which a disability was documented but there was no indication that the individual had been offered an accommodation and/or that an accommodation was being provided. This tends to suggest that when staff are aware of a disability, they do not consistently offer or document that a reasonable accommodation was offered, accepted, declined, denied, and/or provided.

When asked to provide three cases involving a reasonable accommodation for Auditors to review, Program Integrity did not identify any case with a documented disability and/or reasonable accommodation request. This suggests no action is undertaken in fraud investigations to identify and accommodate individuals with disabilities, which may be exacerbated by the lack of pre-existing documentation of reasonable accommodation needs. Auditors do not conflate an absence of records of a disability with an absence of individuals needing disability-related assistance based on other findings.

Individuals with disabilities are overrepresented in the population receiving social services, in part because there are programs designed specifically to serve individuals with disabilities. Without effective communication or reasonable accommodation standards and provisions in place, individuals with disabilities may also be overrepresented in cases referred to fraud due to challenges understanding and/or complying with program requirements. These patterns make it all the more important that Program Integrity meet its obligation to offer and document reasonable accommodation.

County policies do not address the concept of primary consideration. Primary consideration means that the County must honor the choice of the individual with a disability, with certain exceptions. The individual with a disability is in the best position to

determine what type of aid or service will be effective. Without integrating this concept into policies and staff training, the County risks failing to accommodate an individual with a disability.

Is the County appropriately documenting disabilities and reasonable accommodation requests?

No. The County lacks comprehensive policies and staff training addressing the County's documentation obligations.

- Procedure 16-12 requires documentation of requests for alternative services for individuals with disabilities and what services were provided or denied. The policy requires this documentation at inception of the case file and renewal or when requested.
- Procedure 16-11 requires case comments for reasonable accommodations, without documenting a diagnosis.
- Special Accommodation CAT requires use of a visual flag to identify participants in need of accommodations. The following information must be documented: effective begin date and type of accommodation selected from a pre-set list: audio accommodation; language accommodation; literacy; physical accommodation; visual accommodation.
- The SC 106 identifies need for auxiliary aids/services and must be completed at intake and renewal.

Procedures 16-11 and 16-12 create documentation requirements without explaining where staff should document required information creating confusion and inconsistent documentation practices. During case review staff had to search case records extensively in order to locate information about an individual's requested accommodation. Auditors also observed that a CalWORKs supervisor was unable to locate the Special Accommodation flag in case records without assistance from the CRC. This is concerning as supervisors should be equipped to help staff correctly use the Special Accommodation flag and conduct quality control checks of applicant/recipient case documentation.

Results from case reviews demonstrate inconsistent use of the Special Accommodation flag and inadequate staff support and training.

Auditors found little documentation of disabilities and reasonable accommodation during case reviews. In CalFresh, one of four ADA cases reviewed lacked the Special Accommodation flag. Two of four CalFresh ADA cases reviewed were flagged but lacked a description of the specific accommodation needed by the applicant/recipient. In CalWORKs, two of two ADA cases reviewed were flagged but lacked a description of the specific accommodation needed by the applicant/recipient. In CAPI, four of seven ADA cases reviewed lacked the Special Accommodation flag. Three of seven CAPI ADA cases were flagged but lacked a description of the specific accommodation needed by the applicant/recipient.

Auditors observed nine cases across programs that were flagged because an individual had disclosed a disability but lacked documentation to explain whether the individual had requested or been offered an accommodation, what accommodation was needed, or if the accommodation was provided. The five pre-set options in CalWIN are insufficient on their own to explain what accommodation is necessary; they *must* be accompanied by a written description of the accommodation needed in order to be useful in providing reasonable accommodation. When documented information is not prominently displayed and uniformly located, essential information can be overlooked and interrupt accommodations for individuals with disabilities, resulting in disability discrimination.

As noted above, auditors found deficiencies in CAPI case records in the use of the Special Accommodation flag and descriptions of the specific accommodation needed. The County explained that they provide high-touch, individualized assistance to all CAPI applicants/recipients. Even if assistance with forms is guaranteed in the CAPI program, appropriately documenting an individual's disability-related needs is still important as that individual could participate in other County programs. It is imperative that information about reasonable accommodations travel between programs.

Though Medi-Cal is not a program within CDSS' authority, Auditors remind the County that ACL 19-45 was jointly issued by CDSS and the Department of Health Care Services (DHCS). This is relevant because County CalWIN case records are shared between CDSS and DHCS programs. If a Medi-Cal worker fails to adequately document a disability-related need, this impacts the ability of CDSS programs to meet their obligations. This arose when Auditors observed a CAPI case record with a Special Accommodation flag raised by the Medi-Cal worker with no documentation of the type of accommodation needed. As a result, there is no way to discern the accommodation from the case record without requiring the recipient to re-request the accommodation (risking ineffective communication if the unknown accommodation is communication-related) or requesting information from the Medi-Cal worker and relying upon their memory.

Corrective Action

Auxiliary Aids: The County shall ensure the availability of auxiliary aids and services to persons who are deaf or hearing impaired, or persons with impaired speech, vision, or manual skills where necessary to afford such persons an equal opportunity to access program services. Div. 21-115.41. As part of the CAP, the County shall:

- Created an updated inventory of all auxiliary aids, including instructions of how to obtain/procure/provide them. The description should explain which aids are suitable for over-the-phone or in-person communication.

Documentation of a Disability: The County shall ensure that an applicant's/recipients case record identifies the applicant/recipient as disabled. The County shall document an applicant's/recipients 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. The County shall document all requests for reasonable accommodations and subsequent actions taken by CWD staff in the individual's case file. ACL 19-45. As a part of the CAP, the County shall:

- Return to case files reviewed during the Review to correct records that contained errors in the documentation of disability and/or reasonable accommodation.

Special Accommodation Flags: 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. To the extent that the County continues to rely on Special Accommodation flags to identify where an accommodation is necessary, the County must develop a protocol for documenting the specific nature of reasonable accommodation requests. The County must require documentation of the reason for the flag to be raised. The CAP shall submit this protocol. If this protocol is not integrated into the Reasonable Accommodation Policy, the protocol should be referenced in that policy. The County must train staff in this policy to ensure consistent application.

Reasonable Accommodation Policy: The County shall adopt a written policy detailing how they will comply with the requirements set forth in ACL 19-45. This policy shall be submitted to CDSS annually as part of each CWD's County Civil Rights Plan pursuant to CDSS MPP Section 21-201.22. ACL 19-45. As a part of the CAP, the County shall:

- Submit a draft Reasonable Accommodation Policy for CDSS' review. This policy must incorporate all areas addressed by ACL 19-45 that are missing from Procedure 16-11, including defining who is protected, procedures for denying accommodation requests, instructions for documenting requests, and service animals. To the extent programs have different practices (such as varying practices for identifying disabilities), the policy shall contain program-specific guidance. The County is encouraged to consult the resources provided in section VI of ACL 19-45.
- Submit a revised Civil Rights FAQ brochure that is consistent with the revised Reasonable Accommodation Policy.

Recommendations

Documentation of a Disability: The County should consider undertaking regular quality control measures to ensure proper documentation of disability and reasonable accommodation.

Procedures 16-11 and 16-12 do not provide templates or boilerplate language that staff can use to document required information related to reasonable accommodation, which could assist ensure consistency and ensure that all required information is present.

Reasonable Accommodation Policy: Auditors recommend consolidating the portion of Procedure 16-12D related to auxiliary aids and Procedure 16-11 so that all information on assisting individuals with disabilities is located in a single written policy.

VII. STAFF DEVELOPMENT AND TRAINING

Counties are required to provide training on civil rights, cultural awareness, Section 504 of the Rehabilitation Act of 1973 (Section 504), and the ADA for all public contact employees, including familiarization with the CDSS discrimination complaint process and all other requirements of Division 21. The information should be conveyed at employee orientation, as well in continuing training programs.

Findings: Staff Training

Do employees receive continued Division 21 Training?

Yes. Staff receive mandatory civil rights training online at induction and annually thereafter. The CRC informed Auditors that though training was available on the County's online learning platform in 2020, it was not mandatory due to a systems error. Eighty-five percent of surveyed staff reported that they completed Annual Training in 2020, while 15% surveyed staff did not remember when they received their last training or stated that it was not within the last year.

Does the County provide employees with Cultural Awareness Training?

Yes. Eighty-two percent of surveyed staff report having received cultural awareness training. Eighteen percent of surveyed staff were unsure if they had received cultural awareness training. Staff state they receive this training annually with the civil rights training. However, the CRC informed Auditors that cultural awareness training is not offered on a regular schedule and the last offering was about two years ago.

Are the employees knowledgeable about predominant cultural groups receiving services in their area?

Yes. Most surveyed staff (88%) reporting being somewhat familiar, very familiar, or extremely familiar with the predominant cultural groups receiving services in the area. However, 12% of staff report that they are not so familiar or not at all familiar with the predominant cultural groups receiving services in the area.

The County's cultural awareness training is not specific to any groups or populations. Instead, the training is focused on concepts like bias and cultural humility. Culture-specific information is delivered through a system of civil rights advisory groups (referred to as caucuses) made up of County employees representing those groups. To the extent that caucuses are the primary mechanism of providing culture-specific training, it may create knowledge gaps if not all prominent cultural groups in the County are represented by the civil rights caucuses.

Auditors observed less familiarity with languages and cultures of the Middle East, North Africa, and South Asia (MENASA) region during case reviews and in staff surveys, overlooking differences that impede understanding (for example, Arabic and Pashto languages were conflated, and Farsi and Dari are understood by some to be the same language). This underscores how cultural awareness impacts service delivery.

Are employees trained in Section 504, ADA requirements, and disability awareness?

Yes. Ninety one percent of surveyed staff report receiving training on disability etiquette, disability awareness, or similar training.

According to the CRC, “high-level” training on ADA requirements is provided to staff. Relevant training was provided during the CalFresh expansion to Supplemental Security Income (SSI) recipients in 2019 but has not been provided since.

The CRC has not received training on Section 504 and ADA requirements since assuming this role. Ensuring the CRC is appropriately trained is of paramount importance because they are primarily responsible for ensuring compliance with civil rights laws and regulations, which sometimes change markedly and rapidly.

Does the County provide training on identifying applicants/recipients with disabilities?

Yes. The County provides limited training on identifying applicants/recipients with disabilities in the Annual Training. However, Auditors reviewed Annual Training materials and did not find this topic to be addressed in a manner that promotes and supports staff understanding and application.

Seventy nine percent of surveyed staff said that the County has a written policy/procedure for identifying applicants/recipients with disabilities. The only applicable policy, Procedure 16-11, does not address how to *identify* when an applicant/recipient is disabled. Based on this response, Auditors find that staff are unfamiliar with the substance of County policies.

Do employees receive training on reasonable accommodations for applicants/recipients with disabilities?

Yes. Ninety one percent of surveyed staff have received training on providing reasonable accommodation to applicants/recipients with disabilities while 9% were uncertain. According to the CRC, this training was “high-level”. Reasonable accommodations are a nuanced subject requiring detailed, interactive training to be effective. Auditors find training in this area is insufficient, as the Review did not demonstrate that the County consistently accommodates individuals with disabilities (see Section VI) and because there is not a complete Reasonable Accommodation policy to clearly communicate staff obligations.

Do employees understand the County's policy regarding an applicant's/recipient's right to a reasonable accommodation? Do the employees understand the County's obligation to provide reasonable accommodation to applicants/recipients with disabilities?

No. Though 91% of staff report receiving reasonable accommodation training, Auditors did not observe evidence that staff consistently offer, provide, or document reasonable accommodation (see Section VI). Based on the gap between practice and policy, Auditors find that staff are unfamiliar with the substance of County policy, Procedure 16-11, and that staff are not fully aware of the County's obligation to provide reasonable accommodation.

Does the County provide other civil rights related training?

Yes. The County provides robust staff training on Sexual Orientation and Gender Identity and Expression (SOGIE). This training was designed to enable the County to collect SOGIE demographic information required by Assembly Bill 959 using form CW 2223.

The training equips staff with the concepts, vocabulary necessary to sensitively conduct the questionnaire and respectfully interact with all applicants/recipients, especially individuals who identify as transgender and non-binary.

Corrective Action

Cultural Awareness Training: 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:

- Submit a plan to develop training that addresses the predominant cultural groups in Sacramento County, including information about national origin, primary language, race, ethnicity, and religion.
 - This training should be responsive to knowledge gaps identified in this Report, as well as others identified by the County.
 - The plan should explain how the training creation process will involve staff members belonging to different cultural groups. Auditors encourage engaging representatives from community-based organizations (such as organizations mentioned in Section V) to speak about their culture and languages as a component of cultural awareness training in areas where Auditors observed less familiarity.

Division 21, Civil Rights Training: 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 a best practice, ongoing training should be required on an annual basis. As part of the CAP, the County shall:

- Provide revised staff civil rights training materials to address concerns and deficiencies identified in this Report.
- When revising the induction and annual civil rights training PowerPoints, the County shall:
 - Clearly state that interpretive services must be affirmatively offered and provided if an applicant's/recipient's primary language is not English, emphasizing that it is not the obligation of the applicant/recipient to request an interpreter.
 - Clearly require that interpretive services be documented for every substantive contact.
 - Include the concept of primary consideration and effective communication in sections on auxiliary aids and reasonable accommodation.
 - Provide training on when to use the Special Accommodation flag and how to document the accommodation.
 - Provide examples of Reasonable Accommodation requests that constitute changes to policies or procedures.
 - Make clear that auxiliary aids such as braille or ASL interpreters are *options* available, not blanket requirements appropriate for all individuals with visual or hearing impairments, respectively.
 - Emphasize staff's role in handling discrimination complaints in-person *and* over the phone.
 - Train staff on the protected bases to improve their ability to recognize discrimination complaints.
- Update the staff FAQ brochure to reflect revised policies and staff training.

Reasonable Accommodation Training: The County shall train public contact staff, program managers, and supervisors upon hire and, at a minimum, annually thereafter, on the CWD's policies for ensuring compliance with disability nondiscrimination laws and on providing reasonable accommodations for people with disabilities. ACL 19-45, Section I. As part of the CAP, the County shall:

- Submit a plan to train staff on the revised Reasonable Accommodation Policy (see Section VI) after the Policy is approved by CDSS.
 - Training should incorporate feedback provided by Auditors during the Review.
 - Training should incorporate training on the Special Accommodation flag so that staff are aware of when and how to use Special Accommodation flags in CalWIN to identify applicants/recipients with disabilities.

Recommendations

Civil Rights Advisory Groups: The County uses system of civil rights caucuses to ensure implementation of nondiscrimination laws and promote culturally competent

services. Caucuses include the African American Caucus, Latino Caucus, LGBTQ Caucus, Native American Caucus, Asian and Pacific Islander Caucus. Auditors observed caucuses to be a strong support structure to facilitate culturally competent service provision for applicants/recipients. Auditors see an opportunity to consider forming form new caucus(es) to support additional predominant cultural groups represented in the County. Auditors encourage the County to consider feedback provided in this Report to improve services, especially language services. Creating new caucuses to track with changes and development in County population is especially important if caucuses continue to be the main vehicle for providing cultural awareness training to employees. Auditors recommend using caucuses as an advisory to relevant CAP activities, including around interpretive services practices, cultural awareness training, and establishing connections with community groups.

Reasonable Accommodation Training: Training on reasonable accommodation from CDSS is available online (the [training is posted on YouTube](#) and the [presentation slides are posted on the CDSS website](#)). This training was provided during the CalFresh expansion to SSI recipients in 2019. Auditors note this training is a resource for the County in developing its own reasonable accommodation staff training.

VIII. DISCRIMINATION COMPLAINT PROCEDURES

Counties are required to maintain a process for addressing all discrimination complaints. Counties must track discrimination complaints by using a control log in which all relevant information is kept, including when the complaint was received, the complainant's name, programs implicated, the basis of discrimination, and complaint resolution.

Findings: Discrimination Complaint Process

Can employees easily identify discrimination complaints?

Yes, in most responses. Surveyed staff were presented with four theoretical complaints and asked to indicate which were examples of civil rights complaints (language of the four sample complaints can be found in Appendix II).

- Complaint 1: Example of a discrimination complaint; selected by 91% of surveyed staff
- Complaint 2: Not an example of a discrimination complaint; selected by 29% of surveyed staff
- Complaint 3: Example of a discrimination complaint; selected by 65% of surveyed staff
- Complaint 4: Example of a discrimination complaint; selected by 85% of surveyed staff

It is important for staff to be able to identify discrimination complaints so that they know when to assist an applicant/recipient in filing a discrimination complaint. Auditors note that overinclusion is preferable to being overly narrow. Failing to identify civil rights complaints is a larger concern.

Because 29% of staff misidentified Complaint 2 as a discrimination complaint, Auditors can infer that staff do not consistently understand that a protected basis is a necessary element of a discrimination complaint. Only 65% of staff recognized Complaint 3 as a discrimination complaint, which may demonstrate that staff may not understand that failure to provide interpretive services is a civil rights violation. Reinforcing these concepts in staff training can help improve staff ability to identify discrimination complaints.

Can employees identify the Civil Rights Coordinator?

Yes. Surveyed staff can identify the Civil Rights Coordinator, Elvia Leyva.

Do employees understand the County policy regarding an applicant's/recipient's rights, and the procedure to follow when receiving a discrimination complaint?

Not consistently. Department Procedure 16-6, "Prohibited Discriminatory Practices and Applicant/Recipient Complaint Procedure" and the Civil Rights FAQ Brochure for Employees (Exhibit K of the Annual Plan) instruct staff to provide the complaint form to the complainant, to forward the complaint to the CRC, and to advise the complainant of their right to request an administrative hearing. However, these materials contain inconsistent guidance in the following areas:

- Whether the employee provides the complainant with the CRC's contact information;
- Whether the employee informs the supervisor and CRC of the complaint; and
- Whether the complaint should be forwarded to the CRC within 24 or 48 hours.

Neither Procedure 16-6 nor the FAQ Brochure addresses in which languages the County complaint form (SC 271) or the CDSS complaint form (GEN 1179) is available, and where to find them. Also, these documents fail to address situations in which a participant files a complaint over the phone. There is no instruction for how to make a complaint form available when the complainant is not physically in a County office. Given that most surveyed staff were working remotely and contacting applicants/recipients over the phone, these responses raise concerns that staff were unable to fully assist complainants with filing complaints due to Covid-19 office closures.

When asked what staff would do when an applicant/recipient wishes to file a civil rights complaint:

- 38% of surveyed staff would provide the complainant with the County or CDSS complaint form

- 47% of surveyed staff are aware of the obligation to take down a verbal complaint made by a complainant who is unable to put the complaint in writing
- 18% of surveyed staff would refer the complainant to the CRC, without providing a complaint form or taking down a verbal complaint
- 18% of surveyed staff would forward the complaint to their supervisor or the DHA Ombudsperson, *not* the CRC
- One staff survey response would mail a complaint form to a caller making a complaint over the phone

Inconsistencies and gaps in policies may contribute to staff's inconsistent understanding of the procedure to follow when receiving a discrimination complaint.

Can employees locate the civil rights poster, PUB 86, with information as to how and where a discrimination complaint may be filed?

Yes.

Is the complaint log complete and up to date?

No. The Complaint Log (Log) is up to date, but is incomplete (missing CDSS case number, basis of discrimination, decision, and date investigation was completed/complaint was resolved). Div. 21-203.21. Absence of the basis of discrimination is particularly concerning because this is a required element of discrimination complaints.

The Log also contains non-required information, such as number and method of contact attempts to reach the complainant. While counties may add additional information to the log, counties must minimally contain Division 21-required information. Non-required information may be better stored in a case file to ensure adequate space for required categories. Supplemental information recorded by the CRC should be easily distinguishable.

Does the County have a written policy explaining how it will process discrimination complaints?

Yes, the County has written policies explaining how it processes discrimination complaints, though the policies are inconsistent (see above).

Is the County handling discrimination complaints appropriately?

No, the County is not handling discrimination complaints appropriately.

Department Procedure 16-6 states it is the CRC's responsibility to "determine whether the complaint meets the discrimination complaint test" however, the CRC could not describe this test/standard or the complaint intake procedure to Auditors.

When the County receives a complaint identified by the filer as civil rights related, the County proceeds to a fact-finding inquiry, including referring the complaint to the DHA Ombudsperson. An investigator from Program Integrity would be utilized to conduct an investigation using the 2017 Guidelines provided by CDSS Civil Rights Unit, if necessary, according to the Annual Plan, though it is unclear when this is triggered in contrast to the fact-finding inquiry.

Auditors encourage the County to develop and update their own guidelines for conducting investigations. The 2017 Guidelines provided by CDSS are general and lack county-specific practical information or steps necessary to carry out an investigation.

Auditors also encourage the County to identify and train individual(s) to conduct Division 21-specific civil rights investigations, rather than identifying an investigator only if and/or when a complaint requiring investigation arises. Designating individuals, if possible, may avoid delayed investigations or the implementation of investigative procedures that do not comply with Division 21. Technical civil rights knowledge is also an important foundation for investigators, particularly given the prevalence and technical nature of complaints based on disability (the most highly represented protected basis in complaints received by the County, based on the 2020-2021 Log).

Corrective Actions

Employee Awareness of Complaint Process: 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.

- The CAP shall include a plan to send a written reminder to all staff of staff responsibilities in complaint processing and to notify staff of forthcoming revisions to the FAQ Brochure. The written reminder should specifically address the misconceptions identified by the staff survey.

Complaint Processing Procedure: The County shall ensure policies addressing discrimination complaint handling are clear, consistent, and comport to the required complaint processing obligations. Div. 21-203.

- The CAP shall provide a revised Procedure 16-6 that is responsive to the comments made in this Report. The revised Procedure 16-6 shall describe the:
 - Process to determine if a complaint requires investigation including: explanation of threshold jurisdictional issues and prima facie elements, and a list of interview questions to elicit necessary information.
 - Process to reach complainants via all available methods before considering a complaint to result in “lost contact” including: minimum number of times that the CRC will attempt contact via different methods, if possible, and a policy to contact Authorized Representatives, when appropriate.

- The CAP shall submit a revised FAQ Brochure that is consistent with Procedure 16-6 and clearly describes how staff should assist applicants/recipients file civil rights complaints in-person and over the phone. The revised FAQ Brochure should reflect comments made in this Report and in other technical assistance. Revisions to Procedure 16-06 addressing staff responsibilities in complaint processing should be incorporated and/or referenced in induction and annual staff civil rights training materials.

Complaint Log: 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 containing all complaints received in 2020, 2021 and any pending pre-2020 complaints, and applying all categories required by Div. 21-203.21. All civil rights complaints, regardless of origin, must be contained in the Log. The Log shall use “N/A” or “TBD” where applicable so that there are no blank cells. The Log shall be submitted as a spreadsheet file.
- The CAP shall create a list of definitions explaining how the County will use each column in the Log. This Log should use the definitions provided for Resolution and Decision in Div. 21-203.217-.218. Definitions may be located in a separate tab, separate document, Procedure 16-6, etc.

Discrimination Complaint Form: The County shall cease using the County-generated complaint form (SC 271) because the SC 271 omits several protected bases and require language regarding consent for release of information. The County shall immediately begin using the GEN 1179.

- To the extent that the County intends to continue using the SC 271, the County must revise the form to include the omitted bases (Ancestry, Gender Identity, Gender Expression, Genetic Information, and Medical Condition). Gender Identity and Gender Expression have distinct meanings and should not be grouped together or under Sex discrimination. The GEN 1179 also includes an area for individuals to indicate any other bases they believe apply, which Auditors advance as a best practice.
- To the extent that the County revises and resumes using the SC 271 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.
- To the extent that the County revises and resumes using the SC 271, it must include Division 21-required language regarding consent for release of information. Div. 21-203.32.

Recommendations

Civil Rights Investigations Procedure and Staffing: Identify an individual to conduct civil rights investigations and provide relevant training to this individual. Develop a practical investigation guide using Division 21, the CRC Introductory Training provided by CDSS in December 2020, the 2017 CDSS Handbook, relevant ACLs, and other relevant and appropriate materials.

IX. VENDOR CONTRACTS

Counties are required to ensure that contractors, vendors, consultants, and other contracted providers of service who receive state or federal assistance (referred to as “Vendors”) provide a statement of assurance. Agreements must also state that the entity involved will compile data, maintain records, and submit reports as required to permit effective enforcement of nondiscrimination laws, regulations, policies, instructions, and guidelines.

Findings: Contract Review

Auditors reviewed ten vendor contracts. Auditors found that all ten contracts contained the same nondiscrimination language within the agreements. All ten contracts contained an assurance (i.e., an agreement to administer services and benefits in a nondiscriminatory way). All ten contracts stated that the Vendor will compile data, maintain records, and submit reports to permit effective enforcement of all applicable nondiscrimination laws.

Corrective Action

None.

X. COMMUNITY INPUT

Feedback was sought from community and advocate groups regarding County services. The following summarizes their observations and identifies issues that the County may address to improve their civil rights program. Input from community groups is also infused in other sections of the report (see Section III). Recommendations from Auditors to explore additional opportunities to gather input from community groups are contained in other sections of the report (see Section V, Recommendations and Section VII, Recommendations).

Observations

Office closures: Feedback addressed concerns regarding office closures and challenges continuing to make programs accessible. These issues have a disproportionate impact on applicants/recipients with disabilities, who are NEP/LEP, or

who experience housing instability (persons with disabilities, persons belonging to the SOGIE community are disproportionately represented in these populations). Specifically:

- **Access for applicants/recipients without access to a phone:**
Applicants/recipients without reliable phone access faced challenges appearing for application interviews (conducted exclusively via phone over the twelve months preceding this Review), impacting their ability to access or continue benefits. Busy phone lines meant that even when these participants had access to a phone, they could not necessarily get through to the County.
- **Excessive call wait times:** Wait times were extremely long from March – November 2020, sometimes reaching up to several hours.
- **Access for applicants/recipients without a fixed mailing address:**
Applicants/recipients who retrieve mail from County offices were unable to access mail during an initial period of office closures. When the County started allowing mail retrieval, many participants were still excluded because mail retrieval was offered via drive-through only.
- **Availability of translated program materials outside closed offices:**
Advocates reported that program materials, in English and other languages, are not consistently available in front of closed offices or offices with reduced hours. Advocates report that without a staff person present in front of closed offices, clients are confused about which applications to use and how to submit them.

Reasonable accommodation: County staff do not consistently identify or respond to reasonable accommodation requests, and do not consistently provide accommodations.

Translation of written materials: Self-identified LEP/NEP clients continue to receive NOAs in English across programs and languages.

Discrimination complaint procedure: The [County website](#) does not clearly describe the process for submitting a civil rights complaint.

Program Integrity: Fraud investigators do not consistently provide bilingual services to LEP/NEP participants, causing miscommunication and confusion, and leading to criminal prosecutions in some circumstances. The Program Integrity unit does not offer and/or provide reasonable accommodations for persons with disabilities.

Opportunities for improvement based on Community Feedback

Availability of translated program materials outside closed offices: Place applications in all languages outside closed offices with signage in multiple languages explaining what the applications are, and how to submit and follow up on applications, especially if there is no staff person available to answer questions.

Program Integrity: Provide training on language access and reasonable accommodation obligations. Ensure appropriate documentation of language- and disability-related needs are transmitted from programs to Program Integrity.

Promising practices

Quarterly advocate meetings: Advocates expressed appreciation for the existing opportunities to meet with the County leadership team and program staff.

Opportunity for stakeholder feedback before policy changes: Advocates appreciate the opportunity to provide stakeholder feedback when the County is considering or enacting policy changes.

XI. CIVIL RIGHTS COMPLIANCE PLAN REVIEW AND APPROVAL

The Sacramento County Department of Human Assistance Civil Rights Compliance Plan for the period April 1, 2021 through March 30, 2022 was received on February 22, 2021. Thank you for submitting your agency's Civil Rights Compliance Plan. Before approving the Civil Rights Compliance Plan, we request the following augmentations to your plan:

- Revise the Annual Plan to respond to the gaps/inconsistencies noted in this Report. Key areas for revisions include:
 - Provide 2-3 examples of self-monitoring activities over the last year. Explain what barriers to civil rights compliance were encountered in the last year, how they were resolved/addressed, and any new policies or procedures that resulted. In addition, describe how the County self-monitors for physical accessibility of facilities.
 - Complete Complaint Log from 2020-present, containing all pending complaints (see Section VIII, Corrective Action).
 - Include all civil rights related policies as attachments (see Section II, Documents Reviewed).
- In the Annual Plan and all civil rights policies, Auditors support the replacement of gender-binary language with gender-inclusive language (i.e., replacing "he/she" with "they/them").

Please submit an updated Civil Rights Compliance Plan incorporating these items with your CAP for this review.

XII. CONCLUSION

The CDSS Reviewers found the Sacramento County Department of Human Assistance staff warm, informative, and supportive. Particular thanks to Elvia Leyva, Civil Rights Coordinator, for organizing the details of the review and for highly responsive communication; to Dawn Mason, Facilities Manager, who assisted in each of the facility reviews; to Administrative Services Officers (ASO) at each facility who conducted the facility assessment; to program managers who assisted with case file navigation during case review; and to staff who completed the staff survey. County staff, including management, reflected a commitment to ensuring access, assistance, and compliance.

The CDSS Reviewers found substantial compliance concerns. The Sacramento County Department of Human Assistance must remedy deficiencies identified in this report by taking corrective actions. A CAP must be received by CDSS within 60 days of the date of the cover letter to this report; and the plan must include a schedule of all actions to be taken to correct the deficiencies, and an indication of who will be responsible for implementing the corrective action.

It is CDSS' intent that this report be used to create a positive interaction between the County and CDSS to identify and correct compliance violations and to provide the County with an opportunity to implement corrective action to achieve compliance with Division 21 regulations. Civil Rights Unit staff is available to provide technical assistance as requested.

APPENDIX 1: CASE REVIEW

Counties must ensure that case records clearly reflect applicants' and recipients' ethnic origin, primary language, the method used to provide bilingual services, information identifying an applicant or recipient as disabled, and requests for reasonable modifications, auxiliary aids, and services.

The following section summarizes Auditors' observations after reviewing the County's case files across CDSS-funded programs. For more information, see Sections V and VI of the Report.

Reviewed Case Files

Auditors reviewed sample case files in CDSS-covered programs to ensure the County is meeting documentation obligations.

CalFresh: Auditors reviewed 9 total cases, including 5 NEP/LEP cases and 4 cases with a documented disability and/or reasonable accommodation request in CalWIN, the electronic case system.

CalWORKs: Auditors reviewed 7 total cases, including 5 NEP/LEP and 2 cases with a documented disability and/or reasonable accommodation request in CalWIN, the electronic case system.

CAPi: Auditors reviewed 7 total cases, including 6 NEP/LEP cases and 6 cases with a documented disability and/or reasonable accommodation request in CalWIN, the electronic case system.

Program Integrity: Auditors reviewed 9 cases, including 7 NEP/LEP cases in paper case files

Location of documented information in CalFresh, CalWORKs, and CAPi case files

Ethnic Origin: Ethnic origin is documented on the Demographics screen in CalWIN.

Primary Language: Primary language is identified on applications, renewals, and the primary language form (SC 106). Information is documented on the Case Summary screen in CalWIN.

County-Provided Interpretive Services: Interpretive services provided by the County are documented in case comments in CalWIN.

Applicant/recipient-Provided Interpreter: Interpretive services provided by the applicants'/recipients' own interpreter are documented on the primary language form (SC 106) which also serves as the release of information form. There may also be documentation in case comments in CalWIN.

That applicant/recipient was informed of potential problem using own interpreter: It is documented on the primary language form (SC 106) that the applicant/recipient was informed of the risks of using their own interpreter.

Release of information to interpreter: The primary language form (SC 106) contains the release of information to the interpreter.

Translation of Written Material: Written materials sent to applicant/recipient are available in the Case Correspondence screen in CalWIN.

Use of Minor as Temporary Interpreter: Auditors did not review cases where minors were used as interpreters.

Disability: Applicant/recipient disabilities are documented on the Disability/Medical Condition screen in CalWIN. In some cases, disabilities are flagged on the Special Accommodation flag page in CalWIN.

Reasonable Accommodation: Use of the Special Accommodation flag in CalWIN indicates that an applicant/recipient requires a reasonable accommodation. Auditors did not observe a standardized policy for documenting the specific reasonable accommodation request.

Location of documented information in Program Integrity case files

Ethnic Origin: Ethnic origin of applicants/recipients is not documented in program integrity case files.

Primary Language: Primary language is documented on cover pages of fraud investigation reports and in the report narrative.

County-Provided Interpretive Services: The method of providing interpretive services is documented in the report narrative.

Applicant/recipient-Provided Interpreter: Auditors did not review cases where applicant/recipient-provided interpreters were used.

Translation of Written Material: Auditors did not review cases where the program integrity unit provided written material.

Use of Minor as Temporary Interpreter: Auditors did not review cases where minors were used as interpreters.

Disability: Auditors did not review cases where disability was documented. See Section VI.

Reasonable Accommodation: Auditors did review cases where it was documented that reasonable accommodation was offered or requested. See Section VI.

APPENDIX 2: SELECTION FROM STAFF SURVEY

Section VIII address the discrimination complaint process. Surveyed staff were presented with four theoretical complaints and asked to indicate which were examples of civil rights complaints. Surveyed employees were able to identify discrimination complaints most of the time. The language of those complaints is presented here.

- **Complaint 1:** I received a letter saying my benefits were cut off but I need that money for my kids. How can I get my benefits back? I bet this is because in this office they don't like people who have my skin color. I always see workers being rude to people who look like me.
 - Example of a discrimination complaint
 - Recognized as a discrimination complaint by 91% of surveyed staff
- **Complaint 2:** My benefits were reduced. This isn't right. I deserve that help. I followed all the rules. I'd like to make a complaint.
 - Not an example of a discrimination complaint;
 - Recognized as a discrimination complaint by 29% of surveyed staff
- **Complaint 3:** My aunt is confused about her eligibility. She had trouble understanding the customer service center representatives on the phone. She told me she spoke in English, but she actually prefers to speak Korean because she understands it better. I can help her with her paperwork if you just tell me what she needs to turn in.
 - Example of a discrimination complaint
 - Recognized as a discrimination complaint by 65% of surveyed staff
- **Complaint 4:** My kids were taken away by the County because I'm bipolar. It isn't fair to take my kids just because I have a disability. Disabled parents have rights too. I need help.
 - Example of a discrimination complaint
 - Recognized as a discrimination complaint by 85% of surveyed staff