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Tuesday, January 31, 2023

**Via Email Only** ([sbugay@fresnocountyca.gov](mailto:sbugay@fresnocountyca.gov))

Sanja Kovacevic Bugay, Director  
Fresno County Department of Social Services  
205 W. Pontiac  
Clovis, CA 93612

Dear Director Bugay:

Thank you and the Fresno County Department of Social Services staff for your cooperation and assistance during the March 2022 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.

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)). The CAP itself should be submitted first as a Word document to facilitate the initial review process. However, please note that once the CAP is approved by CDSS, in an effort to comply with the Web Content Accessibility Guidelines (WCAG), the CAP must be submitted as a PDF document. That PDF document 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](#).

If you need technical assistance developing a CAP, please contact Jill Shallenberger at (916) 207-6344 or by email at [jill.shallenberger@dss.ca.gov](mailto:jill.shallenberger@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,

*Anne Marx*

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**FRESNO COUNTY DEPARTMENT OF SOCIAL SERVICES  
CIVIL RIGHTS COMPLIANCE REVIEW REPORT**

**Conducted on  
March 21 – March 25, 2022**

**California Department of Social Services**

**Office of Equity**

**Civil Rights Unit**

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

**Sacramento, CA 95814**

**(916) 654-2107**

**Reviewer: Jill Shallenberger**

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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 Fresno County Department of Social Services' (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 21, 2022** to **March 25, 2022**. An exit conference was held on **March 25, 2022**.

Compliance concerns are the focus of this report. However, Auditors also noted effective aspects of the County's civil rights program, including specific form and policy revisions as well as the use of helpful template language in some case record documentation.

### 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.

- **Documentation of Applicant/Recipient Case Records:** All programs reviewed had gaps, errors, and/or inconsistencies in documentation of applicant/recipient case records, particularly related to reasonable accommodations for persons with disabilities.
- **Language Access Services Policy:** The County's language access policy, PPG 15-07-058, requires revisions to improve accuracy, clarity and specificity of documentation requirements and other information related to service provision for individuals who are non-English proficient or who have limited English proficiency (NEP/LEP).
- **Reasonable Accommodation Policy:** The County's Reasonable Accommodation Policy, PPG 15-07-0XX (which was submitted to and reviewed by CDSS in draft form shortly after this Compliance Review) improves on existing policy but requires revision in the areas of identification of disabilities and program-specific documentation of reasonable accommodations for persons with disabilities.
- **Civil Rights Staff Training:** The County's Civil Rights Staff Training contains significant deficiencies, particularly regarding discrimination complaint handling procedures and inclusion of inaccurate, incomplete and nonrelevant content.
- **Discrimination Complaint Procedures:** The County's policy and procedure for discrimination complaint handling lacks a clear, compliant approach to complaint evaluation and processing, contributing to a significant and persistent risk of misidentification and mishandling of complaints.

## **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 American with Disabilities Act (ADA). Findings in these sections are based on information gathered from case review, staff surveys, and other identified sources. Each section is formatted to first provide findings, then required corrective actions, and ends with any Auditor recommendations.

Section IV explains the status of the facilities review 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.

Section X highlights issues identified by community and advocacy organizations.

Section XI reviews the County's compliance plan, and provides either approval of the plan as submitted, or identifies information or modifications required prior to approval.

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

Appendix 1 of this report contains detailed observations from case review.

## **II. SUMMARY OF METHODOLOGY**

### **Documents Reviewed**

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

- November 2021-October 2022 Civil Rights Compliance Plan (CRCP), attachments, and supplemental materials including staff training modules
- Civil rights-related policies and procedures, including:
  - PPG 15-07-058 "Language Access Services"
  - PPG 15-07-041 "Notice of Action"
  - PPG15-07-018 "Self-Assessment Function Evaluation Referral (ES28A)"
  - PPG 35-01-041 "Blind and Visually Impaired Reasonable Accommodations"
  - PPG 10-02-009 "Discrimination Complaints by Clients"
  - Draft PPG 15-07-0XX "Reasonable Accommodations"
- Civil rights discrimination complaint database for a complete listing of complaints filed 18 months prior to the Review



- Previous County Compliance Review reports and corresponding corrective action plans (CAPs)

### **Locations Reviewed for Dissemination of Information**

- Clovis Campus Building 1, 3500 Never Forget Lane, Clovis, CA 93612 (Clovis)
- Coalinga Regional Center, 311 Coalinga Plaza, Coalinga, CA 93210 (Coalinga)
- Selma Regional Center, 3830 McCall Avenue, Selma, CA 93662 (Selma)

### **Programs Reviewed**

- Non-Assistance CalFresh
- CalWORKs
- In-Home Supportive Services (IHSS)
- Child Welfare Services (CWS)
- Fraud

### **Review Procedures**

- Electronic surveys of public contact staff, the civil rights coordinator, and program managers
- Reviewing case files
- Reviewing County-reported information about facilities and parking areas
- Requesting feedback from community groups. The following organizations were contacted for feedback:
  - [Legal Services of Northern California](#) (517 12<sup>th</sup> 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)
  - [Centro La Familia](#) (302 Fresno Street, Suite 102, Fresno, CA 93706)
  - [Central California Legal Services](#) (2115 Kern Street, Suite 1, Fresno, CA 93721)
  - [Deaf & Hard of Hearing Service Center](#) (5340 North Fresno Street, Fresno, CA 93710)

### **Compliance Review Areas**

- Dissemination of information
- 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 103 surveys to County staff, including certified bilingual staff. Eighty-four (84) surveys were completed, and 19 surveys were not completed, despite reminders from Auditors.
  - Eligibility workers (EW): 31 of 40 surveys were completed. The EWs serve the CalFresh and/or CalWORKs programs.
  - Adult program workers (APW): 18 of 20 surveys were completed.
  - Children's social workers (CSW): 12 of 17 surveys were completed.
  - Office assistants (OA)/navigators: 9 of 12 surveys were completed.
  - Program supervisors/managers: 12 of 12 surveys were completed.
  - Civil Rights Coordinator (CRC): 1 of 1 survey was completed.
  - ADA Coordinator: 1 of 1 survey was 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 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. Applicants can contact the County call center by telephone and can also complete and submit eligibility program applications via the County website. EWs may conduct home visits on an as-needed basis, and APWs and CSWs conduct such visits as standard practice in the IHSS and CWS programs respectively. Social workers also operate on a staggered schedule and with non-traditional business hours in order to meet the needs of program participants.

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

Yes. The County provides information about available services via its website and the Countywide 2-1-1 information system, which is accessible by telephone and Internet.

According to the CRCP, the County has also placed advertisements with unspecified content in the Spanish yellow pages.

According to the County's August 2021 "Programs Overview," the County Outreach Unit is tasked with increasing the County's "service penetration rate for eligible families" by "actively participating in a wide range of community events," providing "assistance with applications onsite, sharing a wide range of educational resource materials, and answering program related questions," as well as "providing community-based organizations with education and updates on program changes and services provided." Surveyed staff repeatedly mentioned the work of the Outreach Unit in providing such information in remote areas. Specific details about how the Outreach Unit disseminates information at job fairs and other events had not been provided to CDSS as of the publication of this report.

In addition, according to the CRCP, the CWS program sends written outreach information about foster family recruitment to youth aged 16-21 years in the Independent Living Program, to community participants in the Family to Family Initiative, and to the general public, and also invites community participants to meetings such as Permanency Teaming and Team Decision-Making.

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

The County's website includes a link to its YouTube channel, which posts videos about programs and services. As noted above, County information is also available via the Countywide 2-1-1 information system, which is accessible by phone and Internet. The CRCP and the County's "Language Access Services" policy, PPG 15-07-058, states that workers must inquire about applicants'/recipients' ability to read and write and read forms and notices aloud to applicants/recipients who cannot read due to illiteracy or disability or both.

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

Somewhat, with room for improvement. According to the CRCP and completed Facilities Self-Assessment worksheets, posters are displayed in the lobbies of all offices to inform applicants/recipients of their right "to aid or services in their primary language," and the PUB 86 ("Everyone is Different but Equal under the Law") with the Civil Rights Coordinator's name and contact information is posted in "all required languages." The PUB 13 is available in office reception areas, though not (as noted below) in all required translations or in the most current version. As is also discussed below, the PUB 13 is provided to applicants/recipients at intake and other regular intervals in most but not all programs, and documentation does not support that workers in all programs consistently explain the PUB 13, as required.

The [County website's "Administration" section](#) is where its "Civil Rights" webpage is located, which may not be an intuitive place for applicants/recipients to look for public complaint information. The webpage has a link to the current English version of the PUB 13, a link to the CDSS webpage that explains the PUB 13, and links to the PUB 13 in audio format in English, Spanish, Russian, Vietnamese, and Chinese (versions not specified). The webpage does not state whether the Chinese audio version is in Cantonese, Mandarin or both. This webpage provides some information about the discrimination complaint process including the mailing address and telephone number to submit a civil rights complaint, but it lacks an email option for complaint submission or a link to the County discrimination complaint form. In addition, the webpage contains an inaccurate and incomplete list of legally recognized protected bases, which limits applicant/recipient understanding of their rights and may particularly result in applicants/recipients not pursuing complaints based on ancestry, domestic partnership, and/or immigration status because they are unaware these bases are protected. It may also result in applicants/recipients attempting to file complaints on the basis of veteran/military status, which is not within the scope of CDSS' authority.

*Does the County have a Call Center/Service Center? 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 system? If so, does the Interactive Voice Response system have language options for all County threshold languages? Does the Interactive Voice Response system have an option to request free interpreter services?*

Yes. The County has a Call Center for eligibility programs with one number that answers calls for the entire County. That telephone number is posted on the County website. The Call Center has an Interactive Voice Response (IVR) system with language options in English, Spanish, and 3 other languages not identified by the County as of the publication of this report. For other languages, callers must listen to the message in English to be connected with a worker who can access a telephone interpreter to assist them.

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

Yes. The County did not close any office locations during the pandemic, although some facilities operated with limited hours and limited in-person access. The County website and Call Center, established before the Covid-19 pandemic, continued to provide online and telephone access to programs and services. The Civil Rights Coordinator reported to Auditors that the Call Center experienced a surge in use during the pandemic; however, as of the publication of this report, information requested by CDSS regarding Call Center performance during this surge had not been provided.

## **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?*

Unknown. The County initially reported Spanish as the only non-English threshold language for each of the three facilities under review, based on threshold language calculation by program and location. However, during the course of this Review, the County determined that this method of threshold language calculation no longer yielded reliable results due to the County's transition to a service center-based model for eligibility programs, the use of home- and telephone-based client contact with IHSS applicants/recipients, and the ongoing consolidation and centralization of many of its locations (including the consolidation of CWS offices).

Division 21 states broadly that threshold language should be considered by both location *and* program. Div. 21-104(s)(2). This means that an office's threshold languages consist of threshold languages for that site *and* for programs administered at that site. In recognition of transitions many counties have made or are making to non-location-specific service delivery models as well as in response to emergencies such as the pandemic, CDSS permits counties to treat *program*-wide threshold languages as threshold for office locations where those programs are administered, if they have not identified *location*-specific threshold languages for those sites.

On April 8, 2022, the County submitted confirmation of its intent to adopt this alternative approach and provided corresponding programmatic threshold language data identifying Spanish as a threshold language in CalFresh, CalWORKs, IHSS, CWS (although the percentage in that program is just below the "substantial number" at 4.6%), and the Cash Assistance Program for Immigrants ("CAPI," not reviewed during this Audit). In addition, it identifies Hmong as a threshold language in IHSS and Armenian as a threshold language in CAPI. See Corrective Action for steps needed to confirm that the signage at facilities where these programs are currently administered are posted in appropriate translations.

*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. 08/2020) 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 current version (rev. 08/20) of the PUB 13 available in alternate formats?*

No. The facilities self-assessment revealed that the PUB 13 is not available in all CDSS-translated languages or in the most current versions in County waiting rooms and reception areas. The County reported the following for the three facilities under review:

- At the Clovis, Coalinga, and Selma locations, the PUB 13 is available in an outdated version (08/16) in all of the above languages except Hindi and Thai

(which are not available). The Selma location is also missing the PUB 13 translation in Mien.

- The PUB 13 is available in braille and large print upon request and/or in the lobby area at both the Clovis and Coalinga locations in an outdated version. The version of the braille translation at the Selma location is unknown. The version of the PUB 13 audio CD at the Coalinga location is not identified.
- “Video and audio” versions are reportedly available at the Selma office, but no information is provided regarding the versions, specific format, or how these are made available to applicants/recipients.

The County posts [audio versions of the PUB 13](#) in English, Spanish, Russian, Vietnamese, and Chinese on its website, but the versions are unknown, and the website does not specify whether the Chinese version is in Cantonese, Mandarin or both.

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

Somewhat, with variation and room for improvement across programs. The CRCP states that the PUB 13 is given to applicants/recipients at intake and at “on-going appointments” in their primary language “or explained to them in their primary language if a PUB 13 is not available” (p. 6). The CRCP does not state whether the PUB 13 is explained as well as provided at intake and on-going appointments. The County’s Language Access Services policy, PPG 15-07-058, requires workers to “narrate when the PUB 13 was provided and explained to the client” (p. 3), but does not state at what junctures the provision and explanation should occur.

One hundred (100) percent of surveyed EWs and APWs report they give applicants/recipients the PUB 13 in their primary language. Seventy-five (75) percent of surveyed CSWs report they do so, while 25% report they do not.

During CalFresh case review, Auditors observed documentation that the PUB 13 was provided in 8 of 8 total cases reviewed, although the PUB 13 language was not specified. Program personnel informed Auditors during case review that the PUB 13 is provided in the primary languages of NEP/LEP applicants/recipients if translated by CDSS, and in English with a GEN 1365 if not. In all 8 cases, Auditors also observed documentation indicating the worker either explained the “rights and responsibilities” (confirmed by County staff as the PUB 13) or played a PUB 13 recording for the applicant/recipient, and that the applicant/recipient stated they understood. The languages of the explanations and recordings were not specified. Program personnel informed Auditors during case review that the PUB 13 recording is available in English and Spanish; for other languages, the worker will read the PUB 13 aloud in English while an interpreter translates it.

During CalWORKs case review, Auditors observed documentation indicating workers provided and explained the PUB 13 to applicants/recipients in 10 of 10 cases reviewed. PUB 13 languages were not specified.

During IHSS case review, Auditors observed documentation indicating the PUB 13 was provided and “reviewed” with applicants/recipients in 11 of 11 cases. PUB 13 languages were not specified.

During CWS case review, Auditors observed documentation that workers provided the PUB 13 to parents in 3 of 6 total cases reviewed. In the cases containing documentation: 1 case also documented the language in which the PUB 13 was provided, but none documented whether the PUB 13 was explained. In the cases not containing documentation: in 1 case the PUB 13 was absent because the matter was a referral that did not become an open case, 1 case involved a 16-year-old whose parents were not present in the United States, and in 1 case the absence of PUB 13 documentation partly stemmed from the unavailability of the incarcerated parent at the time of the initial referral and the Team Decision-Making meeting.

During Fraud case review, Auditors observed 4 ongoing fraud cases involving applicants/recipients who are NEP/LEP in which a Fraud program worker assumed temporary management of the program case and CalWIN case record. See Appendix 1 for an explanation of the Fraud program’s role in documenting this and other information in fraud cases. Auditors observed documentation in 3 of 4 cases that the PUB 13 was provided, documentation in 4 of 4 cases that “rights and responsibilities” (confirmed by the County as the PUB 13) were explained, and no documentation in any case of the PUB 13 language(s).

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

Yes.

## **Corrective Action**

- 1. Dissemination of Information:** The County shall keep civil rights information posted on the County webpage up to date. Div. 21-107.1. This includes but is not limited to the list of protected bases on the County website (see the [CDSS website](#) for applicable protected bases) and translated audio files of the PUB 13 for which links are provided.
- 2. Directional and Informational Signage:** The County 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 clients, such signage shall be translated into appropriate languages. Div. 21-107.212. A substantial number of non-English-speaking clients encompasses languages spoken by 5 percent or more of persons visiting each location. It also encompasses languages spoken by 5 percent or more of persons in a program that is administered at each location. Div. 21-2014(s)(2).

As part of the CAP, since the County now applies programmatic threshold language determinations to facilities where the programs are administered, it shall determine what translations are required for signage at all current office



locations, prepare and post such signage accordingly, and provide a summary explaining the results of these steps.

3. **Translated PUB 13:** As part of the CAP, the County shall ensure the PUB 13 is available in all 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. The County may access the most recent translated versions of the PUB 13 on [CDSS' website](#).
4. **PUB 13 in alternate formats:** The County shall ensure the availability of large print, braille, and auditory aids for participants in all programs for which CDSS has oversight responsibility. Div. 21-115.4. As part of the CAP, the County shall furnish all offices with braille, large print, and audio recordings of the PUB 13 based on the most recent revision of the PUB 13. The County should be aware that CDSS no longer provides updates to the braille version, so counties are responsible for ensuring the availability of the current PUB 13 in braille.
5. **Distribution of PUB 13:** The County 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 County successfully implements an approach in certain programs of using explicit, standardized language in case management systems to document the provision and explanation of the PUB 13. To build on this strength, the County shall revise PPG 15-07-058 to explicitly specify when program staff subject to this Review must provide and explain the PUB 13 as well as where and how to document this information. Programs shall ensure that workers document in case records both the PUB 13 language and whether the applicant/recipient understood and/or had questions. Additionally, CWS workers shall add the relevant Associated Service category/type (e.g., "Provide Know Your Rights") to Delivered Services Log (DSL) contact notes in CWS/CMS.

#### 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.

CDSS reminds the County that programs and activities must be readily accessible to individuals with disabilities, including building accessibility, the availability of accessible parking, and accessible public telephones and restrooms.



In deference to the Covid-19 pandemic, the facilities accessibility portion of this Review was paused to ensure the safety of County and CDSS staff.

In January 2022, CDSS shared resources with all Counties reviewed in 2022 and encouraged them to regularly conduct self-assessments of facilities used or visited by applicants/recipients of CDSS-funded services. CDSS provided resources and suggested actions to support their ongoing compliance efforts in meeting existing federal and state obligations to maintain physically accessible facilities and prepare for future facilities reviews. These resources are provided again here:

- Applicable federal and states rules
  - [United States Department of Justice's ADA Standards](#)
  - [United States Access Board's Americans with Disabilities Act Accessibility Guidelines](#)
  - [Title 24 of California Code and Regulations](#)
- [Past Compliance Review reports](#)
- Building code reference materials
  - [The Department of General Services Division of the State Architect](#)
  - [The California Accessibility Reference Manual](#)
- Procuring and using facility accessibility tools including but not limited to a tape measure, door pressure gauge, and digital leveling tool
- External technical assistance training and resources via organizations like the [Pacific ADA Center](#) or through informational websites like [ADA.gov](#)

As a reminder, the County is encouraged and expected to self-monitor facility accessibility. Self-monitoring is important so that the County is continuously alert to accessibility considerations. Counties cannot solely rely upon CDSS Compliance Reviews to identify facility compliance concerns.

## **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 interpreter 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 interpreter 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

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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?*

Mostly. Applicant/recipients frequently identify their primary language via program applications. Additionally, according to the County's Language Access Services Policy, PPG 15-07-058, when applicants/recipients who are NEP/LEP are "first greeted in a reception area, the reception staff is responsible for establishing [their] Language Access need" (p. 1). Staff do this by eliciting self-identification from the applicant/recipient with help, if needed, from the applicant's/recipient's own interpreter or an "I Speak" card. If an applicant/recipient who is NEP/LEP is unable to self-identify their primary language, staff "must take all reasonable steps to identify" the language, including with the assistance of bilingual certified staff or a County-contracted interpreter. The policy does not explain how a County-contracted interpreter can assist if an applicant's/recipient's language is unknown. Once the applicant's/recipient's primary language is established, "reception staff will notify the client's worker of their primary language" (p. 2), but PPG-15-07-058 does not explain how this notification is done; nor does it explain whether, where, or how reception staff document this information. See Corrective Action.

PPG 15-07-058 assigns primary responsibility to case workers to evaluate the "client's need for Language Access services and set up the case correctly, so the client's Language Access needs are met on an ongoing basis." (P. 2)

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

Sometimes, but not exclusively. County-generated Form 2229, Language Rights and Interpreter Services, allows applicants/recipients to identify language access needs and notifies them of the right to free interpreter and translation services. Form 2229 is no longer required by eligibility programs because language needs are captured on program applications. Form 2229 is still used by IHSS, although documentation of verbal attestation was permitted in lieu of collection of Form 2229 during telephone interviews conducted under Covid-19 emergency conditions. During IHSS case review, Auditors observed 5 of 11 total NEP/LEP cases (including ASL) in which Form 2229 was on file, while the remaining 6 cases documented verbal attestation.

For CWS, the CRCP states that if a case file does not have a completed Form 2229 when the matter transfers from the Emergency Response Division to Family Reunification (FR), the FR worker must obtain a completed Form 2229 from the client at that point. During CWS case review, program personnel reported that it is considered best practice for workers to document use of Form 2229 in a DSL note and upload the Form 2229 into the “Existing Documents” section in CWS/CMS, but such steps are not required and are implemented inconsistently. During CWS case review, Auditors observed 1 out of 6 NEP/LEP cases in which a worker documented use of Form 2229 in a DSL note, and in no case did Auditors observe an uploaded Form 2229.

*Are primary written and spoken languages documented?*

Mostly.

During CalFresh case review, Auditors observed consistent, complete CalWIN documentation of applicants'/recipients' written and spoken languages in 6 of 8 total cases and documentation with unexplained discrepancies in 2 cases. In both cases with unexplained discrepancies, the CalWIN Demographics screen identified the applicants'/recipients' primary spoken language as English, while the Case Summary screen identified a non-English primary spoken language. Additional documentation reflects that appropriate interpreter services were provided in both cases.

During CalWORKs case review, Auditors observed consistent, complete CalWIN documentation of applicants'/recipients' written and spoken languages in 9 of 10 total cases reviewed and documentation with an unexplained discrepancy in 1 case. In the 1 case with an unexplained discrepancy, the applicant's/recipient's application and CalWIN records identified their primary written language as English, while the Form 2229 on file identified a non-English primary written language. Auditors note that although Form 2229 may no longer be required in the CalWORKs program, such discrepancies should be resolved when they exist to avoid confusion and potential service disruption.

During IHSS case review, Auditors observed CMIPS II documentation of applicants'/recipients' spoken languages in 10 of 11 total cases reviewed and written languages in 11 of 11 total cases. In the 1 case without an identified spoken language, program navigators informed Auditors that the option “Other non-English” was chosen from the CMIPS II drop-down language menu because the individual's spoken language of Punjabi is not an available option. Auditors were further informed that workers may, but are not required to, enter the specific language into the “Other Spoken Language Detail” field in CMIPS II; in the case described directly above, the worker did not do so.

During CSW case review, Auditors observed documentation in CWS/CMS of parents' and children's primary languages in 6 of 6 total cases.

The Fraud Program Manager informed Auditors that (as noted in Appendix 1) the Fraud program receives Early Fraud Detection/Prevention referral forms that typically include an individual's primary language, but Fraud program workers do not handle these cases or communicate with applicants/recipients; nor do they record language information in the program referral tracking spreadsheet. In ongoing fraud cases in which a Fraud

program worker assumes temporary management of the recipient's program case, the original program worker will typically have already documented primary language information in CalWIN. Auditors observed this information documented in 4 of 4 total ongoing fraud cases reviewed.

*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? For example, does the County have a contracted language line provider, a county interpreter list, or any other interpreter process?*

Yes. According to the CRCP, the County has contracted telephone, in-person, and remote interpreter services for use when no certified bilingual staff are available. PPG 15-07-058 explains that workers must contact an interpreter from a certified bilingual Staff Lookup Database or a contractor listed in Desk Guide 0294. Desk Guide 0294 provides a list of available languages, including ASL in person and via Video Remote Interpretation (VRI) services; names, contact information, and service hours for multiple contractors; and instructions for using telephone interpreter services.

Staff survey responses reflect a very high degree of awareness among EWs, APWs, and CSWs about the availability of interpreter services from certified bilingual employees and telephone interpreter services vendors. Seventy-eight (78) percent of OAs also express awareness of these resources, though it is notable that 22% report being unsure of what the available methods are because these employees are the first point of contact for at least some applicants/recipients visiting offices who are NEP/LEP applicants.

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

Mostly.

During CalFresh, CalWORKs, and IHSS case reviews, Auditors observed documentation indicating that applicants/recipients who are NEP/LEP were consistently provided with bilingual services, despite the above primary language documentation discrepancies.

During CWS case review, Auditors observed documentation in all NEP/LEP cases indicating that some bilingual services were provided at various points. However, the lack of consistent, systematized documentation practices in CWS prevents the County from demonstrating consistent compliance with Division 21 requirements.

During Fraud case review, Auditors observed documentation in 4 of 4 ongoing fraud cases to indicate that applicants/recipients who are NEP/LEP received bilingual services.

Surveyed staff across all job categories and programs identified bilingual services as an area needing improvement, expressing a need for more bilingual certified staff in languages other than Spanish and a need for more translations of forms and notices. Bilingual staffing and written translations are discussed further below.

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

Sometimes. When asked how long it takes to obtain interpreter services after an individual's language needs are identified, 46% of surveyed staff report that it takes less than 3 minutes; 39% report between 3 and 10 minutes; 7% report between 10 to 15 minutes; and 8% report that it takes more than 15 minutes. Of surveyed staff who provided explanatory comments, 35% reported that wait times tend to be longer for interpreters of certain languages, including Laotian, Hmong, and Farsi, and 2 staff members reported having to schedule a callback from the vendor because there were no interpreters available to meet their need at the time they called.

*Does the County have adequate bilingual staffing levels?*

Somewhat. The County identified a range of bilingual staffing needs and hiring goals across all threshold languages and programs in information shared with Auditors on April 8, 2022, after this Review. (This information reflected the County's decision to apply programmatic threshold language determinations to facilities where the programs are administered, as noted in Section III, above.)

Relatedly, 25% of surveyed Program Supervisors report they are neither satisfied nor dissatisfied with the current number of bilingual public contact staff, and 33% report being dissatisfied or "very dissatisfied." When asked what language services are needed, 75% of surveyed Program Supervisors identified Spanish and 58% identified Hmong, each of which is a threshold language in one or more programs. The other languages identified were Farsi, Lao, Cambodian, Russian, Chinese, Punjabi, Arabic, and ASL.

*Are County interpreters certified?*

Yes. The County certifies bilingual staff members in Spanish and Hmong. According to the CRCP, the County is establishing a certification process for ASL and additional non-English languages.

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

Yes, under limited circumstances. According to PPG 15-07-058, a minor can be used as an interpreter only to give information to reception staff to facilitate language access (such as to help staff identify the primary language of the adult applicant/recipient) or in an emergency. Auditors did not observe any instances in which a minor was used as an interpreter during case reviews.

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

Yes, except in CWS.

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

The CRCP states that information about interpreter services is documented in CalWIN Case Comments and the CWS/CMS Contact section but does not explain where this is documented in CMIPS II. According to PPG 15-07-058, when an applicant/recipient indicates a need for interpreter services, specific documentation is required at initial contact, application, redetermination/recertification/review, or yearly, and any time a change is requested, and must include the offer of free language services, the identified primary language(s), the acceptance or denial of language services, the language in which services were provided, and who provided the services. If the applicant/recipient is assigned to a certified bilingual worker or a bilingual unit, the name of the worker or unit must be included. Following such an assignment, “no other subsequent documentation is required regarding the provision of interpreter services” (p. 5) unless someone other than the assigned certified bilingual worker (or a worker outside the assigned unit) provides those services. Workers must document “each time any language access services are offered and/or utilized” (p. 4) at all substantive client contacts when interpreter services are provided by anyone else. Documentation must “indicate that the services were provided in the appropriate language” (p. 6) as well as the name of the worker and the nature of the information provided.

At the time of this Review, pursuant to [All County Letter \(ACL\) 21-128](#), the County was transitioning from the use of Form 2229A to CDSS Form 6181 and revising PPG 15-07-058 accordingly. Prior to this transition, PPG 15-07-058 required workers to obtain a completed Form 2229A “Client Waiver of Free Interpretation Services,” which included notice of the risk of ineffective communication and signature release of confidential information when an applicant/recipient wished to use their own interpreter. Form 2229A was required to be maintained in the case file with a new one completed whenever a new self-provided interpreter was used, and workers were required to document additional specific information in case narration/case comments each time a new Form 2229A was completed.

During CalFresh case review, Auditors observed documentation in 4 of 5 NEP/LEP case files consistent with the existing requirements at the time of this Review. In the 1 case that did not reflect existing requirements, case comments documented that no interpreter was needed because the interview was conducted with the applicant’s/recipient’s Authorized Representative (AR) for CalFresh, whose primary language is English. Program staff informed Auditors that the County did not require Form 2229A when an AR provides interpretation. However, AR designation is not a substitute for the specific requirement to provide notice to applicants/recipients of the

risks of using their own interpreter. When an individual chooses to have their AR provide interpreter services, the County must use CDSS Form 6181. ACL 21-128.

During CalWORKs case review, Auditors observed documentation in 4 of 4 non-ASL NEP/LEP case files consistent with the above requirements. In the 1 ASL case reviewed, Auditors observed documentation that interpreter services were offered to and declined by the applicant/recipient, who opted to use a free video relay service for the interview.

During IHSS case review, in 3 of 11 total NEP/LEP cases including ASL, Auditors observed documentation of interpreter services provided by bilingual certified staff specifying the language, the staff member's name, and that they are certified bilingual employees. In 6 of 11 cases vendor-provided interpreter services were used, with documentation of the language in 5 of those cases and documentation of the vendor name in all 6. The case in which language was not identified was the same case noted above in which the primary language was coded as "Other non-English". In the 1 ASL case reviewed, documentation noted that "communication [was] facilitated by Sorenson Network-ASL," a video relay service provider. In the remaining case, the Assessment Narrative documented that an English-speaking AR participated in a meeting without the recipient. Auditors note that in this situation, the AR did not provide interpreter services for the recipient but instead communicated with the County worker on the recipient's behalf without the recipient's participation. Therefore, Form 2229A was not required.

During CWS case review, Auditors observed that language services documentation was inconsistent, incomplete, and not easily searchable in CWS/CMS. In 1 of 4 NEP/LEP cases, the assigned worker is not identified as certified bilingual in Child and Family Team (CFT) meeting records, and no contractor is identified as having provided interpretation. In another case, CFT meeting documentation identifies an interpreter by name, but does not specify whether the interpreter is certified bilingual staff or a contractor, or the language used. In another case, DSL notes from the initial referral identify the interpreter as a contractor and provide the language used, while team meeting records identify different interpreters by first name only and provide language used. In 1 case, a referral DSL note documents that a certified bilingual worker acted as an interpreter for the assigned worker who is not bilingual, while CFT meeting records document an interpreter by name and language used. In 1 of 2 ASL cases, an Emergency Referral DSL note fails to identify information about an ASL interpreter. The other ASL case was closed without a need for contact with the family.

During Fraud case review, Auditors observed case comment documentation in 4 of 4 non-ASL NEP/LEP case files consistent with above-stated requirements.

Documentation indicates the use of a vendor in 2 cases, certified bilingual staff in 1 case, and a declination of interpreter services in the remaining case.

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

Mostly. Surveyed staff report using the following methods to ensure understanding: inviting and responding to clarifying questions; repeating information; checking for

understanding with both the interpreter and applicant/recipient; and speaking clearly and wording things in an understandable way.

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

Yes. According to PPG 15-07-058, translated forms and notices must be provided to applicants/recipients in their primary languages if translated by CDSS, or (if not translated by CDSS) sent in English with the GEN 1365, which informs applicants/recipients they may request interpreter services from the County.

During CalFresh and CalWORKs case reviews, Auditors observed 6 total NEP/LEP cases involving applicants/recipients identifying a non-English primary written language. In 5 of these cases, forms were provided in English at least some of the time. During case review, Program staff confirmed that the County's practice is to send a GEN 1365 with English forms, although Auditors were unable to verify instances when this occurred due to limited CalWIN functionality (i.e., the GEN 1365 is not recorded in CalWIN "Printed Correspondence"). In 1 case involving a Spanish speaker, CalWIN documentation demonstrated that translated forms were provided consistently.

During IHSS case review, Auditors observed 2 out of 10 total NEP/LEP cases involving an applicant/recipient who identified a non-English primary written language. In 1 of those cases, the County provided translated forms in the applicant's/recipient's primary written language (Spanish) consistently. In the other case, the application and CMIPS II records identified the applicant's/recipient's primary written language as English, whereas the Form 2229 on file identified a non-English primary written language. The discrepancy was unexplained and unresolved.

Auditors did not observe records of translated forms during CWS case review.

During Fraud case review, Auditors observed 4 NEP/LEP ongoing fraud cases, with 3 identifying Spanish as the recipient's primary written language and 1 identifying English. CalWIN "Printed Correspondence" indicates that translated forms are sent consistently in cases identifying Spanish as a primary language.

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

Yes, when translated by CDSS. According to PPG 15-07-058 and PPG 15-07-041, CDSS-translated NOAs are to be provided to applicants/recipients in their primary languages. PPG 15-07-058 further requires that a GEN 1365 be attached to all correspondence generated out of CalWIN (or CalSAWs, following the planned 2023 transition), which informs applicants/recipients they may request interpreter services from the County if the form(s) they receive are not in their primary language. Workers are responsible for ensuring the provision of verbal translation to any applicant/recipient who requests an explanation of a form that is not available in their primary language. PPG 15-07-041 also requires workers to "offer and provide interpreter services for the NOA" (p. 2) when CDSS translations are not available.



However, PPG 15-07-058 also states that if “forms and/or notices need to be translated into other languages, the responsible worker will send the forms/notices” (p. 11) to the County office that handles vendor-provided translation services. PPG 15-07-058 does not explain when or how staff should distinguish between forms/notices that “need to be translated” from those sent in English with a GEN 1365. Clarification requested by CDSS about this process had not been provided as of the publication of this Report.

Auditors’ case review observations regarding translated forms including NOAs are described immediately above. Auditors were informed by the County that NOAs are not used in CWS.

*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?*

Somewhat. According to the CRCP and PPG 15-07-041, inserted information “will be in the individual’s primary language.” However, neither the CRCP, PPG 15-07-041, nor PPG 15-07-058 explain the procedure for translating that information. Clarification requested by CDSS about this process had not been provided as of the publication of this Report.

## **Findings: Ethnic Origin Information**

*Does the County document ethnic origin data from applicants and recipients?*

Yes. The County documents ethnic origin information in CalWIN, CMIPS II, and CWS/CMS when it is provided by the applicant/recipient. Auditors observed this information documented in 8 of 8 CalFresh cases, 11 of 11 IHSS cases, 9 of 10 CalWORKs cases, and 6 of 6 CWS cases. In 1 CalWORKs case, the applicant/recipient was documented as declining to provide ethnic origin information. In 4 of 4 ongoing fraud cases, Auditors observed that ethnicity had been documented in CalWIN by program workers prior to Fraud program involvement.

## **Corrective Action**

- 6. Timely services:** The County must ensure that bilingual/ interpreter services are prompt and without undue delays. Div. 21-115. The County shall take steps to identify the source(s) of the delays reported by surveyed staff; update its protocol for the use of vendor-provided telephone interpreter services to eliminate or reduce wait times as much as possible; and inform staff of any relevant changes.
- 7. 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 complete the Corrective Action described under Section XI regarding its revised approach to calculating threshold languages and related staffing needs and goals.

- 8. Policy Revision:** The County must develop and implement a policy that identifies the process to ensure effective services to applicants and recipients who are non-English speaking or who have disabilities. Div. 21-115. As part of the CAP, the County shall revise PPG 15-07-058 and, as appropriate, PPG 15-07-041, to address the concerns identified in this Report, including but not limited to the following:

PPG 15-07-058 must explicitly explain how reception staff are to “notify the client’s worker of (the client’s) primary language,” including how this is documented.

- PPG 15-07-058 must include clear, explicit requirements for documentation of language access services by CWS workers, including the application of relevant Associated Service categories/types to DSL notes to make that information easily identifiable and searchable.
- PPG 15-07-058 must explicitly require IHSS workers to use the “Other Spoken Language Detail” field in CMIPS II to document an applicant’s/recipient’s spoken language when the primary spoken language is identified as “Other non-English.”
- PPG 15-07-058 must direct staff to use CDSS Form 6181 when an applicant/recipient uses their own interpreter even if that interpreter is a designated AR, pursuant to ACL 21-128. ACL 21-128 does not provide exceptions to completion of Form 6181 for designated ARs.
- PPG 15-07-058 must clarify the County’s process for translating certain forms/correspondence and sending others in English with a GEN 1365.
- PPG 15-07-058 and PPG 15-07-041 must clarify the process by which information is translated for insertion into CDSS-translated NOAs.

## Recommendations

**Case Alerts in CWS/CMS:** Auditors appreciate the thoughtful insights shared by County CWS Social Work Supervisors about challenges workers encounter in documenting client records in CWS/CMS and about potential solutions. Auditors encourage the County to consider implementing one such solution – i.e., requiring workers to use the Case Alerts field to “flag” clients’ language access needs (as well as disability-related needs as discussed in Section VI). Doing so will elevate the visibility of this information and support continuity of services to individuals throughout their CWS case proceedings.

## **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?*

Somewhat, with variation across programs. As of the time of writing this Report, the County has 3 policies addressing assistance for applicants/recipients with disabilities: PPG 35-01-041 (Blind and Visually Impaired Reasonable Accommodations) which applies to IHSS; PPG 15-07-018 (Self-Assessment Function Evaluation [SAFE] Referral (ES28A)) which applies to Welfare to Work; and PPG 15-07-058 (Language Access Services) which applies to CalFresh, CalWORKs, CWS, and other programs. Additionally, the County submitted a draft Reasonable Accommodation policy (PPG 15-07-0XX), to CDSS on April 6, 2022, for which CDSS provided review and feedback; this policy is discussed further below.

PPG 35-01-041 governs assistance for applicants/recipients with blindness or vision-related disabilities in the IHSS program. It includes specific procedural guidance regarding collecting and documenting accurate, up-to-date information from applicants/recipients about blindness and vision-related disabilities and the provision of related aids and services including large font forms, NOAs and timesheets, and the Telephonic Timesheet System (TTS).

PPG 15-07-018 governs the use of Form ES28A (SAFE Form) and is limited to Welfare-to-Work applicant/recipient self-assessments to identify mental health issues and/or issues related to alcohol or drug use, domestic violence, risk of suicide, and pregnancy status. Concerns noted on the SAFE Form are referred to a Substance Abuse Specialist or Social Worker.

PPG 15-07-058 ostensibly addresses the needs of applicants/recipients with disabilities as well as those who are NEP/LEP, however there is disproportionate emphasis on NEP/LEP services, with limited and vague guidance regarding services for individuals with disabilities. Procedural guidance about aids and services for individuals with communication-related disabilities consists primarily of brief sections about ASL services and the use of office computers to create large print versions of forms. PPG 15-07-058 also specifically states that staff should never ask if an applicant/recipient has a disability. However, as noted below, presenting this admonishment without guidance about the County's obligation to assist applicants/recipients to self-identify as having disabilities and related RA needs increases the likelihood that some individuals who need RAs will not receive appropriate assistance.

In addition, combining coverage of these two topics (i.e., services for applicants/recipients who are NEP/LEP and services for applicants/recipients with disabilities) tends to obscure that these two groups have distinct needs as well as distinct legal rights and therefore fails to fully address the needs and rights of either group at a policy level or to ensure compliance with existing obligations. This combined approach may also contribute to the misleading impression that NEP/LEP status is a type of disability and increase the risk that staff will not correctly understand or implement the County's obligations with respect to either group. Staff survey results demonstrate this lack of clear understanding, with 39% of surveyed staff reporting being unsure of whether the County has a policy to assist persons with disabilities.

Auditors note that the County's last [Compliance Review Report dated February 2, 2018](#) also identifies PPG 15-07-058 as providing "minimal direction for assisting clients with a disability, which resulted in some staff interviewed to be unaware or unclear whether there is a policy and procedure for clients with a disability." See Section V, page 22. At that time Auditors recommended that the County "develop a separate PPG for clients with a disability and provide training to ensure awareness by all staff." During this Review, the County informed Auditors that it had initiated but not completed the drafting of a separate PPG following the 2018 Compliance Review Report. The County subsequently completed the draft PPG during the current Review process. That draft Reasonable Accommodation policy (PPG 15-07-0XX) was submitted to CDSS for review on April 6, 2022. See further detail below.

*Does the County have a policy describing how it provides reasonable accommodations?*

Somewhat. At the time of this Compliance Review, the County's one existing reasonable accommodations (RA) policy applied only to IHSS (PPG 35-01-041). PPG 15-07-058 does not contain substantive information regarding RA. However, as noted above, the County completed and submitted a draft RA policy to CDSS on April 6, 2022 (PPG 15-07-0XX) which appears to apply to eligibility programs. CDSS provided feedback directly to the Civil Rights Coordinator regarding this draft policy but does not have information about its current status at this time.

PPG 35-01-041 governs the provision of RA for applicants/recipients who are blind or have vision-related disabilities in the IHSS program. This policy does not address the provision of RA to IHSS applicants/recipients with non-vision-related needs. CDSS recognizes that disability is a qualifying factor for IHSS and that certain program-specific requirements govern the provision and extensive documentation of a wide range of qualifying medical conditions/disabilities, functional limitations, related needs, and treatments/services. However, Auditors note that applicants/recipients may also have disabilities and RA needs that are not addressed by IHSS. In particular, an individual may have a non-vision-related disability and a resulting RA need (such as a speech-related disability necessitating assistive technology for effective communication) which affects their ability to participate equally in County programs, but which does not affect their ability to live independently in their own home. Needs such as this may effectively be “invisible” in the IHSS context unless the required RA analysis is also conducted.

PPG 15-07-058 provides very limited guidance regarding RA. For example, it states that when applicants/recipients self-disclose a disability, reception staff should “notify the designated worker of any requested accommodation(s) and the self-identified disability, if any.” (p. 2) No information or procedural guidance is given regarding the legal requirements for offering, requesting, providing, and documenting RA. [ACL 19-45](#). PPG 15-07-058 also states that if an applicant/recipient “discloses a disability, that information should be followed up by DSS at all contacts with the client” (p. 3) without specifying what the follow up must consist of and how it must be documented. Workers are simply instructed to “request clarification from their supervisors if they have any questions.” (p. 3) Relatedly, PPG 15-07-058 erroneously identifies RA documentation as discretionary, stating that workers to whom an applicant/recipient discloses a disability “**can** make notes that prove to be helpful, such as ‘client needs to meet downstairs due to a use of a wheelchair.’” (p. 3) (Emphasis added.) This is inconsistent with ACL 19-45 and with the Division 21 requirement that the County “maintain case record documentation in sufficient detail to permit a reviewer to determine [its] compliance with the requirements of Division 21.” Div. 21-116.1. Further, CDSS notes that failure to document RA as required means this information is unavailable to workers who rely on it to provide appropriate services without disruption to individuals who need the RA.

PPG 15-07-0XX, the County’s RA policy reviewed by CDSS in draft form shortly after this Review, presents an opportunity for the County to substantially improve the provision of services to applicants/participants with disabilities. In particular, CDSS notes that PPG 15-07-0XX is largely consistent with ACL 19-45 in content and structure, and it effectively incorporates County- and program-specific guidance and information on some though not all topics. CDSS previously communicated the results of its review of PPG 15-07-0XX, including identification of specific areas of concern and suggested revisions, directly to the County. (See also Corrective Action, below)

*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)?*

Somewhat, with variation across programs. PPG 15-07-058 and the CRCP state that unspecified “auxiliary aids [and] services” may be used by workers to assist applicants/recipients who disclose a need for assistance in communicating. PPG 15-07-058 includes brief provisions about ASL services and about using office computers to enlarge forms for individuals with vision-related disabilities. PPG 15-07-0XX, reviewed by CDSS in draft form, is more comprehensive and consistent with the scope and content of ACL 19-45 on this topic.

The CRCP includes additional detail regarding the County’s virtual ASL interpretation services, offered via a contracted provider on demand 24 hours a day, 7 days a week. In addition, the CRCP states that ASL-related interpreter services are available via the Deaf and Hard of Hearing Service Center, and County telephone operators provide TTD interpreter services to or from County departments.

PPG 35-01-041 identifies a range of auxiliary aids and services to IHSS applicants/recipients who are blind or who have vision-related disabilities, including forms, NOAs, and timesheets in 18-point font; NOAs in braille or CD format; and TTS. The policy also states that vision-related aids and services are available in English, Spanish, Mandarin, and Armenian.

Staff survey responses reflect strong awareness about ASL interpreter services and of braille and large print materials.

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

Minimally, with variation across programs.

The CRCP notes that applicants may indicate a disability on program applications and when requesting a disability-related exemption from certain Welfare-to-Work activities.

PPG 35-01-041 requires IHSS workers to “collect [blindness and visual impairment] information during the application process” and further requires assigned SWs to review the vision-related needs and services “with all applicants during the initial assessment” and at subsequent reassessments. (P. 2) PPG 35-01-041 does not address how workers must identify and/or assist applicants/recipients to identify **non**-vision-related disabilities and related RA needs that are not otherwise captured for IHSS program purposes.

As noted above, PPG 15-07-058 directs workers not to ask applicants/recipients if they have a disability except as needed to determine Medi-Cal eligibility. CDSS recognizes disability etiquette as an important component of ensuring effective assistance and complying with non-discrimination requirements, however, policies must reconcile disability etiquette concepts with existing obligations to assist persons with disabilities. ACL 19-45. The CRCP states that services are provided to meet an applicant's/recipient's "specified request or special need for accommodations" if they "self identif[y] a disability." (P. 7)

A foreseeable consequence of these policies is that applicants/recipients who affirmatively identify their disabilities and those with known or obvious disabilities are more likely to receive appropriate services than others who have invisible disabilities or who are unable to self-identify as having them. The CRCP also states that applicants/recipients "are encouraged to self-identify a disability that may impede services in the normal course of business," (p. 14) but does not explain how staff are trained or supported to accomplish this.

Staff survey results confirm that staff are uncertain about whether the County has a written policy and/or procedure for identifying applicants/recipients with disabilities, with 53% reporting "no" or "unsure." When asked if the County assists applicants/recipients to self-identify their disability, 66% of staff report "no" or "unsure."

Auditors again note that draft PPG 15-07-0XX presents an opportunity for significant improvement including the provision of more operational detail and information to support staff in assisting applicants/recipients to self-identify as having disabilities and RA needs.

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

No. PPG 15-07-058 requires workers to "establish and document... the ability or inability [of English proficient applicants/recipients] to read, write and understand the English language" (p. 3) but does not explain how or which staff establish or document this. Eighty-two (82) percent of surveyed staff report "no" or "unsure" when asked if a process exists for offering screening for disabilities, including screening for learning disabilities. The County did not provide information to indicate such a process.

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

No, except to a certain degree in IHSS.

During IHSS case review, Auditors observed documentation that staff offered vision-related RA in all 4 cases reviewed involving applicants/recipients with vision-related disabilities. Auditors observed extensive documentation of applicants'/recipients' medical conditions and functional limitations as related to IHSS eligibility and/or service

determination, but no documentation of other RA offers. PPG 35-01-041 directs IHSS workers to offer RAs specifically to applicants/recipients who are blind or have vision-related disabilities. However, as noted above, this may leave other disability-related RA needs unidentified, undocumented and unaddressed.

During CalFresh case review, Auditors reviewed case records of 3 applicants/recipients identified as having disabilities based on other program information (e.g., receipt of Supplemental Security Income (SSI)). Auditors did not observe documentation of RA offers or any RA-related information in those cases.

During CalWORKs case review, Auditors reviewed case records of 5 applicants/recipients identified as having disabilities based in whole or part on other program information (e.g., receipt of SSI). In 1 of these cases, the individual also indicated on their application that they have a disability and need help applying, and in another case, the CalWIN Diagnosis Detail screen identified the applicant/recipient as “mentally disabled” and their case record included an authorization to release medical information regarding that mental disability.

Auditors did not observe evidence that CalFresh or CalWORKS staff recognize or treat the information described above as disability indicators triggering RA-related obligations. Rather, case navigators affirmed to Auditors during case reviews that workers rely on applicants/recipients to self-identify their disabilities and initiate RA requests. This approach is not consistent with the identification requirements set forth in ACL 19-45.

CWS program staff were not able to identify any cases for case review involving participants who had requested RA because CWS workers do not specifically capture that information in CWS/CMS. During case review, Auditors reviewed 6 cases, 1 of which involved both a child and a parent with clear indicators of both mental and physical disabilities in their records. (Auditors observed this information documented in the CWS/CMS Case Alerts field, the Health and Education Passport Report, the Existing Health summary, and the Diagnosed Conditions tab for these individuals.) However, Auditors did not observe documentation to support that workers recognized these conditions as disabilities for which RA must be offered to the child or the parent. As explained in ACL 19-45, Counties are obligated to offer RA if a disability is known or obvious. See *Duvall v. County of Kitsap*, 260 F.3d 1124, 1139 (9th Cir. 2001).

Auditors did not observe cases involving RA offers during the Fraud case review. Fraud workers have limited contact with a small subset of applicants/recipients, as explained in Appendix 1.

*Does the County appropriately document disabilities and reasonable accommodation requests?*

Minimally, except to a certain degree in IHSS.

PPG 35-01-041 requires that IHSS SW document applicants'/recipients' vision-related needs and services in the “BVI screen” as well as in the Assessment Narrative in CMIPS II. During IHSS case review, Auditors observed consistent, complete



documentation of vision-related disabilities and RA requests in 4 of 4 cases involving individuals with vision-related disabilities. In addition, in all IHSS cases reviewed, Auditors observed extensive documentation of applicants'/recipients' medical conditions and functional limitations related to IHSS service qualification and determination. During case review, program navigators informed Auditors that any disability- and RA-related information outside that scope is, if captured at all, notated in the Medical Information portion of the Assessment Narrative, rendering it indistinguishable from the aforementioned programmatic information.

In the CalFresh and CalWORKs programs, certain types of disability-related information (e.g., receipt of SSI) are consistently documented in CalWIN sections specifically designated for that purpose (e.g., Disability/Medical Conditions). Similarly, in CWS, certain types of disability-related information (e.g., clinical diagnoses) are consistently documented in specific CWS/CMS sections designated for that purpose (e.g. "Diagnosed Conditions"), which information then automatically generates an individual's "Health and Education Passport" record. However, Auditors did not observe that workers in these programs either treat this information as triggering RA-related obligations or identify and document disabilities and related RA needs that fall outside these standardized categories.

CDSS does not consider the absence of disability- and/or RA-related documentation to reliably reflect an actual absence of RA needs among County applicants/recipients: Staff acknowledge that they implement the approach required in PPG 15-07-058 of relying on applicants/recipients to affirmatively self-identify their disabilities and initiate RA requests, which means that less obvious, undiagnosed or otherwise undisclosed disabilities and related RA needs may be missed. Furthermore, PPG 15-07-058 treats RA documentation as discretionary. In addition, among the programs reviewed, only IHSS uses its electronic case management system functionality to document RA information in a way that is both readily visible and searchable – but it does so only for a specific set of RAs related to blindness and visual impairment.

As reviewed by CDSS in draft form, PPG 15-07-0XX includes clearer, more accurate, robust documentation requirements that will help address many of these concerns.

## **Corrective Action**

- 9. 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 part of the CAP, and as CDSS communicated directly to the Civil Rights Coordinator on June 2, 2022, the County shall, if it has not already done so, revise PPG 15-07-0XX to address Auditors' concerns including but not limited to the following:

- Greater detail and specificity are needed throughout to clarify which programs the requirements apply to and how those programs should each meet the requirements. The County should explicitly apply this policy to Eligibility programs, IHSS (to the extent not already covered by PPG 35-01-041), CWS, Fraud, and all other CDSS-funded programs.
- Incorporation of greater levels of operational detail in guidance and instructions to staff. For example:
  - Requirements that “flag” features be used in case management systems with this functionality and requirements for how workers using systems without a “flag” feature can use existing CMS functionality and tools to render documented RA information readily identifiable and searchable (i.e., a work-around).
  - Requirements about where and how and when to document information, in addition to the type of information workers must document.
- The section on “Identification of Disabilities” must affirm that case records (including “other program information” such as SSI status) are indicators of disability and potential RA needs that may not be apparent or affirmatively self-disclosed by applicants/recipients. Explicit guidance must be provided so workers recognize and consider this information in determining whether, when, and how to offer RA.
- Inclusion of information regarding requirements for RA denials.
- Conduct reviews of PPG 15-07-058 and PPG 35-01-041 to identify and undertake any revisions to those policies that are needed to resolve inconsistencies with, and/or conflicts between, them and PPG 15-07-0XX.

## Recommendations

**Case Alerts:** Auditors reiterate the recommendation made in Section VI, above, that the County consider having CWS workers use the Case Alerts field to “flag” clients’ RA information as well as information about their language access needs.

## 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. The County provides a brief overview of civil rights and Division 21 as part of New Employee Orientation (NEO) as well as an annual civil rights training via an e-learning

module. Eighty-nine (89) percent of surveyed staff survey report they have received training on the County's civil rights obligations; the remainder report they have not or are "unsure." Auditors reviewed both the NEO and annual civil rights training modules and have identified key areas of concern under Corrective Action, below.

Additionally, the County presents a short video about its discrimination complaint handling process as part of its annual civil rights training. This video also raises significant concerns (which are linked to concerns about the County's discrimination complaint process, discussed in Section VIII, below). For example, the video narration begins with a generalized assertion that applicants/recipients "usually" file discrimination complaints for non-discrimination-related reasons. This tends to set a tone, even if unintentional, of skepticism from County Civil Rights leadership toward applicants'/recipients' discrimination claims, especially because the video does not mention the specific, concrete evaluation steps needed to determine whether a complaint meets the requirements for a discrimination claim. These steps are explained in [CDSS' Complaint Evaluation training](#), which is available on CDSS' website. Providing staff with an overview of this process is one way the County could inform staff of key distinctions between discrimination and non-discrimination complaints while simultaneously familiarizing them with the principled, objective process used to make those distinctions. See Corrective Action, below.

Auditors also observe that the video instructs staff who receive discrimination complaints to "try and resolve the issue for the client or recommend to the client that they speak with your chain of command or the DSS Appeals Unit prior to contacting the Civil Rights Unit to see if their issue can be resolved at that level" and "If they still want to file a discrimination complaint, *then* they should be directed to the DSS Civil Rights Unit." (Emphasis added.) This is concerning for multiple reasons. First, it reflects an assumption that staff (including new employees watching this training) can draw correct conclusions about the nature of complaints upon receipt, without conducting a compliant, thorough evaluation process. This assumption can lead to misidentification and mishandling of discrimination complaints. In addition, it reflects an approach by the County of treating early resolution attempts as a prerequisite to discrimination complaint investigation. As discussed further in Section VIII below, early resolution attempts are permissible, but requiring complainants to engage in such a process as a prerequisite to pursuing a complaint imposes a requirement that is not supported by Division 21, may create a chilling effect on complaint filing, and may limit the County's own knowledge about systemic civil rights issues. (Staff survey results described in Section VIII, below, also support these concerns and demonstrate a need for revised staff training materials in this area.)

The deficiencies in the Division 21 training, coupled with related deficiencies in the County's discrimination complaint processing procedure, discussed in Section VIII below, increase the likelihood that staff may misidentify and/or misdirect discrimination complaints or otherwise subject them to arbitrary and even discriminatory handling. See Corrective Action, below.

*Does the County provide employees with Cultural Awareness Training?*

Mostly. Eighty-six (86) percent of surveyed staff report they have received this training, and most of those report that they receive it annually. The remaining 14% of surveyed staff report they have not received it or are unsure if they have.

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

Somewhat, with room for improvement. Forty-three (43) percent of surveyed staff report they are “extremely” or “very” familiar with these groups; 41% report they are “somewhat” familiar; and 16% report they are “not so” or “not at all” familiar.

*Have the Children’s Social Workers (CSW) received training on the Multi-Ethnic Placement Act (MEPA)?*

Minimally. Thirty-three (33) percent of surveyed CSW’s report they have received this training; 17% report they have not; and 50% report they are “unsure.”

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

Minimally. The annual civil rights training reviewed by Auditors provides minimal information about services or protections for applicants/recipients with disabilities. In addition, the Civil Rights Coordinator and ADA Coordinator provided conflicting information via survey responses about whether the County provides staff with disability awareness training (i.e., reporting that staff do not receive such training but also that staff receive training via UC Davis on “working with clients with disabilities and special needs”). The CRCP does not mention staff training on this topic. As of the time of writing this Report, the County has not confirmed whether this training is provided.

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

No. The County’s Annual civil rights training provides no information on this topic, and the County has not indicated that it provides any other training to address this.

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

No. The County’s annual civil rights training provides no information on this topic, and Auditors did not receive or observe any staff training on this topic. As noted above, conflicting information was provided via survey responses about whether the County provides training on ADA requirements including reasonable accommodation to staff.

*Do the employees understand the County's obligation to provide reasonable accommodation to applicants/recipients with disabilities?*

No. Auditors did not observe evidence that staff consistently offer, provide, and/or document RA.

## **Corrective Action**

**10. 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 develop a plan to:

- Identify and address deficiencies in the current training to improve staff knowledge about the predominant cultural groups receiving services in the area; and
- Identify and close all gaps in training delivery to ensure that it is provided to all public contact staff.

**11. MEPA Training:** The County shall ensure that CSW's receive MEPA training to ensure that public contact staff have knowledge of, and properly apply, placement prohibitions contained in MEPA. 42 U.S.C. 672, 674, and 1996(b). As part of the CAP, the County shall:

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

**12. 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. As part of the CAP, the County shall ensure that the Civil Rights Coordinator, Civil Rights leadership, and investigators watch CDSS' Complaint Evaluation training and review the accompanying Participant Guide, which presents a clearly defined, compliant process for evaluating discrimination complaints. In addition, the County shall revise its annual civil rights training, the above-referenced untitled video on discrimination complaint handling, and the civil rights component of the NEO to address concerns identified in this Report, including but not limited to the following:

### **Annual Civil Rights Training 2022**

- **Slides on protected classes and workplace harassment:** Different civil rights laws and protections apply to different groups in different contexts. For example, the rights and protections to which CWD program

applicants/recipients are entitled differ in key respects from the workplace rights and protections afforded to CWD employees, and both of these differ in certain ways from veterans' civil rights protections. Civil rights training that applies to one group will therefore be different in certain respects from training that applies to other groups, whatever similarities may also exist. The County is not prohibited from developing civil rights training that applies to more than one context or group, but it is obligated to ensure the accuracy of its training content. These slides currently fall short of this obligation by mixing civil rights concepts, terms and requirements that apply to various groups and in different contexts. The County may wish to consider working with its County Counsel as it revises this portion of the training accordingly.

- **Slides 2.2, 2.3, 2.4:** These slides about serving applicants/recipients with disabilities require revision for accuracy and completeness.
- **Slides 3.2, 3.4, 3.5:** These slides about serving applicants/recipients who are NEP/LEP require revision to accurately and comprehensively reflect the requirements of ACL 21-128 and ACL 08-65 regarding the County's obligations for provision and documentation of language access services.
- **Slides 5.1 and 5.3:** These slides about discrimination complaints require revision for accuracy, clarity, and comprehensiveness regarding complaint handling procedures.

**New Employee Orientation** (Civil Rights section, pages/slides 49-64) requires review and revision to ensure that:

- Information presented regarding the availability of the PUB 13 in alternate formats is correct and complete;
- Program and facility accessibility requirements are addressed;
- Rights and protections for applicants/recipients who are NEP/LEP and for applicants/recipients with disabilities are each presented clearly and accurately;
- Procedural guidance (e.g., regarding case record documentation) is presented with operational detail to enable staff implementation; and
- Relevant pages/slides reflect the requirements of ACL 21-128.

**Video Training on the County's Discrimination Complaint Process:** The County must revise this video to address the concerns raised above and in Section VIII, below, and to reflect related policy changes.

## Recommendations

**Citations:** When revising Annual Civil Rights training materials, CDSS strongly recommends the County include citations to appropriate legal sources for information about protected categories (e.g., in the "Notes" section of the presenter's version). Div. 21-101 lists many such sources. Maintaining this information will help ensure content accuracy and facilitate appropriate future updates.

## 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?*

Somewhat. 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: Not an example of a discrimination complaint; selected by 10% of surveyed staff.
- Complaint 2: Example of a discrimination complaint; selected by 60% of surveyed staff.
- Complaint 3: Example of a discrimination complaint; selected by 84% of surveyed staff.
- Complaint 4: Example of a discrimination complaint; selected by 67% of surveyed staff.

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

Only 60% of staff recognized Complaint 2 as a discrimination complaint, which may demonstrate that staff do not consistently understand that complaints that raise customer service issues such as "rude" worker behavior may **also** be discrimination complaints. Only 67% of staff recognized Complaint 4 as a discrimination complaint, which demonstrates that staff do not consistently understand that a mental health condition such as bipolar disorder can constitute a disability that entitles an individual to civil rights protections. It may also demonstrate that staff do not consistently understand that parents in Child Welfare Services cases are entitled to applicable civil rights protections. Reinforcing these concepts in policy and staff training can help improve staff ability to identify discrimination complaints.

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

Inconsistently, with wide variation expressed across programs and job categories as to complaint handling procedures, and little or no articulation of what steps may be necessary or appropriate upon receipt of a complaint. When asked what they would do if an applicant/recipient expressed a civil rights complaint to them:

- Sixty-one (61) percent of surveyed EWs report they would provide, or direct the complainant to, posted Civil Rights Coordinator contact information, with one of these EWs reporting they would submit the complaint to the “chain of command.” Thirteen (13) percent report they would contact their supervisor. Only 2 EWs report they would receive the complaint for processing.
- Fifty-six (56) percent of surveyed OAs report they would provide, or direct the complainant to, posted Civil Rights Coordinator contact information. None report they would receive the complaint for processing.
- Twenty-eight (28) percent of surveyed APWs report they would provide, or direct the complainant to, posted Civil Rights Coordinator contact information. Fifty-six (56) percent would contact their supervisor and/or report the complaint, or direct the complainant to report it, to the “chain of command.” None report they would receive the complaint.
- Seventeen (17) percent of surveyed CSWs report they would provide, or direct the complainant to, posted Civil Rights Coordinator contact information. Fifty-six (56) percent report they would contact their supervisor. None report they would receive the complaint.
- Only 58% of surveyed Program Supervisors/Managers report that discrimination complaints should go to the Civil Rights Coordinator for handling.

Other responses reflect inconsistent and incorrect understanding by workers who report they would “[d]irect the client through the appeal process”; send the complaint to “labor relations” or “personnel”; or refer the complainant to “quality assurance.” Three (3) surveyed staff report that program staff are responsible for conducting discrimination complaint investigations.

These results tend to suggest the County lacks a clear, coherent discrimination complaint handling procedure, robust, accurate policy guidance, and training for staff members about that procedure. These concerns are discussed further below.

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

Somewhat. Forty-nine (49) percent of surveyed staff correctly identified the lobby or waiting/reception area as the location of this poster.

*Is the complaint log complete and up to date?*



Somewhat. The County's Complaint Log includes the column headings specified by Division 21, but the contents of some of those columns are missing or incomplete and the contents of other columns raise substantive concerns. For example:

- **“Program” column:** Program identification, which is essential to evaluating jurisdiction over discrimination complaints, is missing for several cases.
- **“Basis” column:**
  - The County must correctly identify the protected basis or bases in order to ensure appropriate complaint handling. The County lists “sexual harassment” as a protected basis for some discrimination complaints in the Log, although this is not a recognized protected category within CDSS’ Division 21 discrimination complaint process for applicants and recipients. Sexual harassment can be a form of sex discrimination, however, and CDSS may (if other required elements are met) have jurisdiction over an applicant’s/recipient’s sex discrimination claim that alleges sexual harassment by a County employee or contractor.
  - California law recognizes “gender identity” and “gender expression” as two distinct protected categories, but they are presented as a single, combined basis for some complaints in the Log (i.e., “gender identity/expression”). This suggests the County also conflates these two concepts in a way that may negatively impact complaint handling.
- **“Nature of Complaint” column:**
  - “Sexual harassment” is identified as the nature of the complaint for some logged discrimination complaints, which raises similar concerns to those noted above.
  - The County lists “discrimination” in this column for some cases, while listing “failure to accommodate” and/or “denial of benefits/services” for others. Treating the latter two as distinct from “discrimination” raises concerns because failure to provide RA to an individual with a disability is a form of discrimination, and because a denial of benefits/services may be the result of or related to discrimination. This heightens CDSS’ concern, noted in this Section and Section VII, above, that the County may not make consistently accurate distinctions between discrimination and non-discrimination complaints due to the lack of an accurate evaluation procedure.
- **“Resolution” column:**
  - The County uses this column to document multiple complaint handling status updates, with some missing documentation of the resolution (e.g., completed investigation, withdrawal, failure to pursue, etc. (Div. 21-203.217)). The County is advised to create a separate column for updates, which will support focused and accurate documentation of resolutions.
  - In some logged cases, status updates in the “Resolution” column indicate the cases were closed without full investigation or notification to CDSS due to early resolution, sometimes after the complaint was referred to a program or to “IHSS QA review.” In light of findings in this Section and

Section VII about the County's early resolution process, Auditors reiterate that requiring such a step is not permitted by Division 21; complainants must be informed they may opt out of this step; and program input and involvement can support but not supplant the Division 21 discrimination complaint evaluation and investigation processes.

- Auditors observed a large number of logged cases in which the County received a complaint directly, attempted to contact the complainant, then closed the case without investigating or notifying CDSS due to the complainant's failure to respond. Auditors observed that status update information for these cases, repeated verbatim across multiple cases, gives an impression of a highly routinized procedure for making those contact attempts (i.e., "F/u letter mailed, close if no response by [date]"). Division 21 requires that counties "make a reasonable effort to make contact with the complainant." Div. 21-203.224. CDSS considers it best practice for counties to use all known methods of contact (e.g., telephone, letter, email) when attempting to contact a complainant and to make (and document) at least two attempts to do so. Relatedly, ensuring accurate and appropriate documentation of reasonable accommodation and language access information in case records also helps ensure that contact attempts are appropriate and calculated to best reach complainants.
- **"Decision" column:** "Outside jurisdiction" appears in the "Decision" column of certain cases, and in some of these cases, the Log lacks information to explain the basis for this decision, which impedes the County's ability to demonstrate compliance with Division 21 requirements. Given CDSS' above-stated concerns about the County's approach to complaint evaluation, CDSS expresses related concerns here about the County's jurisdictional determinations.

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

Yes. PPG 10-02-009 (Discrimination Complaints by Clients (Rev. 2/08/22)) is the County's policy for discrimination complaint processing. Auditors identified concerns with this policy detailed under Corrective Action, below. Auditors focus here on a core set of issues impacting multiple aspects of the County's complaint handling system.

PPG 10-02-009 includes a section titled "Procedures when a Discrimination Complaint is Made by a Client," which introduces and prioritizes early resolution by stating that the "individual should be given the opportunity to discuss the situation with the first line supervisor...." up through the chain of command. Subsequently, the section titled "Processing Discrimination Complaints" presents early resolution as a required first step in complaint processing: "When a discrimination complaint is received, early resolution is first attempted by conferring with the parties involved. *If* a resolution cannot be reached," the County proceeds with the Division 21 investigation process. (Emphasis added.) This establishes in policy the approach articulated in the County's above-

described training video (and reflected in some Complaint Log contents) of inserting a required early resolution step in the discrimination complaint handling process.

Requiring early resolution is inconsistent with Division 21 in that it creates an additional hurdle for applicants/recipients who wish to exercise their right to have their discrimination complaint investigated. It is also inconsistent with Division 21 insofar as these regulations broadly promote removing barriers to complaint filing. Div. 21-101, 21-109.17, 21-115.3, 21-203.22. Furthermore, the County's approach does not appear to recognize that a complainant whose specific issue is resolved maintains the right – and may still wish – to proceed with their discrimination complaint.

Moreover, the policy lacks a compliant, well-defined discrimination complaint evaluation procedure, a topic that is addressed in detail in CDSS' Complaint Evaluation training. When coupled with the early resolution approach described above, this raises a significant risk that complaints will be misidentified and mishandled, leading to arbitrary and even discriminatory outcomes.

*Is the County handling discrimination complaints appropriately?*

Mostly not. As noted in this and other Report sections, CDSS has significant concerns about the County's complaint handling policy, procedures, and training. Moreover, CDSS has raised these and related concerns in specific complaint case-related communication with the County in recent years, which underscores the extent to which they merit attention and improvement.

Auditors recognize that the County has recently taken steps to address an issue of longstanding CDSS concern by revising the County-generated discrimination complaint form for applicants/recipients in certain key respects. Auditors are encouraged by both these revisions and by discussions about them with County Civil Rights leadership that reflect their understanding of, and concern for, the issues involved. CDSS' further identifies the following remaining concern about this form:

- Retaliation is a distinct type of complaint over which CDSS may have jurisdiction. Div. 21-203.5. Its inclusion as a "type of harm or adverse action" (i.e., an element of a discrimination claim) suggests a mischaracterization of the nature and appropriate handling of retaliation claims. The topic of retaliation is addressed in CDSS' Complaint Evaluation training.

## **Corrective Action**

**13. 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. As part of the CAP, the County shall review its Log contents for all open cases from 2020 through the date of this Report, add missing

information to empty fields for those cases, and revise the contents of the Program, Basis, Resolution, and Decision columns for those cases as needed to ensure that information is accurate as well as consistent with the Division 21 meanings for those categories. Div. 21-203.21. The County shall submit a summary of these steps including an explanation of any issues or patterns of concern identified during this process and a plan with steps the County will take to resolve those concerns and ensure they do not recur.

**14. Complaint Processing Policy:** The County shall ensure policies addressing discrimination complaint handling are clear, consistent, and comport to the required complaint processing obligations. Div. 21-203. As part of the CAP, the County shall develop and promulgate a revised PPG 10-02-009 that is responsive to the concerns raised in this Report, including but not limited to following:

- Include a complaint evaluation procedure that addresses threshold jurisdictional issues, prima facie elements, and other key topics covered by CDSS' Complaint Evaluation training.
- Include a clear, coherent, compliant procedure for post-evaluation complaint processing consistent with Division 21 requirements such as those governing communication with the complainant, investigation, and reporting on the investigation.
- Ensure that the list of legally protected bases is complete, correct and internally consistent in all instances, and include an explanation of the protections against discrimination on the basis of perception or association. The County may refer to the list on [CDSS' website](#) for reference.
- Revise the filing option information in the subsection titled "Client's Right to File a Discrimination Complaint" and the appeal information in the subsection titled "Client's Appeal Rights" for accuracy.
- Revise the section titled "Acceptance of Discrimination Complaints" to include operational detail on receiving and routing complaints, including what information staff should record when putting a complaint in writing for an applicant/recipient.

The County may contact CDSS for feedback and technical assistance.

**15. Discrimination Complaint Form:** As part of the CAP, the County shall revise its complaint form to address the concern raised above. Div. 21-203.32.

## **IX. VENDOR CONTRACTS**

Counties are required to ensure contracted services with contractors, vendors, consultants, and other 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 nondiscrimination language within the agreements as well as statements of assurance (i.e., an agreement to administer services and benefits in a nondiscriminatory way). The assurance in 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 needed.

## **X. COMMUNITY INPUT**

Feedback was sought from multiple community and advocacy organizations regarding County services. No organization responded to CDSS' invitation to provide feedback, observations, suggestions for improvement, or promising practices.

## **XI. CIVIL RIGHTS COMPLIANCE PLAN REVIEW AND APPROVAL**

The Fresno County Department of Social Services Civil Rights Compliance Plan for the period November 2021 through October 2022 was received on January 14, 2022. Thank you for submitting your agency's Civil Rights Compliance Plan. Before approving the Civil Rights Compliance Plan, we request the following changes:

- **Section II ("Assignment of Resources"):** The County may not assign an employee to investigate a complaint involving actions taken by them or by an employee under their immediate supervision, or where that designated employee's responsibilities in another program or capacity within the County may result in a conflict of interest. Div. 21-203.31. As part of the CAP, the County shall revise Section II (C) to explain how it prevents conflicts of interest when a complaint is received involving the actions of one of the County's Civil Rights Investigators or Civil Rights Coordinator.
- **Section III ("Community Profile"):** 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 persons who are NEP/LEP and persons with disabilities. Div. 21-107.1. CDSS' CRCP Guidelines ask the County to provide "information on community characteristics that may affect the delivery of

services” including a description of “any unusual or significant county or community circumstances that adversely affect, or may affect, the effective delivery of services, and policies and procedures to remedy this.” In response, the County’s CRCP states that it “welcomes refugees from war or disaster-torn countries” and “reaches out to new Americans through its community partnerships with local non-profit agencies” but does not provide any further responsive information. As part of the CAP, the County shall revise Section III to include specific information about steps it takes to conduct outreach to refugee communities about its programs and services (including but not limited to Refugee Cash Assistance (RCA) and the Trafficking and Crime Victims Assistance Program (TCVAP)) and how it identifies and meets the language access needs of applicants/recipients from those communities.

- **Section VII (“County Services Provided by Contractors, Subcontractors, Vendors”):** The CRCP states that if a client files a discrimination complaint involving a vendor, the Civil Rights Coordinator will conduct the investigation, but the CRCP is silent about what procedure the vendor must follow for appropriately routing complaints and how vendors are informed of this process. The CRCP also states that vendors are “required to read, sign, and adhere to the Vendor Assurance of Compliance,” but does not explain policies or procedures for ensuring that vendors adhere to nondiscrimination requirements such as those described in CRCP Guidelines Section VII (2)(a)-(e). The County shall, as part of the CAP, revise this section to include this information.
- **Section VIII (“Primary Language Data Statistics, Staffing, and Hiring Goals”):** Division 21 states broadly that threshold language should be considered by both location and program. Div. 21-104(s)(2). This means that an office’s threshold languages consist of threshold languages for that site and for programs administered at that site. Office locations that have not identified location-specific threshold languages can meet this requirement by treating program-wide threshold languages as threshold for locations where those programs are administered. As noted above, during this Review the County adopted this alternative approach and submitted revised data to identify its programmatic threshold languages and bilingual staffing levels and needs. The County shall, as part of the CAP, incorporate the revised data into its CRCP. In addition, as requested in the CRCP Guidelines, include an explanation of the rationale for this change in approach as well as a description of the County’s plan for and efforts to meet its identified bilingual staffing hiring goals,.
- **Section XII [labeled XI in CRCP] (“Discrimination Complaint Process”):** The County shall, as part of the CAP, revise this section to reflect corresponding revisions made to PPG 10-02-09. See Report Section VIII above.
- **Section XIV (“Self-Monitoring”):** In its CRCP, the County provides a single sentence description of self-monitoring procedures, describing visual inspections of office reception areas for required posters, pamphlets, and I-Speak cards. The CRCP does not explain how often this takes place; nor does it explain what, if any, self-monitoring is done to ensure compliance in other areas or provide responses to items (1)-(3) in the CRCP Guidelines for this section. The County

shall, as part of the CAP, revise this section to provide a detailed written description of its process for self-monitoring civil rights compliance and include copies of any accompanying form(s), checklist(s), or other job aids it uses for this process.

Please submit an updated Civil Rights Compliance Plan incorporating these items with your CAP for this Review. CDSS reminds the County that pursuant to [ACL 09-79](#), Counties have an obligation to maintain an updated Civil Rights Compliance Plan on an ongoing basis. Therefore, your revised CRCP should reflect **all significant changes**, including those implemented based on required Corrective Action in this Report, to ensure that the information it contains is complete and current. Please also provide an **accompanying list or key** that identifies the changes made and the page number each change appears on. The County may contact CDSS for feedback and technical assistance.

## **XII. CONCLUSION**

The CDSS Reviewers found the County staff welcoming, informative, supportive, and receptive to new information and feedback. Particular thanks to Annette Morris, Civil Rights Coordinator, and Deborah Edell, Senior Staff Analyst, for organizing the details of the Review. In each program area, staff were helpful with the case reviews, computer assistance, and related issues. County staff, including management, expressed their commitment to ensuring access, assistance, and compliance.

The CDSS Reviewers found substantial compliance concerns. The County 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 needed.

## **APPENDIX 1: DOCUMENTATION OF APPLICANT/RECIPIENT CASE RECORDS**

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 CDSS' observations after reviewing the County's case files across CDSS-funded programs.

### **Reviewed Case Files**

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

**Non-Assistance CalFresh:** Auditors reviewed 8 total cases, including 5 NEP/LEP cases and 3 cases with a documented disability in CalWIN, the electronic case management system. Auditors were informed that the County can search for and identify applicants/recipients with certain documented disabilities in CalWIN, but there is no special indicator or "flag" feature to identify, track, or search for reasonable accommodations (RA); therefore, no cases involving documented RAs were identified for review.

**CalWORKs:** Auditors reviewed 10 total cases, including 1 ASL case, 4 non-ASL NEP/LEP cases, and 5 cases with a documented disability in CalWIN. See directly above regarding lack of RA tracking and identification in CalWIN.

**In-Home Supportive Services:** Auditors reviewed 11 total cases, including 1 ASL case, 10 non-ASL NEP/LEP cases, and 4 cases with a documented disability and/or RA related to blindness or vision-related disability in CMIPS II, the electronic case system.

**Child Welfare Services:** Auditors reviewed 6 total cases (1 of which involved a referral only), including 2 ASL cases, and 4 non-ASL NEP/LEP cases. One of the 6 cases reviewed also involved both a child with disabilities and a parent with indicators of potential disabilities. Auditors were informed that the County was unable to identify any cases involving a child or parent/guardian who had requested or received an RA, as it has not developed or consistently implemented a method of identifying and/or tracking this information in CWS/CMS, the electronic case system.

**Fraud:** Auditors reviewed 7 total cases, including 3 Early Fraud Detection/Prevention cases and 4 Ongoing Fraud cases in CalWIN. All were non-ASL NEP/LEP cases. See above regarding lack of RA tracking and identification in CalWIN.

### **Findings: CalFresh and CalWORKs**

**Ethnic Origin:** Documented in CalWIN – Demographics Summary.



**Primary Language:** Documented on Form 2229, on applications, renewals/recertifications, and in CalWIN – Demographics Summary and Case Summary Detail. Program staff informed Auditors that Form 2229 is no longer required because applications capture the same information.

**County-Provided Interpreter Services:** Documented in CalWIN – Case Comments.

**Applicant/Recipient-Provided Interpreter:** Documented on Form 2229A and in CalWIN – Case Comments according to the CRCP. Auditors did not review cases with self-provided interpreters.

**That applicant/recipient was informed of potential problem using own interpreter:** Documented on Form 2229A according to the CRCP. Auditors did not review cases where applicants/recipients provided their own interpreter.

**Release of information to interpreter:** Documented on Form 2229A according to the CRCP. Auditors did not review cases with self-provided interpreters.

**Translation of Written Material:** Documented in CalWIN – Printed Correspondence and Case Comments.

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

**Disability:** Documented in CalWIN – Disability/Medical Conditions Summary, Case Summary Detail, and Case Comments.

**Reasonable Accommodation:** CalWIN – Diagnosis Detail and Case Comments, as reported by program staff. See above regarding lack of RA tracking and identification in CalWIN. Auditors did not review cases where RA was requested, offered, discussed, provided, or otherwise documented.

## **Findings: In-Home Supportive Services**

**Ethnic Origin:** Documented in CMIPS II – Person Home.

**Primary Language:** Documented on Form 2229, applications and renewals/recertifications according to the CRCP, and in CMIPS II – Person Home and (for NEP/LEP applicants/recipients) Assessment Narrative. Program staff reported that applicants/recipients were allowed to provide verbal attestation to this form during the Covid-19 emergency.

**County-Provided Interpreter Services:** Documented in CMIPS II – Assessment Narrative.

**Applicant/Recipient-Provided Interpreter:** CMIPS II – Assessment Narrative and Form 2229A. Auditors did not review cases with self-provided interpreters.

**That applicant/recipient was informed of potential problem using own interpreter:** Documented on Form 2229A according to the CRCP. Auditors did not review cases with self-provided interpreters.

**Release of information to interpreter:** Documented on Form 2229A according to the CRCP. Auditors did not review cases with self-provided interpreters.

**Translation of Written Material:** Documented in CMIPS II – Forms/Correspondence and the Assessment Narrative.

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

**Disability:** Documented on CMIPS II – Blind or Visually Impaired (BVI) screen for disabilities related to blindness and/or vision-related disabilities and CMIPS II- Assessment Narrative for “observed physical and/or cognitive strengths and limitations” according to the CRCP.

**Reasonable Accommodation:** Documented on CMIPS II – Blind or Visually Impaired (BVI) screen when related to blindness and/or vision-related disabilities or CMIPS II- Assessment Narrative.

## **Findings: Child Welfare Services**

**Ethnic Origin:** Documented CWS/CMS – Client Management: Demographics tab.

**Primary Language:** Documented CWS/CMS – Client Management: Demographics tab.

**County-Provided Interpreter Services:** Documented in a Delivered Service Log (DSL) contact note with an appropriate Service Category designation (“e.g., Provide Bilingual Services”). Auditors were informed that the County does not require workers to apply a Service Category to document interpreter services provided by the County.

**Applicant/Recipient-Provided Interpreter:** The County does not allow self-provided interpreter services in the CWS program.

**That applicant/recipient was informed of potential problem using own interpreter:** The County does not allow self-provided interpreter services in the CWS program.

**Release of information to interpreter:** The County does allow self-provided interpreter services in the CWS program.

**Translation of Written Material:** Documented/uploaded to “Existing Documents” in CWS/CMS and in a corresponding DSL contact note. Auditors were informed that the County does not require workers to document written materials sent to clients. Auditors did not observe the above documentation in reviewed cases.

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

**Disability:** Documented in the “Summary of Current Health Conditions” on the Demographics-Existing Health tab in CWS/CMS; information about clinically diagnosed conditions is documented in CWS/CMS medical tabs including “Diagnosed Condition,” which automatically populates the “Health Education Passport” section of CWS/CMS and is included in the case plan. Auditors were informed that the County does not require workers to document this information in DSL contact notes linked to an appropriate Service Category (e.g., “Physical and Dental information”) regarding non-clinically diagnosed conditions.

**Reasonable Accommodation:** Auditors were informed that the County does not systematically document RA requests in CWS/CMS, and no cases with RA documentation were identified for this Review.

## **Findings: Fraud**

***Note regarding Fraud Program Records:*** The County’s Fraud Program has limited direct contact with applicants/recipients and generates a relatively limited amount of case-related documentation. Fraud staff receive Early Fraud Detection/Prevention referrals from program workers, log referrals in a tracking spreadsheet, and send referrals to the County District Attorney’s Office for handling. Ongoing fraud case referrals generated by the Income and Eligibility Verification System (IEVS) are transmitted directly to the District Attorney’s Office. The District Attorney’s Office sends case disposition documentation to Fraud staff, including Investigation Reports and Intentional Program Violation (IPV) memorandums, which are also logged in the County’s tracking spreadsheet. For a small number of IPV cases, Fraud staff assume temporary management of an individual’s Eligibility Program case for the duration of implementation of the fraud violation penalty. These are the only circumstances in which Fraud staff might have, and document, applicant/recipient contact in CalWIN.

**Ethnic Origin:** Documented in CalWIN – Demographics Summary (preexisting based on initial entry by program staff). Ethnic origin is not otherwise documented in program referrals sent to the Fraud program or in the spreadsheet of referrals maintained by that program.

**Primary Language:** Documented in program referrals sent to the Fraud program, derived from the CalWIN – Demographics Summary (preexisting based on initial entry by program staff).

**County-Provided Interpreter Services:** Documented in CalWIN – Case Comments by Fraud program workers in the limited number of CalWIN program case files they temporarily manage.

**Applicant/Recipient-Provided Interpreter:** Documented in CalWIN – Case Comments by Fraud program workers in the limited number of CalWIN program case files they temporarily manage.

**That applicant/recipient was informed of potential problem using own interpreter:** Documented on Form 2229A according to the CRCP. Auditors did not review cases involving fraud case management with self-provided interpreters.

**Release of information to interpreter:** Documented on Form 2229A according to the CRCP. Auditors did not review cases involving fraud case management with self-provided interpreters.

**Translation of Written Material:** Documented in CalWIN – Printed Correspondence as well as Case Comments by Fraud program workers in the limited number of CalWIN program case files they temporarily manage.

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

**Disability:** Document in CalWIN – Case Comments if at all. Information about disabilities is not documented in Fraud program referrals or in the Fraud referral spreadsheet. Auditors did not review any cases under Fraud program management in which disabilities were documented.

**Reasonable Accommodation:** This information is not documented in Fraud program referrals or in the Fraud referral spreadsheet. See above information regarding the County's lack of RA tracking and documentation in CalWIN. Auditors did not review cases under Fraud program management in which an RA was requested, offered, provided, or otherwise documented.

## APPENDIX 2: SELECTION FROM STAFF SURVEY

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

- Complaint 1: 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
  - Misidentified as a discrimination complaint by 10% of surveyed staff
- Complaint 2: 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 60% 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 84% 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 67% of surveyed staff