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May 3, 2024

Via Email only: Richard.Wanne@sdcounty.ca.gov

Richard Wanne, Director
San Diego County Health and Human Services Agency
1255 Imperial Avenue, Suite 446
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San Diego, CA 92101

Dear Director Wanne:

Thank you and the San Diego County Health and Human Services Agency staff for your cooperation and assistance during the 2022 Civil Rights Compliance Review (Review). Please find the final report (Report) attached to this correspondence.

Compliance issues (findings/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.

- 1) Please use the attached CAP Template Form and the accompanying instructions to prepare your CAP. This form was created to facilitate a streamlined CAP and CAP monitoring process and to help ensure that your submitted CAP complies with the Web Content Accessibility Guidelines (WCAG). See *California Government Code 7405*. The Report and approved CAP will be published on the California Department of Social Services [Civil Rights Section \(CRS\) website](#).
- 2) Please submit your CAP electronically with any required accompanying materials to the CDSS Civil Rights Section (CRS) county collaboration SharePoint site. If your county is not already using this SharePoint site with us, your Civil Rights Coordinator (CRC) will receive an email invitation with directions for becoming a site member and uploading your documents.
- 3) After your county's CAP has been reviewed, the assigned CRS analyst will provide your CRC with additional instructions and a link to an interactive CAP tracker spreadsheet. This will allow your CRC and our analyst to exchange information about approvals of, or updates on, individual proposed actions in your CAP and about ongoing implementation progress.

- 4) We realize that many counties begin to correct findings immediately, even while developing their CAP. Please begin corrective actions as soon as possible, as there is no need to wait for the interactive CAP tracker spreadsheet.

If you need technical assistance developing a CAP, please contact Tonya Barnes-Woodard by email at tonya.barnes-woodard@dss.ca.gov. If you need assistance accessing the SharePoint site, please contact CRS analyst Shah Marjan via email at Shah.Marjan@dss.ca.gov. You may also contact our office by email using the Civil Rights Section email (crb@dss.ca.gov).

Sincerely,

Anne Marx

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Attachments

1. CAP Template Form
2. CAP Template Instructions

**SAN DIEGO COUNTY
HEALTH AND HUMAN SERVICES AGENCY
CIVIL RIGHTS COMPLIANCE REVIEW REPORT**

**Conducted on
November 28, 2022 – December 2, 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 San Diego County Health and Human Services Agency's (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 between mid-July and early December 2022 with a series of final meetings between **November 28, 2022, to December 2, 2022**. An exit interview was held on **December 2, 2022**.

Compliance concerns are the focus of this report. However, Auditors also noted effective aspects of the County's civil rights program, including its thoughtful use of multiple methods and tools to disseminate civil rights information and reinforce learning among its large and geographically dispersed employee population.

Key Noncompliance Findings of the Report

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

- **Dissemination of Information:** The County's policies and procedures for dissemination of the Publication 13 "Your Rights Under California Welfare Programs" (PUB 13) require review and revision to ensure it is consistently available in its most current version in alternate formats as well as provided and explained by staff to applicants/recipients at required junctures.
- **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 program-specific language access services policies in effect during this Compliance Review require revision to ensure their contents are operationally detailed, accurate, complete, and internally consistent.
- **Reasonable Accommodation Policy:** The County's program-specific policies in effect during this Compliance Review regarding the provision of services to individuals with disabilities require revision to ensure their contents are operationally detailed, accurate, complete, and internally consistent.
- **Civil Rights Staff Training:** The County's program-specific civil rights staff trainings in use at the time of this Compliance Review require revision to ensure their contents are operationally detailed, accurate, complete, and internally consistent.

- **Discrimination Complaint Policies:** The County's program-specific discrimination complaint policies in effect during this Compliance Review require revision to ensure their contents are operationally detailed, accurate, compliant with Division 21 requirements, and internally consistent.
- **Monitoring Vendor Compliance with Civil Rights Requirements:** The information submitted by the County is insufficient to demonstrate its compliance with its Division 21 obligation to ensure vendor compliance with civil rights requirements.

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.

II. SUMMARY OF METHODOLOGY

Documents Reviewed

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

- An undated Civil Rights Compliance Plan (CRCP) and attachments, including program-specific staff training modules and County forms
- Civil rights-related policies and procedures, including
 - Eligibility Programs Policy Guide
 - CWS Policy Manual

- IHSS Policy and Procedure Handbook
 - IHSS Special Notice 17-03 “IHSS Interpreter Procedures”
- Civil Rights Liaison Handbook
- Civil rights discrimination complaint database for a complete listing of complaints filed 12 months prior to the Review
- Previous County Compliance Review report(s) and corresponding corrective action plan(s) (CAP)

Locations Reviewed for Dissemination of Information

- Southeastern Family Resource Center, 4588 Market Street, San Diego, CA 92102
- Lemon Grove Family Resource Center, 7065 Broadway, Lemon Grove, CA 91945
- Ramona Community Resource Center, 1521 Main Street, Ramona, CA 92065
- Central Region Child Welfare Services, 4305 University Avenue, Suite 400, San Diego, CA 92115
- North Inland Child Welfare Services, 649 W. Mission Avenue #4, Escondido, CA 92025
- North Inland Family Resource Center, 649 W. Mission Avenue #3, Escondido, CA 92025

Programs Reviewed

- 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 dissemination of information at its facilities
- Receiving feedback from community groups. The following organizations were contacted for feedback:
 - [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)
- [Disability Rights California](#) (1831 K Street, Sacramento, CA 95618)
- [Disability Rights Education and Defense Fund](#) (DREDF) (3075 Adeline Street, Suite 210, Berkeley, CA 94703)
- [Justice in Aging](#) (1330 Broadway, Suite 525, Oakland, CA 94612)
- [Deaf Community Services of San Diego, Inc.](#) (2240 Cleveland Avenue, National City, CA 91950)
- [Legal Aid Society of San Diego](#) (1764 San Diego Avenue, Suite 100, San Diego, CA 92110)
- [Casa Familiar](#) (268 E Park Avenue, San Ysidro, CA 92173)
- [San Diego Hunger Coalition](#) (845 15th Street, Suite 103, San Diego, CA 92101)

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 86 surveys to County staff, including certified bilingual staff. Sixty-eight surveys were completed. Eighteen surveys were not completed by staff, despite reminders from Auditors.

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 persons with no English proficiency or limited English proficiency (NEP/LEP) 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?

Yes, the County accepts applications by mail. It does not modify business hours to accommodate applicants/recipients.

Can clients, including those with disabilities, access services when they are unable to go to an office?

Yes. According to the County's Civil Rights Compliance Plan (CRCP) and confirmed by the Civil Rights Coordinator, applicants/recipients can apply online and conduct other case maintenance tasks such as verification and paperwork submission via the website for [My Benefits CalWIN](#). Users can select from a drop-down menu of 18 languages on this site.

According to the CRCP and the Civil Rights Coordinator, applicants/recipients can also use the County's ACCESS Call Center to communicate with staff and conduct case-related tasks.

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

Yes. According to the CRCP and the Civil Rights Coordinator, the County disseminates information about its programs and services via social media (YouTube, Facebook, and Twitter), printed and electronic flyers, live webinars, and in-person outreach. The Live Well on Wheels ([Live WoW](#)) bus is used as part of its outreach efforts. In addition, 211 San Diego (a telephone information/referral service) provides callers with information about the County's services. The County also provides a wide range of its program and general information materials in Spanish, Vietnamese and Arabic translations (which are each a threshold language at one or more County locations), including program application information, brochures and flyers about specific program-related benefits, and other materials.

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

The Civil Rights Coordinator informed auditors that workers can provide verbal assistance as well as assistive technology such as screen readers to applicants/recipients who cannot read or write.

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

Somewhat. According to the CRCP and relevant County policy, manual and handbook sections, the County disseminates information about its civil rights program via posters and pamphlets discussed below in this section. These policy, manual and handbook sections are: the Eligibility Programs Policy Guide "Civil Rights Dissemination and

Applicant/Recipient Case Record Documentation” (hereafter referred to as “EPPG CR D&D”); the CWS Policy Manual “Cross-Program Procedures - Civil Rights Requirements” section (hereafter referred to as “CWS PMCPP-CR”); and the Civil Rights section of the IHSS “Policy and Procedure Handbook” (09/2022) (hereafter referred to as “IHSS PPH-CR”). CDSS notes that the contents of these policy, manual and handbook sections each raise certain specific concerns, such as their inclusion of a list of protected bases that is incomplete and out of date. Additional concerns are noted in this and other Report sections below and have also been communicated directly to the Civil Rights Coordinator. (Note: The Civil Rights Coordinator informed CDSS that the County is, as of the time of writing this report, in the process of revising its civil rights-related policies and procedures for its CalFresh and CalWORKs (Self-Sufficiency), CWS and IHSS programs. This report addresses those policies and procedures that were in effect at the time of this Review.)

The County does not provide information about its civil rights program, such as its discrimination complaint process, on its website. The Civil Rights Coordinator informed Auditors that the San Diego County [Office of Ethics and Compliance \(OEC\) website](#) provides information about filing and submitting discrimination complaints, and that complaints submitted through that channel that involve CDSS-funded, Health and Human Services Agency (HHSA)-administered programs are routed to the Civil Rights Coordinator. Auditors reviewed this website, as well as the separate website for the [HHSA Compliance Office](#), and were not able to locate any information or resources related to discrimination against applicants/recipients. While it may be true that applicants/recipients who contact either office with a discrimination complaint may be redirected to the Civil Rights Coordinator, the above websites do not appear to inform applicants/recipients about this process or provide any information about discrimination complaint filing procedures regarding HHSA. This lack of visible, readily identifiable information limits access by applicants/recipients and their advocates to the discrimination complaint process and also deprives the County of insight into discrimination issues that may exist. See Recommendations, below.

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 interpretive services?

Yes. The County’s [ACCESS Customer Service Call Center](#) handles calls for its self-sufficiency programs. The Department of Aging and Independence Services (DAIS) handles calls for its programs (including IHSS) through a separate call center. Both have Interactive Voice Response (IVR) systems. Auditors placed calls to both numbers and confirmed the following: DAIS’ IVR system has language options in English and Spanish but not in Tagalog or Arabic, which constitute threshold languages at certain

IHSS locations. The ACCESS Call Center IVR system has language options in English, Spanish, Vietnamese, and Arabic, which constitute all of the current threshold languages for CalFresh and CalWORKs locations. Neither IVR system instructs callers of other languages to request an interpreter.

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

Yes. The County offices all remained open without changes to the services offered or hours of operation. Service areas were relocated to the front of office buildings so applicants/recipients could access services without entering the facilities. At the same time, the County encouraged applicants/recipients to use telephone and online communication options.

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?

Yes. The County's Self-Assessment for the six locations listed above in the Summary of Methodology section of this report reflect that appropriate signage translations are posted at these locations.

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 at the time of this Review) of the PUB 13 available in alternate formats?

Somewhat. According to the CRCP and the Civil Rights Coordinator's Survey responses, the PUB 13 is provided in all public contact reception areas, and County staff are "trained to regularly monitor the PUB 13 to ensure that current versions of all languages are available at all times." The CRCP further states that the PUB 13 "is provided in alternate formats provided by CDSS," including audio, large print and braille. (CRCP Section IV)

However, the County's Self-Assessment worksheets for the six locations listed above in the Summary of Methodology section reflect uneven results, as follows:

- Lemon Grove and Southeastern Family Resource Centers (FRC): The current version of the PUB 13 is available in all CDSS-translated languages, but the

available braille version is out of date. Audio file and large print versions are also available, but the revision dates are not specified.

- Central Region and North Inland CWS offices: The current version of the PUB 13 is available in all CDSS-translated languages, but the available braille, large print, and audio cd versions are out of date. An audio version on MP4 is available, but the revision date is not specified.
- North Inland FRC; Ramona Community Resource Center – The current version of the PUB 13 is available in all CDSS-translated languages, but the available braille and audio cd versions are out of date. Large print and an audio version on MP4 are available, but the revision dates are not specified.

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

Inconsistently, with wide variation across programs. According to the CRCP, the PUB 13 is “provided... at intake and recertification/renewal/redetermination (and) in all application packets for all programs for which CDSS has oversight.” (CRCP Section IV) The CRCP does not state whether staff explain the PUB 13 contents to applicants/recipients at these junctures, but Civil Rights Coordinator Survey responses affirm that the PUB 13 is “given and explained” at those points.

CDSS notes, however, that the “Publication 13 Pamphlets” section of EPPG CR-D&D omits the requirement that workers explain as well as provide the PUB 13 at the identified junctures. Additionally, its list of CDSS-translated versions is incomplete and out of date. During CalFresh case review, Auditors observed documentation in case comments in 7 of 7 files reviewed that unspecified “forms [were] provided in” the applicant’s/recipient’s primary language. During CalWORKs case review, Auditors observed documentation in case comments in 9 of 9 files reviewed that unspecified “forms [were] provided in” the applicant’s/recipient’s primary language. In neither program’s case review did Auditors observe specific documentation that the PUB 13 was among those forms provided, although program staff present during case review informed Auditors that PUB 13 is included. In neither program did Auditors observe documentation that the PUB 13 was explained.

The “SW Responsibilities” section of CWS PMCPP-CR instructs social workers to “inform clients of their civil rights upon initial contact, and as the need arises,” without specifying the PUB 13 or explaining what “as the need arises” means. This section goes on to say that SWs must give the PUB 13 to clients upon initial contact but omits the requirement to explain it. It also instructs social workers to document provision of the PUB 13 in the CWS/CMS contact notebook without providing operational detail about the format or content of that documentation. The subsequent “Your Rights” section of this manual does correctly instruct SWs to explain as well as provide the PUB 13; however, the list of CDSS-translated versions of the PUB 13 is incomplete and out of date. During CWS case review, Auditors observed documentation in 2 of 7 cases

reviewed that the pamphlet “Your Rights under California [public benefits programs]” (aka PUB 13) was provided to a parent. Auditors also observed documentation in 2 other cases (of 7 reviewed) that unspecified “Civil Rights information” was provided to a parent, but the PUB 13 was not specifically identified, and the CWS Civil Rights Liaison (CRL) expressed uncertainty about whether the PUB 13 is typically included with this information. Auditors did not observe any documentation in the remaining 3 cases regarding provision of the PUB 13. Two of those 3 cases involved clients who were over age 18; the CWS CRL informed Auditors that the County does not have a practice of providing the PUB 13 to youths once they turn 18. Auditors did not observe documentation in any of the 7 cases reviewed that the PUB 13 was explained.

IHSS PPH-CR requires IHSS staff to “[p]rovide applicants/recipients the [CDSS] Publication (PUB 13) pamphlet... at the initial assessment and the annual reassessment, and to explain the PUB 13 to applicants/recipients.” (p. 1) It does not provide any information or instruction regarding documenting these steps. This section also states that the PUB 13 “is available in 18 languages, audio file, large print, and Braille” but does not explain how workers may access the PUB 13 in these formats for provision to applicants/recipients. During IHSS case review, Auditors observed documentation in 11 of 11 cases reviewed that the PUB 13 was provided, although the PUB 13’s language was not specified in the 3 cases involving applicants/recipients with LEP. Auditors also observed documentation in all 11 cases that the PUB 13 was among the “forms reviewed/discussed” with the applicants/recipients.

The Bureau of Public Assistance Investigations (BPAI), which is operated by the Department of Child Support Services (DCSS) and handles fraud investigations for the County, does not distribute the PUB 13 to fraud referral subjects. Auditors note that because BPAI is operated by DCSS, it does not fall within CDSS’ authority to review.

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

Yes. The County’s Self-Assessment worksheets for the six locations listed above in the Summary of Methodology section of this report reflect that current versions of the required posters are present in the lobbies of these locations.

Corrective Action

- 1) PUB 13 in alternate formats:** The County shall ensure the availability of large print, braille, and audio formats for participants in all programs for which CDSS has oversight responsibility. Div. 21-115.4. 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.
- 2) Distribution of PUB 13:** The County shall ensure the PUB 13 is both given and explained to program applicants/recipients in all programs for which CDSS has

oversight responsibility. Div. 21-107.221. The PUB 13 must be distributed at intake and renewal/recertification because these bear on eligibility. The County shall ensure that the available translated versions are given to applicants/recipients in their primary language and shall document when the PUB 13 is distributed and explained to applicants/recipients and in what language. As part of the CAP, the County shall revise the policies, procedures, and handbook referenced in this section to reflect these requirements and include operational detail to support their implementation. If the County has completed its above-referenced planned revision of these materials since the time this Review was conducted, the County shall review its revised materials in light of the foregoing and submit a written explanation briefly summarizing both the revisions made that address CDSS' concerns as well as a plan and timetable for completion of any further revisions deemed necessary (if any) based on this Report.

Recommendations

County Discrimination Complaint information on Website: The County should consider developing a clear, dedicated civil rights webpage for the public to provide information about HHSA's civil rights-related program and procedures, including discrimination complaint filing information. Although the Civil Rights Coordinator's contact information is required to be posted in office lobbies on the PUB 86, this information is not available to individuals who may be unable to visit an office location. CDSS notes that Division 21 requires the County to implement procedures to ensure its applicants/recipients – including applicants with disabilities - are notified of and can obtain information about how to file a discrimination complaint. Div. 21-107.245. CDSS also notes that the lack of this information on the County website may lead to underreporting of discrimination, which leaves the County without accurate, complete information about civil rights issues that may exist.

Interactive Voice Response Systems: The County should consider adding more languages to all existing and future IVR systems, especially threshold languages. Auditors encourage the County to consider adding greetings in additional languages and an "other language" option. These changes would help inform callers that free interpretive services are available in their language.

Distribution of PUB 13: The County should consider distributing the PUB 13 at termination and denial of benefits. The PUB 13 has unique information which is absent from Notices of Action (also known as NA Back 9). Auditors also encourage the County to participate in discussions about improvements to the existing case management consortia systems transitioning to CalSAWS to share system issues impacting compliance with civil rights obligations, including distribution of the PUB 13 with Notices of Action or at other important points in an applicant's/recipient's case.

Documentation of PUB 13 distribution: Auditors recommend standardizing language used in case comments and notes across all covered programs to indicate that the PUB 13 was provided and explained at intake/application, recertification, and any points where benefits are reduced or terminated. Consider providing template language to staff and adding documentation of distribution and explanation to checklists or job aids for case processing and supervisor review. Illustrative language:

On [date] provided applicant/recipient with PUB 13 in [primary written language]. Used [primary spoken language (via interpreter or similar services)] to explain contents and instruct applicant/recipient about how to make a discrimination complaint]. Confirmed applicant's/recipient's understanding by asking for questions. Applicant/recipient had [none].

CWS/CMS Features and Tools: CDSS strongly recommends that the County require and train CSWs to create an Associated Service with the Service Type "Provide Your Rights brochure" linked to each contact note documenting provision of the PUB 13 to a youth or the parent(s) of a child client. Doing so will help elevate the visibility, consistency and searchability of this information, which supports civil rights protections for clients and their family members and also supports the County's ability to demonstrate compliance with Division 21 requirements. Div. 21-116.1.

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 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

- o [United States Department of Justice's ADA Standards](#)
- o [United States Access Board's Americans with Disabilities Act Accessibility Guidelines](#)
- o [Title 24 of California Code and Regulations](#)
- [Past Compliance Review reports](#)
- Building code reference materials
 - o [The Department of General Services Division of the State Architect](#)
 - o The California Accessibility Reference Manual (latest edition available at [Builder's Book, Inc.](#))
- 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 interpretive services without undue delays.

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

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

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

FINDINGS: Language Access Services

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

Mostly. According to EPPG CR-D&D, a copy of the "HHS Language Identification Chart" (LIC) is maintained in reception areas of all public lobbies to help staff identify the languages of applicants/recipients who make first contact at an office location. The Civil Rights Coordinator further informed Auditors that individuals who apply for County programs via U.S. mail, telephone and online are prompted to self-identify their primary languages, which information is then coded into the program case management system during the intake process.

According to CWS PMCPP-CR, CWS SWs are required to identify clients' language(s) and language access needs "during...first contact with the family" (p. 3) and document this information in the Contact Notebook as well as on HHS form 20-46, as noted below.

IHSS Special Notice 17-03 "IHSS Interpreter Procedures" (hereafter referred to as "IHSS SN-IP") does not explicitly state whether applicants'/recipients' language needs are identified at first contact, but it implicitly indicates that individuals self-identify this information via the IHSS application. IHSS PPH-CR does not address this topic.

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

Inconsistently. According to the CRCP, EPPG CR-D&D, CWS PMCPP-CR, and IHSS SN-IP, the County's social service programs use HHS form 20-46 ("Language Needs Determination") to document an applicant's/recipients' primary spoken and written languages and their acceptance or refusal of interpreter services and written translations in their primary languages. The CRCP states that the completed form "is imaged into the electronic case file for all applicants and recipients at intake or first face-to-face contact [and] is reviewed for accuracy at renewal, recertification or redetermination." (Sec. V, p. 7)

However, during case reviews, Auditors observed highly inconsistent use and maintenance of HHS Form 20-46, with potentially concerning ramifications for applicants/recipients. During CalFresh case review, Auditors observed a current Form 20-46 in 2 of 2 ASL cases and 1 of 4 LEP cases. During CalWORKs case review, Auditors observed a current Form 20-46 in 3 of 3 ASL cases and 5 of 6 LEP cases. In 1 of these ASL cases, the form contained internally inconsistent information about whether the applicant/recipient needed an interpreter, but there was no documentation to indicate that staff took steps to resolve or clarify this in the case record. In the 1 CalWORKs LEP case for which a current Form 20-46 was missing, program navigators located a 2019 Form 20-46 in which the applicant/recipient had identified 2 primary spoken languages, but Auditors did not observe any documentation to indicate that staff

took steps to resolve or clarify which language should be used when providing interpreter services for the individual.

Although the County reports that CWS uses HHSA Form 20-46, the form was not located or observed in any case reviewed by Auditors during case review; nor were contact notes identified that documented a worker providing the form to, or obtaining it from, a client. The CWS CRL informed Auditors that the shift to remote work during Covid had disrupted standard procedures regarding printing and uploading hard copies of such records, and she acknowledged that these disruptions have persisted to the present.

During IHSS case review, Auditors observed a current form HSSA 20-46 in all cases reviewed, although (as discussed below) there was an unresolved discrepancy in 1 LEP case between the primary spoken language documented on form 20-46 and that which was documented in the CMIPS Person Home screen for that applicant/recipient.

Are primary written and spoken languages documented?

Somewhat, with variation across programs as well as internal discrepancies.

Neither EPPG CR-D&D nor the EPPG Section titled “Services to Non-English Speaking Customers and Customers with Disabilities – Reasonable Accommodations/ Modifications” (hereafter referred to as “EPPG NEP/RA”) explicitly state whether, how, or where applicants’/recipients’ primary languages are documented. During CalFresh and CalWORKs Case Review, Auditors observed that primary language information was documented in CalWIN Case Summary and Individual Demographics screens for all cases reviewed. However, as discussed further below, there were unexplained discrepancies between primary language information documented on these screens and that which was documented elsewhere in case records in multiple CalFresh and CalWORKS cases.

As noted above, DCSS operates BPAI, which handles fraud investigations for the County. DCSS is outside the scope of CDSS’ authority to review. However, since County Self-Sufficiency program staff are responsible for issuing fraud referrals to BPAI and for handling and documenting certain post-fraud investigation actions, Auditors conducted a review of available records in 5 CalFresh cases and 5 CalWORKS cases involving fraud referrals. Eight (8) of these cases involved individuals with LEP and 2 involved individuals who identified ASL as their primary language. During fraud case review, Auditors observed documentation of each individual’s primary language information in the fraud referrals for all 10 cases and also in CalWIN Case Summary and Individual Demographics screens for all 10 cases. However, there were unexplained discrepancies between primary language information documented in the Case Summary screen and that which was documented in the Individual Demographics screen in 3 of those 10 cases.

Importantly, CDSS notes that its 2017 Compliance Review Report for the County includes findings regarding inconsistent primary language documentation in CalWIN by both CalFresh and CalWORKs staff. Taken together with the above-described observations, this indicates a persistent deficiency that has not been adequately addressed.

According to CWS PMCPP-CR, CSWs must “[d]ocument/update each client’s primary language on the ID page of the Client Notebook.” (p. 2) During CWS case review, Auditors observed primary language documentation for the child/youth client and at least 1 parent in 7 of 7 cases. However, secondary language information was rarely documented for children/youth or parents, including for individuals with LEP. Additionally, as discussed further below, there were unexplained discrepancies between the language information documented on the ID page and language services documentation recorded elsewhere in some case records.

IHSS SN-IP does not explicitly state whether, how, or where applicants’/recipients’ primary languages are documented. During IHSS case review, Auditors observed that primary language information was documented in CMIPS Person Home screens in 11 of 11 cases. However, as discussed further below, there was an unexplained discrepancy between the language information documented on the Person Home screen and language information documented elsewhere in 1 case record.

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, the County has various options for procuring an interpreter, and these are addressed in program-specific policies. However, each of these policies raise certain concerns, including but not limited to those described here.

According to the CRCP, applicants/recipients with LEP “can be assisted in [its] offices and Access Call Center with the use of bilingual staff, face to face interpretation, or phone interpretation” via vendor-provided interpretive services. (CRCP Sec. IV) The County maintains a list of certified bilingual staff members who can provide interpreter services, and it also has contracts with multiple vendors to provide telephone and in-person interpreter services, including ASL. Although the CRCP states that the County “favor[s] the use of professional interpretation and translation services from [its] contract vendors” (CRCP Section V), the Civil Rights Coordinator informed Auditors that Self-Sufficiency staff are instructed to rely first on available bilingual staff before accessing vendor-provided services.

EPPG CR-D&D and EPPG NEP/RA are generally consistent with the CRCP in requiring the provision of interpreter services promptly upon identification of the need and in identifying both bilingual staff and vendor-provided interpreters as options for providing

those services: “Once staff has been informed that the client wants an interpreter, an interpreter must be offered and provided at each substantive client contact. Staff shall not conduct substantive program-related conversations with the client until qualified interpretive services are available....” (EPPG CR-D&D, “Substantive Significant Client Contact” subsection) “The language needs of non-English speaking customers must be met by provision of free interpreter services at all contacts, without delay.... [] by bilingual staff, professional interpreters contracted by the county, or if the customer prefers, an adult relative or friend.” ((EPPG NEP/RA, p. 1)) However, neither of the above-quoted EPPG sections includes operational detail to explain the process by which staff may obtain those services. Auditors note that feedback provided by community organizations (discussed in Report Section X, below) raise concerns about the adequacy and effectiveness of the County’s provision of interpreter services, particularly in eligibility programs administered at FRCs. Given that the County appears to have multiple readily available resources for providing those services, such concerns may indicate lack of effective implementation by staff of procedures for obtaining and using those resources. This in turn may signal the need for greater operational detail in applicable policies and procedures (as well as staff training and reinforcement, discussed in Section 7 of this Report).

Similarly, CWS PMCPP-CR identifies both bilingual staff and vendor-provided interpreters as options for providing interpreter services once the need is identified, but it lacks specific operational detail for staff to understand how to obtain and provide those services. Relatedly, CDSS identifies the following concerns in the “Interpreters” section of this policy:

- The policy addresses restrictions on the use of minors and family members as interpreters but does not address the use of client-provided interpreters who are not family members. (See p. 4)
- The “NOTE” on page 4 regarding client language services requests is correct in and of itself, but it lacks important information about additional related requirements and considerations. For example, it omits mention of when and under what circumstances a client’s request for interpreter services may change. It also lacks information about the following requirement regarding documentation updates: “For programs that do not require periodic reverifications, the client’s language information should be reverified/updated at the first client contact following the one-year anniversary of the last verification/update. The case narrative should reflect that the client’s language information was reverified/updated.” [ACL 08-65](#). This may lead to incomplete and noncompliant documentation by SWs.
- Relatedly, CDSS observes that the policy lacks operationally detailed information needed to ensure compliance with other relevant, longstanding requirements set forth in ACL 08-65, as well, such as the requirement that once an applicant/recipient has informed the County they want an interpreter, the County must offer and provide one at each substantive client contact and shall not

conduct substantive program-related conversations with the client until qualified interpreter services are available.

- The policy requires review and revision to incorporate operationally detailed information regarding [ACL 21-128](#) requirements, which pertain to both case record documentation and the use of CDSS form 6181 when applicants/recipients wish to use their own interpreters.

IHSS policies on this topic have both strengths and deficiencies. As with the EPPG and CWS policies, IHSS SN-IP identifies both bilingual staff and vendor-provided interpreters as options for providing interpretive services once the need is identified. In addition, IHSS SN-IP provides extensive operational detail explaining the procedures for securing vendor-provided options. However, it does not appear to have been revised to reflect the requirements of ACL 21-128 (or to reflect other county-level changes, such as correctly identifying the current vendor for ASL interpreter services). In addition, it is not clear whether or to what extent it is intended to operate in conjunction with the much more recent (09/2022) IHSS PPH-CR, which includes one paragraph on “Services to Applicants/Recipients who are non-English Speaking” embedded in its material regarding services for applicants/recipients with disabilities. That sole paragraph states that “[b]ilingual interpretative services shall be prompt without undue delays,” but makes no reference to IHSS SN-IP and includes no operational detail regarding such services. This disjointed presentation of information does not appear conducive to supporting staff understanding. In addition, including a fragmentary reference to LEP interpreters in this section of IHSS PPH-CR on disability-related services may tend to create the misperception that limited English proficiency is itself a disability.

Importantly, the County uses civil rights representatives known as Civil Rights Liaisons (CRLs) throughout its office locations and programs to help ensure compliance with Division 21 requirements. The County provides its CRLs with a Civil Rights Liaison Handbook (hereafter referred to as “CRL HB”), which includes information and resources to support CRLs in fulfilling their responsibilities. The information in the CRL HB regarding interpreter services identifies both bilingual staff and vendor-provided interpreters as options for providing those services, but as with most of the policies described above, it lacks operationally detailed explanations of the procedures for securing such services.

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

Inconsistently. The above-described policy concerns and documentation discrepancies, as well as additional deficiencies discussed below, raise concerns about whether the County provides appropriate bilingual services consistently across all programs.

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

Sometimes. When asked how long it takes to obtain interpreter services once an applicant/recipient's language needs are identified, 46% of surveyed staff report it takes less than 3 minutes; 44% report it takes 3-10 minutes; 7% report it takes 10-15 minutes, and 3% report it takes more than 15 minutes.

Does the County have adequate bilingual staffing levels?

Somewhat.

The County typically administers multiple programs, including CDSS-funded Self-Sufficiency programs, at each of its Family Resource Center (FRC) locations. Bilingual certified Human Service Specialists (HSS) are considered “universal” workers, in that they provide interpreter services for all programs administered at the location where they are stationed. Because of this, the County calculates threshold languages by location for its FRCs (rather than by both location and program) in order to determine the number of bilingual certified staff needed for each office. Data supplied by the County reflect that its Spanish bilingual certified staffing levels meet or exceed required staffing levels for all locations. The one FRC at which Arabic constitutes a threshold language (in El Cajon) also has adequate bilingual certified staffing levels. However, the one location (Northeast FRC) for which Vietnamese is a threshold language does not have adequate bilingual staffing in any of its identified public contact occupational groups. (Relatedly, CDSS notes that the County's CRCP appears to contain internally inconsistent information regarding whether or not Vietnamese is a threshold language. (See CRCP Sections V (“...various languages including Spanish, Vietnamese and Arabic, which are the languages for which one or more HHSA sites represents a threshold language”) and VIII (“Spanish is the only threshold language across all HHSA programs and sites.... [N]o other languages reach the level of 5%....”)) The County has identified corresponding hiring goals for its Vietnamese bilingual staffing deficits but has not provided a description of its efforts to meet these goals. See Corrective Action under Section XI (“Civil Rights Compliance Plan Review and Approval”), below.

Data supplied by the County reflect that IHSS has adequate Spanish and Tagalog bilingual certified staff at 2 of 5 locations but lacks adequate Spanish and Arabic bilingual certified staff in at least one public contact occupational group at each of the other 3 locations. The County has identified corresponding hiring goals for all bilingual staffing deficits but has not provided a description of its efforts to meet these goals. See Corrective Action under Section XI (“Civil Rights Compliance Plan Review and Approval”), below. The County also has bilingual staff in some non-threshold languages (Mandarin, Lao, Cambodian, and Farsi) at its IHSS Overland location.

Data supplied by the County reflect that CWS has adequate bilingual staffing at all of its locations in all public contact occupational groups.

Are County interpreters certified?

Mostly. The County certifies bilingual staff to provide interpreter services. However, CDSS notes that the CRL HB section titled “Civil Rights Reminders and Resources” states that non-certified bilingual staff can be used to provide interpreter services “if certified paid bilingual staff are not available at the moment.” This is inconsistent with ACL 08-65, which states that the County “shall not conduct substantive program-related conversations with the client until qualified interpretive services are available,” and with Division 21 (see Div. 21-104(q)(1); Div. 21-115.15), which defines a “qualified bilingual employee” as being certified to provide those services. Non-certified bilingual staff may engage in non-substantive contacts “such as asking directions, greetings, etc.,” but may not provide interpreter services for substantive or significant contacts. ACL 08-65 defines these “as contacts in which benefits, services, or rights or responsibilities are discussed. This would include any public contact staff, whether in person or on the phone, who has a substantive contact with the client.... The setting of appointments is a substantive contact.”

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

Yes, the County allows minors to be interpreters under “extenuating circumstances.” CDSS has identified concerns regarding internal inconsistencies among the County’s policies (and related staff training) on this point, as well as concerns about what the County presents as an example of “extenuating circumstances.”

EPPG NEP/RA, which applies to eligibility programs, specifically permits minors to be interpreters only under extenuating circumstances without defining or providing illustrative examples of such circumstances. CDSS is concerned that the lack of any clarifying examples such as those provided in [ACL 06-20](#) may tend to leave staff with insufficient guidance on how to handle a situation that warrants heightened care. Conversely, as discussed further in Section VII below, self-sufficiency program staff training on this issue *does* provide an example of an “extenuating circumstance,” but that example is inconsistent with ACL 06-20 and therefore raises separate concerns.

IHSS SN-IP requires that applicant/recipient-provided interpreters be “at least 18 years old,” (p.4), a requirement explicitly echoed twice in IHSS staff training (in “Documentation Do’s and Don’ts” and “Minor Child Interpreters” slides). However, that same staff training (as discussed further in Section VII below) also states that minors may serve as interpreters under “extenuating circumstances” (in “Minor Child Interpreters” slide). This internal inconsistency is not conducive to staff understanding or effective implementation of required procedures. In addition, the IHSS staff training uses the same problematic example of “extenuating circumstances” as the self-sufficiency program staff training.

CWS PMCPP-CR states that minors “are NOT to be used as interpreters, except in emergency situations when there is threat to health and safety,” (p. 4) a clearly articulated, coherent position that is consistent with ACL 06-20. However, Auditors observed internal inconsistency on this point in the CWS staff training, which states (on the same “Interpreters” slide) “No persons under the age of 18” and “Document the nature of the extenuating circumstances.” Training and policies must be aligned and should be consistent with each other.

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

Yes. According to the CRCP and relevant County policies as well as the CRL HB, applicants/recipients may use their own interpreter. The CRC, through survey responses, states that this is permitted “only after staff has offered certified interpreter [services] and [the applicant/recipient] has chosen to use their own.”

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

EPPG CR-D&D provides a substantial amount of operational detail and specificity regarding documentation requirements that apply when bilingual certified staff provide interpreter services. However, in light of the highly particularized requirements set forth in ACL 08-65 and the more recent ACL 21-128 regarding documentation of both County- and client-provided interpreters, a thorough review of this policy (including the “Required Case Documentation and Timeframes” chart) is warranted to determine whether revisions are needed to ensure its completeness and accuracy. This is especially true given that CDSS has twice before issued corrective action to the County (following Compliance Reviews in 2012 and 2017) regarding incomplete and inconsistent interpreter service documentation.

EPPG NEP/RA has been revised to reflect ACL 21-128 requirements regarding the use of form 6181 to document client-provided interpreters. However, ACL 21-128 requirements extend beyond the use of form 6181, and EPPG NEP/RA Section 2 “Customer Provided Interpreters and Minors Acting as Interpreters” lacks much of the information and operational detail needed to support staff understanding and effective implementation.

CDSS has identified similar concerns about the information provided in the CWS PMCPP-CR “Language Needs Determination” and “Interpreters” sections regarding documentation of interpreter services, including but not limited to the following:

- The “Language Needs Determination” section lacks specific operational detail regarding documentation of HHSA form 20-46. (E.g., How is this information used to document primary and secondary languages for the child/youth and each

family member? What steps are required to upload and save HHSA form 20-46 electronically?)

- The “Interpreters” section lacks much of the nuanced operational detail needed for staff compliance with the documentation requirements of ACL 08-65, and it also requires revision to reflect the requirements of ACL 21-128.

IHSS SN-IP provides substantial detail regarding documentation requirements pertaining to interpreter services, though it omits some of the specific distinctions ACL 08-65 makes regarding documentation under a range of possible scenarios. More significantly, it requires thorough review and revision to ensure that it accurately reflects pertinent requirements of ACL 21-128 regarding documentation of those services. In addition, it is unclear whether or to what extent IHSS SN-IP is intended to operate in conjunction with IHSS PPH-CR, which includes one paragraph on “Services to Applicants/Recipients who are non-English Speaking” without any information or instruction regarding documentation.

The CRL HB notes twice that workers must document their communication with NEP/LEP applicants/recipients “at each contact,” but it contains no operational detail about what information must be documented and/or where or how. In addition, although CRL HB includes a copy of CDSS Form 6181, the information it provides regarding documentation for applicants/recipients who use their own interpreters contains outdated information about HHSA form 20-49.

Staff survey results reveal a high degree of uncertainty and inconsistency in levels of awareness about documentation for applicants/recipients who use their own interpreters. When asked if the County uses a Release of Confidentiality form for applicant/recipient-provided interpreters, 68% reported yes, 11% reported no, and 21% reported “unsure.” When asked how the County documents that an applicant/recipient has been informed of risk of ineffective communication when using a self-provided interpreter, only 30% of surveyed staff reported using a form at all to document this information.

During CalFresh case review, Auditors observed documentation in CalWIN case comments for 3 LEP cases that a bilingual certified County worker provided language access services. The documented information was consistent with ACL 08-65 requirements in 1 of those cases, whereas the other 2 cases were partially compliant but lacked precise documentation of the offer and acceptance as well as the bilingual certified worker’s name. In a 4th LEP case, Auditors observed an unresolved discrepancy between case comment documentation and other case records regarding the applicant’s/recipient’s primary language. Relatedly, the case comment notes for this case included no documentation of an offer, acceptance/declination, or provision of interpreter services. As a result, Auditors are unable to verify that this individual has been provided with appropriate language access services.

Similarly, Auditors observed a lack of clarity and consistency in CalFresh case record documentation of interpreter services in 2 of 2 ASL cases reviewed. In 1 of these cases, case comment documentation identified the applicant's/recipient's primary language as "other sign language" without clarifying the meaning of "other." (Program navigators were also unable to explain what this referred to.) The same case comment notes also documented that sign language services were provided by an unspecified "sign language service," which is too vague to enable Auditors to verify the appropriateness of the services provided. In the other ASL case, the case comment documentation contained no reference to ASL or to interpreter services, despite the applicant's/recipient's identification of ASL as their primary language on HHSA Form 20-46 and in CalWIN Case Summary and Individual Demographics screens. Program staff present during case review were unable to explain this discrepancy.

During CalWORKs case review, Auditors observed documentation in CalWIN case comments for 1 of 6 LEP cases that a vendor-provided interpreter was used. The documentation of those services was substantially consistent with ACL 08-65 requirements. However, Auditors also observed non-compliant documentation in CalWIN case comments for 3 LEP cases in which a bilingual certified County worker provided services, and a lack of any documentation regarding the offer, acceptance/declination, or provision of interpreter services in the remaining 2 LEP cases.

Auditors also observed insufficient documentation in case comments for all 3 CalWORKs ASL cases reviewed. In 1 of those cases, the case comment for a phone interview begins with "ASL Interpreter [I.D. number]" but later states that interpreter services were provided by a county worker, who is identified not by name but by a different I.D. number. More confusingly, the case comment documents that the worker is "bilingual in the customer's language" and that the interview was "conducted in English." Auditors note that ASL is not signed English. This documentation lacks both the details required by ACL 08-65 and the clarity Auditors need to verify what interpreter services were provided and how and by whom. In another of these cases, case comments document that the recipient's authorized representative (AR) was present and on speaker with the recipient, who "does not hear," and that the AR provided interpreter services. However, there is no indication that the worker recognized the AR as a recipient-provided interpreter or documented this in a manner consistent with the applicable requirements. In the 3rd LEP case, the case comment documentation noted that a "relay call" was placed to conduct the phone interview and identified 2 separate operators by i.d. number. This documentation appropriately identifies who provided the service. Auditors note, however, that this note does not include documentation of the applicant's/recipient's self-selected preferred verbal and written languages, which is required at initial application/intake, reverification (or annually if reverification is not required, and any time the client request a change to this information).

During Fraud case review, Auditors observed case records of 8 CalFresh and/or CalWORKs applicants/recipients with LEP. Of those, Auditors observed compliant documentation in 2 cases in which a bilingual certified County worker provided interpreter services and in 1 case in which a vendor provided interpreter services. In another 2 cases, documentation of interpreter services from a bilingual worker was mostly compliant except for a lack of documentation of the offer and acceptance of services and the name of the bilingual County worker who provided them. The other 3 cases raised more significant questions and concerns. Each of these contained either ambiguous documentation about how interpreter services were provided or internally inconsistent documentation regarding the applicant's/recipient's primary language, or both, among other deficiencies.

During Fraud case review, Auditors also observed insufficient documentation in the case records of 2 individuals who identified ASL as their primary language. For 1 of these, the record of client contact reviewed simply states: "ASL. Customer used ASL interpreter," which lacks much of the detail required by ACL 08-65. Documentation in the other case states: "Relay Operator [I.D. #]." As explained above, this level of documentation is partially but not wholly compliant with applicable requirements.

During IHSS case review, Auditors observed CMIPS case records of 4 applicants/recipients with LEP. Documentation regarding interpreter services was mostly compliant in each of those cases except for missing information about the offer and acceptance (or declination) of County-provided interpreter services.

Auditors also observed a CMIPS case record for 1 individual who identified ASL as their primary language, in which the worker had documented that "Interpreter services were provided by a person chosen by the recipient. The name of interpreter is: [telephone relay service chosen by]" recipient. This wording creates ambiguity regarding the method by which interpreter services were provided and omits other required information noted above. ACL 08-65; ACL 21-128.

During CWS case review, Auditors observed CWS/CMS records of 3 cases involving parents with LEP, 1 of which contained compliant documentation. In 1 of the other 2 cases, the case record documented that a bilingual certified County worker provided interpreter services. This documentation was mostly compliant except it did not include the worker's name. The 3rd case contained what initially appeared to be an unresolved discrepancy between the parent's non-English primary language documented on the Client I.D. page and contact notes documenting the language of a client interview as English. The program case navigator was ultimately able to locate a contact note documenting the parent's fluency in multiple languages including English. However, the point of the required interpreter service documentation is to ensure the appropriateness, timeliness and continuity of those services. In order to serve this purpose, this key information must be documented and maintained in a detailed, systematic and readily identifiable way rather than buried in case notes.

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

Yes. According to the Civil Rights Coordinator, “Staff are trained to look for signs of understanding and to call in bilingual staff or a vendor interpreter if understanding appears to be in question.” According to survey responses, staff check for understanding in the following ways: by asking specific questions and waiting for appropriate responses; by repeating a question, asking the interpreter if it makes sense, and explaining the question again if necessary; by speaking in short sentences to allow for accurate interpretation; by avoiding using acronyms and phrases that may be unfamiliar; by reviewing the information that they have provided; and by asking clarifying questions such as, “Do you have any questions about the information we just went over?”

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

Inconsistently, with variation among programs. According to the CRCP and CRL HB, the County provides CDSS-translated forms to applicants/recipients in their primary languages. The Civil Rights Coordinator also informed Auditors that CalWIN generates translations of certain additional forms for the County to provide.

However, CDSS also notes that, according to EPPG NEP/RA, “[f]orms and written notices must be provided in the customer’s preferred language when available,” but the policy does not explain what “when available” means or what procedure(s) are followed when such translations are not available. When asked about this, the Civil Rights Coordinator informed Auditors that “when available” means available from CDSS or CalWIN and that a GEN 1365 is automatically sent with all forms and other correspondence to applicants/recipients identified as having LEP.

In addition, EPPG NEP/RA Section 3 (“Acceptance or Refusal of Forms or Other Written Material”) includes a vaguely worded reference to the “County’s availability to translate notices” which lacks operational detail about the circumstances under which the County generates or obtains written translations of other materials or how this is accomplished. When asked about this, the Civil Rights Coordinator informed Auditors that the County typically uses vendors on an as-needed basis to translate certain frequently used forms as well as some applicant/recipient documents (e.g., verification submission items).

During CalFresh case review, Auditors observed 4 cases involving provision of translated materials. In 2 of those cases, all written communication including forms were sent to the individual in their primary language. In the other 2 cases, some written materials were sent in the individual’s primary language while other items (including

some for which CDSS-translated versions were available) were sent in English. Program navigators were unable to explain this.

Similarly, during CalWORKs case review, Auditors observed 5 cases involving provision of translated materials. In each of these cases, some forms and other written materials were sent in the individual's primary language while other items (even some for which CDSS-translated versions were available) were sent in English. Program navigators were unable to explain this.

CWS PMCPP-CR addresses translated forms only in the vague and confusing statement that: "[f]orms must be provided in the client's primary language when available, or document that the form has been translated in the client's primary language." This policy lacks the clarity, specificity, and operational detail needed to support staff understanding and effective implementation.

Auditors did not observe any cases during CWS case review in which transmission of written forms was documented. The CWS CRL informed Auditors that other types of written materials (e.g., safety plans; court-ordered case plans) are more commonly used than forms in CWS. The CRL further explained that the County's certified bilingual employees can translate some of these materials into Spanish, and CWS/CMS generates case plans in Spanish as well as English. However, the County's CWS program does not have a clear, operationally detailed policy explaining the process for how to obtain and document translations of these materials into Spanish or any other language. During CWS case review, in the only case record in which a reference to a written translation was located, documentation noted that a vendor-provided interpreter "translated and explained" a hearing notice to the parent, but the information is too vaguely worded to clarify whether the translation provided was verbal and/or in writing or both. The CWS CRL could not locate a copy of the document itself. Additionally, this documentation did not identify the language of the translated documents.

IHSS SN-IP states that applicants/recipients may "elect to receive communication and forms in [their] preferred language, when available" (p. 1) but does not explain what "when available" means. The policy is somewhat more explicit with regard to the GEN 1365, which it states must be "included with any English written correspondence that is mailed" to applicants/recipients with LEP.

During IHSS case review, Auditors observed 3 cases involving transmission of translated materials, all of which documented the provision of CDSS-translated versions of forms to applicants/recipients in their primary languages.

During Fraud case review, Auditors observed 7 CalFresh and CalWORKs case records in which the applicant/recipient had identified a non-English language for forms and written materials. In 6 of those cases, case comments documented that forms were provided in the specified identified primary language, while case comments in the

remaining case documented that forms were provided in English. Program navigators present during case review were unable to explain why this may have occurred.

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

Inconsistently, with variation among programs. According to the CRCP and the Civil Rights Coordinator, CDSS-translated versions of NOAs are provided in applicants'/recipients' primary languages. However, as noted above, case reviews for all programs except IHSS revealed that forms including NOAs are sometimes provided in English to individuals with LEP, even when CDSS translations are available. Moreover, program staff present during case reviews were not able to explain why such errors may have occurred.

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

Yes. The Civil Rights Coordinator informed Auditors that for CDSS-translated NOAs, the County translates inserted information into the applicant's/recipient's primary language. The County obtains such translations using bilingual certified staff as well as vendor-provided translation services. Program policies reviewed by Auditors do not include operational detail regarding how the translation process is supposed to work, leaving staff without sufficient direction.

According to the CRCP, the GEN 1365 "is distributed with written correspondence and Notices of Action as needed to ensure that non-English speaking customers know they can call HHSA for interpreter services and verbal interpretation of written information." (CRCP Section IV.) As noted above, the County issues the GEN 1365 with all forms and correspondence sent to applicants/recipients identified as having LEP, such that those individuals receive said notice when translated versions of NOAs are not available.

During CalFresh case review, Auditors observed 4 cases involving provision of CDSS-translated NOAs, all of which contained documentation confirming that inserted information was also translated. During CalWORKs case review, Auditors observed 5 cases involving provision of CDSS-translated NOAs, all of which contained documentation confirming that inserted information was also translated. During IHSS case review, Auditors observed 1 case involving provision of a CDSS-translated NOA and confirmed that information inserted into the NOA was also translated. Auditors did not observe documentation of any NOAs during CWS case review.

FINDINGS: Ethnic Origin Information

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

Yes. Auditors observed this information documented in 6 of 7 CalFresh cases, 11 of 11 IHSS cases, 9 of 9 CalWORKs cases, and 7 of 7 CWS cases. In 1 CalFresh case, the CalWIN option selected for the applicant/recipient on the Individual Demographics screen was “unable to be determined.”

Corrective Action

3) Policy Review and Revision: The County must review and, as needed, revise its policies and procedures related to ensuring the provision of effective services to applicants and recipients with LEP. The County must ensure that bilingual/interpreter services are prompt and without undue delays. The County must offer and provide free interpreter services using qualified interpreters. Div. 21-115. The County must use and provide translated forms in an applicant/recipient’s primary language when translated by CDSS. When the County uses translated forms and materials, such as NOAs containing space in which the County must insert information for the applicant/recipient, such information must be in the primary language of the applicant/recipient. Div. 21-115.2.

As part of the CAP, the County shall revise the policies, procedures, and handbook referenced in this section to reflect the above-noted requirements and to address all concerns identified in this section of the Report and in CDSS’ direct communication with the Civil Rights Coordinator. At a minimum, the revisions to the relevant policies and Civil Rights Handbook must include:

- Operational detail that clearly and fully explains procedures for staff to obtain interpreters as well as translations of written materials;
- Operational detail that clearly and fully explains what information staff must include in case record documentation for clients with LEP (consistent with the requirements of Division 21 and applicable ACLs);
- Accurate, compliant information that explains the limits on the use of non-certified bilingual staff and minors for interpreter services; and
- Internal alignment among program-specific policies (and corresponding civil rights trainings) regarding broadly applicable requirements.

If the County has completed a revision of these materials since the time this Review was conducted, the County shall submit a written explanation to CDSS that briefly summarizes the revisions made that address CDSS’ above-described concerns, and which presents a plan and timetable for completion of any further revisions deemed necessary (if any) based on this Report.

- 4) **Bilingual staff:** The County shall ensure that a sufficient number of qualified bilingual employees are assigned to positions and programs and/or 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 as being “proficient in oral and/or written communication in the non-English language of the persons to be served.” Div. 21-104(q)(1). As noted above, the information presented in the County’s CRCP is incomplete and insufficient to demonstrate compliance with these requirements, insofar as it lacks a description of its efforts to meet its identified bilingual hiring goals. See Section XI, below, for Corrective Action.
- 5) **Timely services:** The County must ensure that bilingual/interpretive services are prompt and without undue delays. Div. 21-115. Given the variation in wait times for interpreter services reported by staff across programs and employment groups, as part of the CAP, the County shall take steps to identify and address the cause(s) of the delays; update relevant staff protocols and vendor contracts as needed; inform staff of any such changes; and provide a written summary to CDSS of actions taken to resolve this issue.

Recommendations

Policy Coherence: As noted above in this Section, some County programs have more than one policy, procedure and/or handbook that address the provision of interpreter services to individuals with LEP. As a result, the information they contain can come across as disjointed and even internally inconsistent. CDSS supports the use of program-specific policies and procedures but strongly recommends that the County review and revise these materials in tandem so as to harmonize the information they contain into a coherent whole.

Documentation of Interpreter Services Auditors recommend standardizing language used in all CDSS-covered programs in case comment entries (or analogous locations) to support consistent, compliant documentation for: primary language identification (including updates/changes to primary language); offer to provide interpreter services; acceptance or declination; method of providing interpreter services; language in which services were provided; and procedure followed when an applicant/recipient-provided interpreter is used. Instruct staff on where to insert language in case comments so that documentation is easily found by supervisors and other staff.

CWS/CMS Features and Tools: CDSS strongly recommends that the County use available CWS/CMS features and tools to support effective language services delivery and documentation. In particular, the County should consider developing and implementing a protocol requiring CSWs to create an Associated Service with the Service Type “Arrange bilingual services” or “Provide bilingual services” linked to each contact note involving interpreter services. Doing so will help elevate the visibility,

consistency and searchability of the information, which supports civil rights protections for clients and their family members and also supports the County's ability to demonstrate compliance with Division 21 requirements. Div. 21-116.1.

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: Services for Persons with Disabilities

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

Yes. The applicable policies are the above-referenced EPPG NEP/RA, CWS PMCPP-CR, and IHSS PPH-CR. In addition, EPPG CR-D&D has a brief section on case documentation requirements for "disabled individuals." As noted above in this Report, the Civil Rights Coordinator informed Auditors that the EPPG and CWS policies are currently under revision, and the IHSS policy was recently revised. (Relatedly, the Civil Rights Coordinator confirmed to Auditors that the revisions related to reasonable accommodations were prompted by a discrimination complaint investigation in which a complainant's failure to accommodate allegations against County employees were found to be substantiated.) Auditors reviewed the policies in effect at the time of this Compliance Review and identified multiple concerns, details of which have been communicated directly to the Civil Rights Coordinator. Those concerns include, but are not limited to, the following:

- Lack of operational detail regarding RA-related procedural requirements, including those involving documentation in program-specific CMS and offering RA when an individual's disability is known or obvious
- Lack of key definitions and explanations of key concepts

- Lack of information about and examples of broad range of disabilities that applicants/recipients might have that necessitate RA, which contributes to “invisibility” of certain disabilities and related needs
- Use of multiple policies and forms that present information in a disjointed manner

Auditors note that, in survey responses, the Civil Rights Coordinator (who at the time of this Review also served as the County’s acting ADA Coordinator) provided a detailed description of a range of RA options the County provides as well as examples of situations in which the County has provided RAs to its applicants/recipients. This information reflects a high degree of awareness and understanding by the Civil Rights Coordinator of the County’s RA-related obligations. However, in order to ensure that level of understanding is shared and operationalized by public contact staff across all CDSS-covered programs, the County must develop, disseminate and continually update robust policies and procedures to support the systemic transmission and reinforcement of that information, particularly given the County’s large geographical size and number of employees.

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

Sometimes, with room for improvement.

According EPPG NEP/RA, the County provides a range of auxiliary aids and services to applicants/recipients in its Self-Sufficiency programs, including but not limited to TTY and VRI services; large print, audio and braille versions of written materials; and assistance with forms completion. CWS PMCPP-CR identifies similar auxiliary aids and services. IHSS PPH-CR explains the County’s obligation to provide auxiliary aids and services to applicants/recipients who have communication-related disabilities but lacks operational detail about what specific auxiliary aids and services are available and how to provide those, and lacks any reference to existing procedures and tools the County’s IHSS workers regularly use to identify and document individuals’ blindness and vision-related disabilities and RA needs.

As reported by surveyed staff and the Civil Rights/ADA Coordinator, the County provides a range of auxiliary aids and services including (but not limited to) written materials in braille and large print; audio versions of some materials upon request; ASL interpreters; and the use of TTY and California Relay Service 711 for telephone communication with applicants/recipients who are d/Deaf or hard of hearing.

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

Minimally. EPPG CR-D&D states only that, “[u]pon obtaining information that identifies an applicant/recipient as having a disability requiring auxiliary aids, staff must enter case comments regarding the request and actions taken to accommodate the client(s).” (p.6 of 7) CWS PMCPP-CR states similarly that certain documentation requirements are triggered by a worker “obtaining information that identifies a client as disabled.” (p.2) Neither policy explains what the sources of such information may be or what role staff are obligated to play in obtaining, recognizing, interpreting and responding to this information. (The statement quoted from EPPG CR-D&D also appears to incorrectly conflate auxiliary aids with the broader category of RA.) Similarly, EPPG NEP/RA also lacks this explanatory information, stating only that the County must provide RA to “customers **who indicate** they have a disability.” (p. 2) (Emphasis added.) All of this tends to suggest that the County relies entirely or primarily on affirmative self-disclosure by applicants/recipients of their disability-related needs instead of recognizing the County’s obligation to assist individuals to self-identify as having disabilities and RA needs when those disabilities are known and/or obvious. [ACL 19-45](#).

The CRL HB does not address the topic of the identification of individuals with disabilities and/or their related RA needs.

IHSS PPH-CR also does not address this topic. This is a particularly glaring omission given that disability is a qualifying factor for IHSS, and most if not all IHSS cases involve applicants and recipients who present with disabling conditions. Thus, IHSS staff are tasked not just with identifying individuals’ disability-related needs that affect their **ability to continue living in their home** (i.e., IHSS program needs), but also with distinguishing between those and disability-related needs that affect an individuals’ **equality of program access** (i.e., RA needs). Although IHSS policy does not address this, the County does currently meet its civil rights obligations in practice insofar as staff specifically identify applicants/recipients with blindness and other vision-related disabilities and offer and provide RAs related to those disabilities. However, the County does not have a process for taking similar steps with respect to any other disabilities. CDSS emphasizes that the procedures staff follow for IHSS program purposes (including gathering, documenting and responding to information about individuals’ disabling conditions) are not automatically synonymous with procedures required to meet the County’s civil rights obligations.

Staff survey responses appear indicative of a lack of clear and robust policy guidance in this area. When asked if the County has a written policy and/or procedure for identifying applicants/recipients with disabilities, 60% of surveyed staff said yes, 5% said no, and 35% said “unsure.” When asked if the County assists applicants/recipients with self-identifying their disabilities, 44% said yes, 14% said no, and 42% said “unsure.”

Case review observations further support that the County’s policies and procedures in this area need improvement. During CalFresh case review, Auditors observed that a yellow triangle icon indicating a “special accommodation” need was present in all

CalWIN case records for the 7 cases reviewed. Each individual's specific need was chosen from an extensive drop-down menu in the CalWIN Special Characteristics screen. The Civil Rights Coordinator informed Auditors that this icon is used as an indicator of a wide range of issues and needs, inclusive of but not limited to RA needs. The indicator does not have a corresponding field for workers to notate relevant details about the individual's need(s) and accommodation(s). Among the CalFresh cases reviewed, 1 individual was identified as needing "Visual accommodation," 3 were identified as needing "Physical accommodation," 2 were identified as needing "Audio accommodation," and 1 was identified as needing "Literacy" accommodation. Auditors did not observe documentation (such as case comment entries) in any of these cases to indicate that workers had identified the applicants'/recipients' RA needs with any specificity or made distinctions between disability-related and non-disability-related needs. Additionally, 5 of these case records also contained other indicators of actual or potential disability (such as receipt of SSI) without documentation to indicate that staff recognized and treated such indicators as triggering the County's obligation to offer or inquire about RA needs.

During CalWORKs case review, Auditors observed the yellow special accommodation icon in 7 of the 9 cases reviewed and a red exclamation mark icon in the remaining 2 cases. As explained to Auditors, this red icon is activated when the worker identifies a special accommodation that involves "sensitive information." In each of the 2 CalWORKs cases with this icon, the "sensitive information" was identified from the drop-down menu as involving a mental health accommodation. Among the 7 cases with yellow triangle icons, 1 individual was identified as needing "Physical accommodation," 1 was identified as needing "Audio accommodation," 1 was identified as needing "Literacy" accommodation, and 4 were identified as needing "Language" accommodation." Auditors did not observe documentation (such as in case comments) in any of these cases to indicate that workers had identified the applicants'/recipients' RA needs with any specificity or made distinctions between disability-related and non-disability-related needs (such as having LEP). As with the CalFresh cases, 5 of these case records also contained other indicators of actual or potential disability (such as receipt of SSI) without documentation to indicate that staff recognized and treated such indicators as triggers for offering or inquiring about RA needs.

During IHSS case review, Auditors observed compliant documentation in 3 of 11 cases that the program recipient had blindness or visual impairment ("BVI") and a related RA need. Program staff present during case review informed Auditors that in 4 of the remaining 7 cases, the program recipient had expressed a disability-related need for a home visit scheduling change. The worker in each case had made the requested change without documenting it as a reasonable accommodation. Program staff further informed Auditors that the IHSS program does not have a procedure for identifying or tracking RA information that is unrelated to BVI.

During CWS case review, Auditors observed CWS/CMS Health Notebook documentation in 2 of 7 cases listing medications related to the client's mental health-issues. However, there was no documentation to indicate this information prompted an RA offer by the worker – or that it was recognized at all as an indicator of a potential or actual mental disability with accompanying civil rights obligations. Auditors also observed CWS/CMS Health Notebook documentation in 1 case noting the client had a physical health condition, but the condition was not specified and there was no documentation of a corresponding RA offer or request. Moreover, the CWS CRL informed Auditors that the County does not have a systematized procedure for documenting similar information for parents at all.

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

Yes. The County contracts with a vendor to provide screening for learning disabilities for Welfare-to-Work program participants.

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

Minimally. As noted above, case reviews reveal an apparent lack of awareness by workers across programs of the circumstances that can trigger an obligation to offer RA, as well as a lack of awareness of what steps to take to meet this obligation. In particular, Auditors observed the liberal use by CalFresh and CalWORKs staff of the CalWIN special accommodation icons to identify individuals' needs including but not limited to RA. However, Auditors did not observe documentation to support that Self Sufficiency workers in these programs offer RA to these applicants/recipients. Nor did Auditors observe documentation during CWS case review to support that workers in this program offer RA to children or parents. During IHSS case review, as noted above, Auditors observed documentation indicating that staff do offer RA to applicants/recipients who self-identify as having BVI, but not to individuals who present with other disabilities and related needs.

Does the County appropriately document disabilities and reasonable accommodation requests?

No, except to a limited degree in IHSS.

During IHSS case review, as noted above, Auditors observed compliant CMIPS documentation in 3 cases involving individuals with BVI but did not observe similarly compliant documentation regarding other disabilities and related needs of applicants/recipients.

During CalFresh and CalWORKs case reviews, Auditors observed such broad application of CalWIN's special accommodation icon that it was not a reliable indicator of the presence of a disability and/or a related RA need in any individual's case. This

problem was compounded by the lack of any additional information noted elsewhere in the case records to specify the nature of existing disabilities and RA needs. Relatedly, while other indicators of actual or potential disability-related needs (e.g., receipt of SSI) are captured in CalWIN sections specifically designated for that purpose (e.g., “Disability/Medical Conditions” and “Other Programs”), Auditors did not observe any documentation to support that workers have recognized or treated such information as an indicator that may trigger an obligation to offer RA. Relatedly, CDSS notes that its 2017 Compliance Review Report for the County identified deficiencies in disability-related documentation in these programs, which indicates a persistent problem that has not been adequately addressed.

During CWS case review, Auditors observed that certain indicators of actual or potential disability-related needs of children and youth (such as medications or clinical diagnoses) are noted in CWS/CMS sections of the Health Notebook designated for that purpose, but Auditors did not observe any documentation to indicate that workers recognize or treat such information as triggering the obligation to offer and document RA. For example, in 2 cases involving clients with mental health issues, Auditors observed information about those issues in a Status Review Report (in 1 case) and in contact notes (in the other case), but in neither case was the documentation compliant with ADA-related procedures. ACL 19-45. Moreover, as noted above, the County does not systematically document similar information for parents at all.

Corrective Action

- 6. Policy Review and 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. The County shall adopt a written policy detailing how they will comply with the requirements set forth in ACL 19-45. ACL 19-45. The County shall ensure the availability of auxiliary aids and services to persons who are deaf or hearing impaired, or persons with impaired speech, vision, or manual skills where necessary to afford such persons an equal opportunity to access program services. Div. 21-115.41. The County shall document an applicant’s/recipient’s request for services in writing. Div. 21-116.3. The County must ensure that proper and consistent documentation identifying all the required elements to ensure compliance is present in an applicant’s/recipient’s case file. Div. 21-116.

As part of the CAP, the County shall revise the policies, procedures, and handbook referenced in this section to reflect the above-noted requirements and to address all concerns identified in this section of the Report and in CDSS’ direct communication with the Civil Rights Coordinator. At a minimum, the revisions to the relevant policies (EPPG NEP/RA, CWS PMCPP-CR, IHSS PPH-CR. and EPPG CR-D&D) and Civil Rights Handbook must:

- Incorporate topical coverage and operational detail required by ACL 19-45 regarding both substantive RA requirements (such as the obligation to identify and offer RA when disability-related RA needs are known or obvious) and procedural requirements (such as documentation in program-specific case management systems); and
- provide accurate information about, and explanations of, key concepts and terms (such as “disability,” “auxiliary aids and services,” “primary consideration,” and “interactive process”).

If the County has completed a revision of these materials since the time this Review was conducted, the County shall submit a written summary to CDSS that briefly describes the revisions made that address CDSS’ above-noted concerns, and which presents a plan and timetable for completion of any further revisions deemed necessary (if any) based on this Report.

Recommendations

Policy Coherence: As noted in Section V and above in this Section, some County programs have more than one policy, procedure and/or handbook that address the provision of services such as RA to individuals with disabilities. As a result, the information they contain can appear disjointed and even internally inconsistent. CDSS supports the use of program-specific policies and procedures, particularly because the nature of programs such as CWS and IHSS pose unique challenges to meeting RA-related procedural and documentation requirements. However, CDSS strongly recommends that the County review and revise these distinct materials in tandem so as to harmonize the information they contain into a coherent and internally consistent whole.

CalWIN Features and Tools: CDSS strongly recommends that the County use available CalWIN features and tools to support effective services delivery and documentation for children and parents with disabilities. In particular, the County should consider developing and implementing a systematic protocol for using special accommodations icons in conjunction with corresponding notes in other CMS fields and/or screens to support complete, compliant and consistent documentation of this information. Doing so will help support continuity and timeliness of services and enable the County to demonstrate compliance by ensuring that the information is readily visible and available to workers.

Auditors note the County is transitioning to CalSAWS and this recommendation applies to the use of analogous features and tools in CalSAWS, at such time as the County completes its migration to that CMS.

CWS/CMS Features and Tools: As part of RA policy revision, CDSS strongly recommends that the County incorporate a requirement that CSWs use all available CWS/CMS features and tools that support effective service delivery to individuals with

disabilities and related RA requests, and which also support effective documentation of those RA requests and needs. In particular, the County should consider requiring CSWs to create an Associated Service with the Service Type “Arrange ADA services” linked to each contact note that includes documentation of RA for a client or family member. Doing so will help elevate the visibility, consistency and searchability of the information, which supports the continuity of service provision and the County’s ability to demonstrate compliance with applicable requirements. Div. 21-116.1; ACL 19-45.

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 separate program-specific Division 21 training to its Self-Sufficiency, CWS and IHSS staff. These trainings share most content in common, but each also includes unique program-specific information. In addition, the County provides separate trainings to its Human Services Specialists and its Office Assistants—again, these trainings share much content in common but are different in key respects relating to the distinct responsibilities of each job category.

According to the CRCP and the Civil Rights Coordinator, all new public contact staff receive Division 21 training (live or via WebEx) upon hire, and they also receive mandatory annual refresher trainings. The latter are presented primarily in an online format without narration, though in-person presentations can be arranged upon a manager’s request. The CRC informed Auditors that the refresher training is a slightly condensed version of the initial Self-Sufficiency program training. Pdf copies of this training may be shared with staff for use as a reference, but only if they have already attended the initial training in person or via WebEx.

Additionally, the County disseminates information about new civil rights-related developments and policies/procedures to staff via memos, emails, meetings, and program guide alerts. Onsite Civil Rights Liaisons (CRLs) also share updates and new information with facility staff. The CRLs themselves receive additional “mini trainings” at quarterly meetings with the Civil Rights Coordinator on a range of civil rights topics.

Auditors reviewed the 4 versions of the staff training referenced above and identified multiple concerns, including but not limited to the following issues that most or all of them have in common:

- Lists of protected bases are internally inconsistent as well as incomplete and out of date. The trainings also lack information about claims that may be made on the basis of perception and/or association with a member of a protected group. The fact that staff may take refresher trainings online without narration and may obtain printouts of the training for reference underscores the importance of ensuring all printed training materials are clear, accurate and up to date.
- Multiple slides present an early resolution attempt as a prerequisite to discrimination complaint investigation. Division 21 does not prohibit early resolution but also does not require it to be attempted before a complaint investigation. Relatedly, successful early resolution of the issue that prompted the complaint does not automatically mean that the complaint itself should no longer be investigated. Imposing an early resolution attempt as a prerequisite therefore inserts a step into the process that is not supported by the regulations, and which runs counter to Division 21's clear preference for removing barriers to complaint filing. Div. 21-203.22. It is also inconsistent with CDSS' current guidance and training on [discrimination complaint evaluation](#).
- "Customer complaints" are categorized as belonging to one of 3 types: civil rights/discrimination, personnel, and programmatic. While this framework can be a useful tool in clarifying distinctions, the text on the slides lacks an explanation that these are not mutually exclusive categories and that discrimination claims in a hybrid complaint (e.g., a complaint that has both discrimination and non-discrimination claims) must be handled according to Division 21 discrimination complaint procedures.
- Slides on discrimination complaint procedures present inaccurate information about the types of information an applicant/recipient is required to submit when filing a discrimination complaint and about the other government agencies that handle such complaints. These slides also lack operational detail about steps staff must take when receiving such complaints.
- Slides that contain information about the PUB 13 must be reviewed and revised to ensure the information is accurate, complete, and up to date.
- Many of the slides regarding interpreter services and translated materials lack the level of operational detail needed to support staff understanding and implementation of required procedures, and several of these slides also contain incomplete, inaccurate, internally inconsistent, and/or out of date information. Even those training modules that have been revised to reflect the requirements of ACL 21-128 tend to focus on the use of CDSS Form 6181 without reference to the additional case record documentation requirements stated in that ACL.
- Slides regarding the use of minors as interpreters provide the following scenario as the sole example of "extenuating circumstances" permitting their use: "an extremely rare language for which NO vendor or agency has an interpreter."

CDSS expresses concern that the slides omit ACL 08-65's instruction that when a County does not have immediate access to a County-provided interpreter with the right language skills, a minor may only be used "to determine the language of the client and to schedule a date or time" when such an interpreter will be available. If the County is still unable to locate an interpreter who speaks the client's primary language after diligent effort and after taking the above step, the matter should be elevated to the appropriate CRL rather than left to worker discretion for handling.

- Slides covering services for applicants/recipients with disabilities lack accurate and operationally detailed information about several key topics, concepts and requirements presented in ACL 19-45, including but not limited to: the California definition of "disability"; the County's obligation to identify (and assist individuals to self-identify) disabilities and related RA needs; processing and documenting RA requests, offers, provision, and denials; and concepts such as "interactive process" and "primary consideration." CDSS notes with particular concern that the content of all reviewed trainings reflects the County's reliance on affirmative self-disclosure by applicants/recipients of their disabilities and RA needs. This may foreseeably contribute to a failure by staff to appreciate and act on the County's obligation to identify (and assist individuals to self-identify) their disabilities and RA needs and offer RA when disabilities are known or obvious. Other concerns include an apparent conflation of "auxiliary aids and services" with the broader category of RA (with the result that only communication-related accommodations are discussed) and the lack of clear, specific, operationally detailed information regarding emotional support animals. The CWS training also includes an inaccurate distinction between psychiatric service animals and emotional support animals.

More detailed feedback, including program-specific feedback, was provided directly by CDSS to the County during this Review.

Does the County provide employees with Cultural Awareness Training?

Somewhat. According to the CRCP, the County offers a range of cultural awareness trainings to staff through its training center (known as The Knowledge Center). However, the Civil Rights Coordinator informed Auditors that these trainings are voluntary for staff rather than mandatory.

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

Somewhat. Approximately half of surveyed staff (52%) report being extremely or very familiar with the predominant cultural groups receiving services in the area. Thirty-two (32) percent of staff report they are somewhat familiar with these groups, while 16% report they are not so familiar or not at all familiar with these groups.

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

Auditors observed conflicting information about this training. According to the CRL for CWS, the County requires all CSWs to take a full-day course on MEPA (which is also referenced in one slide in the Division 21 training for the CWS program). Auditors note, however, that only 12% of surveyed CSW report having taken this training, while more than twice that amount (33%) report they have not taken it, and over half (56%) report they are "unsure" if they have or not.

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

Minimally. The Civil Rights Coordinator reports that the County offers a range of trainings on disability-related topics which are "conducted by organizations with subject matter expertise." However, as noted above, Auditors reviewed the County's mandatory civil rights trainings for staff in Self-Sufficiency programs, CWS, and IHSS, and found that all lack sufficient information and operational detail on these topics.

Relatedly, approximately one-third (30%) of surveyed staff report they have not received such training or are "unsure" if they have or not.

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

No. None of the above-referenced staff civil rights trainings reviewed by Auditors provide information about identifying applicants/recipients with disabilities. As noted above, these trainings implicitly convey the inaccurate message that the County's obligation to provide services to individuals with disabilities begins with affirmative, explicit self-disclosure by applicants/recipients about their disabilities and RA needs.

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

Minimally. According to the CRCP, staff are "informed of the importance of providing reasonable accommodations/modifications... and receive instructions on how to accomplish this at initial staff training." (CRCP Section IV) However, as noted above, Auditors reviewed the County's mandatory staff civil rights trainings in its Self-Sufficiency, CWS, and IHSS programs, and found that all lack sufficient information and operational detail about RA.

Relatedly, over one-third (37%) of surveyed staff report they have not received such training or are "unsure" if they have or not.

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

No. As discussed in Section VI of this Report, Auditors observed little evidence that staff consistently recognize RA needs when they arise, fully recognize the scope of the County's RA obligations, or comply with those RA obligations. This strongly suggests a need to improve staff understanding of the requirements in this area through robust training and regular reinforcement.

Does the County provide other civil rights-related training?

No.

Corrective Action

7. Division 21, Civil Rights Training: The County shall ensure that employees receive Division 21 civil rights training at the time of orientation, as well as ongoing training to ensure that public contact staff has knowledge of Division 21, including familiarization with the discrimination complaint process. Div. 21-117.1. As part of the CAP, the County shall revise its Annual Civil Rights Training for the Self-Sufficiency, CWS and IHSS programs to address the concerns and deficiencies identified in this section and during the Review. At a minimum, the County shall also revise these trainings to:

- Address the bulleted list of concerns presented above in this section;
- Incorporate the requirements of ACL 21-128; and
- Maintain consistency with any other policy and procedure revisions required elsewhere in this Report.

If the County has completed a revision of these materials since the time this Review was conducted, the County shall submit a written summary to CDSS that briefly describes the revisions made that address CDSS' above-noted concerns, and which includes a plan and timetable for completion of any further revisions deemed necessary (if any) based on this Report. The County may contact CDSS for feedback and technical assistance.

8. 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 and implement mandatory cultural awareness training for staff that meets Division 21 requirements. Div. 21-104(c)(2); 21-117.2. If the County determines that its voluntary

trainings related to cultural awareness include modules or material that meet these requirements, it may repurpose this material to comply with this CAP step.

- 9. MEPA Training:** The County shall ensure that CSWs receive MEPA training to ensure that public contact staff have knowledge of, and properly apply, placement prohibitions contained in MEPA. 42 U.S.C. 672, 674, and 1996(b). Due to the large percentage of surveyed CSWs who report they have either not taken this training or are unsure if they have, the County shall review the process by which MEPA training is provided to CSWs to identify gaps in training delivery and develop and implement a plan to close the identified gaps and ensure that training is provided to all CSWs.
- 10. Reasonable Accommodation Training:** The County shall train public contact staff, program managers, and supervisors upon hire and, at a minimum, annually thereafter, on the County's policies for ensuring compliance with disability nondiscrimination laws and on providing reasonable accommodations for people with disabilities. ACL 19-45, Section I. As part of the CAP, the County shall incorporate revisions into its Annual Civil Rights Training for the Self-Sufficiency, CWS and IHSS programs that address the concerns and deficiencies identified in this section as well as in Section VI of this Report.

Recommendations

Self-Sufficiency Program Training(s) Slide – “What Happens If You Are Named in a Civil Rights Complaint?”: As discussed with the Civil Rights Coordinator during this Compliance Review, this slide raises a concern that its contents (such as the three bullet points that begin “Most CR complaints....”) might unintentionally be interpreted as downplaying the seriousness of discrimination complaints and investigation results. This is of heightened concern because this training module is shared with staff in multiple programs in pdf form for use as a reference and may therefore be reviewed without narrative context from a presenter. CDSS recommends that the County revise this slide or augment the slide deck in a way that explicitly affirms its commitment to civil rights while still addressing staff concerns and anxieties (e.g., by adding a statement affirming that the County takes discrimination allegations seriously while treating substantiated findings of discrimination as opportunities for growth and improvement).

CWS Division 21 Training: The information in many of the slides in this module is presented in a disjointed and fragmentary way, such that it is difficult or impossible to determine what is being conveyed on several slides without the presenter's accompanying narration. CDSS recognizes that, according to the CWS CRL, this training is only shared with staff in a presentation format that includes narration. (CWS staff are provided with a link to the Self-Sufficiency program training for annual refresher trainings.) However, this training delivery approach could conceivably change, and/or a less experienced staff member might be asked to present the training under certain circumstances. These and similar variables underscore the importance of presenting

information in a clear, thorough, coherent way, such that the intended meaning of each slide is readily apparent. CDSS recommends that the County consider revising the module to make sure that all content is covered clearly and accurately in the slides themselves.

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 1.

- Complaint 1: Not an example of a discrimination complaint; selected by 14% of surveyed staff.
- Complaint 2: Example of a discrimination complaint; selected by 79% of surveyed staff.
- Complaint 3: Example of a discrimination complaint; selected by 60% of surveyed staff.
- Complaint 4: Example of a discrimination complaint; selected by 79% 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 3 as a discrimination complaint, which may demonstrate a lack of understanding that failure to provide interpreter services is a civil rights violation. Reinforcing this concept in 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?

Minimally. According to the CRCP, “[a]ll staff have been trained to refer Civil Rights complaints and inquiries to the on-site CRL. In cases where the complainant wishes to speak directly to the Civil Rights Coordinator, staff make the appropriate name and phone number readily available. If customers wish to make a complaint to another entity such as CDSS or Office for Civil Rights at the federal level, the contact information in the PUB 13 is provided.” (CRCP Section IV)

However, when asked what they do when an applicant/recipient expresses a civil rights complaint to them, only half of surveyed staff (51%) mention the Civil Rights Liaison or Civil Rights Coordinator at all. Approximately one quarter (26%) report instead that they consult with, or refer the complainant to, their supervisor. The remainder report widely divergent responses, such as: they attempt to resolve the complaint issue themselves (“[I] look into their complaint to ensure that the workers are following policies and procedures”); they provide unspecified paperwork (e.g., “Give them a paper to fill out”); or they provide unspecified and/or incorrect referral information (“give them the information of the person who they can contact”; “Client can also call 211 for that information”).

As discussed in Section VII of this report as well as in this Section, Auditors have identified several concerns regarding the information presented in County discrimination complaint handling policies and in sections of staff trainings about discrimination complaint procedures. Some of these issues likely contribute to the above-referenced lack of consistent understanding by staff, such as insufficiently detailed information in policy and training about precise steps a staff member should take upon receiving a discrimination complaint and the different types of circumstances under which this might occur. See below for further discussion.

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

Minimally. Staff survey results reveal that just over half (51%) identified their facility lobby as the location for this poster.

Is the complaint log complete and up to date?

No. The County’s complaint log (Jan 2021 – Aug 2022) tracks some but not all the categories of information required by Division 21. Div. 21-203.21. Specifically, it lacks a column to identify the “Nature of Complaint,” and rather than maintaining separate columns to identify the “Resolution” and “Decision” for each complaint; it appears to combine that information into a single column labeled “Disposition.” CDSS reminds the County that, in addition to being required by Division 21, each of these distinct categories of information can provide the County with valuable insight into its own processes and into substantive civil rights concerns that merit attention.

With regard to the County's complaint log contents, Auditors identified multiple discrepancies and other record-keeping deficiencies when compared with CDSS discrimination complaint records. Specifically:

- Two complaints (A.R.; L.S.) should have been included in the County's complaint log but were missing. In at least one of these cases (L.S.), lack of communication from the Civil Rights Coordinator to the CRU about procedural questions appears to have delayed the case handling process.
- Two complaints (N.D.; R.D.) resulted in conclusions that the County did not report to the CRU, causing a delay in the CRU's review and closure determination.
- The County failed to notify the CRU about either the filing or investigation result of one complaint (C.C.), causing a delay in the CRU's review and closure determination.

Maintenance of an accurate and up-to-date complaint log is required by Division 21 and – along with timely and diligent communication with CDSS – essential to effective and compliant case handling. Div. 21-203.21.

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

Yes, the County has a written policy, "Complaints of Discriminatory Treatment" (hereafter referred to as EPPG CDT) that applies to its Self-Sufficiency programs. The CRL HB also contains information about discrimination complaint processing that is consistent with EPPG CDT. In addition, the County has separate discrimination complaint policies that apply to CWS (in CWS PMCPP-CR) and IHSS (in IHSS PPH-CR), respectively. CDSS has identified concerns about each of these policies and procedures, including but not limited to the following:

EPPG CDT:

- As in the staff training discussed in Section VII above, complaints are categorized as belonging to one of 3 types (civil rights/discrimination, personnel, and program-related) without an explanation that a complaint may belong to more than one category and that discrimination claims made within a hybrid complaint must be handled according to Division 21 procedures. This policy also lacks an explanation of the steps involved in a robust and compliant complaint evaluation process. (See CDSS' [Complaint Evaluation training](#).)
- As in the above-discussed staff training, this policy contains inaccurate, out-of-date, and/or incomplete information on multiple topics, including but not limited to the following: the protected bases; the information a complainant is and is not required to submit when filing a discrimination complaint; when the 180-day time frame starts to run for filing a complaint; compliant case closure processes; and appeal rights notification.

- Descriptions of complaint handling procedures lack operational detail and are somewhat internally inconsistent.
- The section on “retaliatory actions” lacks a clear explanation of *retaliation* as a separate basis for a civil rights complaint, distinct from a discrimination claim.
- As with the staff training, EPPG CDT includes several provisions that treat early resolution attempts as a prerequisite to discrimination complaint investigation. As explained in Section VII of this Report, this approach inserts a step into the process that is not supported by the regulations and runs counter to Division 21’s clear preference for removing barriers to complaint filing. It is also inconsistent with CDSS’ current guidance and training on discrimination complaint evaluation. CDSS reiterates that Division 21 does not prohibit the County from making early resolution attempts when an applicant/recipient files a discrimination complaint, but we caution the County to take care that its policies and procedures do not create the impression that an individual must participate in such attempts before having their complaint investigated. CDSS also reminds the County that even successful resolution of a complainant’s concern may not lead the individual to withdraw their complaint, if they perceive that the alleged discriminatory conduct or practice still merits investigation.

CRL HB: CDSS’ concerns largely mirror those explained above regarding EPPG CDT.

CWS PMCPP-CR: The only identified reference to discrimination complaint handling in the CWS Policy Manual is the following: “SW staff may refer the client to the CWS Civil Rights Liaison... if the individual wishes to file a civil rights complaint.” (CWS PMCPP-CR, p. 2) The policy provides no information or operationally detailed guidance to support staff in understanding any aspect of the discrimination complaint process, such as how to recognize a discrimination complaint; available methods for complaint submission; and what precisely it means to “refer” a complainant to the CWS CRL. (For example: Are staff expected to simply provide the complainant with the CRL’s phone number and/or email address? Are staff expected to first determine whether the claim(s) actually involve discrimination or not? What if the complainant wishes to have the staff member write down their verbal complaint? What if the complainant has LEP? What if the individual wishes to file a complaint against the CRL?) These example scenarios are intended to illustrate that simply instructing staff to “refer” discrimination complaints to the CRL may leave them without the knowledge or tools they need to respond in a compliant and effective manner when a client expresses a wish to file such a complaint.

IHSS PPH-CR: CDSS’ concerns about this policy mirror many of those identified above regarding EPPG CDT. Auditors also note the following:

- Information regarding discrimination complaint filing procedures is internally inconsistent and even misleading, as well as lacking in operational detail. For example, it states variously that staff who receive a civil rights complaint must contact the County Civil Rights Coordinator but also that employees should direct

complainants to contact CDSS to file their complaints. Such vague and internally contradictory instructions are more likely to confuse staff rather than support appropriate complaint handling. Moreover, the provision about directing complainants to CDSS to file discrimination complaints is concerning. Complainants have the *option* to do so, and it is consistent with Division 21 for the County to inform complainants of this, but the policy provision as written could be interpreted to mean that this is the only correct means of filing such complaints, which is not accurate.

- CDSS also expresses concern about the paragraph that begins “Civil rights complaint procedures cannot change IHSS regulations.” The intended meaning of this statement is unclear. Without further context or explanation, it could be interpreted to mean that the County does not consider the discrimination complaint process to be an appropriate venue for handling and investigating civil rights complaints that involve or implicate IHSS regulations. However, federal civil rights law and regulation make clear that an applicant/recipient with a disability has the right to request and receive a change to, or waiver of, program rules and requirements as a reasonable accommodation, unless the County director or designee determines that the change or waiver would impose an undue financial burden or fundamentally alter the nature of the program, service or activity in question. The fact that some program rules and requirements may be rooted in state regulation do not change the County’s obligation to analyze each RA request to determine whether to grant or deny it. ACL 19-45, Sec. IV. Failure to provide RA may be grounds for a discrimination complaint.
- In addition, that same paragraph in IHSS PPH-CR states that if a complaint alleges inappropriate employee conduct that is “not **solely** based on one of the” legally identified protected bases (emphasis added), “the complaint will be treated as a personnel complaint and will be handled by IHSS management and/or the Departmental Human Resources Officer (DHRO).” This approach is inconsistent with Division 21 in that a complaint need not *solely* allege discrimination to warrant investigation as a discrimination complaint. Any part of a complaint that alleges discrimination and which contains the required elements of a discrimination complaint must be investigated as such. Suggesting otherwise may foreseeably lead to complaint misidentification and mishandling and may also mask legitimate civil rights concerns and render them invisible to County staff and leadership.

More detailed notes and feedback, including program-specific feedback, were provided directly by CDSS to the County.

Is the County handling discrimination complaints appropriately?

Sometimes. As noted in this and other Report sections, CDSS has significant concerns about the County’s complaint handling policies, procedures, and training. See Corrective Action, below.

Corrective Action

11. Discrimination 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:

- Revise its Log to incorporate columns for “Nature of the Complaint,” “Resolution,” and “Decision.”
- For all open cases from January 2021 forward, the County shall review and revise its Log contents as needed to ensure that the information is complete, accurate, and consistent with Division 21. Div. 21-203.21.
- The County shall review its process for updating and maintaining the Log to identify areas where improvements can reduce or eliminate errors and shall develop a written description of this process (in narrative or flowchart format) that incorporates those improvements. The County shall submit this description to CDSS.

12. Discrimination Complaint Policies: 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 revise the above-referenced policies and handbook to address the concerns raised in this Report and those communicated directly to the CRC (including removing the 2010 CDSS “Investigation Guidelines” from the CRL Handbook, which are out of date and no longer consistent with key aspects of current CDSS guidance). If the County has revised these materials since the time this Review was conducted, it shall review those materials in light of the above and submit a written summary briefly describing both the revisions made that address CDSS’ concerns as well as a plan and timetable for completion of any further revisions deemed necessary (if any) based on this Report.

Recommendations

Civil Rights Liaison (CRL) Training: CDSS strongly recommends that the County require all CRLs to watch CDSS’ Complaint Evaluation training and review the accompanying Participant Guide, which together present a clearly defined, compliant process for evaluating discrimination complaints. This will help ensure that CRLs across the County have an accurate, shared understanding of this foundational component of complaint handling.

CRL Handbook Statements: The section of the CRL Handbook titled “Civil Rights Liaison Duties and Complaint Investigation Process” makes two assertions that raise CDSS’ concerns: (1) that the “majority of the complaints received by the CR Coordinator

have nothing to do with civil rights/discrimination” (p. 1) and (2) that “99% of CR complaints result in a finding that we did NOT discriminate against” the complainant (p. 4). CDSS reminds the County that this Compliance Review identified a number of deficiencies in the County’s discrimination complaint identification and evaluation procedures as well as related complaint handling processes, which may call into question the reliability of the above assertions. CDSS recommends that the County review these assertions for accuracy and revise if needed.

EPPD CDT – “Abandonment”: The section of the EPPG CDT chart on “Abandonment,” when read in conjunction with the template for an Initial Complaint Acknowledgement letter in the CRL Handbook, indicates that complainant has 14 days to respond to that letter or the County will close the complaint. Division 21 requires the County to “make a reasonable effort to make contact with the complainant by mail and/or telephone to follow up on the initial complaint.” Div. 21-203.224. Although the regulations don’t specify what counts as a “reasonable effort,” CDSS considers it best practice for the County to attempt to reach a complainant at least twice, using all known methods of contact with that individual. CDSS advises the County that relying on a single boilerplate letter sent via U.S. mail may not meet the “reasonable effort” standard and strongly recommends against presenting and using this method as standard operating procedure.

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 10 vendor contracts from the County, none of which include a copy of the CDSS-provided Vendor Assurance of Compliance Statement (VACS). The Civil Rights Coordinator informed Auditors that it is not the County’s standard practice to obtain and incorporate signed VACS into their vendor agreements. Instead, the County incorporates nondiscrimination provisions in contracts themselves.

The vendor contracts reviewed by Auditors do appear to include written assurances of “nondiscrimination in programs and activities receiving federal or state financial assistance” (Div. 21-103.5) and of “compliance with all nondiscrimination laws, regulations, instructions, policies and guidelines” (FNS Instructions 113-1 (Chap. X(A))). However, Auditors did not observe the additional required assurance in these contracts

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.” FNS Instructions 113-1, Ch. X(B).

(Separately, CDSS notes that the County also submitted 4 additional vendor contracts with fully executed VACS (signed in late September 2022) as attachments to its CRCP. As noted above, however, inclusion of the VACS is not part of the County’s standard operating procedure; these were submitted solely as CRCP attachments, in keeping with the County’s reported historical practice.)

Corrective Action

13. Vendor Assurance of Compliance: Written assurances of nondiscrimination in programs and activities receiving federal or state financial assistance shall be required, and fully applies to all vendors, contractors, consultants and other providers of service. Div. 21-103.5. The County shall, as part of the CAP, develop and implement a plan to incorporate all required assurances in their vendor contracts, either by using the VAC statement or by revising its vendor contracts to include the above-referenced missing assurance. The County shall submit a copy of its plan, to include a timetable for full execution and a summary of completed steps, to CDSS.

X. COMMUNITY INPUT

Feedback was sought from community and advocate groups regarding County services. The following summarizes their observations and identifies issues that the County may address to improve their civil rights program.

Community Organizations’ Observations

Inadequate Language Services: Advocates report that County applicants/recipients with LEP have encountered language service problems that may contribute to delays and even denials of benefits and services, including:

- County staff leaving voicemail messages in English for applicants/recipients with LEP in the CalFresh, CalWORKs and CAPI programs;
- County staff conducting interviews in English with applicants/recipients with LEP;
- Individuals with LEP receiving written materials in English, including a CWS case in which the County provided a Statement of Position (SOP) in English with both a GEN 1365 and a letter in the individual’s primary language informing them they were responsible for finding their own interpreter for the SOP;
- Program applications available in English and Spanish only

Inadequate Services for Individuals with Disabilities: Advocates express concern about the following issues, which tend to disproportionately impact individuals with disabilities:

- The County's telephone system has long wait times, but it is sometimes the only option for applicants/recipients who are unable to come to an office to communicate with County staff;
- IHSS applicants who apply for services for their young children have been told by County staff that the children won't qualify due to their age, even when the staff have not performed an individualized eligibility determination;
- The County is not providing adequate ASL/deaf interpreter services for applicants/recipients, either for use during meetings with workers or for its Call Center and telephonic application process;
- The online application process may be the only available option for individuals whose disabilities pose obstacles to in-person office visits and telephone communication; however, applicants/recipients who lack computer skills report struggling to navigate the process;
- There is a persistent lack of awareness among SSI recipients, particularly those who are elderly, that they are eligible for CalFresh benefits, which may indicate insufficient outreach and communication by the County about this topic.

Myths Persist about "Public Charge": Individuals who are not U.S. citizens report concern and uncertainty about applying for CalFresh benefits, due to persistent lack of awareness that CalFresh is no longer considered to be a "public charge" program such that its benefits will not count against them when applying for a green card or citizenship. This issue, which may indicate insufficient and/or ineffective County outreach on this topic, tends to have a disproportionate negative impact on non-U.S. citizens and individuals with LEP.

Community Organizations' Suggestions for Improvement

Increased Outreach: Advocates encourage the County to expand its outreach about its programs and services to diverse populations with LEP, including in-person door-to-door outreach to better assist individuals in overcoming language and technological barriers that impede access to information and resources. Relatedly, advocates encourage the County to improve its CalFresh outreach to inform SSI recipients of their program eligibility and inform members of immigrant communities that CalFresh is not considered a "public charge" benefit.

Language Access Services: Advocates encourage the County to improve its language access services by using telephone interpreter services more effectively and by hiring additional bilingual staff, particularly for Family Resource Centers.

Website Accessibility: Advocates encourage the County to work with local advocacy organizations to improve its website accessibility for individuals with disabilities, including those who are Deaf or have hearing-related disabilities.

Promising Practices Identified by Community Organizations

Online Resources and Tools: Analysts report positively that the County's website allows current and prospective clients to select and view information on benefits and services in multiple languages. Advocates also express positive feedback about certain online tools such as LaterDocs, which allows for secure electronic submission of verification documentation.

Outreach to Underserved Communities: Advocates report that the County makes forms and flyers about its programs and services available in multiple languages. Advocates also report that the County both collects data to analyze underserved populations and has located certain office in underserved communities, which promotes access to, and communication with, residents of those areas. Multiple advocates also identify the County's Live Well on Wheels (LiveWoW) bus as an effective means of facilitating outreach to, and access by, members of these communities.

XI. CIVIL RIGHTS COMPLIANCE PLAN REVIEW AND APPROVAL

The San Diego County Health and Human Services Agency Civil Rights Compliance Plan (CRCP) was received on October 3, 2022. Thank you for submitting your agency's CRCP.

Corrective Action

14. Before approving the CRCP, we request the following augmentations:

- **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 with 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 “San Diego County demographic information has not changed significantly from 2018 report data, except in the area of refugee populations” and “Afghanistan has displaced Iraq as the leading country of origin for San Diego refugees,” followed by Syria and Haiti.

(CRCP Section III; Attachment D) The CRCP does not specifically describe how this shift in refugee populations (including what appears to be a significant increase in number of refugee arrivals) affects the County's services, policies or procedures. As part of the CAP, the County shall revise Section III to include this information, including a description of 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 evolving language services needs of applicants/recipients from those communities.

- **Section VII (“County Services Provided by Contractors, Subcontractors, Vendors”):** The CRCP provides some but not all information requested by the CRCP Guidelines. As part of the CAP, the County shall provide a description of monitoring procedures used to ensure nondiscrimination and facilities accessibility by contractors. (See Guidelines Sec. VII, Item 2.)
- **Section VIII (“Primary Language Data Statistics, Staffing and Hiring Goals”):** The County shall, as part of the CAP, make such revisions to this section (and/or Section V) as are needed to resolve the internally inconsistent information and provide accurate, current information regarding whether Vietnamese is a threshold language. The County shall also revise Section VIII of the CRCP to include a description of its efforts to meet the hiring goals it has identified for bilingual certified staff in the programs and locations noted above in this Report.
- **Section X (“Accessibility of Offices”):** The CRCP provides some but not all information requested by the CRCP Guidelines. As part of the CAP, the County shall provide or explain its policy and procedure for ensuring that facility location determinations for new and relocated offices do not exclude individuals from its services or programs. (See Guidelines Sec. X(C).)

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, the revised Plan must reflect **all significant changes**, including those implemented based on required Corrective Action, to ensure that the information it contains is complete and up to date.

XII. CONCLUSION

The CDSS Reviewers found the San Diego County Health and Human Services Agency staff welcoming, informative, supportive, and receptive to new information and feedback. Particular thanks to Jennifer Campos for organizing the details of the Review, as well as to all members of the County civil rights leadership and program staff who assisted with all aspects of the Compliance Review process. County staff, including management, reflected a mission-driven 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 requested.

APPENDIX 1: 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 14% 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 79% 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 60% 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 79% of surveyed staff