



CDSS

WILL LIGHTBOURNE  
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**  
744 P Street • Sacramento, CA 95814 • [www.cdss.ca.gov](http://www.cdss.ca.gov)



EDMUND G. BROWN JR.  
GOVERNOR

April 30, 2012

Nick Macchione, Director  
Health & Human Services Agency  
San Diego County Health & Human Services Agency  
1600 Pacific Highway, Rm 206, MS P501  
San Diego, CA 92101

Dear Mr. Macchione:

This letter is to advise you that the Corrective Action Plan you submitted on November 29, 2011, in response to the results of our June 6-9, 2011, Civil Rights Compliance Review is approved.

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

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

Sincerely,

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

Enclosure

c: Lora Guillen, Civil Rights Coordinator

Linda Patterson, Branch Chief  
CDSS CalFresh Program M.S

Mike Papin, Chief  
CalFresh Policy Bureau

Marlene Fleming, Chief  
Field Operations Bureau

Brian Tam, Chief  
CalFresh Management Operations Section

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

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

Jodie Berger, Regional Counsel  
Legal Services of Northern California



# County of San Diego

HEALTH AND HUMAN SERVICES AGENCY

NICK MACCHIONE, FACHE  
DIRECTOR

DALE R. FLEMING  
STRATEGIC PLANNING &  
OPERATIONAL SUPPORT  
DIRECTOR

STRATEGIC PLANNING & OPERATIONAL SUPPORT DIVISION  
1600 PACIFIC HIGHWAY, SAN DIEGO, CA 92101-2417  
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November 29, 2011

Jim Tashima, Chief  
Civil Rights Bureau  
California Department of Social Services  
744 P Street, M.S. 8-16-70  
Sacramento, CA 95814

Dear Mr. Tashima:

In response to your letter dated September 30, 2011, the County of San Diego, Health and Human Services Agency (HHSA) has developed the enclosed *Corrective Action Plan* which addresses deficiencies found during the Civil Rights Compliance Review completed by your staff in June, 2011.

Please contact Lora Guillen at (619) 338-2954 if you have any questions or need further information.

Sincerely,

A handwritten signature in black ink, appearing to read "SMELELA".

SYLVIA MELENA, Assistant Deputy Director  
Strategic Planning & Operational Support

Enclosures

SM: lg

cc: Nick Macchione, MS, MPH, FACHE, Director  
Dean Arabatzis, Chief Operations Officer  
Dale R. Fleming, Director

**Health and Human Services Agency – County of San Diego  
Corrective Action Plan for Civil Rights Compliance Review – June 6-9, 2011**

**III. DISSEMINATION OF INFORMATION**

Counties are required to disseminate information about program or program changes and about how applicants and recipients are protected by the CDSS regulations (Division 21). This dissemination should occur through outreach and information to all applicants, recipients, community organizations, and other interested persons, including non- and limited-English speakers and those with impaired hearing or vision or other disabling conditions.

Informational Element	Findings	Corrective Action Required	Status Update
1. Directional Signage	At the Escondido Office there was signage regarding "Registered Dogs" which needs to be translated into threshold language.	HHSA shall ensure that instructional and directional signs are posted in waiting areas and other places that are frequented by clients and that where such areas are frequented by a substantial number of non-English speaking clients, such signage shall be translated into appropriate languages. Div. 21-107.212 and .24	Completed June 2011.
2. Access to Services	The CDSS Civil Rights Bureau (CRB) has noticed that San Diego County HHSA clients are not able to get through to the ACCESS Call Center due to the high volume of calls. Months prior to this compliance review CRB was receiving telephone complaints (approx. 8-10 per day) from San Diego County clients. Clients were frustrated that they were unable to get through to speak to a worker after repeated attempts throughout the day.	At the beginning of 2011, the County of San Diego launched an innovative partnership with the local 2-1-1 agency that allows them to answer general information phone calls received at ACCESS. To date, they have taken 99,825 calls. We continue to work with them to expand and improve upon this partnership.	We are currently in the process of implementing improvements to our self-service options, which we anticipate will increase customers' ability to make simple changes or request information without the assistance of a call agent. Target date for implementation is February 2012. Additionally, we are in the process of hiring additional staff to support the call center operations.

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**III. DISSEMINATION OF INFORMATION**

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Informational Element	Findings	Corrective Action Required	Status Update
<p>2. Access to Services, continued</p>	<p>During the week of this review, the reviewer also tested the ACCESS call center by attempting to call starting on Monday at various times of the day with little success getting through. Out of multiple attempts the reviewer was only successful getting through two times (once, in the early morning hour and late evening).</p>		<p>The County of San Diego has engaged an independent expert consultant to assess the current system, including the role of the ACCESS Customer Service Center, to identify opportunities to improve the customer experience. A primary goal of the assessment is to identify strategies to improve telephone and email access for our customers, and to reduce the wait time once they are in the system. The preliminary assessment is expected in December 2011 with the strategy and plan recommendations expected by February 2012.</p>

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**IV. FACILITY ACCESSIBILITY FOR INDIVIDUALS WITH DISABILITIES**

The county must ensure that programs and activities are readily accessible to individuals with disabilities. This includes building accessibility and availability of accessible parking as well as accessibility of public telephones and restrooms.

**Findings and Corrective Actions**

**1. Facility Location: 620 East Valley Parkway, Escondido**

Facility Element	Findings	Corrective Action	Status Update
<p><b>Parking</b></p>	<p>1. This facility has a large shared parking lot. There are accessible parking spaces found throughout the parking lot.</p> <ul style="list-style-type: none"> <li>• One of the accessible parking spaces near the main entrance does not have a freestanding accessible sign.</li> </ul> <p>2. In the same parking lot there are two accessible spaces located in front of the Public Health Office and findings are listed below.</p> <p>Measurements do not meet requirements:</p> <ul style="list-style-type: none"> <li>• Length is too short at 17' 1".</li> <li>• Access aisle is too narrow at 7'9" width.</li> <li>• Height of freestanding sign is 78".</li> </ul>	<p>Each parking space for persons with disabilities shall be identified by a reflectorized sign permanently posted adjacent to and visible from each stall or space, consisting of the International Symbol of Accessibility (ISA) in white on dark blue background.</p> <p>The sign shall be 70 sp. in. min. and, when in a path of travel, shall be posted at a height of 80" min. from the bottom of the sign to the finished grade. (CA T24 1129B.) (ADA4.6.4) p133.Length of parking space shall be at least 18' long, 9' wide. (CA T24 11298.3.1, ADA 4.6.3) p 135.</p> <p>Access aisles should be located on the passenger side of a space, and should be a min. of 18' long by 5" wide for aisles, serving car accessible spaces, and a min. 18' by 8' wide for aisles serving van accessible spaces. (CA T24 11298.3.1) (ADA 4.6.3).</p> <p>When in a path of travel, shall be posted at a height of 80" min. from the bottom of the sign to the finished grade. (CA T24) 11298.) (ADA4.6.4) p 133.</p>	<p>Estimated date of completion is June 2012.</p> <p>Estimated date of completion is June 2012.</p>

**Health and Human Services Agency – County of San Diego  
Corrective Action Plan for Civil Rights Compliance Review – June 6-9, 2011**

**1. Facility Location: 620 East Valley Parkway, Escondido, continued**

Facility Element	Findings	Corrective Action	Status Update
Parking, Continued	<p>3. Directly across from the Public Health Office, there is another accessible space and the findings are as follows:</p> <ul style="list-style-type: none"> <li>• Length is too short at 17'.</li> <li>• Access aisle is to narrow at 7'9" width.</li> </ul> <p>4. And in the far corner near the street, there is another accessible space. The findings are as follows:</p> <ul style="list-style-type: none"> <li>• The signage on pavement needs to be repainted.</li> </ul>	<p>Length of parking space shall be at least 18' long, 9' wide. (CA T24 11298.3.1, ADA 4.6.3) p 135.</p> <p>Access aisles should be located on the passenger side of a space, and should be a min. of 18' long by 5" wide for aisles, serving car accessible spaces, and a min. 18' by 8' wide for aisles serving van accessible spaces. (CA T24 11298.3.1) (ADA 4.6.3).</p> <p>The surface of each accessible parking stall or space must have a surface identification duplicating either of the following schemes:</p> <p>By outlining or painting the stall or space in blue and outlining on the ground in the stall or space in white or suitable contrasting color a profile view depicting a wheelchair with occupant;</p> <p><u>OR</u></p> <p>By outlining a profile view or a wheelchair with occupant in white on blue background. The profile view shall be located so that it is visible to a traffic enforcement officer when a vehicle is properly parked in the space and shall be 36" by 36".</p>	<p>Estimated date of completion is June 2012.</p> <p>Estimated date of completion is June 2012.</p>
	<p>5. No "Minimum Fine \$250" signage below the ISA sign.</p> <p>6. The access aisle does not have the words "No Parking" painted on the pavement.</p>	<p>For both posted and wall mounted signage, additional language on symbol sign and an additional sign below the symbol sign shall state "Minimum Fine \$250.00." (CA T24 1129B.4.1) p 133.</p> <p>The words "NO PARKING" shall be painted on the ground in each 5' or 8' loading and unloading access aisle in white letters no smaller than 12". (CA T24 1129B.3.2) p 135.</p>	<p>Completed July 2011.</p> <p>Estimated date of completion is June 2012.</p>

**Health and Human Services Agency – County of San Diego  
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**1. Facility Location: 620 East Valley Parkway, Escondido, continued**

Facility Element	Findings	Corrective Action	Status Update
Main Entrance	1. The ramp slope in front of main entrance is too steep near the top landing at 8.7% -10.9%.	Slope of ramp does not exceed 1:12 (8.3% slope). (CA T24 1127B.5.3, ADA 4.8.2) p 155.	Estimated date of completion is June 2012.
Lobby— Instructional and/or directional signage	1. At the Escondido Office there was signage regarding "Registered Dogs" which needs to be translated into threshold language.	All instructional and directional signs posted in waiting areas and other places frequented by a substantial number of non- English-speaking applicants/recipients shall be translated into appropriate languages. Such signs, or an additional sign, shall state that applicants/recipients may request aid or services in their primary language. (Div 21-107.212).	Completed June 2011.
Water Fountain	1. Fountain spout is too high at 37".	The spout is located within 6" of the front edge and 36" of the floor. The water stream is parallel to the front edge of the fountain. (CA T24 1117B.1.4, ADA 4.15.3) p 233.	Completed July 2011.
Men's Restroom	1. Accessible wall sign is too high at 64". 2. Force to open door is excessive at 6 lbs.	Door sign and wall sign shall be 60" above the floor to the center line of sign. Force to open doors, exterior and interior is 5 pounds maximum. (CA T24 11338.2.5, ADA 4.13.11 (2)(a) & (b)) p 207.	Estimated date of completion is December 2011. Estimated date of completion is December 2011.
Women's Restroom	1. Accessible wall sign is too high at 64".	Door sign and wall sign shall be 60" above the floor to the center line of sign.	Estimated date of completion is December 2011.

**2. Facility Location: 5560 Overland Ave, Suite 300, San Diego**

Facility Element	Findings	Corrective Action	Status Update
Unisex Restroom	1. Force to open door is excessive at 15 lbs. 2. Toilet Sheet Protector is too high at 43".	Force to open doors, exterior and interior is 5 pounds maximum. (CA T24 1133B.2.5, ADA4.13.11 (2)(a) & (b)) p 207. If towel, sanitary napkins, waste receptacles, and other similar dispensing and disposal fixtures are provided, at least one of each type is located with all operable parts, including coin slots, at a maximum height of 40". (CA T24 1115B.8.3, ADA 4.23.7) p 294	Completed October 2011. Completed October 2011.



**Health and Human Services Agency – County of San Diego  
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**3. Facility Location: 7065 Broadway, Lemon Grove**

Facility Element	Findings	Corrective Action	Status Update
<b>Parking</b>	1. No directional signage to accessible spaces.	A sign with the international symbol of accessibility shall be at every primary entrance and every major junction indicating the direction along or to accessible features. (CA T24 1127B.3, ADA 1.3(16B), CA T24 1117B.5.1) pp 186, 394.	Estimated date of completion is January 2012.
	2. Accessible parking space access aisle are too narrow at 4'10".	Access aisles should be located on the passenger side of a space, and should be a min. of 18' long by 5" wide for aisles, serving car accessible spaces, and a min. 18' by 8' wide for aisles serving van accessible spaces. (CA T24 1129B.3.1) (ADA 4.6.3).	Estimated date of completion is January 2012.
	3. Accessible path of travel starts with a down slope ramp which is too steep which was between 11.4%-12.1%.	Slope of curb ramp does not exceed 1:12 (8.3% slope). (CA T24 1127B.5.3, ADA 4.8.2) p 155.	In consultation with CDSS, will provide plans for corrective action on this item by January 2012.
	4. Ramp is too narrow at 46" beginning at the second section of ramp.	The width of ramps is as required for stairways and exits. Pedestrian ramps have a minimum width of 48". (CA T24 1133B.5.2.) p 144.	In consultation with CDSS, will provide plans for corrective action on this item by January 2012.
<b>Main Entrance</b>	1. No accessible signage; International Symbol of Accessibility (ISA) posted on main entrance.	A sign with the international symbol of accessibility shall be at every primary entrance and every major junction indicating the direction along or to accessible features. (CA T24 1127B.3, ADA 4.1.3(16B), CA T24 1117B.5.1) pp 186,394.	Estimated date of completion is January 2012.
	2. Force to open door is excessive at 19 lbs.	Force to open doors, exterior and interior is 5 pounds maximum. (CA T24 11338.2.5, ADA4.13.11(2)(a) & (b)) p 207.	Estimated date of completion is January 2012.
<b>Men's Restroom</b>	1. Accessible signage on door is too high at 64".	Door sign and wall sign shall be 60" above the floor to the center line of sign.	Estimated date of completion is January 2012.
	2. Force to open door is excessive at 10 lbs.	Force to open doors, exterior and interior is 5 pounds maximum. (CA T24 11338.2.5, ADA4.13.11(2)(a) & (b)) p 207	Estimated date of completion is January 2012.
	3. Pipes under sink are not insulated or covered.	Hot water and drain pipes are insulated or covered. No sharp or abrasive surfaces under lavatories. (CA T24 11158.4.7.1, ADA 4.24.6) p 343.	Estimated date of completion is January 2012.

**Health and Human Services Agency – County of San Diego  
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**3. Facility Location: 7065 Broadway, Lemon Grove, continued**

<b>Facility Element</b>	<b>Findings</b>	<b>Corrective Action</b>	<b>Status Update</b>
<b>Women's Restroom</b>	1. Accessible signage on door is too high at 66".	Door sign and wall sign shall be 60" above the floor to the center line of sign.	Estimated date of completion is January 2012.
	2. Force to open door is excessive at 14 lbs.	Force to open doors, exterior and interior is 5 pounds maximum. (CA T24 11338.2.5, ADA 4.13.11(2)(a) & (b)) p 207.	Estimated date of completion is January 2012.
	3. Pipes under sink are not insulated or covered.	Hot water and drain pipes are insulated or covered. No sharp or abrasive surfaces under lavatories. (CA T24 11158.4.7.1, ADA 4.24.6) p 343.	Estimated date of completion is January 2012.
	4. Soap dispenser is too high at 43".	If towel, sanitary napkins, waste receptacles, and other similar dispensing and disposal fixtures are provided, at least one of each type is located with all operable parts, including coin slots, at a maximum height of 40". (CA T241158.8.3, ADA 4.23.7) p 294.	Estimated date of completion is January 2012.

**4. Facility Location: 4588 Market Street, San Diego**

<b>Facility Element</b>	<b>Findings</b>	<b>Corrective Action</b>	<b>Status Update</b>
<b>Parking</b>	1. Freestanding accessible sign is too low at 69".	When in a path of travel, sign shall be posted at a height of 80" min. from the bottom of the sign to the finished grade. (CA T24 11298.4) (ADA 4.6.4).	Estimated date of completion is December 2011.
	2. Van accessible access aisle is too narrow at 77".	Access aisles should be located on the passenger side of a space, and should be a min. of 18' long by 5" wide for aisles, serving car accessible spaces, and a min. 18' by 8' wide for aisles serving van accessible spaces. (CA T24 11298.3.1) (ADA 4.6.3).	Estimated date of completion is December 2011.
	3. Ramp slope is uneven in levels, measuring between 8.7% -11.7%.	Slope of ramp does not exceed 1:12 (8.3% slope). (CA T24 11278.5.3, ADA 4.8.2) p 155.	Estimated date of completion is February 2012.

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**4. Facility Location: 4588 Market Street, San Diego, continued**

Facility Element	Findings	Corrective Action	Status Update
<b>Main Entrance</b>	<ol style="list-style-type: none"> <li>1. Force to open door is excessive at 9 lbs.</li> <li>2. Interior accessible route is too narrow and crowded.</li> </ol>	<p>Force to open doors, exterior and interior is 5 pounds maximum. (CA T24 11338.2.5, ADA 4.13.11(2)(a) &amp; (b)) p 207.</p> <p>Wheelchair passage width: minimum clear width required for a single wheelchair is 32" at a point (e.g., at a door); and continuous length is 36" (at a corridor). (CA T24 11188.1, ADA 4.2.1) p 210.</p> <p>Height of accessible tables or counters is between 28" - 34" from floor finish. (CA T24 11228.4, ADA 4.32.4) p 388.</p>	<p>Estimated date of completion is December 2011.</p> <p>Estimated date of completion is December 2011.</p> <p>Estimated date of completion is January 2012.</p>
<b>Client Lobby</b>	<ol style="list-style-type: none"> <li>1. Lobby counter is too high at 39".</li> </ol>	<p>Door sign and wall sign shall be 60" above the floor to the center line of sign.</p>	<p>Completed November 2011.</p>
<b>Men's Restroom</b>	<ol style="list-style-type: none"> <li>1. Accessible door signage is too low at 57". Also, there is no accessible wall sign.</li> </ol>	<p>For permanent identification, the sign shall be installed on the wall adjacent to latch outside of door. If there is no space, including at double leaf doors, the sign shall be placed on nearest adjacent wall, preferably on the right. (CA T24 1117B.5.7, ADA 4.30.6) p 281.</p> <p>Raised characters shall be raised 1/32" minimum and shall be Sans Serif upper case characters accompanied by Grade 2 Braille. (CA T24 1117B.5.5.1, ADA 4.30.4) p 282.</p>	
	<ol style="list-style-type: none"> <li>2. Mirror base is too high at 49".</li> </ol>	<p>Mirrors located above accessible lavatories shall be mounted with the bottom edge of the reflecting surface no higher than 40" above finish floor or ground. (This is also applicable to mirrors above countertops). (CA T24 1115B.8.1.1) (ADA 4.19.6) p 299.</p>	<p>Estimated date of completion is December 2011.</p>
	<ol style="list-style-type: none"> <li>3. Paper towel dispenser and toilet sheet protector are too high at 50".</li> </ol>	<p>If towel, sanitary napkins, waste receptacles, and other similar dispensing and disposal fixtures are provided, at least one of each type is located with all operable parts, including coin slots, at a maximum height of 40". (CA T24 1115B.8.3, ADA 4.23.7) p 294.</p>	<p>Estimated date of completion is December 2011.</p>

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**4. Facility Location: 4588 Market Street, San Diego, continued**

Facility Element	Findings	Corrective Action	Status Update
Men's Restroom, continued	4. Grab bars in accessible stall are too high at 37".	The height of grab bar is 33" above and parallel to floor except that where a tank-type toilet used obstructs the 33" placement, the grab bar may be as high as 36". Grab bar is securely attached. (CA T24 11158.4.1.3(3.2), ADA 4.17.6 and CA T24 1115 B. 7.1, ADA 4.26.2) p 298.	Estimated date of completion is December 2011.
Women's Restroom	1. Accessible door signage is too low at 58" and wall sign is too low at 57".	Door sign and wall sign shall be 60" above the floor to the center of the line.	Estimated date of completion is December 2011.
	2. Mirror base is too high at 49".	Mirrors located above accessible lavatories shall be mounted with the bottom edge of the reflecting surface no higher than 40" above finish floor or ground. (This is also applicable to mirrors above countertops). (CA T24 11158.8.1.1) (ADA 4.19.6) p 299.	Estimated date of completion is December 2011.
	3. Paper towel dispenser is too high at 45" and hand dryer is too high at 52".	If towel, sanitary napkins, waste receptacles, and other similar dispensing and disposal fixtures are provided, at least one of each type is located with all operable parts, including coin slots, at a maximum height of 40". (CA T24 11158.8.3, ADA 4.23.7) P 294.	Estimated date of completion is December 2011.

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**V. PROVISION FOR SERVICES TO APPLICANTS AND RECIPIENTS WHO ARE NON-ENGLISH-SPEAKING OR WHO HAVE DISABILITIES**

Counties are required by Division 21 to ensure that effective bilingual interpretive services are provided to serve the needs of the non-English-speaking population and individuals with disabilities without undue delays. Counties are required to collect data on primary language and ethnic origin of applicants/recipients (identification of primary language must be done by the applicant/recipient).

Informational Elements	Findings	Corrective Action Required	Status Update
<ol style="list-style-type: none"> <li>1. Effective Services</li> <li>2. Timely Services</li> <li>3. Interpreter Services</li> <li>4. Auxiliary Aids</li> </ol>	<p>At the Southeast FRC in some of the cases reviewed, there were a couple of cases that the appointment had to be rescheduled due to no ASL interpreter available. Once of the cases noted the client had made several attempts to receive benefits and became upset due to being rescheduled because no ASL interpreter was available.</p>	<p>HHSA 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</p> <p>HHSA must ensure that bilingual/interpretive services are prompt and without undue delay. Div.21-115</p> <p>HHSA must offer and provide free interpreter services using qualified interpreters. Div. 21-104q(1) and 21-115</p> <p>HHSA 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</p>	<p>Policy regarding the timely provision of interpretive services/auxiliary aids has been in place since June 2004 and is located in the Program Guide <u>CPG 21-100 Civil Rights</u>.</p> <p>Southeast FRC will provide Civil Rights refresher training to staff by December 2011.</p> <p>CR processes are also discussed at quarterly CRL meetings and reminders are provided through CR handouts and trainings.</p>

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**VI. DOCUMENTATION OF APPLICANT/RECIPIENT CASE RECORDS**

Counties are required to ensure that case records document applicant's/recipient's ethnic origin and primary language, the method used to provide bilingual services, information that identifies an applicant/recipient as disabled, and an applicant's/recipient's request for auxiliary aids and services.

<b>Informational Element</b>	<b>Findings</b>	<b>Corrective Action Required</b>	<b>Status Update</b>
1. Documentation that Interpretive Services were Provided	At the Southeast FRC there were a higher number of cases that did not have documentation of how interpretive services were being provided.	Document the method used to provide bilingual services, e.g., assigned worker is bilingual, other bilingual employee acted as interpreter, volunteer interpreter was used, or client provided interpreter. Div. 21-116.22 (ACL 08-65).	Policy regarding the documentation of interpretive services has been in place since June 2004 and is located in the Program Guide CPG 21-100 <u>Civil Rights</u> .  Southeast FRC will provide Civil Rights refresher training to staff by December 2011.  CR processes are also discussed at quarterly CRL meetings and reminders are provided through CR handouts and trainings.

**VIII. DISCRIMINATION COMPLAINT PROCEDURES**

Counties are required to maintain a process for addressing all complaints of discrimination. They must track complaints of discrimination through the use of a control log in which all relevant information is kept, including when the complaint was received, the name of the complainant, identifying numbers and programs, basis of discrimination, and resolution. It is usually the Civil Rights Coordinator responsibility to maintain this log.

<b>Informational Element</b>	<b>Findings</b>	<b>Corrective Action</b>	<b>Status Update</b>
Discrimination Process	There were three staff that were interviewed who were not able to differentiate between the three types of complaints:  1. Discrimination, 2. Program and 3. Personnel.	HSA shall ensure staff have knowledge of the discrimination complaint process and are able to differentiate it from other complaint processes. Div. 21-117 and 21-203.	Policy regarding discrimination complaint processes, including differentiating between types of complaints has been in place since June 2004 and is located in the Program Guide CPG 21-100 <u>Civil Rights</u> .  Civil Rights refresher training will be provided to staff by February 2012.  CR processes are also discussed at quarterly CRL meetings and reminders are provided through CR handouts and trainings.