



CDSS

WILL LIGHTBOURNE  
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**  
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EDMUND G. BROWN JR.  
GOVERNOR

July 12, 2012

Jerry Dunn, Interim Director  
Sonoma County Human Services Department  
P.O. Box 1539  
Santa Rosa 95402-1539

Dear Mr. Dunn:

This letter is to advise you that the Corrective Action Plan that former Director Jo Weber submitted on June 7, 2011 in response to the results of our March 14-16, 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 your Civil Rights Bureau Point of Contact, Tiffany Marsh, at (916) 651-6242. You may also contact your consultant by e-mail at [Tiffany.Marsh@dss.ca.gov](mailto:Tiffany.Marsh@dss.ca.gov).

Sincerely,

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

c: Roy Redlich, Civil Rights Coordinator

Linda Patterson, Branch Chief  
CDSS CalFresh Program

Mike Papin, Chief  
CalFresh Policy Bureau

Marlene Fleming, Chief  
Field Operations Bureau

Brian Tam, Chief  
CalFresh Management Operations Section

Paul Gardes  
CalFresh Policy Bureau

Thuan Nguyen  
Refugee Programs Bureau

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  
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Jodie Berger, Regional Counsel  
Legal Services of Northern California



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COUNTY OF SONOMA



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June 7, 2011

Mr. Jim Tashima, Chief  
California Department of Social Services  
Civil Rights Bureau  
P.O. Box 944243, M/S 8-16-70  
Sacramento, CA 95814

Dear Mr. Tashima:

Enclosed is the corrective action plan developed by the Sonoma County Human Services Department in response to the Civil Rights Compliance Review conducted by Ms. Mary Rockwood of your staff on March 14-16, 2011.

Each of the required corrective actions and recommendations are described in the body of the report, including the person or entity responsible for the action and a timeline for completion.

If you require additional information or need any clarification, please contact Kiergan Pegg, Civil Rights Coordinator, at (707) 565-5858 or [kpegg@schsd.org](mailto:kpegg@schsd.org).

Respectfully,

A handwritten signature in black ink that reads "Jo Weber".

Jo Weber  
Director

JW/kp

enclosure

JUN 13 2011

**Human Services Department**  
COUNTY OF SONOMA



*"Empower, Support, Protect"*

**CIVIL RIGHTS COMPLIANCE  
REVIEW**

**CORRECTIVE ACTION PLAN**

June 7, 2011

**SONOMA COUNTY HUMAN SERVICES DEPARTMENT  
CIVIL RIGHTS COMPLIANCE REVIEW  
CORRECTIVE ACTION PLAN**

**June 7, 2011**

**I. INTRODUCTION**

The purpose of this report is to convey a corrective action plan that incorporates each element cited in the March 2011 civil rights compliance review and defines corrective actions and time frames for completion.

Only those sections of the Compliance Review which indicated that corrective actions are needed are included below. Therefore, although the following numerals or numbers may appear to be out of sequence, they are following the order of corrective actions identified in the Compliance Review.

The Sonoma County Human Services Department is referred to throughout this report as “the Department”.

**III. DISSEMINATION OF INFORMATION**

**Corrective Actions:**

1. **The required posters must be displayed at the Mendocino site. (Missing was the Form AD 475B “And Justice for All”).**

The poster AD 475B “And Justice for All” was posted in the reception area of the Mendocino site on May 11, 2011.

**Recommendations**

1. **Distribution of Publication 13 Interviews with staff showed that staff may be automatically providing the English pamphlets to all clients who were not Spanish speaking, regardless of what may be checked on the HSD 1259 Form. This practice may be a topic to be reviewed in the bi-annual civil rights training.**

A civil rights “Pop-up” message will be created by Civil Rights Investigator Steve Russell and sent to all staff in June 2011 reminding them of the correct practice. The pop-up will be added to the 12 monthly civil rights reminders to be delivered annually to all Sonoma County Human Services Department staff.

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

##### Corrective Actions:

1. **The signage designating accessible parking spaces at the Paulin Building was incomplete. An additional sign below the international symbol of accessibility sign shall state "Minimum Fine \$250.00". (CA T24 1129B.4.1)**

Judith Merrin, the Department's Facilities Coordinator, is working with the County's Facility Operations Division to purchase and install the correct signage. The estimated completion date for correction of this deficiency is September 30, 2011.

2. **The pavement at the Paulin Building did not have a continuous smooth surface without cracks or changes in level. Movement of a wheelchair or crutches, walkers or foot traffic on the rough surface was viewed as unsafe. Walks and sidewalks (including passenger loading/unloading aisles connecting to the sidewalk) shall have a continuous surface and be slip resistant. (CA T24 1133B.&.1, ADA 4.3.8)**

Judith Merrin, the Department's Facilities Coordinator, is working with the County's Facility Operations Division to evaluate solutions that will correct this deficiency, including repaving or slurry sealing the rough pavement in the Paulin Building client parking lot. The estimated completion date for correction of this deficiency is March 31, 2012.

3. **A hand sanitizer is provided at the Paulin Building, but mounted too high (56" from the floor). If dispensing equipment is provided, at least one must be mounted so that all operable parts are at a maximum of 40" from the floor. CA T24 1115B.8.3; ADA 4.23.7)**

Judith Merrin, the Department's Facilities Coordinator, is working with the County's Facility Operations Division to relocate the dispensing equipment to the proper height to comply with the above cited regulations. The estimated completion date for correction of this deficiency is September 30, 2011.

4. **Recommendation: Door pressure at the Paulin Building measured for entrance to both the required men's and women's restroom reflected ongoing effort to maintain the required maximum door pressure for accessible facilities. Maintain ongoing maintenance. (Force to open doors, exterior and interior, shall be 5 pounds maximum [CA T24 1133B.2.5, ADA 4.13.11 (2)(a)&(b)]).**

Judith Merrin, the Department's Facilities Coordinator, is working with the County's Facility Operations Division to continue maintaining the door pressure through measurement and adjustment of door pressure at regular time intervals.

5. **Access to the Mendocino Avenue building requires travel up a ramp that measures in excess of 13 feet (two such ramps exist - one on each side of the entrance door). There were no hand rails installed for either ramp. Ramps longer than 6 feet must have hand railings on both sides. (CA T24 1133B.5.5.1, ADA 4.8.2) The handrails are to be mounted 34"-38" above the ramp with cross section of rails 1 ¼ - 1 ½ inches.**

Judith Merrin, the Department's Facilities Coordinator, is working with the facility's landlord to reach compliance with the handrail deficiency. The estimated completion date for correction of this deficiency is March 31, 2012.

6. **There was no signage (usually a door decal) at the Mendocino building designating the building as accessible. A sign with the international symbol of accessibility shall be at every primary entrance indicating accessibility. (CA T24 1127B.3, ADA 4.1.3).**

Judith Merrin, the Department's Facilities Coordinator, is working with the facility's landlord to obtain and install the correct door decal or placard designating the building as accessible. The estimated completion date for correction of this deficiency is July 1, 2012.

7. **The door pressure measured approximately 11 pounds for entry into the Menocino building. Force to open doors, exterior and interior, shall be 5 pounds maximum [CA T24 1133B.2.5, ADA 4.13.11 (2)(a) & (b)].**

Judith Merrin, the Department's Facilities Coordinator, is working with the facility's landlord to reduce the door pressure to the proper level. The estimated completion date for correction of this deficiency is September 30, 2011.

8. **A dispenser providing hand sanitizer at the Mendocino building was mounted on the wall 57" from the floor. When providing dispensing or disposal fixtures, at least one must be located with all operable parts at a maximum height of 40 inches. (CA T24 1115B.8.3, ADA 4.23.7).**

Judith Merrin, the Department's Facilities Coordinator, is working with the facility's landlord to relocate the dispensing equipment to the proper height to comply with the above cited regulations. The estimated completion date for correction of this deficiency is September 30, 2011.

9. **The restrooms at the Mendocino building can not currently be considered accessible. The restrooms are located in common area outside the HSD reception lobby with access to the locked restrooms requiring the use of a key (provided by the reception staff). The door, therefore, cannot be opened with a closed fist, but requires insertion and turning of a key in the lock. Accessible doors must be operable with a single effort (e.g., lever, panic bar, push/pull). (CA T24 1133B.2.5.2, ADA 4.13.9).**

Judith Merrin, the Department's Facilities Coordinator, is working with the facility's landlord to evaluate options to comply with the restroom accessibility requirements. The estimated completion date for correction of this deficiency is March 31, 2012.

10. **There was no wall signage at the Mendocino building for what has been designated as the accessible restroom facilities. In addition to the international symbol centered on doors at a height of 60" above the floor (CA T24 1115B.5), signage for gender identification shall be installed on the wall adjacent to the latch outside of the door. If there is no space, the sign shall be placed on the nearest adjacent wall, preferably on the right. (CAT241117B.5.7, ADA 4.30.6).**

Judith Merrin, the Department's Facilities Coordinator, is working with the facility's landlord to purchase and install wall signage designating the public restrooms as accessible, including proper gender identification signage. The estimated completion date for correction of this deficiency is March 31, 2012.

11. **Recommendation: Once inside the vestibule of the Mendocino building, individual men's & women's restrooms are provided. Door pressure for entry was reflective of efforts to maintain the 5 lb. maximum. Recommend ongoing monitoring to ensure accessibility.**

Judith Merrin, the Department's Facilities Coordinator, is working with the facility's landlord to continue maintaining the door pressure through measurement and adjustment of door pressure at regular time intervals.

12. **The length of the accessible parking spaces at the Copperhill Building did not meet the required 18'. Measurements reflected a range of 15 - 17 feet in length due largely to the interference of a concrete curb leveler. Length of parking spaces shall be at least 18' long and 9' wide. (CA T24 1129B.3.1, ADA 4.6.3).**

Judith Merrin, the Department's Facilities Coordinator, is planning the program's move to a new location. The move is currently scheduled for December 2011. The new facility will meet all ADA requirements.

13. **The signage designating accessible parking spaces at the Copperhill Building was not complete. An additional sign below the international symbol of accessibility sign shall state "Minimum Fine \$250.00". (CA T24 1129B.4.1).**

Judith Merrin, the Department's Facilities Coordinator, is planning the program's move to a new location. The move is currently scheduled for December 2011. The new facility will meet all ADA requirements.

14. **A dispenser providing hand sanitizer at Copperhill Building was mounted on the wall 49" from the floor. 1. When providing dispensing or disposal fixtures, at least one must be located with all operable parts at a maximum height of 40 inches. (CA T241115B.8.3, ADA 4.23.7).**

Judith Merrin, the Department's Facilities Coordinator, is planning the program's move to a new location. The move is currently scheduled for December 2011. The new facility will meet all ADA requirements.



15. **Door pressure to open restroom at Copperhill Building measured approximately 12 pounds. Force to open doors, exterior and interior, shall be 5 pounds maximum [CA T24 1133B.2.5, ADA 4.13.11 (2)(a) & (b)].**

Judith Merrin, the Department's Facilities Coordinator, is planning the program's move to a new location. The move is currently scheduled for December 2011. The new facility will meet all ADA requirements.

16. **The signage designating accessible parking spaces at the Zephyr Building was not complete. An additional sign below the international symbol of accessibility sign shall state "Minimum Fine \$250.00". (CA T24 1129B.4.1).**

Judith Merrin, the Department's Facilities Coordinator, is working with the facility's landlord to purchase and install the correct signage designating accessible parking spaces. The estimated completion date for correction of this deficiency is September 30, 2011.

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

### **Corrective Actions:**

1. **Documentation that bilingual services were provided. HSD must take measures to ensure that staff 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.**

During the course of the review, it was determined that case notes of the telephone center staff at the Mendocino site did not consistently include documentation of the method used to provide language services. The root cause of this was found to be the telephone menu option for clients to speak with Spanish speaking staff. The telephone system identifies to staff that a client has selected this option. Therefore, staff did not realize they still needed to document that language services were offered to clients and to document this in the case records.

Staff of the Mendocino site were immediately trained by Program Planning Analyst Monica Gomez, that all non-English speaking client interactions must still include documentation of language services offered. A review of case records since this training indicates Mendocino site staff are correctly documenting language services offered in the case records.

During the course of the review it was also determined that although the Special Investigations Unit is sufficiently staffed with bilingual (Spanish speaking) investigative and support staff, there is a lack of documentation in case notes that interviews and other related contacts are conducted in Spanish. While actual reports of investigation and notices of action do contain that information, the review found the case notes lacked this documentation

Bilingual staff was advised immediately by Chief Welfare Fraud Investigator Barbara Jenkins that all case notes must indicate that communication with clients and/or witnesses in a language other than English be documented as such. This process began immediately following our review with civil rights reviewer Mary Rockwood. Review of cases since implementing this correction indicates that Sonoma County is now in compliance with the reviewers recommendations.

Staff of the Family, Youth & Children's Division will be instructed verbally and in writing by Program Planning Analyst Francine Connor regarding the requirement for Div. 21-116.22 regulations. (See below). All supervisors will provide training at staff unit meetings to include: Div. 21-116.22 regulations regarding the documentation requirement for method of bilingual services provided and the requirement for the HSD 1259 "Language Preference and Auxiliary Aid Identification and Language Service Rights" (attached) for all clients. Supervisors will provide ongoing monitoring of documentation in case notes on CWS/CMS and the HSD 1259. Instruction and training to be concluded by June 30, 2011.

## **VII. STAFF DEVELOPMENT AND TRAINING**

### **Recommendations:**

- 1. Either through staff development or supervisory oversight focus needs to be directed to the case documentation by bilingual workers regarding language service they provide in the course of their casework (e.g., interpreter service).**

Supervisors will be instructed by Civil Rights Coordinator Kiergan Pegg to review with their staff in June 2011 the importance of documenting the language services they provide in the course of their casework. Special emphasis will be placed on documenting language services offered by bilingual workers in the telephone service center at the Mendocino site, where documentation was noted to be deficient.