
**ORANGE COUNTY SOCIAL SERVICES AGENCY
CFS OPERATIONS MANUAL**

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Client Rights

Purpose To provide guidelines for assuring the rights of Children and Family Services (CFS) clients as mandated by State and Federal civil rights laws and regulations.

Approved This policy was approved by Mike Ryan, Director of CFS, on July 7, 2010. *Signature on file.*

Background The California Department of Social Services (CDSS) requires county welfare departments and all other agencies receiving federal or state financial assistance to ensure that programs are nondiscriminatory and in compliance with the Title VI Civil Rights Act of 1964 as Amended.

Division 21 of the CDSS Manual of Policy and Procedures (MPP) provides the guidelines for agencies to use in meeting the requirements.

Legal Mandates

- [Title VI Civil Rights Act of 1964 As Amended](#)
- [CDSS-MPP, Division 21](#)
- [All County Letter \(ACL\) 03-56 dated October 29, 2003](#)
- [All County Information Notice \(ACIN\) I-09-06 dated February 17, 2006](#)
- [All County Information Notice I-08-87 dated February 4, 1987](#)
- [All County Letter 06-20 dated June 30, 2006](#)
- [All County Letter 01-28 dated May 4, 2001](#)
- [All County Information Notice I-02-08 dated January 22, 2008;](#)

Definitions

None.

POLICY

Civil Rights

Children and Family Services (CFS) is to provide services that are nondiscriminatory. No person will be denied the benefits of services or be subjected to discrimination in agency programs because of **race, color, national origin, political affiliation, religion, marital status, sex, age, disability, or sexual orientation**. This includes both direct and contracted services.

CFS will assure client rights by:

- A. Informing clients of their rights.
- B. Delivering services that are non-discriminatory.
- C. Documenting evidence of attention to client rights.
- D. Cooperating with monitoring or investigation activities by CDSS and the SSA Civil Rights Coordinator.
- E. Offering a complaint procedure to clients, per agency policy, who claim discrimination.

Informing Clients

Clients will be informed of their rights by provision of:

- A. Posters entitled "*Equal Under the Law*" (*PUB 86*) displayed in public waiting rooms and reception areas. This will include directives in multiple languages for non-English speaking clients to request services in their primary language.
- B. Pamphlets entitled "*Your Rights Under California Welfare Programs*" (*PUB 13*) available in waiting rooms, reception areas, and given to clients by social work staff:
 - 1. During emergency response visits.
 - 2. At investigation interviews.
 - 3. When a client makes a complaint of discrimination.

4. Whenever requested.

Foster Care Eligibility will also send *PUB 13* with approval notices to new placements and AAP/Kin-GAP recipients.

CDSS provides the above posters and pamphlets for CFS (*PUB 13* pamphlets can be requested from Central Operations and *PUB 86* posters are provided by the Civil Rights Coordinator). The pamphlets are available in 18 languages, large print English, Spanish, Vietnamese, and Russian, and audiotope in English, Spanish, and Vietnamese as well as Braille. The Braille translation is also available to CFS, upon request, through SSA Adult Services.

Photographs and illustrations used to provide agency program information to the public will display clients of different races, national origin, gender, disabilities, etc.

Delivery of Services

Provisions will be made for CFS clients who are non-English speaking, have visual or hearing impairments, or other disabilities.

A. **Non-English or limited-English speaking clients:**

This may be accomplished by:

1. Certified bilingual staff.
2. Certified county or contracted interpreter.
3. Non-SSA interpreter at the request of the client. Prior to clients using their own interpreter, however, staff are required to advise them of a) their right to request the Agency's free interpretive services at any time, b) the possibility of ineffective communication or inaccurate interpretation with their own interpreter, and c) the need to disclose private information to their interpreter.

Though clients may provide their own interpreters, the staff member may arrange for a certified county interpreter to assist if a conflict of interest or accuracy of the translation being provided is in question.

4. Child under the age of 18 years only under extenuating circumstances or at the specific request of the client. This should be on a temporary basis and used only until a county interpreter is made available. **Example:** An initial telephone or in-person contact indicates an interpreter is needed but not available immediately. A minor may be used to communicate the scheduling of an

appointment when an interpreter can be present.

5. Qualified employees of other agencies.
6. Use of community resources.

The client is to declare his primary/preferred language for both oral and written communication. If needed, the client may use the CDSS poster for identifying his language. CDSS also provides ["I Speak" cards](#) available through their website to help with this issue.

Clients are to be advised of their right to free interpretive services and provided an interpreter at each telephone and in-person contact. Staff should not conduct substantive, program-related conversations with the client until qualified interpretive services are available.

Forms and other written material required for services and made available by CDSS in the client's primary language will be offered to the client. When such forms and written material contain spaces in which staff insert information, the inserted information will also be in the client's primary language. [Translated forms](#) provided by CDSS may be obtained through their website, which is updated monthly.

B. Visually impaired clients:

This may be accomplished by:

1. Staff reading the needed documents.
2. Large-print material.
3. Brailled material.
4. Taped text.
5. Qualified interpreters.

C. Hearing impaired clients:

This may be accomplished by:

1. Sign language interpretation services.
2. Telecommunication devices for the deaf (TDD/TTY 916-654-2098 or collect by calling 800-688-4486).
3. California Relay Service (1-800-735-2929).

4. County language interpreters or other effective aids.

D. **Disabled clients:**

CFS will provide opportunity to clients with disabilities to request auxiliary aids or services of their choice. Staff is to give primary consideration to the requests of these individuals.

Volunteer services from community organizations and individuals may be used in providing prompt and effective services to avoid delays caused by the process of obtaining auxiliary aids or services.

Documentation Information and actions relative to the above policy are to be documented by CFS staff for non-English speaking, limited English proficiency, or disabled clients in the following:

A. **Child's Case File:**

1. Identification of the client's primary/preferred language or disability, documented at the initial contact, updated annually, and at any time the client requests a change in either their preferred oral or written language. *Language Assessment (F063-25-468)* may be used for this purpose.
2. That the non- or limited-English speaking client was offered free language services in their primary/preferred language for oral and written communication **and** whether the client accepted or refused the written material in his language. This is to be documented at initial contact and updated annually or as needed, e.g., "client offered free interpretive services/accepted."
3. The language provided and who provided the language services, documented at the initial contact and updated annually or as needed, e.g., "conducted in Vietnamese by bilingual SSW (name)."
4. The extenuating circumstances if temporary use of a minor interpreter was necessary, documented at each occurrence.

5. That the client requesting a non-SSA interpreter was informed of potential problems for ineffective or inaccurate communication, documented at initial occurrence, and updated annually.
6. That the client and non-SSA interpreter signed a *Certification of Confidentiality—Non-SSA Interpreter (F063-02-217)*, agreeing to keep information confidential. The document/signature will be obtained at initial use of that interpreter. Once signed, it will serve as documentation throughout the case, unless the client changes their non-SSA interpreter.
7. That free county interpreter services were offered even when the client self-selected their own interpreter, documented at the first occurrence and updated annually.
8. The client's need for auxiliary aids due to a disability and how the need was accommodated, documented at the initial contact, and updated annually.
9. Any of the above information relevant to the child's case, included in the transfer summary, when case is transferred.

B. **Forms:**

Forms are available for staff to record and document client rights were given:

1. *Certification of Confidentiality—Non-SSA Interpreter (F063-02-217)* is used to document confidentiality and release of information for the child's file when the client selects their own interpreter. It can also be used to document the reason a minor under 18 is used as the interpreter. This form is available in English, Spanish, and Vietnamese languages.
2. *Language Assessment (F063-25-468)* is used to document the client's language and actions taken to provide services in the primary language.

C. **CWS/CMS:**

Entries to be made in CWS/CMS include:

1. Primary language in Client Management Section, Existing Clients notebook, ID page. Choose correct language from drop down menu.
2. Ethnicity in Client Management Section, Existing Clients notebook, ID page. Choose correct ethnicity from drop down menu.
3. Receipt of *Pub 13* pamphlet in Placement Management Section, Existing Placement notebook, Child Removal page. Check appropriate box, "Notified of Civil Rights."
4. Offering of Translated Forms and Other Publications in client's primary language and disability in case contact narratives.
5. Offering of interpretive services, if client accepted or refused, who provided services, and what language used in case contact narrative.

D. **Court Reports:**

Statements are also to be included in court reports, providing information regarding a client's primary language, impairments or disabilities.

**Monitoring
Client Rights**

The SSA Civil Rights Coordinator:

- A. Monitors and facilitates compliance with Division 21 regulations.
- B. Completes an annual Civil Rights Plan for Orange County.
- C. Provides support and training to agency staff.
- D. Receives and investigates discrimination complaints against SSA employees, practices and contract service providers.
- E. Maintains complaint records for a minimum of three years.

Additionally, CDSS conducts annual reviews and oversees complaint investigations. CDSS may interview CFS staff for this purpose.

Complaints

When a client has a complaint of discrimination, CFS staff will:

- A. Provide the complaint form, *Discrimination Complaint (F063-07-80)*. However, a complaint may be accepted in any form. The complaint form will be provided in the client's primary language whenever possible. Check [CDSS website](#) for non-English translation if unavailable in [CFS Online Forms Room](#). Inform client to file the complaint within 180 days of the alleged discriminatory act.
- B. Advise client that they may file the complaint directly with Program Integrity–Orange County, CDSS, or the U.S. Department of Health and Human Services.
- C. Provide the address and phone number of the departments as needed:

County:

Program Integrity/GRH – Bldg. A/B
1928 S. Grand Avenue
Santa Ana, CA 92705-4902
(P. O. Box 22001, Santa Ana, CA 92702-2001)
Phone: (714) 435-6611
(This information is on all posters)

State:

California Department of Social Services
Civil Rights Bureau
744 P Street, M.S. 15-70
Sacramento, CA 95814

Federal:

U.S. Department of Health and Human Services
Office of Civil Rights
50 U. N. Plaza, Suite 322
San Francisco, CA 94102

- D. Assist the client with completion of the form, if requested, **or** if the complaint is received by telephone. If staff is taking the complaint by telephone, a copy of the completed *Discrimination Complaint* and *PUB 13* will be mailed to the client for their records.
- E. Forward the completed form to Program Integrity, Bldg. #180, if completing the form for the client, and inform client that someone from that office will contact them. The client may also file his complaint directly by telephone. Advise the client

of the phone number for the SSA Civil Rights Coordinator:
(714) 438-8877.

- F. Cooperate with any Civil Rights investigation, when requested.
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REFERENCES

Hyperlinks

Staff accessing this document by computer may create a direct connection to the following references by clicking on them.

- [SSA Policy and Procedure Civil Rights and Nondiscrimination \(D 19\)](#)
 - [SSA Policy and Procedure Sign and Non-English Language Interpretive Services \(E 21\)](#)
 - [SSA Policy and Procedure Americans with Disabilities Act, Title II \(D 31\)](#)
 - [Program Integrity-Civil Rights, SSA Administration](#)
 - [CDSS Civil Rights Website](#)
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REQUIRED FORMS

Online Forms

Required forms listed below may be printed out and completed, or completed online, and may be accessed by clicking on the link provided.

Form Name	Form Number
Language Assessment	F063-25-468
Discrimination Complaint	F063-07-80
Discrimination Complaint (Spanish)	F063-07-80 SP
Discrimination Complaint (Vietnamese)	F063-07-80 V
Certification of Confidentiality—Non-SSA Interpreter	F063-02-217
Certification of Confidentiality—Non-SSA Interpreter (Spanish)	F063-02-217SP

Hard Copy Forms

Forms listed below must be completed in hard copy (including multi-copy NCR forms). ***For reference purposes only***, links are provided to view these hard copy forms, where available.

Form Name	Form Number
None.	

CWS/CMS Forms

The following required forms may **only** be obtained in CWS/CMS. **For reference purposes only**, links are provided to view these CWS/CMS forms, where available.

Form Name	Form Number
None.	

Brochures

Brochures to distribute in conjunction with this policy include:

Brochure Name	Brochure Number
Your Rights under California Welfare Programs (English) (Other languages available: Spanish , Vietnamese , Chinese , Cambodian , Armenian , Russian , Arabic , Farsi , Hmong , Korean , Laotian and Tagalog , and ADA version)	PUB 13
Everyone is Different, But Equal Under the Law	PUB 86

PROCEDURE

**Required Actions—
Informing Clients
of Rights**

The following actions must be completed to assure that clients are informed of and are provided non-discriminatory services.

Staff Responsible	Step	Required Action
Store Clerk	1.	Order and maintain a supply of <i>Your Rights Under California Welfare Programs (PUB 13)</i> pamphlet and <i>Equal Under the Law (PUB 86)</i> posters in available languages.
Reception Staff	2.	Ensure that all public reception areas contain <i>PUB 86</i> posters and are stocked with <i>PUB 13</i> pamphlets and placed in a visible and accessible area for clients.
SSW	3.	At initial contact: <ol style="list-style-type: none"> a. Request client to declare his primary language for both oral and written communication. b. Assess and document client's primary language needs, using <i>Language Assessment (F063-25-468)</i>.

- c. Give *PUB 13* pamphlet to client in English or the appropriate primary non-English language.
 - d. Advise client of their right to free interpretive services and right to request auxiliary aids, if needed.
 - e. Record in Case Narrative and CWS/CMS that client was informed of rights and accepted or declined written communication in his primary language, per policy above.
 - f. Document whether interpretive services were used, who interpreted, and language provided.
 - **IF** interpretive services provided by client, document that client was informed of possible ineffective communication. Obtain client and interpreter signatures on *Certification of Confidentiality – Non-SSA Interpreter (F063-02-217)*
 - **IF** interpretive services provided by a child, document extenuating circumstances.
 - g. Document whether auxiliary aids were needed and how they were provided.
4. At each subsequent contact with non-English, limited English proficiency, or disabled client:
- a. Provide client with interpreter, or other aids and services, as needed and outlined in above policy.
 - b. Provide forms in primary language, whenever possible. Check [CDSS website](#) for available languages.
 - c. Document extenuating circumstances, if interpretive services are provided by a child.
5. Annually, or when changes are made, update case documentation whether interpretive services needed, who interpreted, and language provided, e.g., “client’s language information reverified.”

- **IF** interpretive services provided by client, document that client was informed of possible ineffective communication, the need to disclose confidential information, and their right to change from the self-selected interpreter to a county-provided interpreter at any time.

Required Actions— Allegation of Discrimination		The following actions must be completed when a client alleges discrimination.	
Staff Responsible	Step	Required Action	
SSW	1.	Provide client with <i>Discrimination Complaint (F063-07-80)</i> in client’s primary language.	
	2.	Advise client to file the complaint within 180 days of the alleged discriminatory act directly with SSA, CDSS, or the U.S. Department of Health and Human Services. Provide addresses listed in above policy.	
		If requested:	
		a.	Assist the client with completion of the form and forward complaint to Program Integrity, Bldg. #180.
		b.	Send a copy of completed form and <i>PUB 13</i> to client; provide the phone number for SSA Civil Rights Coordinator: (714) 438-8877.
		c.	Provide the number above for clients who wish to file and process complaints directly with the SSA Civil Rights Coordinator.
	3.	Cooperate with any Civil Rights investigation, when requested.	