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SUPERIOR COURT OF THE STATE OF CALIFORNIA
LOS ANGELES COUNTY

29 VENUS MOORE, DEANNA WINTON,
30 THOMAS HALL, ROBERT LEFORT,
31 JOSEPH BENNETT, JOSHUA
32 CHIAROMONTE, SHAN SHAW, SHANE
33 POTTER, AND JOSEPH BADIALI on
34 behalf of themselves and all others similarly
35 situated,

36 Plaintiffs,

37 v.

38 CALIFORNIA DEPARTMENT OF STATE
39 HOSPITALS, a California state agency, and
40 DOES 1 THROUGH 25,

41 Defendants.

CASE NO.: 19STCV16858

**FIRST AMENDED CLASS ACTION
COMPLAINT FOR:**

- (1) FAILURE TO PAY MINIMUM
WAGE;**
(2) WAITING TIME PENALTIES

DEMAND FOR JURY TRIAL

By Fax

CONFORMED COPY
ORIGINAL FILED
Superior Court of California
County of Los Angeles

OCT 11 2019

Sherri K. Carter, Executive Officer/Clerk of Court
By Steven Drew, Deputy

On behalf of themselves and all others similarly situated, Plaintiffs Venus Moore, Deanna Winton, Thomas Hall, Robert Lefort, Joseph Bennett, Joshua Chiaromonte, Shan Shaw, Shane Potter, and Joseph Badiali (“Plaintiffs”) complain against Defendant California Department of State Hospitals (“DSH” or “Defendant”) and Does 1 through 25, inclusive, as follows:

NATURE OF THE CASE

1. DSH manages the California State Hospital System, to which civil detainees are involuntarily committed pursuant to various provisions of the California Penal Code, the Welfare Institution Code, and the Lanterman-Petris-Short Act.

2. DSH and the five hospitals it manages—Coalinga State Hospital (“Coalinga”), Metropolitan State Hospital (“Metropolitan”), Atascadero State Hospital (“Atascadero”), Napa State Hospital (“Napa”), and Patton State Hospital (“Patton”) (collectively, the “Hospitals”)—have created Vocational Rehabilitation Programs through which detainees may work for payment. Through this program, detainee-employees perform work necessary for the functioning of the Hospitals, including janitorial, dining, laundry, plumbing, clerical, library, and landscaping services.

3. For at least the last three years, DSH has, as a matter of policy and/or practice and in violation of the California Labor Code, paid detainee-employees at all five Hospitals less than the minimum wage for all hours worked—often as little as \$1.00 per hour.

4. The California minimum wage was \$9.00/hour effective July 1, 2014; \$10.00/hour effective January 1, 2016; \$10.50/hour effective January 1, 2017; \$11.00/hour effective January 1, 2018; and \$12.00/hour since January 1, 2019.

5. As the work performed by detainee-employees is necessary for the operation of the Hospitals, it serves as a substitute for other, non-detainee employment—effectively and improperly saving DSH millions of dollars in labor costs that it would otherwise expend. Indeed, in 2017 alone, more than 1000 detainee-employees performed over 600,000 hours of work across the Hospitals.

6. Plaintiffs accordingly challenge Defendant’s policy of willfully and unlawfully failing to

1 pay detainee-employees at least minimum wage for all hours worked pursuant to California law,
2 as well as Defendant's policy of failing to pay all wages due upon resignation or termination.
3 Plaintiffs bring claims for unpaid minimum wages, liquidated damages, statutory and civil
4 penalties, interest, and attorneys' fees and costs.

5 7. The above-stated claims are brought pursuant to Code of Civil Procedure § 382 on behalf
6 of a class of civil detainee-employees—Mentally Disordered Offenders ("MDOs"), Sexually
7 Violent Predators ("SVP"), those Not Guilty by Reason of Insanity ("NGRI"), those held
8 pursuant to the Lanterman-Petris-Short Act ("LPSA"), and those Incompetent to Stand Trial
9 ("IST")—who performed work for the DSH at any of the hospitals managed by the DSH and
10 who were paid less than California state minimum wage at any time during the three years prior
11 to the filing of this action (the "Class Period").

12 13 **JURISDICTION AND VENUE**

14 8. This Court has jurisdiction over all causes of action asserted herein vested by the
15 California Constitution, Article VI § 10, which grants the Superior Court original jurisdiction in
16 all cases except those given to other trial courts.

17 9. Plaintiffs and the proposed Class Members seek damages exceeding the jurisdictional
18 minimum of this Court.

19 10. Venue in Los Angeles County is proper under California Code of Civil Procedure §
20 395(a) because Defendant's unlawful conduct caused injury to the personal property of some
21 Plaintiffs and proposed Class Members in this County, and Defendant's liability arose in part in
22 this County. *See Regents of University of California v. Superior Court* (1970) 3 Cal.3d 529, 534;
23 *Cortez v. Purolator Air Filtration Products Co.* (2000) 23 Cal.4th 163, 168 (Once earned . . .
24 unpaid wages bec[o]me property to which the employees [are] entitled.).

25 26 **THE PARTIES**

27 11. Plaintiff Venus Moore is a detainee-employee and NGRI who has been detained at DSH
28 hospitals since 2008: first at Patton and then at Metropolitan. Between 2016 and the summer of

1 2019, Ms. Moore worked in the kitchen at Metropolitan. She worked up to six hours per week
2 and was paid \$7.25 per hour for all work performed. In approximately the summer of 2019, Ms.
3 Moore was transferred out of Metropolitan, thereby ending her employment. Upon ending her
4 work at Metropolitan, DSH did not pay Ms. Moore all the wages she is owed.

5 12. Plaintiff Deanna Winton is a detainee-employee and MDO who has been detained at
6 DSH hospitals since 2002: at Patton until 2013 and then at Metropolitan. Since she has been at
7 Metropolitan, Ms. Winton has worked in housekeeping and in the clothing room. She has
8 worked up to six hours per week, currently works approximately five hours per week, and is paid
9 \$7.25 per hour for all work performed. In approximately late 2017 or early 2018, DSH laid Ms.
10 Winton off from her job. In doing so, DSH did not pay her all wages owed. In approximately
11 May of 2018, DSH rehired Ms. Winton into her clothing position.

12 13. Plaintiff Thomas Hall is a detainee-employee and MDO who has been detained at DSH
13 hospitals since 2009: Atascadero from 2003 until 2009; Patton from 2009 until April 2012; and
14 Coalinga since April 2012. During the last three years, Mr. Hall has worked as an industrial
15 technician and janitor. He has worked 20 hours per week and has been paid \$1.00 per hour for all
16 work performed. During the last three years, DSH has ended Mr. Hall's employment. In doing
17 so, DSH failed to pay Mr. Hall all wages owed.

18 14. Plaintiff Robert Lefort is a detainee-employee and SVP who has been detained at DSH
19 hospitals since 1998: Atascadero since 1998 and Coalinga since 2007. For at least the last three
20 years, Mr. Lefort has worked as a library clerk. He works 11.5 hours per week, and until July of
21 2019, he was paid \$1.00 per hour for all work performed. In July of 2019, Coalinga began
22 paying Mr. Lefort \$7.25 for all work performed.

23 15. Plaintiff Joseph Bennett is a detainee-employee and SVP who has been detained at
24 Coalinga State Hospital since September 2017. Since December 2017, Mr. Bennett has worked
25 as an industrial technician, library clerk, and janitor. He currently works approximately 8.75
26 hours per week, although he has worked up to 14 hours per week. Up until July of 2019, Mr.
27 Bennett was paid \$1.00 per hour for all hours worked. In July of 2019, DSH began paying Mr.
28 Bennett \$7.25 for all work performed.

1 16. Plaintiff Joshua Chiaromonte is a detainee-employee and NGRI who has been detained at
2 Patton State Hospital since January 2010. Since 2012 or 2013, Mr. Chiaromonte has worked at
3 Patton. He has worked as a janitor (2012/2013-2015), in horticulture (2015/2016), on the paint
4 crew (2016/2017), as a janitor/housekeeping (2017), and in the print shop (since October of
5 2017). He currently works approximately 20 hour per month. He is paid \$7.25 per hour for all
6 hours worked.

7 17. Plaintiff Shan Shaw is a detainee-employee and NGRI who has been detained at DSH:
8 Atascadero since 2002 and Patton since April of 2014. Since 2015, Mr. Shaw has worked as a
9 janitor/housekeeping. He currently works approximately 20 hours a month. He is paid \$7.25 per
10 hour for all hours worked. During the last three years, Mr. Shaw was transferred from the West
11 side to the East side of the hospital. DSH ended Mr. Shaw's employment upon his transfer. In
12 doing so, DSH failed to pay Mr. Shaw all wages owed. A few months later, DSH rehired Mr.
13 Shaw.

14 18. Plaintiff Shane Potter is a detainee-employee and NGRI who has been detained at Napa
15 State Hospital since August 2015. Mr. Potter began working at the Curved Needle at Napa in
16 2016, where he worked for approximately a couple of months. He was paid between \$1.00 to
17 \$4.00 for the work he performed. He worked approximately six to ten hours a week at the
18 Curved Needle. He was then transferred to work at the gym, where he has worked for
19 approximately the last couple of years. DSH initially paid Mr. Potter between \$6.00 and \$7.00 an
20 hour at the gym. After successive raises, Mr. Potter was paid as much as \$10.50 per hour.
21 However, DSH cut his pay back down to \$6.00 to \$7.00 per hour. He currently makes \$7.25 per
22 hour and works nine to ten hours per week.

23 19. Plaintiff Joseph Badiali is a detainee-employee and NGRI who has been detained at Napa
24 State Hospital since April of 2017. In approximately June or July of 2018, Mr. Badiali began
25 working in the kitchen, where he worked for three months. He worked approximately an hour
26 and 45 minutes every week and made approximately \$40 every two weeks. In August of 2018,
27 Mr. Badiali went to work at Solanex, where he worked approximately 14 hours every two weeks.
28 Mr. Badiali was primarily paid on an hourly basis at Solanex, where he was paid approximately

1 \$1.20 per hour for his first month of work and \$3.87 per hour for the subsequent five months. On
2 occasion, Mr. Badiali also worked at a piece rate at Solanex. Mr. Badiali then transferred to work
3 at the gym, where he has made \$7.25 per hour. Mr. Badiali works approximately eight to nine
4 hours a week at the gym.

5 20. Defendant DSH is a California state agency that operates and manages the California
6 State Hospital System, including Coalinga State Hospital, Metropolitan State Hospital,
7 Atascadero State Hospital, Napa State Hospital, and Patton State Hospital. DSH receives and
8 holds detainees pursuant to the laws of the State of California. DSH has the authority as well as
9 the obligation to implement policies and practices to operate the Hospitals in accordance with the
10 laws of California and to remedy injuries caused by its unlawful conduct. *See* Welfare &
11 Institutions Code §§ 4100 et seq.

12 **FACTUAL ALLEGATIONS**

13
14 21. DSH manages the nation's largest inpatient mental health hospital system; some of its
15 hospitals have been in operation since the 1800s. The vast majority of patients are civil detainees
16 admitted pursuant to statute, including Penal Code § 1370 (Incompetent to Stand Trial (IST)),
17 Penal Code § 1026 (Not Guilty by Reason of Insanity (NGRI)), Penal Code §§ 2962 and 2972
18 (Mentally Disordered Offenders (MDOs)), Welfare Institution Code §§ 6602 and 6604 (Sexually
19 Violent Predators (SVPs)), and Lanterman-Petris-Short Act (LPS).

20 22. As explained above, DSH and the five Hospitals it manages have created a "Vocational
21 Rehabilitation Program" through which detainee-employees may voluntarily work for payment.
22 DSH recognizes that detainee-employees are its employees pursuant to California law, and that
23 DSH is legally required to pay them state minimum wage. *See* State of California, Budget
24 Change Proposal, Vocational Services and Patient Minimum Wage, at 4 ("In order to legally
25 implement this pay proposal [to implement federal minimum wage], trailer bill language is
26 necessary to exempt DSH patient workers from state minimum wage"). Exh. 1.

27 23. Indeed, DSH could reach no other conclusion but that detainee-employees are employees
28 pursuant to California law. Detainee-employee work is subject to significant DSH controls. For

instance, DSH determines which detainees to hire and retains the right to require detainees to complete a vocational class prior to beginning their work for DSH. Then, after a detainee is hired, DSH controls all aspects of the work performed by detainees-employees. DSH determines detainee-employees' job duties, hours of work, location of work, standards of performance, and rate of pay. DSH also retains the authority to hire and fire detainee-employees, supervises detainee-employees, and provides the supplies and tools necessary for detainee-employees to perform their job duties.

24. For at least the last three years, all detainee-employees at Metropolitan, Coalinga, Atascadero, and Patton who have worked in Defendant's Vocational Rehabilitation Programs have been paid between \$1.00 and \$7.25 per hour, and the detainees at Napa State Hospital have routinely been paid below the California minimum wage for all hours worked.

25. In 2019, the DSH proposed to the legislature to pay patient workers the federal minimum wage (\$7.25) and establish a worker's compensation program in exchange for an exemption from the California Labor Code requiring the payment of the State minimum wage. Exh. 1 at 4. In July of 2019, the legislature granted the DSH the requested exemption, and, upon information and belief, the DSH has begun paying patient workers the federal minimum wage.

CLASS ACTION ALLEGATIONS

26. This class action is brought on behalf of the following proposed class: all civil detainees (including Mentally Disordered Offenders ("MDOs"), Sexually Violent Predators ("SVP"), those Not Guilty by Reason of Insanity ("NGRI"), those held pursuant to the Lanterman-Petris-Short Act ("LPSA"), and those Incompetent to Stand Trial ("IST")) who, at any time during the previous three years, worked at any of the hospitals managed by the DSH and were paid a rate less than the applicable California minimum wage.

27. **Numerosity:** The Class is so numerous that the individual joinder of all of its members is impracticable. While Plaintiffs do not presently know the exact number of Class Members, Plaintiffs are informed and believe, and thereon allege, that as many as 1000 persons have been subjected to the unlawful practices alleged herein within three years preceding the filing of this

1 action. Upon information and belief, the precise identity of Class Members can be determined by
2 patient and payroll records maintained by DSH.

3 28. **Commonality:** Common questions of fact and law exist as to all members of the Class
4 that predominate over any questions affecting only individual Class Members. These common
5 questions, which may be determined without reference to the individual circumstances of any
6 Class Member, include, but are not limited to, the following:

- 7 a. Whether Defendant failed to pay Class Members minimum wage for all time worked
8 pursuant to California Labor Code §§ 558, 1182.12 and 1194;
- 9 b. Whether Defendant, in violation of California Labor Code §§ 201–03, failed to timely
10 pay Plaintiffs and Class Members all wages due upon termination or resignation;
- 11 c. Whether Plaintiffs and Class Members are entitled to “waiting time” penalties pursuant to
12 California Labor Code § 203;
- 13 d. What amounts Plaintiffs and Class Members are entitled to receive in interest on unpaid
14 compensation due and owing to them.

15 29. **Typicality:** Plaintiffs’ claims are typical of the claims of the Class. Plaintiffs and Class
16 Members sustained damages arising out of Defendant’s aforementioned common practice of
17 failing to pay detainee-employees minimum wage. Plaintiffs, like Class Members, are detainee-
18 employee who did not receive minimum wage for work performed.

19 30. **Adequacy of Representation:** Plaintiffs are adequate representatives of the Class in that
20 their claims are typical of those of the Class. Plaintiffs have the same interests in the litigation of
21 this case as the Class Members; they are committed to vigorous prosecution of this case and have
22 retained competent counsel experienced in class action and wage and hour litigation.

23 31. **Superiority of Class Action:** Class treatment will permit a large number of similarly
24 situated persons to prosecute their common claims in a single forum simultaneously, efficiently,
25 and without unnecessary duplication of effort and expense that numerous individual claims
26 would entail. Class treatment will also avoid the risk of inconsistent or contradictory judgments.

27 //

28 //

FIRST CAUSE OF ACTION

FAILURE TO PAY CALIFORNIA MINIMUM WAGE FOR ALL HOURS WORKED
(CALIFORNIA LABOR CODE §§ 1182.12, 1194, 1194.2, 1197 AND APPLICABLE IWC
WAGE ORDERS)

32. The allegations of each of the preceding paragraphs are re-alleged and incorporated herein by reference, and Plaintiffs allege as follows a claim for relief on behalf of themselves and all Class Members.

33. The IWC Wage Orders and California Labor Code §§1194 and 1197 require employers to pay employees at least minimum wage for all hours worked.

34. California Labor Code § 1182.12, as well as the IWC Wage Orders, provide that the California minimum wage was \$9.00/hour effective July 1, 2014; \$10.00/hour effective January 1, 2016; \$10.50/hour effective January 1, 2017; \$11.00/hour effective January 1, 2018; and \$12.00/hour from January 1, 2019 to the present.

35. The minimum wage provisions of the California Labor Code are enforceable by private civil action pursuant to California Labor Code § 1194(a).

36. As described herein, Defendant maintained a policy and/or practice of failing and refusing to pay Plaintiffs and the Class Members state minimum wage for all hours worked.

37. Defendant's actions were willful, in bad faith, and without reasonable grounds for believing that the acts or omission were not in violation of state law.

38. As a direct and proximate result of Defendant's unlawful conduct as set forth herein, Plaintiffs and Class Members have sustained damages, including lost wages, in an amount to be determined at trial.

39. In addition to recovering unpaid wages, Plaintiffs and Class Members are entitled to recover interest and liquidated damages, and reasonable attorneys' fees and costs, pursuant to California Labor Code §§1194(a) and 1194.2(a).

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SECOND CAUSE OF ACTION
WAITING TIME PENALTIES
(CALIFORNIA LABOR CODE §§ 201, 202 203)

40. The allegations of each of the preceding paragraphs are re-alleged and incorporated herein by reference, and Plaintiffs allege as follows a claim for relief on behalf of themselves and all Class Members.

41. California Labor Code § 201 states that an employer is required to provide an employee who is terminated all accrued wages and compensation at the time of termination.

42. California Labor Code § 202 states that an employer is required to provide an employee who resigns all unpaid wages within 72 hours of their resignation, or upon resignation if the employee has provided at least 72 hours' notice.

43. California Labor Code § 203 states that if an employer willfully fails to pay compensation promptly upon discharge, as required by § 201 and § 202, then the employer is liable for waiting time penalties equivalent to the employee's daily wage, for a maximum of 30 days.

44. Plaintiffs Deanna Winton, Thomas Hall, Venus Moore, Shan Shaw, and many of the proposed Class Members have at some point in the last three years been discharged, quit, or otherwise terminated their employment with Defendant. Upon resignation or termination, they were not paid all wages due within the statutory time period. Defendant willfully failed and refused to pay timely compensation for unpaid minimum wages.

45. Plaintiffs Deanna Winton, Thomas Hall, Venus Moore, Shan Shaw, and discharged or terminated detainee-employee Class Members are therefore entitled to "waiting time" penalties against Defendant, in an amount to be determined at trial, pursuant to California Labor Code § 203, which provides that an employee's wages shall continue as a penalty until paid, for a period of up to thirty (30) days from the time they were due, with interest thereon, as well as attorneys' fees and costs.

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PRAYER FOR RELIEF

WHEREFORE, Plaintiffs, on behalf of themselves and the proposed Class, pray for judgment against Defendant, and each of them, as follows:

- 1) That the Court determine that this action may be maintained as a class action under California Code of Civil Procedure § 382;
- 2) Appointment of Plaintiffs as Class Representatives;
- 3) Appointment of Plaintiffs' Counsel as Class Counsel;
- 4) Provision of Notice to all Class Members;
- 5) A declaratory judgment that Defendant has knowingly and intentionally violated the following provisions of law, among others:
 - a. California Labor Code §§ 1182.12, 1194, 1194.2, 1197 and applicable IWC Wage Orders by failing to pay Plaintiffs and the Class the minimum wage;
 - b. California Labor Code §§ 201–203 by willfully failing to pay all wages owed at the time of termination of employment;
- 6) A declaratory judgment that Defendant's violations as described above were willful and/or knowing and intentional;
- 7) An award to Plaintiffs and Class Members of damages in the amount of unpaid minimum wages including interest thereon subject to proof at trial;
- 8) An award of penalties owed, pursuant to California Labor Code § 203, to Plaintiffs and all Class Members who resigned or whose employment was terminated by Defendant without receiving all compensation owed at the time of separation;
- 9) That Plaintiffs and the Class Members be awarded damages for the amount of unpaid compensation, including interest thereon, liquidated damages, and all penalties to which Plaintiffs and Class Members are entitled, subject to proof at trial;
- 10) An award of liquidated damages to Plaintiffs and Class Members, in an amount equal to minimum wages unlawfully unpaid, according to proof, pursuant to California Labor Code § 1194.2;
- 11) An award to Plaintiffs and the Class Members of reasonable attorneys' fees and costs,

pursuant to California Code of Civil Procedure §§ 1021.5, California Labor Code §§ 218.5, 226(e), 1194, 203, and/or other applicable law;

12) An award of such other and further relief as this Court may deem appropriate.

DEMAND FOR JURY TRIAL

Plaintiffs demand a trial by jury.

DATED: October 11, 2019

RUKIN HYLAND & RIGGIN LLP

By: Valerie Brender
Valerie Brender
Attorneys for Plaintiffs

DATED: October 11, 2019

ROSEN BIEN GALVAN & GRUNFELD LLP

By: Michael Freedman
Michael Freedman
Attorneys for Plaintiffs

EXHIBIT 1

STATE OF CALIFORNIA
Budget Change Proposal - Cover Sheet
 DF-46 (REV 08/17)

Fiscal Year 2019-20	Business Unit 4440	Department Department of State Hospitals	Priority No.
Budget Request Name 4440-040-BCP-2019-GB		Program 4400 – ADMINISTRATION 4410 – STATE HOSPITALS	Subprogram 4400010 – HEADQUARTERS ADMINISTRATION 4410010 – ATASCADERO 4410020 – COALINGA 4410030 – METROPOLITAN 4410040 – NAPA 4410050 – PATTON

Budget Request Description
 Vocational Services and Patient Minimum Wage

Budget Request Summary

The Department of State Hospitals (DSH) requests authority for 1.0 permanent, full-time position and a General Fund augmentation of \$3.34 million beginning in fiscal year (FY) 2019-20 and on-going to implement a new and uniform wage structure for DSH's Vocational Rehabilitation Program. The request will help DSH standardize the patient wage structure across patient-worker commitment types and across residency hospitals and continue patient vocational treatment programs.

Requires Legislation <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Code Section(s) to be Added/Amended/Repealed Amend WIC 4316 Add WIC 4317.5 Amend Labor Code 3208.3, 3551 Add Labor Code 3370.1, 3371.1	
Does this BCP contain information technology (IT) components? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, departmental Chief Information Officer must sign.</i>	Department CIO	Date

For IT requests, specify the project number, the most recent project approval document (FSR, SPR, S1BA, S2AA, S3SD, S4PRA), and the approval date.

Project No. Project Approval Document: Approval Date:

If proposal affects another department, does other department concur with proposal? ☐ Yes ☒ No
Attach comments of affected department, signed and dated by the department director or designee.

Prepared By Marcelo Acob, Chief Financial Officer	Date	Reviewed By George Maynard, Acting Deputy Directory – Administrative Services (A)	Date
Department Director (A) Stephanie Clendenin	Date	Agency Secretary Kris Kent	Date

Department of Finance Use Only

Additional Review: ☐ Capital Outlay ☐ ITCU ☐ FSCU ☐ OSAE ☐ CALSTARS ☐ Dept. of Technology

PPBA	Original Signed By: Kris Cook	Date submitted to the Legislature <i>1/10/19</i>
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A. Budget Request Summary

The Department of State Hospitals (DSH) requests authority for 1.0 permanent, full-time position and a General Fund augmentation of \$3.34 million beginning in fiscal year (FY) 2019-20 and on-going to implement a new and uniform wage structure for DSH's Vocational Rehabilitation Program. The request will help DSH standardize the patient wage structure and continue patient vocational treatment programs.

B. Background/History

DSH manages the nation's largest inpatient forensic mental health hospital system. Its mission is to provide evaluation and treatment in a safe and responsible manner, seeking innovation and excellence in state hospital operations, across a continuum of care and settings. DSH is responsible for the daily care and provision of mental health treatment of its patients and oversees five state hospitals and employs nearly 11,000 staff. Additionally, DSH provides services in jail-based competency treatment (JBCT) programs and conditional release (CONREP) programs throughout the 58 counties. In FY 2017-18, DSH served 11,961 patients within state hospitals and jail-based facilities, with average daily censuses of 5,897 and 227 respectively. The CONREP program maintains an average daily census of approximately 654. DSH's five state hospitals are Atascadero, Coalinga, Metropolitan – Los Angeles, Napa and Patton. Pursuant to the Budget Act of FY 2017-18, the psychiatric programs operating at state prisons in Vacaville, Salinas Valley, and Stockton, where DSH treated mentally-ill prisoners, have been transferred to the responsibility of the California Department of Corrections & Rehabilitation (CDCR) as of July 1, 2017. DSH continues to designate 336 beds at three of its state hospitals, Atascadero, Coalinga, and Patton for the treatment of mentally-ill prisoners.

Some of the state hospitals have been in operation since the 1800s. In the early years of patient care, state hospitals were not connected to each other in a systemic way. Each facility was left to develop its own programs, policies and procedures. It wasn't until decades later, with advances in technology and transportation, that the hospitals were able connect in a meaningful way to share best practices and standardize policies and processes. Today there are still remnants of these siloed developments in DSH's Vocational Rehabilitation Program, which provides an hourly wage to its patients who voluntarily participate in the program to continue their therapeutic treatment and care. The program is offered at each of the hospitals; however, the pay scale and processes vary. The program is critical for the care, evaluation, and treatment of DSH patients and the Department is now focused on standardizing the various patient wage structures between the state hospitals.

All patients residing at DSH are admitted pursuant to statute which includes Penal Code section 1370 Incompetent to Stand Trial (IST), Penal Code section 1026 Not Guilty by Reason of Insanity (NGIs), Penal Code section 2962 and 2972 Mentally Disordered Offenders (MDOs), Penal Code section 2684 Prisoners in Need of Mental Health Treatment (*Coleman*), Welfare Institution Code 6602 and 6604 Sexually Violent Predators (SVPs) and Lanterman-Petris Short (LPS).

DSH evaluated the patient wages paid to patient-workers across the DSH system that are either associated with its Vocational Rehabilitation Programs or DSH-Napa's sheltered workshop in response to a December 11, 2016 letter from Disability Rights California (DRC). DRC requested that DSH pay minimum wages and asked that DSH standardize wages across all hospitals. DRC is an advocacy group that educates, investigates, and litigates to advance the rights, dignity, equal opportunities, and choices of all people with disabilities. Specifically, DRC raised equal protection arguments noting the types of work performed and the wages received differs by commitment type and hospital. DSH does not have a system-wide pay structure and most hospitals do not pay state minimum wage. Patients earn different wages depending on commitment type and/or which hospital they reside in.

As part of the patient treatment plan and rehabilitation process, DSH offers its patients access to the Vocational Rehabilitation Program, which serves as a therapeutic program to provide a range of vocational skills and therapeutic interventions for patients. DSH clinicians work closely with DSH Vocational Rehabilitation Program managers to incorporate a treatment plan to assist patients in developing social skills, occupational skills, life skills, career skills, and confidence, as well as preparing for discharge and/or transition to next level of care, successful community integration when released,

future employment and reducing criminal recidivism. The program consists of clinicians evaluating the patient's current health to determine if the patient meets the preliminary criteria to participate in the program, which includes medical clearance and approval, determining that the patient is not a danger to self or others and the program will be beneficial for the patient's treatment and care. The program allows patients to be paid an hourly wage for the work performed which varies by commitment type and work performed at each of the hospitals. Patients' work consists of the following type of jobs: custodial, kitchen worker, product assembler, laundry attendant, landscaper, painter, plumbing, barber, horticulture, multimedia production, peer mentor, office clerk, and repair technician. The Vocational Rehabilitation Program strives to build and enhance patient skills through direct physical experiences that patients can effectively use while in the hospital or community for employment stabilization and the reduction of recidivism.

The federal Fair Labor Standards Act (FLSA) requires employers to pay employees a minimum hourly wage and overtime pay (29 U.S.C.S. §§ 201-2190). Its essential purpose is to provide for workers a minimum standard of living necessary for health, efficiency, and general well-being of workers (29 U.S.C.S. § 202). With respect to DSH's patients participating in Vocational Rehabilitation Program, there is ambiguity in the implementing regulations and procedures. The FLSA's implementing regulations specifically provide that patient workers are employees under the statute, if their work confers an economic benefit to the hospital. (29 C.F.R. §§ 525.5, 525.3(e) (1989).) Although the FLSA's implementing regulations specifically provide that patient workers are employees under the statute, neither the statute nor the regulations specifically address forensically committed mental health patients whose minimum standard of living is provided by the hospital. Moreover, despite the federal regulations, the Department of Labor (DOL) Field Operations Handbook states that "generally, a prisoner/patient who performs work for the hospital or institution is not considered an employee for FLSA purposes" (U.S. DOL Field Operations Handbook section 64c03). CDCR inmates committed to DSH as patients under Penal Code section 2684, by virtue of their status as prisoners are clearly exempt from the FLSA. Various courts have examined whether Sexually Violent Predators (SVP) should be entitled to FLSA protections and have consistently found that they are not covered by the FLSA. However, the Ninth Circuit has not ruled on the matter, and California's SVP laws are codified in the Welfare and Institutions Code which governs civil commitments, not penal commitments. DSH-Coalinga received a letter dated July 15, 2016 from the Department of Labor's Wage and Hour Division, informing DSH-Coalinga that SVPs are not employees under the FLSA.

In addition to the Vocational Rehabilitation Program, DSH-Napa operates a sheltered-workshop as authorized by Welfare and Institutions Code 4316, which permits a state hospital director to establish a sheltered workshop to provide remunerative work to mimic real-life work settings and standards. Sheltered workshops are authorized, in part, to simulate trade and industry. DSH-Napa's sheltered workshop operates as Magnolia Enterprises and is a fully integrated vocational rehabilitation program. Federal law requires sheltered workshops to obtain a 14(c) certificate so that it is unnecessary to pay its patient-workers the higher of the federal or state minimum wage. (29 C.F.R. § 778.5; 29 C.F.R. § 525.1 et seq; see also, DOL Wage and Hour Division *Questions and Answers About the Minimum Wage* <<http://www.dol.gov/whd/minwage/q-a.htm>> (as of November 8, 2018)); see also Section 128(a) of the Fair Labor Standards Act (FSLA) (commonly referred to as the "savings clause," this provision expressly permits states to provide higher minimum wage rates than those mandated by the FLSA). DSH-Napa and Magnolia Enterprises, maintains a 14(c) certification and has contracts with a number of third-party vendors, to perform work in the sheltered work shop, such as soap wrapping, building nursery boxes, and assembling small animal feeders. These contracts provide patients the opportunity to gain trade and industry work experience while committed to DSH.

In order to pay sub-state minimum wage under the 14(c) certificate, DSH-Napa must complete time-studies for each patient that result in commensurate wages. DSH-Napa performs a bi-annual individual time study for each patient who participates in the 14(c) programs. DSH-Napa then compares the quality and quantity of work performed by that patient to an employee in the private sector and uses that information to inform its commensurate wage based on the private market's prevailing wage, as required by the 14(c) certificate.

Below is a table 2 that provides a summary of the history of patient wages by fiscal year. Following the table is an explanation of each hospitals vocational program.

Table 1: Summary of DSH Patient Wages

Hospital	Wage Rate	FY 2015-16		FY 2016-17		FY 2017-18	
		Average No. of Patient Workers	Amount Paid	Average No. of Patient Workers	Amount Paid	Average No. of Patient Workers	Amount Paid
DSH-Atascadero	\$1 - \$7.25	233	\$291,476	220	\$242,409	188	\$212,278
DSH-Coalinga	\$1	756	\$481,067	689	\$506,633	611	\$382,910
DSH-Metropolitan	\$7.25	145	\$308,154	113	\$234,405	104	\$210,711
DSH-Napa	\$1.07 - \$10.50	178	\$184,826	178	\$197,130	269	\$132,147
DSH-Patton	\$7.25	206	\$300,971	207	\$306,539	201	\$292,176
TOTAL	N/A	1,518	\$1,566,494	1,407	\$1,559,289	1,373	\$1,230,222

Please see Attachment 1: Summary of Hospital Patient Wage Structure that outlines each hospitals patient wage structure by patient commitment type. Since the inception of the Vocational Rehabilitation Program there has been no payroll tax withholding and deductions made from patients' wages nor have there been any formal workers compensation policy or plan.

DSH patient wages are paid by depositing the earned wages into the patient's trust account, also referred to as patient's personal deposit fund in statute. Welfare and Institutions Code section 7275-7277 outlines the liability for patients' cost of care and mandates DSH to collect on that care, Specifically section 7281 states "Whenever the sum belonging to any one patient, deposited in the patients' personal deposit fund, exceeds the sum of five hundred dollars (\$500), the excess may be applied to the payment of care, support, maintenance, and medical attention of the patient". Thus, because payments made to patients for work performed in the Vocational Rehabilitation Program or a sheltered workshop are deposited to the patient's trust fund, those wages may be subject to collection for cost of care if the payment results in a patient's trust account to be over \$500.

DSH's Vocational Rehabilitation Program is assisting over 1,500 patients system-wide in developing therapeutic skills to reduce recidivism, developing social and occupational skills, preparing for discharge and/or transition to next level of care, integrating successfully into the community, and finding employment. DSH structures its vocational goals to assist the patients in meeting target dynamic risk factors or treatment competencies as required for discharge readiness and documented within their treatment plans. A longstanding requirement within treatment, the Vocational Rehabilitation Program has evolved and diversified by DSH sites as outlined above. DSH's payment for vocational services provides patients a realistic experience and motivates treatment participation. Because the vocational rehabilitation program assists patients in gaining occupational skills, a core treatment competency, and motivates patients to participate in treatment as well as assists them in meeting discharge criteria, DSH believes this program must be preserved. Currently, each facility pays its patient workers differently and determines the appropriate patient wage differently. This has caused the DRC to question the department's policies and request standardization in wages across the hospitals. DRC recommends DSH implement a statewide policy or guidelines for uniformity of its patient work programs.

C. State Level Considerations

DSH's 2018-2023 strategic plan includes the following goals:

Goal 1: Safe Environment

Goal 2: Organizational and Operational Excellence

Goal 3: Innovative Treatment and Forensic Evaluation

Goal 4: Integrated Behavioral Health System

DSH is committed to providing the best possible care to its patients and ensuring they are well prepared for release to the community. The Vocational Rehabilitation Program aids in reducing DSH's patients' risk for recidivism, assists patients in developing social and occupational skills, prepares patients for discharge and/or transition to next level of care, and incentivizes good behavior, stability, and willingness to be treated. Patient work is very much part of a patient's treatment plan as well as successful community integration. Removal or reduction in the size of these programs would jeopardize DSH's efforts to achieve its Strategic Planning Goals 1 and 3. Furthermore, in addition to providing patients the opportunity to develop social and occupational skills through work experience at the hospitals, the patients contribute to the operation of the DSH hospitals. The removal or reduction of the Vocational Rehabilitation Program would not align with the DSH strategic plan in providing a safe environment for its patients and employees, innovative treatment and forensic evaluations in an integrated behavioral health system through excellent organizational and operational excellence.

Governments establish minimum wages to provide individuals a wage that provides for a minimum standard of living. While DSH patients are committed to DSH they receive food, housing, and psychiatric treatment, medical, and dental care, among many other services, thus patients need not receive state minimum wage payments to maintain their standard of living. While Patient advocacy groups may formally oppose any pay program that does not result in payment of state minimum wage for DSH patients, the provision of federal minimum wage for DSH patients in vocational rehabilitation programs will balance DSH's requirement to comply with FLSA and the need to provide compensation to its patient workers at a rate that does not jeopardize DSH's ability to continue to provide vocational programs for its patients.

D. Justification

With the exception of CDCR patients, who are prisoners and not entitled to FLSA coverage, and patients working in DSH-Napa's 14(c) sheltered workshop, which legally permits DSH to pay a sub-minimum wage based on state minimum wage or prevailing wage for the work performed, DSH proposes to pay its patient workers' federal minimum wage, currently \$7.25 per hour. In order to legally implement this pay proposal, trailer bill language is necessary to exempt DSH patient workers from state minimum wage (Attachment 2). In addition, DSH proposes to centralize the payment of its patient payroll processing in order to facilitate any required withhold and payment of required payroll taxes and proposes to implement workers compensation program similar to CDCR's workers compensation program it provides to inmate workers.

Payment of Federal Minimum Wage for Patient Workers

The federal laws, implementing regulations, and procedures are not clear as to patient workers, thus making it difficult to determine if one specific legal rubric applies to the payment of DSH's patient wages. Assessing the complex legal framework becomes more challenging when considering how to weigh the potential economic benefits of the work provided by DSH patient workers. The proposed Trailer Bill Language would clarify this uncertainty and allow for a consistent approach. This pay proposal balances the payment of wages and provides for non-inmate patient workers participating in the Vocational Rehabilitation program regardless of their commitment type are paid a consistent wage.

Patient Wages Processing

Currently, DSH hospitals pay the patient workers on a monthly pay cycle and the gross wages are deposited to the patient's trust fund account. Historically, DSH has not withheld taxes or deductions from

its patient wages. With the implementation of a new pay rate for DSH patient workers, DSH proposes to centralize payroll processing and withhold taxes and deductions from the patient wage, as appropriate.

Establishing a central payroll processing system will standardize the approach in the issuance of patient payroll including the required employer payroll tax payments made to Internal Revenue Service, Franchise Tax Board, and California Employment Development Department. DSH requests 1.0 permanent full-time Associate Accounting Analyst (AAA) position to facilitate payroll process and to implement the required withholdings and payment of employer share of payroll taxes. Additionally, a payroll accounting software system at the cost of \$2,000 annually is needed so that patients are paid timely, appropriate taxes are deducted from the patients' account and create tax documents such as the W-2. In addition, DSH will be required to pay the employer share of payroll taxes for the following: Social Security, Medicare, and unemployment insurance taxes for approximately 1,408 patient workers amounting to a \$470,2884 annual cost. Provided below is a summary of federal and state tax requirements, which displays what DSH is responsible for and utilized for deriving at the estimated payroll costs.

Table 2: DSH and Patient Workers' Federal and State Tax Requirements

Type of Employment Tax	Who Pays	
	Employee	Employer
Federal Taxes		
Federal Income Tax (FIT)	Withheld from employee's gross wages ¹	None
Social Security Tax (OASDI)	6.2 percent is withheld from employee's gross earnings	Employer pays percent (known as the employer match)
Medicare Tax	1.45 percent is withheld from employee's gross earnings	Employer pays 1.45 percent (known as the employer match)
Federal Unemployment Tax Act (FUTA)	None	Paid annually by the employer, after calculating annual SUI
State Taxes		
State Income Tax (SIT)	Withheld from employee's gross wages*	None
State Disability Insurance (SDI)	1.0 percent is withheld from employee's gross wages	None
State Unemployment Insurance (SUI)	None	Employer pays at its "SUI experience"

Workers' Compensation

For the purposes of Worker's Compensation DSH patients are already considered employees under California Labor Code Section 3351 which states "Employee" means every person in the service of an employer under any appointment or contract of hire or apprenticeship, express or implied, oral or written, whether lawfully or unlawfully employed..." DSH does not currently pay any administrative costs to State Compensation Insurance Fund separate from the amount it pays for administration of DSH employee claims. DSH currently does not have a budget for patient worker's compensation claims nor does it propose to establish one at this time. It will continue to monitor workers' compensation related to patient claims moving forward.

Currently, there are no provisions in the California Labor Code that specifically address the application of Workers' Compensation to DSH patients. Thus, since DSH has not yet had a claim, it is unclear exactly how the claim will be adjudicated by State Compensation Insurance Fund. California Labor Code Section

¹ FIT and SIT were not applied to the patient wages given patient workers will most likely not meet the required threshold for gross wages

3370, provides specific criteria for the payment of workers compensation benefits to California Department of Corrections and Rehabilitation inmates. This section sets certain conditions on the payment of claims, such as the following, among others:

- a) the inmate was not injured as a result of an assault in which the inmate was the initial aggressor or an intentional act of the inmate injuring himself or herself;
- b) The inmate shall not be entitled to temporary disability indemnity benefits while incarcerated
- c) No benefits shall be paid during incarceration, the period of payment commences after release.

CDCR inmates are not entitled to compensation for psychiatric injuries that may result from a job-related injury. Similar to CDCR, DSH provides all necessary medical care and treatment to its patients while in its facilities and would continue to do so if the patient was injured while participating in a vocational rehabilitation program or a sheltered workshop. Additionally, much of DSH's population has serious mental illness and many often are at risk for danger to themselves and others. DSH limits this risk by providing work experiences in a vocational rehabilitation program or sheltered workshop, integrating these programs to treatment and closely monitoring patients participating. Nevertheless, some risk still exists, thus DSH proposes Trailer Bill Language (see Attachment 3) to implement similar conditions for DSH patients as CDCR inmates regarding workers' compensation benefits to be paid while a patient is committed to DSH.

Other States

This pay proposal is consistent with other states and other state programs. DSH identified several other states have enacted legislation by which they excluded their state hospital patients from minimum wage laws in some form or another. These states include Washington, Virginia, North Carolina and Texas. DSH contacted Washington, Virginia and Texas state hospitals. Despite having excluded patient workers from the minimum wage laws, they each pay state minimum wage of \$7.25, which is the equivalent of federal minimum wage.

In addition to the aforementioned states, in May 2017, DSH surveyed the 15 hospitals making up the Western Psychiatric State Hospital Association (WPSHA) to obtain an understanding of patient worker programs and wage structures in other states. Of the five states who responded three states, Arizona, Montana, South Dakota paid patient workers their respective state minimum hourly wage (ranging from \$8.15 to \$10/hour) and deducted the standard payroll tax withholdings. Oregon indicates it has a 14 (c) certificate and wages depend upon on the type of work performed and the wages are also based either on prevailing wages or civil service wages for similar work performed and adjusted based on time studies. Oregon also withholds appropriate payroll taxes. South Dakota indicates that while they had a 14 (c) certificate to pay sub-minimum wage, they moved to paying minimum wage for all patient workers.

E. Outcomes and Accountability

Funding this request for additional staffing and patient wages will ensure that DSH continues to offer the Vocational Rehabilitation Program which is vital for the patient treatment, mitigates legal exposure by complying with applicable federal and state minimum wage laws, addresses DRC concerns and reduces the number of patient complaints made due to unfair wage structures.

F. Analysis of All Feasible Alternatives

ALTERNATIVE 1 – Approve the request funding for authority for 1.0 ongoing permanent, full-time position beginning in FY 2019-20 and a General Fund augmentation of \$3.34 million to pay a wage for DSH patients participating in vocational rehabilitation programs based on the Federal Minimum Wage. In addition, implement a payroll system so that federal and state taxes are withheld from patient's wages and clarify conditions on applicability of workers' compensation benefits to DSH patients.

Pros:

- Patients continue to receive vocational rehabilitation services.
- Managing the pay structure will be easier as all patients would earn one wage except for CDCR patients.
- Patients receive a standardized wage structure.
- Patient satisfaction and morale increases as patients are paid equally.

Cons:

- Patients and their advocates may continue to challenge the legality of payment of federal minimum wage and not the state minimum wage.
- Increases General Fund costs

ALTERNATIVE 2– Approve request to pay state minimum wage to all patients. Paying all patient workers, the state minimum wage would require additional funds yearly as state minimum wage is scheduled to increase from \$11.00 per hour in 2018 to \$15.00 per hour in 2022. DSH will need an additional \$4.9 million in FY 2019-20, \$5.4 million in FY 2020-21, \$5.9 million in FY 2021-22, \$6.4 million in FY 2022-23 and on-going. In addition, create a payroll system so that federal and state taxes are withheld from patient's wages.

Pros:

- Patients continue to receive vocational rehabilitation services.
- All patients would earn the same wage.
- DSH further reduces the possibility of a legal challenge to not paying state minimum wage.

Cons:

- Substantial cost to the General Fund
- Without additional funding, vocational programs will not be able to continue to operate.
- Without additional funding, patients will lose the opportunities for vocational rehabilitation leading to being less prepared for living in the community, likely resulting in increased recidivism.

ALTERNATIVE 3 – Status Quo, maintain existing business practices.

Pros:

- Does not incur new costs for staffing or resources.
- Patients continue to receive vocational rehabilitation services.

Cons:

- DSH continues to employ a wage structure that is not standardized across all hospitals.
- DSH may not be consistent with the FLSA.
- DSH continues to face liability for wage claims.

The below cost projections of all three alternatives display the hourly wage, total cost and the difference between each of the alternatives compared to alternative 3 (status quo). It illustrates the need of additional funding to develop a system-wide uniform wage structure.

Table 3: Cost Projections of Alternatives for Patient Wages

	Alternative 1 (Federal Minimum Wage)²	Alternative 2 (State Minimum Wage)³	Alternative 3 2019-20 Paid Wages (Status Quo)⁴
Hourly Wage	\$7.25	Year 2018-\$11.00 Year 2019-\$12.00 Year 2020-\$13.00 Year 2021-\$14.00 Year 2022-\$15.00	\$1.00-\$10.50
Cost of Hourly Wage	\$3,968,679	Year 2019-\$ 6,135,492 Year 2020-\$ 6,648,752 Year 2021-\$ 7,156,760 Year 2022-\$ 7,664,768	\$1,459,146
Difference between Status Quo and Alternative	\$2,738,457	Year 2019-\$ 4,905,270 Year 2020-\$ 5,418,830 Year 2021-\$ 5,926,538 Year 2022-\$ 6,434,546	None
Cost of Workers Compensation	\$0 ⁵	\$0	None
Cost of Payroll Taxes and Administration Cost	\$605,208	Year 2019-\$ 963,379 Year 2020-\$ 1,032,494 Year 2021-\$ 1,101,608 Year 2022-\$ 1,170,723	None
Total Cost for Alternative	\$3,343,665	Year 2019-\$ 5,868,649 Year 2020-\$ 6,451,024 Year 2021-\$ 7,028,146 Year 2022-\$ 7,605,269	\$1,459,146

G. Implementation Plan

07/01/2019 Begin advertising and recruiting for the 1.0 permanent full-time position.
 Begin payroll system software purchase agreement.
 New wage structure implemented
 Develop internal payroll processing procedures

08/15/2019 Implement internal payroll processing procedures
 First payroll with new wage dispersed for working date 07/01/2019-07/31/2019
 Continue transition plans with all hospitals.

² For Alternative 1, the federal minimum wage was multiplied by the FY 2019-20 projected number of patient workers and average number of hours worked to arrive at an annual cost.

³ For Alternative 2, the state minimum wage was multiplied by the FY 2019-20 projected number of patient workers and average number of hours worked to arrive at an annual cost.

⁴ For Alternative 3, the actual wages paid in FY 2017-18 plus the projected participation in the vocational services program was utilized to project the cost for 2019-20.

⁵ The cost of workers compensation plan is \$0 dollars at this time, as the estimated cost cannot be determined. DSH will monitor the number of patient workers compensation claims to determine if there is a need to request additional funds for workers compensation.

STATE OF CALIFORNIA
Budget Change Proposal - Cover Sheet
DF-46 (REV 08/17)

- 09/01/2019 As part of the November Estimate, DSH will adjust budget year projections of wages and payroll taxes based on 2018-19 figures.
- 09/01/2019 Monitor and address any outstanding patient wage structure.

H. Supplemental Information

N/A

I. Recommendation

DSH recommends approval of Alternative 1, including trailer bill language, to allow DSH to pay a standardized wage rate of federal minimum wage for its patients, who are not CDCR inmates, participating in vocational rehabilitation programs. In addition, this alternative, provides DSH the resources to implement a statewide payroll program and comply with state and federal laws with respect to the payment of payroll taxes and tax withholdings. Finally, this alternative also clarifies conditions for which Workers' Compensation benefits would apply to DSH patients.

BCP Fiscal Detail Sheet

BCP Title: Vocational Services and Patient Minimum Wages

BR Name: 4440-040-BCP-2019-GB

Budget Request Summary

	FY19					
	CY	BY	BY+1	BY+2	BY+3	BY+4
Personal Services						
Positions - Permanent	0.0	1.0	1.0	1.0	1.0	1.0
Total Positions	0.0	1.0	1.0	1.0	1.0	1.0
Salaries and Wages						
Earnings - Permanent	0	71	71	71	71	71
Total Salaries and Wages	\$0	\$71	\$71	\$71	\$71	\$71
Total Staff Benefits	0	45	45	45	45	45
Total Personal Services	\$0	\$116	\$116	\$116	\$116	\$116
Operating Expenses and Equipment						
5301 - General Expense	0	8	8	8	8	8
5304 - Communications	0	1	1	1	1	1
5320 - Travel: In-State	0	1	1	1	1	1
5324 - Facilities Operation	0	5	5	5	5	5
5340 - Consulting and Professional Services - External	0	2	0	0	0	0
5346 - Information Technology	0	1	0	0	0	0
539X - Other	0	3,210	3,210	3,210	3,210	3,210
Total Operating Expenses and Equipment	\$0	\$3,228	\$3,225	\$3,225	\$3,225	\$3,225
Total Budget Request	\$0	\$3,344	\$3,341	\$3,341	\$3,341	\$3,341
Fund Summary						
Fund Source - State Operations						
0001 - General Fund	0	3,344	3,341	3,341	3,341	3,341
Total State Operations Expenditures	\$0	\$3,344	\$3,341	\$3,341	\$3,341	\$3,341
Total All Funds	\$0	\$3,344	\$3,341	\$3,341	\$3,341	\$3,341
Program Summary						
Program Funding						
4400010 - Headquarters Administration	0	134	131	131	131	131
4410010 - Atascadero	0	174	174	174	174	174
4410020 - Coalinga	0	1,898	1,898	1,898	1,898	1,898
4410030 - Metropolitan	0	75	75	75	75	75

4410040 - Napa	0	802	802	802	802	802
4410050 - Patton	0	261	261	261	261	261
Total All Programs	\$0	\$3,344	\$3,341	\$3,341	\$3,341	\$3,341

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SUPERIOR COURT OF THE STATE OF CALIFORNIA
LOS ANGELES COUNTY

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THOMAS HALL, ROBERT LEFORT,
JOSEPH BENNETT, JOSHUA
CHIAROMONTE, SHAN SHAW, SHANE
POTTER, AND JOSEPH BADIALI on behalf
of themselves and all others similarly situated,

Plaintiffs,

v.

CALIFORNIA DEPARTMENT OF STATE
HOSPITALS, a California state agency, and
DOES 1 THROUGH 25,

Defendants.

CASE NO.: 19STCV16858

PROOF OF SERVICE

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PROOF OF SERVICE

STATE OF CALIFORNIA, COUNTY OF ALAMEDA

I am employed in the County of Alameda, State of California; I am over the age of 18 years and not a party to the within entitled action; my business address is 1939 Harrison Street, Suite 290, Oakland, California 94612.

On October 11, 2019, I served the foregoing documents, described as **FIRST AMENDED CLASS ACTION COMPLAINT** on the interested parties to said action by the following means:

<input type="checkbox"/>	(By Mail) By placing the document(s) listed above in a sealed envelope with postage thereon fully prepaid, in the United States Mail at Oakland, California addressed as set forth below.
<input type="checkbox"/>	(By Hand Delivery) By causing a true copy thereof, enclosed in a sealed envelope, to be delivered by hand to the addresses shown below.
<input type="checkbox"/>	(By Overnight Delivery) By placing a true copy thereof, enclosed in a sealed envelope, with delivery charges prepaid, to be sent by Federal Express, addressed as shown below.
<input type="checkbox"/>	(By Personal Service) By personally delivering a true copy thereof, enclosed in a sealed envelope, to the addressees shown below.
<input checked="" type="checkbox"/>	(By E-Service) By personally causing such document(s) to be served by File&ServeXpress by transmitting true and correct copies to File&ServeXpress to service the parties listed below.

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Attorneys for Defendant

- ☒ (State) I declare under penalty of perjury under the laws of the State of California that the above is true and correct.
- ☐ (Federal) I declare under penalty of perjury under the laws of the State of California that the above is true and correct and that I employed in the office of a member of the bar of this court at whose direction the service was made.

Executed on October 11, 2019, at Oakland, California.


Honeyleen Bohol