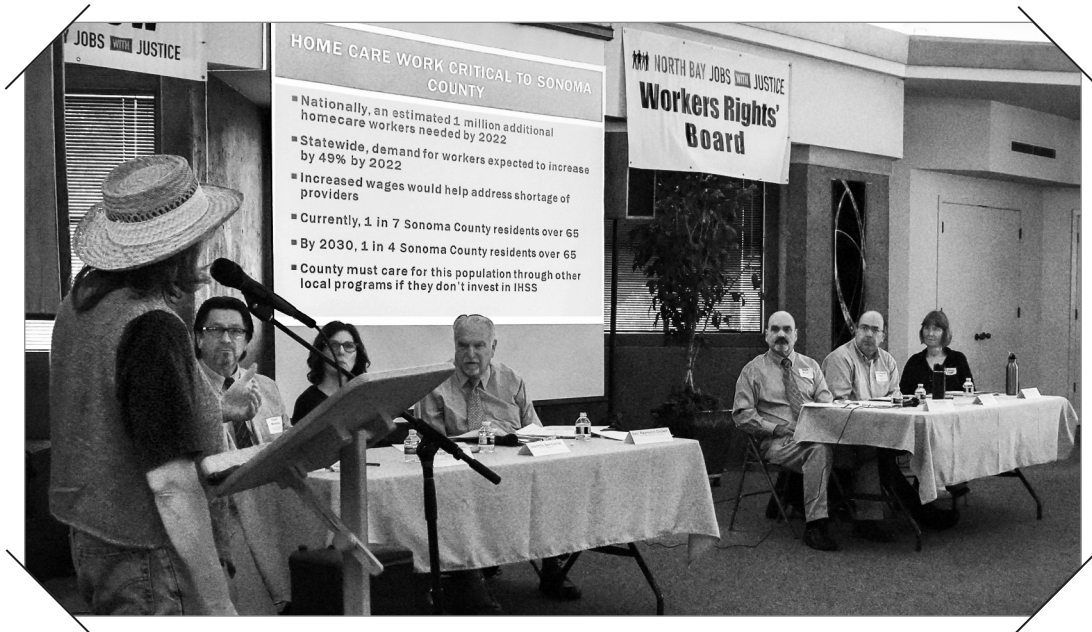


North Bay Workers' Rights Board

Hearing on In Home Supportive Service Workers Employed by the County of Sonoma: Report and Findings and Recommendations*

Hearing on Home Care, August 29, 2015
Final Report released on November 12, 2015



The North Bay Workers' Rights Board is a community-based project of

 **NORTH BAY JOBS WITH JUSTICE**

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North Bay Workers' Rights Board

Hearing on wages, benefits,
and working conditions for
In Home Supportive Service Workers
(IHSS), County of Sonoma

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Matt Myres, Chair

Retired Teacher and Principal, K-12 Education

Rev. Ramón Pons

Parochial Vicar, St. Vincent de Paul Catholic Church, Petaluma

Testimony

The Workers' Rights Board Panel heard testimony from the following Home Care Industry Experts and In Home Supportive Service Workers:

Doug Jones, *Political Organizer, SEIU-UHW*

Declan Walsh, *Research Analyst, SEIU-UHW*

Martin Bennett, *Co-Chair, North Bay Jobs with Justice*

Connie Barker, *IHSS Provider, Marin County IHSS Provider*

Nancy Goldstein, *IHSS provider, Sonoma Co.*

Bonita Muñoz, *IHSS Provider, Sonoma County*

Paul Esparza, *IHSS Provider, Sonoma County*

Sharon Allen, *IHSS Provider, Sonoma County*

Carol Taylor, *Retired IHSS Provider, Sonoma County*
Vice Chair, CA Democratic Party Senior Caucus

ALL PHOTOS BY: ELIZABETH CRAVEN

Report on the Hearing

BACKGROUND

The North Bay Workers' Rights Board is a community-based board chosen from leaders and professionals of faith, labor, and community organizations of the North Bay. The North Bay Workers' Rights Board is affiliated with North Bay Jobs with Justice, a labor-community coalition comprised of 18 unions and community-based organizations. A hearing conducted by the North Bay Workers' Rights Board is a public forum where workers can bring concerns about violations of workers' rights in the workplace.

In the fall of 2014, the Living Wage Coalition, comprised of faith, labor, and community organizations from the North Bay Area, proposed a Living Wage Ordinance of \$15 an hour for about 5,500 workers either employed by the County of Sonoma or employed by subcontractors of the County. The largest group of employees that would have been covered by the Coalition's Ordinance was about 4,000 County In-Home Supportive Service (IHSS) Workers, or home care workers, who currently earn a maximum wage of \$11.65 an hour.

Earlier, in the spring of 2014, the Living Wage Coalition had communicated their intent to propose a Living Wage Ordinance for the County. In response to that communication, the County Board of Supervisors decided to fund their own broader study on a variety of strategies for reducing poverty. They chose to hire the Blue Sky Consulting Group to do the study. North Bay Jobs with Justice commissioned its own study by economist Dr. Jeanette Wicks-Lim from the University of Massachusetts, Amherst, which focused on the fiscal impacts of its proposed Living Wage Ordinance. Dr. Wicks-Lim is one of the nation's leading experts on the fiscal impacts of living wage laws and increases in the minimum wage at the state and federal levels. (Her study can be found on the website: www.northbayjobswithjustice.org.)

On June 9th, 2015, at the first Supervisors' meeting to

consider a County Living Wage Ordinance, the Supervisors chose to raise the wage from \$13 an hour, which was the wage originally recommended by the Blue Sky Consulting Group, to \$15 an hour, but to cover fewer than 1000 workers of businesses and non-profit agencies that contract with the County. IHSS workers were excluded from this preliminary ordinance. Although there were demonstrations by the Coalition to urge inclusion of IHSS workers, the Board of Supervisors balked at this request and insisted that the IHSS wage issue be addressed in contract negotiations with the workers' union, which were soon to begin. Before



the 2nd reading of the Ordinance on August 11th, and at the urging of the Living Wage Coalition, the County Board of Supervisors agreed to shelve their Ordinance so that there could be more time to meet with Coalition members and perhaps reshape the Ordinance. Meanwhile, during negotiations between the County and IHSS workers, the first offer from the County negotiator was for a 20-cent-an-hour raise, to be phased in over 4 years, and to eliminate health-care coverage for IHSS workers; currently, only 1 in 8 IHSS have health-care. It became apparent that the Board of Supervisors was not serious about addressing the wage needs of IHSS workers. Therefore, a request for a Workers' Rights Board hearing was made and a hearing was held on Saturday, August 29th, at Christ Church United Methodist in Santa Rosa, California.

Issues Raised at the Hearing

HISTORY OF DISCRIMINATION TOWARD HOME CARE OR IHSS WORKERS

In Home Supportive Services (IHSS) workers, or homecare workers, care for the elderly and the disabled in their homes, preventing their clients from needing to move to a more costly nursing-care facility or institution.

Historically, home care workers have been perceived to be domestic workers who have been mistreated and neglected because they are mostly women, many of whom are women of color, and ethnic minorities. Domestic work has long been characterized as “women’s work.” Historically, there has been a long struggle for home care workers to achieve a minimum wage, let alone a Living Wage. In Sonoma County, IHSS workers currently receive a maximum wage of \$11.65 an hour, which is considered to be a poverty wage. Sonoma County is second only to Marin County as having the highest cost of living in the State.

Declan Walsh, a Research Analyst with the SEIU-UHW Union, testified about the history of discrimination toward IHSS workers. Declan began with a quote from a Humboldt County legislator who expressed this discriminatory perspective about 10 years ago: “These jobs aren’t really jobs and these women aren’t really workers. They are just providing companionship and they are just working for pin money.” Declan then shared the history of home care workers:

Since the Fair Labor Standards Act was passed in 1938, lawmakers and interested parties have repeatedly argued that home care is not a vocation to justify exempting home care workers from the minimum wage and overtime protections of the Fair Labor Standards Act (FLSA), even as all the other occupations originally excluded from the Act have been covered. Department of Labor began a rule-making process, intended to overturn the so-called “companionship exemption,” which resulted in a new “home care rule,” which would have, for the first time, brought home care workers under the wage and hours protections of the FLSA. In a three-week period immediately prior to and following January 1, 2015, when the new rule was scheduled to take effect, a Federal Court judge gutted two provisions of the new rule, including one that would have required third-party employers—home care agencies and public entities linked to state or county social services—to pay minimum wage and overtime and another that would have sufficiently narrowed the definition of “companionship” to exclude most home care workers from the exemption. Over the past twenty-five years, the SEIU, AFSCME, and other unions and affiliates



Declan Walsh, Research Analyst, SEIU-UHW

“Low-wage workers, such as home care aides and personal care aides, are more likely to spend extra earnings immediately for basic necessities. A higher wage for IHSS workers would improve IHSS services and enable more low-income elderly and disabled adults to remain living at home.”

have mounted successful campaigns, especially among the roughly one million home care workers employed through public programs, to raise wages and provide health insurance benefits. Home care workers’ wages have increased only where there is collective bargaining or local minimum or living wage ordinances, or both, as in San Francisco.

There has been an update to Declan Walsh’s testimony regarding the new home care rule. Declan referred to the Federal Court judge’s effort to gut the new home care rule. But recently, a federal appellate court judge ruled that the Department of Labor did have the authority to overturn the companionship exemption. Now home care workers will be included under the rules of FLSA. While the new rules went into effect October 13, 2015, there will not be full enforcement until January 1, 2016 to give adequate time for adjustment.

Who Are IHSS Workers?

Declan Walsh Described the Demographic Make-Up of IHSS Workers in California:

Four hundred eighty thousand workers earn a median hourly wage of \$9.85. Forty-eight percent of IHSS workers receive some form of public assistance. Twenty-five percent hold a second job. Forty-three percent live in households under 200 percent of the Federal Poverty Level. Seventy percent of workers take care of a family member. Fifty-three percent live in their client's home. Forty-seven percent work part-time. IHSS workers are made up of a diverse workforce with a large proportion of workers being women.

Seventy-seven percent of IHSS workers are women. Thirty percent are White, non-Hispanic. Thirty-eight percent are Hispanic or Latino. Eleven percent are African-American. Forty-eight percent are foreign-born. ... At least 1,500 of Sonoma County's IHSS workers are enrolled in Medi-Cal or receive other forms of public assistance such as CalWorks and CalFresh. This number is likely higher, however, since 48 percent of home care workers in the state receive some form of public assistance. A living wage could alleviate the burden on these programs and help elevate IHSS workers out of poverty.

IHSS Providers Tell Their Stories

Pay Rent or Feed My Family?



Bonita Muñoz, Sonoma County IHSS Provider

“My son was diagnosed with cerebral palsy and a seizure disorder. I am the sole provider for my family. My husband was injured four years ago. Every year the rent goes up and I have to decide whether to pay the rent, or the water bill, or feed my family.”

Bonita Muñoz, an IHSS worker for Sonoma County, told of her challenge in caring for her son and husband and in earning enough money to make ends meet:

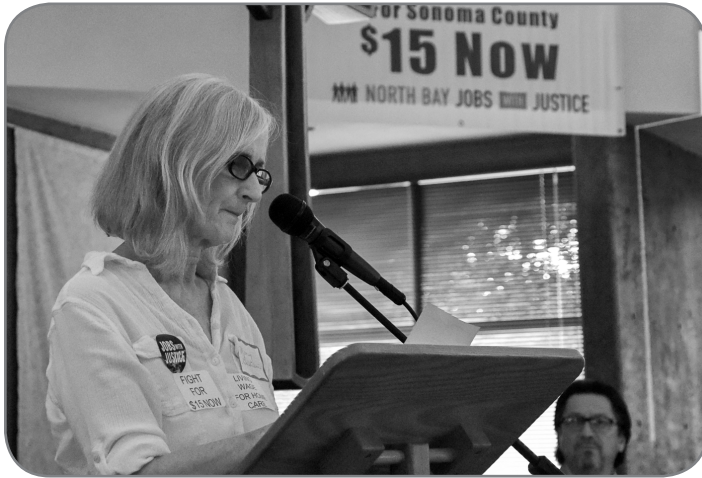
My name is Bonita Muñoz and I started working in home support in 1990 when my wage was \$4.32 an hour. When the minimum wage was raised, I remained at \$4.32 an hour. It wasn't until the union was involved did I see my wages rise to keep up with the minimum wage. I was a single mom raising three kids, one with a disability. I had to diagnose what was wrong with my son and fight the social workers and doctors to keep him alive. My son was diagnosed with cerebral palsy and a seizure disorder. I am the sole provider for my family. My husband was injured four years ago. Every year the rent goes up and I have to decide whether to pay the rent, or the water bill, or feed my family.

IHSS Provider Not by Choice

About half of IHSS workers in California provide care to their own relatives because they do not want their relatives to live in an institution. Nancy Goldstein is an IHSS worker in Sonoma County who became a home care provider not by choice but by necessity:

My name is Nancy Goldstein. I raised 3 kids, worked, went to college, got a Master's degree, did 3,000 hours of internships and finally got my MFT, Marriage and Family License. At exactly the same time I was finally getting my MFT license, my 32-year-old son sustained a permanent, serious traumatic brain injury. After all of the years preparing to become a professional, I instead made the correct choice to take care of my son, and keep him with family, rather than following my chosen career. I have taken care of my adult son now for 23 years. He was 32 when he was injured. His care entails total care for him. He is as helpless as a 3-year-old child. His care involves 24-hour supervision, 7 days per week: bathing and dental hygiene, all meal preparation, helping him dress, etc. Recently for the past 8 months he has been unable to feed himself also. As I said, it is important for our son to be with his loving family. But, also, we are saving the County a lot of money by his not being in a skilled-nursing facility, which would cost County 4 times as much. The County has chosen to not put in-home-care workers, such as ourselves, in the Living Wage Ordinance with the excuse that we have a union to represent us for wages. However, other County workers have Union representation. Also, our neighboring counties, Marin and San Francisco, have put their in-home-care workers on a path to \$15/hr. The Portrait of Sonoma County

document designed by the County Board of Supervisors emphasizes its purpose is to reduce poverty. By keeping in-home-care workers at the poverty level, there is an obvious contradiction. If there is a real desire to reduce poverty they should give in-home-care workers a living wage.



NANCY GOLDSTEIN, Sonoma County IHSS Provider

“At exactly the same time I was finally getting my MFT license, my 32-year-old son sustained a permanent, serious traumatic brain injury. After all of the years preparing to become a professional, I instead made the correct choice to take care of my son, and keep him with family, rather than following my chosen career. I have taken care of my adult son now for 23 years. He was 32 when he was injured. His care entails total care for him. He is as helpless as a 3 year-old child.”

Committed to the Work

Amanda Carles read Paul Esparza’s testimony into the record. She began by explaining why she was reading Paul Esparza’s testimony. Paul is an IHSS worker in Sonoma County. Unfortunately, Paul’s car broke down on the way to the hearing. She began reading Paul’s testimony from a cell-phone message that Paul had sent:

I got my first client through IHSS about 11 years ago. During these 11 years I have worked with about 20 different clients from that community. I currently serve 3 clients. One of the 3 clients I have worked with for over 10 years. One of my clients is a quadriplegic and I work with him for 5 days a week. In the morning I wash, dress, and clean my client. I use a Hoyer lift and place him into an electric wheelchair and place him into a van and I drive him to work. In the afternoon, I pick up my client and drop him off at home. I return in 2 or 3 hours to wash, clean, and prepare for bed using the Hoyer lift again. I count on my social workers to decide how many hours

each of my clients will receive on paid assistance each month. Without these authorized hours of care, the social worker judges that each of my clients would not be able to live at home safely and may need to be institutionalized. Advocates for seniors and the disabled have testified to the State Legislature that they would be forced out of independent living without IHSS assistance and into a residential care facility that would be on average five times more expensive than the IHSS program. Unfortunately, all these years of service to some of the most vulnerable people in our county has not provided a sufficient income, so I am forced to live in poverty. I had to buy used furniture and second-hand clothes for the last decade and still struggle to find healthy food.

Amanda took a break from reading Paul’s testimony due to a problem with the reception of the cell phone. She explained that she is a caregiver for 25 years for her daughter. She is a credentialed teacher but has not been able to teach. Unfortunately, caregivers do not pay into Social Security, so she cannot retire. Amanda returned to Paul’s testimony:

We are working to increase the amount of funding that California provides to Sonoma County and all other counties for IHSS. I know that will make it easier for me that I can get enough pay so I don’t have to struggle so hard. But I also know that the other counties are doing the right thing today and I know that Sonoma County could do the same. It’s just a matter of our County staff and the Board of Supervisors deciding that my life is important enough. It’s simple. If other counties can protect IHSS workers in their living wage ordinance my County can also. It would be so valuable to me and to my clients if they did that sooner than later.



Amanda Carles, Sonoma County IHSS Provider reading into the record, the testimony of **Paul Esparza**, another Sonoma County IHSS Provider

(See caption on next page)

“Advocates for seniors and the disabled have testified to the State Legislature that they would be forced out of independent living with IHSS assistance and into a residential care facility that would be on average five times more expensive than the IHSS program. Unfortunately, all these years of service to some of the most vulnerable people in our county has not provided [me] a sufficient income, so I am forced to live in poverty. I had to buy used furniture and second-hand clothes for the last decade and still struggle to find healthy food.”

IHSS Workers Struggle to Address Their Own Health Care

Many home care workers struggle to provide for their own healthcare needs or to meet the healthcare needs of their own family members. Sharon Allen, a Sonoma County IHSS worker, told the story of her struggle to get help to address her diagnosis of breast cancer:



Sharon Allen, Sonoma County IHSS Provider

“And if I receive \$15 an hour maybe I can help myself. I was diagnosed with breast cancer Dec. 23, 2014. But nobody could help me. I got Medi-Cal. The doctors would not help me. We went to public court and the court made an oath with Petaluma hospital and my doctors, helped me get on a partnership and talk to doctors that they knew and I was not able to get help. I called the Ombudsmen, they were not able to help me. I called San Francisco; no help. They said if I was on Medi-Cal they could not help me. But they said if I got back on Partnership, they would help me. So I was on Partnership and I had my surgery. When it was time to renew my Partnership, somehow Medi-Cal took me off Partnership and put me on Medi-Cal. When they did that, I needed some real help. I got frustrated and I was tired.”

Hello, my name is Shari Allen. And if I receive \$15 an hour maybe I can help myself. I was diagnosed with breast cancer December 23rd, 2014. But nobody could help me. I got on Medi-Cal. The doctors would not help me. We went to public court and the court made an oath with Petaluma hospital and my doctors helped me get on a Partnership [health plan] and talk to doctors that they knew and I was not able to get help. I called the Ombudsmen; they were not able to help me. I called San Francisco; they would not help me. They said if I was on Medi-Cal they could not help me. But they said if I got back on Partnership, they would help me. So I was on Partnership and I had my surgery. When it was time to renew my Partnership, somehow Medi-Cal took me off Partnership and put me on Medi-Cal. When they did that, I needed some real help. I got frustrated and I was tired. And if it wasn't for this rep from SEIU, she was the one who told me okay it was time to do something. I went up there to the Board of Supervisors and I spoke out. Right before, as I was going out the door, Shirlee Zane said, you are in my district and I am supposed to help you. If it wasn't for her, then I wouldn't have finished my surgery. I am a breast cancer survivor today and I am here to tell everybody, don't give up, don't let nobody steal your joy because there is somebody out there to help us.

The Elderly and Disabled Struggle to Find Home Care Providers

Carol Taylor is a retired IHSS provider. She told the story of a neighbor who died as the result of the difficulty in finding a home care provider:

I now live in a senior community in Sonoma where usually someone is looking for a provider because we have a shortage of IHSS home care workers in Sonoma County. Many people can't afford to work 2 hours here and 3 hours there, for \$11.65 an hour. Two years ago my downstairs neighbor Al was looking for a home care provider. Al was hospitalized, discharged, and then readmitted a few days later because he couldn't take care of himself, his food, water, and meds. The discharge planner really wanted to know a home care worker was in place for him but ended up having to settle for the assurance that someone was coming to interview for the job soon. I knew Al would be home in a few days, so each day I looked through his patio fence to see if he was about. On the very hottest day of that year, I checked and saw the apartment was dark, tightly sealed and looked empty. I was relieved to know he wasn't there in that heat; we don't have air conditioning. Two days later the potential IHSS worker arrived. When there was no answer she asked the manager to open the door. Al was dead; he had died during those two hot days. Recently a friend's client was not going to be discharged until my friend went to the facility, a plan agreed on, and they

knew there would be someone to care for her at home. This is the best practice but our worker shortage means people like Al are at risk because they need to leave facilities without adequate care when they get home. This is not just about us home care workers. Increasing IHSS workers' wages will save lives and affect thousands of people in Sonoma County.

least three decades. The demand for home care workers in California is projected to increase by 49 percent between 2012 and 2022, and nationally there will be an additional 1 million home care workers needed by 2022. If there are not enough providers to match the projected demand, the County will still end up providing care for this population somehow through other County-funded programs.



Carol Taylor, Retired Sonoma County IHSS Provider

“This is not just about us home care workers. Increasing IHSS workers’ wages will save lives and affect thousands of people in Sonoma County.”

LOCAL AUTHORITIES ON IHSS EMPLOYMENT WEIGH IN

Declan Walsh, Research Analyst with the union, SEIU-UHW, shared the following information about IHSS worker turnover and higher wages:

Past economic research has found that higher wages tend to lower worker turnover, a critical quality for IHSS consumers who depend on IHSS providers for help with their basic daily life functions. Studies on IHSS workers specifically document how better pay improves the crucial determinant of the quality of IHSS care—continuity of service. Disruptions in continuity of service can make living at home unsafe for IHSS consumers and require them to move into nursing-care facilities despite their preference to live at home. A lower turnover rate among IHSS workers will likely cause fewer IHSS consumers to drop out of the program and try to manage on their own. An increased wage would expand the IHSS workforce and help address a shortage of providers for an increasing senior population. Currently, 1 in 7 Sonoma County residents is 65 and older, but by 2030 that share is expected to grow to 1 in 4, a demographic balance that will endure for at

Home Care and Disability Rights

Connie Barker is a home care worker in Marin County, as well as a member of the Health Council of Marin, a commission appointed by the county Board of Supervisors to advise the Board on health-related issues. Connie shared background on the rights of disabled persons:

I think it’s vital to remember that IHSS was first established because of the activism of the Disability Rights movement. It was created to provide the means for low-income seniors and disabled persons to avoid institutionalization and remain in their own homes, by enabling them to hire workers of their choosing to assist them with basic tasks of daily living like shopping, cooking, eating, cleaning, dressing, bathing, laundry, and such. It’s a means-tested program, limited to people with Medi-Cal and SSI eligibility—which is to say, disabled or elderly persons with less than \$2000 in total personal assets, exclusive of their home and car. And it is further limited to those who county social workers determine cannot remain safely in their homes without such help. Social workers visit the home to determine how many hours and what tasks are authorized—within limits set by the state program. Funding is primarily through the Medi-Cal program, with State, Federal, and local funding streams all involved. The right of disabled persons to be cared for in their homes, rather than in institutions, was firmly established by the 1999 US Supreme Court Olmstead decision, and that along with changing demographics is one the reasons that the program has grown so much in recent years—especially among the elderly. Particularly for elderly persons with multiple, complicated medical conditions, and/or with thinking impairments like early dementia, being able to remain safely at home, often means they must have home care workers who can perform tasks well beyond just the basics of daily living. This can include numerous paramedical services—sometimes even protective supervision. The tasks I perform for my 70-year-old partner include things like managing and administering almost a dozen medications (including injections); running a tube feed; wound care; changing site dressings; taking, logging, and reporting vitals; holding, increasing, or decreasing some meds based on results; seeing to toileting needs;

giving bed baths: assisting with transfers; and numerous others tasks that in a hospital or nursing-home setting would be done by fully-trained nurses or CNAS. One of the real challenges we'll all face in coming years is seeing to it that there's an adequately-trained work force of home care providers available to perform tasks like these for the growing number of seniors who—again, under Olmstead—absolutely have the right not to have to leave the homes and communities and lives they've known, simply because they now need such care. And keeping the home care workforce that provides such services specifically to the low-income seniors and disabled persons who require them ill-compensated is, to my way of thinking, not likely to provide such a workforce. Which brings me to the living wage ordinances in Marin and San Francisco. The Marin ordinance was passed in 2004. Though I wasn't a home care worker then, I did have disabled friends and colleagues who in the years before the ordinance—and before the creation of local public authorities—had IHSS eligibility. Most had constant trouble finding and keeping workers. Trying to get people to do work that would be much better compensated in an institutional setting was—and is—a challenge. Many people with fully-verified needs for services end up having to rely on friends and family members who do the work strictly out of love for those they don't want to see have to go into institutional care but then find themselves—as I often have—unable to take even an occasional day off because there is no trained, reliable substitute care available.

Balancing the Budget on the Backs of IHSS Workers

Connie Barker continued:

Living Wage Ordinances help. In Marin we now make \$13.10 an hour—and we didn't have to fight to get it. Our last raise—which went into effect earlier this year—happened as an automatic COLA. No long-drawn-out expensive bargaining process—which eats up both county and union resources that could be better directed at other things. But a few years back that wasn't the case. In 2009 our Board of Supervisors did try to amend our LWO to exempt the IHSS workers—and if you remember what economic times were like then I'm sure you'll understand why. We weren't at all sure we'd win that fight, but I'll never forget the day of the vote, watching the late supervisor Charles McGlashan—who was known as more of an environmental advocate than as a champion for workers' rights or economic justice, and whom we didn't have any kind of firm commitment from one way or the other—take the microphone and essentially say, "I've been thinking it over, and you just don't balance a budget on the backs of low-income workers like these doing important work like this. Find another way." That simple common-sense approach kept our ordinance IHSS inclusive. That ordinance also allows our Board of Supervisors to suspend COLAs under dire fiscal circumstances, which they have done several times. That's less than perfect from a justice perspective, of course, but it does keep the process open, public, and on the record—as it should be. The SF ordinance—which was approved by the voters last fall, and which I and many other home care workers worked, campaigned and organized hard to get passed—uses a straight-forward, less flexible year-by-year step-up approach that creates a path to \$15 an hour over several years. But I think it's worth noting, that even their proposals were first floated to create an ordinance that would exclude IHSS. But, just like in Marin, the elected leaders who placed the ordinance on the ballot eventually decided that carving out an exception for low-income workers who provide an important—and, again, under Olmstead, legally mandated—service for low-income people living with often grave physical challenges and impairments, just did not pass the smell test.



Connie Barker, Marin County, IHSS Worker

"I think it's vital to remember that IHSS was first established because of the activism of the Disability Rights movement. It was created to provide the means for low-income seniors and disabled persons to avoid institutionalization and remain in their own homes..."

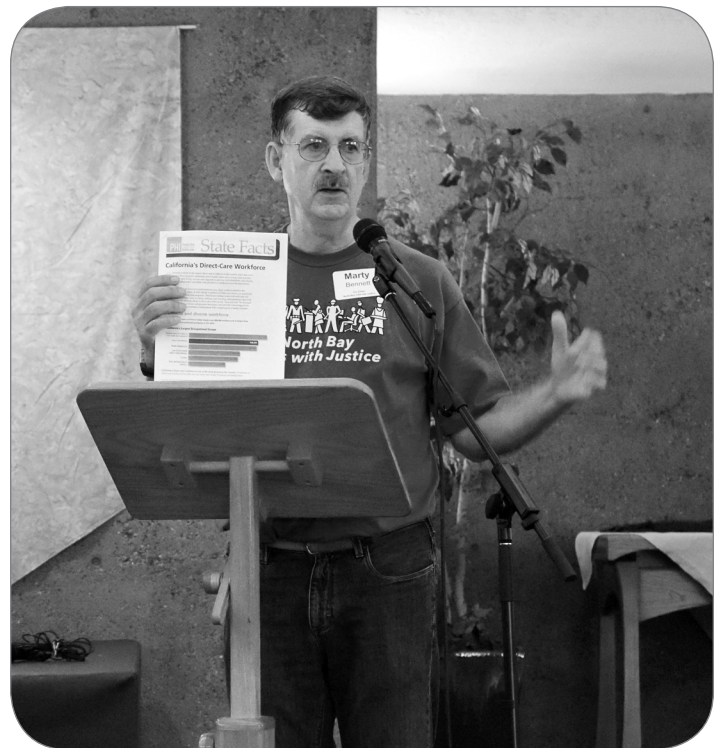
What is a Living Wage?

It should be noted that \$15 an hour, which is the wage that IHSS workers have requested, is not a true living wage. Marty Bennett teaches history at Santa Rosa Junior College and is a locally recognized expert on living wage issues. Marty provided testimony about what is considered to be a living wage in Sonoma County:

A 'living wage' is a self-sufficiency wage that enables a family to pay for housing, health care, transportation, childcare, and food without relying on public or private assistance. Self-sufficiency means that a family should have an income adequate to meet all basic needs. One expense such as health care should not be sacrificed to afford another, such as housing. The *California Budget Project calculates living wage rates for each county in California. The budget categories include housing and utilities, childcare, transportation, food, health care, miscellaneous expenses (such as basic telephone and clothing) and taxes including federal, state, and payroll taxes. These estimates assume that families do not receive any public services such as Section 8 housing vouchers or subsidized childcare, or job-based benefits such as health insurance. The calculations are based upon the cost of living for each county and acknowledge that housing costs, for instance, can vary considerably in different regions in the state. The California Budget Project estimates do not include the extras many would consider necessities such as dental coverage, life insurance, and savings for retirement and education. These living wage calculations take into account different family types and vary according to family size and the age of children. However, for purposes of public policy, we must develop a single standard.

We choose the estimate for two parents working full-time to support two children. Two thirds of households that cannot cover their basic needs have families with nonworking dependents, and the typical working-poor family in Sonoma County includes two wage earners and two dependents. Hence a living wage for the County of Sonoma is \$20.51 an hour and an annual income of \$85,336 for a family of four in 2013. Living wage estimates highlight that the California state minimum wage of \$9 an hour is less than one half of an actual self-sufficiency or family-supporting wage. The minimum wage rate is set by the legislature; it is not raised annually based upon increases in the cost of living, and it does not take into account regional variation of living costs. If the California minimum wage of \$9 an hour had just been annually raised based upon inflation since the late 1960s, it would be more than \$12 an hour today. Moreover, these calculations, based upon 2013 data, underestimate what is a living wage for Sonoma County. Rents have spiked by 30 percent over the last three years in Sonoma County. University of Massachusetts economist Jeanette Wicks-Lim estimates that if the 2013 California Budget Project estimates were adjusted for 10 percent annual rent increases over the last two years, the hourly living wage rate would be \$22.12 for each of two parents working full-time to support two children. Hence we do not claim that \$15 an hour is an actual living wage, but it is certainly much closer to

a living wage than the \$9-an-hour state minimum or the \$11.65 an hour that County of Sonoma home care workers now earn. However, we think that \$15 an hour is fiscally possible for the County of Sonoma and would enable the County to proactively address the crisis of low-wage employment in the region. Fifty percent of the jobs created between 2010-2020 will pay less than \$20 an hour and 40 percent will pay less than \$15 an hour. According to a fiscal impact report for our proposed living wage law by economist Dr. Wicks-Lim, the total cost to implement our legislation that will boost wages to \$15 an hour for more than 5500 workers, including 4000 home care workers, would be less than one percent of the overall annual county budget of \$1.4 billion in 2014-2015.



Marty Bennett, Co-Chair, North Bay Jobs with Justice
“University of Massachusetts economist Jeanette Wicks-Lim estimates that if the 2013 California Budget Project estimates were adjusted for 10 percent annual rent increases over the last two years, the hourly living wage rate would be \$22.12 for each of two parents working full-time to support two children. Hence we do not claim that \$15.00 an hour is an actual living wage, but it is certainly much closer to a living wage than the \$9.00 an hour state minimum or the \$11.65 an hour that County of Sonoma home care workers now earn. However, we think that \$15 an hour is fiscally possible for the County of Sonoma and would enable the County to proactively address the crisis of low-wage employment in the region.”

Cost Trade-Offs for IHSS Workers and the County of Sonoma

DECLAN WALSH SHARED MORE BACKGROUND ON THE IHSS PROGRAM AND THE DIFFERENT COMPETING COSTS OF THE PROGRAM:

In order to qualify to receive home care services, beneficiaries must be Medi-Cal-eligible, or in receipt of state or federal Social Security. If they are SSI eligible, beneficiaries receive on average 100 hours support per month. Clients of the program select their own caregiver. While the state pays the wages of caregivers, the client is considered the employer for their caregiver. The client is responsible for hiring, supervising, and firing the caregiver. IHSS processes payments to caregivers, including notification of share-of-cost (co-payment), if any. The client is in charge of supervision and signing the caregiver's time sheets....Sonoma's current hourly rate for IHSS workers, both the basic wage rate and the rate inclusive of health and other benefits, is the 7th highest in California; however, the County has not kept up with recent wage increases for IHSS workers in other counties, including Alameda, San Mateo, Santa Cruz, and San Francisco. Sonoma's cost of living is one of the highest in California (2nd only to Marin based on the percentage of income the average household spends on housing and transportation) and is a particularly challenging economic environment for low-wage workers in terms of meeting their basic needs. It is essential that the wage rate for IHSS workers in Sonoma County keeps pace with the County's high cost of living and the broader trend of wage increases for IHSS workers in comparable counties. Continuing to pay IHSS workers at a rate that is below a living wage keeps workers sentenced to poverty and increases costs to taxpayers.... Including IHSS providers in the Living Wage Ordinance would mean that approximately half their wage increase would be paid by the federal government. Increasing IHSS pay to \$15 would draw in nearly \$13 million of additional federal funds into the California economy. This infusion of federal funds could generate in the range of \$1.2 million in additional income and sales tax revenue since the increase in federal funds would go primarily to raising the earnings of IHSS workers. Second, raising IHSS pay rates to \$15 could produce a \$325,000 savings in Medi-Cal spending on subsidies to IHSS providers as their higher earnings reduce their need for public subsidies. Drawing down federal matching funds to the County would provide additional economic benefits to the local economy as IHSS workers purchase additional goods and services from local firms. Low-wage workers, such as home care aides and personal care aides, are more likely to spend extra earnings immediately for basic necessities. A higher wage for IHSS workers would improve IHSS

services and enable more low-income elderly and disabled adults to remain living at home. One impact of this would be reduced government spending on nursing-care facilities, providing the state with a financial incentive to re-negotiate its IHSS cost-sharing arrangement with the County. Since taxpayer dollars provide for the care of low-income adults who require high-level supports, each time such individuals choose to use IHSS services instead of living in a nursing-care facility the taxpayer experiences an overall cost saving. For example, at a \$15 living wage level, it is estimated that 150 fewer IHSS consumers would enter nursing homes annually as a result of the improved continuity of care resulting from higher-paid IHSS providers. Based on this estimate, state spending on nursing-care-facility services would fall by \$7.4 million. IHSS workers typically live on a shoestring budget and often cannot even afford to purchase generic over-the-counter medications for common ailments. This situation can place an unnecessary burden on tax-payer-funded public health clinics and programs, which end up having to treat IHSS workers who have a health condition that has deteriorated unnecessarily due to being unable to afford something as basic as Advil.

The Sonoma County Living Wage Ordinance and the Fight for \$15



Doug Jones, Political Organizer with SEIU-UHW

The County [of Sonoma] negotiator came back with a counter proposal that was insulting: their proposal provides a 20-cent increase in 4 years. Workers would move from \$11.65 to 11.85 by 2019. The County's proposal removes the health plan, which currently covers 400 workers. The Board of Supervisors has been clear that they would exclude home care workers from

the living wage ordinance because we are currently in bargaining and wanted to resolve the concept of a livable wage at the bargaining table. During the third and last bargaining session, the County was expecting us to bring a counter proposal. I reiterated that their first proposal was insulting and that we would not counter such an insulting proposal and we were expecting a serious proposal from the County.

Doug Jones, Political Organizer with SEIU-UHW, shared information on the current campaign for \$15 an hour for home care workers in Sonoma County as well as around the State of California and the nation. Doug began by sharing what was being proposed by SEIU-UHW (representing home care workers) in negotiations with the County of Sonoma:

SEIU-UHW's proposal was to get to \$15 an hour by 2017; \$13 an hour, immediately in 2015. Supervisor Shirlee Zane has publicly (during BOS meeting on June 9th) said that home care workers should at least be making \$13; \$14 an hour by July 1, 2016, and \$15 an hour by July 1, 2017. The County negotiator came back with a counterproposal that was insulting: their proposal provides a 20-cent increase in 4 years. Workers would move from \$11.65 to 11.85 by 2019. The County's proposal removes the health plan, which currently covers 400 workers. The Board of Supervisors has been clear that they would exclude home care workers from the living wage ordinance because we are currently in bargaining and wanted to resolve the concept of a livable wage at the bargaining table. Well, this proposal negates that commitment and insults the members of the living wage coalition that is comprised of labor, CBOs and clergy in the community. During the third and last bargaining session, the County was expecting us to bring a counterproposal. I reiterated that their first proposal was insulting and that we would not counter such an insulting proposal and we were expecting a serious proposal from the County. We spent most of the time talking about the transition to SEIU local 2015. The negotiator from 2015 was present--David Werlin. He will be the negotiator moving forward. Their next bargaining session is scheduled for October 5th and they will be working to settle an earlier date pending availability in dates. The contract expires on September 30, 2015.

Doug continued by sharing the context between the County and the State of California:

Sonoma claims that bargaining is due to move to the state anyway, so there is little incentive for the County to negotiate on wages. The reality: under the Coordinated Care Initiative (CCI) legislation enacted in 2012, there is a phased-in process for moving bargaining to the state.

The first 8 counties fell behind schedule by 2 to 3 years of the target date. Five counties are still in the enrollment process, one county has not yet begun, and one county withdrew from the demonstration. San Mateo is the only county to have completed enrollment and transitioned to collective bargaining under the Statewide Authority. The CCI requires legislative approval to approve the counties coming into the state. This means it will take work with the legislature every year to get this done. The governor has already flagged that the CCI is not generating the savings that were expected and has threatened to end the CCI (including statewide bargaining) if the savings to the state do not materialize. With all of these uncertainties, how can we say Sonoma will be at statewide bargaining by 2018?

How to Fund the \$15-an-Hour Wage Increase

Doug continued:

The Board of Supervisors recently set a county general-fund reserve policy of 15 percent, and in 2014-15 the reserve balance was 8 percent. The Board transferred \$5 million to reserves last year and tentatively agreed to add \$5 million to \$8 million annually over the next five years to reach the 15 percent reserve-level goal. Bay Area counties carry and average a reserve-level target of 10 percent. A number of counties, such as Marin, have set a reserve policy of 5 percent. A reserve-level goal of between 5 and 10 percent is considered prudent and earns the highest Double-A credit rating from Moody's Analytics. To fund the living wage law, the Board could reconsider its 15 percent reserve policy or stretch out the time frame from five to 10 years. Second, the County should freeze the hiring of managers. During and after the recent Recession, 580 line-staff positions were eliminated, along with 45 management positions, according to County data. Since 2011, 380 line-staff positions have been restored, as well as 75 management positions. There are currently 250 fewer line-staff positions than there were in 2007 but 30 more managers. The Board of Supervisors will likely place a measure on the 2016 ballot to increase the hotel-bed tax (or transient occupancy tax, TOT) from 9 percent to 12 percent.

Since Doug's testimony, the line-staff vs. management positions numbers have been updated according to the calculations of Earl Gwynne, a retired Sonoma County employee and SEIU 1021 union member. In 2015, there were 637.35 management positions, or an increase of 76.05 positions from 2007-2015. In 2015, there were 3,456 line-staff positions, with a decrease of 128.73 line-staff positions from 2007-2015.

Findings and Recommendations of the North Bay Workers' Rights Board

1. FINDINGS: Title II of the Americans with Disabilities Act (ADA) applies to “public entities” which include “state and local governments” and “any department, agency or special purpose district” [read Public Authority], and protects any “qualified person with a disability” from exclusion from participation in or denial of the benefits of services, programs, or activities of a public entity. In *Olmstead v. L.C.* [527 U.X 581] in 1999, the Supreme Court further clarified the ADA, ruling that states are required to eliminate unnecessary segregation of persons with disabilities and ensure that persons with disabilities receive services in the most integrated setting appropriate to their needs. Family-centered care assures that the dignity of the disabled is respected and protected, thus reflecting the intention of the *Olmstead* decision. Home care provides services to the elderly and disabled in the home and prevents home care recipients from moving to a nursing care facility or other institution. According to the findings of the University of Massachusetts, Political Economy Research Institute (PERI), fiscal impact report, the cost of providing home care is much less than the cost of institutionalization--a cost that would be passed on to the federal and state governments. According to PERI, the estimated cost of home care (for an individual IHSS worker employed, on average, 23 hours per week) at the \$15-an-hour wage rate mandated by the proposed Living Wage Ordinance, is around \$21,000 per year. The estimated cost of servicing a client in a skilled-nursing facility is \$92,000 per year, a cost difference of approximately \$71,000 per client.

For IHSS workers to effectively address the needs of the elderly and disabled in their homes and prevent the need for their clients to move to more expensive skilled nursing facilities, workers need further training and financial support. Home care workers do not simply do house cleaning, shopping, or meal preparation. They often have to manage their clients' critical and complicated medical needs, such as properly organizing and administering medication, providing critical medical procedures, and providing bathing for clients with moderate or severe physical disabilities. The County does not provide any meaningful training for IHSS workers, and the workers cannot afford to fund their own training. Moreover, the Board of Supervisors chose to exclude IHSS workers from the living wage legislation recommended by county staff. This decision undermines the ability of IHSS workers to provide the best service to their clients. According to the PERI report, when wages rise for IHSS workers, the IHSS program's stability and quality of services will increase and make it less likely that the elderly and/or disabled will need to move to a skilled-nursing facility or institution.

The Board of Supervisors seems to view home care services in a narrow, self-interested manner, as evidenced by its overall neglect of IHSS workers and apparent preference for institutional care at state cost, without regard to the overall cost savings to the California taxpayers in general and to

the Sonoma County residents in particular. This approach and attitude vitiates the long-standing California tradition of caring for the vulnerable and incapacitated on a county level, where more detailed supervision can be provided at a lower cost, and seems to be oblivious to the fact that Sonoma County residents are state and federal taxpayers as well.

RECOMMENDATION: The Board of Supervisors should conform to the letter and spirit of the ADA and the *Olmstead* decision by supporting IHSS workers with a sustainable, self-sufficient wage to reduce worker turnover and with more training, particularly in medical procedures, so that IHSS workers can more effectively provide for the care of recipients in the home for as long as possible. The Board of Supervisors should recognize the benefits of cost savings to the federal government, to the state, and consequently to the taxpayers of Sonoma County if program recipients remain in the home, and should, therefore, retain the age-old tradition of making counties the governmental units primarily responsible for providing care for the vulnerable and indigent.

2. FINDINGS: There has been a history of discrimination toward domestic workers and home care workers and a long struggle for the rights of these workers to receive the protections and the benefits of minimum wage and overtime regulations under the Federal Fair Labor Standards Act. Since domestic workers and home care workers have historically been women, home care work was viewed as “women's work.” The demographic make-up of IHSS workers indicates that the majority are women of minority status. According to PHI National, a non-profit research organization focusing on home and residential care, 85 percent of California's home care workers (including both personal care aides and home health aides) are women; 38 percent are Hispanic/Latino; 11 are percent African American; and 48 percent are foreign born. Keeping the IHSS workers at low wages manifests a fundamental gender and racial bias on the part of the Board of Supervisors. But more glaring is the fact that nearly half of IHSS workers are forced to rely on public assistance because of low wages. The Board of Supervisors is discriminating against women and people of color by excluding home care from the Living Wage Ordinance. Minorities in Sonoma County are especially vulnerable because they lack political power. Such blatant discrimination is morally reprehensible and should be politically embarrassing.

RECOMMENDATION: The Sonoma County Board of Supervisors should lead the way to abolish the practice of discriminating against women and people of color, who make up the majority of home care providers. The dignity of IHSS workers and their disabled clients needs to be fully respected and protected.

3. FINDINGS: As further evidence of discrimination toward

IHSS workers, Sonoma County staff continues to suggest that IHSS workers are not county employees. Consequently, the Board of Supervisors has failed to treat IHSS workers like other County employees and has not made IHSS a priority in their budget expenditures. Purposeful exclusion is tantamount to discrimination and perpetuates the historical discrimination toward domestic workers. However, the California Court of Appeals in *Guerrero v. Superior Court of Sonoma* found that the County and its Public Authority were joint employers of IHSS workers, and it rejected the contention that the County was not subject to state minimum-wage laws and the Industrial Welfare Commission Wage Order 15-2001.

RECOMMENDATION: The County Board of Supervisors must recognize and take responsibility for IHSS workers as County employees and must discontinue marginalizing and neglecting IHSS workers. The Board of Supervisors and County Staff must conform to the letter and spirit of the Court of Appeals decision in *Guerrero v. Superior Court of Sonoma County*.

4. FINDINGS: Approximately 4,000 IHSS workers currently receive a maximum wage of \$11.65 an hour. Only 1 in 8 workers receive health benefits. IHSS workers currently do not receive overtime pay, sick leave, or compensation for waiting for their clients in a doctor's office. IHSS workers often struggle to meet their own health needs or the health needs of their dependent family members. Many IHSS workers report that they often use their own money to support many of the needs of their clients. IHSS workers, who give care to their own adult children, do not pay into Social Security and thus are unable to save for their retirement needs. According to the California Budget Project, for two parents each working full-time to support two children, each parent must receive a wage of at least \$20 an hour to make ends meet and to not rely on public assistance.

The County Board of Supervisors claims that the County cannot afford to provide a living wage of \$15 an hour for IHSS workers. The County's total annual budget was \$1.4 billion in 2014-2015. The cost of providing a \$15-an-hour minimum wage for home care providers is approximately \$10.6 million, or less than 1 percent of the total County budget, according to economist Jeannette Wicks-Lim. Her report describes the impacts on the County budget as "modest" if home care worker wages were increased to \$15 an hour. Moreover, many other government entities across the nation and in the State of California facing similar budget challenges (such as Marin and San Francisco Counties) have prioritized wage increases for their IHSS employees through living wage and minimum wage ordinances. Another excuse that the Board of Supervisors has used to justify excluding IHSS workers from the proposed County Living Wage Ordinance is that in the near future the State will be addressing the pay and benefit issues of IHSS. However, Will Lightbourne, Director of the California Department of Social Services, has clearly stated: "Under current law, bargaining for the 51 non-CCI counties will remain at the county level."

Including IHSS workers in the \$15-an-hour County

Living Wage Ordinance will reduce worker turnover, promote increased training for caregivers, reduce the number of IHSS workers on public assistance, provide more personal and quality care for clients, and avoid the increased costs of institutionalization. To manage the cost of increasing IHSS wages to \$15 an hour the Board of Supervisors can: 1) phase in this line-item increase over a 2-to-3-year period to lessen the impact on the County budget; 2) modify its plan to provide a 15-percent budget reserve to a more realistic figure of 10 percent, in line with other counties; 3) freeze management salaries which have grown at a higher proportion than those of non-management county employees; and 4) utilize the proceeds from the potential Transit Occupancy Tax (the hotel and lodging bed tax) increase in 2016 from 9 percent to 12 percent.

RECOMMENDATION: The Board of Supervisors should provide a path to \$15 an hour, including benefits such as health care, sick leave and overtime pay, for its IHSS workers which reflects the goals of the County's Report, *The Portrait of Sonoma*, which clearly states: "Improving the pay and quality of such jobs [low wage service sectors] which employ many working adults in Sonoma County... is central to improving the well being in these communities." The Board of Supervisors regularly makes spending decisions that reflect its priorities and values. The board can prioritize a \$15-an-hour wage for County IHSS workers and thus highlight its humanitarian concerns for the neediest County employees.

5. FINDINGS: By claiming that the County cannot afford to pay IHSS workers a \$15 minimum wage, the Board of Supervisors is asserting the ideological position of austerity. Austerity policies keep wages and benefits low in order to balance a budget and are based upon the belief that austerity will renew economic growth. However, austerity has not brought about increased economic growth. It is a shortsighted approach to cut spending for health and human service in order to balance the budget on the backs of IHSS workers, rather than providing IHSS workers with a decent wage. On the contrary, many municipalities and counties across the State of California have prioritized raising the wages for low-wage workers by adopting minimum wage laws and living wage ordinances. Many elected officials in these cities and counties believe such policies yield beneficial economic results that accrue to the broader economy. The Board of Supervisors should 'prime the pump' and provide an economic stimulus for the local economy by substantially lifting the wages of home care workers. We urge members of the board not to view compensation for home care through the prism of austerity.

RECOMMENDATION: The Board of Supervisors should recognize the benefit of investing in their IHSS workers, and consequently the benefits to the local economy, by creating a path to \$15 an hour. If the wages of County of Sonoma IHSS workers are boosted to \$15 an hour, covered workers will spend the increased hourly wage in the local economy and at local

businesses for basic necessities, and will help the overall County economy to improve and grow. In addition, this policy will inevitably increase sales tax revenue to the County.

6. FINDINGS: The County Board of Supervisors did take some positive, but narrow, actions during the initial vote on the County Living Wage Ordinance. Originally the Blue Sky Consulting Group, who were hired by the Board of Supervisors to advise them on the Living Wage Ordinance, recommended \$13 an hour for workers to be covered in the Ordinance. The Board of Supervisors raised the wage from \$13 to \$15 an hour, and voted to include in the Ordinance workers employed by businesses contracted by the County, and to phase in workers employed by non-profit agencies contracted by the County. However, this positive, but limited, action has been overshadowed by the fact that the Board of Supervisors excluded four fifths of the low-wage workers, including IHSS workers.

The Board of Supervisors has also asserted the need to find a more sustainable solution to reduce poverty by investing in preschool and other effective educational programs so that more young people are better prepared to enter and succeed in college, and thus land better-paying jobs. This is commendable. However, education alone will not address the structures of income inequality. Education as a strategy to reduce poverty will not address the labor market projections by the California Employment Development Department that 40 percent of the new jobs created in Sonoma County between 2010 and 2020 will pay no more than \$15 an hour, and that home health aids and personal care aids are amongst the top 10 fastest growing job occupations. Simultaneously, there is a growing elderly population in Sonoma County and a growing demand for home care workers. As the Portrait of Sonoma County report points out, there is a much more direct way of reducing poverty in the County by ensuring “that all jobs, including those that do not require a college degree, pay wages that afford workers the dignity of self-sufficiency and the peace of mind of economic security.”

RECOMMENDATION: The Board of Supervisors should renegotiate the County Living Wage Ordinance to include IHSS workers. This provides the Board of Supervisors with the opportunity to act upon and restore its original good intention to reduce poverty in Sonoma County in conformity with its own Portrait of Sonoma County report. It is also recommended that the Board of Supervisors adopt a multifaceted strategy to address poverty, which includes the raising of wages for IHSS workers, the largest group of County employees and the fastest-growing low-wage occupation.

7. FINDINGS: Because of our growing aging population, there will be an ever more urgent need to expand the IHSS program in the future. It is estimated that nationally there will be needed one million additional home care workers by 2020. According to the California Employment Development Department (CEDD) estimates, the statewide demand for home care workers will increase by 46 percent by 2018. Translated to

numerical terms, this means that between 2008 and 2018 more than 200,000 home care jobs in California alone will be created due to growth and replacement. CEDD suggests that home care work is one of the top four fastest growing occupations in the state. If the purchasing power of this growing segment of the Sonoma County workforce is restricted by extremely low wages, and nearly half must depend upon public assistance due to low wages, there will be a very deleterious effect upon the County's economy as a whole.

RECOMMENDATION: The Board of Supervisors should exercise some prescience by authorizing the establishment of a special division within the County to provide a support system especially focused on the growing needs of the IHSS program in the future and provide ongoing education and training for IHSS workers now.

CONCLUSION

The North Bay Workers' Rights Board recommends that the Sonoma County Board of Supervisors: 1) support IHSS workers in effectively serving the needs of the elderly and disabled so that they can remain in their homes and communities as articulated in the ADA and Olmstead decision; 2) recognize and take responsibility for IHSS workers as County employees and stop perpetuating the historical prejudice and mistreatment of domestic workers, most of whom are women and persons of color, through benign neglect; 3) renegotiate the living wage ordinance and create a path to \$15 an hour for all low-wage workers, including IHSS workers; 4) stop promoting an austerity approach which balances the County budget on the backs of its low-wage workers; and 5) recognize the overall economic impact of the home-health industry on the County, along with its projected growth, by creating a special division within the County to serve the needs of the IHSS program.

The North Bay Workers' Rights Board recommends that the Board of Supervisors put into practice the ideals expressed in its Portrait of Sonoma County report by providing quality and consistent care for the aged and disabled of the County, which can be accomplished only by including the IHSS workers in the \$15 Living Wage Ordinance. Therefore, this Workers' Rights Board urges the County Board of Supervisors to work now with the Living Wage Coalition to create a path to \$15 an hour for its IHSS employees, and to incentivize the County Department of Human Services to provide programs of continuing education for its IHSS employees. This effort should not be viewed as a burden, but as an opportunity to meet its responsibility to serve the aging and disabled of Sonoma County, and thus serve the County as a whole.

**Note: This report is a slightly revised version of the report released on November 12, 2015. Some statistics were corrected, and some footnotes were added.*

The Workers' Rights Board



The Workers' Rights Board is a public forum where workers can bring complaints against employers for violating their human and legal rights in the workplace. The Board is particularly concerned with protecting the rights of low-wage workers, who are often women, immigrants, young workers, and workers of color as they strive for justice in their workplaces.

The Board is composed of 14 community leaders who intervene with employers and the public to help resolve situations that threaten workers' rights. The Board believes that safe, living wage jobs, where workers are not discriminated against for speaking up for their rights, are the backbone of any healthy community. To accomplish its goals, the North Bay Workers' Rights Board will attempt to resolve issues in a variety of ways.

North Bay Workers' Rights Board Members

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Citations for the Findings and Recommendations

¹ http://www.ada.gov/olmstead/olmstead_about.htm

² Dr. Wicks-Lim Fiscal Impact Report, An Assessment of the Fiscal Impact of the Proposed Sonoma County Living Wage Ordinance, page 19, www.northbayjobswithjustice.org.

³ Eileen Boris and Jennifer Klien – Caring for America: Home Care Workers in the Shadow of the Welfare State (Oxford, 2012) Chapters 1-3.

⁴ National Employment Law Project – Giving Caregivers a Raise: The Impact of a \$15 an Hour Floor in the Home Care Industry, February, 2015, <http://nelp.org/content/uploads/2015/03/Giving-Caregivers-A-Raise.pdf>.

⁵ Dr. Wicks-Lim Fiscal Impact Report, An Assessment of the Fiscal Impact of the Proposed Sonoma County Living Wage Ordinance, page 26, www.northbayjobswithjustice.org.

⁶ This is a quote from an email to the Workers' Rights Board of Sonoma County, 8/31/15.

⁷ Some of the Nation's Leading Economists Support \$15 an Hour Minimum Wage (http://www.budget.senate.gov/democratic/public/_cache/files/89efe4b6-8934-4375-bc96-758fcc791622/minimum-wage-petition-july-21.pdf).

⁸ Sonoma County Economic Development Board, 2015 Economic Indicators, pg. 5, http://edb.sonoma-county.org/pdf/unabridged-indicators_2015.pdf.

⁹ National Employment Law Project – Giving Caregivers a Raise: The Impact of a \$15 an Hour Floor in the Home Care Industry, February, 2015, <http://nelp.org/content/uploads/2015/03/Giving-Caregivers-A-Raise.pdf>.