



MEMORANDUM

To: Robin Stieler, Clerk of the Board
From: Supervisor Doug Chaffee, Fourth District
Date: 12/10/2019

Doug Chaffee

S32A

RE: Appoint Cynthia Williams to In-Home Supportive Services Advisory Committee

Supervisor Chaffee requests to add a Supplemental Item to the December 17, 2019 Board of Supervisors to appoint Cythia Williams to the In-Home Supportive Services (IHSS) Advisory Committee, Individual IHSS Provider – At Large seat.

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CLERK OF THE BOARD
ORANGE COUNTY
BOARD OF SUPERVISORS

Cynthia Nadine Williams

Education

Nursing Program (2 years) 1990 - 1992
Oxnard College & Camarillo State Hospital

Professional License/Certificate

- California Licensed Psychiatric Technician
- CPR and First Aid (Adult & Child)
- Leadership Academy Certificate

Experience

In-home Supportive Services 2006 - present

Caregiver

- Assist clients with daily activities of living such as cooking, bathing and cleaning.
- Accompany clients to medical appointments and therapies.
- Monitor vital signs and assist clients to take prescribed medications.
- Provides loving and compassionate support as a form of socialization.

Regional Center of Orange County 2008 - present

Parent Vendor

Accompany IHSS recipients to their recreational activities such as choir rehearsals, cooking and self-advocacy to promote socialization and providing basic needs during their activities.

Blind Children Learning Center 1996 - present

Volunteer

- Educate the community about the programs and services the center provides for students and parents.
- Assist with special events and fundraising activities.

Fairview State Hospital

1996 - 2015

Psychiatric Technician for State of California

RJ Donavan Correctional Facility

1996 - 1998

Psychiatric Technician for State of California

Camarillo State Hospital

1992 - 1996

Psychiatric Technician for State of California

Awards & Acknowledgements

- Fairview State Hospital – Employee of the Month

2001



APPLICATION FOR COUNTY OF ORANGE
BOARD, COMMISSION OR COMMITTEE

(FOR COUNTY USE ONLY)

Return to:

Clerk of the Board of Supervisors
333 West Santa Ana Blvd., Suite 465
Santa Ana, California 92701
Website: www.ocgov.com/gov/cob/

Instructions: Please complete each section below. Be sure to enter the title of the Board, Commission or Committee for which you desire consideration. For information or assistance, please contact the Clerk of the Board of Supervisor's Office at (714) 834-2206. Please print in ink or type. This application shall be maintained for a period of 1 year. After one year, it is necessary to file a new application for another year of eligibility.

BOARD, COMMISSION, OR COMMITTEE TO WHICH YOU ARE APPLYING FOR MEMBERSHIP:

Ihss advisory committee

SUPERVISORIAL DISTRICT IN WHICH YOU RESIDE: First Second Third Fourth Fifth

APPLICANT NAME AND RESIDENCE ADDRESS:

Cynthia

Nadine

Williams

First Name

Middle Name

Last Name

Street Address

City

State

Zip Code

Home Phone Number

Cell Phone Number

Business Address

CURRENT EMPLOYER:

IHSS Provider

OCCUPATION/JOB TITLE:

BUSINESS ADDRESS:

BUSINESS PHONE NUMBER:

ARE YOU A CITIZEN OF THE UNITED STATES: YES NO

NAME OF COUNTRY OF CITIZENSHIP:

ARE YOU A REGISTERED VOTER? YES NO

IF YES, NAME COUNTY YOU ARE REGISTERED IN:

EMPLOYMENT HISTORY: Please attach a resume which would be helpful in evaluating your application.

LIST ALL CURRENT PROFESSIONAL OR COMMUNITY ORGANIZATIONS AND SOCIETIES OF WHICH YOU ARE A MEMBER

ORGANIZATION/SOCIETY	FROM (MO./YR.)	TO (MO./YR.)
Regional Center of Orange County	2010	2018
Blind Children's Learning Center	1996	2018
Volunteered with Voices of Tustin Community Choir	2013	2018

WITHIN THE LAST FIVE YEARS, HAVE YOU BEEN AFFILIATED WITH ANY BUSINESS OR NONPROFIT AGENCY(IES)? YES NO

DO YOU OWN REAL OR PERSONAL PROPERTY OR HAVE FINANCIAL HOLDING WHICH MIGHT PRESENT A POTENTIAL CONFLICT OF INTEREST? YES NO

HAVE YOU BEEN CONVICTED OF A FELONY OR MISDEMEANOR CRIME SINCE YOUR 18TH BIRTHDAY, EXCLUDING ARRESTS OR DETENTIONS THAT DID NOT RESULT IN A CONVICTION; CONVICTIONS THAT HAVE BEEN JUDICIALLY DISMISSED, EXPUNGED OR ORDERED SEALED; AND CERTAIN MARIJUANA RELATED CONVICTIONS THAT ARE OLDER THAN TWO YEARS, AS LISTED IN CALIFORNIA LABOR CODE § 432.8 (INCLUDING VIOLATIONS OF CALIFORNIA HEALTH AND SAFETY CODE SECTIONS 11357(B) AND (C), 11360(C) 11364, 11365 AND 11550 - AS THEY RELATE TO MARIJUANA)? YES NO

IF YES, PLEASE EXPLAIN AND ATTACH ADDITIONAL SHEETS, IF NECESSARY.

PLEASE BRIEFLY EXPLAIN WHY YOU WISH TO SERVE ON THIS BOARD, COMMITTEE, OR COMMISSION. ATTACH ADDITIONAL SHEETS, IF NECESSARY.

I care for my daughter who is 25 yrs old and sister who is a Veteran as an IHSS provider. I am retired from 25 yrs working as a psychiatric Technician for state of California.

DATE: 12/12/18

APPLICANTS SIGNATURE: *[Signature]*

CLERK OF THE BOARD OF SUPERVISORS USE ONLY - DO NOT WRITE BELOW THIS LINE

Date Received: _____
 Date referred: _____
 To: BOS District 1 BOS District 2 BOS District 3 BOS District 4 BOS District 5
 All BOS BCC Contact