
WORK FIRST
Non-Discrimination Policy and Grievance Procedures

Change No: 1-2011

January 1, 2011

002 – NON DISCRIMINATION POLICY AND GRIEVANCE PROCEDURES

Change #1-2011

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I. Non-Discrimination Compliance

All Work First applicants and participants are entitled to information about their civil rights. They are also entitled to information about how to file a complaint if they believe they have been subjected to discriminatory treatment. The Division of Social Services has established procedures for ensuring fair and equitable treatment of applicants and recipients of Work First. Neither the State nor counties can discriminate against any applicant or participant for reasons of race, color, national origin, sex, religion, age, disability, or political beliefs in any aspect of program administration including, but not limited to:

- Eligibility Determination
- Issuance of Benefits
- Conduct of hearings; or
- Conduct of any program service or benefit

It is the policy of the Department of Health and Human Services to provide services, care, benefits and assistance to all qualified persons without regard to race, color, national origin, sex, religion, age, disability or political beliefs. Information can be obtained about regulations against discrimination and how to file a complaint by writing to:

North Carolina Department of Health and Human Services
Division of Social Services
Attention: Carlotta Dixon
Civil Rights Coordinator
325 N. Salisbury Street
2401 Mail Service Center
Raleigh, NC 27699-2401

II. County Responsibilities

Each county agency has the responsibility to:

- a. Publicize the grievance procedures and the non-discrimination policy.
- b. Display the complaint procedures flyer (DSS-5329) provided by the Economic and Family Services Section.

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- c. Ensure that participants and other low-income households have access to information regarding the rights of participants, nondiscrimination statutes and policies, and complaint procedures within ten days of the date of a request.
 - d. Advise applicants and participants of their rights under Title VI of the Civil Rights Act of 1964 and Section 504 of the Rehabilitation Act of 1973.
 - e. Include these requirements as part of the orientation and training for new staff and review with staff on an annual basis. Maintain attendance records for training and documentation of review efforts, including the names of staff involved in the review sessions.
- Note:** County agencies are subject to a Civil Rights Review as part of their regularly scheduled monitoring. County agencies are required to make available to the reviewer case files or other pertinent information necessary to complete the review.

III. Discrimination Grievance Procedures

Individuals who believe that they have been discriminated against on the basis of race, color, national origin, sex, age, religion, political beliefs or a disability have a right to file a complaint. The person alleging discrimination or a representative of the person may file the complaint. The county department of social services must explain the complaint system to each individual who expresses an interest in filing a discrimination complaint and advise the individual of the right to file a complaint.

Note: An individual's decision to file a complaint with the Office of Civil Rights (OCR) does not replace the individual's right to request a hearing.

- a. An individual must notify the Work First caseworker verbally or in writing if they requested an accommodation and believe they were not adequately accommodated. Within 7 workdays of the receipt of notification, the county should have a meeting to include the individual and/or his/her representative and appropriate staff. The county must notify the individual of the meeting's outcomes and decision in writing within 14 workdays from the date of the meeting.

Do not sanction or fail to release the cash assistance payment to the individual during the grievance period for failure to comply with the disputed activity. Rather, develop a Mutual Responsibility Agreement with appropriate activities that the individual can complete. To establish if an individual can participate in full or limited work activities, use healthcare information and other supporting documents provided by the participant and other sources (such as Vocational Rehabilitation, mental health agencies, etc).

The county may consider using the Child and Family Team meeting model during the grievance decision process.

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- b. Individuals, who believe they have been discriminated against on the basis of disability (including failure to provide reasonable accommodation), race, national origin (including the failure to provide access to services to people with limited English proficiency) may file a complaint with the Office of Civil Rights (OCR) at the U.S. Department of Health and Human Services. To file a complaint contact:

Director
Office for Civil Rights
U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Room 509F HHH Bldg.
Washington, D.C. 20201
202-619-0403 (voice) or 202-619-3257 (TTY)

Complaints to OCR must be filed within 180 days from the date of the alleged discrimination. OCR may extend the 180-day period if the person can show "good cause". A complaint form is available from OCR at <http://www.hhs.gov/ocr/civilrights/complaints/index.html>. The complaint can be filed online at OCRComplaint@hhs.gov, mailed or faxed to the regional office address as shown above.

- c. If the person chooses not to use the OCR complaint form, the written complaint must include:
1. Name, address, and telephone number or other means of contacting the person alleging discrimination.
 2. Location and name of the organization or office, accused of discriminatory practices.
 3. Nature of the incident, action, or the aspect of program administration that led the person to allege discrimination.
 4. Date on which the discriminatory actions occurred.
 5. Reason(s) for the alleged discrimination (race, color, national origin, sex, religion, age, disability, or political belief).
 6. Name, full address and telephone number of persons who may have knowledge of the alleged discriminatory act.
 7. Any other relevant information.
 8. Signature of the person making the complaint and date of complaint.

If the complaint is filed on someone's behalf, also provide the name of the person on whose behalf the complaint is being filed.

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The complaint may be mailed or faxed to Office of Civil Rights (OCR) regional office; or email the complaint to OCRComplaint@hhs.gov.

- d. If the individual verbally alleges that a discriminatory act was committed but the individual is unable or reluctant to put the allegations in writing, the OCR employee receiving the complaint will do so. Complaints filed by telephone call require the same information as needed for a written complaint.

The Office of Civil Rights accepts complaints even if the information is incomplete. However, investigations are conducted only if information concerning III.c. 2, 3, and 5 is provided.

The Office of Civil Rights determines the action to take on individual complaints in accordance with current laws and regulations.

- e. Notify the N.C. Department of Health and Human Services within five calendar days at the address below of any complaints of discrimination.

North Carolina Department of Health and Human Services
Division of Social Services
Attn: Carlotta Dixon
Civil Rights Coordinator
325 N. Salisbury Street
2401 Mail Service Center
Raleigh, N.C. 27699-2401