



Aitkin County Health and Human Services Comprehensive Civil Rights Plan (CCRP)

January 1, 2018

Aitkin County Health and Human Services

204 1st Street NW

Aitkin, MN 56431

218-927-7200

MN Relay Service: 711 or 800-627-3529

achhs@co.aitkin.mn.us

Title	Contact	Phone Number
Civil Rights Coordinator	Bobbie Danielson	218-927-7277 (Voice)
ADA Coordinator	Bobbie Danielson	218-927-7277 (Voice)
Limited English Proficiency Coordinator	Cynthia Bennet, Director	218-927-7225 (Voice)

This CCRP is posted in the lobby next to the reception desk.

Americans with Disabilities Act Advisory

This information is available in accessible formats to individuals with disabilities and for information about equal access to services, call 218-927-7200 TTY users place calls through MN Relay Service: 711 or 800-627-3529

An Equal Opportunity Employer

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1. Purpose

As a recipient of federal financial assistance, Aitkin County Health and Human Services is responsible for providing core services to assist and support Minnesota's most vulnerable individuals and families so they can meet their basic needs and be treated with respect and dignity. Aitkin County Health and Human Services has a CCRP to ensure that all eligible individuals receive equal access to program services and information. These programs are operated in a nondiscriminatory way, without regard to race, color, national origin, age disability, sex, sexual orientation, religion political beliefs, creed and public assistance status. In medical programs, sex includes sex stereotypes and gender identity under any health program or activity receiving federal funds. This CCRP also serves as a source of information for county agency staff and the general public. It sets out Aitkin County Health and Human Services' Civil rights administrative policies and procedures, identifying key contacts within the agency and linking the reader to applicable state and federal civil rights laws and resources.

2. Legal Authorities (See full list in Appendix, Attachment A)

1. Title VI of the Civil Rights Act of 1964 (race, color, national origin)
2. Section 504 of the Rehabilitation Act of 1973 (disability)
3. Section 508 of the Rehabilitation Act of 1973 (disability)
4. Title II of the Americans with Disabilities Act of 1990; State and local government services (disability)
5. Age Discrimination Act of 1975 (age)
6. Section 1557 of the Patient Protection and Affordable Care Act (added sex discrimination in health care programs)
7. Title IX of the Education Amendments of 1972 (sex)
8. Bilingual requirements in the Food Stamp Program, Food and Nutrition Service, U.S. Department of Agriculture
9. FNS Instruction 113-1, Civil Rights Compliance and Enforcement – Nutrition Programs and Activities, Food and Nutrition Service, U.S. Department of Agriculture (2005)

3. Civil Rights Contact

Aitkin County Health and Human Services designates Bobbie Danielson to serve as the agency's Civil Rights Contact, agency point person, on civil rights matters.

Bobbie Danielson, Aitkin County Human Resources Manager
307 2nd Street NW, RM 312
Aitkin, MN 56431
218-927-7277
MN Relay Service: 711 or 800-627-3529
bobbie.danielson@co.aitkin.mn.us

4. Equal Opportunity Policy and Procedure

It is the policy of Aitkin County Health and Human Services to make sure that program benefits and services are available to everyone and provided to all eligible individuals without discrimination, in compliance with civil rights laws.

Aitkin County Health and Human Services employees, services, programs, benefits and policies will not discriminate against applicants, clients or members of the public because of race, color, national origin, sex, sexual orientation, age, creed, religion, political beliefs, disability or public assistance status. "Sex" includes sex stereotypes and gender identity under any medical or health program receiving federal financial assistance, such as Medical Assistance, CHIP programs, health clinics, insurance companies and state health insurance exchanges.

This policy covers Aitkin County Health and Human Service's full range of services, programs and benefits, including, but not limited to, access to information about services, eligibility determinations and intake, admission procedures and treatment. The policy applies to the agencies and providers receiving federal and state funds under contracts, licenses and other arrangements with Aitkin County Health and Human Services, the Minnesota Human Rights Act also applies to the work of Aitkin County Health and Human Services and those agencies carrying out its programs.

Program Accessibility for People Disabilities

Aitkin County Health and Human Services and all of its services, programs and benefits, are accessible to and usable by people with disabilities, including people with hearing loss, low vision and other sensory disabilities. To avoid disability discrimination, Aitkin County Health and Human Services will:

- Notify the public about rights and protections for people with disabilities under the Americans with Disabilities Act
- Designate an ADA Contact and maintain a complain procedure
- Make sure that its buildings are physical accessible for people and disabilities
- Assist individuals with disabilities to apply and qualify for benefits based on their eligibility
- Provide appropriate auxiliary aids and services, including accessible formats, to ensure effective communication with people with disabilities
- Provide services, programs and benefits that are accessible to and usable by qualified people with disabilities.

Physical access includes:

- Convenient off-street parking designated specifically for people with disabilities
- Curb cuts and ramps between parking areas and the Aitkin County Health and Human Services building

- Level access into the first of the Aitkin County Health and Human Services building with elevator access to all other floors.

Reasonable Modifications to Policies, Procedures and Practices

Aitkin County Health and Human Services will make reasonable modifications to its policies, procedures and practices when necessary to avoid discrimination on the basis of disability, unless Aitkin County Health and Human Services can demonstrate that making the modifications would fundamentally alter the nature of the services, programs or benefits.

Effective Communication and Auxiliary Aids and Services

Aitkin County Health and Human Services will take appropriate steps to ensure that communications with people with disabilities and companions and disabilities are as effective as communications with others. To ensure effective communication, Aitkin County Health and Human Services will provide appropriate auxiliary aids and services, including accessible formats, so that people with disabilities can receive services, programs and benefits and participate in them in the same way as people without disabilities. Auxiliary aids and services include qualified readers, writers and interpreters who convey information effectively, accurately and impartially using any necessary specialized vocabulary.

To determine what types of auxiliary aids or services are necessary, Aitkin County health and Human Services will give primary consideration to the requests of people with disabilities. Aitkin County Health and Human Services will honor the choice of the person requesting the auxiliary aid or service unless it would fundamentally alter the nature of the service, program or benefit or cause an undue administrative or financial burden. If this happens, Aitkin County Health and Human Services will find another equally effective auxiliary aid or service.

5. Civil Rights Complaint Procedure

You have the right to file a discrimination complaint with Aitkin County Health and Human Services if you believe you have been treated in a discriminatory way. It is against the law for any human services agency to discriminate against applicant's clients or members of the public because of race, color, national origin, creed, religion, sexual orientation, public assistance status, age, disability or sex (including stereotypes and gender identity under any health program or activity receiving federal financial assistance).

Aitkin County Health and Human Services will refer all civil rights complaints to the Minnesota Department of Human Services (OHS).

Complaints must be in writing unless you need special help. Contact our office or contact OHS directly through its civil rights Coordinator to get complaint forms.

The person filing the complaint may appeal the decision by writing to the agency Civil Rights Contact within 15 days of receiving written decision. The Civil Rights Contact will issue a written decision in response to the appeal, no later than 30 days after filing. This decision is final. This appeal process is not the same as filing a fair hearings appeal with the Department of Human Services' Appeals and Regulations Division.

Civil Rights Contact

Bobbie Danielson, Aitkin County Human Resources Manager
307 2nd Street NW, RM 312
Aitkin, MN 56431
218-927-7277
MN Relay Service: 711 or 800-627-3529
bobbie.danielson@co.aitkin.mn.us

Or Contact

OHS Civil Rights Coordinator
Minnesota Department of Human Services Office of Equal Opportunity
PO Box 64997
St. Paul MN 55164-0997
651-433-3040 (Voice) or use your preferred relay service
651-431-7444 (Fax)

You also have the right to file a discrimination complain directly with the Minnesota Department of Human Rights, and the federal agencies that operate the benefits programs.

The Minnesota Department of Human Rights prohibits discrimination in public services programs because of race, color, national origin, creed, religion, disability, sex, sexual orientation, or public assistance status. Contact the agency directly:

Minnesota Department of Human Rights
Freeman Building
625 North Robert Street
St. Paul, MN 55155
651-539-1100 (Voice)
800-657-3704 (Toll Free)
711 or 800-627-3529 (MN Relay)

The U.S. Department of Health and Human Services Office for Civil Rights prohibits discrimination in its programs because of race, color, national origin, age, disability, religion

and sex (including sex stereotypes and gender identity under any health program or activity receiving federal financial assistance). Contact the agency directly:

U.S. Department of Health and Human Services Office of Civil Rights Region V
233 North Michigan Avenue
Suite 240
Chicago, IL 60601
312-886-2359 (Voice)
800-368-1019 (Toll Free)
800-537-7698 (TTY)

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering ISDA programs are prohibited from discriminating based on race, color, national origin, sex, religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for programs information (e.g. Braille, large print, audio tape, American Sign Language, etc.) should contact the Agency (State of Aitkin County) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Services at 800-877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) <http://ascr.usda.gov/ad-3027-usda-program-discrimination-complaint-form>, and online at http://www.ascr.usda.gov/complaining_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all the information requested in the form. To request a copy of the complain form, call 866-632-9992. Submit your completed form or letter to USDA by:

Mail:

U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue SW
Washington, D.C. 20250-9410

Fax:
202-690-7442

Email:
Program.intake@usda.gov

6. Disability Compliance

- a. **Disability Law and Standard of Access for State and Local Government Services Section 504 of the Rehabilitation Act of 1973** protects qualified individuals with disabilities from discrimination based on their disability in federally funded programs and services.
- b. **Title II of the Americans with Disabilities Act of 1990 (Title II of the ADA)** protects qualified individuals with disabilities from discrimination on the basis of their disability when the discrimination occurs in state or local government services. An agency does not have to receive federal financial assistance to be required to comply with Title II of the ADA. An agency just has to be a state or local government entity.

County human services agencies must ensure that people with disabilities are able to use their programs and services. Disability laws set out an equal access standard for providing services. This means that individuals with disabilities are entitled to equal access to human services programs; the same standard of access that applies to people without disabilities.

A public agency must reasonably modify its policies, procedures and practices to avoid discrimination. A public agency must also take appropriate steps to ensure that its communications with individuals with disabilities are as effective as communications with others.

- c. **ADA Contact** – Aitkin County Health and Human Services has designated an ADA Contact person to serve as its point person on disability matters raised by applicants, clients and members of the public. ADA Contact information is located on the cover page of the CCRP.
- d. **Disability Complaints** – People filing disability complaints will use Aitkin County Health and Human Services civil rights complain procedure.
- e. **ADA Notice Document** – Aitkin County Health and Human Services will use the OHS brochure: *Do you have a disability (DHS-4133-ENG)* as its ADA notice document. This notice document informs applicants, clients and members of the public that Aitkin County Health and Human Services does not discriminate on the basis of disability. The notice document also gives information to the public about the rights of people with disabilities under the American with Disabilities Act.

Aitkin County Health and Human Services has a copy of **OHS** brochure: *Do you have a disability (DHS-4133-ENG)* posted in the lobby.

A Copy of the OHS brochure: *Do you have a disability (DHS-4133-ENG)* is located in the Appendix; Attachment C

- f. **Disability Policy Prohibiting Discrimination** – The Aitkin County Health and Human Services Equal Opportunity Policy and Procedure includes provisions which prohibit disability discrimination in human service programs. This policy is located in the agency lobby.

7. Limited English Proficiency Plan

Aitkin County completed a review of its LEP in February 2018 and no change was required. The plan contains points of contact, list of resources, processes for accessing language line assistance and interpreting services, notice of rights, affirmative action, complaint resolution procedures, and provision for vigilant monitoring plan. This plan is incorporated into the comprehensive civil rights plan as Attachment C.

The LEP plan can be viewed on or printed from the Aitkin County website at ww.co.aitkin.mn.us (see table of contents) and one copy is on display in the front lobby at the Health and Human Services Department.

Limited English Proficiency Coordinator

Cynthia Bennett, Aitkin County Health and Human Services Director
204 1st Street NW
Aitkin, MN 56431
218-927-7225
MN Relay Service 711 or 800-627-3529
cynthia.bennett@co.aitkin.mn.us

8. Annual Civil Rights Training for the Supplemental Nutrition Assistance Program (SNAP)

Aitkin County Health and Human Services conducts annual SNAP civil rights training for all staff who administer the SNAP program and all staff who have direct contact with the public, such as support staff, supervisors and managers. Aitkin County Health and Human Services will use OHS' PowerPoint presentation to train staff, document the date of the training each year and document who attends the training. The training has been sent to each employee to review on their own and are required to complete a training completion certificate. As of 2017 and ongoing, all Aitkin County Health and Human Services staff are required to attend a training of the OHS PowerPoint by December 31st of each year.

9. Civil Rights Assurance of Compliance

The Aitkin County Health and Human Services director and county attorney representative have signed the 2017 Civil Rights Assurance of Compliance. A copy is located in the Appendix; Attachment D.

10. CCRP Administration

Aitkin County Health and Human Services Will:

- Post a copy of its CCRP in the agency lobby where members of the public can review it and in the employee break room where staff can review it
- Post the CCRP on the agency's public website

- Review the CCRP annually with ALL staff
- For the benefits of applicants, clients and members of the public, prominently post in the lobby a copy of the equal opportunity policy and procedure that includes provisions prohibiting disability discrimination and a copy of its civil rights complain procedure
- Post a copy of the OHS brochure: Do you have disability (DHS-4133-ENG) in the lobby next to the reception desk
- Conduct annual SNAP civil rights training for all staff who administer the SNAP program and all staff who have direct contact with the public, including support staff, supervisors and managers. Aitkin County Health and Human Services will document the date of the training each year and document who attends the training.

11. Appendix

Attachment A – Full list of Legal Authorities

Attachment B – Disability Brochure; DHS-4133-ENG

Attachment C – Aitkin County Health and Human Services Limited English Proficiency Plan

Attachment D – 2018 Civil Rights Assurance of Compliance

Full List of Legal Authorities

Federal

1. Title VI of the Civil Rights Act of 1964 (race, color, national origin)
2. Section 504 of the Rehabilitation Act of 1973 (disability)
3. Section 508 of the Rehabilitation Act of 1973 (disability)
4. Title II of the Americans with Disabilities Act of 1990; State and local government services (disability)
5. Age Discrimination Act of 1975 (age)
6. Community Service Assurance Provision of the Hill-Burton Act (health facilities receiving Hill-Burton Funds)
7. Section 1557 of the Patient Protection and Affordable Care Act (added sex discrimination in health care programs)
8. Nondiscrimination Provisions of the Omnibus Budget Reconciliation Act of 1981 (Federal Block Grants)
 - Community Services Block Grant (race, color, national origin, sex)
 - Remaining Block Grants (race, color, national origin, age, disability, sex, religion)
 - Social Services Block Grant
 - Maternal and Child Health Services Block Grant
 - Projects for Assistance in Transition from Homelessness Block Grant
 - Preventative Health and Human Services Block Grant
 - Community Mental Health Services Block Grant
9. Title IX of the Education Amendments of 1972 (sex)
10. Family Violence Prevention and Services Act (race, color, national origin, age, disability, sex, religion)
11. Food Stamp of 1977
12. Nondiscrimination Compliance Requirements in the Food Stamp Program, Food and Nutrition Service, U.S. Department of Agriculture
13. Bilingual requirements in the Food Stamp Program, Food and Nutrition Service, U.S. Department of Agriculture
14. FNS Instruction 113-1, Civil Rights Compliance and Enforcement – Nutrition Programs and Activities, Food and Nutrition Service, U.S. Department of Agriculture (2005)

State

Minnesota Human Rights Act, Chapter 363A

Local

Aitkin County Affirmative Action Plan and Equal Employment Policy Aitkin County Personnel Rules and Policies

Do you have a disability?

If you have a disability, you have the same rights as others.

Attachment B

Please tell us if you have a disability so we can help you access county or Tribal nations human services benefits and services.

What medical conditions may be disabilities?

A disability is a physical, sensory, or mental impairment that materially limits a major life activity.

Types of disabilities may include:

- Diseases like diabetes, epilepsy or cancer
- Learning disorders like dyslexia
- Developmental delays
- Mental health conditions
- Hearing loss or low vision
- Movement restrictions like trouble with walking, reaching or grasping
- History of substance use disorder, although current illegal drug use is not a disability.

If you are asking for or are getting benefits through either a county human services agency or the Minnesota Department of Human Services, that office will let you know if you have a disability based on information from you and your doctor.

What help is available?

If you have a disability, your county or the state human services agency can help you by:

- Calling or meeting with you in another place if you are not able to come into the office
- Using a sign language interpreter

- Giving you letters and forms in other formats like computer files, audio recordings, large print or Braille
- Telling you the meaning of the information we give you
- Helping you fill out forms
- Helping you make a plan so you can work, even with your disability
- Sending you to other services that may provide help
- Helping you to appeal agency decisions if you disagree with them.

You will not have to pay extra for help. If you want help, ask your agency as soon as possible. An agency may not be able to accommodate requests made within 48 hours of need.

How does the law protect people with disabilities?

The Americans with Disabilities Act (ADA) and the ADA Amendments Act are federal laws, and the Minnesota Human Rights Act is a state law. Each gives individuals with disabilities the same legal rights and protections as people without disabilities, including access to public assistance benefits. You will not be denied benefits because you have a disability. Your benefits will not be stopped because of your disability. If your disability makes getting benefits hard for you, your county human services agency will help you access all of the programs that are available to you.

Civil Rights Notice

Discrimination is against the law. The Minnesota Department of Human Services (DHS) does not discriminate on the basis of any of the following:

- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- marital status
- age
- disability
- sex
- political beliefs

Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by a human services agency.

Contact **DHS** directly only if you have a discrimination complaint:

Civil Rights Coordinator
Minnesota Department of Human Services
Equal Opportunity and Access Division
P.O. Box 64997
St. Paul, MN 55164-0997
651-431-3040 (voice) or use your preferred relay service

Minnesota Department of Human Rights (MDHR)

In Minnesota, you have the right to file a complaint with the MDHR if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- religion
- creed
- sex
- sexual orientation
- marital status
- public assistance status
- disability

Contact the **MDHR** directly to file a complaint:

Minnesota Department of Human Rights
540 Fairview Avenue North, Suite 201
St. Paul, MN 55104
651-539-1100 (voice) 800-657-3704 (toll free)
711 or 1-800-627-3529 (MN Relay)
651-296-9042 (fax)
Info.MDHR@state.mn.us

U.S. Department of Health and Human Services' Office for Civil Rights (OCR)

You have the right to file a complaint with the OCR, a federal agency, if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- age
- disability
- sex
- religion

Contact the **OCR** directly to file a complaint:

Office for Civil Rights
U.S. Department of Health and Human Services
Midwest Region
233 N. Michigan Avenue, Suite 240
Chicago, IL 60601
Customer Response Center:
Toll-free: 800-368-1019 TDD Toll-free: 800-537-7697
Email: ocrmail@hhs.gov

U.S. Department of Agriculture

You have the right to file a complaint with the USDA, a federal agency, if you believe you have been discriminated against because of race, color, age, sex, national origin, disability, religious creed or political beliefs in the administration of SNAP.

In accordance with Federal civil rights law and **U.S. Department of Agriculture (USDA)** civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](#), (AD-3027) found online at http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992.

Submit your completed form or letter to USDA by:

1. mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
2. fax: (202) 690-7442; or
3. email: program.intake@usda.gov.

(Do Not Send Applications Here)

This institution is an equal opportunity provider.

Attention. If you need free help interpreting this document, ask your worker or call the number below for your language.

ያስተውሉ፡ ይህንን ዶክመንት ለመተርጎም እርዳታ የሚፈልጉ ከሆኑ፡ የጉዳዩን ሰራተኛ ይጠይቁ ወይም በሰልክ ቁጥር 1-844-217-3547 ይጻፉ።

ملاحظة: إذا أردت مساعدة مجانية لترجمة هذه الوثيقة، اطلب ذلك من مشرفك أو اتصل على الرقم 1-800-358-0377.

သတိ: ဤစာရွက်စာတမ်းအားအခမဲ့ဘာသာပြန်ပေးခြင်း အကူအညီလိုအပ်ပါက၊ သင့်လူမှုရေးအလုပ်သမား အားပေးခြင်း ခြင်းသို့ မဟုတ် 1-844-217-3563 ကိုခေါ်ဆိုပါ။

ຄំណត់ລັກດັບ 1 ເມີນຊຸກຍູ້ການຄຸ້ມຄອງການບໍ່ໄປແກ່ສາມາດເຂົ້າເຖິງສາມາດເຮັດໄດ້ ລູກສູນຊຸກຍູ້ສຳລັບຄຸ້ມຄອງ ມາດຕະການ ຫຼື ມາດຕະການອື່ນ 1-888-468-3787 1

請注意，如果您需要免費協助傳譯這份文件，請告訴您的工作人員或撥打1-844-217-3564。

Attention. Si vous avez besoin d'une aide gratuite pour interpréter le présent document, demandez à votre agent chargé du traitement de cas ou appelez le 1-844-217-3548.

Thov ua twb zoo nyeem. Yog hais tias koj xav tau kev pab txhais lus rau tsab ntaub ntawv no pub dawb, ces nug koj tus neeg lis dej num los sis hu rau 1-888-486-8377.

ဟ်သုဉ်ပာ်သးဘဉ်တက့ၢ်. ဝဲန့ၢ်လိဉ်ဘဉ်တၢ်မၤစၢၤကလိလၢတၢ်ကက့ၢ်တံဝဲဘဉ်လၢ် တီလၢ်မိတခါအံၤန့ၢ်,သံက့ၢ်ဘဉ်ပုၤဂ့ၢ်စီအပုၤမၤစၢၤတၢ်လၢန့ၢ်မုတ မုၢ်ကိးဘဉ် 1-844-217-3549 တက့ၢ်.

알려드립니다. 이 문서에 대한 이해를 돕기 위해 무료로 제공되는 도움을 받으시려면 담당자에게 문의 하시거나 1-844-217-3565으로 연락하십시오.

ໂປຣດຊາບ. ຖ້າຫາກ ທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການແປເອກະສານນີ້ພໍດີ, ຈົ່ງຖາມພະນັກງານກຳກັບການຊ່ວຍເຫຼືອຂອງທ່ານ ຫຼື ໂທສໂປທີ່ 1-888-487-8251.

Hubachiisa. Dokumentiin kun tola akka siif hiikamu gargaarsa hoo feete, hojjettoota kee gaafadhu ykn afaan ati dubbattuuf bilbili 1-888-234-3798.

Внимание: если вам нужна бесплатная помощь в устном переводе данного документа, обратитесь к своему социальному работнику или позвоните по телефону 1-888-562-5877.

Digniin. Haddii aad u baahantahay caawimaad lacag-la'aan ah ee tarjumaadda qoraalkan, hawladeenkaaga weydiiso ama wac lambarka 1-888-547-8829.

Atención. Si desea recibir asistencia gratuita para interpretar este documento, comuníquese con su trabajador o llame al 1-888-428-3438.

Chú ý. Nếu quý vị cần được giúp đỡ dịch tài liệu này miễn phí, xin gọi nhân viên xã hội của quý vị hoặc gọi số 1-888-554-8759.

09/30/18T



For accessible formats of this information, ask your county worker. For assistance with additional equal access to human services, contact your county's ADA coordinator. ADA4 (2-18)



Limited English Proficiency Plan

Effective Date: 05/01/2001

Board Approved: 06/26/2001

Last Reviewed and Updated: 02/2018

Policy:

Aitkin County Health and Human Services (ACHHS) is committed to assuring equal access to services for all persons, regardless of race, color or national origin, including those persons with Limited English Proficiency (LEP). The following document will outline the strategies and procedures to be taken to ensure that persons receive the language assistance necessary to afford them meaningful access to their services, free of charge.

Attachments:

Language Line Questions and Answers
Helpful Hints for Using Interpreter Services
Language ID Brochure
"I Speak ... Language Identification Guide"

1. Background

Title VI of the Civil Rights act of 1964, 42 U.S.C. 2000d et.seq. and its implementing regulation at 45 CFR Part 80 provide that no person shall be subjected to discrimination on the basis of race, color or national origin under any program or activity that receives Federal financial assistance. On August 30, 2000, the Department of Health and Human Services, Office for Civil Rights, issued a Policy Guidance on the Prohibition Against National Origin Discrimination as It Affects Persons with Limited English Proficiency. [65 Fed. Reg. 52762 (2000)].

This policy is created in response to Bulletin #00-89-4 from the Minnesota Department of Human Services, requiring each County Social Services Agency to develop and implement a plan to assure compliance with those federal requirements.

2. Definitions

Interpretation: a spoken or visual explanation provided to help two or more people who do not speak the same language to communicate with each other.

Translation: A written version of a document provided in a different language than the original document.

Vital Documents: According to the Office of Civil Rights, a vital document includes, but is not limited to, applications, consent forms, letters containing information regarding eligibility or participation criteria, notices pertaining to the reduction, denial, or termination of services or benefits, notices that require a response from beneficiaries, and documents that advise of free language assistance.

3. Assessment

ACHHS used the following mechanisms to assess unique language needs in Aitkin County:

- Local Agency Survey. Administrative staff indicated that the need for LEP services has historically been very limited. Most bilingual contact has been misdirected calls to our county. The following non-English languages have been identified as being the most likely to be encountered in Aitkin County: Spanish & Russian.
- School District Data: This data indicates that Aitkin County has few individuals with LEP.
- Other Data Sources. The Legal Aid office in Brainerd, MN reported no multilingual requests for Aitkin County in the last year.

As information becomes available through the Minnesota Department of Human Services or other resources, ACHHS will modify its policies and procedures as appropriate.

4. Needs for Language Assistance and Resources

Case finding. Specific language needs of each applicant with LEP will occur at the time of intake or application. This will primarily be done by reviewing the language preference questions on the DHS-3876 Minnesota Health Care Programs Application for Certain Populations, DHS-6696 Application for Health Coverage & Help Paying Costs, DHS-5223 Combined Application Form. If an Office Support Specialist or intake person on the Social Services staff suspects that an applicant is a person with LEP, the worker will present the LEP person with a card that lists the eight major languages in order to determine which language is involved, if any. Spoken and written language preference and interpreter request will be entered in the MAXIS and METS systems or noted on the Social Services application. Translated forms will be offered to anyone who wants or needs assistance.

Point of Contact: The highest likelihood of need for interpreter services will be at the intake of an application for financial assistance or social services. Currently, intakes are completed at the agency main office in Aitkin. Interpreter services may be necessary to complete an application for services, financial assistance or incoming phone calls. Another likely point of contact is field-based when conducting child protection or vulnerable adult assessments, commitment pre-screenings or nursing home pre-admission screenings. These contacts would typically occur in a medical setting or a person's home.

Offering Language Assistance: Staff will initiate an offer for language assistance to clients who appear to have difficulty communicating in English, or when a client asks for language assistance.

Whenever possible, staff are encouraged to follow the client's preferences. For example, if a client wants a family member or friend to interpret rather than using an agency-contracted interpreter, staff should allow this if doing so will not violate the client's data privacy rights and the friend/family member can demonstrate that he/she is competent to interpret. The worker will need to document in the case file the circumstances for use of family or friends, particularly that the family was offered other interpreter services and that the client insisted that a family member or friend be used. Under no circumstances may minor children be used for interpreter services. Staff must offer free interpretation and/or translation services to persons with LEP in a language they understand, in a way that preserves confidentiality, and in a timely manner.

Resources: ACHHS will use the following resources to assist LEP clients:

- DHS-4739 Interpreter Cards in the eighteen most common languages will be available at reception desks and with all intake staff to assist clients in identifying their primary language.
- The Minnesota Department of Human Services has translated the most commonly used forms in multiple languages at <https://mn.gov/dhs/general-public/publications-forms-resources/edocs/> for all staff to access to support LEP individuals.
- AT&T Language Line Services, 1-800-367-9559, provides 24-hour phone interpretation services in over 140 languages.
- Other interpretation services vendors contracted with the Minnesota Department of Administration can be accessed as necessary. See Section V.B.3 for website information.

Assisting Clients That Do Not Read Their Language

Staff must assist a client with LEP who does not read his/her primary language to the same extent as staff would assist an English speaker who does not read English.

5. Procedures for Using Interpretation

Verification of Client's Identity

ACHHS staff should continue the existing practice of verifying the identity of the client before releasing case specific information. Bilingual staff, Language Line staff, or other private companies providing interpretation or translation services through contracts with the State (hereafter called "contractors") may be used in making verifications.

Language Assistance Resources-Order of Preference

As much as possible, staff should use the language assistance services in the order set out below. Please check with your supervisor before using any service other than internal bilingual staff.

- Bilingual Staff

Aitkin County currently does not employ any bilingual staff.

- Telephone Interpreter Services

Staff should use the AT&T Language Line Services for interpreter assistance when a bilingual staff person familiar with that language is not available. Attachment 1 contains information on how to access the Language Line. Attachment 2 contains helpful hints on how to use telephone interpreters.

- Using Family and/or Friends as Interpreters

Staff are asked to accommodate clients' wishes to have family or friends serve as interpreters whenever possible. However, staff must keep in mind both client confidentiality and interpreter competency and should follow the rules set below.

ACHHS may expose itself to liability under Title VI if it requires, suggests, or encourages a client with LEP to use friends, minor children, or family members as interpreters because they may not be competent to serve in that role. They may not be proficient enough in both languages, may lack training in interpretation, and/or have little familiarity with specialized program terminology.

Use of family or friends could result in a breach of confidentiality or reluctance on the part of clients to reveal personal information critical to their situations.

If a client still prefers a family member or friend to interpret after the offer of free interpreter services by the county, they may be used as long as doing so does not compromise the effectiveness or confidential nature of the communication. Staff should document their offer of interpreter assistance and the client's decision to decline the service in the case file.

Bilingual staff or contracted interpreters should be used in circumstances where a client is giving information that may negatively impact his/her eligibility for services—e.g. deadlines or certifications. They should also be preferred in situations where a client must answer complicated or detailed questions. Although these situations can be handled by family or friends, they should also be referred to bilingual staff, Language Line or contractors for follow-up calls or letters.

- Minor Children as Interpreters

Staff should never use minor children as interpreters.

6. Notice of Rights to Language Assistance

ACHHS will use “I Speak” cards and prominently displayed “I Speak” information to inform all clients of the availability of free interpreter services. The public will be informed that free interpreter services will be provided in a timely manner and during regular business hours.

7. Translation of Agency Forms and Documents

State Produced Documents

For Financial Services programs, the State has translated many documents into multiple languages. These forms can be found at <https://mn.gov/dhs/general-public/publications-forms-resources/edocs>.

Local Agency Documents

ACHHS will translate vital documents and relevant information into non-English languages when a significant number or percentage of the population eligible to be served needs documents in that language in order to communicate effectively. ACHHS has determined that the significant number that will trigger translation is 1000 individuals within an LEP language group. Vital documents are defined in section II of this policy.

8. LEP Training for Staff

ACHHS will distribute the LEP policy/plan to all staff so they can learn the policies and procedures required to make language assistance available to clients with LEP. All staff with ongoing client contact will be informed of the policy at their unit meetings. New employees will receive information regarding LEP and a copy of the policy during new employee orientation.

LEP training will include information on the following topics:

- The legal obligation to provide language assistance to clients with LEP
- The substance of Aitkin County LEP plan
- Process to access language assistance services
- Tips on working with interpreters
- How to properly document information about a client’s language needs in the case file

9. Monitoring of the LEP Plan

An annual evaluation of the LEP plan will include the following activities:

- Assessment of the numbers of persons with LEP in the service delivery area
- Determination if existing language assistance services are meeting the needs of clients with LEP
- Annual training with staff to ensure knowledge of the county’s LEP plan and processes, how to carry them out and whether language assistance resources and arrangements for those resources remain current and accessible.

- Seeking feedback from LEP communities, including clients, community organizations and advocacy groups working with local LEP communities, about the effectiveness of the LEP plan.

10. Availability of LEP Plan to the Public

The LEP plan will be available to anyone on request. The “I Speak” information in the lobby of ACHHS will inform the public of their right to request a copy. The LEP plan will be in English, translation will be made available on request at no charge for anyone wishing to read it.

11. Responsible Authority/Complaint Process – Contract Persons

Each division within ACHHS is responsible for implementing the LEP plan in its area. The contact persons designated to provide technical assistance and respond to inquiries and complaints from the public are listed below. ACHHS will use existing civil rights complaint resolution procedures to resolve any LEP-related disputes/complaints. The LEP Coordinator will provide information about this process to all clients with a complaint. The information will be in a language that they will understand.

LEP Coordinator	Human Services Director	218-927-7200
Social Services Contact	Social Services Supervisor	218-927-7200
Financial Assistance Contact	Financial Assistance Supervisor	218-927-7200

Instructions for AT&T Language Line Interpreter Services

Following are instructions on how to use the Language Line Over-the phone Interpretation Service. Please make sure that you are familiar with the phone conference features on your phone before using the service. To hear a free recorded demonstration of typical call scenarios, call 1-800-821-0301.

OUTBOUND CALLS	INBOUND CALLS
1. DIAL Language Line Services at 1-800-874-9426.	1. PLACE the non-English speaker on CONFERENCE HOLD .
2. GIVE the Answer Point the Account Information <ul style="list-style-type: none"> • Language Needed <input type="checkbox"/> Our I.D. # (509052) • Our Name: Aitkin County Health & Human Services • Personal Code #465424 	2. DIAL Language Line Services at 1-800- 874-9426.
3. WAIT for the Answer Point to CONFERENCE IN your Interpreter.	GIVE the Answer Point the Account Information <ul style="list-style-type: none"> • Language Needed <input type="checkbox"/> Our I.D. # (509052) • Our Name: Aitkin County Health & Human Services • Personal Code #465424
4. BRIEF YOUR INTERPRETER on the nature of the call. Summarize what you want to accomplish and give any special instructions.	4. ADD NON-ENGLISH SPEAKER to the line.
5. ADD NON-ENGLISH SPEAKER to the line. <ul style="list-style-type: none"> • For Domestic calls, AT&T will place the call for you at no extra charge. • For International calls, they will need to bill long distance charges to a calling card or to a third party. 	5. WAIT for the Answer Point to CONFERENCE IN your interpreter.

Aitkin County Health and Human Services Helpful Hints for Using Telephone Interpreters

1. Tell the interpreter the purpose of your call – describe the type of information you are planning to convey.
2. Enunciate your words and try to avoid contractions, which can be easily misunderstood as the opposite of your meaning. e.g. “can’t–cannot”.
3. Speak in short sentences, expressing one idea at a time.
4. Speak slower than your normal speed of talking, pausing after each phrase.
5. Avoid the use of double negatives. e.g. “If you don’t appear in person, you won’t get your benefits.” Instead, “You must come in person in order to get your benefits.”
6. Speak in the first person. Avoid the “he said/she said.”
7. Avoid using colloquialisms and acronyms, e.g. “MFIP”, “HCAPP”, and “CD” etc. If you must do so, please explain their meaning.
8. Provide brief explanations of technical terms, or terms of art, e.g., “*Spend-down* means you must use up some of your monies or assets in order to be eligible for services.”
9. Pause occasionally to ask the interpreter if he/she is understanding the information that you are providing, or if you need to slow down or speed up in your speech patterns. If the interpreter is confused, so is the client.
10. Ask the interpreter if, in his/her opinion, the client seems to have grasped the information that you are conveying. You may have to repeat or clarify certain information by saying it in a different way.
11. ABOVE ALL, BE PATIENT with the interpreter, the client and yourself!
12. Thank the interpreter for performing a very difficult and valuable service.



Attachment D

Minnesota Department of Human Services Civil Rights Assurance of Compliance

NONDISCRIMINATION IN STATE AND FEDERALLY FINANCED PROGRAMS AITKIN COUNTY HEALTH AND HUMAN SERVICES (HEREAFTER CALLED THE "COUNTY AGENCY")

THE COUNTY AGENCY provides this civil rights Assurance of Compliance (hereafter called the "Assurance") in consideration of and for the purpose of obtaining any and all federal financial assistance from the United States Departments of Health and Human Services and Agriculture. The County Agency agrees that compliance with this Assurance is a condition of continued receipt of federal financial assistance and that it is binding upon the County Agency directly or through contract, license, or other provider of services, as long as it receives federal or state financial assistance; and shall be submitted with the required Comprehensive Civil Rights Plan update.

THE COUNTY AGENCY ASSURES that it will comply with:

Title VI of the Civil Rights Act of 1964, as amended; Department of Health and Human Services, Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons; Age Discrimination Act of 1975, 42 U.S.C. 6101, as amended; Section 504 of the Rehabilitation Act of 1973, as amended; Section 508 of the Rehabilitation Act of 1973, as amended; Title II of the Americans with Disabilities Act of 1990; Section 1557 of the Patient Protection and Affordable Care Act of 2010; Federal Block Grant Programs of the Omnibus Budget Reconciliation Act of 1981; as amended; Title IX of the Education Amendments of 1972, as amended; Family Violence Prevention and Services Act; Food Stamp Act of 1977, as amended, including the Nondiscrimination Compliance Requirements in the Food Stamp Program and the Bilingual Requirements in the Food Stamp Program; FNS Instruction 113-1, Civil Rights Compliance and Enforcement - Nutrition Programs and Activities, Food and Nutrition Service, U.S. Department of Agriculture (2005); and Interethnic Adoption Provisions of the Small Business Job Protection Act of 1996 (formerly Multiethnic Placement Act of 1994).

PURSUANT TO THE CIVIL RIGHTS PLAN for the Minnesota Department of Human Services, by accepting this Assurance, the County Agency agrees to allow access, by authorized personnel of the Minnesota Department of Human Services and the United States Departments of Health and

Human Services and Agriculture, during normal working hours, to private and/or confidential data maintained by the County Agency (or other sub-recipient of federal financial assistance) to the extent necessary to conduct a full and complete investigation into any complaint of discrimination, including to compile data, maintain records and submit reports as required to determine compliance with the above mentioned laws, rules and regulations. The Minnesota Department of Human Services agrees to comply with all requirements of the Minnesota Government Data Practices Act (Minnesota Statutes, section 13.01 et seq.). No private and/or confidential data collected, maintained or used in the course of an investigation shall be disseminated except as authorized by statute, either during the period of the investigation or after it has been concluded. If there are any violations of this assurance, OHS shall have the right to invoke fiscal sanctions or other legal remedies in accordance with Minnesota Statutes, section 256.017.

THE PERSON WHOSE SIGNATURE APPEARS BELOW is authorized to sign this Assurance and commit the County Agency to its terms.

6-4-18
Date

Cynthia Bennett
Cynthia Bennett, ACH&HS Director Signature

I CERTIFY that the signatory for the County Agency has lawful authority to bind the County Agency to the terms of this civil rights Assurance.

06/18/18
Date

Jim Ratz
Jim Ratz, Aitkin County Attorney Signature