# Larimer County Department of Human Services Civil Rights Plan

## Civil Rights Contact

Kalene Rowley

Phone: (970) 498-6311

Email: hs-info@co.larimer.co.us

#### Alternate Contact

Lindy Blue

Phone: (970) 498-6484

Email: hs-info@co.larimer.co.us

#### Americans with Disabilities Act Coordinator/Contact

Mackenzie Lowe

Phone: (970) 498-5967

Email: lowemj@co.larimer.co.us

Printed copies of this Civil Rights Plan are posted for review at all Larimer County Department of Human Services locations (see page 5 for a list of locations). An electronic copy of this Civil Rights Plan is available on the Larimer County Department of Human Services public website at larimer.gov/humanservices/complaints and the Larimer County Department of Human Services intranet, which is available to all county staff.

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## Purpose Statement

The Larimer County Department of Human Services (LCDHS) receives funds from federal, state and county funding sources. LCDHS operates without regard to race, color, national origin, age, disability, sex, sexual orientation, religion, political beliefs, creed, and public assistance status. LCDHS is responsible for providing core services to assist and support Larimer County's most vulnerable individuals and families so they can meet their basic needs and are treated with respect and dignity. LCDHS has a civil rights plan to ensure that all eligible individuals receive equal access to program services and information. The civil rights plan serves as a source of information for the public and LCDHS staff. The plan outlines LCDHS's civil rights administrative policies and procedures and identifies key contacts. The Civil Rights contact meets the minimum requirements to be the Civil Rights Contact Person, per 10 CCR 505-5 § 1.020.7(1)(a). The Civil rights contact is familiar with the laws and regulations for the Civil Rights Act of 1964.

This statement is in accordance with the provisions of Title IV of the Civil Rights Act of 1964; Section 504 of the Rehabilitation Act of 1973; title II of the Americans with Disabilities Act of 1990; the Age Discrimination Act of 1975; and title IX of the Educational Amendments of 1972. Concerns or questions about this civil rights plan should be directed to the contact listed on the title page of the document, who is the Human Services Director's Executive Assistant. The purpose of the Civil Rights plan is to provide processes and procedures for civil rights grievances or complaints with Human Services programs or services, including but not limited to: medical assistance programs, child welfare programs, adult protection programs, Office on Aging Programs, food assistance, financial assistance, or any other program operated by LCDHS.

#### Nondiscrimination Notice

The Larimer County Department of Human Services (LCDHS) does not discriminate based on race, color, ethnic or national origin, ancestry, age, sex, gender, sexual orientation, gender identity and expression, religion, creed, political beliefs, or disability. LCDHS does not discriminate in employment, admission or access to, treatment or participation in, or receipt of the services and benefits under any of its programs, services, and activities.

#### LCDHS provides:

- Free aids and services for individuals with disabilities to communicate effectively with LCDHS, such as:
  - Qualified sign language interpreters
  - Written information in other formats
- Free language services for individuals whose primary language is not English, such as:
  - Qualified foreign language interpreters
  - Information written in other languages
- Physical access to facilities, such as:
  - Parking designated for people with disabilities
  - Ramps between parking areas and buildings
  - Level access into the first floor of any LCDHS building with elevator access to all other floors

If you believe LCDHS has failed to provide these services or discriminated in another way, you can file a complaint (also referred to as a "grievance") with the civil rights contact within sixty (60) days of the incident. You can file your complaint by mail, phone, fax, or email. The civil rights contact can also help you file the complaint or grievance.

To request aids and services or to file a complaint or grievance:

Civil Rights Officer

Larimer County Department of Human Services

1501 Blue Spruce Drive

Fort Collins, CO 80524

Phone: 970.498.6311

Fax: 970.498.6304

Email: hs-info@co.larimer.co.us

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Complaint Portal at <a href="https://ocr/smartscreen/main.jsf">ocrportal.hhs.gov/ocr/smartscreen/main.jsf</a>, or by mail, phone, fax, or email.

Office for Civil Rights

U.S. Department of Health and Human Services

1961 Stout Street, Rooms 08-148

Denver, CO 80294

Phone: 800-368-1019 (TDD: 800-537-7697)

Fax: 202-619-3818

Email: OCRComplaint@hhs.gov

## Civil Rights Plan Administration

The Civil Rights Plan will be reviewed annually by Larimer County Department of Human Services (LCDHS) leadership to ensure it is up to date and that training is consistent with the needs of the department based on previously founded complaints.

#### Plan Communication & Availability

Printed copies of this LCDHS Civil Rights Plan (Plan) are posted for review in the following locations, which are accessible to applicants, clients, members of the public, employees, volunteers, and contractors:

- LCDHS, 1501 Blue Spruce Drive, Fort Collins, CO 80524
- LCDHS, 2555 Midpoint Drive, Suite E, Fort Collins, CO 80525
- LCDHS, 200 Peridot, Loveland, CO, 80538
- LCDHS, 1601 Brodie Ave, Estes Park, CO, 80517

An electronic copy of this plan is available on the Larimer County Department of Human Services website at larimer.gov/humanservices/complaints and on the Larimer County Department of Human Services intranet, which is available to all Human Services staff.

### Complaint Tracking & Accountability

LCDHS has aligned the tracking of civil rights grievances / complaints utilizing the same file type, set-up and location that is used in the general complaint process. LCDHS tracks informal and formal complaints, along with details of the complaint, communication about the complaint, and outcomes or actions taken after the complaint review is completed. LCDHS will submit a bi-annual report to the Department of Health Care Policy and Financing (HCPF) County Relations team through the County Relations webform ticket (hcpfdev.secure.force.com/HCPFCountyRelations). The bi-annual dates are January 31 and July 31 of each calendar year.

## **Employee Civil Rights Training**

#### County Training

All Larimer County Department of Human Services employees shall complete annual county training on the civil rights plan. This training will be administered through the department's learning platform. Records of the employee's name and date of completion will be tracked in the learning platform and can be provided to the State of Colorado upon request. This training will consist of general information about the complaint process, how to assist with the filing or submission of a complaint, and examples of types of complaints that may be submitted.

#### State Training

The Colorado Department of Human Services' Staff Development Center (SDC) shall provide identified staff with annual training related to civil rights and non-discrimination. Identified staff are those with access to the Colorado Benefits Management System (CBMS), who fulfill duties relating to the administration of public benefits, who have direct contact with applicants and members or supervise staff who are included in any of these categories. SDC / COLearn will track the attendance records of LCDHS employees and can be provided to the State of Colorado upon request.

## County, Contractor, Vendor, and Partner Compliance with Civil Rights Provisions

Contractors, vendors, partners or other parties that do business on behalf of the Larimer County Department of Human Services, are paid using federal or state funds, or who have contact with applicants or members shall comply with federal and state civil rights laws. If LCDHS is alerted to discriminatory activity, LCDHS will notify Colorado State County Relations through a County Relations webform ticket

(https://hcpfdev.secure.force.com/HCPFCountyRelations) or by an email to <a href="https://hcpfdev.secure.force.com/HCPFCountyRelations@state.so.us">hcpF\_CountyRelations@state.so.us</a> within three (3) calendar days. Alerts about discriminatory activity can be submitted through the civil rights complaint form or via email to hs-info@co.larimer.co.us.

#### Employee Access to Auxiliary Aids and Services

Auxiliary aids and services aid individuals who are visually impaired, hearing impaired, physically impaired or have an unseen disability or condition (such as English not being their primary language) that affects their interactions with LCDHS staff.

Larimer County Department of Human Services utilizes the Language Line to assist with any verbal translation needs either on the phone or in person. Information on how to access the Language Line is in this document. Additionally, LCDHS staff have access to Voiance, an application and web portal that will provide phone or video translation, as well as other translation services. Information on how to access Voiance is in this document.

Larimer County Department of Human Services will furnish appropriate auxiliary aids and services where necessary to provide individuals with disabilities, including applicants, participants, members of the public, and their companions an equal opportunity to participate in, and enjoy the benefits of, a service, program, or activity conducted by LCDHS.

The type of auxiliary aid or service necessary to ensure communication will vary in accordance with the method of communication involved and the context in which the communication is taking place. In order to be effective, auxiliary aids and services will be provided in accessible formats, in a timely manner, and in such a way as to protect the privacy and independence of the individual with a disability.

When an auxiliary aid or service is requested, the county will give primary consideration to the choice expressed by the individual. The county will honor the choice unless:

- The agency can show that another effective means of communication is available;
- The agency can show that the use of the means chosen would result in a fundamental alteration in the service, program, or activity; or
- The agency can show that the use of the means chosen would result in undue financial burden to the county.

The county agency will consult with the individual with a disability to identify an effective manner of communication that can be achieved with the individual in the context of the program, service or activity. The county will not require an individual with a disability to bring another individual to interpret for them.

The county will not require an adult accompanying an individual with a disability to interpret or facilitate communication except:

- In an emergency involving imminent threat to the safety or welfare of an individual or the public where there is no interpreter available; or
- Where the individual with a disability specifically requests that the accompanying adult interpret or facilitate communication, the accompanying adult agrees to provide such assistance, and reliance on the adult for assistance is appropriate under the circumstances.

The county will not rely on a minor child to interpret or facilitate communications, except in an emergency involving an imminent threat to the safety or welfare of an individual or in public where there is no interpreter available.

# Civil Rights Complaint Investigation & Resolution Procedure

Larimer County Department of Human Services has a civil rights complaint procedure that provides prompt and thorough review of discrimination of civil rights violations. Human Services has aligned their civil rights grievance / complaint process with their general complaint process. LCDHS has outlined roles and responsibilities for each person involved in the complaint and defined timelines for each step of communication.

### Civil Rights Complaints Submission Notice & Information

The information included in Appendix A includes information that will be posted to the LCDHS website at larimer.gov/humanservices/complaints, on the LCDHS intranet and in public lobbies. This information includes the non-discrimination statement, how to submit a complaint, and the process to resolution. The Appendix also includes how to submit a civil rights complaint to the Larimer County Department of Human Services, the state or federal government.

## Civil Rights Complaint Investigation & Resolution Procedure

Appendix B includes a process map outlining in detail the civil rights complaint investigation procedure with timelines. Informal complaints are complaints that have not been addressed by a supervisor and will be routed to the supervisor for resolution. Formal complaints are complaints that are unresolved by the supervisor and will be routed to the director for investigation and resolution.

- 1. After the complaint is received by the civil rights contact, the civil rights contact will attempt to communicate with the complainant within two (2) business days to confirm receipt of the complaint. The complaint information will be logged into the county tracking form.
- 2. The complaint will be investigated within fifteen (15) business days following the internal Human Services procedures. The complainant is expected to reasonably engage with the information gathering process of the investigation. This engagement will be by phone or email.
- 3. The civil rights contact will send the final complaint response to the complainant. Informal complaints will be resolved within sixty (60) days, formal complaints will be resolved within one hundred and twenty (120) days. (Refer to Appendix B for the process map outline which includes timelines.)
- 4. The complainant can appeal the decision within fifteen (15) business days of the final complaint response by responding to the civil rights contact.
- 5. Appeal decisions must be rendered in writing to the complainant within fifteen (15) business days of the appeal.
- 6. If the result of the investigation finds that the complaint is founded, the department will take all necessary steps to correct the violation.

After a decision has been rendered for a formal complaint and is considered to be founded, the Larimer County Department of Human Services will provide a detailed description of actions to be taken and modifications to be made within three (3) business days from the rendering of a decision to the Department of Health Care Policy and Financing, Department of Human Services, or appropriate state agency.

If a discrimination complaint is founded against Larimer County Department of Human Services by the Department of Health Care Policy and Financing pursuant to 10 CCR 2505-5.1.020.6(f)(ii), the Department of Health Care Policy and Financing will initiate a corrective action to Larimer County Department of Human Services. Larimer County Department of Human Services will submit an action plan to address the non-compliance identified and corresponding requirements outlined in Section 10 CCR 2505-5-1.020.11. The type of action plan and corrective action will be determined by the Department of Health Care Policy and Financing.

The Larimer County Department of Human Services will review the informal and formal complaint log and results of investigations quarterly to update training to staff as needed based on these findings.

The Larimer County Department of Human Services will submit the number of Medicaid-related informal and formal complaints, finding information and results, as well as changes to business process and/or training related to civil rights complaints via the County Relations Webform ticket on January 31 and July 31 of each calendar year.

## Appendix A

### Civil Rights Notice

You have the right to equal access to services, if you are an applicant, client or member of the public trying to gain access to human services program information or benefits. Larimer County Department of Human Services (LCDHS) has a civil rights complaint procedure that provides prompt and thorough resolution of civil rights complaints.

A civil rights complaint should allege discrimination of some kind. You have a right to file a civil rights complaint if you believe you have been discriminated against because of your race, color, national origin, sex, sexual orientation, age, creed, religion, political beliefs, disability, or public assistance status.

It is against the law for anyone who works for LCDHS to retaliate against a person who files a complaint or who cooperates in the investigation of a civil rights complaint. The law and regulations prohibiting discrimination can be viewed by contacting the civil rights contact.

Per state and federal law, individuals can submit a discrimination or civil rights complaint to the county and/or directly to the state and/or federal government.

- 1. You may submit your discrimination or civil rights complaint within sixty (60) days of the incident to the civil rights contact by:
  - Completing the complaint form online at: http://www.larimer.org/humanservices/complaints/form
  - Downloading a copy of the complaint form and submitting via email to hs-info@co.larimer.co.us
  - Mailing a copy of the complaint form to:
    - o LCDHS, 1501 Blue Spruce Drive, Fort Collins, CO 80524
  - Calling the civil rights contact at (970) 498-6311
  - Delivering in person to one of our Human Services locations
    - o LCDHS, 1501 Blue Spruce Drive, Fort Collins, CO 80524
    - o LCDHS, 2555 Midpoint Drive, Suite E, Fort Collins, CO 80525
    - o LCDHS, 200 Peridot, Loveland, CO 80538
- 2. You do not have to submit your complaint to LCDHS first. You may bypass LCDHS and submit your discrimination or civil rights complaint directly to the state or federal government by:
  - U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Complaint Portal at ocrportal.hhs.gov/ocr/smartscreen/main.jsf,
  - By mail, phone, fax, or email.

Office for Civil Rights

U.S. Department of Health and Human Services

1961 Stout Street, Rooms 08-148

Denver, CO 80294

Phone: 800-368-1019 (TDD: 800-537-7697)

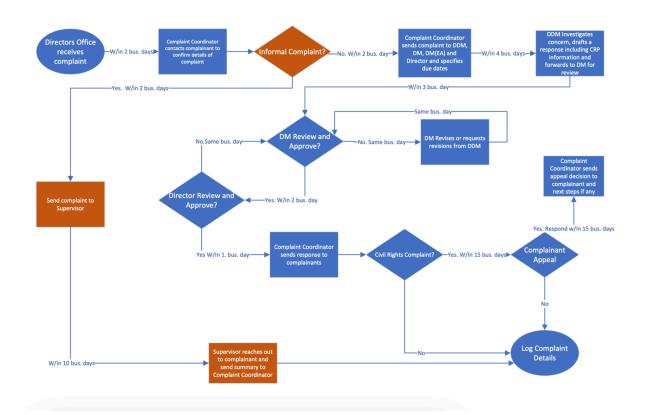
Fax: 202-619-3818

Email: OCRComplaint@hhs.gov

- By utilizing the Department of Health Care and Policy Finance civil rights complaint process by submitting the discrimination complaint form or contacting <a href="https://heptschip.org/heptschip.com
- By utilizing the Colorado Civil Rights Division complaint process by completing the CaseConnect Civil Rights form or contacting <a href="mailto:document-superscript">dora\_ccrd@state.co.us</a>.
- 3. After the complaint is received by the civil rights contact, the civil rights contact will attempt to communicate with the complainant within two (2) business days to confirm receipt of the complaint. The complaint information will be logged into the county tracking form.
- 4. The complaint will be investigated within ten (10) business days following the internal Human Services procedures. The complainant is expected to engage in reasonable efforts to cooperate with the information gathering process of the investigation. This engagement will be by phone, email or in person.
- 5. The civil rights contact will send the final complaint response to the complainant. Informal complaints will be resolved within sixty (60) days of receipt of the complaint, and formal complaints will be resolved within one hundred and twenty (120) days of receipt of the complaint..
- 6. The complainant can appeal the decision within fifteen (15) business days of the final complaint response by communicating with the civil rights contact.
- 7. Appeal decisions must be rendered in writing to the complainant within fifteen (15) business days of the appeal.
- 8. If the result of the investigation finds that the complaint is founded, the department will take all necessary steps to correct the violation.

## Appendix B

Civil Rights Investigation & Resolution Procedure Process Map



## Appendix C

## Civil Rights Complaint Form

# LARIMER COUNTY |Human Services

1501 Blue Spruce, Fort Collins, Colorado 80524, 970.498.6300, Larimer.org/dhs

# Larimer County Department of Human Services (LCDHS) Complaint Form

Your Name:			Today's Date:	
Preferred contact m	Date	Date of Birth:		
Mailing Address: _				
	Street	<sup>City</sup> Email	State	Zip Code
Telephone:		_ :		
Provide any case no your complaint:	umber or other id number to he	lp route		
Your role:	☐ Subject of Investigation	☐ Parent, Guardian, o	r POA of	Client
	☐ Client or Applicant	☐ Other:		
What type of complaint are you filing today?	□ Case Complaint	□ Civil Rights Compla	iint	

Please describe your complaint, providing the names of the employee or employees involved (if known).

What do you want the Department to do in response to the complaint?	

What have you done to resolve the issue so far?

Please provide any additional information here if needed:
Once you have completed this form, please email to <a href="mailto:hs-info@co.larimer.co.us">hs-info@co.larimer.co.us</a> , mail the form or submit it in person at any one of the Human Services locations. The Complaint Coordinator or another staff member will contact you within 2 business days of receiving this form.
Your Signature: Date: