



## DEPARTMENT OF HUMAN SERVICES

### **Civil Rights Plan**

#### **Moffat County Department of Human Services**

1198 West Victory Way, Suite 204

Craig, CO 81625

(970)824-8282

#### **Moffat County Civil Rights Contact Person:**

Kristin Grajeda

Director

(970) 824-8282

[Kristin.grajeda@state.co.us](mailto:Kristin.grajeda@state.co.us)

The **Moffat County** Civil Rights Plan, **Moffat County** Nondiscrimination and State Nondiscrimination Statements are available at **Moffat County Department of Human Services, 1198 West Victory Way, Suite 204, Craig CO 81625** and online at <https://moffatcounty.colorado.gov>.

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### **Purpose**

As a recipient of Federal Financial Assistance, **Moffat County Department of Human Services** is responsible for providing core services to assist and support Colorado's most vulnerable individuals and families so they can meet their basic needs and be treated with respect and dignity. **Moffat County Department of Human Services** has a civil rights plan to ensure that all eligible individuals receive equal access to all programs, services, activities, and information. All 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 assistance programs, sex includes sex stereotypes and gender identity under any health program or activity receiving federal funds.

The civil rights plan also serves as a source of information for **Moffat County Department of Human Services** staff and the general public. The plan sets out the Agency's 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.

This statement is in accordance with:

- Title VI of the Civil Rights Act of 1964
- Section 504 and Section 508 of the Rehabilitation Act of 1973
- Title II of the Americans with Disabilities Act of 1990
- The Age Discrimination Act of 1975
- Section 1557 of the Patient Protection and Affordable Care Act of 2010

U.S. Department of Health and Human Services Regulations:

- Title 45 Code of Federal Regulations (CFR) Parts 80, 84, and 91
- Title 28 CFR Part 35

State of Colorado regulations:

- Title 24 Colorado Revised Statutes (CRS) Parts 4, 6, 8 and 34
- Title 10 Code of Colorado Regulations (CCR) Section 8.100
- The Colorado Anti-Discrimination Act

### **Equal Access and Opportunity**

**Moffat County Department of Human Services** policies are intended to ensure programs, services and activities are accessible to all eligible persons without regard to race, color, national origin, age, disability, sex, sexual orientation, religion, political beliefs, creed and public assistance status.

### **Disability Compliance**

In accordance with the requirements of Section 504 of the Rehabilitation Act of 1973 (504), Title II of the Americans with Disabilities Act of 1990 ("ADA"), and Section 1557 of the Patient Protection and Affordable Care Act of 2010, the **Moffat County Department of Human Services** does not discriminate against qualified individuals with disabilities on the basis of disability 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. The **Moffat County Department of Human Services** and all of its programs, services and activities are accessible to and usable by individuals with disabilities.

The **Moffat County Department of Human Services** will make reasonable modifications to policies, practices, procedures, and programs to ensure that individuals with disabilities have an equal opportunity to enjoy all of its programs, services and activities. For example, individuals with service animals are welcomed in the **Moffat County Department of Human Services** offices, even where pets are generally prohibited.

Anyone who requires an auxiliary aid or service or to request a reasonable modification to participate in a program, service or activity of the **Moffat County Department of Human Services**, should contact the agency and/or the Civil Rights Contact Person to request. The **Moffat County Department of Human Services** is not required to take any action that would fundamentally alter the nature of its programs, services and activities, or impose an undue financial or administrative burden.

The **Moffat County Department of Human Services** will not place a surcharge on a particular individual with a disability or any group of individuals with disabilities to cover the cost of providing auxiliary aids and services or reasonable modifications, such as providing an American Sign Language (ASL) interpreter for effective communication, ensuring physical access to all areas open to the public, or assistance with filling out an Application for Public Assistance.

The **Moffat County Department of Human Services** has a procedure for complaints alleging disability discrimination or violations of Section 504, Title II of the ADA, or Section 1557 of the Patient Protection and Affordable Care Act of 2010.

### **Effective Communication Aids and Services**

**Moffat County Department of Human Services** provides auxiliary aids and services to individuals with disabilities, and language services to individuals whose first language is not English, when needed to ensure equal opportunity and meaningful access to programs, services and activities. **Moffat County Department of Human Services** will provide auxiliary aids and services in a timely way and free of charge.

Examples of free aids and services include, but are not limited to:

- Qualified sign language interpreters
- Written information in other formats
- Foreign language interpreters
- Information translated into other languages

If an individual believes that **Moffat County Department of Human Services** has failed to provide these services or discriminated in another way, a grievance can be filed with the Civil Rights Contact Person by mail, phone, fax, or email within sixty (60) days of the incident. The Civil Rights Contact Person can also help file the grievance.

### **Civil Rights Complaint Resolution Process**

As part of the Agency's Civil Rights Plan and in accordance with HCPF OM 23-003, a documented process for investigating complaints of discrimination received by the agency must be created and approved by HCPF. This plan has been approved by the Department on **03/06/2023**. The **Moffat County Department of Human Services** is required to promptly investigate Civil Rights complaints. The complaint process for **Moffat County Department of Human Services** is as follows:

The Civil Rights Contact Person will be notified of all civil rights complaints as soon as possible, within 24 hours of the complaint being received by the agency or a representative of the agency. The Civil Rights Contact Person will conduct informal investigations within 60 days of receiving the complaint. A formal investigation will be completed by the Civil Rights Contact Person within 120 days. The individual who had a complaint received against them cannot be the individual conducting the investigation. If there is a potential conflict of interest, **Moffat County Human Resources** will be used to conduct the investigation. The applicant, member and/or the individual who submitted the complaint will be able to provide information to the Civil Rights Contact Person to assist with the investigation; this can

be in writing or by contacting the Civil Rights Contact person at **(970)824-9108** or at **Moffat County Human Resources, 1198 West Victory Way, Suite 111, Craig, CO 81625**.

All complaints will be tracked by the Civil Rights Contact Person using the Agency's Civil Rights Complaint Log. Complaints will be tracked with the outcome of the investigation (founded or unfounded), process changes that were implemented based on the result of the investigation, and training provided as a result of the investigation's outcome. The complaint log will be used to monitor the progress of investigations to ensure timelines are followed. Complaint log data will be submitted to the Department (using the County Relations webform ticket <https://hcpfdev.secure.force.com/HCPFCountyRelations>) on a biannual basis (July 31st and January 31st of each year) with the first submission being January 31, 2024.

Once an investigation is completed, the Civil Rights Contact Person will notify the applicant, member, and/or individual that submitted the complaint in writing, via certified mail and email, within 3 business days of the investigation being completed. If a complaint of discrimination or Civil Rights violation is investigated by the agency and the investigation finds that the complaint is founded, the Department requires the agency to notify the Department and to take all necessary steps to correct the violation.

The Department must be provided with a detailed description of actions taken and modifications made to correct the violation within three (3) calendar days from the completion of the investigation. This information will be sent using the County Relations Webform Ticket or via email [HCPF\\_CountyRelations@state.co.us](mailto:HCPF_CountyRelations@state.co.us). Upon receipt of the agency's investigation findings and description of its corrective action, the Department will work with the agency on any additional required steps.

### **Civil Rights Complaint Appeal Process**

At the time of notifying the applicant, member and/or the individual that submitted the complaint of the results of the investigation, they will also be notified of the right to appeal the initial decision rendered by the Agency. Applicants, members and/or the individuals who submitted a complaint shall notify the **Moffat County Human Resources** in writing, of their intent to appeal a decision within thirty (30) calendar days of any decision made. **Moffat County Human Resources 1198 West Victory Way, Suite 111, Craig, Colorado 81625**. If the appeal is received by the Agency, the appeal will be forwarded to the Department and **Moffat County Human Resources** by the Civil Rights Contact Person.

When making an appeal decision, **Moffat County Human Resources** shall consider all testimony and relevant evidence introduced during the appeal. The applicant, member, or the individual that submitted the complaint and the agency's Civil Rights Contact Person may both be allowed to introduce witnesses and evidence in a fair and consistent manner and may be represented by counsel if desired.

Appeal decisions must be rendered by **Moffat County Human Resources** within fifteen (15) calendar days of appeal being received by the Agency. All decisions shall be in writing and provided to the agency's Civil Rights Contact Person, the applicant, the member, and/or the individual who submitted the complaint, and the Department. The Civil Rights Contact Person must update the Civil Rights Complaint Tracking log with the outcome of the appeal.

The applicant, member or individual who submitted the complaint will not be retaliated against for their submission of a complaint, nor will a member's benefits be terminated for submitting a complaint.

Departments of human/social services must cooperate fully with the federal and state investigative processes. If the Department receives or is notified of a complaint of discrimination against the agency, the Department will initiate corrective actions as specified in 10 CCR 2505-5 1.020.11 until the Agency rectifies the issue. Non-compliance with corrective action will result in sanctions as stated in 10 CCR 2505-5 1.020.12.

### **Civil Rights Plan Administration and Monitoring**

**Moffat County Department of Human Services** will administer its Civil Rights Plan by:

Appointing a qualified Civil Rights Contact Person. To be considered qualified, the Civil Rights Contact Person must be impartial and independent. The Civil Rights Contact Person will act as a point of contact for applicants, members, individuals and the Department for all of the agency's Civil Rights Plan and requirements. The Civil Rights Contact Person will be the point of contact for civil rights complaints. This person will maintain up-to-date information on civil rights laws and requirements and ensure updates are shared with agency staff regularly. The Civil Rights Contact Person will be responsible to post civil rights notices and updates in lobbies and on the agency website. The Civil Rights Contact Person will manage the discrimination investigation procedures, conduct investigations and address issues of civil rights non-compliance. The Civil Rights Contact Person will work with the agency to provide civil rights training.

The **Moffat County Department of Human Services** complaint resolution process outlined here is posted publicly within the lobby of the **Moffat County Department of Human Services** building at **1198 West Victory Way, Suite 204, Craig, Co 81625** and available on <https://moffatcounty.colorado.gov>. The HCPF Nondiscrimination Statement and the County Nondiscrimination statement will be posted along with this process.

The Agency will conduct regular training to staff as described below. Training will also be completed based on the findings of investigations conducted.

This plan will be reviewed annually by the county and updated as necessary, including changes to the Civil Rights Contact Person and/or their contact information. Any changes to the plan will be resubmitted to the Department (by submitting a County Relations Request form ticket or by email [HCPF\\_CountyRelations@state.co.us](mailto:HCPF_CountyRelations@state.co.us)).

### **Monitoring**

The agency Civil Rights Contact Person is responsible for monitoring **Moffat County Department of Human Service's** compliance with the Civil Rights Plan, including ensuring all staff complete required training, and that investigations are completed per the plan, including submission of the biannual investigation reporting.

### **Retaliation statement**

An applicant, member, or individual cannot be retaliated against or coerced for requesting access to or assistance with the submission of a Civil Rights or discrimination complaint, per federal and state law.

### **Training Statement**

**Moffat County Department of Human Services** will conduct annual training on the agency's civil rights plan to all staff that have contact with applicants and members or agency staff who supervise those who have applicant/member direct contact. The training will include information on how to provide clients and members with civil rights information, guidance on how to assist with filing civil rights complaints and updated contact information for the agency's Civil Rights Contact Person. Training will also provide staff with information on how to access auxiliary aids and services and language access services for applicants and/or members. 100% of **Moffat County Department of Human Services** staff shall complete the annual training, and tracking of completion of annual training shall be maintained by the Civil Rights Contact Person on the agency training spreadsheet.

Agency staff appointed to fulfill duties relating to the administration of Medical Assistance and who have direct contact with applicants and members or who supervise those who have direct contact with applicants and/or members are required to complete annual State Civil Rights and Nondiscrimination training provided by the Staff Development Division (SDD). 100% of the agency's staff must complete the required training on an annual basis. Failure to complete the training annually may result in loss of access to the Colorado Benefits Management System (CBMS). The Agency Civil Rights Contact Person shall maintain tracking of training completion by staff on the agency training spreadsheet.

The Civil Rights Contact Person will conduct as needed training to staff based on complaints referrals received by the agency and when investigations on complaints determine that there was a violation and/or founded discrimination. This training will be conducted to ensure that future occurrences of civil rights complaints are prevented to the best of the staff members ability. The training will be tracked on the agency training spreadsheet and on the agency's Civil Rights Complaint log. Additional action may be taken including but not limited to staff performance improvement plan and termination.

### **Agency Contractor, Vendor, and Partner Compliance Requirements**

As specified in 10 CCR 2505-5 1.020.6.1.c, the Department shall assure that any contractors, vendors, partners or other parties that do business on behalf of the agency, are paid using federal and state Medical Assistance funds, or who have contact with applicants or members are in compliance with federal and state civil rights laws and the provisions within this Operational Memo. If the agency is alerted to discriminatory activity, the agency must notify the Department, via email [HCPF\\_CountyRelations@state.co.us](mailto:HCPF_CountyRelations@state.co.us), within three (3) calendar days.

At the Department's direction, if the agency, state or federal government finds that any of the agency's contractors, vendors or partners are in violation of federal and state civil rights provisions, the agency may

be required to terminate any payments or association with that party, per 10 CCR 2505-5 1.020.6.1.d. Termination must occur immediately upon notification from the Department to the agency.

### **Additional Complaint Resources**

Per state and federal law, individuals can submit a discrimination or civil rights complaint to the agency or directly to the state or federal government. All of the options listed below for the submission of civil rights complaints are publicly posted within lobbies and high-traffic areas within the agency. To submit a complaint, the applicant or member can utilize the agency's Civil Rights/Non-Discrimination complaint process, required as part of the agency's Civil Rights Plan, operationalized by the agency and approved by HCPF and/or:

#### U.S. Department of Health and Human Services

Office for Civil Rights

1961 Stout Street, Rooms 08-148

Denver, CO 80294

Telephone: 800.368.1019

TDD: 800.537.7697

Fax: 202.619.3818

Email: [OCRComplaint@hhs.gov](mailto:OCRComplaint@hhs.gov)

[www.hhs.gov/civil-rights/filing-a-complaint/complaint-process/index.html](http://www.hhs.gov/civil-rights/filing-a-complaint/complaint-process/index.html)

#### Colorado Department of Health Care Policy and Financing

Civil Rights Officer

1570 Grant Street

Denver, CO 80203

Telephone: 303.866.6010

State Relay: 711

Fax: 303.866.2828

Email: [hcpf504ada@state.co.us](mailto:hcpf504ada@state.co.us)

<https://hcpf.colorado.gov/americans-disabilities-act>

#### Colorado Department of Regulatory Agencies

Colorado Civil Rights Division

1560 Broadway, Suite 825

Denver, CO 80202

Telephone: 303.894.2997

Toll Free: 800.262.4845

State Relay: 711

Fax: 303.894.7830

Email: [dora\\_ccrd@state.co.us](mailto:dora_ccrd@state.co.us)

<https://socgov07-site.secure.force.com/ColoradoCivilRights/>

