Policy Title: Client Rights – Policy
Policy Number: I-A.1  Effective Date: 12/1/2020

Reference(s):

- Title VI and VII Civil Rights Act of 1964 as amended
- Section 504 Rehabilitation Act of 1973
- ADA (The Americans with Disabilities Act of 1990) 45
- CFR 80.6
- Confidentiality of Client Information, OAR 413-010-0000 to 413-010-0075
- Complaint Review, OAR 413-010-0400 to 413-010-0440
- ORS 419A.255
- OAR 407-005-0000 to 407-005-0030
- DHS-010-0005 - Non-Discrimination on the Basis of Disability for Programs, Services and Activities Policy
- DHS-010-0005-01 - Filing a Client Complaint or Report of Discrimination Procedure

Form(s) That Apply:

- DHS 0170, Filing Customer Service or Privacy Complaints or a Report of Discrimination
- DHS 0171, Client Comment Form

These forms are available in different languages on the ODHS/OHA Publications Forms page by searching the form numbers.

Policy Definitions

(1) "Contract Provider" means any individual or organization that provides services to a Child Welfare client pursuant to a contract or agreement with the Department.

(2) "Department" means the Oregon Department of Human Services.

(3) "Disability" as defined in the ADA by 42 USC 12102 means:

(a) A physical or mental impairment that limits one or more of the major life activities of such individual;

(b) A record of such impairment; or

(c) Being regarded as having such an impairment.
Policy – Client Rights

Discrimination Prohibited. No individual shall, on the grounds of race, national origin, religion, marital status, gender, sexual orientation, age, citizenship, political affiliation, language or disability be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under programs and activities for which the Oregon Department of Human Services has responsibility. This same policy of non-discrimination is equally applicable to all Department contract providers, grantees, agents and providers of services funded in whole or in part with federal funds.

(1) Clients are entitled to the following rights and must be informed of these rights at the time a decision has been made that services will be provided:

(a) To apply for any service provided by the Department. Voluntary clients will be asked to sign a copy of the CF 0304A, “Family Support Services Application”.

(b) To receive courteous and fair treatment by Department staff.

(c) To refuse services which have not been ordered by a court or requested by the client.

(d) To fair treatment that does not discriminate because of race, religion, national origin, gender, sexual orientation, age, citizenship, political affiliation, language, marital status, or disability, including the right of qualified persons with a disability to receive material in alternate format (large print, computer disc, Braille, audio tape, and/or oral presentation) as appropriate.

(e) To have communication held in confidence to the extent required by “Confidentiality of Client Information”, OAR 413-010-0000 to 413-010-0075.

(f) To a review of actions or decisions of the Department affecting them to the extent provided under “Complaint Review”, OAR 413-010-0400 to 413-010-0440.

(2) Each client and contract provider must be informed by ODHS staff of the complaint procedure of the Department at the time the initial decision is made that services will be provided or a contract is signed with a contract provider. A copy of DHS 0170, Client Complaint or Report of Discrimination and DHS 0171, Client Comment Form is available upon request.

(3) Staff adherence to this policy is required by all Department staff. Managers, administrators, and supervisors must be familiar with this policy and ensure that other staff are informed. This policy requires the Department to be responsible for the implementation and then monitoring of compliance of Title II, Title VI and Section 504 of the ADA. This includes the Department’s contracted providers as well as the agency’s own compliance to the laws.

(4) Information Displays.

(a) Program managers are to ensure that information regarding a client’s right to register a civil rights complaint be posted in an accessible place. It is the Department’s expectation that such information be posted in the reception area of local offices, and in the central office reception area within reach of a person in a wheelchair;
The posted civil rights information display will consist of a Department information brochure providing civil rights information for clients. Each packet will be labeled in English and Spanish. In communities in which a third language is spoken at a minimum threshold, the packets will be labeled in that language. The brochures and complaint forms will also be provided in English, Spanish, and a third language, if applicable.

Interpreters. Friends and family members generally may not be used as interpreters except in the situations outlined in policy DHS-010-005 because this practice may violate the client’s right to privacy and the Department must ensure the accuracy of the interpretation. If a situation places a child in imminent risk of harm, the caseworker must take appropriate action to ensure the child’s safety. The caseworker is then responsible for making immediate follow-up efforts to obtain an authorized interpreter to protect the rights of the clients and their families.

Informal Discussion of Civil Rights Complaint. In addition to using the informal complaint procedure OAR 413-010-0440, a client or contract provider that wishes to informally discuss a complaint with the Program or District Manager before signing a formal complaint should be encouraged to do so. A local office settlement of a civil rights problem is often desirable. However, local office staff may not make any financial settlement offer without the approval of the Child Welfare Director. It should be made clear to the complainant that taking a civil rights problem to local office management does not affect the client’s right to call the Governor’s Advocacy Office or file a written complaint.

Formal complaint. When a client, employee, or community member is of the opinion that the Department has discriminated against them because of race, national origin, gender, sexual orientation, religion, age, citizenship, political affiliation, language, marital status, or disability, the client may file a written complaint by contacting one or more of the following:

(a) The local office of the Department consistent with the “Complaint Review”, OAR 413-010-0400 to 413-010-0480, and the Department Procedure DHS-010-005-01, “Filing a Client Complaint or Report of Discrimination”.

(b) The Governor’s Advocacy Office:
Oregon Department of Human Services 500 Summer Street NE E15 Salem, OR 97301-1097

(c) Service and public accommodation complaints may also be directed to the Civil Rights Office of Health and Human Services:
Department of Health and Human Services
Office for Civil Rights, Region X
M/S RX – I 1
2201 Sixth Avenue
Seattle, WA 98121

Contact(s):
- **Name:** Heather Collee ADA Coordinator  **Email:** Heather.Collee@dhsoha.state.or.us