

TANF 102-1 Civil Rights

Supersedes: TANF 102-1 (7/1/11)

Reference: MCA 49-2-308

Overview: Department and contracted staff will not discriminate against individuals in any aspect of program administration for reasons of race, color, national origin, physical or mental disability, age, sex, religion, political beliefs, sexual orientation, marital status, creed or genetic information.

NON-DISCRIMINATION NOTICE:

All OPA and Pathways offices must post a Non-discrimination Notice, which will be provided by the Department. This statement must be posted continuously and the Department will provide revised or updated statements to OPA and Pathways as necessary. In addition, this statement must comply with federal requirements for effective communications and be made available to persons with sensory impairments, as appropriate.

COMPLAINT POLICY:

Discrimination complaints must be filed in writing no later than 180 days from the date the alleged discrimination occurred. Individuals may utilize a written complaint form or may file a written complaint that contains the following information:

- 1. Name, address, and phone number;
 - a. If a third party files the complaint on behalf of an individual, he/she should include his/her name, address, phone number and relationship to the complainant.
- 2. Name and location of the agency accused;
- 3. The circumstances under which the alleged discrimination occurred to include how, why, and when the offense occurred;
- 4. Other relevant information such as the names, titles, and addresses of people who may have knowledge of the alleged act; and
- 5. The complainant's signature.

FEDERALLY PROTECTED CATEGORIES:

For complaints involving the federal categories of race, color, national origin, mental or physical disability, age, sex and religion, individuals may file a written complaint or complete a HCS-525

complaint form. The complaint may be submitted at OPA or Pathways or sent directly to DPHHS Central Office, US Department of Health and Human Services regional Office of Civil Rights, or US Department of Public Health and Human Services national Office of Civil Rights.

STATE PROTECTED CATEGORIES:

For complaints involving the additional state protected categories of political belief, sexual orientation, marital status, creed or genetic information, individuals may file a written complaint at OPA or Pathways or send the complaint directly to the DPHHS Civil Rights Coordinator.

FORMS:

Copies of the HCS-525 must be made available in both OPA and Pathways offices.

Effective Date: January 01, 2018