



## HEALTH & HUMAN SERVICES

Aitkin County  
204 1<sup>st</sup> Street NW  
Aitkin, MN 56431

Phone: 218-927-7200  
Toll Free: 800-328-3744  
Fax: 218-927-7210

### Aitkin County Health and Human Services (ACHHS)

### Comprehensive Civil Rights Plan (CCRP)

MN Relay Service: 711 or 800-627-3529

[achhs@aitkincountymn.gov](mailto:achhs@aitkincountymn.gov)

<https://www.co.aitkin.mn.us/>

Civil Rights Contact

ACHHS Director

218-927-7225

LEP Contact

ACHHS Director

218-927-7225

ADA Coordinator

Aitkin County Human Resources Manager

218-927-7277

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

## **CONTENTS**

<b>I. Purpose</b>	<b>3</b>
<b>II. Legal Authorities</b>	<b>3</b>
<b>III. Civil Rights Contact</b>	<b>3</b>
<b>IV. Equal Opportunity Policy and Procedure</b>	<b>4</b>
<b>V. Complaint Resolution Procedure</b>	<b>5</b>
<b>VI. Americans with Disabilities Act Compliance</b>	<b>10</b>
<b>VII. LEP Plan</b>	<b>11</b>
<b>VIII. SNAP Civil Rights Training</b>	<b>11</b>
<b>IX. Civil Rights Assurance of Compliance</b>	<b>12</b>
<b>X. Civil Rights Plan Administration</b>	<b>12</b>
<b>XI. Appendix</b>	<b>13</b>
<b>Attachment A – Full List of Legal Authorities</b>	
<b>Attachment B – Aitkin County Health &amp; Human Services Complaint Notification Form</b>	
<b>Attachment C – Disability Brochure; DHS-4133-ENG</b>	
<b>Attachment D – Aitkin County Health &amp; Human Services LEP Plan</b>	
<b>Attachment E – 2024-2026 State-County Civil Rights Assurance Agreement</b>	

## I. Purpose

As a recipient of federal financial assistance, Aitkin County Health & Human Services (ACHHS) 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. ACHHS has a civil rights plan 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, gender identity, sexual orientation, religion, political beliefs, creed, disability, marital status or public assistance status**. In medical programs, sex includes pregnancy, sexual orientation, gender identity, and sex characteristics under any covered health program or activity receiving federal funds. The civil rights plan also serves as a source of information for county agency 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.

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

### Federal Authorities

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

### State Authorities

- Minnesota Human Rights Act (MHRA), Minn. Stat. 363A

## III. Civil Rights Contact

ACHHS designates the Health & Human Services Director to serve as the agency's Civil Rights Contact, agency point person, on civil rights matters.

ACHHS Director  
218-927-7225  
MN Relay Service: 711 or 800-627-3529  
Email:  
[sarah.pratt@aitkincountymn.gov](mailto:sarah.pratt@aitkincountymn.gov)

## **IV. Aitkin County Health & Human Services Policy for Equal Opportunity in Service Delivery**

### **Equal Opportunity Policy and Procedure**

#### **Aitkin County Health & Human Services Equal Opportunity Policy and Procedure**

It is the policy of ACHHS 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.

ACHHS employees, services, programs, benefits and policies will not discriminate against applicants, clients or members of the public because **of race, color, national origin, sex, gender identity, sexual orientation, age, creed, religion, political beliefs, disability or public assistance status**. “Sex” includes **pregnancy, sexual orientation, gender identity, and sex characteristics** 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 ACHHS 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. This policy applies to the agencies and providers receiving federal and state funds under contracts, licenses and other arrangements with ACHHS. The Minnesota Human Rights Act (MHRA) also applies to the work of ACHHS and those agencies carrying out its programs.

### **Program Accessibility for People with Disabilities**

ACHHS 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, ACHHS will:

- Notify the public about rights and protections for people with disabilities under the Americans with Disability Act
- Designate an ADA Contact and maintain a complaint procedure
- Make sure that its buildings are physically accessible for people with 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 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 ACHHS building
- Level access into the first floor of the ACHHS building with elevator access to all other floors

**Reasonable Modifications to Policies, Procedures or Practices**

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

**Effective Communication and Auxiliary Aids and Services**

ACHHS will take appropriate steps to ensure that communications with people with disabilities and companions with disabilities are as effective as communications with others. To ensure effective communications, ACHHS 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, ACHHS will give primary consideration to the requests of people with disabilities. ACHHS 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, ACHHS will offer an effective auxiliary aid or service.

**V. Complaint Resolution Procedure**

**Aitkin County Health & Human Services Civil Rights Complaint procedure**

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. ACHHS has a civil rights complaint procedure that provides prompt and thorough resolution of civil rights complaints.

Civil rights complaints allege discrimination based on protected class. You have a right to file a civil rights complaint if you believe you have been discriminated against because of **race, color, national origin, sex, gender identity, sexual orientation, age, creed, religion, political beliefs, disability or public assistance status**. "Sex" includes **pregnancy, sexual orientation, gender identity, and sex characteristics** that occurs in medical or health programs and clinics receiving federal financial assistance, such as Medical Assistance, MNCare, CHIP programs and insurance companies and state health insurance exchanges.

It is against the law for anyone who works for Aitkin County to retaliate against a person who files a complaint or who cooperates in the investigation of a civil rights complaint. To file a complaint, ask for the agency's equal opportunity policy, complaint resolution procedure, and complaint form. Use the contact information below to file a complaint. You can also review the law and regulations that outlaw discrimination in the Civil Rights Contact's office at Aitkin County.

ACHHS Director  
204 First Street NW  
Aitkin, MN 56431  
218-927-7225 (voice) or 711 or  
800-627-3529 (MN Relay)  
Email: [sarah.pratt@aitkincountymn.gov](mailto:sarah.pratt@aitkincountymn.gov)

Procedure:

1. Civil rights complaints must be submitted to the Civil Rights Contact within 180 days of the date the alleged discrimination occurred.
2. A complaint must be in writing and contain the name and address of the person filing it. You should also give your telephone number or relay service number if you are deaf or hard of hearing. Give your email address if it helps get in touch with you. The complaint must state the problem or action alleged and the relief desired. If you need assistance with your complaint, the Civil Rights Contact will help you.
3. Aitkin County Civil Rights Contact will use the *Complaint Notification Form* to notify DHS in writing of all service delivery discrimination complaints filed against the county and ACHHS within 90 days of the date the complaint is filed, so DHS can report the complaint to the appropriate federal office. A copy of the *Complaint Notification Form* is located in the Appendix; Attachment B.
4. The person filing the complaint must be informed that he/she can file a

discrimination complaint directly with the Minnesota Department of Human Rights and the Minnesota Department of Human Services.

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

**Minnesota Department of Human Rights**

540 Fairview Avenue North

Suite 201

Saint Paul, MN 55104

651-539-1100 (voice)

800-657-3704 (toll free)

711 or 800-627-3529 (MN Relay)

- b. **The Minnesota Department of Human Services** prohibits discrimination in its programs because of race, color, national origin, creed, religion, gender identity, sexual orientation, public assistance status, age, disability, or sex, including pregnancy, sexual orientation, gender identity, and sex characteristics discrimination that occurs in health programs or activities receiving federal financial assistance, such as Medical Assistance, MNCare, CHIP programs and insurance companies and state health insurance exchanges. Contact the Equal Opportunity and Access Division directly only if you have a discrimination complaint:

Sharieka Young, Interim 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)

711 or 800-627-3529 (MN Relay)

Email: [dhs.equalopportunity@state.mn.us](mailto:dhs.equalopportunity@state.mn.us)

- c. County Agencies are not permitted to investigate civil rights complaints in the Supplemental Nutrition Assistance Program (SNAP) because counties directly administer SNAP benefits. County agencies must refer SNAP civil rights complaints to DHS or the USDA regional office in Chicago. The USDA regional address is:

Civil Rights Director

Midwest Regional Office  
USDA/Food and Nutrition Service  
77 W. Jackson Blvd., 20<sup>th</sup> Floor  
Chicago, IL 60604-3591  
312-353-6657 (voice)  
Or use your preferred relay service  
Email: [tamara.earley@fns.usda.gov](mailto:tamara.earley@fns.usda.gov)

5. The person filing the complaint must also be informed that he/she can file a discrimination complaint directly with the U.S. Department of Health and Human Services' Office for Civil Rights or the U.S. Department of Agriculture (USDA) for the SNAP Program.

- a. **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, sex and religion. Sex includes discrimination based on pregnancy, sexual orientation, gender identity, and sex characteristics that occurs in medical or health programs and clinics receiving federal financial assistance, such as Medicaid, CHIP programs and insurance companies and state health insurance exchanges under Title I of the Affordable Care Act. Contact the federal agency directly:

**Centralized Case Management Operations**  
**U.S. Department of Health and Human Services**  
200 Independence Avenue, S.W.  
Room 509F HHH Bldg.  
Washington, D.C. 20201  
312-886-2359 (voice)  
800-368-1019 (toll free)  
800-537-7697 (TTY)  
Email: [OCRComplaint@hhs.gov](mailto:OCRComplaint@hhs.gov)

- b. USDA requires that the following nondiscrimination statement be provided exactly as it is shown below:

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity.



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-3207) found online at: [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](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

U.S. Department of Agriculture  
Director, Center for Civil Rights  
Enforcement  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410

- (2) Fax: (202) 690-7442; or

- (3) Email: [program.intake@usda.gov](mailto:program.intake@usda.gov)

This institution is an equal opportunity provider.

6. Arrangements for People with Disabilities:

ACHHS will make appropriate arrangements to ensure that people with disabilities are provided accommodations to participate in the complaint process in an equal manner to people without disabilities. Appropriate arrangements include, but are not limited to, providing interpreters for people who are deaf or hard-of-hearing; providing accessible formats for people who are blind or have low vision; and assuring a physically accessible location for complaint proceedings. The Civil Rights Contact or designee is responsible for making these arrangements.

7. ACHHS will refer all SNAP civil rights complaints to DHS or the USDA regional office in Chicago as soon as possible after received.

## **VI. 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.

**Title II of the Americans with Disabilities Act of 1990 (Title II of the ADA)** protects qualified individuals with disabilities from discrimination in state or local government services based on their disability. 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 access 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.

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.

### **(B) ADA Contact**

ACHHS 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 this CCRP.

Aitkin County Human Resources Manager  
218-927-7277 (voice)  
MN Relay Service: 711 or 800-627-3529  
Email:  
[Bobbie.danielson@aitkincountymn.gov](mailto:Bobbie.danielson@aitkincountymn.gov)

### **(C) Disability Complaints**

Members of the public filing disability complaints will use ACHHS' civil rights complaint procedure.

### **(D) ADA Notice Document**

ACHHS will use the DHS brochure: *Do you have a disability (DHS-4133-ENG)* as its ADA notice

document. The DHS brochure is available through the DHS public website <https://mn.gov/dhs/general-public/publications-forms-resources/edocs/>. This notice document informs applicants, clients and members of the public that ACHHS does not discriminate on the basis of disability; and it provides information to the public about the rights of people with disabilities under the Americans with Disability Act.

ACHHS has a copy of the DHS ADA brochure: *Do you have a disability (DHS-4133-ENG)* posted in the lobby. It is also located in the Appendix, Attachment C of this document.

### **(E) Disability Policy Prohibiting Discrimination**

The ACHHS Equal Opportunity Policy and Procedures includes provisions which prohibit disability discrimination in human services programs. This policy is located in the agency lobby.

## **VII. Limited English Proficiency (LEP) Plan**

Aitkin County completed a review of its LEP in July of 2024, changes to format and LEP coordinator were 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 of the plan. This plan is incorporated into the Comprehensive Civil Rights Plan in the Appendix, Attachment D.

The LEP plan can be viewed on or printed from the Aitkin County website at <https://www.co.aitkin.mn.us/> and one copy is on display in the front lobby of the Health & Human Services Department.

### **LEP Coordinator –**

Aitkin County Health & Human Services Director

204 1<sup>st</sup> Street NW

Aitkin, MN 56431

218-927-7225 (voice)

MN Relay Service: 711 or 800-627-3529

Email:

[sarah.pratt@aitkincountymn.gov](mailto:sarah.pratt@aitkincountymn.gov)

## **VIII. Annual Civil Rights Training for the Supplemental Nutrition Assistance Program (SNAP)**

ACHHS will conduct annual SNAP civil rights training for **all staff** in the Health & Human Services department. ACHHS will use the DHS TrainLink website to access the TES095-1 Civil Rights Requirements for SNAP Web Based Training. The training date will be documented on their individual TrainLink transcripts. As of July 2024 and ongoing, all ACHHS staff are required to complete the DHS Web Based Training by December 31<sup>st</sup> of each year.

## IX. Civil Rights Assurance of Compliance

The ACHHS director has signed the *2024-2026 State-County Civil Rights Assurance Agreement*. A copy is located in the Appendix, Attachment E.

## X. CCRP Administration

ACHHS 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; and
- Post the CCRP on the agency's public website; and
- Review the CCRP annually with ALL staff; and
- For the benefit of applicants, clients, and members of the public, prominently post in the lobby a copy of the following documents:
  - Equal Opportunity Policy and Procedure that includes provisions prohibiting disability discrimination; and
  - Civil Rights complaint resolution procedure
- Post a copy of the DHS brochure: *Do you have a disability (DHS-4133-ENG)* in the lobby next to the reception desk; and
- Conduct annual SNAP civil rights training for **all** ACHHS staff and document the date of the training each year and document who attends the training.

**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 Amendment 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 Provisions 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
  - Preventive Health and Health Services Block Grant
  - Community Mental Health Services Block Grant
  - Substance Abuse Prevention and Treatment 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 Act 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)
15. Equal Opportunity for Religious Organizations in USDA Regulation

**State**

Minnesota Human Rights Act, Chapter 363A

**Local**

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

**AITKIN COUNTY HEALTH & HUMAN SERVICES COMPLAINT NOTIFICATION FORM FOR COMPLAINTS ALLEGING DISCRIMINATION IN SERVICE DELIVERY**

**AUTHORITY:** U.S. Department of Agriculture, Food and Nutrition Service Instruction 113-1.

**REQUIREMENT:** County human service agencies must notify the DHS Civil Rights Coordinator within 90 days of all service delivery discrimination complaints (i.e., civil rights complaints) filed against them (see bottom of Page 2 for contact information).

**ACTION REQUIRED:**

**Complete this form and send it to the DHS Civil Rights Coordinator within 90 days of the date the complaint was filed.**

- 1. Name, address, telephone number of complainant:

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- 2. Name and address of county agency delivering the benefits, including names of any employees accused of wrongdoing:

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- 3. Type of discrimination alleged.

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4. Describe the alleged discrimination, including the dates it happened. Give names and contact information of any witnesses:

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5. Give a summary of the investigation findings, including any corrective action ordered:

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CONTACT INFORMATION:

DHS Civil Rights Coordinator  
Minnesota Department of Human Services  
Equal Opportunity and Access Division  
P.O. Box 64997  
St. Paul, MN 55164-0997  
651-431-3034 (voice) or use your preferred relay service  
651-431-7444 (fax)



# Do you have a disability?

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

Please tell us if you have a disability so we can help you access county or Tribal nation 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)  
mail to: [Info.mdhr@state.mn.us](mailto: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](mailto:ocrmail@hhs.gov)

## U.S. Department of Agriculture

### Do Not Send Applications Here

In accordance with federal civil rights law and **U.S. Department of Agriculture (USDA)** civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotope, American Sign Language), 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.

To file a program discrimination complaint, a Complainant should complete a [Form AD-3027, USDA Program Discrimination Complaint Form](https://www.usda.gov/sites/default/files/documents/ad-3027.pdf) which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (833) 620-1071, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to:

1. mail:  
Food and Nutrition Service, USDA  
1320 Braddock Place, Room 334  
Alexandria, VA 22314; or
2. fax: (833) 256-1665 or (202) 690-7442; or
3. email: [FNSCIVILRIGHTSCOMPLAINTS@usda.gov](mailto:FNSCIVILRIGHTSCOMPLAINTS@usda.gov)

**Do Not Send Applications Here**

**Please return to your local county or tribal human services office.**

**This institution is an equal opportunity provider.**

**NO ENGLISH**



**218-927-7200 | 800-328-3744**

Attention. If you need free help interpreting this document, call the number in the box above.

ማሳሰቢያ:- ስለ ዶክመንቱ ነፃ ገለፃ ከፈለጉ፣ ሠራተኛዎን ያነጋግሩ። Amharic

انتباه. إذا احتجت إلى مساعدة مجانية في ترجمة هذه الوثيقة، اتصل بالرقم الموجود في المربع أعلاه. Arabic

মেম্বনাযোগ দিন। যিহদ আপন িবনামেলয এই িনখটির বযাযার েজনয সহায় চান তােহল উেপরাকত বােকস থাকা নমবরটিতে কল করুন। Bengali

သတိပြုပရန်။ ဤစာတမ်းကို ဘာသာပြန်ဆီရန်အတွက် အခမဲ့အကူအညီ လိုအပ်ပါက, အထောက်အပံ့ပြုပါ အကွက်ရှု နံပါတ်ကို ခေါ်ဆိုပါ။ Burmese

ការយកចិត្តទុកដាក់។ របស់នេះនឹងជួយការងាររបស់អ្នកក្នុងការ ្នងការ បកស្រាយឯកសារនេះ៖ សូមមេរៀនសព្វេទៅលើខ្លួន ្នងរបស់ខ្លួនលើ។ Cambodian

注意！如果您需要免費的口譯支持，請撥打上方方框中的電話號碼。 Cantonese (Traditional Chinese)

wán. héčīnhan niyé wačhínnyAn wayúiyeska ki de wówapi sutá, ečiyA kin wóiyawa ed ophiye wan. Dakota

Paunawa. Kung kailangan mo ng libreng tulong sa pag-unawa sa kahulugan ng dokumentong ito, tawagan ang numero sa kahon sa itaas. Filipino (Tagalog)

Attention. Si vous avez besoin d'aide gratuite pour interpréter ce document, appelez le numéro indiqué dans la case ci-dessus. French

સાવધાન. જો તમને આ દસ્તાવેજને સમજવા માટે િન:શુલ્ક મદદની જરૂર હોય, તો ઉપરના બોક્સ પૈકીના નંબર પર કોલ કરો. Gujarati

ध्यान दें। यदि आपको इस दस्तावेज़ की व्याख्या में िन:शुल्क सहायता की आवश्यकता है, तो ऊपर बॉक्स में िदिए गए नंबर पर कॉल करें। Hindi

**NO ENGLISH**



**218-927-7200 | 800-328-3744**

Lus Ceeb Toom. Yog tias koj xav tau kev pab txhais lus dawb ntawm cov ntaub ntawv no, ces hu rau tus nab npawb xov tooj nyob hauv lub npov plaub fab saum toj no. Hmong

ဟ်သ့ဟ်သး. နမ့ၢ်လိာ်ဘၣ် တၢ်မၤစၢၤကလီၤလၢ ကကျိးထံလံာ်တီၢ်မိတဖၣ်အယိ, ကိးနီၣ်ဂံၢ်လၢ အအိၣ်ဖဲတၢ်လံာ်နီၣ်နီၣ် လၢတၢ်ဖိခိၣ်အပူၤတက့ၢ်. Karen

이 문서의 내용을 이해하는 데 도움이 필요하시면 위에 있는 전화번호로 연락해 무료 통역 서비스를 받으실 수 있습니다. Korean

تکایه سه‌رنج بده. ئەگەر بۆ وەرگیرانی ئەم بەڵگەنامەیە پێویستت بە یارمەتی بێ‌بەرامبەرە، ئەوا پەڕێوەندی بەو ژمارەیهوه بکە که له بۆکسه‌که‌ی سه‌ره‌ه‌دایه. Kurdish Sorani

Baldarî. Ger ji bo wergerandina vê belgeyê hewcedariya we bi alîkariya belaş hebe, ji kerema xwe bi hejmara li qutiya jorîn re telefon bikin. Kurdish Kurmanji

Hoǎpín. Tóhán wanǎ́zhí thí wíyukčanǎpi kin yuhá níyunspe hécha chéya, lé tkíčhunǎ kin k'é nánpa opáwinǎyan. Lakota

ເອົາໃຈໃສ່. ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອພຣີໃນການຕີຄວາມເອກະສານນີ້, ໃຫ້ເຂົ້າຫາເບີທີຢູ່ໃນບ່ອນຂ້າງເທິງ. Lao

注意！如果您需要免费的口译帮助，请拨打上方方框中的电话号码。  
Mandarin (Simplified Chinese)

Paɭɛ ɾɔ piny: Mi gööri luäk lɔrä ke luɔ\_c kä memɛ, yɔtni nämbär emɔ tää nhial guäth emɛ. Nuer

Mah Biz'sin'dan.

Keesh'pin nan'deh'dam'mun chi'wee'chi'goo'yan chi'nis'too'ta'man oo'weh ooshii'be'kan.

Ishi'kidoon ah'kin'das'soon ka'ooshi'bee'kadehk ish'peh'mik ka'shi ka'ka'kak. Ojibwe

**NO ENGLISH**



**218-927-7200 | 800-328-3744**

Hubachiisa:-Yoo barreeffama kana hiikuuf gargaarsa bilisaa barbaaddan, lakkoofsa saanduqa armaan olii keessa jirun bilbilaa Oromo

Atenção. Se você precisar de ajuda gratuita para interpretar este documento, ligue para o número na caixa acima. Portuguese

Внимание! Если Вам нужна бесплатная помощь в переводе этого документа, позвоните по телефону, указанному в рамке выше. Russian

Pažnja. Ukoliko vam je potrebna besplatna pomoć u tumačenju ovog dokumenta, pozovite broj naveden u kvadratu iznad. Serbian

Fiiro gaar ah. Haddii aad u baahan tahay caawimo bilaash si laguugu turjumo dukumiintigan, wac lambarka ku jira sanduuqa sare. Somali

Atención. Si necesita ayuda gratuita para interpretar este documento, llame al número que aparece en el recuadro superior. Spanish

Zingatia. Iwapo unahitaji msaada usio na malipo wa kutafsiri hati hii, piga simu kwa namba iliyo kwenye kisanduku hapo juu. Swahili

ልቢ በሉ፡ ነዚ ሰነድ ንምትርጓም ነፃ ሓገዝ እንተ ይልዮም፡ በቲ ኣብ ላዕሊ ኣብ ውሽጢ ሰደፉ ተቐጫጡ ዘሎ ቁጽሪ ይደውሉ። Tigrinya

Увага! Якщо Вам потрібна безкоштовна допомога в перекладі цього документа, зателефонуйте за номером, вказаним у рамці вище. Ukrainian

Xin lưu ý: Hãy liên hệ theo số điện thoại trong ô trên nếu bạn cần bất kỳ sự hỗ trợ miễn phí nào để hiểu rõ về tài liệu này. Vietnamese

Àkíyèsí. Tí o bá nílò ìrànlówọ pẹ̀lú tí tú mọ̀ àkòṣẹ̀ yìí, pe nọmbà tó wà nínú àpótí tí wà ló kẹ̀. Yoruba



### Attachment D

## Limited English Proficiency (LEP) Plan

### Aitkin County Health & Human Services

#### 1. Purpose

The purpose of this plan is to document the policies and procedures as it applies to providing meaningful access (language access) to individuals with Limited English Proficiency (LEP) while accessing services and information at Aitkin County Health & Human Services (ACHHS) in Aitkin, MN.

#### 2. Authorities

- Title VI of the Civil Rights Act of 1964, 42 U.S.C. §2000 et seq.; 45 CFR §80, Nondiscrimination Under Programs Receiving Federal Financial Assistance through the U.S. Department of Health and Human Services Effectuation of Title VI of the Civil Rights Act of 1964.
- Section 1557 of the Affordable Care Act (ACA) (Section 1557).  
<https://www.gpo.gov/fdsys/pkg/FR-2016-05-18/pdf/2016-11458.pdf>
- Office for Civil Rights Policy Guidance, Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons, 68FR 47311 (2003).  
<http://www.hhs.gov/ocr/civilrights/resources/specialtopics/lep/policyguidancedocument.html>
- Department of Justice regulation, 28 CFR §42.405(d)(1), Department of Justice, Coordination of Enforcement of Non-discrimination in Federally Assisted Programs, Requirements for Translation. [http://www.justice.gov/crt/grants\\_statutes/corregt6.txt](http://www.justice.gov/crt/grants_statutes/corregt6.txt)
- Bilingual requirements in the Food Stamp program, 7 CFR §272.4 U.S. Department of Agriculture, Food and Consumer Service. <http://www.gpo.gov/fdsys/pkg/CFR-1998-title7-vol4/pdf/CFR-1998-title7-vol4-sec272-4.pdf>
- Communications Services, Minnesota Statutes § 15.441, subd (1), (2), (3), (4).  
<https://www.revisor.leg.state.mn.us/statutes/?id=15.441&format=pdf>
- Information for persons with limited English language proficiency, Minnesota Statutes §256.01 subd 16. <https://www.revisor.mn.gov/statutes/?id=256.01>
- National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care. <https://thinkculturalhealth.hhs.gov/clas>

### 3. Definitions

- **Culturally appropriate services** – Is the utilization or application of services, testing, and any other methodology that does not have the effect of subjecting individuals with LEP, and/or their families to discrimination because of their race, color, or national origin, or do not have the effect of defeating or substantially impairing accomplishment of the objectives of the program with respect to individuals of a particular race, color, or national origin. - 45 CFR 80.3(b)(2).
- **Effective communication** - In a healthcare and social services delivery setting such as health and human services, effective communication occurs when provider staff has taken the necessary steps to make sure that a person with Limited English Proficiency is given adequate information to understand the services and benefits available and receives the information and services for which they are eligible. Effective communication also means that a person with Limited English Proficiency (LEP) is able to communicate the relevant circumstances of their situation to the provider, and the provider has access to adequate information to do their job.
- **I Speak Cards** - “I Speak” Cards say both in English and the target language “I need a (target language) interpreter.”
- **Individual with Limited English Proficiency (LEP)** – A person with Limited English Proficiency or “LEP” is not able to speak, read, write, or understand the English language well enough to allow them to interact effectively with healthcare, social services agencies, and other providers.
- **Interpreting**—Interpreting means the oral, verbal, or spoken transfer of a message from the source language into the target language. Different modes of interpreting exist, such as consecutive, simultaneous, sight-translation, and summarization.
- **Language Block (LB)** – This is a block of text that informs readers, in 33 different languages, how they can get free help interpreting the information on a particular document or included as an insert in appropriate documents.
- **LEP Implementation Team** (*or responsible individuals for compliance*) - Individuals appointed by LEP Coordinator to review LEP Implementation activities within ACHHS.
- **Meaningful access** - Meaningful access to programs, information, and services is the standard of access required of federally funded entities to comply with language access requirements of Title VI of the Civil Rights Act of 1964. To ensure meaningful access for individuals with Limited English Proficiency, service providers must make available to clients and their families language assistance that is free of charge and provided without undue delay resulting in accurate and effective communication.
- **Office for Civil Rights (OCR)** - The Office for Civil Rights is the civil rights enforcement agency of the U.S. Department of Health and Human Services. OCR Region V is the

regional office that enforces Title VI in Minnesota for health and human services agencies and providers.

- **Primary languages** - Primary languages are the languages other than English that are most commonly spoken by clientele as identified by ACHHS collection of demographic data. Currently there are 3 primary languages: English, Spanish, and Russian.
- **Qualified Bilingual staff** - Is the person who has met and demonstrated the minimum linguistic proficiency and fluency requirements in both languages (target and source languages), AND has demonstrated cultural responsiveness, AND ACCHS has documented the above.

If the qualified bilingual staff is going to act as interpreter for others, the above criteria are required, in addition to receiving at least 8 hours annually of interpreting Continuing Education (CE) including 2 hours of ethics and 2 hours of skills development (performance skills), AND at least one of the following documented by ACHHS:

The qualified bilingual staff:

- i. Is a Healthcare Certified Interpreter (CHI, or CoreCHI), Certified Medical Interpreter (CMI), Federal or State Court certified interpreter
- ii. has received healthcare interpreting training (minimum of 40 hours)
- iii. has received community interpreting training (minimum of 40 hours)
- iv. has developed proven skills and abilities as an interpreter
- v. understands boundaries and roles as an interpreter by abiding by the National Code of Ethics and Standards of Practice for Healthcare Interpreters by NCIHC, Canons, the conduct for court interpreters, or other professional codes of ethics and standards of practice related to language access

ACHHS must keep documentation of the above readily available upon request, audits, or in the process of investigations.

- **Qualified Interpreter** - A person who either has met training and competency requirements, or who is a certified healthcare interpreter, certified federal or certified state court interpreter and is in good standing before their certifying body, AND adheres to the interpreter National Code of Ethics and Standards of Practice for Interpreters in Health Care (National Council on Interpreting in Health Care –NCIHC), the canons of ethics, the conduct for court interpreters, or other professional codes of ethics and standards of practice related to language access.
- **Sight translation** - The verbal translation (transfer) of a written document from the source language into the target language.
- **Translation** - Translation means the written transfer of a message from the source language into the target language.



### **3. Methods of Providing Services to individuals with LEP**

The primary methods used are DHS-4374-ENG Interpreter Cards, Language Line Services, and Family and/or Friends.

Contracted Qualified Interpreters: Interpreter Services vendors contracted with the Minnesota Department of Administration can be accessed as necessary at:

[http://www.mmd.admin.state.mn.us/pdf/s-885\(5\).pdf](http://www.mmd.admin.state.mn.us/pdf/s-885(5).pdf)

Telephone Interpreter Services: Language Line Services, 1-800-367-9559, provides 24-hour phone interpretation services in over 140 languages.

Video Remote Interpreting (VRI) Services: ACHHS does not have a contract for VRI.

Bilingual staff: Aitkin County currently doesn't employ any bilingual staff.

LEP Liaison & Coordinator: Director, ACHHS

LEP Liaison Back-up: Financial Assistance Supervisor or Social Services Supervisor, ACHHS.

### **4. Interpreter Services**

ACHHS, without undue delay and at no cost to individuals with LEP and/or their families, provides meaningful access to information and service to all individuals with LEP and/or their families receiving information and services.

### **5. Translation of Documents**

ACHHS will rely on the state produced documents as the primary source of translated materials to assist individuals with LEP in translating all vital documents, or documents needed to provide information and perform services. Downloading of documents from the DHS website will also be used as necessary. ACHHS will follow DHS's translation numerical guidelines as required.

### **6. Dissemination and Mandatory Training to Agency Staff, Volunteers, and Others**

ACHHS is committed to providing LEP training to:

- All staff at new employee orientation, AND
- At least once a year to all staff, volunteers, and contractors

ACHHS will keep a record of those training sessions, and individual records of attendance to training will be part of personnel files. Record of this training will be kept for at least five years and readily available during DHS audits, investigations, or any proceeding and as required by the law.

This training is to include at least the following:

- Title VI of the Civil Rights Act of 1964
- How to work effectively with interpreters and use of new technology, and
- Any other cultural and equity components related to delivery of information and services to individuals with LEP served by ACHHS.

This LEP plan is added to the Manual of Policies and Procedures of ACHHS.

## Dissemination of Language Access Information in Public Areas

ACHHS makes available to individuals with LEP:

- Notice of language access services by posting in public areas the “Language Poster” (DHS-4739A-ENG), available through the DHS public Web site (<https://mn.gov/dhs/general-public/publications-forms-resources/edocs/> )
- “I need an interpreter” (DHS-4374-ENG) cards available in 33 languages and from the DHS public website (<https://mn.gov/dhs/general-public/publications-forms-resources/edocs/> )
- Catalog of Languages (DHS-4059-ENG) available through the DHS public website (<https://mn.gov/dhs/general-public/publications-forms-resources/edocs/>)

### 7. Annual Review of the LEP Plan

ACHHS reviews annually its LEP plan to adjust or modify its contingencies based on demographic data collected by ACHHS during its delivery of information and services to individuals with LEP throughout the year.

ACHHS upon DHS request will complete and submit DHS LEP Plan review annually or as often as requested by DHS.

### 8. Collection of Data & Its Analysis

ACHHS is committed to monitoring and making reasonable adjustments to comply with Title VI requirements. ACHHS will utilize 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 and Russian.
- School District Data – This data indicates that Aitkin County has few individuals with LEP.
- Other Data Sources – The Legal Aid office in Brainerd, Minnesota 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.

### 9. Complaint Process:

Individuals with LEP have the right to file a formal complaint with:

- Aitkin County Health & Human Services:
  - Sarah Pratt, Director

204 1<sup>st</sup> Street NW  
Aitkin, MN 56431  
218-927-7225 (voice) or 711 or  
800-627-3529 (MN Relay)  
Email: [Sarah.pratt@aitkincountymn.gov](mailto:Sarah.pratt@aitkincountymn.gov)

- Minnesota Department of Human Services (DHS), Limited English Proficiency (LEP) Coordinator:
  - Alejandro Maldonado  
P.O. Box 64997  
St. Paul, MN 55164-0997  
651-431-4018 (voice) or 711 or  
800-627-3529 (MN Relay)  
Email: [alejandromaldonado@state.mn.us](mailto:alejandromaldonado@state.mn.us)
  
- Office for Civil Rights (OCR), Region V – Chicago, IL
  - Regional Manager  
Office for Civil Rights  
U.S. Department of Health and Human Services  
233 N. Michigan Ave., Suite 240  
Chicago, IL 60601  
800-368-1019 (voice)  
202-619-3818 (FAX)  
800-537-7697 (TDD)  
Email: [ocrmail@hhs.gov](mailto:ocrmail@hhs.gov)  
<http://www.hhs.gov/ocr/civilrights/complaints/index.html>

This LEP Plan is available in public areas of ACHHS, to all staff, volunteers, and contractors, and to members of the community.

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**Revisions to this LEP Plan**

<i>Creation</i>	May 2001	by Tom Burke
	No changes made at this time as this is the creation of the LEP plan.	
<i>First Revision</i>	August 2013	by Tom Burke
<i>Second Revision</i>	February 2018	by Jessica Goble
<i>Third Revision</i>	July 2024	by Paula Arimborgo
	<i>Updated LEP Coordinator and format</i>	



## 2024-2026 STATE-COUNTY CIVIL RIGHTS ASSURANCE AGREEMENT

The County Agency Aitkin County Health & Human Services agrees to act in accordance with the provisions of the Food and Nutrition Act of 2008, as amended, implementing regulations and any applicable provisions of the FNS approved State Plan of Operation with the State of Minnesota. The County Agency and the State agency further agree to fully comply with any changes in Federal law and regulations. This agreement may be modified with the mutual consent of the County Agency, the State agency, and FNS USDA.

The County Agency agrees to comply with the State-County Civil Rights Assurance Agreement as a condition of receiving Federal financial assistance provided to the State of Minnesota by the USDA under the authority of the Food and Nutrition Act of 2008, as amended.

The State-County Civil Rights Assurance Agreement is binding upon the County Agency, its successors, transferees, and assignees for as long as the County Agency receives Federal financial assistance from the State of Minnesota by the USDA under the authority of the Food and Nutrition Act of 2008, as amended.

The State of Minnesota may enforce all parts of the Civil Rights Assurance Agreement as a condition of the County Agency's receipt of Federal funds from the State of Minnesota by the USDA under the authority of the Food and Nutrition Act of 2008, as amended.

**Compliance by Contractors and Vendors:** The County Agency further agrees that by accepting this Civil Rights Assurance Agreement, it will obtain a written statement of assurance from all of its contractors and vendors (*i.e.*, applying to all programs), assuring that they will also operate in compliance with the stated nondiscrimination laws, regulations, policies, and guidance. The written statement of assurance from all of its contractors and vendors must be maintained as part of the County Agency's Comprehensive Civil Rights Plan and must be made available for review upon request by the State of Minnesota or the U.S. Department of Agriculture.

### **RECIPIENT AGREES TO COMPLY WITH ALL APPLICABLE FEDERAL AND STATE CIVIL RIGHTS LAWS:**

#### **The County Agency agrees to:**

1. Administer all programs in accordance with the provisions contained in the Food and Nutrition Act of 2008, as amended, and in the manner prescribed by regulations issued pursuant to the Act; and to follow the FNS-approved State Plan of Operation.
2. Assurance of Civil Rights Compliance: Comply with Title VI of the Civil Rights Act of 1964 ([42 U.S.C. 2000d et seq.](#)), Title IX of the Education Amendments of

1972 ([20 U.S.C. 1681 et seq.](#)), Section 504 of the Rehabilitation Act of 1973 ([29 U.S.C. 794](#)), the Age Discrimination Act of 1975 ([42 U.S.C 6101 et seq.](#)), section 11(c) of the Food and Nutrition Act of 2008, as of amended (7 U.S.C 2020), Title II and Title III of the Americans with Disabilities Act (ADA) of 1990 as amended by the ADA Amendments Act of 2008 ([42 U.S.C. 12131-12189](#)) as implemented by Department of Justice regulations at [28 CFR part 35](#) and [36](#), Executive Order 13166, “Improving Access to Services for Persons with Limited English Proficiency” (August 11, 2000), and all requirements imposed by the regulations issued by the Department of Agriculture to the effect that, no person in the United States shall, on the grounds of sex, including gender identity and sexual orientation, race, color, age, political belief, religious creed, disability, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subject to discrimination under SNAP. This includes program-specific requirements found at [7 CFR part 15 et. seq.](#) and [7 CFR 272.6](#).

This assurance is given in consideration of and for the purpose of obtaining any and all Federal assistance extended to the State by the USDA under the authority of the Food and Nutrition Act of 2008, as amended. Federal financial assistance includes grants, and loans of Federal funds; reimbursable expenditures grants or donations of Federal property and interest in property; the detail of Federal personnel; the sale, lease of, or permissions to use Federal property or interest in such property; the furnishing of services without consideration, or at a nominal consideration, or at a consideration that is reduced for the purpose of assisting the recipient or in recognition of the public interest to be served by such sale, lease, or furnishing of services to the recipient; or any improvements made with Federal financial assistance extended to the State by USDA. This assistance also includes any Federal agreement, arrangement, or other contract that has as one of its purposes the provision of cash assistance for the purchase of food, cash assistance for purchase or rental of food service equipment or any other financial assistance extended in reliance on the representations and agreements made in this assurance.

By accepting this assurance, the County agency agrees to compile data, maintain records, and submit records and reports as required, to permit effective enforcement of nondiscrimination laws and permit authorized USDA personnel during hours of program operation to review and copy such records, books, and accounts, access such facilities and interview such personnel as needed to ascertain compliance with the nondiscrimination laws. If there are any violations of this assurance, the State agency, shall have the right to seek judicial enforcement of this assurance. This assurance is binding on the County agency, its successors, transferees and assignees as it receives assistance or retains possession of any assistance from USDA. The person or persons whose signatures appear below are authorized to sign this assurance on behalf of the County agency.

3. (For States with Indian Reservations only). Implement the program in a manner that is responsive to the special need of American Indians on reservations and

consult in good faith with tribal organizations about that portion of the State's Plan of Operation pertaining to the implementation of the Program for the members of the tribe on reservations.

- 4. FNS agrees to: 1. Pay administrative cost in accordance with the Food and Nutrition Act of 2008, implementing regulations, and an approved Cost Allocation Plan.
- 2. Carry out any other responsibilities delegated by the Secretary in the Food and Nutrition Act of 2008, as amended.

**By signing on behalf of the County Agency, I state that I am authorized to bind the County Agency to the terms of the 2024-2026 Civil Rights Assurance Agreement and commit it to the above provisions.**

*Sarah Pratt*  
Signature of agency representative

Sarah Pratt, H&HS Director  
Print Name

Aitkin County Health & Human Services  
Name of County Agency

204 1st St NW, Aitkin, MN 56431  
Street Address, City, State, Zip Code

**Unless amended or rescinded, this 2024-2026 Civil Rights Assurance Agreement is valid through December 31, 2026.**

## **ADDENDUM**

### **Clarification of SNAP Civil Rights Requirements - Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency (LEP)," and Titles II and III of the Americans with Disabilities Act.**

This addendum clarifies core civil rights requirements to ensure meaningful access to programs, services, and information for persons with Limited English Proficiency (LEP) and persons with disabilities in accordance with Federal law, regulations, and current guidance from the U.S. Department of Department of Justice (DOJ) and the U.S. Department of Agriculture (USDA).

#### **Meaningful Access for LEP Individuals**

County agencies that participate in the Supplemental Nutrition Assistance Program (SNAP) must take reasonable steps to ensure that LEP persons have meaningful access to programs, services, and benefits. This includes the requirement to provide bilingual program information and certification materials and interpretation services to single-language minorities in certain project areas. SNAP County agencies that do not provide meaningful access for LEP individuals risk violating prohibitions against discrimination based on National Origin in the Food and Nutrition Act of 2008, as amended, Title VI of the Civil Rights Act of 1964 (Title VI), and SNAP program regulations.

Federal LEP regulations and guidance include:

- SNAP regulations provided by 7 CFR Part 272.4 (b), "Bilingual requirements";
- Executive Order 13166 of August 11, 2000, "Improving Access to Services for Persons with Limited English Proficiency," reprinted in 65 FR 50121, 50122 (August 16, 2000);
- DOJ policy guidance titled, "Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons," published in 67 FR 41455, 41457 (June 18, 2002); and
- USDA policy guidance titled, "Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons," published in 79 FR 70771-70784 (November 28, 2014).

#### **Four Factor Analysis for Assessing LEP Needs**

To be in compliance, the Title VI guidance provided by DOJ and USDA instructs County Agencies to assess the LEP needs of the population served and determine the LEP services required by balancing four factors:

1. The number or proportion of persons with limited English proficiency are eligible to be served or likely to be encountered within the area serviced by the recipient;



2. The frequency with which persons with limited English proficiency come in contact with the program;
3. The nature and importance of the program, activity, or service to people's lives; and
4. The resources available to the recipient and costs.

SNAP County agencies must also comply with the specific requirements established by 7 CFR Part 272.4 (b) and should include these obligations in the LEP assessment.

### **Developing an LEP Plan**

After completing an assessment of LEP needs, SNAP County agencies should develop an implementing plan to address the LEP needs of the population served. This may include contracting for oral interpretation services, hiring bilingual staff, arranging for telephone interpreters and/or language lines, coordinating community volunteers, translating vital documents, and providing written notice that language line services are available in appropriate languages. Quality and accuracy of the language service is critical in order to avoid serious consequences to the LEP person and to the recipient. LEP needs should be considered in developing County and local budgets and front-line staff should understand how to obtain LEP services.

USDA's 2014 policy guidance includes detailed information on assessing LEP needs, identifying practices for translating documents that will be seen as strong evidence of compliance. For additional assistance and information regarding LEP matters, please also visit <http://www.lep.gov>. The website includes online LEP mapping tools designed to help assess the language needs of the population served by a particular program or facility.

### **Ensuring Equal Opportunity Access for Persons with Disabilities**

SNAP County agencies must also ensure equal opportunity access for persons with disabilities. This includes ensuring that communications with applicants, participants, members of the public, and companions with disabilities are as effective as communications with people without disabilities. County agencies that do not provide persons with disabilities equal opportunity access to programs may risk violating prohibitions against disability discrimination in the Rehabilitation Act of 1978, the Americans with Disabilities Act (ADA), and SNAP program regulations. DOJ published revised final regulations implementing Titles II and III of the ADA on September 15, 2010. These regulations are codified at 28 CFR Part 35, "Nondiscrimination on the Basis of Disability in State and Local Government Services" and 28 CFR Part 36, "Nondiscrimination on the Basis of Disability in Public Accommodations and Commercial Facilities." In accordance with the implementing regulations, County Agencies must provide auxiliary aids and services where necessary to ensure effective communication and equal opportunity access to program benefits for individuals with disabilities. The type of auxiliary aids and services required will vary, but a County agency may not require an individual with a disability to bring another individual to interpret, and may rely on a person accompanying a

disabled individual only in limited circumstances. When a County agency communicates with applicants and beneficiaries by telephone, it must provide text telephone services (TTY) or an equally effective electronic telecommunications system to communicate with individuals who are deaf, hard of hearing, or hearing impaired. County agencies must also ensure that interested persons, including people with low vision or who are hard of hearing can obtain information as to the existence and location of accessible services, activities, and facilities. For more information, please visit the ADA website: [www.ada.gov](http://www.ada.gov)

**Please submit the signed 2024-2026 STATE-COUNTY CIVIL RIGHTS ASSURANCE AGREEMENT to:**

**Civil Rights Coordinator  
Minnesota Department of Human Services  
Equal Opportunity and Access Division (EOAD)  
P.O. Box 64997  
St. Paul, MN 55164-0997**

**Email: [dhs.equalopportunity@state.mn.us](mailto:dhs.equalopportunity@state.mn.us)**

**EOAD Telephone: 651-431-3040 (voice) or use your preferred relay service**