

# Comprehensive Civil Rights Plan

September 2020



## Beltrami County Health and Human Services

616 America Ave NW Suite 220  
Bemidji, MN 56601

218-333-8300 Economic Assistance  
218-333-4223 Social Services  
218-333-8140 Public Health  
218-333-8200 Employment Services

**Civil Rights Coordinator:** Anne Lindseth, Economic Assistance Director  
**218-333-4199**

**ADA Coordinator:** Anne Lindseth, Economic Assistance Director  
**218-333-4199**

**Limited English Proficiency Coordinator:** Will Haubrich, Financial Assistance Supervisor  
**218-333-8134**

The Comprehensive Civil Rights Plan is posted in the Public Health lobby on the 1<sup>st</sup> floor of the Community Services Center and the Consolidated Intake Lobby on 2<sup>nd</sup> floor of the Community Services Center.

### Americans with Disabilities Act Advisory

This information is available in accessible formats to individuals with disabilities. For information about equal access to services call 218-333-8300 or 218-333-4199  
Dial 711 for relay services or use your preferred relay service.

## Purpose

As a recipient of federal financial assistance, Beltrami County Health and Human Services 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. Beltrami County Health and Human Services has a civil rights plan to ensure that all eligible individuals receive equal access to program services and information. Its 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. 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.

### Legal Authority

#### 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 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
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 Regulation

#### State

Minnesota Human Rights Act, Chapter 363A

## **Civil Rights Contact Person**

Anne Lindseth  
Economic Assistance Division Director  
Beltrami County Health and Human Services  
218-333-4199 or use your preferred relay service  
[Anne.lindseth@co.beltrami.mn.us](mailto:Anne.lindseth@co.beltrami.mn.us)

### **1. Equal Opportunity Policy and Procedure**

It is the policy of Beltrami County Health and Human Services 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. Beltrami County Health and Human Services employees, services, programs, benefits and policies will not discriminate against applicants, clients, or members of the public because of race, color, national origin, sex, sexual orientation, age, creed, religion, political beliefs, disability, or public assistance status.

This policy covers Beltrami County Health and Human Services' 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. The policy applies to the agencies and providers receiving federal and state funds under contracts, licenses and other arrangements with Beltrami County Health and Human Services. The Minnesota Human Rights Act also applies to the work of Beltrami County Health and Human Services and those agencies carrying out its programs.

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

Beltrami County Health and Human Services 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, Beltrami County HHS will:

- Notify the public about rights and protections for people with disabilities under the Americans with Disabilities 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 are accessible to and usable by qualified people with disabilities

**Physical access includes:**

- Convenient parking designated specifically for people with disabilities
- Curb cuts and ramps between parking areas and the Beltrami County buildings
- Level access into the first floor of all Beltrami County buildings with elevator access to all other floors

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

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

**Effective Communication and Auxiliary Aids and Services**

Beltrami County Human Services 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, Beltrami County Health and Human Services 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, Beltrami County Health and Human Services will give primary consideration to the requests of people with disabilities. Beltrami County Health and Human Services 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, Beltrami County will find another equally effective auxiliary aid or service.

**2. Complaint Resolution Procedure****Beltrami County Health and Human Services Civil Rights Complaint Procedure**

Every individual has the right to equal access to services, whether they are an applicant, client or member of the public trying to gain access to human services program information or benefits. Beltrami County Health and Human Services has a civil rights complaint procedure that provides prompt and thorough resolution of civil rights complaints.

Civil rights complaints allege discrimination. Individuals have a right to file a civil rights complaint if they believe they or an individual they care for has been discriminated against because of their race, color, national origin, sex, sexual orientation, age, creed, religion, political beliefs, disability or public assistance status.

It is against the law for anyone who works for Beltrami County Health and Human Services to retaliate against a person who files a complaint or who cooperates in the investigation of a civil rights complaint.

Everyone has a right to file a civil rights complaint, even if the complaint does not appear to involve discrimination. If the complainant believes that the complainant has been discriminated against by someone providing human services, then a civil rights complaint packet will be provided. Each packet must include the Agency's equal opportunity policy, complaint resolution procedure and complaint form. To file a complaint, ask for Beltrami County Human Services' equal opportunity policy, complaint 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 Beltrami County Health and Human Services:

Anne Lindseth,  
Economic Assistance Division  
Beltrami County HHS  
616 America Ave NW Suite 220  
Bemidji, MN 56601  
Voice: 218-333-4199  
FAX: 218-333-4150  
Or use your preferred relay service

#### **Complaint Procedure:**

- A. Civil rights complaints **must** be submitted to the Civil Rights Contact within 180 days of the date the alleged discrimination occurred.
  
- B. A complaint **must** be in writing and contain the name and address of the person filing it. Attachment B in the Appendix may be utilized. Complainant should also provide a telephone number or relay service number if deaf or hard of hearing. Provide an email address if it helps get in touch with the complainant. 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.
  
- C. Beltrami County Human Services **must** conduct an investigation of the complaint, if it is a true civil rights complaint. The investigation may be informal, but it **must** be thorough and timely. People who have an interest in the complaint **must** have an opportunity to submit relevant evidence about the complaint. The investigation shall include interviews with individuals involved in the complaint and review of all relevant documents. Beltrami County Health and Human Services will issue a written decision on the complaint within 120 days after its filing and shall notify the complainant of its decision. Beltrami County Health and Human Services will maintain the complaint records and files for three years from the date of the decision. Complaints about program rules are not civil rights complaints and will be resolved through a different complaint process.
  - a. **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., 20th Floor Chicago, IL  
60604-3591**

**(312) 353-6657 (voice) or use your preferred relay service**

D. The person filing the complaint may appeal the Agency's decision by writing to the agency's Civil Rights Contact within 15 days of receiving the written decision. The Civil Rights Contact **will** issue a written decision in response to the appeal, no later than 30 days after the filing. This decision is final. – This appeal process is not the same as filing a fair hearings appeal with the Department of Human Services' Appeals and Regulations Division.

E. The person filing the complaint will 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. Contact the federal agency directly:

**U.S. Department of Health and Human Services Office for  
Civil Rights**

Region V  
233 N. Michigan Avenue  
Suite 240  
Chicago, IL 60601  
312-886-2359 (voice)  
800-368-1019 (toll free)  
800-537-7697 (TTY)  
[Ocrmail@hhs.gov](mailto:Ocrmail@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, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who required alternative means of communication for program information (e.g., Braille, large print, audiotope, 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-3027) 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  
Office of the Assistant Secretary for Civil Rights 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.**

F. Filing Complaints with State Agencies:

The person filing the complaint **must** also 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, 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  
St. Paul, MN 55104  
651-539-1100 (voice)  
800-657-3704 (toll free)  
711 or 800-627-3529 (MN Relay)  
651-296-9042 (fax)  
[Info.mdhr@state.mn.us](mailto:Info.mdhr@state.mn.us)

- (b) The **Minnesota Department of Human Services** prohibits discrimination in its programs because of race, color, national origin, creed, religion, sexual orientation, public assistance status, age, disability, or sex. Contact the Equal Opportunity and Access Division **directly** only if you have a discrimination complaint:

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

- (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  
[Tamara.earley@fns.usda.gov](mailto:Tamara.earley@fns.usda.gov)

**G. Arrangements for People with Disabilities:**

Beltrami County Health and Human Services **will** make appropriate arrangements to ensure that people with disabilities are provided reasonable modifications or effective communications, if needed, to participate in the complaint process. Reasonable modifications or effective communications include, but are not limited to, providing interpreters for people who are deaf or hard-of-hearing; providing taped cassettes and 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.

Beltrami County Health and Human Services will refer all SNAP civil rights complaints to DHS or the USDA regional office in Chicago as soon as possible after received.

**H. Complaint Notification Form**

Beltrami County Health and Human Services will use the *Complaint Notification Form*, Attachment F, to notify DHS in writing of all service delivery discrimination complaints filed against Beltrami County Health and Human Services and resolved on the county agency level. Beltrami County Health and Human Services will make sure the complaint notification form is completed and sent to DHS within 90 days of the date the complaint was filed in the county so DHS can report the complaint to the appropriate federal office. A copy of the *Complaint Notification Form* is located in the Appendix; Attachment F.

**3. Disability Compliance**

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 on the basis of their disability when the discrimination occurs in state or local government services. 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.

Beltrami County must ensure that people with disabilities are able to use 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; the same standard of access that applies to people without disabilities.

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.

#### **ADA Contact**

Beltrami County 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.

#### **Disability Complaints**

People filing disability complaints will use Beltrami County Health and Human Services' civil rights complaint procedure.

#### **ADA Notice Document**

Beltrami County Health and Human Services will use the DHS brochure: *Do you have a disability?* (DHS-4133-ENG) as its ADA notice document. This notice document informs applicants, clients and members of the public that Beltrami County does not discriminate on the basis of disability. The notice document also gives information to the public about the rights of people with disabilities under the Americans with Disabilities Act.

Beltrami County Health and Human Services has a copy of DHS brochure: *Do you have a disability* (DHS-4133-ENG) posted in the lobby next to the reception desks.

A copy of the DHS brochure: *Do you have a disability* (DHS-4133-ENG) is located in the Appendix; Attachment C.

#### **Disability Policy Prohibiting Discrimination**

The Beltrami County Health and Human Services' Equal Opportunity Policy and Procedure includes provisions which prohibit disability discrimination in human services programs. This policy is located in the agency's lobby and is located in the Appendix; Attachment E.

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

Beltrami County Health and Human Services will conduct annual SNAP civil rights training for all staff who administer the SNAP program. Beltrami County Health and Human Services will use DHS' PowerPoint presentation to train staff, document the date of the training each year and document who attends the training.

5. **Civil Rights Assurance of Compliance**

The Beltrami County Health and Human Services Division Manager and county attorney representative have signed the *2019-2021 State-County Civil Rights Assurance Agreement*. A copy is located in the Appendix; **Attachment D**.

6. **CCRP Administration**

Beltrami County Health and Human Services will:

- Post a copy of its CCRP in the agency's lobbies where members of the public can review it and in the employee copy rooms and have it available on line on the Beltrami County Health and Human Services Intranet where staff can review it
- Post the CCRP on the agency's public website
- Review the CCRP annually with ALL staff
- For the benefit of applicants, clients and members of the public, prominently post in each lobby a copy of the *equal opportunity policy and procedure* that includes provisions prohibiting disability discrimination and a copy of its civil rights complaint procedure
- Post a copy of the DHS brochure: *Do you have a disability?* (DHS-4133- ENG) in each lobby next to the reception desk
- Conduct annual SNAP civil rights training for all staff who administer the SNAP program and all staff who have direct contact with the public, including support staff, supervisors and managers. Beltrami County Health and Human Services will document the date of the training each year and document who attends the training.

## 1. Appendix

### Attachment A – 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 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 (the 2020 Final Rule)
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 Regulation

#### State

Minnesota Human Rights Act, Chapter 363A

**Attachment B – Complaint Form**

**Beltrami County Health and Human Services Civil Rights Complaint Form: Discrimination in Service Delivery**

**Client Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number(s): \_\_\_\_\_

Name, Address and Telephone number of someone who will know how to reach you (optional)

\_\_\_\_\_

**Agency Information**

Agency: \_\_\_\_\_

Person in Agency (if known): \_\_\_\_\_

Agency Address: \_\_\_\_\_

Agency Telephone: \_\_\_\_\_

**Information about Discrimination Complaint (check as many as apply):**

Race  Color  National Origin  Sex  Creed  Religion

Age  Disability  Public Assistance Status  Sexual Orientation  Political Beliefs

If you filed this complaint with any other agency, please give the name, address and telephone number of the agency and the name of the investigator assigned to the case: \_\_\_\_\_

\_\_\_\_\_

**Details of Discrimination Claim:**

Explain what happened to you and please include the following points:

Explain why you believe you were treated differently; 2) Explain how you were treated differently from other people; 3) Give the date(s) of the incident(s) 4) Give the name(s) of the people who were directly involved; 5) If there were any witnesses, give their names(s) and explain what they saw or heard.

If you need more space, attach additional pages:

\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Equal Opportunity and Access**

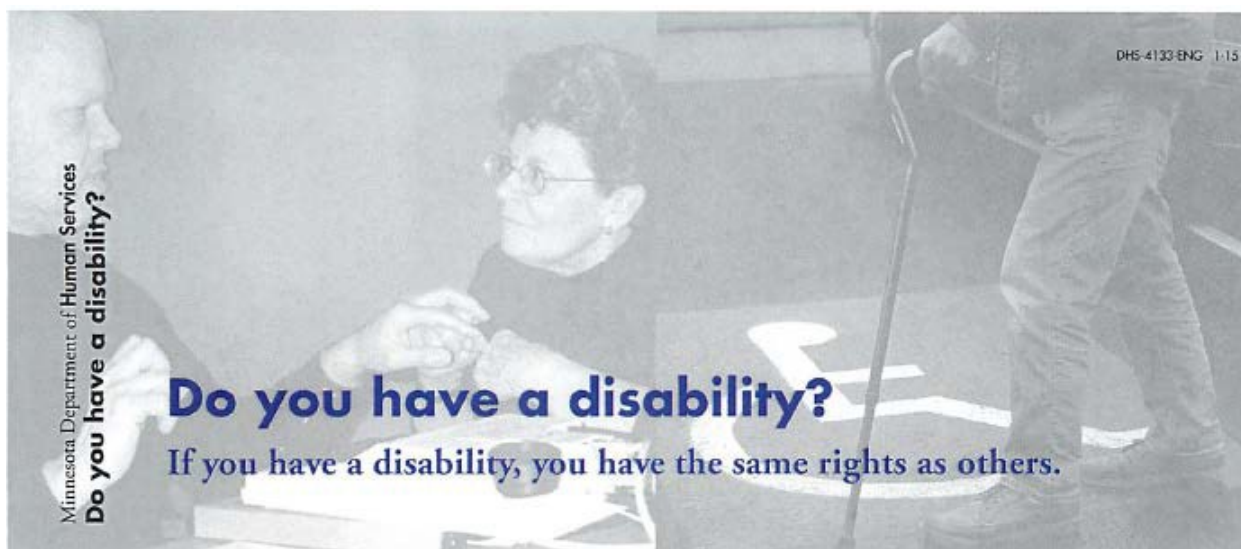
**This information is available in accessible formats for individuals with disabilities by calling 218-333-4199 or by using your preferred relay service. For other information on disability rights and protections, contact the agency's ADA Coordinator.**

Contact: Civil Rights Coordinator

218-333-4199 (voice)

218-333-4150 (fax)

Use preferred relay service



Please tell us if you have a disability so we can help you access human services programs and benefits.

### 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
- Clinical depression
- Hearing loss or low vision
- Movement restrictions like trouble with walking, reaching or grasping
- History of alcohol or drug addiction, 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 using 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 you 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 help you
- Helping you to appeal agency decisions about you 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.

## Discrimination is against the law

You have the right to file a complaint if you believe you were treated in a discriminatory way by a human services agency. You can contact any of the following agencies directly to file a civil rights complaint.

The **Minnesota Department of Human Services, Equal Opportunity and Access Division**, prohibits discrimination in its programs because of race, color, national origin, creed, religion, sexual orientation, public assistance status, age, disability or sex (including sex stereotypes and gender identity under any health program or activity receiving federal financial assistance). Contact the Equal Opportunity and Access Division directly:

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

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

Minnesota Department of Human Rights  
Freeman Building, 625 North Robert Street  
St. Paul, MN 55155  
651-539-1100 (voice)  
800-657-3704 (toll free)  
711 or 800-627-3529 (MN Relay)

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 and disability; in block grant complaints, religion and sex are included; and in medical



program complaints, sex includes sex stereotypes and gender identity under any health program or activity receiving federal financial assistance, such as Medicaid and CHIP programs, hospitals, clinics, employers, insurance companies and state health insurance exchanges created under Title I of the Affordable Care Act. Contact the federal agency directly:

U.S. Department of Health and Human Services  
Office for Civil Rights, Region V  
233 North Michigan Avenue, Suite 240  
Chicago, IL 60601  
312-886-2359 (voice)  
800-368-1019 (toll free)  
800-537-7697 (TTY)

The **U.S. Department of Agriculture** prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.)

If you wish to file a Civil Rights program complaint of discrimination, complete the **USDA Program Discrimination Complaint Form**, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov).

Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish).

For any other information dealing with Supplemental Nutrition Assistance Program (SNAP) issues, persons should either contact the USDA SNAP Hotline Number at 800-221-5689, which is also in Spanish or call the **State Information/Hotline Numbers** (click the link for a listing of hotline numbers by State); found online at [http://www.fns.usda.gov/snap/contact\\_info/hotlines.htm](http://www.fns.usda.gov/snap/contact_info/hotlines.htm).

USDA is an equal opportunity provider and employer.

CB 4 (1-15)

Attention. If you need free help interpreting this document, ask your worker or call the number below for your language.

ملاحظة: إذا أردت مساعدة مجانية لترجمة هذه الوثيقة، اطلب ذلك من مشرفك أو اتصل على الرقم 1-800-358-0377.

កំណត់សំគាល់ ។ បើអ្នកត្រូវការជំនួយក្នុងការបកប្រែឯកសារនេះដោយឥតគិតថ្លៃ សូមសួរអ្នកកាន់សំណុំរឿង របស់អ្នក ឬហៅទូរស័ព្ទមកលេខ 1-888-468-3787 ។

Pažnja. Ako vam treba besplatna pomoć za tumačenje ovog dokumenta, pitajte vašeg radnika ili nazovite 1-888-234-3785.

Thov ua twb zoo nyeem. Yog hais tias koj xav tau kev pab txhais lus rau tsab ntaub ntawv no pub dawb, ces nug koj tus neeg lis dej num los sis hu rau 1-888-486-8377.

ໂປຣດຊາບ. ຖ້າຫາກ ທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການແປເອກະສານນີ້ພຣີ, ຈົ່ງຖາມພະນັກງານກຳກັບການຊ່ວຍເຫຼືອຂອງທ່ານ ຫຼື ໂທໂປທີ່ 1-888-487-8251.

Hubachiisa. Dokumentiin kun bilisa akka siif hiikamu gargaarsa hoo feete, hojjettoota kee gaafadhu ykn afaan ati dubbattuuf bilbilli 1-888-234-3798.

Внимание: если вам нужна бесплатная помощь в устном переводе данного документа, обратитесь к своему социальному работнику или позвоните по телефону 1-888-562-5877.

Digniin. Haddii aad u baahantahay caawimaad lacag-la'aan ah ee tarjumaadda qoraalka, hawlwadeenkaaga weydiiso ama wac lambarka 1-888-547-8829.

Atención. Si desea recibir asistencia gratuita para interpretar este documento, comuníquese con su trabajador o llame al 1-888-428-3438.

Chú ý. Nếu quý vị cần được giúp đỡ dịch tài liệu này miễn phí, xin gọi nhân viên xã hội của quý vị hoặc gọi số 1-888-554-8759.

1000-1121

ADAS (12-12)

This information is available in accessible formats for individuals with disabilities by contacting your county worker. For other information on disability rights and protections to access human services programs, contact the agency's ADA coordinator.

## Attachment D

### 2019-2021 STATE-COUNTY CIVIL RIGHTS ASSURANCE AGREEMENT

The County Agency: \_\_\_\_\_ Beltrami County \_\_\_\_\_ agrees to comply with the civil rights assurance of compliance (hereafter “Civil Rights Assurance Agreement”) as a condition of receiving Federal financial assistance through the Minnesota Department of Human Services. The 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. The Minnesota Department of Human Services may enforce all parts of the Civil Rights Assurance Agreement as a condition of receipt of such funds.

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 Minnesota Department of Human Services 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; implement the FNS-approved State Plan of Operation for the Supplemental Nutrition Assistance Program (SNAP); comply with Title VI of the Civil Rights Act of 1964; section 11(c) of the Food and Nutrition Act of 2008, as amended; the Age Discrimination Act of 1975; Section 504 of the Rehabilitation Act of 1973; Title II of the Americans with Disabilities Action of 1990; Title IX of the Educational Amendments of 1972; and all the requirements imposed by the regulations issued pursuant to these Acts by the U.S. Department of Agriculture to the effect that, no person in the United States shall, on the grounds of race, color, national origin, sex, age, disability, political beliefs, or religion, be excluded from participation in, be denied the benefits of, or otherwise subject to discrimination under SNAP.
2. Administer all programs in accordance with U.S. Department of Health and Human Services requirements imposed by the regulations pursuant to Title VI of the Civil Rights Act of 1964; the Age Discrimination Act of 1975; Section 504 of the Rehabilitation Act of 1973; Title II of the Americans with Disabilities Action of 1990; Title IX of the Educational Amendments of 1972; Section 1557 of the Patient Protection and Affordable Care Act of 2010. Comply with the regulations to the effect that, no person in the United States shall, on the grounds of race, color, national origin, sex, age, disability, or religion, be excluded from





## **Attachment E**

### **BELTRAMI COUNTY HEALTH AND HUMAN SERVICES**

#### **EQUAL OPPORTUNITY POLICIES AND PROCEDURES INCLUDING EQUAL ACCESS FOR PEOPLE WITH DISABILITIES**

##### **Equal Opportunity Policy**

It is the policy of Beltrami County Health and Human Services (Beltrami County) 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.

Beltrami County employees, services, programs, benefits and policies will not discriminate against applicants, clients or members of the public because of race, color, national origin, sex, sexual orientation, age, creed, religion, political beliefs, disability or public assistance status. "Sex" includes sex stereotypes and gender identity 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 Beltrami County's 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. The policy applies to the agencies and providers receiving federal and state funds under contracts, licenses and other arrangements with Beltrami County. The Minnesota Human Rights Act also applies to the work of Beltrami County and those agencies carrying out the work of Beltrami County.

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

Beltrami County 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, Beltrami County will:

- Notify the public about the rights and protections for people with disabilities under the Americans with Disabilities Act.
- Designate an ADA Coordinator 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 are accessible to and usable by qualified people with disabilities.

**Physical access includes:**

- Convenient parking designated specifically for people with disabilities.
- Curb cuts and ramps between parking areas and the Beltrami County buildings.

Level access into the first floor of all Beltrami County buildings with elevator access to all other floors.

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

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

**Effective Communication and Auxiliary Aids and Services**

Beltrami County 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, Beltrami County 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, Beltrami County will give primary consideration to the requests of people with disabilities. Beltrami County 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, Beltrami County will find another equally effective auxiliary aid or service.

**Attachment F**

**County Human Service Agency Complaint Notification Form of Complaints Alleging  
Discrimination in Service Delivery**

**REQUIREMENT:** Beltrami County Human Services must complete this form to notify the DHS Civil Rights Coordinator within 120 days of all service delivery discrimination complaints (i.e., civil rights complaints) filed against them.

1. Complainant Name: \_\_\_\_\_
2. Complainant Address: \_\_\_\_\_
3. Complainant telephone numbers: \_\_\_\_\_
4. Complainant e-mail: \_\_\_\_\_
  
5. Name and address of county agency delivering the benefits, including names of any employees accused of wrongdoing: \_\_\_\_\_  
\_\_\_\_\_
6. Type of discrimination alleged: \_\_\_\_\_
7. Description of the alleged discrimination, including dates of occurrence and names and contact information for any witnesses: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Summary of the investigative findings, including any corrective action ordered: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Include with this report 1) the complaint provided by the Complainant, 2) the investigative decision provided to the complainant and 3) any appeal of that decision by the complainant.

Send completed packet to:

DHS Civil Rights Coordinator  
Minnesota Department of Human Services  
Equal Opportunity and Access Division  
PO Box 64997  
St. Paul, MN 55164-0097  
651-431-3034 (voice) or preferred relay service  
651-431-7444 (fax)  
[Joann.daSilva@state.mn.us](mailto:Joann.daSilva@state.mn.us)

## Attachment G

### Limited English Proficiency (LEP) Plan Beltrami County Health and 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 Beltrami County Health and Human Services in Bemidji, 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/oct/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 Status § 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 Status §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://www.thinkculturalhealth.hhs.gov/assets/pdfs/EnhancedNationalCLASStandards.pdf>

#### 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 settings such as County Programming, effective communication occurs when provider staff have 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 for the provider has access to the adequate information to do their job.

- **I Speak Cards** - “I Speak” Cards say both in English and 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. There are different modes of interpreting such as consecutive, simultaneous, sight-translation, and summarization.
- **Language Block (LB)** – Is a block of text that informs readers, in ten 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 Beltrami County HHS Director to review LEP Implementation activities within Beltrami County Health and Human Services.
- **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 Beltrami County collection of demographic data. Currently statistics show that less than 1% of the population of Beltrami County are LEP with the primary languages of Chinese, American Sign Language and native languages.
- **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 Beltrami County has documented the above.

If the bilingual staff is going to act as interpreter for others, the above criteria are required, AND at least 8 hours annually of interpreting Continuing Education (CE), AND at least one of the following documented by Beltrami County:

The 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 skills and abilities as an interpreter
  - v. understands boundaries and roles as an interpreter
  - vi. abides by the National Code of Ethics and Standards of Practice for Healthcare Interpreters by NCIHC, or Canons and professional code of ethics
  - vii. (Beltrami County) keeps 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, certified federal or state court interpreter and 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 or the conduct for court interpreters, etc.
  - **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.

#### 4. Methods of Providing Services to individuals with LEP

The primary methods used are: Telephone interpreter services, Department of Administration Contracted interpretation services, ASL Interpreting Services.

Contracted Qualified Interpreters: Beltrami County has no direct contracts with service providers but will develop one time service contracts with qualified interpreters as needed.

Telephone Interpreter Services: Language Line Services, 800-367-9559

Video Remote Interpreting (VRI) Services: Contracted providers accessed through the Department of Administration

Bilingual staff: (N/A)

LEP Liaison & Coordinator: Will Haubrich, Beltrami County Financial Assistance Supervisor, 218-333-8134, will.haubrich@co.beltrami.mn.us

LEP Liaison Back-up: Anne Lindseth, Beltrami County Economic Assistance Director, 218-333-4199, anne.lindseth@co.beltrami.mn.us

#### 5. Interpreter Services

Beltrami County, 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 services.

#### 6. Translation of Documents

Beltrami County through the state of MN contracts qualified translators or translating agencies to assist individuals with LEP in translating all vital documents, or documents needed to perform services.

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

Beltrami County 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

Beltrami County will keep record of those training sessions and individual record of attendance to training will be part of personnel files. Record of this training will be kept for a minimum of 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
- Any other cultural issues related to delivery of information and services to individuals with LEP served by Beltrami County.

This policy is added to the Manual of Policies and Procedures of Beltrami County.

### **Dissemination of Language Access Information in Public Areas**

Beltrami County makes available to individuals with LEP:

- Notice of language access services by posting in public areas the “[Language Poster](https://edocs.dhs.state.mn.us/lfsrserver/Legacy/DHS-4739-ENG)”, available through DHS public Web site (<https://edocs.dhs.state.mn.us/lfsrserver/Legacy/DHS-4739-ENG> )
- “[I need an interpreter](https://edocs.dhs.state.mn.us/lfsrserver/Legacy/DHS-4374-ENG)” card available in ten languages and from DHS public Web site (<https://edocs.dhs.state.mn.us/lfsrserver/Legacy/DHS-4374-ENG> )
- Catalogue of Languages (<https://edocs.dhs.state.mn.us/lfsrserver/Legacy/DHS-4059-ENG>)

## **8. Annual Review of LEP Plan**

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

Beltrami County upon DHS request will complete and submit DHS LEP Plan review on an annual basis or as often as requested by DHS.

## **9. Collection of Data & Its Analysis**

Beltrami County is committed to monitor and make reasonable adjustments to comply with Title VI requirements. Beltrami County will collect:

- Beltrami County will collect demographic data on preferred spoken language, preferred written language, need of interpreter on an annual basis.
- This data will be used to ensure service delivery to all individuals

## **10. Complaint Process:**

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

- Beltrami County Health and Human Services:
  - Anne Lindseth  
218-333-4199  
616 America Ave NW Suite 220, Bemidji MN 56601  
[Anne.lindseth@co.beltrami.mn.us](mailto:Anne.lindseth@co.beltrami.mn.us)
- Minnesota Department of Human Services (DHS), Limited English Proficiency (LEP) Coordinator:
  - Alejandro Maldonado  
651-431-4018  
P.O. Box 64997



Saint Paul, MN  
55164-0997

[alejandro.maldonado@state.mn.us](mailto:alejandro.maldonado@state.mn.us)

Fax 651-431-7444

MN Relay 711 or 1-800-627-3529

- Office for Civil Rights (OCR), Region V – Chicago, IL
  - Celeste Davis, Regional Manager  
Office for Civil Rights  
U.S. Department of Health and Human Services  
233 N. Michigan Ave., Suite 240  
Chicago, IL 60601  
Voice Phone (800) 368-1019  
FAX 312-886-1807  
TDD 800- 537-7697
  - <http://www.hhs.gov/ocr/civilrights/complaints/index.html>

This LEP Plan is available in public areas of Beltrami County Health and Human Services, to all staff, volunteer, and contractors, and to members of the community.

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#### **Revisions to this LEP Plan**

<i>Creation</i>	9/2020	By Anne Lindseth
	No changes made at this time as this is the creation of the LEP plan.	

*First Revision*

*Second Revision*

...

## Attachment H

### Beltrami County Directions for Interpreter Services

Please inform a lead or supervisor when utilizing these services for billing purposes.

#### Language Line

Language Line Services, formerly known as AT&T Language Line, provides telephone interpretation in over 140 languages, 24 hours a day, seven days a week. The Minnesota Department of Administration's InterTechnologies Group manages a statewide contract with Language Line Services for use by state and county agencies.

Staff should use Language Line Services when qualified bilingual staff are not available, when the language is one not commonly encountered at Beltrami County or when staff are not sure what language a client speaks.

To access Language Line Services:

You will need to know the dialing instructions below and the DHS Client Code (**509052**) and divisions' personal access code (**028781**).

#### Dialing instructions

- Call Language Line Services at (800) 367-9559.
- Create the 3-way conference feature with your telephone switchhook, flash or transfer button.
- Press 1 for Spanish or 2 for all other languages (Speak the name of the language at the prompt). If you don't know the language name, press 0 and you will be transferred to an expert in language identification.
- Enter:
  - Client ID: 509052
  - Organization name: State of Minnesota
  - Personal Access Code: **028781** followed by the "pound key" (#)
- When an interpreter is on the phone and the language is identified, state your name, the organization you are calling from and a brief description of what you need from your client. When the interpreter says "Go ahead, please," the call begins.
- Speak in short sentences and pause frequently to allow the interpreter to interpret small segments of information at a time. Remember the interpreter is a few words behind the speaker. Give the interpreter time to finish before speaking again.
- Check for client understanding. Provide opportunities for clarification.
- When checking for understanding, ask the LEP client "What do you understand?" rather than "Do you understand?"
- When the conversation is completed, thank both the client and the interpreter and say "Interpreter, end of call" and the call ends.

County staff should familiarize themselves with the Language Line Services interpreting process before they actually use it. To hear a demonstration of over-the-phone interpretation, call Language Line Services at (800) 996-8808 or visit their Web site at [www.language.com](http://www.language.com).

#### To receive a call

- When you answer a call and determine you need language assistance:
- Create a 3-way conference call using the transfer/conference button on your telephone (tell the caller "hold on," "wait," "one moment," etc., to indicate that you are not hanging up).
- Call Language Line Services (according to the dialing instructions above) and the interpreter will be on the line.

- Then, add the caller back to the call by hitting the transfer/conference button again so that all three parties are connected.

To generate a call

- Place the call to the Language Line Services (according to the dialing instructions above) to bring the interpreter on the line.
- Create a 3-way conference call using the transfer/conference button on your telephone. Hit transfer then dial the client. Once the client is on the line hit transfer/conference again and all parties will be connected.

For a current InterTech rate schedule, see <http://www.intertech.state.mn.us/languageline>.

- Users of this interpreter service are charged on a per-minute basis.

### **Contract interpretation services (in person or video conference)**

The Department of Administration maintains statewide master contracts with qualified vendors of spoken language interpreter services. All state agencies and Cooperative Purchase Venture (CPV) members (cities, counties, etc.) can use these contracted vendors. The vendors offer in-person, videoconferencing and telephone interpreting.

Availability and rates vary by vendor and the urgency of the request. To access the list of contracted vendors of spoken language interpreter services, visit the Department of Administration's Web site 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).

### **Sign Language Interpretation Services:**

#### **ASL Interpreting Services Inc. (ASLIS)**

5801 Duluth St Suite 106  
Golden Valley, MN 55422  
Ph. 763-478-8963  
EIN: 41.1778428

#### **Keystone Interpreting Solutions**

651-454-7275  
[info@kisasl.com](mailto:info@kisasl.com)

#### **Middle English Interpreting**

612-747-2813  
[schedule@middle-english.com](mailto:schedule@middle-english.com)

Reference:

DHS Bulletin #16-89-01  
DHS LEP Plan #4210  
MN DHS LEP Coordinator