

DHS / Oregon Food Bank

Civil Rights

Policies and Procedures Handbook



6-1-2017

TABLE OF CONTENTS

Introduction	2
Basic Requirements	2
Civil Rights and USDA.....	3
Types of Complaints.....	3
Public Notification Policy	3
Civil Rights Poster	4
Limited English Proficiency Plan	4
Eligibility Questions Poster	5
Complaint Procedure	6
Documentation	7
APPENDICES	
Appendix A - Discrimination Complaint Form (English)	8
Appendix B – Discrimination Complaint Form (Spanish).....	9
Appendix C – Complaint Flow Chart	10
Appendix D – Equal Opportunity for Religious Organizations.....	11
Appendix E - Prohibiting Explicitly Religious Activities as part of TEFAP Activities	13
Appendix F – What is Civil Rights Poster	21
Appendix G – Limited English Proficiency Help	22
Appendix H – “I Speak_____” Cards.....	23
Appendix I – Staff Civil Rights Training Document <i>sample</i>	26
Appendix J – Volunteer Civil Rights Training Brochure <i>sample</i>	29
Appendix K – Civil Rights Training Record	30

TEFAP Applicable Law:

7 U.S.C. § 7501 et seq. [Emergency Food Assistance Act of 1983](#) (and as amended by Public Law)

42 U.S.C. § 2000d et seq. [Title VI of the Civil Rights Act of 1964](#)

42 U.S.C. § 6101 et seq [Age Discrimination Act of 1975](#)

20 U.S.C. § 1681 et seq. [Title IX of the Education Amendments of 1972](#)

29 U.S.C. § 794 [Section 504 of the Rehabilitation Act of 1973](#)

[28 CFR Part 36](#) and [42](#)

[7 CFR Ch. II Part 250](#) and [251](#): The Emergency Food Assistance Program

[7 CFR Part 16 – Equal Opportunity For Religious Organizations](#)

FNS Instructions 716-3, 410-1, [709-5](#), and [113-1](#)

[ORS 458.525, 458.530 – 458.545](#)

[OAR 813-220](#)

TEFAP State Plan

The Emergency Food Assistance Program

INTRODUCTION

The purpose of this manual is to provide staff and volunteers at pantries and meal sites with the information needed to assure that the program is in compliance with the USDA civil rights regulations for The Emergency Food Assistance Program (TEFAP).

BASIC REQUIREMENTS

1. Public notification

- include the non-discrimination statement in all publications about your program
- notify the public in your service area of program availability and eligibility guidelines at least once every two years and when any significant changes to the program occur, such as client eligibility, hours of operation or location. Make efforts at targeted outreach to underserved populations.
- keep a file of samples of pamphlets, flyers, notices and all publications produced
- post the “Justice for All” poster, Eligibility Questions poster and information on how to make a complaint.

2. Collection and use of client Data

Client information is to be held to the same standards of confidentiality as the case files of a social worker (e.g., shared with court or law enforcement only with a subpoena). Agencies shall not release or disclose any such information except as necessary for the administration of the program(s), as authorized in writing by the applicant or recipient or as required by law

Client intake systems must ensure that data collected about potentially eligible persons, program applicants, and participants are:

- a. Collected and retained by the service delivery point for each program as specified in the program regulations, instructions, policies, and guidelines,
- b. Based on documented records and maintained for 3 years,
- c. Maintained under safeguards that restrict access of records only to authorized personnel, and,
- d. Submitted, as requested, to the FNS Regional or Headquarters Offices.

3. Filing a complaint

- Train staff/volunteers on how to handle a complaint
- Acknowledge and address all complaints
- Assist complainant by doing one of the following:
 - directing them to the Oregon Department of Human Services Hotline 800-442-5238
 - providing them with a complaint form and assisting in its completion
- Notify Oregon Department of Human Services of the complaint
- Show willingness to assist in resolution
- Keep records of all complaints

4. Limited English Proficiency (LEP)

- Have a plan for how you will assist clients with “limited English proficiency”
- Train staff & volunteers to implement the plan; and to identify people who need it.

5. Training

The origin and authority for compliance with civil rights procedures are from the Civil Rights Act of 1964, the USDA’s implementing regulations: Food and Nutrition Service (FNS) Instructions 113-1, and the State of Oregon TEFAP State Plan.

- Train all staff and volunteers annually in civil rights procedures. Refer to Appendix I for staff and Appendix J for volunteers.
- Questions regarding Civil Rights compliance are included in on-site monitoring.

CIVIL RIGHTS AND USDA

Civil Rights in the delivery of USDA programs is about....

Establishing and maintaining an effective, proactive civil rights compliance and enforcement program in accordance with civil rights policies, guidelines, and directives.

Civil Rights in the delivery of USDA programs is also about....

Cooperating with and providing assistance as necessary and requested by USDA in the investigation of any complaints and compliance reviews, including ensuring access to information and the resolution of any issues of noncompliance.

TYPES OF COMPLAINTS

Civil Rights Matters – any issue that involves disparate treatment or adverse impact for participation on the basis of race, color, national origin, sex, age, or disability. For example, a church pantry denies TEFAP foods to a non-church member – a case of religious discrimination.

Program Matters – any issue other than civil rights matters. For example, a resident of Washington complaining that he was denied TEFAP foods at a Portland food pantry. FNS regulations limit TEFAP only to residents of the state operating the program.

PUBLIC NOTIFICATION POLICY

Agencies/Programs receiving TEFAP commodities shall include the following nondiscrimination statement, in full, on all materials that are produced for public information, public education, or public distribution.

- a. must include, in full, the following non-discrimination statement:

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.htm, 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 <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).

USDA is an equal opportunity provider.

If the material is too small to permit the full statement to be included, the material will at a minimum include the statement, in print size no smaller than the text:

“This institution is an equal opportunity provider”.

The USDA poster “**And Justice for All**” (Form **AD-475A**) will be posted in all TEFAP distribution points for public notification purposes. In addition, agencies/programs receiving TEFAP commodities will post the nondiscrimination statement in additional languages appropriate to the local population. The Civil Rights Hotline tear-off sheets (attached to the poster) must always be available.

CIVIL RIGHTS POSTER

The "And Justice for All" (Form AD-475A) poster includes USDA's nondiscrimination statement. A copy of this poster must be displayed by USDA/TEFAP programs in client areas, pantry, meal site or tailgate distribution sites, etc. for all applicants and participants to read.

If you do not have a poster or if your poster(s) need to be replaced, contact your RFB, OFB, or DHS. Alternative languages appropriate to the local population can be affixed to the bottom of the poster; however, it should never cover any other writing on the poster. More than one language may be used with each poster.

LIMITED ENGLISH PROFICIENCY (LEP)

Programs receiving federal assistance (commodities) need to have a plan to serve those with “limited English proficiency.”

Primary Factors to Consider:

- Number of LEP persons in your service area
- Frequency with which LEP individuals come in contact with the program
- Importance of service provided by the program
- Resources available to the recipient

Develop an LEP plan:

Your plan should include strategies for providing translation of critical documents and interpretation through: staff or volunteers, contracts or informal community relationships, or access to a language line.

All staff and volunteers need to know and be able to have access to the plan. Keep your plan on file and evaluate and update your plan periodically.

If you need assistance in creating an LEP plan you can contact your RFB for more information and/or visit www.lep.gov.



ELIGIBILITY QUESTIONS POSTER

The following Eligibility Questions poster should be posted with the Justice for All poster - contact your RFB if you need it in additional languages.

USDA-TEFAP ELIGIBILITY
BY SIGNING THE USDA SIGN-IN SHEET OR INTAKE FORM
YOU DECLARE THAT :

1. You are eligible to receive USDA commodities because:

- Your household income is at or below the eligible income levels (see below) OR
- You are currently participating in the Food Stamp Program (SNAP), TANF, SSI, OR LIHEAP

AND

2. Your address and the number of people in your household as declared on the sign-in sheet are true and accurate.

**USDA-TEFAP COMMODITY
2017 ELIGIBILITY GUIDELINES**

HOUSEHOLD SIZE	INCOME	
	MONTHLY	ANNUAL
1.....	\$ 1,860	\$22,311
2.....	\$ 2,504	\$30,044
3.....	\$ 3,149	\$37,777
4.....	\$ 3,793	\$45,510
5.....	\$ 4,437	\$53,243
6.....	\$ 5,082	\$60,976
7.....	\$ 5,726	\$68,709
8*.....	\$ 6,371	\$76,442

* FOR EACH ADDITIONAL MEMBER, ADD \$645 PER MONTH
COMMODITY FOODS ARE FOR HOME CONSUMPTION ONLY AND MAY NOT BE SOLD, TRADED,
BARTERED OR EXCHANGED FOR SERVICES.

USDA-TEFAP commodities in emergency food parcels are made available to persons in emergency need based on current supplies. Recipients must provide the following information:

- Name
- Address (if you have one)
- Number of people in your household

Eligibility is based on where you live and the posted income/eligibility guidelines **ONLY**.

You may be asked for additional information for non-food programs or referral purposes, but the additional information may not be used to determine eligibility for the food program.

If you have questions about your eligibility for TEFAP commodities at this agency, please call the Regional Food Bank at the number listed:

**** IMPORTANT ****
**ANYONE STEALING OR FRAUDULENTLY OBTAINING
COMMODITIES MAY BE FINED UP TO \$10,000 OR IMPRISONED
FOR UP TO 5 YEARS OR BOTH.**

COMPLAINT PROCEDURE

The USDA has found that many “civil rights” complaints are actually customer service issues (claims of rudeness, impatience, lack of understanding or compassion) and, as much as possible, want these matters resolved on a local level. Ultimately, our goal is to ensure that civil rights are honored and the complainant is satisfied that their complaint has been taken seriously, addressed, and resolved.

Filing a complaint: If a client reports unfair treatment that they perceive to be based on race, color, national origin, sex, age, or disability, or if they simply feel that they have been discriminated against and want to make a complaint, you must assist them. By law the complaint must be made within 180 days of the incident.

- All complaints regarding civil rights matters must be referred to Oregon Department of Human Services, either by a call to the Civil Rights Hotline at 800-442-5238, or through a written complaint that you must send directly to DHS. They are state distributing agency trained to handle civil rights complaints.
- Complaints regarding all other matters are encouraged to be resolved at the lowest level possible. Follow the process in the Complaint Flow Chart in the appendices of this handbook.
- Keep copies of the discrimination complaint form and all other documentation relating to the complaint. Instruct all staff and volunteers serving clients on how to use the complaint form to record a complaint. If a client declines to complete the complaint form you must complete it, to the best of your knowledge, from their verbal complaint.
- In addition to the Hotline, a complainant can choose to file the complaint directly with the RFB, OFB, DHS, or USDA; the appropriate contact information should be made available.

Follow-up: If a client identifies a complaint as being a civil rights matter, refer the complaint immediately to DHS. If there is a question on whether the issue is a civil rights matter or a program matter, refer the complaint immediately to DHS. If the complaint is clearly a program complaint, seek resolution in cooperation with the complainant. If resolution is achieved, notify your RFB about the complaint and forward copies of documentation including resolution to your RFB. If you are unable to resolve a program complaint at the local level, refer the complaint to your RFB.

Civil rights complaints must be processed within 90 days from the date of the complaint. It is important that civil rights complaints are referred to DHS as quickly as possible in order to provide the most time possible for resolution.

Program complaints should be processed as quickly as possible, but not longer than 30 days from the date of the complaint. If a program complaint is referred to RFB, OFB, or DHS, the 30 days for a decision letter is not extended. A decision letter must be written and sent to the complainant (if complainant provided address) within 30 days from the date of the complaint.

Decision letters should include information that the complaint is either closed, follow up action is needed, or implemented corrective action has been taken. Copies of decision letters should be sent to the applicable overseeing agency (RFB, OFB, or DHS), along with a copy of the complaint form (if completed) within 30 days from the date of complaint.

This is a legal responsibility. Taken to an extreme, a complaint could become a lawsuit based on a claim of violation of a person's civil rights.

DOCUMENTATION

It is critical that you **fully document each step of the procedure** from the initial complaint to the resolution.

In cases where the client does not chose to use the Hotline, use the discrimination complaint form provided, whenever possible, and take good notes in any case!

Document, in writing, each conversation and action taken. Keep a copy of all documentation in a **Civil Rights Discrimination Complaint Folder**.

Your program is required to

- ✓ **Maintain a file of all complaints received;**
- ✓ **Address/acknowledge all complaints and assist complainant;**
- ✓ **Forward all discrimination complaints to the Civil Rights Hotline or Oregon Department of Human Services;**
- ✓ **Post the "And Justice for All" poster and information, along with hotline tear-off sheet.**

Verbal Complaints of Discrimination

- If a verbal complaint is received and the client is not willing to place allegations in writing, the person receiving the complaint must write up the elements of the complaint for the complainant.
- Every effort needs to be made to obtain:
 - Name, address, telephone number, or other means of contacting the complainant
 - Specific location and organization delivering service/benefit
 - Nature of the incident or action that led the complainant to feel discriminated against
 - Basis on which the complainant feels discrimination occurred (race, color, national origin, age, sex, or disability)
 - Names, titles, and business address of persons who may have knowledge of the discriminatory action
 - Date(s) during which the alleged discriminatory actions occurred, or if continuing, the duration of such actions.
- Anonymous complaints are to be handled just as any other complaint; however, decision letters will not be able to be sent directly to the complainant.

Walk-in []
Call-in []

Date: _____

No. _____
(Office use only)

DISCRIMINATION COMPLAINT

From

Agency Name

Please print or type:

1. Your name _____ Phone # _____
Street address _____ Message/Contact # _____
City _____ State _____ Zip _____

2. I feel I was discriminated against because of my:

- _____ Race or color
- _____ Disability
- _____ National origin
- _____ Sex
- _____ Age
- _____ Other: _____

3. Explain briefly the discrimination you believe occurred. Identify the persons involved by name and position. Be sure to clearly explain **who, what, when, and why** (who did what, when the action occurred, why you believe the action occurred).

4. To the best of my knowledge, the most recent date on which this discrimination took place:

Month: _____ Day: _____ Year: _____

5. Signature of complainant: _____ Phone: _____
OR
Information taken by: _____ Phone: _____

[Copy to RFB and client; agency retains original]

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, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

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](http://www.ascr.usda.gov/complaint_filing_cust.html), (AD-3027) found online at: 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.

This institution is an equal opportunity provider.

Civil Rights Hotline at Oregon Department of Human Services 800-442-5238

En persona []
Por teléfono []

Fecha: _____

No. _____
(Para uso de oficina solamente)

QUEJA DE DISCRIMINACIÓN

de

Nombre de la agencia

Por favor escriba en letras de molde o a máquina:

1. Su nombre _____ No. teléfono _____
Dirección _____ No. mensajes _____
Ciudad _____ Estado _____ Zip _____

2. Se me discrimino debió a:

- _____ Raza o color
- _____ Incapacidad
- _____ Origen nacional
- _____ Sexo
- _____ Edad
- _____ Otro: _____

3. Explique brevemente la discriminación que usted cree que ocurrió. Identifique las personas envueltas por nombre y puesto. Asegúrese de explicar claramente **quién, qué, cuando, y por qué** (quién hizo qué, cuando el suceso ocurrió, por qué piensa usted que esto ocurrió).

4. De acuerdo con mi mejor recuerdo la fecha más reciente en que ocurrió esta discriminación:

Mes: _____ Día: _____ Año: _____

Firma de la persona

5. Poniendo la queja: _____ Teléfono: _____

O

Información tomada por: _____ Teléfono: _____

[Copy to RFB and client; agency retains original]

En conformidad con la ley Federal de derechos civiles y los reglamentos y políticas de derechos civiles del Departamento de Agricultura (USDA, por sus siglas en inglés), el USDA, sus agencias, oficinas, y empleados, e instituciones participando o administrando programas del USDA tienen prohibido discriminar en base a raza, color, país de origen, sexo, discapacidad, edad o por represalias por actividades previas en derechos civiles, de cualquier programa o cualquier actividad financiada por el USDA.

Las personas con discapacidades que requieran medios alternativos para la comunicación de la información del programa (por ejemplo, Braille, tipografía grande, cinta de audio, lenguaje de señas, etc.), deben contactar a la Agencia (Estatual o local) en donde solicitaron los beneficios. Los individuos sordos o con discapacidades auditivas o de lenguaje, pueden contactar al USDA a través del Servicio Federal de Retransmisión al (800) 877-8339. Adicionalmente, la información del programa puede entregarse en idiomas distintos al inglés.

Para presentar una queja de discriminación al programa, llene el [formulario de quejas del Programa contra la Discriminación del USDA](http://www.ascr.usda.gov/complaint_filing_cust.html) (AD-3027) que puede encontrar en línea en: http://www.ascr.usda.gov/complaint_filing_cust.html, y en cualquier oficina del USDA, o escriba una carta dirigida al USDA e incluya en la carta toda la información requerida en el formulario. Para solicitar un formulario para quejas, llame al (866) 632-9992. Presente su formulario lleno o su carta al USDA por: (1) Correo postal: 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; o (3) Correo electrónico: program.intake@usda.gov.

Esta institución es un proveedor de igualdad de oportunidades.

Civil Rights Hotline at Oregon Department of Human Services 800-442-5238

COMPLAINT FLOW CHART

A **discrimination complaint** is one that alleges discrimination based on a protected class. The six federally protected classes are:

- Race
- Color
- National origin
- Sex
- Age
- Disability

There are additional protected classes at the state level that include religion, political affiliation, marital status, sexual orientation, etc.

Complaints based on a protected class are referred to Oregon Department of Human Services for resolution. Call the hotline at 1-800-442-5232.

Program complaint is one that is based on any other issue. Resolution of program complaints are encouraged at the lowest point possible.

Whenever the complainant makes their complaint, all steps from that point forward should be followed until the **FINISHED** is reached.

Complainant makes complaint directly to:	<i>Partner Agency</i>	PA seeks resolution in cooperation with complainant if resolved, notify RFB and complainant of result..... FINISHED if unable to resolve, refer to RFB
	<i>Regional Food Bank</i>	RFB seeks resolution in cooperation with PA and complainant if resolved, notify OFB of result FINISHED if unable to resolve, refer to OFB
	<i>Oregon Food Bank</i>	OFB seeks resolution in cooperation with RFB, PA and complainant if resolved, notify all parties of result FINISHED if unable to resolve, refer to DHS
	<i>DHS</i>	DHS seeks resolution in cooperation with OFB, RFB, PA and complainant if resolved, notify all parties of result FINISHED if unable to resolve, refer to USDA
	<i>USDA</i>	USDA seeks resolution in cooperation with all parties USDA notifies DHS (DHS notifies all parties) of results FINISHED



It is critical that you **fully document each step of the complaint process** from the initial complaint to resolution. Document each conversation and action taken. Keep a copy of all documentation in a Civil Rights Complaint Folder. At the point of referring to another agency, be sure the other agency receives copies of all documentation.

APPENDIX C

APPENDIX D

e-CFR Data is current as of October 1, 2010

Title 7: Agriculture

PART 16—EQUAL OPPORTUNITY FOR RELIGIOUS ORGANIZATIONS

Section Contents

[§ 16.1 Purpose and applicability.](#)

[§ 16.2 Rights of religious organizations.](#)

[§ 16.3 Responsibilities of participating organizations.](#)

[§ 16.4 Effect on State and local funds.](#)

[§ 16.5 Compliance.](#)

Authority: 5 U.S.C. 301; E.O. 13279, 67 FR 77141, 3 CFR, 2002 Comp., p. 258; E.O. 13280, 67 FR 77145, 3 CFR, 2002 Comp., p. 262.

Source: 69 FR 41382, July 9, 2004, unless otherwise noted.

§ 16.1 Purpose and applicability.

(a) The purpose of this part is to set forth USDA policy regarding equal opportunity for religious organizations to participate in USDA assistance programs for which other private organizations are eligible.

(b) Except as otherwise specifically provided in this part, the policy outlined in this part applies to all recipients and subrecipients of USDA assistance to which 7 CFR parts 3015, 3016, or 3019 apply, and to recipients and subrecipients of Commodity Credit Corporation assistance that is administered by agencies of USDA.

§ 16.2 Rights of religious organizations.

(a) A religious organization is eligible, on the same basis as any other eligible private organization, to

access and participate in USDA assistance programs. Neither the Federal government nor a State or local government receiving USDA assistance shall, in the selection of service providers, discriminate for or against a religious organization on the basis of the organization's religious character or affiliation.

(b) A religious organization that participates in USDA assistance programs will retain its independence and may continue to carry out its mission, including the definition, practice, and expression of its religious beliefs, provided that it does not use USDA direct assistance to support any inherently religious activities, such as worship, religious instruction, or proselytization. Among other things, a religious organization may:

(1) Use space in its facilities to provide services and programs without removing religious art, icons, scriptures, or other religious symbols,

(2) Retain religious terms in its organization's name,

(3) Select its board members and otherwise govern itself on a religious basis, and

(4) Include religious references in its organizations' mission statements and other governing documents.

(c) In addition, a religious organization's exemption from the Federal prohibition on employment discrimination on the basis of religion, set forth in section 702(a) of the Civil Rights Act of 1964, 42 U.S.C. 2000e-1, is not forfeited when an organization receives USDA assistance.

§ 16.3 Responsibilities of participating organizations.

(a) An organization that participates in programs and activities supported

by direct USDA assistance programs shall not discriminate against a program beneficiary or prospective program beneficiary on the basis of religion or religious belief.

(b) Organizations that receive direct USDA assistance under any USDA program may not engage in inherently religious activities, such as worship, religious instruction, or proselytization, as part of the programs or services supported with direct USDA assistance. If an organization conducts such activities, the activities must be offered separately, in time or location, from the programs or services supported with direct assistance from USDA, and participation must be voluntary for beneficiaries of the programs or services supported with such direct assistance. These restrictions on inherently religious activities do not apply where USDA funds or benefits are provided to religious organizations as a result of a genuine and independent private choice of a beneficiary or through other indirect funding mechanisms, provided the religious organizations otherwise satisfy the requirements of the program.

(c) Nothing in paragraphs (a) or (b) shall be construed to prevent religious organizations that receive USDA assistance under the Richard B. Russell National School Lunch Act, 42 U.S.C. 1751 *et seq.*, the Child Nutrition Act of 1966, 42 U.S.C. 1771 *et seq.*, or USDA international school feeding programs from considering religion in their admissions practices or from imposing religious attendance or curricular requirements at their schools.

(d)(1) Direct USDA assistance may be used for the acquisition, construction, or rehabilitation of structures only to the extent that those structures are used for

conducting USDA programs and activities and only to the extent authorized by the applicable program statutes and regulations. Direct USDA assistance may not be used for the acquisition, construction, or rehabilitation of structures to the extent that those structures are used by the USDA funding recipients for inherently religious activities. Where a structure is used for both eligible and inherently religious activities, direct USDA assistance may not exceed the cost of those portions of the acquisition, construction, or rehabilitation that are attributable to eligible activities in accordance with the cost accounting requirements applicable to USDA funds. Sanctuaries, chapels, or other rooms that an organization receiving direct assistance from USDA uses as its principal place of worship, however, are ineligible for USDA-funded improvements.

Disposition of real property after the term of the grant or any change in use of the property during the term of the grant is subject to government-wide regulations governing real property disposition (see 7 CFR parts 3015, 3016 and 3019).

(2) Any use of direct USDA assistance funds for equipment, supplies, labor, indirect costs and the like shall be prorated between the USDA program or activity and any use for other purposes by the religious organization in accordance with applicable laws, regulations, and guidance.

(3) Nothing in this section shall be construed to prevent the residents of housing receiving direct USDA assistance funds from engaging in religious exercise within such housing.

§ 16.4 Effect on State and local funds.

If a State or local government voluntarily contributes its own funds to supplement activities carried out under programs governed by this part, the State or local government has the option to separate out the direct USDA assistance funds or commingle them. If the funds are commingled, the provisions of this part shall apply to all of the commingled funds in the same manner, and to the same extent, as the provisions apply to the direct USDA assistance.

§ 16.5 Compliance.

USDA agencies will monitor compliance with this part in the course of regular oversight of USDA program



Food Distribution National Policy Memorandum

United States
Department of
Agriculture

Food and
Nutrition
Service

3101 Park
Center Drive

Alexandria, VA
22302-1500

DATE: June 10, 2016

POLICY NO: FD-138: The Emergency Food Assistance Program (TEFAP),
Commodity Supplemental Food Program (CSFP)

SUBJECT: Written Notice and Referral Requirements for Beneficiaries Receiving
TEFAP and CSFP Benefits from Religious Organizations

The purpose of this memorandum is to clarify the written notice and referral requirements for religious organizations that receive USDA Foods or administrative funding as part of The Emergency Food Assistance Program (TEFAP) or the Commodity Supplemental Food Program (CSFP). The U.S. Department of Agriculture's (USDA) overarching regulation on equal opportunity for religious organizations to participate in USDA assistance programs can be found at [7 CFR Part 16](#). The final rule entitled [Federal Agency Final Regulations Implementing Executive Order 13559: Fundamental Principles and Policymaking Criteria for Partnerships With Faith-Based and Other Neighborhood Organizations](#) (Final Rule) amended 7 CFR Part 16 and directed agencies to provide policy guidance or reference materials on a number of program-specific topics. Religious organizations participating in TEFAP or CSFP must comply with these final regulations by July 5, 2016. Please note, Child Nutrition (CN) Programs, including USDA Foods in CN Programs, are treated in the same manner as an indirect assistance program under 7 CFR Part 16 and are therefore not subject to the notice and referral requirements contained within this memorandum.

Beneficiary Protections: Written Notice

In accordance with 7 CFR Part 16.4(f), faith-based or religious organizations that receive USDA Foods or administrative funds for TEFAP or CSFP must give written notice in the manner prescribed by this policy memorandum to all beneficiaries and prospective beneficiaries of the right to be referred to an alternate provider when available. The written notice must state that:

- (i) The organization may not discriminate against beneficiaries on the basis of religion or religious belief, a refusal to hold a religious belief, or a refusal to attend or participate in a religious practice;
- (ii) The organization may not require beneficiaries to attend or participate in any explicitly religious activities that are offered by the organization, and any participation by beneficiaries in such activities must be purely voluntary;
- (iii) The organization must separate in time or location any privately funded explicitly religious activities from activities supported by direct Federal financial assistance;
- (iv) If a beneficiary objects to the religious character of the organization, the organization will undertake reasonable efforts to identify and refer the

beneficiary to an alternate provider to which the prospective beneficiary has no objection; the organization may not be able to guarantee, however, that in every instance, an alternate provider will be available; and

- (v) Beneficiaries may report violations of these protections (including denials of services or benefits) by an organization to the State agency (<http://www.fns.usda.gov/fdd/food-distribution-contacts>). The State agency will respond to the complaint and report the alleged violations to their respective USDA FNS Regional Office (<http://www.fns.usda.gov/fns-regional-offices>).

Organizations, inclusive of all recipient agencies and local agencies certifying potential beneficiaries and providing TEFAP and CSFP benefits to participants, must provide the written notice, per the program specific requirements described below, to applicants prior to the time they enroll in the program or receive services from such programs.

TEFAP

Preamble language to the final rule amending 7 CFR Part 16 provided for an exception to the individual written notice of beneficiary protections requirement. When the service provided to the beneficiary involves only a brief interaction between the provider and the beneficiary, and the beneficiary is receiving what may be a one-time service from the provider (such as a meal at an emergency kitchen or food for home consumption at a food pantry), the service provider may post the written notice of beneficiary protections in a prominent place, in lieu of providing individual written notice to each beneficiary.

This exception is applicable only to TEFAP. Accordingly, religious organizations providing TEFAP services can comply with the federal regulations and meet the requirements of this guidance memorandum by posting a written notice, which includes the complete list of beneficiary protections described above, at service locations. The posted written notice must be visible to all TEFAP beneficiaries and prospective beneficiaries upon entrance into the distribution site. A sample poster for posting written notice of beneficiary protections is included as an attachment to this memorandum.

CSFP

For religious organizations operating CSFP, individual written notice of beneficiary protections provided under 7 CFR Part 16, including the right to be referred to another organization, must be given to all applicants at the time that they apply for CSFP benefits. For beneficiaries already enrolled in the program as of the implementation date of this requirement, written notice must be provided no later than July 5, 2016.

A sample form for providing individual written notice of beneficiary protections is included as an attachment to this memorandum. Religious organizations can comply with federal regulations and meet the requirements of this guidance by providing CSFP applicants with this sample form at the time of application or by incorporating the required notification language at 7 CFR Part 16.4(f) into their existing CSFP applications or another format of their choice, provided that each individual beneficiary or prospective beneficiary receives an individual written notice, which includes the complete list of beneficiary protections described above.

Beneficiary Protections: Referral Requirements

In accordance with 7 CFR Part 16.4(g), if a beneficiary or prospective beneficiary of TEFAP or CSFP objects to the religious character of an organization that provides services under the program, that organization must promptly undertake reasonable efforts to identify and refer the beneficiary to an alternate provider, if available, to which the prospective beneficiary has no objection. A sample form for recording a beneficiary referral request is included as an attachment to this memorandum.

In some cases, a referral option may not be available. What constitutes “reasonable efforts” will depend on the situation. Organizations should at a minimum attempt to identify an alternative provider, determine what services the alternative provider offers, and determine whether the alternative provider is accepting new referrals. Below are the standards that must be followed:

- In making the referral, the organization must comply with all applicable State and local privacy laws and regulations.
- A referral may be made to another faith-based organization, if the beneficiary has no objection to that provider. But if the beneficiary requests a secular provider, and a secular provider is available, then a referral must be made to that provider.
- The referral must be to an alternate provider that is in reasonable geographic proximity to the organization making the referral and offers services that are similar in substance and quality to those offered by the organization, if one is available. The alternate provider also should have the capacity to accept additional clients, if one with capacity to accept additional clients is available. A referral may be made to non-USDA funded organizations, including non-TEFAP and non-CSFP providers, if necessary and available.
- If the organization determines that it is unable to identify an alternate provider, the organization must promptly notify the State agency, or local or eligible recipient agency with which it has an agreement. That agency must determine whether there is any other suitable alternate provider to which the beneficiary may be referred. A local or eligible recipient agency that receives a request for assistance in identifying an alternate provider may request assistance from the State agency. The State agency is ultimately responsible for ensuring an alternate provider is identified, if available.
- State agencies may assist recipient or local agencies or organizations by providing such entities with information regarding alternate providers. Such information regarding alternative providers should include providers (including secular and non-USDA funded organizations) within a reasonable geographic proximity that offer services that are similar in substance and quality and that would reasonably be expected to have the capacity to accept additional clients, provided any such organizations exist. Examples of alternate methods of referral the State agency could provide organizations may include but is not limited to referral to websites, hotlines, or other service providers funded by the State agency. An organization which relies on such information provided by the State

agency will be considered to have undertaken reasonable efforts to identify an alternate provider for the purposes of 7 CFR Part 16.

Record Keeping

State and local agencies must continue to follow record keeping requirements in accordance with current program regulations for both TEFAP and CSFP and 7 CFR 250.19. Such requirements extend to the maintenance of records of beneficiary referrals by religious organizations to other entities in accordance with the beneficiary protections at 7 CFR Part 16. All records must be maintained for a period of three years from the close of the fiscal year to which they pertain.

Monitoring

In accordance with USDA regulations at 7 CFR Part 16.6, FNS will monitor compliance with these new provisions during the course of regular program review and oversight. State agencies should continue to follow existing regulatory requirements and program mechanisms in regards to monitoring and enforcement of these requirements, including coverage of the minimum notice and referral requirements provided in this memorandum and maintenance of records related to referrals. FNS will use Management Evaluation Reviews to monitor compliance with this, and all, statutory and regulatory provisions in TEFAP and CSFP.

/s/ Original Signature on File

Laura Castro

Director

Food Distribution Division

Attachments

The Emergency Food Assistance Program (TEFAP) – Written Notice of Beneficiary Rights

Name of Organization:

Contact Information for Program Staff:

Because TEFAP is supported in whole or in part by financial assistance from the Federal Government, we are required to let you know that—

- We may not discriminate against you on the basis of religion or religious belief, a refusal to hold a religious belief, or a refusal to attend or participate in a religious practice;
- We may not require you to attend or participate in any explicitly religious activities that are offered by us, and any participation by you in these activities must be purely voluntary;
- We must separate in time or location any privately funded explicitly religious activities from activities supported with USDA direct assistance;
- If you object to the religious character of our organization, we must make reasonable efforts to identify and refer you to an alternate provider to which you have no objection. We cannot guarantee, however, that in every instance, an alternate provider will be available; and
- You may report violations of these protections (including denials of services or benefits) by an organization to the State agency (<http://www.fns.usda.gov/fdd/food-distribution-contacts>). The State agency will respond to the complaint and report the alleged violations to their respective USDA FNS Regional Office (<http://www.fns.usda.gov/fns-regional-offices>).

We must provide you with this written notice before you enroll in TEFAP or receive services from TEFAP, as required by 7 CFR part 16.

Alternate Service Location(s) or State Agency Contact Information:

This Institution is an Equal Opportunity Provider

Commodity Supplemental Food Program (CSFP) – Written Notice of Beneficiary Rights

Name of Organization:

Contact Information for Program Staff (name, phone number, and email address, if appropriate):

Because this program is supported in whole or in part by financial assistance from the Federal Government, we are required to let you know that—

- We may not discriminate against you on the basis of religion or religious belief, a refusal to hold a religious belief, or a refusal to attend or participate in a religious practice;
- We may not require you to attend or participate in any explicitly religious activities that are offered by us, and any participation by you in these activities must be purely voluntary;
- We must separate in time or location any privately funded explicitly religious activities from activities supported with USDA direct assistance;
- If you object to the religious character of our organization, we must make reasonable efforts to identify and refer you to an alternate provider to which you have no objection. We cannot guarantee, however, that in every instance, an alternate provider will be available; and
- You may report violations of these protections (including denials of services or benefits) by an organization to the State agency (<http://www.fns.usda.gov/fdd/food-distribution-contacts>). The State agency will respond to the complaint and report the alleged violations to their respective USDA FNS Regional Office (<http://www.fns.usda.gov/fns-regional-offices>).

We must provide you with this written notice before you enroll in our program or receive services from the program, as required by 7 CFR part 16.

**The Emergency Food Assistance Program (TEFAP) and
Commodity Supplemental Food Program (CSFP) –
Beneficiary Referral Request**

Name of Organization:

Contact information for program staff (name, phone number, and email address, if appropriate):

If you object to receiving services from us based on the religious character of our organization, please complete this form and return it to the program contact identified above. Your use of this form is voluntary.

If you object to the religious character of our organization, we must make reasonable efforts to identify and refer you to an alternate provider to which you have no objection. We cannot guarantee, however, that in every instance, an alternate provider will be available.

Please check if you want to be referred to another service provider.

Please provide the following information:

Your name:

Best way to reach you (phone/address/email):

FOR STAFF USE ONLY

1. Date of objection: / / ____

2. Referral (check one):

Individual was referred to (name of alternate provider and contact information):

Individual was given State agency-provided referral information (i.e. a website, hotline, or list of other service providers funded by the State agency)

Individual left without a referral

No alternate service provider is available—summarize below what efforts you made to identify an alternate provider (including reaching out to State agency or local or eligible recipient agency):

CIVIL RIGHTS

IS

Caring about participants as people.

Understanding the participant's point of view.

Serving the participant's human and business needs.

Treating everyone with respect.

Offering helpful information and assistance.

Making it matter (which, in turn, will make it happen).

Empathizing and listening to the participant's concerns.

Responding with reliable service.

APPENDIX G

LIMITED ENGLISH PROFICIENCY HELP

WWW.LANGUAGELINE.COM

800-752-6096

Interpreters Over-The-Phone:

- 170 languages - on-demand 24/7/365
- Connect in seconds – no appointments – no waiting
- Flat Fee – pay only for the time you use – no minimums
- Easier and more cost effective than waiting for in-person interpreters.

How do you bill for this service?

The call to our 800 number is free. Usage is billed in one-minute increments and charges begin when the interpreter comes on the line.

Your paper or [electronic bill](#) will list the date, time and duration of the call, language, interpreter number, the personal code of the person placing the call and our internal reference number.

And Language Line Supports Your Staff...

- Step-by-step video training and language "welcome" tools.
- Language identification and call support 24/7/365
- 1,500 scheduled staff, specially trained Police 911, Medical Certified and Court Certified interpreters and translators
- Detailed monthly billing statements by department
- The Language Line® Phone for walk-in customer support

APPENDIX H

<div style="display: inline-block; width: 30%;"> 2004 Census Test </div> <div style="display: inline-block; width: 30%; text-align: right;"> </div>	LANGUAGE IDENTIFICATION FLASHCARD
<input type="checkbox"/> <p style="text-align: center;">ضع علامة في هذا المربع إذا كنت تقرأ أو تتحدث العربية.</p>	1. Arabic
<input type="checkbox"/> <p style="text-align: center;">Խոսողու՞մ ե՞նք հնչու՞մ կատարե՞ք այս քառակուսու՞մ, եթե խոսու՞մ կամ կարդու՞մ եք հայերեն:</p>	2. Armenian
<input type="checkbox"/> <p style="text-align: center;">যদি আপনি বাংলা পড়েন বা বলেন তা হলে এই বাক্সে দাগ দিন।</p>	3. Bengali
<input type="checkbox"/> <p style="text-align: center;">ល្អមបញ្ជាក់ក្នុងប្រអប់នេះ បើអ្នកអាន ឬនិយាយភាសា ខ្មែរ ។</p>	4. Cambodian
<input type="checkbox"/> <p style="text-align: center;">Motka i kahhon ya yangin ûntûngnu' manaitai pat ûntûngnu' kumentos Chamorro.</p>	5. Chamorro
<input type="checkbox"/> <p style="text-align: center;">如果你能读中文或讲中文，请选择此框。</p>	6. Simplified Chinese
<input type="checkbox"/> <p style="text-align: center;">如果你能讀中文或講中文，請選擇此框。</p>	7. Traditional Chinese
<input type="checkbox"/> <p style="text-align: center;">Označite ovaj kvadratić ako čitate ili govorite hrvatski jezik.</p>	8. Croatian
<input type="checkbox"/> <p style="text-align: center;">Zaškrtněte tuto kolonku, pokud čtete a hovoříte česky.</p>	9. Czech
<input type="checkbox"/> <p style="text-align: center;">Kruis dit vakje aan als u Nederlands kunt lezen of spreken.</p>	10. Dutch
<input type="checkbox"/> <p style="text-align: center;">Mark this box if you read or speak English.</p>	11. English
<input type="checkbox"/> <p style="text-align: center;">اگر خواندن و نوشتن فارسي بلد هستيد، اين مربع را علامت بنيد.</p>	12. Farsi

- | | | |
|--------------------------|--|--------------------|
| <input type="checkbox"/> | Cocher ici si vous lisez ou parlez le français. | 13. French |
| <input type="checkbox"/> | Kreuzen Sie dieses Kästchen an, wenn Sie Deutsch lesen oder sprechen. | 14. German |
| <input type="checkbox"/> | Σημειώστε αυτό το πλαίσιο αν διαβάζετε ή μιλάτε Ελληνικά. | 15. Greek |
| <input type="checkbox"/> | Make kazyé sa a si ou li oswa ou pale kreyòl ayisyen. | 16. Haitian Creole |
| <input type="checkbox"/> | अगर आप हिन्दी बोलते या पढ़ सकते हैं तो इस बक्स पर चिह्न लगाएँ। | 17. Hindi |
| <input type="checkbox"/> | Kos lub voj no yog koj paub twm thiab hais lus Hmoob. | 18. Hmong |
| <input type="checkbox"/> | Jelölje meg ezt a kockát, ha megérte vagy beszéli a magyar nyelvet. | 19. Hungarian |
| <input type="checkbox"/> | Markaam daytoy nga kahon no makabasa wenno makasaoka iti Ilocano. | 20. Ilocano |
| <input type="checkbox"/> | Marchi questa casella se legge o parla italiano. | 21. Italian |
| <input type="checkbox"/> | 日本語を読んだり、話せる場合はここに印を付けてください。 | 22. Japanese |
| <input type="checkbox"/> | 한국어를 읽거나 말할 수 있으면 이 칸에 표시하십시오. | 23. Korean |
| <input type="checkbox"/> | ໃຫ້ໝາຍໃສ່ຊ່ອງນີ້ ຖ້າທ່ານອ່ານຫຼືປາກພາສາລາວ. | 24. Laotian |
| <input type="checkbox"/> | Prosimy o zaznaczenie tego kwadratu, jeżeli posługuje się Pan/Pani językiem polskim. | 25. Polish |

- | | | |
|--------------------------|--|----------------|
| <input type="checkbox"/> | Assinale este quadrado se você lê ou fala português. | 26. Portuguese |
| <input type="checkbox"/> | Însemnați această căsuță dacă citiți sau vorbiți românește. | 27. Romanian |
| <input type="checkbox"/> | Пометьте этот квадратик, если вы читаете или говорите по-русски. | 28. Russian |
| <input type="checkbox"/> | Обележите овај квадратик уколико читате или говорите српски језик. | 29. Serbian |
| <input type="checkbox"/> | Označte tento štvorček, ak viete čítať alebo hovoriť po slovensky. | 30. Slovak |
| <input type="checkbox"/> | Marque esta casilla si lee o habla español. | 31. Spanish |
| <input type="checkbox"/> | Markahan itong kuwadrado kung kayo ay marunong magbasa o magsalita ng Tagalog. | 32. Tagalog |
| <input type="checkbox"/> | ให้กาเครื่องหมายลงในช่องถ้าท่านอ่านหรือพูดภาษาไทย. | 33. Thai |
| <input type="checkbox"/> | Maaka 'i he puha ni kapau 'oku ke lau pe lea fakatonga. | 34. Tongan |
| <input type="checkbox"/> | Відмітьте цю клітинку, якщо ви читаете або говорите українською мовою. | 35. Ukrainian |
| <input type="checkbox"/> | اگر آپ اردو پڑھتے یا بولتے ہیں تو اس خانے میں نشان لگائیں۔ | 36. Urdu |
| <input type="checkbox"/> | Xin đánh dấu vào ô này nếu quý vị biết đọc và nói được Việt Ngữ. | 37. Vietnamese |
| <input type="checkbox"/> | באצייכנט דעם קעסטל אויב איר לייענט אדער רעדט אידיש. | 38. Yiddish |

APPENDIX I



The Basics of Client Rights



Volunteers and staff will work with a wide variety of people from different backgrounds. We ask you to treat each individual with the same dignity, kindness and respect that you would expect if you were in their shoes.

Client confidentiality

Volunteers will have access to client records and stories. To protect the privacy and dignity of the people we serve, all information about a client is strictly confidential. Staff and volunteers should not share information they know about a client's situation with others, including other volunteers or authorities, unless provided with a court order or a subpoena signed by a judge.

As a staff person or volunteer of a program supported by the Oregon Food Bank Network, you must agree to provide equal and consistent treatment to all potentially eligible persons, applicants and beneficiaries (clients).

Protection against discrimination:

Race	Age
Sex	Disability
National origin	Religion
Political affiliation	Military status
Familial status	Marital status
Sexual orientation/gender identity	

Discrimination based on any of these federal and state protected bases is prohibited. Types of discrimination include, but are not limited to:

Differential Treatment:

I.e., refusal of service, using different eligibility criteria for certain clients, treating applicants differently based on protected class.

Disparate Impact:

Discrimination that is not intentional, but has that effect. A rule, policy or practice may be neutral on its surface, but it may impact a protected class disproportionately.

Best Practices

Be aware of personal assumptions and do your best to keep them to yourself when working with clients.

In general, try to accommodate special dietary needs (diabetes, food allergies, etc.) and religious requirements (Kosher or Halal foods).

Be prepared to provide program information in alternate formats for people with disabilities (i.e., reading materials out loud for visually impaired, etc.).

Tips for Faith-based Organizations:

Proselytizing is not allowed.

Be aware of actions/comments that could have a negative effect or create a barrier to service.

Sharing information about religious programs is fine, but make sure the client understands they won't be excluded from food service if they don't participate (i.e. prayer service before meals).

Civil Rights Complaints

Civil Rights complaints are characterized by the complainant verbalizing or submitting, in writing, a complaint that alleges they have been treated unfairly on the basis of a protected class.

Everyone has the legal right to file a discrimination complaint without retaliation—agency staff cannot refuse to assist with a complaint or create barriers.

Agency staff must be willing to assist in complaint resolution.

Agencies must keep records of all complaints for a period of three years from the date of the resolution of the complaint

Complainants have 180 days from the alleged discriminatory action to file a complaint.

Complaint Process

Persons who wishes to make a complaint can call Oregon Department of Human Services (DHS) Hotline 1-800-442-5238 or complete a complaint form. Send completed complaint forms to DHS. Agencies must post Hotline tear-off sheets with their "And Justice For All" poster. Contact your RFB for additional tear-off sheets.

Once a complaint is made, DHS, or, if appropriate, the USDA Office of Civil Rights, will investigate the complaint, which will include a review and evaluation of the facts. All parties will be informed of the decision or action required for resolution. Complainants have the right to appeal the decision if they choose.

Complaint Form

Every complaint should include the following:

Name, address, and phone number (or other means of contact) of the person alleging discrimination;

Location and name of organization accused of discrimination;

Basis of alleged discrimination (age, race, etc.);

Nature of incident that led person to allege discrimination.

These are your legal responsibilities. A complaint could become a lawsuit based on a claim of the violation of a person's civil rights.

Limited English Proficiency (LEP)

Your program must have a plan to serve those with limited English proficiency. Primary factors to consider are:

Number of LEP persons in your service area;

Frequency with which LEP persons come in contact with the program;

Importance of service provided by the program;

Resources available to the recipient.

Develop an LEP Plan:

Your plan should include strategies for providing translation of critical documents and interpretation through:
Staff or volunteers;

Contracts or informal community relationships;

Language line.

All staff and volunteers need to be trained in the LEP plan and prepared to implement it. You must keep your plan on file: evaluate and update your plan periodically.

If you need assistance in creating an LEP plan you can contact your RFB for more information and/or visit www.lep.gov.

Public Notification: Outreach

All programs must have a public outreach plan to inform participants and potentially eligible persons of the program availability, program rights and responsibilities, the policy of nondiscrimination, and the procedure for filing a complaint. Outreach needs to reach all populations in your service area.

Forms of communication: Brochures, bulletins, leaflets, letters, newspapers, radio/television announcements.

All forms of communication must include the nondiscrimination statement (see back of this brochure).

Provide appropriate translation of information in accordance with the program LEP Plan.

Advise the public in the service area of program availability and eligibility standards.

Display “And Justice For All” poster (form AD-475A) and Eligibility Questions poster in prominent areas.



Summary of Partner Agency requirements:

Your program must:

1. Participate in mandatory annual civil rights training;
2. Have an outreach strategy in place that reaches all populations in your service area;
3. Maintain a file with samples of all outreach materials containing the nondiscrimination statement;
4. Have a Limited English Plan (LEP) in place that all staff and volunteers know about.
5. Post “And Justice For All” poster (form AD-475A) and information on how to make a complaint;
6. Forward all discrimination complaints to DHS complaint hotline and assist in follow-up;
7. Address/Acknowledge all complaints and assist complainant if necessary;
8. Maintain a file of all complaints received.

APPENDIX J



Volunteer Brochure



This brochure summarizes important policies for a safe and equitable environment that all volunteers need to follow. If you have questions about the policies below, please ask your supervisor or agency coordinator for more information.

AN EQUAL OPPORTUNITY PROVIDER



Oregon Food Bank Partner Agency

Volunteers are vital

Thank you for volunteering your time to make a difference in the lives of those who face hunger. Thousands of dedicated volunteers, like you, help distribute food quickly and efficiently and/or provide skills building training to help people who are hungry. Last year, volunteers donated more than 1.7 million hours at partner agencies throughout our network! We value your time and commitment.

Civil rights and discrimination

As a volunteer, you'll be working with a wide variety of people from different backgrounds. We ask you to treat each individual with the same dignity, kindness and respect that you would expect if you were in their shoes.

Oregon Food Bank requires its programs and volunteers to follow federal and state rules regarding discrimination.

What is discrimination?

Discrimination includes:

Differential Treatment: Treating clients differently because of their race, gender, religion, sexual orientation, etc. For example, refusing service to someone because of their race or having different eligibility rules depending on a client's religion.

Discriminatory Impact: Treating people in a way that is not intended to be discriminatory, but has that effect. For example, enforcing a rule that may be neutral on its surface, like requiring a certain kind of documentation, but has a

Protected classes

You cannot discriminate based on a person's:

- Age
- Race
- National origin
- Disability
- Veteran status
- Ancestry
- Familial or marital status
- Sexual orientation including gender identity
- Citizenship
- Sex
- Military status
- Ethnicity
- Color
- Creed
- Political or religious affiliation
- Unfavorable discharge from military

Best Practices

Be aware of your beliefs and the effect they might have on the service you provide. Do your best to provide equal and consistent treatment to everyone.

In general, try to meet people's special needs, whether physical, dietary (diabetes, allergies, etc.) or religious (Kosher, Halal, etc.).

Be prepared to provide program information for people with disabilities or for people who don't speak English (for example, you may need to read materials out loud, use visual cues like flashcards or locate translated materials).

Reach out to your community. Don't limit your food program to members of a certain church congregation or other group.



Civil rights complaints

In order to protect clients from discrimination, Oregon Department of Human Services has a civil rights complaint procedure. Clients who want to make a civil rights complaint can call the Civil Rights Hotline, 800-44-5238.

All clients have the legal right to file a discrimination complaint for any reason, at any time.

Agency staff and volunteers:

- Cannot retaliate or seek revenge against someone who wants to or does file a complaint.
- Cannot refuse to help with or make it difficult for someone to file a complaint.

Do you know what to do if:

- Someone wants to make a discrimination complaint?
- Someone wants to receive food, but does not speak English?
- Someone is homeless or doesn't have a permanent address?

If you answered "no" to any of these questions, ask your supervisor or agency coordinator for more information.

Limited English Proficiency (LEP)

Your program is required to have a LEP plan- which includes strategies on how to serve those with limited English proficiency, by providing translation of critical documents and interpretation through:

- Staff or volunteers;
- Contracts or informal community relationships;
- Language line.

Please consult with your supervisor to learn about the LEP plan at your site.

Other policies and procedures

Client confidentiality

As a volunteer, you'll have access to client records. To protect the privacy and dignity of the people we serve, regardless of their race, color, citizenship, religious affiliation, sex, sexual orientation including gender identity or expression- all information about clients is strictly confidential. Please do not share information you may have about a client's situation with others, including other volunteers or authorities, unless provided with a court order or a subpoena signed by a judge.

Personal safety and respect

Our goal is to maintain a safe and warm environment for volunteers, staff and clients. Intimidation, threats or violent acts will not be tolerated. Volunteers under the influence of drugs (unless prescribed by a physician) or alcohol will be sent home.

If you are concerned about someone's behavior, please let your supervisor or agency coordinator know.

At will relationship

The program can terminate a person's status as a volunteer, with or without cause, at any time. Volunteers can terminate their relationship with the program, with or without cause, at any time.

Release from liability

Volunteers release the organization and its agents, representatives, trustees, officers, employees and volunteers from any liability arising out of damage, loss or injury to the volunteer or his/her property that happens as the results of volunteer activities. The volunteer's estate will hold the food program and its agents, representatives, trustees, officers, employees and volunteers harmless from any claims or actions by relatives or by legal representatives based on death or injury from volunteer activities.

The Basics

As a volunteer you are required to:

1. Complete the mandatory Civil Rights Training annually.
2. Complete one of the following Food Safety and Handling Trainings:
 - Oregon Food Handlers Card, valid for three years.
 - ServSafe Food Handlers for Food Banking, internal certification, valid for three years
 - OFB Food Safety Video, located on the Compliance Website, valid for one year.
3. If eligible for services, follow the same process as all other clients in acquiring food assistance.
4. Report all injuries, even minor scrapes and bumps, to your immediate supervisor and complete and sign an accident report.
5. Upon the completion of this training, sign the Civil Rights and Confidentiality Log, verifying that you have read and agree to the policies.

