



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**
Division of Social Services

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
WAYNE E. BLACK • Director

August 27, 2018

Dear County Directors of Social Services

Attention: All Civil Rights Coordinators, Program Administrators and Supervisors

Subject: All Program Civil Rights Complaints

The purpose of this Dear County Director Letter is to further clarify expectations of the USDA Civil Rights Division related to civil rights complaints. The prior DCDL dated October 1, 2012 (PC-02-201) instructs that all civil rights complaints be referred to the State office. In addition to all civil rights complaints being processed at the State level, counties are advised of additional specifics per instruction by the USDA, FNS Civil Right Office.

Compliance with the following information will ensure compliance with USDA Food and Nutrition Services Instruction 113-1 (<https://fns-prod.azureedge.net/sites/default/files/113-1.pdf>) and the Voluntary Compliance Agreement between North Carolina Department of Health and Human Services, Division of Social Services and the US Department of Health and Human Services, Office for Civil Rights (<https://www2.ncdhhs.gov/dss/dcdl/economicfamilyservices/EFS-WF-10-2011a.pdf>).

To be in compliance with the Office of Civil Rights please adhere to the following:

- A. Upon receipt of a verbal or written complaint, a county department of social services is required to submit that information by close of the current business day to the Division of Social Services. The complaints should be directed to:

Carlotta Dixon, MHS, CPM
Section Chief-Program Compliance
Title VI/ADA-Civil Rights Coordinator
Division of Social Services
North Carolina Department of Health and Human Services
820 South Boylan Avenue, McBryde Building
Raleigh, North Carolina 27603

- B. Notify complainants of the option to file a complaint directly to the state or federal agency. Direct complaints can be submitted to the Division of Social Services, USDA and US DHHS. The appropriate compliant forms should be provided to the complainant in hard copy or electronically. The current forms are attached, and hyperlinks are provided below.

NC DHHS, Division of Social Services:
[NC DSS Complaint Form – English and Spanish](#)

USDA, Office of the Assistant Secretary for Civil Rights:
[USDA Program Discrimination Complaint Form - English](#)
[USDA Program Discrimination Complaint Form - Spanish](#)

US DHHS, Office For Civil Rights:
[DHHS Civil Rights Discrimination Complaint Form - English](#)
[DHHS Civil Rights Discrimination Complaint Form - Spanish](#)

- C. Maintain a confidential log of civil rights complaints, kept separate from program complaints. This log may be in paper or electronic format and must include:
1. The complainant(s) name
 2. contact information,
 3. location (including county),
 4. nature of the complaint (including name of the individuals(s) and organizations(s) alleged to have engaged in the violation),
 5. date of alleged violation
- D. All records and documents regarding the complaint be maintained for four (4) years in addition to current year.
- E. Provide communication assistance, other modifications or accommodations and/or alternative formats when communicating with individuals who have limited English proficiency (LEP), individuals with disabilities, or individuals who are illiterate.
- F. During a civil rights review or investigation, provide requested documents within the requested timeframe (but no more than 60 days from date of request) and, as needed, assure employees are available for witness interviews.

Should you have any questions, please contact Carlotta Dixon at Carlotta.Dixon@dhhs.nc.gov or (919) 527-6421.

Sincerely,



Richard Stegenga,
Deputy Director, Business Operations

CC: Michael Becketts, Assistant Secretary for Human Services
Wayne Black, Director, Division of Social Services

Attachments: NC DSS Complaint Form – English and Spanish
USDA Program Discrimination Form - English
USDA Program Discrimination Form – Spanish
DHHS Civil Rights Discrimination Complaint Form - English
DHHS Civil Rights Discrimination Complaint Form - Spanish

PC-01-18