

**Oregon Department of Human Services (DHS)  
Office of Vocational Rehabilitation Services (OVRs)**

**OVRs SECTION 504 CONSUMER DISCRIMINATION GRIEVANCE PROCEDURES**

Under Section 504 of the Rehabilitation Act of 1973, the Office of Vocational Rehabilitation Services may not directly, or indirectly through contractual, licensing, or other arrangements, discriminate against any qualified individual based on disability. Prohibited discriminatory actions include denying a qualified individual the opportunity to participate in or benefit from any aid, benefit, or service, as well as providing any aid, benefit, or service that is not equal to or as effective as that provided to others. OVRs consumers, including OVRs client applicants, OVRs clients, former OVRs clients, and members of the public who believe that OVRs has treated them differently based on disability may file a complaint. Procedure:

**STEP 1 - Filing a discrimination complaint based on disability:**

- The consumer may submit a written complaint within 60 calendar days of the alleged offense or incident.
- The *OVRs Section 504 Consumer Discrimination Complaint Form* is available at all OVRs offices and on the OVRs website. The consumer may request assistance from staff to complete the form. Discrimination complaints may be filed at any DHS/OVRs office and must contain:
  - The name, address, and telephone number of the person filing the complaint.
  - A description of the incident or alleged offense with as much information as possible.
  - The location of incident or alleged offense and date that it happened.
  - A proposed agency response that would resolve the issue(s) to the consumer's satisfaction.
- OVRs shall maintain strict confidentiality of all information to the extent permitted by law.

**STEP 2 – Discrimination complaint review:**

- Within (5) working days, DHS/OVRs staff shall send a copy of the complaint to the OVRs ADA Coordinator at the OVRs administrative offices in Salem by fax (preferred), shuttle, or mail:

OVRs ADA Coordinator  
Office of Vocational Rehabilitation Services  
500 Summer Street NE, E-87  
Salem, OR 97301  
Tel: 503-945-6253  
Toll Free: 877-277-0513  
Fax: 503-947-5010  
TTY: Please use Relay

- Within (3) working days, the OVRs ADA Coordinator shall forward the complaint to an impartial investigator (OVRs Field Services Manager, OVRs Branch Manager, DHS Manager, or designee) who was not involved in the incident(s) at issue, has not provided services to the consumer, has no interest in the outcome of the investigation, and has not reviewed any prior complaint(s) involving the same consumer.
- The Reviewing Manager or designee shall obtain any relevant documentation and contact the complainant within (7) working days of receiving the complaint to schedule an in-person or telephone interview. If unable to contact the complainant by telephone, the Reviewing Manager or designee shall mail a letter to the complainant requesting an in-person or telephone meeting. The consumer may decline an interview.
- If an interview occurs, the consumer shall have an opportunity to present a statement of the facts and evidence supporting the complaint. If the consumer declines an interview, consumer's written complaint shall constitute consumer's statement of facts and evidence.

- The Reviewing Manager or designee may interview any witnesses and/or staff named by the consumer or other individuals involved in the alleged offense or incident.
- At the conclusion of the investigation, the Reviewing Manager or designee shall complete the *OVRs Response to Section 504 Consumer Discrimination Complaint* form containing an affirmation or denial of the complainant’s discrimination allegations and notice of the complainant’s appeal rights.
- The Reviewing Manager or designee may prepare an optional *OVRs Section 504 Consumer Complaint Letter of Determination* which shall include:
  - Statement of facts as contended by consumer and other involved individuals, including staff
  - Statement of the facts as found by the Reviewing Manager or designee and supporting evidence
  - A list of persons interviewed and documents considered
  - Narrative of efforts to resolve the grievance
  - Affirmation or denial of the discrimination allegation(s)
  - If applicable, identification of any corrective action taken to ensure that inappropriate or discriminatory action does not reoccur.

STEP 3 - Action required for discrimination complaints following the OVRs review:

- The Reviewing Manager or designee shall complete the *OVRs Review of Section 504 Consumer Discrimination Complaint* form, which shall include a statement affirming or denying the complainant’s allegations.
- Within (20) working days of interviewing the complainant, the Reviewing Manager shall mail the original *OVRs Response to Section 504 Consumer Discrimination Complaint* form and optional *OVRs Section 504 Consumer Complaint Letter of Determination* to the consumer.
- Within (20) working days of interviewing the consumer, the Reviewing Manager shall forward copies of the *OVRs Section 504 Consumer Discrimination Complaint form*, *OVRs Review of Section 504 Consumer Discrimination Complaint form*, *OVRs Response to Section 504 Consumer Discrimination Complaint form*, optional *OVRs Section 504 Consumer Complaint Letter of Determination*, and any relevant documentation to the OVRs ADA Coordinator and DHS Governor’s Advocacy Office in Salem.

STEP 4 – Client Appeal Rights:

- The *OVRs Response to Section 504 Consumer Discrimination Complaint* form includes notice of the consumer’s right to appeal the Reviewing Manager or designee’s review findings to the DHS ADA Coordinator at the DHS Governor’s Advocacy Office in Salem, as well as the consumer’s right to file discrimination complaints at the Office for Civil Rights in Seattle. The Client Assistance Program (CAP) is listed as a legal resource.
- Within (20) calendar days of the date on the *OVRs Response to Section 504 Consumer Discrimination Complaint* form, as mailed to the consumer, the consumer may contact the DHS Governor’s Advocacy Office (GOA) in writing to request further complaint review and investigation. The written letter of appeal shall state, with specificity, the reasons and facts that support disagreement with the impartial investigator’s findings. Contact information for the Governor’s Advocacy Office:

DHS ADA Coordinator  
 The Governor’s Advocacy Office  
 Oregon Department of Human Services  
 500 Summer Street NE E17  
 Salem OR 97301-1097  
 Tel: (503) 945-5941  
 Toll-Free: 800-442-5238  
 Fax: (503) 378-6532  
 TTY: 503-947-5330