

Subject: Procedures for Responding to Employment Discrimination Complaints from Employees of the Oregon Department of Justice, Crime Victims' Services Division's Sub-recipients under U.S. Department of Justice Grant Programs
Policy Number:
Effective Date: January 1, 2014

I. Purpose

The Oregon Department of Justice, Crime Victims' Services Division (DOJ/CVSD), receives federal financial assistance and serves as the State Adminstrating Agency (SAA) for the Victims of Crime Act (VOCA) funds and the Violence Against Women Act (VAWA) funds. As a recipient of federal financial assistance awarded directly from the Office of Justice Programs (OJP), DOJ/CVSD must comply with the federal statutes and regulations that prohibit discrimination in federally assisted programs or activities.

The purpose of this policy is to establish written procedures for DOJ/CVSD employees to follow when they receive a complaint alleging employment discrimination or retaliation from an employee of a DOJ/CVSD subrecipient implementing funding from the U.S. Department of Justice.

Complaints alleging employment discrimination by DOJ/CVSD are not addressed by this policy. Such complaints are covered by Oregon Department of Justice Policy 3-21.

II. Policy

All employees of a DOJ/CVSD subrecipient shall be treated equally regardless of race, color, national origin, sex, religion, or disability. Subrecipients must comply with all applicable federal laws regarding employment discrimination, including laws that prohibit retaliation.

Subrecipients must have procedures in place to respond to discrimination or retaliation complaints that employees report directly to the subrecipient. At a minimum, these procedures should include forwarding the complaint to DOJ/CVSD, the U.S Equal Employment Opportunity Commission, the U.S. Department of Justice, Office of Justice Programs, Office for Civil Rights (OCR), or the appropriate state or local fair employment practices agency; notifying the DOJ/CVSD Complaint Coordinator of any discrimination or retaliation complaints that the subrecipient does not refer to DOJ/CVSD; and notifying the complainant that he or she may file a complaint of discrimination or retaliation directly with DOJ/CVSD or OCR.

DOJ/CVSD Fund Coordinators will inquire about and review complaint procedures during subrecipient site reviews utilizing the civil rights compliance checklist included in the Phone Review & Site Visit Monitoring Instrument.

III. Definitions

For the purposes of this policy, the terms cited in this policy are defined as follows.

Complainant: An employee of a DOJ/CVSD subrecipient allegedly subjected to unlawful employment discrimination or retaliation by a DOJ/CVSD subrecipient based on or because of a federally protected class status or protected activity, who submits a complaint to DOJ/CVSD pursuant to this policy.

Complaint Coordinator: The person designated by the Oregon Department of Justice, Crime Victims' Services Division to oversee this policy, listed in Appendix B of this policy.

Discrimination: a discriminatory or prohibited employment practice to refuse to hire, promote, discharge, demote, terminate, or to retaliate against or to discriminate in matters of compensation or in terms, privileges, and conditions of employment against any persons otherwise qualified, because of race, color, sex, age, religion, national origin, or disability.

Retaliation: Any adverse employment action toward a person(s) engaged in an activity protected under federal law, such as making a charge, testifying, assisting or participating in any charge of unlawful discrimination.

Subrecipient: An entity that expends federal grant funds received from the Oregon Department of Justice, Crime Victims' Services Division as the state SAA to perform all or a portion of the scope of work or objectives of the federal award received by the SAA.

IV. Complaint Procedures

A. Reporting a Complaint

1. An employee of a DOJ/CVSD sub-recipient who believes he or she has been subjected to employment discrimination or retaliation by a DOJ/CVSD subrecipient may file a written complaint alleging such discrimination or retaliation with the Complaint Coordinator listed in Appendix B.
 - a. Written complaints must be submitted on the DOJ/CVSD *Allegation of Employment Discrimination* form which is attached as Appendix A and is available on the DOJ/CVSD website.
 - b. A complainant may file a complaint orally by contacting the Complaint Coordinator, or designee, if a disability impairs the complainant's ability to file a written complaint.
2. The complaint should contain the following:
 - a. The name, address, phone number and signature of the complainant, and authorized representative, as appropriate, filing the report;
 - b. The names of all parties involved, including witnesses;
 - c. A specific and detailed description of the conduct or action that the complainant believes is discriminatory or retaliatory;

- d. The location and date or time period in which the alleged conduct occurred; and
 - e. A description of the remedy the complainant desires.
3. A complaint must be submitted as soon as possible, but no later than 180 calendar days after the alleged act of discrimination or retaliation. DOJ/CVSD will forward a complaint submitted more than 180 calendar days after the alleged act of discrimination or retaliation, however, the complainant is solely responsible for any expiration of the statute of limitations for filing the complaint.
4. An employee of DOJ/CVSD, other than the Complaint Coordinator, who receives a complaint that a DOJ/CVSD subrecipient has allegedly engaged in discriminatory or retaliatory conduct against one or more of its employees shall direct the complaint to the Complaint Coordinator listed in Appendix B within seven (7) calendar days of receiving the complaint.

B. Processing a Complaint

1. The Complaint Coordinator shall promptly provide the complainant with a written notice acknowledging receipt of the complaint. In this acknowledgement letter, the Complaint Coordinator shall inform the complainant that he or she may also file a complaint directly with the U.S. Department of Justice, Office of Justice Programs, Office for Civil Rights (OCR), at 810 7th Street, NW, Washington, DC 20531.
2. All complaints will be taken seriously and will be handled in a discreet and confidential manner, to the extent possible.
3. The Complaint Coordinator will promptly forward the complaint to the U.S. Equal Employment Opportunity Commission (EEOC), the U.S. Department of Justice, Office of Justice Programs, Office for Civil Rights (OCR), or the appropriate state or local agency for investigation. Once the referral is made, the complainant is solely responsible for complying with all procedures the agency may require for investigating and resolving the complaint.
4. Within thirty (30) calendar days of the receipt of the complaint, the Complaint Coordinator will provide written notification to the complainant of the referral date and the name and address of the investigative agency to whom the complaint was forwarded.

C. Other Reporting Options

Nothing in this policy prevents any employee of a DOJ/CVSD subrecipient from filing a complaint directly with the Equal Employment Opportunity Commission (EEOC), U.S. Department of Justice, Office of Justice Programs, Office for Civil Rights, the Oregon Bureau of Labor and Industries (BOLI), Civil Rights Division, or any local fair employment

practices agency. The procedures discussed in this policy need not be utilized first , nor does this procedure need to be exhausted before another is used. **THIS POLICY IS FOR DEPARTMENT USE ONLY AND DOES NOT APPLY IN ANY CRIMINAL OR CIVIL PROCEEDING. THE DEPARTMENT POLICY SHOULD NOT BE CONSTRUED AS A CREATION OF HIGHER LEGAL STANDARD OF SAFETY OR CARE IN AN EVIDENTIARY SESNE WITH RESPECT TO THIRD-PARTY CLAIMS. VIOLATIONS OF THIS POLICY WILL ONLY FORM THE BASIS FOR DEPARTMENT ADMINISTRATIVE ACTION.**

V. Training

DOJ/CVSD shall provide periodic training on the procedures set forth in this policy to DOJ/CVSD employees, including an employee's responsibility to refer discrimination and retaliation complaints to the Complaint Coordinator. DOJ/CVSD shall require subrecipients to conduct periodic training on the procedures set forth in this policy to subrecipient employees.

VI. Policy Notification

A copy of this policy will be provided to all DOJ/CVSD employees. A copy of the policy will be included with the orientation materials provided to new DOJ/CVSD employees.

A copy of this policy will be provided to all DOJ/CVSD subrecipients. Information on the policy will be provided during all pre-application information teleconferences and will be posted on the DOJ/CVSD website. By signing the grant award agreement, the sub-recipient agrees to comply with all applicable federal civil rights laws prohibiting employment discrimination and retaliation.

Employment Discrimination Complaint



State of Oregon
Department of Justice

ALLEGATION OF EMPLOYMENT DISCRIMINATION

IMPORTANT NOTICE – PLEASE READ BEFORE FILLING OUT THIS FORM: Filing a complaint with the Crime Victims’ Services Division of the Department of Justice (CVSD/DOJ) is voluntary. CVSD/DOJ is not your attorney or advocate. CVSD/DOJ may or may not forward this complaint to U.S. Department of Justice, Office of Justice Programs, Office for Civil Rights (OCR) or other agencies for investigation. CVSD/DOJ does not take responsibility for your notifying your employer of a discrimination or retaliation claim, nor for filing this complaint with the appropriate agency or court, within the appropriate time periods for doing so.

TO: Complaint Coordinator
Department of Justice
Crime Victims’ Services Division
1162 Court St NE
Salem, OR 97301

FROM: _____ (Complainant’s Name)
(Please print or type)

DATE: _____

COMPLAINANT

(First Name) (Middle Initial) (Last Name)

Mailing Address

City/State/Zip

Home Phone ()

Other Phone ()

E-Mail Address

AGENCY AGAINST WHOM DISCRIMINATION CLAIM FILED

AGENCY NAME

Contact Person (First) (Middle Initial) (Last)

Mailing Address

City/State/Zip

Agency Phone () Other Phone ()

(1) Please indicate the type of discrimination you are alleging:

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> Race/Color | <input type="checkbox"/> Disability |
| <input type="checkbox"/> National Origin | <input type="checkbox"/> Age |
| <input type="checkbox"/> Religion | <input type="checkbox"/> Sex |
| <input type="checkbox"/> Retaliation | |

(2) Date the most recent incident being alleged last took place: _____

(3) Where did the most recent incident being alleged take place? _____

(4) What happened? Please provide a detailed account of the alleged discrimination:

(5) If this complaint is resolved to your satisfaction, what remedy are you seeking?

(6) Have you filed a case or complaint regarding this incident with any of the following?

- Civil Rights Division, U.S. Department of Justice
- Office of Civil Rights, Office of Justice Programs, U.S. Department of Justice
- U.S. Equal Employment Opportunity Commission (EEOC)
- Federal or State Court
- Bureau of Labor and Industries, Civil Rights Division
- Local human rights commission or fair employment practices agency

(7) For each item checked in 6 above, please provide the following information:

- Name of Agency:
- Date Filed:
- Case or Docket Number:
- Date of Trial or Hearing:
- Location of agency or court:
- Name of investigator:
- Status of Case:
- Comments:

(8) Do you have an attorney? Yes No

Complainant's Signature: _____ **Date:** _____
(Complaint NOT VALID unless signed)

If this form has been completed by someone other than the person filing this complaint, please indicate name and agency name of person completing this form below, and date completed:

Name: _____ **Agency:** _____
Date: _____

Complainant's acknowledgement that above information has been completed accurately:

Complainant's Signature: _____ **Date:** _____

**For DOJ/CVSD Use
Only**

Received by Complaint Coordinator: _____ Date: _____
(signature)

Date Acknowledgement Sent to Complainant: _____

Date Complaint Referred: to EEOC: _____ OCR: _____

Date Claimant Notified of Referral: _____

OREGON DEPARTMENT OF JUSTICE, CRIME VICTIMS' SERVICES DIVISION
COMPLAINT COORDINATOR CONTACT INFORMATION

The current Complaint Coordinator is Shannon Sivell, Department of Justice, Crime Victims' Services Division

Mailing Address:

Department of Justice, Crime Victims' Services Division
Attn: Shannon Sivell, Complaint Coordinator
1162 Court Street NE
Salem, Oregon 97301

Office Telephone Number: 503-378-2200

Office Facsimile Number: 503-378-5738

E-mail Address: shannon.l.sivell@doj.state.or.us