

SFSP

Administering the Program

*Civil Rights*

# Civil Rights

- CFR 225.7(g)
- FNS Instruction 113-1
- Administrative Guidance for Sponsors

Page 77

What is discrimination?

**The act of distinguishing one person or group of persons from others, either intentionally, by neglect, or by the effect of actions or lack of actions based on their protected classes.**

# Six Protected Classes

- **Race**
- **Color**
- **Sex**
- **Age**
- **National Origin**
- **Disability**



# Areas of Compliance

- Public Notification System (PNS)
  - News Release
  - And Justice For All
  - Non-Discrimination
  - Limited English Proficiency
- Data Collection
- Training
- Civil Rights Complaints

# Public Notification System- Media Release

## Sample News Release Open Sites

The \_\_\_\_\_ (name of sponsor) is participating in the Summer Food Service Program. Meals will be provided to all children without charge and are the same for all children regardless of race, color, national origin, sex, age or disability, and there will be no discrimination in the course of the meal service. Meals will be provided at the sites and times as follows: [list all sites and the starting and ending times of meal service for each site]

{Site Name}	{Site Address}	{Dates of Operation/Days}	{Times of Service}
{Site Name}	{Site Address}	{Dates of Operation/Days}	{Times of Service}
{Site Name}	{Site Address}	{Dates of Operation/Days}	{Times of Service}
{Site Name}	{Site Address}	{Dates of Operation/Days}	{Times of Service}

To file a complaint of discrimination, write or call immediately to:

USDA  
 Director, Office of Adjudication  
 1400 Independence Avenue, SW  
 Washington, D.C. 20250-9410  
 (866) 632-9992 or (800) 877-8339 (TTY) or (800) 845-6136 (Spanish)

USDA is an equal opportunity provider and employer.

## Sample News Release Enrolled Sites and Camps

The \_\_\_\_\_ (name of sponsor) is participating in the Summer Food Service Program. Meals will be provided to all eligible children free of charge. (To be eligible to receive free meals at a residential or non-residential camp, children must meet the income guidelines for reduced-price meals in the National School Lunch Program. The income guidelines for reduced-price meals by family size are listed on the next page.) Children who are part of households that receive Supplemental Nutrition Assistance Program (SNAP, formerly food stamps) benefits, or benefits under the Food Distribution Program on Indian Reservations (FDPIR), or Temporary Assistance to Needy Families (TANF) are automatically eligible to receive free meals.

Acceptance and participation requirements for the Program and all activities are the same for all regardless of race, color, national origin, sex, age or disability, and there will be no discrimination in the course of the meal service. Meals will be provided at the sites and times as follows: [list all sites and the starting and ending times of meal service for each site]

{Site Name}	{Site Address}	{Dates of Operation/Days}	{Times of Service}
{Site Name}	{Site Address}	{Dates of Operation/Days}	{Times of Service}
{Site Name}	{Site Address}	{Dates of Operation/Days}	{Times of Service}
{Site Name}	{Site Address}	{Dates of Operation/Days}	{Times of Service}

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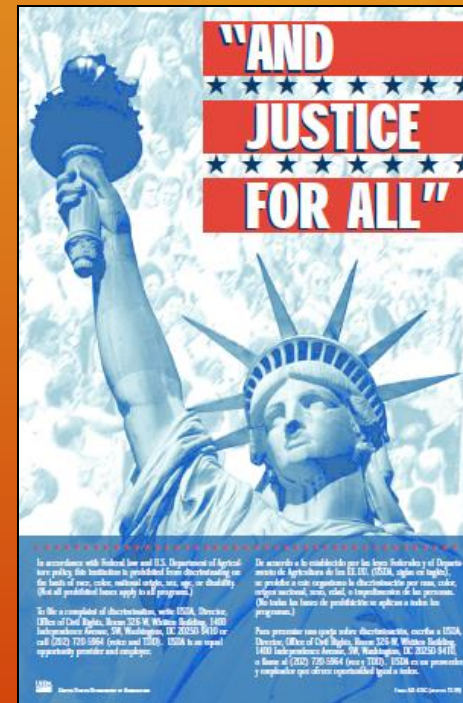
# Public Notification-“And Justice for All” Poster

Display in a prominent place the “And Justice For All” poster.

At the site – this should be where the children can view it.

It must also be displayed in the sponsor’s office.

Posters must be actual size.



# Public Notification- Current Non-discrimination Statement

"The U.S. Department of Agriculture (USDA) 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 if 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 (in Spanish).

USDA is an equal opportunity provider and employer."



# Public Notification-Limited English Proficiency

**All sponsors must have the capability of providing informational materials in the appropriate translation concerning the availability and nutritional benefits of the SFSP.**





# Ethnic/Racial Data

- Annually, each sponsor must determine the number of potentially eligible participants by ethnic/racial category for the area served-from census data or school data. This will be done *prior to the beginning of the program*.
- Sponsors must also *collect* ethnic/racial data each year for each site under the sponsor's jurisdiction-*at least once during the site's operation*.
- Camps must collect this information separately for each session of the camp.
- Visual identification.

**SUMMER FOOD SERVICE PROGRAM FOR CHILDREN  
"RE-AWARD NONDISCRIMINATION COMPLIANCE REVIEW FORM**

CNIPS Number: _____ Name and Address of Sponsor: _____ _____ _____	Completion of the form is required by FNS Instruction 113-8 issued by the U.S. Department of Agriculture in order to participate in the Summer Food Service Program for Children.
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Please Answer the Following Questions:

**I. Estimated Daily Meal Participation by Ethnic/Race Group (Do not list percentages):**

Hispanic or Latino	Not Hispanic or Latino	ETHNIC TOTAL	White	Black or African American	Asian	American Indian or Alaskan Native	Native Hawaiian or Other Pacific Islander	RACE TOTAL

**II. Are Civil Rights requirements (7 CFR 225.7(g) and FNS Instruction 113-1) for SFSP met?**  
Check each area in which the Organization is compliant:

- Prominently display the USDA nondiscrimination poster "And Justice For All" at site(s) and the sponsor's office
- Make reasonable efforts to provide information in the appropriate translation concerning the availability and nutritional benefits of the program
- Make program information available to the public upon request
- Ensure that all children have equal access to services and facilities at the site regardless of race, color, national origin, sex, age or disability
- Include the non-discrimination statement, and instructions for filing a complaint, in public releases and in any program information directed to parents of participants or potential participants.

\_\_\_\_\_  
Signature of Sponsor Representative

\_\_\_\_\_  
Date Signed

Pre-award-  
projected  
participation  
Can be  
completed and  
signed electronically,  
then uploaded into  
CNIIPS SFSP  
Sponsor Application  
checklist

# Data Collection



**Ethnic and Racial Data Form - Each sponsor is required to collect ethnic and racial data for each site. The sponsor must maintain this documentation.**

- **Complete for each site**
- **Fill out completely**
- **Keep for three years**

ETHNIC AND RACIAL DATA FORM**	
Sponsor: _____	
Site: _____	
Address: _____	
Site supervisor: _____	
Ethnic Categories	Number of Participating Children
<b>Hispanic or Latino.</b> A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term "Spanish origin" can be used in addition to "Hispanic or Latino."	
<b>Non-Hispanic or Latino</b>	
<b>Total</b>	
Racial Categories	
<b>American Indian or Alaska Native.</b> A person having origins in any of the original peoples of North and South America, (including Central America), and who maintains tribal affiliation or community recognition.	
<b>Asian.</b> A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.	
<b>Black or African American.</b> A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black or African American."	
<b>Native Hawaiian or Other Pacific Islander.</b> A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.	
<b>White.</b> A person having origins in any of the original peoples of Europe, the Middle East or North Africa.	
<b>Total</b>	
Monitor's Signature _____	Date _____

\*\* Note: Based on OMB Notice, Revisions to the Standards for the Classification of Federal Data on Race and Ethnicity, published 10/30/97 and in FNS Instruction 113-1, Civil Rights Compliance and Enforcement Nutrition Programs and Activities, published November 3, 2005. See Back for Instructions

# Ethnicity

The ethnicity of the children participating in the meal service must be categorized as either

a) Hispanic or Latino

or

b) Not Hispanic or Latino

The total number of these 2 categories should **equal** the number of children served meals that day.

# Hispanic/Latino + # Not Hispanic or Latino = total # of children

Ethnic Categories	Number of Participating Children
<b>Hispanic or Latino.</b> A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term "Spanish origin" can be used in addition to "Hispanic or Latino."	
<b>Non-Hispanic or Latino</b>	
<b>Total</b>	

# Racial Data

The race (as best as can be determined through casual observation) must be determined for all children who participate in the meal service.

Individuals may be identified as having more than one race.

Total # for race is always equal to ethnicity # or greater, never less.

Racial Categories	
<b>American Indian or Alaska Native.</b> A person having origins in any of the original peoples of North and South America, (including Central America), and who maintains tribal affiliation or community recognition.	
<b>Asian.</b> A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.	
<b>Black or African American.</b> A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black or African American."	
<b>Native Hawaiian or Other Pacific Islander.</b> A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.	
<b>White.</b> A person having origins in any of the original peoples of Europe, the Middle East or North Africa.	
<b>Total</b>	

# Civil Rights Grievance Procedure

- Train staff in defined procedures to process a complaint
- Keep grievance procedure forms in accessible place
- Must accept either written or verbal complaints
- May NEVER impede participants ability to file
- Move complaint forward in a timely manner

# Civil Rights Grievance Procedure

## Page 1

## Instructions

*All sites should have a copy of the Civil Rights Grievance Report Form*

### KENTUCKY DEPARTMENT OF EDUCATION Division of Nutrition and Health Services Civil Rights Grievance Report Procedures

In accordance with FNS Instruction 113.6, the \_\_\_\_\_ Sponsor/Sponsoring Organization provides a grievance procedure in the event a person believes he/she or their enrolled participant has been discriminated against and/or denied service on the basis of race, color, national origin, sex, age or disability in the food service program provided by the \_\_\_\_\_ Sponsor / Sponsoring Organization.

#### GENERAL INSTRUCTIONS

All complaints, written or verbal, alleging discrimination on the basis of race, color, national origin, sex, age or disability shall be processed within ninety (90) days of receipt in the manner prescribed in this instruction.

#### Procedure for Filing Complaints of Discrimination

1. Right to File a Complaint

Any person alleging discrimination based on race, color, national origin, sex, age or disability has a right to file a complaint within 180 days of the alleged discriminatory action. Under special circumstances this time limit may be extended.

2. Acceptance

All complaints, written or verbal, shall be accepted by the Division of Nutrition and Health Services and forwarded to the SERO-USDA. It is necessary that the information be sufficient to determine the identity of the agency or individual toward which the complaint is directed, and to indicate the possibility of a violation. Anonymous complaints shall be handled as any other complaint.

3. Verbal Complaints

In the event that a complainant makes the allegation verbally or through a telephone conversation and refuses or is not inclined to place such allegations in writing, the person to whom the allegations are made shall write up the elements of the complainant for the complainant. Every effort shall be made to have the complainant provide the following information:

- a. Name, address, telephone number, or means of contacting the complainant.
- b. The specific location and name of the entity delivering the program, service, or benefit.
- c. The nature of the incident(s) or action(s) that led the complainant to believe discrimination was a factor.
- d. The basis on which the complainant feels discrimination exists (race, color, national origin, sex, age, disability)
- e. The names, titles and addresses of the persons who may have knowledge of the discriminatory action(s).
- f. The date(s) during which the alleged discriminatory action occurred, or if continuing, the duration of such actions.

*Contact information of the complainant* →

### Civil Rights Grievance Report Form

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

If your grievance concerns a discriminatory action due to race, color, national origin, sex, age, or disability, please be very specific and give full details concerning the occurrence.

State the reason(s) you are filing this grievance report.

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What response did you receive from the sponsor representative during the alleged occurrence?

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What results are you seeking from this communication?

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\_\_\_\_\_  
Signature of Complainant

\_\_\_\_\_  
Date

*Nature of incident or action that led the complainant to feel discrimination was a factor*

## Civil Rights Grievance Procedure

### Page 2

**Complaint:**  
**Filled out by parent or guardian**

**Sponsor sends to KDE within  
3 days.**

**Send to: Director SFSP  
500 Mero St.  
Frankfort KY 40601**

**KDE sends it on to USDA.**



Thank you for your attention!