

NJ Department of Human Services Division of Developmental Disabilities www.nj.gov/humanservices/ddd



DDD Notice of Non-Discrimination

The New Jersey Division of Developmental Disabilities (DDD) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. DDD does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

DDD provides the following services at no cost to individuals who receive or are applying to receive DDD services:

- Services to assist people with disabilities communicate effectively with us, such as the use of a qualified sign language interpreter and the availability of written information in alternative and accessible formats (large print, audio, etc.).
- Language services to assist people whose primary language is not English, such as the use of a qualified interpreter and the availability of written information in languages other than English.

If you need these services, please contact 800-832-9173.

If you believe DDD failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance in person or by mail, fax or email with the NJ Department of Human Services, Office of Legal and Regulatory Affairs:

Civil Rights Coordinator Office of Legal and Regulatory Affairs 222 South Warren Street PO Box 700 Trenton, NJ 08625-0700 Email: DHS-CO.OLRA@dhs.state.nj.us

Fax: 609.633.9610 **Phone:** 1.888.347.5345

You can also file a civil rights discrimination complaint with the U.S. Department of Health and Human Services, Office for Civil Rights (OCR). An OCR complaint must be filed in writing by mail, fax, e-mail, or via the OCR Complaint Portal: https://ocrportal.hhs.gov/ocr/portal/lobby.jsf.

U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, DC 20201

Email: OCRComplaint@hhs.gov

Fax: 202.619.3818 **Phone:** 1.800.368.1019 **TDD:** 1.800.537.7697

The Civil Rights Discrimination Complaint Form Package is available here: www.hhs.gov/civil-rights/filing-a-complaint/complaint-process/index.html