

Your Civil Rights

If your grievance is based on discrimination (sex, race, age, color, religion, national origin or disability), rather than dissatisfaction with the division's decision, you have 180 days from the date of the alleged discrimination to request a formal hearing with the local or federal Civil Rights Office.

The U.S. Civil Rights Act of 1964 and the Vocational Rehabilitation Act of 1973, require that all federally aided programs be available without discrimination on the basis of race, color, national origin, age, sex, religion or disabling condition. This means that the Division must decide your eligibility and other such actions only on established rules and regulations.

For help with Civil Rights problems, ask your VR Counselor or anyone else in the Division,

or contact the: (Local)

DHS Civil Rights Compliance Officer
PO Box 339
Honolulu, Hawai'i 96813
PH: (808) 586-4955

or contact the: (Federal)

Civil Rights Office, Seattle Office
U.S. Department of Education
915 Second Avenue, Room 3310
Seattle, Washington 98174-1099
PH: (206) 220-7900
FAX: (206) 220-7887
TOLL FREE: 1-800-421-3481

Administration

Vocational Rehabilitation Administrator
1010 Richard Street, Suite 217
Honolulu, Hawai'i 96813
PH: (808) 586-9745

Oahu (Non-Blind)

Oahu Branch Administrator
600 Kapiolani Blvd, #305
Honolulu, Hawai'i 96813
PH: (808) 586-4824

Oahu (Blind)

Services for the Blind Administrator
1901 Bachelot Street
Honolulu, Hawai'i 96817
PH: (808) 586-5269

Hawaii Island

Hawai'i Branch Administrator
75 Aupuni Street, #110
Hilo, Hawai'i 96720
PH: (808) 974-6444

Kona Field Office

75-5722 Kuakini Highway, #213
Kailua-Kona, Hawai'i 96704
PH: (808) 323-0025

Maui

Maui Branch Administrator
54 South High Street, #309
Wailuku, Hawai'i 96793
PH: (808) 984-8350

Molokai Field Office

55 Makaena Street, Room 3
Kaunakakai, Hawai'i 96748
PH: (808) 553-3621

Kauai

Kauai Branch Administrator
3060 Eiwa Street, #304
Lihue, Hawai'i 96766
PH: (808) 274-3333

YOUR RIGHT TO DUE PROCESS (Your Request for Review)



**State of Hawaii
Department of Human Services
Division of Vocational Rehabilitation**

REQUEST FOR REVIEW

When you are applying for, or are receiving Vocational Rehabilitation services, and are not satisfied with a decision or action taken by the division, you have a right to **REQUEST FOR REVIEW** of the decision or action take.

You have 90 days from the date of the decision or action to submit a written **REQUEST FOR REVIEW**

How Do I Ask for a Review?

You may ask for a review using the Division's Request for Review form, or submit your own request in a personal letter to the VR Administrator. If you need help in preparing the Request, you may ask your VR Counselor or the Counselor's Supervisor. Describe the decision or action that you are dissatisfied with, your reasons, and the name of your VR Counselor. Submit your request to the VR Administrator listed on the reverse side of this brochure. You will receive a letter from the VR Administrator acknowledging receipt of your Request within two weeks from the date it is received by the Division.

The Request for Review entitles you to a Fair Hearing and the right to request for Mediation to try and resolve your dissatisfaction prior to a Fair Hearing. You must state your request for Mediation in the Request for Review. The Division may also request for Mediation prior to a Fair Hearing. However, both parties must agree to Mediation.

What is Mediation?

Mediation is a voluntary process, which gives both parties the opportunity to listen to each other's concerns, and to try to reach an agreement. The process cannot be used to deny or delay your right to a Fair Hearing, or to deny any other right offered under Title I of the Rehabilitation Act. Sessions are conducted by an Impartial Mediator, trained in mediation techniques to assist the parties to reconcile their differences and reach agreements.



What is a Fair Hearing?

This is formal procedure conducted by an Impartial Hearing Officer. At the hearing, you explain why you disagree with the Division, and the Counselor will explain the reason for the decision or action taken. The Hearing Officer receives information and evidence from both parties, then prepares a report with his or her findings and grounds for the decision.

Selection of Impartial Mediators or Hearing Officers

When you submit your Request for Review, if you request for Mediation, you will be asked to select your 1st and 2nd choice of Impartial Mediators from a list of qualified individuals. If you did not request Mediation, you will be asked to select your 1st and 2nd choice of Impartial Hearing Officers from a list of qualified individuals.



The Request for Review requires the Division to hold both the Mediation and Fair Hearing within 60 days of the Request, or, to hold a Fair Hearing within 60 days of the Request for Review, unless the parties agree to a specific extension of time.

Representation on Your Behalf

You may appear on your own behalf or select a person to represent you in the Mediation or Fair Hearing process.

You may be represented by counsel or other appropriate person, such as an advocate from the Client Assistance Program (CAP) of the Hawaii Disability Rights Center, who provides information and assistance to persons applying for or receiving services from the Division.

Mediation Process

If you requested and the Division agreed to Mediation, you will receive a Notice informing you of the date, time and place of the Mediation, at least 15 days before the session. Before starting the Mediation session, the Mediator must have both parties agree to and sign a Confidentiality Pledge that all discussions that occur during the Mediation will be kept confidential and will not be used as evidence in any subsequent due process hearing or civil proceeding.

If Mediation is successful, the Mediator will prepare a written agreement for the parties to sign. The Request for Review will be considered resolved by the signed agreement, precluding the need for the Fair Hearing.

Fair Hearing Process

If you do not request for Mediation, you will receive a Notice from the Impartial Hearing Officer of your choice, informing you of the date, time and place of the Hearing, at least 15 days before the Hearing. At the hearing, you will have the opportunity to explain your dissatisfaction with the Division's decision or action and to present evidence and witnesses to support your arguments. The Hearing Officer's decision is final. Any party who is dissatisfied with the Hearing Officer's decision may bring Civil Action.



Client Assistance Program (CAP)
Hawaii Disability Rights Center
1132 Bishop Street, Suite 2102
Honolulu, Hawai'i 96813
PH (Oahu): (808) 949-2922
PH (Neighbor Island): 1-800-882-1057