

Nondiscrimination Statement

Fair Haven Community Health Clinic, Inc. (FHCHC) complies with all applicable federal, state and local civil rights laws and does not discriminate against any person, deny any person services or benefits and does not deny any person participation in any FHCHC program or activity on the basis of race, color, national origin, creed, religion, sex, gender, sexual orientation, gender identity or expression, pregnancy, marital status, ancestry, veteran's status, status with regard to public assistance, a person's ability to pay, physical or mental disability, age or any other categories protected by federal, state or local law. FHCHC does not exclude people or treat them differently because of any of the bases listed above.

Additionally:

- FHCHC provides free aids and services to people with disabilities to communicate effectively, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- FHCHC provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need any of these services, please contact the Director of Risk Management and Safety at 203-871-4183. If you believe that FHCHC has failed to provide these services or discriminated in another way on any of the bases described above, you can file a grievance with our Director of Risk Management in person, by phone, by mail, fax, or email.

Mr. Kevin Stranahan
Director of Risk Management
Fair Haven Community Health Clinic, Inc.
374 Grand Avenue, New Haven Connecticut 06513
203-871-4183
k.stranahan@fhchc.org

If you need help filing a grievance, our Director of Risk Management is available to help you. FHCHC prohibits retaliation against any person because they opposed or complained about discrimination in good faith, assisted in good faith in the investigation of a discrimination complaint, or participated in a discrimination charge or other proceeding under federal, state or local antidiscrimination law.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office of Civil Rights Complaint portal, <https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf>, or by mail or phone within one-hundred and eighty (180) days of the alleged discrimination:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.