

Nondiscrimination Statement

Fair Haven Community Health Clinic, Inc. (FHCHC) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex or gender. FHCHC does not exclude people or treat them differently because of race, color, national origin, age, disability, sex, or gender.

Fair Haven Community Health Clinic, Inc.:

Provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

Provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages

If you need these services, please contact Camila Rubino, Vice President of Operations, at the number listed below. If you believe that FHCHC has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, sex, or gender, you can file a grievance with:

Camila Rubino, Vice President of Operations

Fair Haven Community Health Clinic, Inc.

374 Grand Avenue, New Haven, CT 06513

Phone: 203.777.7411, TTY number: 711, Fax: 203.777.8506

Email: c.rubino@fhchc.org

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Camila Rubino is available to help you.

You can also file a claim with the Office for Civil Rights via their online portal, phone or mail. Info is below.

Office for Civil Rights Complaint Portal

<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>,

or phone at: 800.368.1019, 800.537.7697 (TDD).

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

Complaint forms are available at:

<http://www.hhs.gov/ocr/office/file/index.html>.

Such complaints must be filed within 180 days of the date of the alleged discrimination.

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Español (Spanish)	العربية (Arabic)	پښتو (Pashto)	Português (Portuguese)	English
ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 203-974-0111 (TTY: 711).	ملحوظة: إذا كنت تتحدث انكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالسجان. اتصل برقم (رقم هاتف الصم والبكم: 711).	پام وکړئ: د ژبې مرستندويه خدمات، ستاسو لپارو اړیکې ونیسئ پدې لپاره وړیا موجود دي. 203-974-0111 (TTY: 711).	ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 203-974-0111 (TTY: 711).	ATTENTION: Language assistance services, free of charge, are available to you. Please call 203-974-0111 (TTY: 711).

