

**Notice Informing Individuals About Nondiscrimination and Accessibility Requirements
and Nondiscrimination Statement:
Discrimination is Against the Law**

Siouxland Community Health Center complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, religion, or gender identity. Siouxland Community Health Center does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Siouxland Community Health Center:

- 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, contact Shelby Petersen.

If you believe that Siouxland Community Health Center has 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 with: Michael Nitz, 1021 Nebraska Street, Sioux City, IA, 51105, 712-202-1038, fax 712-224-1895, or by email at compliance@slandchc.com. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Michael Nitz is available to help you.

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 for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

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>.

Notice of Non-Discrimination

Siouxland Community Health Center complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATTENTION: If you speak any language other than English, language assistance services, free of charge, are available to you. Call 1-712-252-2477 (TTY: 711).

العربية (Arabic)

Siouxland Community Health Center قوفين الحقوق لم يفل قدر الية لم عمولبها ولا يهيز على أساس لاء عرق أوللون أو الأصل الوطني أولسن أو الإعلة أولس.

ملحوظة: إذا لفتت حدث اذكر الة فإين خدمك المساعداً لغيري فتتو لدر لبال مجان. نصل لبق م 1-844-203-2025 اس تخدام

رمز ال دخول 003087330689

(TTY: 711)

繁體中文 (Chinese)

Siouxland Community Health Center 遵守適用的聯邦民權法律規定，不因種族、膚色、民族血統、年齡、殘障或性別而歧視任何人。

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-844-203-2025 並使用訪問代碼 003268026004。(TTY: 711)

Français (French)

Siouxland Community Health Center respecte les lois fédérales en vigueur relatives aux droits civiques et ne pratique aucune discrimination basée sur la race, la couleur de peau, l'origine nationale, l'âge, le sexe ou un handicap.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-844-203-2025 et utilisez le code d'accès 003099738951. (TTY: 711)

Deutsch (German)

Siouxland Community Health Center erfüllt geltenden bundesstaatliche Menschenrechtsgesetze und lehnt jegliche Diskriminierung aufgrund von Rasse, Hautfarbe, Herkunft, Alter, Behinderung oder Geschlecht ab.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-844-203-2025 und nutzen Sie den Zugangscod 003106718598. (TTY: 711)

हिंदी (Hindi)

Siouxland Community Health Center लागू होने योग्य संघीय नागरिक अधिकार कानून का पालन करता है और जाति, रंग, राष्ट्रीय मूल, आयु, विकलांगता, या लिंग के आधार पर भेदभाव नहीं करता है।

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-844-203-2025 और उपयोग कोड का उपयोग 003129984090 पर कॉल करें। (TTY: 711)

日本語 (Japanese)

Siouxland Community Health Center iss willich, die Gsetze (federal civil rights) vun die Owwerichkeit zu folliche un duht alle Leit behandle in der seem Weg. Es macht nix aus, vun welle Schtamm ebber beikummt, aus welle Land die Voreldre kumme sinn, was fer en Elt ebber hot, eb ebber en Mann iss odder en Fraa, verkruppelt iss odder net.

Wann du [Deutsch (Pennsylvania German / Dutch)] schwetzsch, kannsch du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: Call 1-844-203-2025 uffrufe, dricke 003271903586. (TTY: 711)

فارسی (Persian)

Siouxland Community Health Center، بطبق باقواری فدرال حقوق مدنی قیبال اجرا می‌کند و بر اساس نژاد، رنگ پوست، طبعیت، سن، ملیت و یا ربط جنسی قائل نمی‌شود.

توجہ: ہر شہر میں فارسی، خدمت تک زبان، ربط انصحت می‌کند و در دسترس شما ہفتین دیپلس خ 1-844-203-2025-3032-302-488-1 واسفادہ از کد دسترسی 002304211382.

(TTY: 711)

Русский (Russian)

Siouxland Community Health Center соблюдает применимое федеральное законодательство в области гражданских прав и не допускает дискриминации по признакам расы, цвета кожи, национальной принадлежности, возраста, инвалидности или пола.

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-844-203-2025 и использовать код доступа 003231576735. (TTY: 711)

Español (Spanish)

Siouxland Community Health Center cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-712-252-2477. (TTY: 711)

Srpsko-hrvatski (Serbo-Croatian)

Siouxland Community Health Center pridržava se važećih saveznih zakona o građanskim pravima i ne pravi diskriminaciju po osnovu rase, boje kože, nacionalnog porijekla, godina starosti, invaliditeta ili pola.

OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 1-844-203-2025 i koristiti pristupni kod 003235454317. (TTY: 711)

Tagalog (Tagalog – Filipino)

Sumusunod ang Siouxland Community Health Center sa mga naaangkop na Pederal na batas sa karapatang sibil at hindi nandiskrimina batay sa lahi, kulay, bansang pinagmulan, edad, kapansanan o kasarian.

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-844-203-2025 at gamitin mo ang access code na 00325484226. (TTY: 711)

ภาษาไทย (Thai)

Siouxland Community Health Center ได้ปฏิบัติตามรัฐบัญญัติด้านสิทธิที่เหมาะสม และไม่ได้แบ่งแยกทางชาติพันธุ์ สีผิว เชื้อชาติ อายุ ความทุพพลภาพ หรือเพศ

เรียน :ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 844-1-203- 2025 และใช้รหัสการเข้าถึง 003262597390 (TTY: 711)

Tiếng Việt (Vietnamese)

Siouxland Community Health Center tuân thủ luật dân quyền hiện hành của Liên bang và không phân biệt đối xử dựa trên chủng tộc, màu da, nguồn gốc quốc gia, độ tuổi, khuyết tật, hoặc giới tính.

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-712-252-2477. (TTY: 711)

unD (Karen)

Siouxland Community Health Center လူ့ပိုင်ခွင့်နိမ့်ကျခြင်းကိုမခံနိုင်ဘဲ ဖွဲ့စည်းပုံအခြေခံဥပဒေနှင့်အညီ တစ်ဦးချင်းစီအား အခွင့်အလမ်းတူညီစွာ ပေးအပ်မည်။

ဖွဲ့စည်းပုံအခြေခံဥပဒေ၊ အမျိုးမျိုး၊ သားနောင်၊ နှိုင်းယှဉ်ရေးရာ၊ မှတ်တမ်း တင်စာရွက်စာတမ်းအဖွဲ့အစည်းတို့ပါရှိပါသည်။

ဟံသာဝတီသား- နမူနာကတိ၊ ကညီ ကျိန်အလံ၊ နမူနာ ကျိန်အတိမ်၊ တလားဘူရိလားစွာ နိတင်အားပေးမည်။ ကိး 1-844-203-2025 003142392352 (TTY:711)