## North Shore Health Department

## NONDISCRIMINATION NOTIFICATION

1. **HHS NONDISCRIMINATION NOTICE FOR SIGNIFICANT PUBLICATIONS AND SIGNIFICANT COMMUNICATIONS:**

**Notice Informing Individuals About Nondiscrimination and Accessibility Requirements and Sample Nondiscrimination Statement in U.S. Health & Human Services Funded Programs and Activities.**

North Shore Health Department complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. [Name of covered entity] does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

  North Shore Health Department:

  • 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 the North Shore Health Department.

If you believe that the North Shore Health Department 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: North Shore Health Department Risk Manager**, 4800 W. Green Brook Dr., Brown Deer, WI 53223, 414-371-2980, 414-371-2988, nshd@browndeerwi.org**. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Ann Christiansen, Health Director/Officer 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>.

ATTENTION:  If you speak English, language assistance services free of charge are available to you.  Call [*toll free]1-877-261-6608 #531108*.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al *1-877-261-6608 #531108*.

 LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau *1-877-261-6608 #531108*.

 ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: *1-877-261-6608 #531108*.

 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 *1-877-261-6608 #531108*

 ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните *1-877-261-6608 #531108*.

 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. *1-877-261-6608 #531108*) 번으로 전화해 주십시오.

ﻢﻗر) *1-877-261-6608 #531108* ﻢﻗﺮﺑ ﻞﺼﺗا .نﺎﺠﻤﻟﺎﺑ ﻚﻟ ﺮﻓاﻮﺘﺗ ﺔﯾﻮﻐﻠﻟا ةﺪﻋﺎﺴﻤﻟا تﺎﻣﺪﺧ نﺈﻓ ،ﺔﻐﻠﻟا ﺮﻛذا ثﺪﺤﺘﺗ ﺖﻨﻛ اذإ :ﺔظﻮﺤﻠﻣ

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ,

ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທຣ *1-877-261-6608 #531108.*

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le *1-877-261-6608 #531108*.

Wann du [Deitsch (Pennsylvania German / Dutch)] schwetzscht, kannscht du mitaus Koschte

ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: Call *1-877-261-6608 #531108*.

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số *1-877-261-6608 #531108*.

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod

numer *1-877-261-6608 #531108*.

KUJDES: Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë.

Telefononi në *1-877-261-6608 #531108*.

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika

nang walang bayad. Tumawag sa *1-877-261-6608 #531108*.

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। *1-877-261-6608 #531108*  पर कॉल करें।

1. **HHS NONDISCRIMINATION STATEMENT FOR SIGNIFICANT PUBLICATIONS AND SIGNIFICATION COMMUNICATIONS THAT ARE SMALL-SIZE:**

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