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[www.morrowcountyhealthdistrict.org](http://www.morrowcountyhealthdistrict.org)

## NON-DISCRIMINATION AND GRIEVANCE POLICY

### Notice of Non-Discrimination

As a recipient of Federal financial assistance, Morrow County Health District (MCHD) does not exclude, deny benefits to, or otherwise discriminate against any person on the ground of race, color, or national origin, religion, sex, sexual orientation, gender identity/expression, protected veteran’s status, genetic information, or on the basis of disability or age in admission to, participation in, or receipt of the services and benefits under any of its programs and activities.

This statement is in accordance with the provisions of Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, Title II of the Americans with Disabilities Act of 1990, the Age Discrimination Act of 1975, and the Regulations of the U.S. Department of Health and Human Services issued pursuant to these statutes at Title 45 Code of Federal Regulations (CFR) Parts 80, 84, and 91, and 28 CFR Part 35.

### GRIEVANCE PROCEDURE UNDER SECTION 504 OF THE REHABILITATION ACT AND TITLE II OF THE AMERICANS WITH DISABILITIES ACT OF 1990

In accordance with the requirements of Section 504 of the Rehabilitation Act of 1973 (Section 504) and Title II of the Americans with Disabilities Act of 1990, as amended (ADA), Morrow County Health District does not discriminate on the basis of disability in admission to, participation in, or receipt of services and benefits under any MCHD program or activity. MCHD does not retaliate or discriminate against, or coerce, intimidate or threaten any individual who (1) opposes any act or practice made unlawful by Section 504 or the ADA; or (2) files a grievance and/or complaint, testifies, assists, or participates in any investigation, proceeding, or hearing under Section 504 or the ADA.

MCHD has adopted an internal grievance procedure providing for the prompt and equitable resolution of grievances alleging any action prohibited by Section 504, the ADA, or the Federal regulations implementing these laws.

MCHD has adopted an internal grievance procedure providing for the prompt and equitable resolution of grievances alleging any action prohibited by Title VI, Section 504, Title II of the ADA, the Age Act, or the Federal regulations implementing these laws. The applicable Federal laws and regulations may be examined by contacting the following individual who is MCHD’s ADA/Section 504 Coordinator and who has been designated to coordinate the efforts of MCHD to comply with Section 504 and the ADA:

Pioneer Memorial Hospital & Nursing Facility	Pioneer Memorial Home Health & Hospice	Pioneer Memorial Clinic	Irrigon Medical Clinic	Ione Community Clinic	Morrow County Ambulance
P – (541) 676-9133 F – (541) 676-2901 TDD – (541) 676-2908	P – (541) 676-2946 F – (541) 676-9017	P – (541) 676-5504 F – (541) 676-9025	P – (541) 922-5880 F – (541) 922-5881	P – (541) 422-7128	P – (541) 676-9133 F – (541) 676-2901

MCHD is An Equal Opportunity Provider and Employer

Chief Executive Officer, Morrow County Health District  
PO Box 9  
Heppner, OR 97836  
(541) 676-2915 or Fax:(541) 676-2900

Filing a grievance with the Chief Executive Officer at Morrow County Health District does not preclude patient or persons acting on the patient's behalf from filing a grievance with the:

**Region X - Seattle(Alaska, Idaho, Oregon, Washington)**  
Regional Manager  
Office for Civil Rights  
U.S. Department of Health and Human Services  
2201 Sixth Avenue - M/S: RX-11  
Seattle, WA 98121-1831  
Voice Phone (206)615-2290  
FAX (206)615-2297  
TDD (206)615-2296

Any person who believes she or he has been subjected to discrimination on the basis of disability or who believes she or he has been subjected to retaliation under Section 504 or the ADA may file a grievance under this procedure. It is against the law for MCHD to retaliate against anyone who files a grievance or cooperates in the investigation of a grievance.

**Procedure:**

- Grievances must be submitted to MCHD's ADA/Section 504 Coordinator (or his/her designee) as soon as possible but no later than sixty (60) calendar days after the date the person filing the grievance becomes aware of the alleged discriminatory action.
- A grievance must be in writing, containing the name and address of the person filing it. The grievance must state the problem or action alleged to be discriminatory and the remedy or relief sought.
- MCHD's ADA/Section 504 Coordinator (or his/her designee) will conduct an investigation of the grievance. This investigation may be informal, but it must be thorough, affording all interested persons an opportunity to submit evidence relevant to the grievance. MCHD's ADA/ Section 504 Coordinator will maintain the files and records of MCHD relating to such grievances.
- MCHD's ADA/Section 504 Coordinator, the Chief Executive Officer, or his/her designee, will issue a written decision on the appeal no later than thirty (30) calendar days after its filing.
- MCHD Personnel, including Risk Management Coordinator, Patient Business Manager, and Clinic Manager, will assist interested persons in filing grievances and will forward completed grievances to MCHD's ADA/Section 504 Coordinator for investigation or other appropriate action.
- **MCHD's ADA/Section 504 Coordinator (and/or his/her designee) will make appropriate arrangements to ensure that individuals with disabilities are provided reasonable modifications and appropriate auxiliary aids and services where necessary to participate in this grievance process. Such**

**arrangements may include making the grievance procedure available in alternate formats such as Braille, large print, audiotape, providing interpreters for the deaf or hard-of-hearing, or assuring a barrier-free location for proceedings.**

- MCHD employees requesting workplace accommodations for a disability must file a request for accommodation with the MCHD's ADA/Section 504 Coordinator, pursuant to ADA Policy, Reasonable Accommodation and Access.
- MCHD employees who believe they have been subjected to discriminatory treatment in their employment on the basis of disability or to retaliation as the result of requesting a disability accommodation, objecting to a discriminatory practice, or for participating in an ADA/Section 504 grievance process, may file an internal discrimination complaint with the MCHD's ADA/Section 504 Coordinator, to the District Discrimination and Sexual Harassment Complaint Policy.

Any disciplinary action taken against a MCHD employee for violating the ADA/ Section 504 rights of a person will be handled through the above grievance process.