

Grievance Procedure

Sullivan County Children & Youth Services does not exclude, deny benefits to, or otherwise discriminate against any person on the ground of race, color, national origin, disability, age, sex, sexual orientation, gender identity, religion or creed in admission to, participation in, or receipt of the services and benefits under any of its programs and activities, whether carried out by Sullivan County Children & Youth Services directly or through a contractor or any other entity with which Sullivan County Children & Youth Services arranges to carry out its programs and activities.

Any person who believes someone has been subjected to discrimination on the basis of race, color, national origin, sex, age, or disability may file a grievance under this procedure. It is against the law for Sullivan County Children & Youth Services to retaliate against anyone who opposes discrimination, files a grievance, or participates in the investigation of a grievance.

If you have questions or need assistance, contact the Section 504/ADA Coordinator, Lisa K. Wilcox.

If you believe that Sullivan County Children & Youth Services 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:

Lisa K. Wilcox
9219 Route 497, Suite D
Dushore, PA 18614
570-928-0307
lwilcox@sullivancountypa.gov

Procedure:

- Grievances must be submitted to Lisa K. Wilcox, Section 504/ADA Coordinator, within sixty (60) calendar days of the date the person filing the grievance becomes aware of the alleged discriminatory action.
- A complaint must be in writing, containing the name and address of the person filing it. The complaint must state the problem or action alleged to be discriminatory and the remedy or relief sought.
- The Section 504/ADA Coordinator or the designee shall investigate the complaint. This investigation may be informal, but it will be thorough, affording all interested persons an opportunity to submit evidence relevant to the complaint. The Section 504/ADA Coordinator will maintain the files and records of Sullivan County Children & Youth Services relating to such grievances. To the extent possible, and in accordance with applicable law, the Section 504/ADA Coordinator will take appropriate steps to preserve the confidentiality of files and records relating to grievances and will share them only with those who have a need to know.

- The Section 504/ADA Coordinator will issue a written decision on the grievance, based on a preponderance of the evidence, no later than thirty (30) calendar days after its filing, including a notice to the complainant of his or her right to pursue further administrative or legal remedies. If the Section 504/ADA Coordinator documents exigent circumstances requiring additional time to issue a decision, the Section 504/ADA Coordinator will notify the complainant and advise them of his or her right to pursue further administrative or legal parties at that time while the decision is pending.
- The person filing the grievance may appeal the decision of the Section 504/ADA Coordinator by writing to Hope Verelst, Sullivan County Chief Clerk, at hverelst@sullivancountypa.gov within fifteen (15) calendar days of receiving the Section 504/ADA Coordinator's decision. Hope Verelst, Sullivan County Chief Clerk, shall issue a written decision in response to the appeal no later than thirty (30) calendar days after its filing.

The availability and use of this grievance procedure does not prevent a person from pursuing other legal or administrative remedies, including filing a complaint of discrimination on the basis of race, color, national origin, sex, age, or disability in court or with the U.S. Department of Health and Human Services, Office for Civil Rights. A person can file a complaint of discrimination electronically through the Office for Civil Rights Complaint Portal, which is 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>. Such complaints must be filed within one hundred eighty (180) calendar days of the date of the alleged discrimination.

Effective Date: 1/17/2024