

# Charlotte Hungerford Hospital Non-Discrimination Policy Message

Charlotte Hungerford Hospital and its Multi-Specialty and Outpatient Service Providers comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex.

Charlotte Hungerford Hospital and its Multi-Specialty and Outpatient Service Providers do not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Charlotte Hungerford Hospital and its Multi-Specialty and Outpatient Service Providers:

- Provide free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified American Sign Language interpreters, Enhanced Telephonic
- Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provide free language services to people whose primary language is not English, such as:
  - Qualified medical interpreters
- Information written in other languages

If you require these services, please contact Nursing Supervision at 860-601-0510 or the Charlotte Hungerford Hospital switchboard at 860-496-6666.

If you believe that Charlotte Hungerford Hospital and its Multi-Specialty and Outpatient Service Providers have 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 Mary Beth Bednarz, Corporate Compliance Officer, Charlotte Hungerford Hospital, 540 Litchfield Street, Torrington, CT, 06790, 1-860-818-3885 (TTY-1-800-842-9710), FAX 860-496-6665, MBednarz@hungerford.org. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, MaryBeth Bednarz 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 1-860-601-0510 (TTY:1-800-842-9710).

**ATENCIÓN:** si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-860-601-0510 (TTY:1-800-842-9710).

**ATENÇÃO:** Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-860-601-0510 (TTY:1-800-842-9710).

**UWAGA:** Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-860-601-0510 (TTY:1-800-842-9710).

**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 1-860-601-0510 (TTY:1-800-842-9710)。

**ATTENZIONE:** In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-860-601-0510 (TTY:1-800-842-9710).

**ATTENTION :** Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-860-601-0510 (TTY:1-800-842-9710).

**ATANSYON:** Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-860-601-0510 (TTY:1-800-842-9710).

**ВНИМАНИЕ:** Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-860-601-0510 (TTY:1-800-842-9710).

**CHÚ Ý:** Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-860-601-0510 (TTY:1-800-842-9710).

**주의:** 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-860-601-0510 (TTY:1-800-842-9710). 번으로 전화해 주십시오.

**KUJDES:** Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në 1-860-601-0510 (TTY:1-800-842-9710).

**ध्यान दें:** यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-860-601-0510 (TTY:1-800-842-9710). पर कॉल करें।

**PAUNAWA:** Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-860-601-0510 (TTY:1-800-842-9710).

**ΠΡΟΣΟΧΗ:** Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-860-601-0510 (TTY:1-800-842-9710).

**ملحوظة:** إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 0510-601-860-1 (رقم

هاتف الصم والبكم: 1-800-842-9710).