

Notice
Informing Individuals of Nondiscrimination and Accessibility Requirements

Anderson Hospital complies with applicable Federal civil rights laws, does not discriminate and does not exclude people or treat them differently because of or on the basis of race, color, creed, religion, age, disability, sex, sexual orientation, gender identity and/or expression, genetic information and testing, pregnancy, national origin, citizenship, veteran status military status, unfavorable discharge from military, or other lawfully protected status.

Anderson Hospital 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 TTY number – 618-288-7602

If you need these services, contact any Anderson staff member.

If you believe that Anderson Hospital failed to provide the above services, you may contact:

Illinois Dept. of Public Health: 1-800-547-0466

If you believe that Anderson Hospital has failed to provide these services or discriminated in another way on the basis of race, color, creed, religion, age, disability, sex, sexual orientation, gender identity and/or expression, genetic information and testing, pregnancy, national origin, citizenship, veteran status military status, unfavorable discharge from military, or other lawfully protected status, you can file a grievance with:

Patient Advocate

6800 State Route 162

Maryville, Illinois 62062

Phone: 618-391-6429

Fax: 618-288-4088

patientadvocate@andersonhospital.org

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, our Patient Advocate 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>.

Informing Individuals With Limited English Proficiency of Language Assistance Services

THIS IS THE ENGLISH VERSION OF THE 16 NON-ENGLISH LANGUAGES PROVIDED BELOW:

ATTENTION: If you speak the _____ language, assistance services, free of charge, are available to you. Contact any Anderson staff for language assistance. TTY: 1-618-288-7602.

SPANISH

ATENCIÓN: Si habla español, hay servicios de ayuda gratuitos disponibles para usted. Comuníquese con cualquier miembro del personal de Anderson para ayuda con el idioma.

TTY: 1-618-288-7602.

Serbo-Croatian

PAŽNJA: Ako govorite SRPSKOHRVATSKI jezik, dostupna Vam je besplatna pomoć. Kontaktirajte bilo koga od osoblja bolnice Anderson za jezičku pomoć.

TTY: 1-618-288-7602.

POLISH

UWAGA: Jeśli mówisz po POLSKU, gwarantujemy Ci darmową pomoc językową. W celu uzyskania dalszych informacji skontaktuj się z którymkolwiek z pracowników szpitala Anderson.

TTY: 1-618-288-7602.

CHINESE

注意: 如果您的常用語言是漢語,我們將免費提供語言幫助服務。請聯繫任一位Anderson Hospital的工作人員,他們將為您提供語言幫助。

電傳打字機號碼: 1-618-288-7602。

KOREAN

안내: 한국어 통역 지원 서비스를 무료로 제공해 드리고 있습니다. 언어 지원이 필요하실 경우 Anderson 직원에게 문의하시기 바랍니다.

TTY: 1-618-288-7602.

TAGALOG

PANSININ: Kung sinasalita mo ang wikang TAGALOG, may makukuha kang mga serbisyong pagtulong, nang walang bayad. Kontakin ang sinumang kawani ng Anderson para sa tulong na pangwika.

TTY: 1-618-288-7602.

ARABIC

ملاحظة: إذا كنت تتحدث اللغة العربية فتتاح لك خدمات المساعدة مجاناً، و عليك الاتصال بأي فرد بطاقم العمل بمستشفى أندرسون لتلقي المساعدة في اللغة

الهاتف: 1-618-288-7602

RUSSIAN

ВНИМАНИЕ! Если Вы говорите на РУССКОМ языке, Вы можете получить бесплатную помощь. Обратитесь к любому сотруднику Anderson для получения помощи на родном языке.

Телефон с текстовым индикатором (TTY): 1-618-288-7602.

GUJARATI

ધ્યાન આપો: જો તમે ગુજરાતી ભાષા બોલતા હોવ તો, તો તમને વિના મુલ્યે મદદ માટેની સેવાઓ ઉપલબ્ધ છે. ભાષાની મદદ માટે એન્ડરસન (Anderson) ના કોઈપણ સ્ટાફનો સંપર્ક કરો.

TTY: 1-618-288-7602.

URDU

توجہ دیں: اگر آپ اردو زبان بولتے ہیں، تو آپ کے لیے امدادی خدمات، مفت دستیاب ہیں۔ زبان کی مدد کے لیے کسی بھی اینڈرسن عملہ سے رابطہ کریں۔

TTY: 1-618-288-7602.

VIETNAMESE

CHÚ Ý: Nếu quý vị nói TIẾNG VIỆT, chúng tôi có các dịch vụ trợ giúp ngôn ngữ miễn phí dành cho quý vị. Xin liên hệ với bất kỳ nhân viên nào của Anderson để được trợ giúp ngôn ngữ.

TTY: 1-618-288-7602.

ITALIAN

ATTENZIONE: Se parla ITALIANO, sono disponibili servizi di assistenza gratuiti. Per l'assistenza linguistica, si metta in contatto con il personale dell'Anderson Hospital.

Dispositivo TTY: 1-618-288-7602.

HINDI

कृपया ध्यान दें: यदि आप हिन्दी भाषी हैं तो, आपके लिए भाषा हेतु 'सहायता सेवा' मुफ्त में उपलब्ध है। भाषा संबंधी सहायता सेवा के लिए किसी एंडरसन स्टाफ से संपर्क करें।

TTY: 1-618-288-7602.

FRENCH

ATTENTION: Si vous parlez FRANÇAIS, nous offrons des services d'aide gratuits.

Veillez joindre un membre du personnel d'Anderson si vous avez besoin d'aide linguistique.

ATS : 1-618-288-7602.

GREEK

ΠΡΟΣΟΧΗ: Εάν μιλάτε την ΕΛΛΗΝΙΚΗ γλώσσα, υπηρεσίες παροχής βοήθειας, δωρεάν, είναι στη διάθεσή σας. Επικοινωνήστε με οποιοδήποτε μέλος Άντερσον για γλωσσική βοήθεια.

TTY: 1-618-288-7602.

GERMAN

HINWEIS: Wenn Sie DEUTSCH sprechen, steht Ihnen unser kostenfreier Sprachservice zur Verfügung. Wenden Sie sich an einen Krankenhausmitarbeiter, wenn Sie sprachliche Unterstützung benötigen.

Schreibtelefon: 1-618-288-7602.