
JCH HealthCare Non-Discrimination Policy

JCH HealthCare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, religion, sex (including pregnancy, gender identity, and sexual orientation), national origin, age, disability, or genetic information. JCH HealthCare does not exclude people or treat them differently on the basis of race, color, religion, sex (including pregnancy, gender identity, and sexual orientation), national origin, age, disability, or genetic information.

JCH HealthCare:

- Provides free aids and services to people with disabilities to communicate effectively with use, 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, please contact any JCH employee or the Administration Department at (618) 498-8301.

If you believe JCH HealthCare has failed to provide these services or discriminated in any way on the basis of race, color, religion, sex (including pregnancy, gender identity, and sexual orientation), national origin, age, disability, or genetic information, you can file a grievance with the JCH HealthCare Administration Department at 400 Maple Summit Road, Jerseyville, IL. 62052, (618) 498-8301, or fax to (618) 498-8313. Grievances can be filed in person, by mail, phone, or fax. If you need assistance filling out a grievance form, JCH HealthCare Compliance Officer is available to help you at (618) 498-8312 or via email at jwebster@jch.org.

*U.S. Department of Health and Human Services
200 Independence Avenue, SW,
Room 509F, HHH Building
Washington D.C., 20201
(800) 868-1019 or (800)-537-7697 (TDD)
Complaint forms are available at
<https://www.hhs.gov/ocr/complaints/index.html>*

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 complaint Portal at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.

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

注意：如果您使用繁體中文，您可以免費獲得語言援助服務

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad.

ف تاهم صال م ك بالو اذا ت نك ث دح نت رك ذا ال ل غة، ن إف ت امدخ قدعا شمال قى وغ لال رف اوت ت ك ل ن اجمال ل ص تا م قرب

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода.

যনু া: જો તમેજરાતી બોલતા હો, તો િ ન.સુભાષા સહાય સેવાઓ તમારા માટ ઉપલબ્ધ છ.

رگ ا پ ا و در ا عت لوب ه ين، وت پ ا و ک ن اب ز ی ک ددم ی ک ت امدخ ت فم ن یم ب ای ت سد ن یم - ال ک

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn.

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti.

ध्यान द: यद आप हदी बोलतेह तो आपके ि लए मुफ्त म भाषा सहायता सेवाएं उपलब्ध ह।

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement.

ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung.