HARRISHEALTH SYSTEM

Notice of Non-Discrimination

Harris Health System complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Harris Health System does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Harris Health System:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters; and
 - 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; and

- Information written in other languages.

If you need these services, please call Harris Health's Language Access Services at 877-612-3004.

If you believe that Harris Health System 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:

Administrative Director – Patient Experience Patient/Customer Relations Department 1504 Taub Loop, Houston, TX 77030 Telephone: 713-873-3939/Fax: 713-873-3166 Email: PatientRelations@HarrisHealth.org

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Administrative Director – Patient Experience 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, DC 20201 1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at: http://www.hhs.gov/ocr/office/file/index.html.

<u>Español (Spanish)</u>

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-877-612-3004.

Tiếng Việt (Vietnamese)

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-877-612-3004.

<u>繁體中文(Chinese)</u>

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1-877-612-3004。

<u> 한국어(Korean)</u>

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-877-612-3004 번으로 전화해 주십시오.

(Arabic) العربية

اللغوية المساعدة خدمات فإن ،اللغة اذكر تتحدث كنت إذا :ملحوظة -3004-612-178-1 (رقم بسرقم المساعدة خدمات فإن ،اللغ

(Urdu) أَرِدُو

کال ۔ ہیں دست تیاب میں مفت خدمات کی مدد کی زبان کو آپ تو ،ہیں بولتے اردو آپ اگر :خبر دار کے ال ۔ ہیں دست تیاب میں مفت خدمات کی مدد کی زبان کو آپ تھ

<u> Tagalog (Tagalog – Filipino)</u>

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-877-612-3004.

Français (French)

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposes gratuitement. Appelez le 1-877-612-3004.

<u>हिंदी (Hindi)</u>

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-877-612-3004 पर कॉल करें।

(Farsi) ارسى

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان بر ای شما تماس بگیرید.3004-612-877-1فراهم می باشد. با

Deutsch (German)

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-877-612-3004.

<u>ગુજરાતી (Gujarati)</u>

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-877-612-3004.

<u>Русский (Russian)</u>

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-877-612-3004.

<u>日本語(Japanese)</u>

注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。 1-877-612-3004まで、お電話にてご連絡ください。

<u>ພາສາລາວ (Lao)</u>

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັງຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທຣ 1-877-612-3004.