

Notice of non-discrimination and accessibility requirements

Discrimination is Against the Law

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

TidalHealth:

- 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 and an interpreter telephone line
 - Information written in other languages

If you require these services, contact the Nursing Supervisor.

If you believe TidalHealth has failed to provide these services, or has discriminated based on the basis of race, color, national origin, age, disability or sex, you can file a grievance with:

TidalHealth Peninsula Regional, c/o Patient Experience
100 East Carroll St., Salisbury, MD 21801
1-410-543-7212
Email: patientexperience.peninsula@tidalhealth.org

TidalHealth Nanticoke, c/o Patient Experience
801 Middleford Road, Seaford, DE 19973
1-302-629-6611 ext. 3532
Email: patientexperience.nanticoke@tidalhealth.org

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, S.W., Room 509F, HHH Building, Washington, D.C. 20201, 1-800-368-1019, 1-800-537-7697 (TDD)

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

Spanish:

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-410-543-7212.

French Creole:

ATANSYON: Si w pale Kreyol Ayisyen, gen sevis ed pou lang ki disponib gratis pou ou. Rele 1-410-543-7212.

Korean:

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 410-543-7212.

Chinese:

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 1-410-543-7212.

Vietnamese:

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-410-543-7212.

Portuguese:

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-410-543-7212.

French:

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-410-543-7212.

Tagalog:

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-410-543-7212.

FACM-057-D (10/21)

German:

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-410-543-7212.

Italian:

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-410-543-7212.

Russian:

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-410-543-7212.

Gujarati:

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 410-543-7212.

Arabic:

اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 7212-543-410 رقم هاتف الصم والبكم. ملحوظة: إذا كنت تتحدث

Farsi:

خنید می گفتو فارسی زبان به اخر: توجه شما برای رایگان بصورت زبانی تسهیلات می فراهم 1-410-543-7212 می گیریید تماس با باشد.

Dutch:

AANDACHT: Als u nederlands spreekt, kunt u gratis gebruikmaken van de taalkundige diensten. Bel 1-410-543-7212