

# DISCRIMINATION IS AGAINST THE LAW

St. Francis Hospital and all Catholic Health Services hospitals comply with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. St. Francis Hospital does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

St. Francis 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

If you need these services, contact the Director of the Patient Experience Department at (516) 562-6113. In the absence of the Language Coordinator, you may also contact the Nursing Supervisor for assistance.

If you believe that St. Francis Hospital 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:

Director, Patient Experience Department  
100 Port Washington Blvd.  
Roslyn, NY 11576  
Phone Number: (516) 562-6113  
Fax Number: (516) 562-6124

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Director of the Patient Experience Department 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>.



**Catholic  
Health Services**  
*of Long Island*  
At the heart of health

# INTERPRETERS AVAILABLE

You have access to interpretation services 24/7 at no personal cost to you.  
This chart includes languages commonly spoken in your community, additional languages are available.

**English: Do you speak [language]? We will provide an interpreter at no personal cost to you.**

**Spanish** ¿Habla español? Le proporcionaremos un intérprete sin costo alguno para usted.  
**Español**

**Korean** 한국어를 사용하십니까?  
**한국어** 무료로 통역 서비스를 제공해 드리겠습니다.

**Bengali** আপনি কি বাংলায় কথা বলেন?  
**বাংলা** আমরা আপনাকে একজন দোভাষী (ইন্টারপ্রিটার) দেব যার জন্য আপনার ব্যক্তিগতভাবে অর্থব্যয় করতে হবে না।

**Arabic** هل تتحدث اللغة العربية؟ سوف نوفر لك مترجمًا فورًا بدون أي تكلفة عليك.  
**اللغة العربية**

**French** Parlez-vous français ? Nous vous fournirons gratuitement un interprète.  
**Français**

**Russian** Вы говорите по-русски? Мы абсолютно бесплатно предоставим вам переводчика.  
**Русский**

**Albanian** Flisni shqip? Ne do t'ju sigurojm një përkthyes pa asnjë kosto personale për ju.  
**Shqip**

**Yiddish** דו רעדסט אידיש? מיר וועלן צושטעלן א פארשפרעכער בחינם.  
**אידיש**

**Greek** Μιλάτε ελληνικά; Θα σας παρέχουμε ένα διερμηνέα χωρίς καμία οικονομική επιβάρυνση για εσάς.  
**Ελληνικά**

**Polish** Czy mówisz po polsku? Zapewnimy bezpłatną pomoc tłumacza.  
**Polski**

**Brazil-Portuguese** Você fala português? Nós lhe forneceremos um interprete, sem nenhum custo adicional.  
**Português**

**Mandarin** 您讲国语吗? 我们将免费为您提供翻译。  
**中文**

**Italian** Parla italiano? Le forniremo gratuitamente un interprete.  
**Italiano**

**Tagalog** Nakapagsasalita ka ba ng Tagalog? Magbibigay kami ng tagasalin nang wala kang personal na babayaran.  
**Tagalog**

**Cantonese** 您講粵語嗎? 我們將免費為您提供翻譯。  
**粵語**

**Haitian Creole** Èske ou pale Kreyòl Ayisyen? N ap ba ou yon entèprèt gratis.  
**Kreyòl Ayisyen**

**Farsi** فارسی صحبت می کنید؟ یک مترجم شفاهی فارسی رایگان در اختیار شما قرار خواهیم داد.  
**فارسی**

**American Sign Language (ASL)**



**(516) 562-6113**