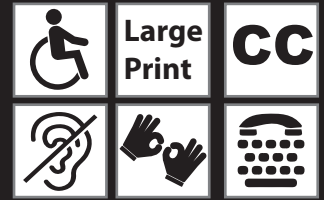


NOTICE OF NON-DISCRIMINATION



Riverside Healthcare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin (including immigration status and English language proficiency), age, disability, or sex. Riverside Healthcare does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Riverside Healthcare provides:

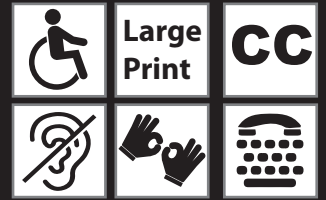
1. Free aids and services to people with disabilities to communicate effectively with us, such as: qualified sign language interpreters, Video Remote Interpreting, amplified phones, etc.
2. Free language translation services to people whose primary language is not English, such as: qualified interpreters. Over 240 languages can be translated by telephone through Language Line Solutions, Riverside's provider of language services. Spanish is the most requested language to be translated at Riverside.
3. Written information in other formats (large print, audio, accessible electronic formats, other formats).
4. Information written in other languages.

If you are in need of interpretation services, please call the hospital at 815-933-1671. Ask to be connected to the Patient Care Services office between the hours of 8:00 am and 4:30 pm, or contact the house supervisor outside of those hours. You may also let a staff member know at the time of scheduling and/or registration.

If you believe that Riverside Healthcare 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: Rebecca Schiltz, 350 N. Wall St., Kankakee IL, 60901, phone: 815-935-7514, TTY # 815-935-3323, fax: 815-935-7069, rschiltz@rhc.net. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Rebecca Schiltz, Director of Rehabilitation Services 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 the 1-800-368-1019, 800-537-7697 (TDD) Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html> Complaints about interpretive services may also be called to the Illinois Department of Public Health's Central Complaint Registry at 800-252-4343 or TTY # 800-547-0466.

NOTICE OF NON-DISCRIMINATION



- ATTENTION:** If you speak English, language assistance services, free of charge, are available to you. Call 1-815-933-1671 (TTY: 1-815-935-3323).
- Spanish:** ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-815-933-1671 (TTY: 1-815-935-3323).
- Polish:** UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-815-933-1671 (TTY: 1-815-935-3323).
- Tagalog:** PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-815-933-1671 (TTY: 1-815-935-3323).
- 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 1-815-933-1671 (TTY: 1-815-935-3323)。
- German:** ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-815-933-1671 (TTY: 1-815-935-3323).
- Korean:** 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-815-933-1671 (TTY: 1-815-935-3323) 번으로 전화해 주십시오.
- Arabic:** ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 815-933-1671 (رقم هاتف الصم والبكم: 815-935-3323)
- Urdu:** خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں 1-815-933-1671 (TTY: 1-815-935-3323)۔
- Russian:** ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-815-933-1671 (телетайп: 1-815-935-3323).
- Italian:** ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-815-933-1671 (TTY: 1-815-935-3323).
- Gujarati:** સંનયુ: જો તમે તારજુગ બોલતા હો, તો નિ:કલુશ ભાષા સહાય ઓલેસ તમારા માટે ધ્વલવડિ છે. ફોન કરો 1-815-933-1671 (TTY: 1-815-935-3323).
- Greek:** ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-815-933-1671 (TTY: 1-815-935-3323).
- Hindi:** ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-815-933-1671 (TTY: 1-935-3323) पर कॉल करें।
- French:** ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-815-933-1671 (ATS : 1-935-3323).
- Vietnamese:** CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-815-933-1671 (TTY: 1-815-935-3323).