SETTING UP TRANSLATION SERVICE FLIER

* If you do not have Adobe Reader you will need to download it for free online: <u>https://get.adobe.com/reader/</u>

STEP 1: Open this document in Adobe Reader.

STEP 2: On page 2, the legal Name of your franchise's Business Entity where indicated. Then edit in your entity or clinic's contact information including Name, phone number, email address and mailing address for the person who will handle correspondance for this service.

STEP 3: Review page 3 of your state language listing. If one of the 15 languages list no translation an editable text field has been placed in telling you to seek a local translator, who can translate the English version for you and assist you in finding a translation service to make arrangements with to be an available translator for that languaged. *See footnote.

STEP 4: Once all edits have been made to this document, **SAVE A COPY** of this PDF file <u>before closing</u> it so that your changes will save. Print pages 2-3 for use in the clinic.

*If Language Translation is missing on Page 3 of this PDF file, please flow in the translation for a missing local language over top of the text provided in the text editing field. The following should be translated by your local translator for this language: Written in thier language: *Language Name* Translate the following: **Point to your language. An interpreter will be called. The interpreter is provided at no cost to you.**

Please Note: Some foreign language fonts are not easily obtained and may use characters that will be difficult to obtain. Check with your local hospital to see how they have done this for their facility. It is possoble that your local translator may need to hand write the language translation on a label to place onto a missing language if shown on Page 3. As of 2016, all missing languages are indicated by the Federal Government to be spoken in the home and most often these language speakers (above the age of 5) are able to speak English if living in the US. It is possible that the language is used in speech only. If that is the case, have your front desk call a local translator for that language to assist over the phone with the patient if needed.



NOTICE AND NON-DISCRIMINATION STATEMENT

Business Entity Name (referred to "we" here after in this notice)

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

We provide:

- Free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats
- Free language services to people whose primary language is not English, such as:
 - Qualified interpreter services
 - Information written in other languages

If you need these services, please notify clinic staff.

If you believe that we have 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:

You can file a grievance in person or by mail, fax, or email. If you need help filing grievances contact: The Compliance Office as given above.

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. Phone: 1-800-368-1019, 800-537-7697 (TDD).

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



OHIO

B ENGLISH

Point to your language. An interpreter will be called. The interpreter is provided at no cost to you.

Spanish Señale su idioma y llamar El servicio es gratuito.	Español 🖘 emos a un intérprete.	Pennsylvania Dutch	FEI.
Vietnamese Hãy chỉ vào ngôn ngữ của quý v gọi đến, quý vị sẽ không phải trả	Tiếng Việt 🖘 ự. Một thông dịch viên sẽ được à tiền cho thông dịch viên.	Russian И Укажите язык, на котором вы говорите. Вам вызо переводчика. Услуги переводчика предоставляю	
Korean 귀하께서 사용하는 언어를 : 언어 통역 서비스를 무료로		Ukranian Укр Вкажіть вашу мову. Вам викличуть пе Послуги перекладача надаються безн	
Chinese 請指認您的語言,以 您提供免費的口譯服	(便為 请指认您的语言,以便为 法務。 您提供免费的口译服务。	Dutch Ned Wijs uw taal aan. Er zal contact worden met een tolk. De service van de tolk is g	
Oromo (Cushite) Gara afaan keetti eeri. Turjum Turjumaanni beesee takka ma		Italian Indicare la propia lingua. Un interprete sa Il servizio è gratuito.	Italiano 🖘 I rà chiamato.
Japanese 5なたの話す言語を指してくれ 無料で通訳サービスを提供しき		French Indiquez votre langue et nous appelle interprète. Le service est gratuit.	Français 😪
	Română 😴 🗊 orbiți. Vi se va face legătura ste asigurat gratuit.	German Zeigen Sie auf Ihre Sprache. Ein Dolme angefordert. Der Dolmetscher ist für Si	
cu un interpret caare vă es Arabic ال بمترجم فوري. كما			