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Area Patients' Rights and Organization Ethics (RI)
Applicability USA Health

Non -Discrimination Policy

POLICY STATEMENT:

Section 1557 is the civil rights provision of the Affordable Care Act of 2010. Section 1557 prohibits discrimination on the basis of race, color, national origin, sex, age, or disability in certain health programs and activities. The Section 1557 final rule applies to any health program or activity, any part of which receives funding from the Department of Health and Human Services (HHS), such as hospitals that accept Medicare or doctors who receive Medicaid payment. This policy describes the process for personnel of the University of South Alabama Health System (USA Health) to ensure nondiscrimination and to provide assistance and services to and to ensure meaningful access and effective communications for, individuals with limited English proficiency (LEP) (including the need for a language interpreter) or who are disabled.

POLICY:

The University of South Alabama, inclusive of USA Health and USA HealthCare Management, LLC, **complies with applicable Federal civil rights laws and does not discriminate, does not exclude people, or treat them differently** on the basis of race, skin color, national origin, sex, pregnancy, sexual orientation, gender identity and gender expression, religion, age, genetic information, disability, protected veteran status or any other applicable legally protected basis.

Ensuring Meaningful Access for LEP Individuals

USA Health shall take reasonable steps to ensure meaningful access to its programs and activities by LEP individuals. USA Health shall consider the following four (4) factors in determining what steps are required to comply with this obligation:

- the number or proportion of LEP individuals eligible to be served or likely to be encountered in

its service population

- the frequency with which LEP individuals come in contact with USA's health programs or activities
- the nature and importance of the program, activity, or service; and
- the resources available to USA Health and the costs

Such reasonable steps may include providing free language assistance services to people whose primary language is not English, such as video/audio qualified interpreters and information written in other languages.

When USA Health is required to provide language assistance services pursuant to the above paragraph, such services must be provided free of charge, must be accurate and timely, and protect the privacy and independence of the LEP individual. Language assistance services may include:

- Oral language assistance, including interpretation in non-English languages provided in-person or remotely by a qualified interpreter for a LEP individual, and the use of qualified bilingual or multilingual staff to communicate directly with LEP individuals; and
- Written translation, performed by a qualified translator, of written content in paper or electronic form into languages other than English.

Interpreter services must be provided by an interpreter who:

- Adheres to generally accepted interpreter ethics principles, including client confidentiality;
- Has demonstrated proficiency in speaking and understanding at least spoken English and the spoken language in need of interpretation; and
- Is able to translate effectively, accurately, and impartially to and from such language(s) and English, using any necessary specialized vocabulary, terminology and phraseology.

If remote audio interpreting services are required, USA Health shall ensure they meet the following standards:

- Real-time audio over a dedicated high-speed, wide-bandwidth video connection or wireless connection that delivers high-quality audio without lags or irregular pauses in communication;
- A clear, audible transmission of voices; and
- Adequate training to users of the technology and other involved individuals so that they may quickly and efficiently set up and operate the remote interpreting services.

USA Health shall not:

- Require a LEP individual to provide his or her own interpreter;
- Rely on an adult accompanying a LEP individual to interpret or facilitate communication, except:
 - In an emergency involving an imminent threat to safety or welfare of an individual or the public, where there is no qualified interpreter for the LEP individual immediately available; or
 - Where the LEP individual specifically requests that the accompanying adult interpret

or facilitate communication, the accompanying adult agrees to provide such assistance, and reliance on that adult for such assistance is appropriate under the circumstances;

- Rely on a minor child to interpret or facilitate communication, except in an emergency involving an imminent threat to safety or welfare of an individual or the public, where there is no qualified interpreter for the LEP individual immediately available; or
- Rely on staff other than a qualified bilingual/multilingual staff to communicate directly with LEP individuals

Nothing in this policy shall be construed to require a LEP individual to accept language assistance services.

Ensuring Effective Communications with Individuals with Disabilities

USA Health shall take appropriate steps to ensure that communications with individuals with disabilities are as effective as communications with others in conducting its health programs and activities. When required by this policy, USA Health shall provide appropriate auxiliary aids and services, including interpreters and information in alternate formats, to individuals with impaired sensory, manual, or speaking skills, where necessary to afford such persons an equal opportunity to benefit from the service in question. Auxiliary aids and services may include:

- Interpreters on-site or through video remote interpreting (VRI) services; note takers; real-time computer-aided transcription services; written materials; exchange of written notes; telephone handset amplifiers; assistive listening devices; assistive listening systems; telephones compatible with hearing aids; closed caption decoders; open and closed captioning, including real-time captioning; voice, text, and video-based telecommunication products and systems, text telephones, videophones, and captioned telephones, or equally effective telecommunications devices; videotext displays; accessible information and communication technology; or other effective methods of making aurally delivered information available to individuals who are deaf or hard of hearing; and
- Readers; taped texts; audio recordings; Braille materials and displays; screen reader software; magnification software; optical readers; secondary auditory programs; large print materials; accessible information and communication technology; or other effective methods of making visually delivered materials available to individuals who are blind or have low vision.

An interpreter for an individual with a disability for purposes of this section can include, for example, sign language interpreters, oral transliterators (individuals who represent or spell in the characters of another alphabet), and cued language transliterators (individuals who represent or spell by using a small number of handshapes). Interpreting services shall be provided to individuals free of charge and in a timely manner, *via* a remote interpreting service or an onsite appearance, by an interpreter who:

- Adheres to generally accepted interpreter ethics principles, including client confidentiality; and
- Is able to interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary, terminology and phraseology

USA Health shall make reasonable modifications to its policies, practices, or procedures where such modifications are necessary to avoid discrimination on the basis of disability, unless it can demonstrate that making the modifications would fundamentally alter the nature of the health program or activities. For purposes of this section, "reasonable modification" shall be interpreted in a manner consistent with the Americans with Disabilities Act regulations.

If the patient believes that the University of South Alabama, inclusive of USA Health, and USA Healthcare Management, LLC has failed to provide these services because of discrimination on the basis of race, color, national origin, sex, pregnancy, sexual orientation, gender identity, and gender expression, religion, age, genetic information, disability, protected veteran status or any other applicable legally protected basis, the patient or significant other can file a complaint with:

USA Health University Hospital

Attn: Director, Patient Relations*, USA Health University Hospital
Phone: (251) 410-4706

USA Health Children's & Women's Hospital

Attn: Director, Patient Relations*, USA Health Children's and Women's Hospital
Phone: (251) 410-4706

USA Health Physicians Group

Attn: Manager*, Ambulatory Quality Improvement
Phone: (251) 434-3939

USA Health Mitchell Cancer Institute

Attn: Manager*, Lay Navigation and Patient Centered Services
Phone: (251) 665-8000

Patients can file a complaint in person or by mail, fax or email. If the patient needs help filing a complaint, facility staff is available to help them. Patients 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>.

*The director/manager must report to the appropriate University official, per University policy, any event of discrimination directed toward an employee. For example, if an employee complains that he/she experienced sexual discrimination including sexual harassment or sexual violence this must be reported

to the USA Title IX coordinator for review.

USA Health will not retaliate in any way against a patient or employee who files a complaint under this Policy.

Original Policy No: RI020

Approval Signatures

Step Description	Approver	Date
	William Grete: Chief Legal Counsel	06/2021
	Casie Crawford: HS Dir, Clin Compli&Regul Svcs	06/2021
	Angela Duffy: Asst Chief Nursing Officer	06/2021

Applicability

USA Health, USA Health Children's & Women's Hospital, USA Health Mitchell Cancer Institute, USA Health Physician Enterprise, USA Health Providence, USA Health University Hospital