



Nondiscrimination in Health Care

Section 1557 of the Affordable Care Act

Notice to Residents, Family Members and Staff

November 2, 2024

All nursing homes in the United States are required by CMS, federal agency that regulates nursing homes, to provide this Section 1557 notification. Hatton Prairie Village (HPV) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. HPV does not exclude people or treat them less favorably because of race, color, national origin, age, disability or sex.

Hatton Prairie Village provides residents with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, etc.)
- Free language assistance services to residents whose primary language is not English, which may include:
 - ❖ Qualified interpreters
 - ❖ Information written in a resident's primary language

All aids and services provided will be in accessible formats, in a timely manner and in such a way as to protect the privacy and independence of residents with disabilities.

If you or your loved one need reasonable modifications, appropriate auxiliary aids and services or language assistance services, contact Cynthia Tredwell, Section 1557 Coordinator at:

- 701.543.3102
- ctredwell@hattonprairievillag.com

If you believe that HPV 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 Cynthia Tredwell at:

- 950 Dakota Ave., Hatton, ND 58240, or
- 701.543.3102, or
- ctredwell@hattonprairievillage.com

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office of Civil Rights, electronically through the Office of Civil Rights Complaint Portal at <https://ocrportal.hhs.govocr/portal/lobby.jsf> or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Ave. SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019 or 800-537-7697 (TDD)

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

For additional information on the grievance procedure, language access procedures, reasonable modification procedures and effective communication procedures please see the attached information sheets.

Reasonable Modifications Procedures

If a resident or resident's personal representative requests a reasonable modification to help access Hatton Prairie Village's (HPV) programs, activities, services or other benefits, HPV will timely provide the modification to the resident if the requested modification does not result in a fundamental alteration to HPV's programs or activities. Staff will contact Cynthia Tredwell, Section 1557 Coordinator, in a timely manner to help determine whether HPV can provide the requested modification. If the requested modification would result in a fundamental alteration, HPV will provide a written explanation of how the requested modification would alter the program, activity or service and may offer another modification that would not result in a fundamental alteration.

The request for a reasonable modification can be in writing or verbally given and does not need to use the words "reasonable modification". The request must describe the needed modification and explain how it is related to the resident's disability, unless it is apparent or otherwise known.

If a resident's disability is apparent or otherwise known, staff will ask the resident or resident's personal representative if he or she needs a reasonable modification to have meaningful access to HPV's programs, activities and services.

When HPV receives a reasonable modification request, it will timely talk with the resident or resident's personal representative to assess the request and may request additional information. If neither the disability nor the relationship between the disability and the requested modification is clear, HPV may ask the resident or resident's personal representative for proof of both. HPV will review and consider documentation from a doctor or other medical professional, a peer support group, a non-medical service agency or a reliable third party who is in a position to know about the resident's disability and need for the requested modification. HPV will make a decision on the requested modification within five (5) business days after it receives all requested documentation and will timely communicate the decision to the resident or resident's personal representative. If HPV does not receive the requested documentation, it will base its decision on the information available to HPV.

Staff will document the request in the resident's medical record, the outcome of HPV's decision to grant or deny the requested modification and what modifications were implemented, if any.

HPV employees will be trained on these reasonable modification procedures.

Language Access Procedures

HPV will inform residents with limited English proficiency (LEP) about the availability of free-of-charge language assistance services and all necessary auxiliary aids and services as appropriate for a person with LEP by providing written notice in languages that residents who are LEP will understand.

HPV will promptly identify the language and communication needs of a resident with LEP. Staff will document the use of language assistance services in the resident's record, including any language assistance services necessary to communicate with a resident's personal representative and/or companion. Staff will document the resident's, personal representative's and/or companion's preferred language.

HPV may have qualified bilingual/multilingual employees who can provide oral assistance and have demonstrated that they are proficient in speaking and understanding English and at least one other spoken language. HPV will let the resident and/or resident's personal representative know if it does have such an employee(s). If a qualified bilingual/multilingual employee is not available, HPV will take reasonable steps to obtain a qualified interpreter as described below.

HPV will use a telephone interpreter service or an electronic language interpreter application for residents with LEP, free-of-charge to the resident. Both entities must provide demonstrated proficiency in speaking and understanding both spoken English and at least one other spoken language and are able to interpret effectively, accurately and impartially while preserving the tone, sentiment and emotional level of the original oral statement. The interpreters must adhere to generally accepted interpreter ethics principles, including client confidentiality. HPV will document the use of the interpreter service provider in the resident's record.

If a resident specifically requests to use a companion as an interpreter, HPV will do the following:

- Confirm that the resident does not want interpreter services and agrees to a companion interpreter
- Confirm with the companion that he/she agrees to act as the resident's interpreter
- Assess the companion to assure that he/she can provide competent, safe and confidential interpretation and that there is no conflict of interest
- Explain that minor children cannot serve as a resident's interpreter

Staff will document in the resident's medical record the use of an interpreter service provider or application or a companion.

HPV will provide, free-of-charge, important written materials for a LEP resident by using a translation service in the same manner and qualifications as language assistance services discussed above. Important documents include: admissions paperwork, applications, required notices, care plans, discharge instructions and billing

information. HPV will ensure that documents submitted for translation are in final, approved form with updated and accurate legal and medical information. HPV will provide translation of other written materials, if needed, for residents with LEP.

Staff will document in the resident's medical record the use of a translation service provider.

HPV employees will be trained on how to access and provide language assistance services for LEP residents.

Effective Communication Procedures

HPV will take appropriate steps to ensure that communications with residents with disabilities - residents who are deaf, hard of hearing, blind, have low vision or have other sensory or manual disabilities - are as effective as communications with other residents regarding their medical conditions, treatment and participation in HPV's programs, activities, services and other benefits.

HPV will do the following in a timely manner:

- Identify residents with disabilities who need auxiliary aids and services to communicate.
- Provide, free-of-charge, the appropriate auxiliary aids or services for residents so they can equally enjoy and participate in HPV programs, activities, services and other benefits. Appropriate auxiliary aids do not include hearing aids or prescription glasses or contacts. HPV is not required to take any action that would result in a fundamental alteration in its health program, activities and services or result in undue financial and administrative burdens.
- Ask residents for their preferred aids or services.
- HPV will provide a sign language interpreter, either on-site or via a dedicated, virtual connection, for residents who are deaf or hard-of-hearing if they use sign language.
- HPV will provide a text telephone (TTY) to accept and make calls through this relay service.
- Provide other auxiliary aids and services including note-taking, telephone handset amplifiers, written copies of oral communication, assistive listening devices and systems, telephones compatible with hearing aids, closed caption decoders, open and closed captioning, videotext displays, email, and text messages.
- Assist residents who are blind or have low vision in filling out forms, orally communicating information in important, written documents and converting written documents into large print, Braille and/or audio recordings.

A resident may prefer to have an adult accompany him/her to help with communication.

If a resident specifically requests to use a companion, HPV will do the following:

- Confirm that the resident does not want any aids or services provided by HPV and agrees to a companion interpreter/communicator
- Confirm with the companion that he/she agrees to act as the resident's interpreter/communicator
- Assess the companion to assure that he/she can provide competent, safe and confidential interpretation and that there is no conflict of interest
- Explain that minor children cannot serve as a resident's interpreter

Staff will document in the resident's medical record the auxiliary aids and services, including interpreter services, companion and method of telephone communication used to effectively communicate.

HPV employees will be trained on the requirements for effective communication for residents with disabilities.

Grievance Procedures

Any person who believes Hatton Prairie Village (HPV) subjected a resident to discrimination on the basis of race, color, national origin sex, age or disability may file a grievance as follows:

- Submit the grievance to Cynthia Tredwell, Section 1557 Coordinator, within sixty (60) days of the date the person filing the grievance becomes aware of the alleged discriminatory action.
- Grievance should be in writing, containing the name and contact information of the person filing the grievance, the alleged discriminatory action, when the alleged discriminatory action occurred, date grievance was filed and any other pertinent information.
- Section 1557 Coordinator will timely and thoroughly investigate the allegations, giving all interested parties the opportunity to submit information/evidence relevant to the allegation.
- Section 1557 Coordinator will inform an individual that they have a right to reasonable modifications in the grievance procedure, if needed, and that HPV will make appropriate arrangements, free-of-charge, to ensure residents with disabilities and limited English proficiency are provided reasonable modifications, auxiliary aids and services or language assistance services to participate in this grievance process.
- Section 1557 Coordinator will keep confidential the identity of the person who filed the grievance except as required by law or to carry out an investigation of the grievance.
- Section 1557 Coordinator will issue to the person who filed the grievance a written decision on the grievance no later than thirty (30) days after the filing.
- HPV will maintain the files and records relating to grievances for at least three (3) years from the date HPV resolves the grievance.
- The person filing the grievance may appeal the written decision by writing to HPV's Board of Directors within fifteen (15) days of receiving the decision. The Board will issue a written decision in response to the appeal no later than thirty (30) days after its filing.

Filing a grievance does not prevent a person from pursuing other legal or administrative remedies including filing a complaint of discrimination in court or with the U.S. Department of Health and Human Services, Office for Civil Rights. A person can file a complaint electronically through the Office of Civil Rights Complaint Portal, which is available at: <https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf> or by mail or telephone at:

U.S. Department of Health and Human Services
200 Independence Ave., SW
Room 509F, HHH Building
Washington, D.C. 20201

800-368-1019
TDD: 800-537-7697