



**SUBJECT:** Nondiscrimination in Services  
Policy Statement

**TO:** Parents/Guardians

**FROM:** Nancy Thompson, R.N. (Director) *Nancy Thompson*  
275 2nd Street Pike Southampton, PA 18966

Admissions, the provisions of services, and referrals of clients shall be made without regard to race (to include hair type, hair texture, or hair style), color, religious creed (to include all aspects of religious observances and practice, as well as belief), disability, ancestry, national origin (including Limited English Proficiency), age (40 and over), or sex (to include pregnancy status, childbirth status, breastfeeding status, sex assigned at birth).

Integration into program services and activities shall be made accessible to eligible persons with disabilities or Limited English Proficiency through the most practical and economically feasible methods available, including physical accommodation(s), without undue burden to the provider. These methods include, but are not limited to: equipment redesign, state or parent funded personal aides, and the use of alternative service delivery locations. Structural modifications shall be considered only as a last resort among available methods.

Any individual/client/patient/student (and/or their guardian) who believes they have been discriminated against, may file a complaint of discrimination with:

**Commonwealth of Pennsylvania**  
**Department of Human Services**  
**Bureau of Equal Opportunity**  
Room 225, Health & Welfare Building  
P.O. Box 2675 Harrisburg, PA 17120  
Inquiries: (717) 787-1127  
Email: [RA-PWBEOAO@pa.gov](mailto:RA-PWBEOAO@pa.gov)  
**(Within 90 days from the date of incident)**

**Pennsylvania Human Relations Commission**  
333 Market Street, 8<sup>th</sup> Floor  
Harrisburg, PA 17101  
<https://www.phrc.pa.gov/Complaints/Pages/How-to-File-a-Complaint.aspx>  
Inquiries: (717) 787-4410  
TTY users only: (717) 787-7279  
**(Within 180 days from the date of incident)**

**Office for Civil Rights**  
U.S. Department of Health and Human Services  
Centralized Case Management Operations  
200 Independence Avenue, S.W.  
Room 509 HHH Bldg  
Washington, D.C. 20201  
Customer Response Center: (800) 368-1019  
TDD: (800) 537-7697  
<https://www.hhs.gov/ocr/complaints>  
Email: [ocrcomplaint@hhs.gov](mailto:ocrcomplaint@hhs.gov)  
**(Within 180 days from the date of incident)**

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature