

January 28, 2025

SUBJECT: Non-Discrimination in Services Policy Statement

TO: Parents

FROM: Robyn Jardine, Executive Director

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).

Program services shall be made accessible to eligible persons with disabilities through the most practical and economically feasible methods available. These methods include, but are not limited to, equipment redesign, the provision of 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:

KidsCare

5175 Cold Spring Creamery Rd
Box 16
Doylestown, PA 18902
Inquiries: (215) 230-3445
Fax: (215) 230-3344
Email: kidscare77@gmail.com

**Commonwealth of Pennsylvania
Department of Human Services
Bureau of Equal Opportunity**

Room 225, Health & Welfare Building
PO Box 2675 Harrisburg, PA 17120
Inquiries: (717) 787-1127
Email: RA-PWBEOAO@pa.gov

(Within 90 days from the date of incident)

Pennsylvania Human Relations Commission

333 Market Street 8th Floor
Harrisburg, PA 17101
<https://www.pa.gov/agencies/phrc/programs-and-services/file-a-complaint.html>
Inquiries: (717) 787-4410

TTY users only: (717) 787-7279

(Within 90 days from the date of incident)

Office for Civil Rights

US Department of Health and Human Services
Centralized Case Management Operations
200 Independence Avenue, S.W.
Room 509 HHH Building
Washington, D.C. 20201
Customer Response Center (800) 368-1019
TDD: (800) 537-7697

<https://www.hhs.gov/ocr/complaints/index.html>

Email: ocrcomplaint@hhs.gov

(Within 90 days from the date of incident)