DHS CIVIL RIGHTS COMPLIANCE FORM

CERTIFICATE/LICENSING NUMBER:

FOR DHS OFFICE USE ONLY

LEGAL ENTITY NAME: Community YMCA of Eastern Delware County			
RESPONSIBLE OFFICIAL: Claire Martorana		TITLE: Assoc. Sr. Early Learning Director	
ADDRESS: 2104 Garrett Road			
CITY: Lansdowne	COUNTY: Delaware	STATE: PA	ZIP CODE: 19050
PHONE #: (610)713-5254		EMAIL ADDRESS: cmartorana@cyedc.org	
FACILITY: The Y S'cool Kids Club at Lakeview			
ADDRESS: 333 Constitution Avenue			
CITY: Ridley Park	COUNTY: Delaware	STATE: PA	ZIP CODE: 19078
FACILITY ADMINISTRATOR/DIRECTOR: Yasmin Dixon			
PHONE #: (610)638-1270 ext. 2218		EMAIL ADDRESS: ydixon@cyedc.org	

TYPE OF SYSTEM:

- [X] Multi-facility (One owner, many sites)
- [ ] Multi-type (One owner, many services)
- [ ] Single site (One owner, one site)
- [ ] Other - Specify:

PROGRAM:	TYPE OF SERVICE:
Personal Care Home	
Assisted Living	
Child Day Care	XX
Child Welfare Service (Public)	
Child Welfare Service (Private)	
Office of Mental Health & Substance Abuse Services	
Office of Developmental Programs	

A license will not be issued to your facility unless it complies with the following statutes and regulations that prohibit discrimination based on race, color, religious creed, disability, ancestry, national origin, age, sex, or pregnant workers:

a. The Pennsylvania Human Relations Act (43 P.S. §§ 951-962.2), amendments 16 Pa. Code, Chapter 41, Subchapter § 41.201 - 41.207.

b. The Age Discrimination Act of 1975 (42 U.S.C.A. §§ 6101-6017).

c. Title VI of the Civil Rights Act of 1964 (42 U.S.C.A. §§2000d-2000d-4), if applicable.

d. Section 504 of the Rehabilitation Act of 1973 (29 U.S.C.A. § 794), if applicable

e. Americans with Disabilities Act of 1990 (42 U.S. Code § 12102)

f. ADA Amendments Act of 2008 (ADAAA) (42 USCA § 12101 note)

g. Title VII of the Civil Rights Act of 1964 (42 U.S.C. §§ 2000e-2000e-17), if applicable.

h. Pregnant Workers Fairness Act (42 U.S.C. §§ 2000gg), if applicable. Which was signed into law on December 29, 2022.

To satisfy this requirement, complete the following information in its entirety. Type or print clearly. Include a valid email address on your CRC Form. If additional space is required for any of the required answers, attach a separate 8 1/2" x 11" sheet to complete answers. Denote license number (if applicable) on additional sheets. Number your corresponding answer.

BEFORE YOU SUBMIT YOUR APPLICATION:

- [ ] Is the CRC Form completed in its entirety?
- [ ] Have you provided a valid email address?
- [ ] Has the correct legal entity signed the CRC Form?
- [ ] Is the "Non-Discrimination in Employment" policy statement included in this submission? Is it on your letterhead addressed to your staff with director's name/signature? (Question 1)
- [ ] Is the "Non-Discrimination in Services" policy statement included in this submission? Is it on your letterhead addressed to whoever is receiving your services with director's name/signature? (Question 1)
- [ ] Have you included one sample of an advertisement which includes your non-discrimination clause? (Question 7)
- [ ] Did you include the written procedure regarding the filing of complaints by staff? (Question 9)
- [ ] If you have a Board, have you submitted a copy of the policy used to select Board members and one sample of materials used to orient the Board to civil rights compliance requirements?

1) Has the facility developed a "Non-Discrimination in Services" policy statement and a "Non-Discrimination in Employment" policy statement, signed by the responsible official that advises clients/residents/parents/guardians, the public and employees that services and employment are provided in a non-discriminatory manner, without regard to race (to include hair type, hair texture, or hair style), color, age (40 and over), sex (to include pregnancy status, childbirth status, breastfeeding status, sex assigned at birth, gender identity or expression, affectional or sexual orientation, and differences in sex development), ancestry, national origin (including Limited English Proficiency), religious creed (to include all aspects of religious observances and practice, as well as belief), disability, and retaliation.

[✓] Yes (Your application will be returned if statements are not provided.) [ ] No (explain)

Please see attach statements

The **"Non-Discrimination in Services"** policy should be addressed to whoever you serve, and the **"Non-Discrimination in Employment"** policy should be addressed to your staff. The APPENDICES included in this packet contain sample policies that may be used to satisfy this requirement. Place the correct policy statement addressed to the correct individuals on facility letterhead and insert the director's name and signature.

Both policy statements are required to be posted in your facility.

2) Does the facility's "Non-Discrimination in Services" policy and "Non-Discrimination in Employment" policy also include that reasonable physical accommodations and program accessibility to staff or clients with disabilities will be provided (e.g. hearing, speech, vision, mobility impairments)?

[✓] Yes [ ] No (explain)

Please see attached documents

3) Does the facility's "Non-Discrimination in Services" policy and "Non-Discrimination in Employment" policy also include that protected classes and persons with disabilities or with Limited English Proficiency are integrated into programs and activities?

[✓] Yes [ ] No (explain)

Please see attached documents

4) How is the facility accessible to clients, residents, parents, employees, and/or visitors with disabilities? Explain how they are able to access restrooms, drinking fountains if applicable, entry and other parts of the facility.

The facility will be in a public-school building that gives access to clients, residents, employees, and or visitors with disabilities to access restrooms and drinking fountains. There is also handicap accessibility with the use of the electrical lift.

5) How does your facility provide meaningful access to non-English speaking clients, so they are able to access its programs and services? Meaningful access involves oral interpretation and written interpretation for important documents?

Please see attach sample of newsletter for non-English speaking clients.

6) Please list the vendors you use for your oral and written interpretation services?

-Google Translate (Conversation Mode) can translate quick immediate written text and oral speech bilingually.
-Zoom feature native multi-channel audio, oral, and written through Microsoft Teams.

7) Does the facility advertise its services and employment opportunities to the public and include a non-discrimination clause in its brochures, media notices, and/or posters? Please provide one sample of an advertisement which includes a non-discrimination clause. (Website or Social Media links are not permitted)

[✓] Yes (Your application will be returned if a sample is not provided.) [ ] No (explain)

Please see attach sample

8) Does the facility have a written procedure in which it informs individuals of their rights under the Pregnant Worker's Fairness Act (PWFA) and informs that the facility will provide reasonable accommodations to a qualified employee's or applicants known limitation related to, affected by, arising out of pregnancy, childbirth, or related medical conditions, absent undue hardship on the operation of the business of the covered entity.

☑ Yes (Please provide the written procedure) ☐ No (explain)

Attach is a copy of written procedure

9) Does the facility have a procedure by which staff can file complaints alleging discrimination to include harassment, sexual harassment, retaliation and have their complaints investigated and resolved objectively which includes the name/title of the person within the facility/organization assigned to receive and investigate the complaint, the turnaround timeframe once the complaint is received, and the final conclusion or determination? The required non-discrimination polices are not considered a written procedure.

☑ Yes (Your application will be returned if procedure is not provided.) ☐ No (explain)

Attach is a copy of procedure

10) How does the facility inform clients, residents, and parents/guardians that complaints of discrimination may be filed with the U.S. Department of Health and Human Services' Office of Civil Rights (OCR), the BEO/DHS Office of Civil Rights Compliance, and/or the Pennsylvania Human Relations Commission (PHRC)?

☑ Yes (Please specify the method used.) ☐ No (explain)

Attach is a copy of facility information

11) How does the facility inform its staff regarding their rights to file complaints of employment discrimination based on Title VII of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, and the Age Discrimination Act of 1975, and/or the Pennsylvania Human Relations Act of 1955, as amended with the PHRC or Equal Employment Opportunity Commission (EEOC)?

☑ Yes (Please specify method used to inform staff.) ☐ No (explain)

Attach is a copy of facility information

Governing Board - If Applicable

1) Does this facility have a Board?

☑ Yes ☐ No

2) If you answered Yes to Question #1 above, please send copies of policies regarding selection of Board members and one sample of materials used to orient the Board to its civil rights compliance requirements. (Your application will be returned if a copy of your policy and one sample of materials used to orient the Board is not provided.)

The information submitted is, to the best of my knowledge, true and I intend to be bound by it.

CLAIRE MARTORANA — RESPONSIBLE OFFICIAL NAME/TITLE (PRINT)

SIGNATURE

11/6/2026 — DATE

I will retain copies of all forms and documentation submitted to the Department.

YMCA of Eastern Delaware County

SUBJECT: Non-Discrimination in Services Policy Statement
TO: Members/Clients/Parents
FROM: Yasmin Dixon- OST Director – 11/5/2026

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, gender identity or expression, affectionate or sexual orientation, and differences in sex), and retaliation. 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:

Facility Contact Information YMCA of Eastern Delaware County 2110 Garrett Road Lansdowne, PA 19050 info@cyedc.org 610.557.9622	**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 (Within 90 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 (Within 180 days from the date of incident)	**Pennsylvania Human Relations Commission** 333 Market Street, 8th 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)

YMCA of Eastern Delaware County

SUBJECT: Non-Discrimination in Employment Policy Statement
TO: Staff
FROM: Yasmin Dixon-OST Director - 11/5/2026

An open and equitable personnel system will be established and maintained. Personnel policies, procedures, and practices will be designed to prohibit discrimination on the basis of 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, age (40 and over), or sex (to include pregnancy status, childbirth status, breastfeeding status, sex assigned at birth, gender identity or expression, affectional or sexual orientation, and differences in sex), and retaliation.

Employment opportunities shall be provided for applicants with disabilities, and reasonable accommodation(s) shall be made to meet the physical or mental limitations of qualified applicants or employees.

Any employee who believes they have been discriminated against may file a complaint of discrimination with any of the following:

Facility Contact Information YMCA of Eastern Delaware County 2110 Garrett Road Lansdowne, PA 19050 info@cyedc.org 610.557.9622 **U.S. Equal Employment Opportunity Commission** 801 Market Street, Suite 1000 Philadelphia, PA 19107 Inquiries: (800) 669-4000 TTY users only: (800)669-6820 https://www.eeoc.gov/filing-charge-discrimination Email: PDOContact@eeoc.gov **(Within 300 days from the date of incident)**	**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 **(Within 90 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 **(Within 180 days from the date of incident)**	**Pennsylvania Human Relations Commission** 333 Market Street, 8th 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)**