



Department of Health & Social Services

NON-DISCRIMINATION POLICY

The Department of Health and Social Services (DHSS) is committed to the principles of Equal Employment Opportunity, Affirmative Action and equitable service delivery. In accordance with Executive Order 10, DHSS adopts this non-discrimination policy and prohibits any form of unlawful discrimination in actions related to employment and the delivery of services. Specifically, no DHSS employee shall deny service or benefits to any person or engage in any unlawful employment practice because of race, color, national origin, religion, sex: age, disability, sexual orientation or marital status in accordance with applicable State and federal laws.

An employee or applicant for employment has the right under the law to file a complaint when he/she believes the law has been violated. A complaint may be filed with one of the following offices:

Department of Health & Social
Services
Labor Relations, EEO/ AA
Main Administration Building
1901N. DuPont Hwy.
New Castle, DE 19720

Delaware Department of Labor
Labor Law Enforcement
4425 N. Market Street
Wilmington, DE 19802

Charges received in DHSS will be investigated and a written response will be made to the charging party within 90 days of receipt. If filed with the Delaware Department of Labor, the charge must be received within 90 days after the alleged unlawful employment practice or 120 days after discovery thereof, whichever is later (19 Del.C. § 712(d)). Employees or applicants who have made a charge of discrimination or cooperated in an investigation of such charges will be free from retaliation for their good faith participation in this process.

This is an internal policy only. Employees may have rights under federal law, collective bargaining agreements, or the Merit Rules, which supercede this policy.

All employees are required to acknowledge their understanding of the above by signing the following statement. The signed statement will be retained in the employee's personnel file.

As witnessed by my signature below, I certify that I have received the above non-discrimination policy, and I have read it or it has been read to me. I understand the rights of DHSS employees and applicants for employment as outlined in this document, and I will make every effort to insure compliance with applicable State and federal laws.

Employee's Signature

Date