

RESOLUTION AGREEMENT
Fairfield Board of Education
OCR Complaint No. 01-16-1261

The Fairfield Board of Education (the District) has voluntarily entered into this agreement to resolve the allegation in the above-referenced complaint. The District assures that it will take the following actions and will meet its obligation to comply with the requirements of Section 504 of the Rehabilitation Act of 1973 (Section 504) and Title II of the Americans with Disabilities Act of 1990 (Title II).

The District agreed to resolve this complaint prior to the completion of OCR's investigation pursuant to Section 302 of OCR's *Case Processing Manual*. Accordingly, to resolve the issues of this investigation, the District agrees to take the following actions.

Action Item 1

The District will conduct training for all District administrators, teachers, and paraeducators, on Section 504 and Title II, including but not limited to providing a free appropriate public education to students with disabilities, including students with food allergies, as well as the prohibition against retaliation.

Action Item 2

The District will conduct training at the elementary schools for all District administrators, teachers, and paraeducators on the District's allergy policy called "Students with Special Health Care Needs – Life Threatening Allergies and Glycogen Storage Disease Management." Among other topics, the training will include the identification of the District's designated food-free zones.

Reporting Requirement

Within sixty calendar days of the execution of this Resolution Agreement, the District will submit for OCR's review and approval the identity and credentials of the person(s) conducting the trainings required by Action Items 1 and 2, as well as the proposed training materials.

Within sixty calendar days of OCR's approval of the person(s) to conduct the trainings and the training materials, the District will provide documentation to OCR demonstrating that it provided the trainings in accordance with Action Items 1 and 2. This documentation will include at minimum: the dates(s) of the training(s); sign-in sheets; and a list of the individuals who attended the training(s) and their positions in the District.

Action Item 3

The District will provide a copy (hard copy or electronic) of the District’s allergy policy called “Students with Special Health Care Needs – Life Threatening Allergies and Glycogen Storage Disease Management,” to all elementary school employees and other staff not required to attend the training in Action Item 2, above, along with the name and contact information of an individual to contact with any questions concerning the policy and its implementation.

Reporting Requirement

No later than the date the District provides documentation to OCR that it provided the trainings in accordance with Action Items 1 and 2, the District will provide documentation to OCR demonstrating that it has satisfied Action Item 3, including a list, with positions, of all elementary school employees and other staff who were sent the policy, and other documentation sufficient to show the policy and contact information was disseminated.

Action Item 4

The District’s main office and all schools’ main offices will have signs prominently displaying information regarding the District’s food allergy policy and designated food-free zone spaces. Additionally, at the elementary schools, the District will prominently display food-free zone signs at locations that have been designated food-free in the District’s allergy policy.

Reporting Requirement

Within sixty calendar days of the execution of this Resolution Agreement, the District will submit for OCR’s review and approval the proposed signs conveying information about the District’s food allergy policy required by Action Item 3.

Within thirty days of OCR’s approval of the signs, the District will provide OCR documentation sufficient to show that Action Item 3 has been completed.

Action Item 5

By **February 20, 2019** the District agrees to convene a Section 504 team meeting for the Student to determine the meaning of the provision in the plan stating: “Have students and others in the class wash their hands after eating,” (i.e. hand wipes, washing with water and soap, etc.) and ensure plan is updated, if necessary. If the team determines that hand wipes are permissible to meet the needs of the Student, the Section 504 plan will be updated to reflect the District’s responsibility to purchase and provide hand wipes to students and staff.

Reporting Requirement

By **March 17, 2018**, the District will provide documentation to OCR demonstrating that the Section 504 team met in accordance with Action Item 4. This documentation will

include but not be limited to: the date of the meeting; copies of any meeting minutes, notes, or other materials used or created at the team meeting; sign-in sheets, and a list of the individuals who attended the training and their titles.

The District understands that by signing this Resolution Agreement, it agrees to provide data and other information in a timely manner in accordance with the reporting requirements of the Resolution Agreement. Further, the District understands that during the monitoring of this Resolution Agreement, if necessary, OCR may visit the District, interview staff and students, and request such additional reports or data as are necessary for OCR to determine whether the District has fulfilled the terms of this Resolution Agreement. Upon the District's satisfaction of the commitments made under the Resolution Agreement, OCR will close the case.

The District understands and acknowledges that OCR may initiate administrative enforcement or judicial proceedings to enforce the specific terms and obligations of this Resolution Agreement. Before initiating administrative enforcement (34 C.F.R. §§ 100.9, 100.10) or judicial proceedings to enforce this Resolution Agreement, OCR shall give the District written notice of the alleged breach and sixty (60) calendar days to cure the alleged breach.

The Resolution Agreement will become effective immediately upon the signature of the District's representative below.

By: /s/ Toni Jones
Dr. Toni Jones, Superintendent

Date: _____