



**CORRECTIVE ACTION PLAN
PROCESS**

EFFECTIVE DATE 07/01/2013

SOP 3.9

SIGNATURE

A handwritten signature in black ink, appearing to be "R. P.", is written over a horizontal line.

PROPOSED BY

VP Sponsorship Operations

PURPOSE

This CORRECTIVE ACTION PLAN PROCESS provides guidance to all team members and Management Team on how to communicate, evaluate and track corrective action plans regarding any area of the school's governance, operations, financial, or compliance issues relative to any state, federal, or sponsor requirements. This includes issues brought to the attention of CSS by stakeholders such as the Ohio Department of Education, which may include audits; programmatic, grant and data reporting; or other pertinent issues relative to the school's operations.

The CORRECTIVE ACTION PLAN PROCESS relates to any compliance issue requiring a request for a corrective action plan for a school. The CORRECTIVE ACTION PLAN PROCESS is followed by all team members relating to any school regarding the items listed below.

SCOPE

This CORRECTIVE ACTION PLAN PROCESS applies to all staff who participate in oversight or provide technical assistance to CSS partner schools sponsored by St. Aloysius.

PROCEDURE

The CSS CORRECTIVE ACTION PLAN PROCESS is as follows:

1. CSS staff member could identify the potential need for a corrective action plan during an enrollment and financial review, on-site visit, during preparation of site visit reports and/or while conducting annual performance monitoring.
 - a. Conditions that may trigger intervention and corrective action include, but are not limited to:
 - i. Violation of rule and/or law
 - ii. Violation of community school contract
 - iii. Excessive decrease in enrollment



- iv. Financial instability
 - v. Failure to respond to reasonable requests from sponsor
 - vi. Failure to make adequate academic progress or meet the local report card measures
 - b. Documentation noting conditions that may trigger intervention and corrective action may include, but is not limited to, the following:
 - i. Enrollment and financial review documents
 - ii. Communication from the Ohio Department of Education or other stakeholders (i.e. Auditor of State)
 - iii. Site Visit Reports
 - iv. Audit Reports
 - v. Board Meeting Reports
 - vi. Complaints
- 2. CSS staff member reviews data collected during the enrollment and financial reviews, on-site visits and while completing annual performance monitoring. If the CSS staff member notes a potential deficiency, he/she will discuss with department manager to determine if there is a deficiency that should be investigated and documented.
- 3. CSS staff member or department manager may conduct further investigation, including contact school personnel, governing authority members, management company representatives and governing authority legal counsel.
 - a. The investigation may include verbal conversations, email correspondence and document collection.
- 4. After completion of the investigation, department manager discusses potential deficiency with President.
- 5. President makes the ultimate determination if a request for a corrective action plan should be sent to the school.
- 6. Once it is determined that a corrective action plan will be sent, department manager provides general information related to the corrective action plan requirements to the Operations Coordinator.
- 7. Operations Coordinator drafts the corrective action plan and sends the draft to department manager for review.
- 8. After review by department manager, Operations Coordinator finalizes the corrective action plan request draft.
 - a. Operations Coordinator will check the accuracy of the information provided and follow-up with the department manager if necessary.
- 9. Operations Coordinator will send the finalized draft to Education Programs Assistant for a final review including addition of contact information and relevant dates.
 - a. Contact information may include board member contact, legal counsel contact, management company contact and school leader contact.



10. Education Programs Assistant will send the finalized draft to General Counsel for review and final approval from the President.
11. Upon President approval of the document, the following occurs:
 - a. General Counsel finalizes the corrective action plan letter ('letter') with any necessary revisions and sends the letter to Education Programs Assistant.
 - b. Education Programs Assistant sends the letter electronically to all governing authority members with cc to governing authority counsel, school leader, management company representative (if applicable), CSS President, CSS Management Team, and Office Manager for distribution prior to next governing authority meeting.
 - c. The School shall be provided five (5) business days after the upcoming governing authority meeting to respond to the CAP letter.
 - i. If the deficiency noted in the CAP request is time sensitive and needs addressed prior to the next governing authority meeting, General Counsel shall set an appropriate date for response.
 - d. A Legal Department designee updates the corrective action plan tracking spreadsheet with date sent, reason and due date for response.
 - e. The Legal Department monitors the corrective action due date.
 - i. If the corrective action plan is not received by the due date:
 1. General Counsel or designee shall decide if the school shall be given more time to respond.
 2. If the school fails to respond, the Legal Department and President discuss next course of action, which may include probation, suspension or termination.
 3. If it is determined to be probation, suspension or termination, the probation, suspension or termination process shall begin. (See Probation and Suspension Process; Termination Process)
 4. A copy of the termination, suspension or probation letters will be retained in the corrective action plan electronic file.
12. Upon receipt of CAP from the governing authority, the following occurs:
 - a. Education Programs Assistant will forward to Operations Coordinator for an initial sufficiency review.
 - i. Operations Coordinator will ensure all deficiencies have been addressed.
 1. If all deficiencies have not been addressed, Operations Coordinator will send a request for additional information within five (5) business days to the governing authority. Governing Authority will be given five (5) business days to provide additional information.
 2. When all deficiencies have been addressed, Operations Coordinator and department manager will review the corrective action plan within five (5) business days.



- b. If the governing authority has adequately addressed all deficiencies:
 1. Education Programs Assistant sends notice to governing authority noting receipt/approval and monitoring protocol as necessary within ten (10) business days of receipt of final plan.
- c. If the governing authority has not adequately addressed all deficiencies after two (2) requests:
 - i. Operations Coordinator shall consult with General Counsel to discuss next steps.
 1. The Legal Department can request additional information to be provided within five (5) business days.
 2. Upon receipt of additional information, repeat steps listed in #11 above.
 3. If additional information does not satisfy the original request, the General Counsel discusses with President to determine the consequences for not resolving the deficiency. The consequences may include, probation, suspension or termination.
 4. Next steps will be communicated with the school within ten (10) business days.
- d. Departments are responsible for adding CAPs to monthly department meeting agendas for review.

DOCUMENTATION / VERIFICATION

All CORRECTIVE ACTION PLAN PROCESS documents are maintained on the shared drive and documented on the CAP tracking sheet as follows:

Location of documentation:

S:/CORRECTIVE ACTION PLANS

Naming convention: SY/School/Issue/Date

Ex: FY/SY/ ABC Community School

Supporting documentation included with this process:

1. CAP request form letter
2. CAP approval response form letter
3. CAP denial response form letter
4. Example CAP Tracking sheet



DOCUMENT HISTORY

Orig. Date 2011
Rev. May 2012
Rev. Nov. 2012
Rev. December 2014
Rev. October 2015
Rev. March 2017
Rev. March 2018
Rev. October 2018

REVIEW AND APPROVAL

Reviewer of the CORRECTIVE ACTION PLAN PROCESS is as follows:

Reviewed By: Management Team Date: 11/19/18

Approved By: President David L. Cash, Jr. Date: 11/19/18

The effective date is as of the date signed above. Processes are consistently reviewed and revised as necessary throughout the term. The CORRECTIVE ACTION PLAN PROCESS may be implemented as currently written and will be formally evaluated and revised as necessary going forward.