2024 School Safety Survey Guidance

**This document is designed to assist in compiling the necessary data for the annual School Safety Survey. Although this worksheet/guidance document is not mandatory, it will facilitate the collection of your school’s data between now and the survey administration period (May–July). Completion of this document will allow the user to complete the online survey quickly and accurately.**

**In the event the individual(s) completing this document will no longer be employed at the school in May–July, please ensure that this document, and the collected data, are shared with the appropriate school personnel to accurately complete the survey and submit it on time.**

**This document mimics the online survey and contains all questions you may encounter; however, the addition, removal, or adjustment of items may occur before May. Some formatting has been adjusted to enable the worksheet/guidance document layout.**

**DIRECTIONS: In some blocks, a written answer is needed, sometimes as simple as a number; in others, you can circle or highlight the answer. Blue bars will indicate branching based on your answers. *If a question does not apply to your school, you will not see it on the online survey.***

* ***Circles denote only one selection is permitted.***
* ***Squares denote multiple selections are permitted.***

**\*\*\* Please note that the live survey link will be distributed by school division personnel on or after the last day of school for students.**

1 Introduction

Q1.1 This survey is conducted annually by the Virginia Department of Criminal Justice Services (DCJS) Virginia Center for School and Campus Safety (VCSCS). Submission of the online survey partially fulfills the Virginia School Safety Audit requirement.*(*[*Code of Virginia* § 22.1-279.8](https://law.lis.virginia.gov/vacode/title22.1/chapter14/section22.1-279.8/)*).*

While answering the following survey questions, please base your responses on the conditions in your school during the 2023-2024 school year, unless otherwise instructed. You are required to provide a response to each survey question in order to complete the survey. Throughout the survey, some questions reference the *Code of Virginia* requirements. You will be able to click on the citation to review the *Code* language before responding to the related survey question.

Should you have any questions or experience technical problems with the survey, contact the VCSCS team: Nikki Wilcox at 804-786-3923 or nikki.wilcox@dcjs.virginia.gov, Dannie Anderson at 804-786-5763 or dannie.anderson@dcjs.virginia.gov, and James Christian at 804-357-0967 or james.christian@dcjs.virginia.gov.

Questions contained in this survey may elicit responses that are exempt from public release according to *Code of Virginia* [§2.2-3705.2](https://law.lis.virginia.gov/vacode/title2.2/chapter37/section2.2-3705.2/) and [§ 22.1-279.8](https://law.lis.virginia.gov/vacode/title22.1/chapter14/section22.1-279.8/). Each public body is responsible for exercising its discretion in determining whether such exemptions will be invoked. The VCSCS will report aggregate survey data for all schools and divisions and will not share individual school responses unless otherwise required by state law.

2 Division and School Name

Q2.1 **SCHOOL IDENTIFICATION**

Q2.2 The online survey should ONLY be completed AFTER your students' last day of school.

Q2.3 Division, school, and region

A drop-down menu will be provided.

3 Contact Information

Q3.1 If we have any questions about your survey responses, we would like to be able to contact you. Please provide us with your contact information:

First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q3.2 What is your primary role in the school?

* Principal/Director
* Associate/Assistant Principal
* Safety Coordinator/Chair/Specialist
* Site/Program Coordinator
* Dean of Students
* Administrative Intern/Aide
* School Counselor
* Senior Teacher
* School Security Officer (SSO)
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Display this question if the primary role in the school Is NOT Principal/Director.

Q3.3 Please provide contact information for your current/acting principal.

First \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q3.4 Is your school/program 100% virtual?

* Yes
* No

4 Personnel

Display this section if the school is NOT virtual.

Q4.1 **SECURITY PERSONNEL AND PARTNERSHIPS**

Q4.2 *School Resource Officers and Certified School Security Officers*

**School Resource Officer (SRO)** is defined in [*Code of Virginia § 9.1-101*](https://law.lis.virginia.gov/vacode/title9.1/chapter1/section9.1-101/) *as “…a certified law enforcement officer hired by the local law enforcement agency to provide law enforcement and security services to Virginia public elementary and secondary schools.”*

**School Security Officer (SSO)** is defined in [*Code of Virginia § 9.1-101*](https://law.lis.virginia.gov/vacode/title9.1/chapter1/section9.1-101/) as “... an individual who is employed by the local school board or a private or religious school for the singular purpose of maintaining order and discipline, preventing crime, investigating violations of the policies of the school board or the private or religious school, and detaining students violating the law or the policies of the school board or the private or religious school on school property, school buses, or at school-sponsored events and who is responsible solely for ensuring the safety, security, and welfare of all students, faculty, staff, and visitors in the assigned school."

Q4.3 Which of the following types of safety personnel did you have working in your building during the 2023-2024 school year? (Select all that apply)

* School Resource Officers (SROs) - sworn law enforcement.
* Certified School Security Officers (SSOs) - division employees.
* None

5 SRO

Display this section if SRO were working in the building in 2023-2024.

Q5.1 School Resource Officer (SRO)

Q5.2 How familiar are you (the principal or designee) with the operational expectations set out in the Memorandum of Understanding (MOU) between your school division and the local law enforcement agency for the role of SROs in your school?

Q5.3 How useful is the MOU to your daily collaboration with school resource officers?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Not at all useful | Slightly useful | Somewhat useful | Moderately useful | Extremely useful |

Q5.4 Please rate each of the following areas related to your school/law enforcement partnership:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Very Good | Good | Acceptable | Poor | Very Poor |
| Communication from SRO(s) to administrators  |  |  |  |  |  |
| Communication from administrators to SRO(s)  |  |  |  |  |  |
| Role distinction (mutual understanding of appropriate role and duties of SRO(s))  |  |  |  |  |  |
| Distinction between school rules and laws (mutual understanding about which infractions the SRO should and should not handle)  |  |  |  |  |  |

Q5.5 SROs are required to complete basic training. What ongoing professional development topics do you think your SRO(s) would most benefit from?*(Select all that apply)*

* Emergency/crisis response topics
* Law enforcement topics
* Law-related education topics
* Role model/mentoring topics
* Other (describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q5.6 Have you, or another administrator from your building, attended a DCJS SRO and School Administrator Basic Course?

* Yes, I have attended.
* Yes, another administrator has attended.
* Someone from this building has attended.
* No, no one from this building has attended an SRO and School Administrator Basic course.

Display this question if YOU or NO ONE has attended.

Q5.7 Would you be interested in someone at DCJS reaching out to you regarding this course?

* Yes
* No

Q5.8 What are the benefits of having a school resource officer (SRO) in your building full or part-time? *(Select all that apply)*

|  |  |  |
| --- | --- | --- |
| Access to community information that may impact the school day.  | Education of students.  | Traffic control.  |
| Added sense of security.  | Having an officer specially trained to work with school-aged students.  | Trained first responder during a crisis.  |
| Building positive relationships with law enforcement officer(s).  | Improved collaboration with law enforcement, emergency responders, parents, and the community.  | Visibility/presence as a crime deterrent.  |
| Conflict de-escalation and mediation.  | Police Athletic League contact.  | Other (describe)  |
| Dedicated person to understand school-related laws and regulations.  |  |  |

6 SSO

Display this section if SSO were working in the building in 2023-2024.

Q6.1 Certified School Security Officer (SSO)

Q6.2 Who assigned the SSO to your building?

* Building level administrator (aka: Principal)
* Division Emergency Manager
* Division Security Director
* Other division-level staff
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q6.3 SSOs are required to complete basic training. What ongoing professional development topics do you think your SSO(s) would benefit the most from? *(Select all that apply)*

* De-escalation/conflict resolution
* Disaster, crisis, and emergency response
* Mental health/ suicide awareness
* Online/internet safety
* Role model/mentoring topics
* School and personal liability issues
* Security awareness in the school environment
* Students' mental health needs
* Substance use disorders
* Violence prevention training
* Working with students with disabilities
* Other (describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q6.4 What are the daily duties of your school security officer(s)? *(Select all that apply)*

|  |  |  |
| --- | --- | --- |
| Assist with discipline interviews.  | Crisis plan management/planning and conducting drills.  | Oversee arrival and dismissal.  |
| Assist with enforcement of student code of conduct/safety policies.  | De-escalation and conflict resolution.  | Positive behavior supports or recognition.  |
| Assist with lunch duty.  | Patrolling school grounds.  | Security at after-school events.  |
| Assist with security screenings.  | Escort of students for discipline reasons.  | Student searches.  |
| Bus lane coverage/traffic/parking assistance.  | Mentorship and positive relationship building.  | Visitor monitoring and management.  |
| Camera system monitoring.  | Monitoring student areas.  | Other (describe)  |

7 Emergency Planning

Display this section if the school is NOT virtual.

Q7.1 EMERGENCY PLANNING, DRILLS, AND RESPONSE

Q7.2 What topics related to crisis planning and/or crisis management have you received training on, and which topics would you be interested in receiving training on? (Select all that apply)

|  |  |  |
| --- | --- | --- |
|  | Have previously had training on | Would like training on |
| Active threat |  |  |
| Acts of terrorism |  |  |
| Bomb threat |  |  |
| Building/facility recovery procedures |  |  |
| Bus & vehicle accidents |  |  |
| Chemical spill/gas leak (hazmat) |  |  |
| Crisis Management Plan Development |  |  |
| Death of a student or staff member |  |  |
| Demonstration/protest/walkout |  |  |
| Drill planning, implementation, and debriefing |  |  |
| Drug-related overdoses |  |  |
| Evacuation |  |  |
| Fire |  |  |
| Individual emergency/safety plans for individuals with disabilities |  |  |
| Lockdown |  |  |
| Loss/abduction of a student |  |  |
| Medical emergencies |  |  |
| Mental health recovery procedures |  |  |
| Off-site reunification |  |  |
| On-site reunification |  |  |
| Pandemic |  |  |
| Reverse evacuation |  |  |
| Shelter |  |  |
| Social media emergency response |  |  |
| Suicide |  |  |
| Utility system failure |  |  |
| Weather-related incidents |  |  |
| Other (describe) |  |  |
| None |  |  |

*School Crisis/Emergency Management/Medical Response Plan*

[*Virginia Code* § 22.1-279.8](https://law.lis.virginia.gov/vacode/title22.1/chapter14/section22.1-279.8/)states that *"each school board shall ensure that every school that it supervises shall develop a written school crisis, emergency management, and medical response plan."*

Q7.3 Does your school’s crisis management plan contain written procedures for the following situations? *(Select all that apply)*

* Building/facility recovery procedures
* Death of a student or staff member
* Drug-related overdoses
* Epidemic/pandemic
* Loss/kidnapping of a student
* Mental health recovery procedures
* Reverse evacuation
* Social media emergency response
* Suicide

Q7.4 Did you **activate**any portion of your school’s crisis management plan during the 2023-2024 school year due to an **actual** critical event or emergency?

* Yes
* No

Display this question if you DID activate any portion of your school’s crisis management plan.

Q7.5 Please select all events that occurred causing the activation of your school’s crisis management plan during the 2023-2024 school year: *(select all that apply)*

Q7.6 Health-related incidents and emergencies:

* Anaphylaxis (severe allergic reaction)
* Death or serious injury of staff or student
* Drug overdose (identify substance) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Exposure to hazardous materials on or near school property
* Epidemic/pandemic
* Medical emergency on school property
* Other health-related incident on or near school property

Q7.7 Man-Made incidents and emergencies:

* Active threat
* Bomb threat
* Demonstration/protest on or near school property
* Intruder/trespasser/unauthorized person(s) on school property
* Loss, disappearance, or kidnapping of a student on school property
* Weapon on school property
* Other man-made incident on or near school property

Q7.8 Weather or building/power-related incidents and emergencies:

* Earthquake
* Flood
* Roof or building collapse
* Smoke or fire/explosion
* Thunderstorm/lightning
* Tornado/hurricane
* Other building-related damage or power outage-related emergency(ies)
* Other natural disasters or severe weather

Q7.9 Other:

* Bus/vehicle crash
* Incident off campus that impacted your school
* Unfounded incident/faulty or false alarm
* Other safety-related incidents that affected the school and are not listed above

Q7.10 Did your school receive any safety-related communications determined to be a hoax, such as a bomb threat, swatting call, or other concerning information in 2023-2024?

* Yes
* No

Display this question if the school DID receive any hoaxes.

Q7.11 What type(s) of hoax did your school receive? *(Enter whole numbers only, if none enter 0)*

|  |  |
| --- | --- |
| Bomb |  |
| General act of violence  |  |
| Large scale fight |  |
| Shooting |  |
| Other (Describe) |  |
| Total  |  |

Display this question if the school DID receive any hoaxes.

Q7.12 How were these reports communicated? *(Enter whole numbers only, if none enter 0)*

|  |  |
| --- | --- |
| Email |  |
| Graffiti (written on school property) |  |
| In-person report |  |
| Phone |  |
| Social media |  |
| Third-party (i.e., community report) |  |
| Other (describe)  |  |
| Total |  |

Display this question if the school DID receive any hoaxes.

Q7.13 What was the outcome of the event(s)? *(Enter whole numbers only, if none enter 0)*

|  |  |
| --- | --- |
| Call to parents |  |
| Evacuation |  |
| First responder response |  |
| Lockdown |  |
| Reverse evacuation |  |
| Shelter |  |
| Other (describe) |  |
| Total  |  |

Q7.14 Does your school have Naloxone (Narcan) available for incidents of opioid use?

* Yes
* No

Display this question if the school DOES have Naloxone (Narcan).

Q7.15 How many individuals at your school are trained to administer Naloxone (Narcan) administration?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q7.16 Review the following list of security strategies and select those that were in place at your school during the 2023-2024 school year. (*Select all that apply*)

|  |  |
| --- | --- |
| All classrooms had designated safe spaces/hard corners and students/staff were made aware of how they were to be used.  | Staff received training on how to initiate a lockdown.  |
| All exterior entrances to the school building or campus were locked during school hours.  | Staff were required to take “go kits” with them wherever they took students.  |
| Classroom doors were kept locked throughout the school day.  | Staff were required to wear an ID badge while on school grounds.  |
| Classroom windows, including door windows, could be covered to eliminate visibility into the classroom.  | Staff were trained on how to barricade rooms that cannot be locked from inside.  |
| Classrooms could be locked from **inside** the classroom.  | Students were required to wear an ID badge while on school grounds.  |
| Classrooms could be locked from **outside** the classroom.  | Visitors were required to sign **in.**  |
| Door lock safety magnets were utilized.  | Visitors were required to sign **out.**  |
| School had a checklist available to assist in obtaining pertinent information during a threatening call/communication (e.g., bomb threat).  | Visitors were required to wear some form of an ID badge while on school grounds.  |
| School had crisis kits prepared, including medical and emergency plan-specific items.  | Other (describe).  |
| Staff and students were trained in “run, hide, fight,” “avoid, deny, defend,” or some other recognized response program.  | None of the above.  |

Q7.17 Does your school utilize any of the following security technologies? If so, please provide the age of the technology system.

|  |  |
| --- | --- |
|  | Does your school utilize this technology? |
| Yes | No |
| Anonymous reporting app |  |  |
| Bus cameras |  |  |
| Bus tracking systems for parent |  |  |
| Electronic app connecting to first responders |  |  |
| Electronic card access reader system |   |   |
| Electronic hall passes |  |  |
| Gunshot detection system |  |  |
| Hand-held two-way radios |   |   |
| Hurricane or ballistic security window film |   |   |
| Mass notification system |   |   |
| Panic buttons |  |  |
| Security scanning equipment (metal/weapons detection) |   |   |
| Surveillance cameras |   |   |
| Vape detection system |  |  |
| Visitor electronic ID checks |  |  |

8 Drills

Display this section if the school is NOT virtual.

Q8.1 **Drills**

Q8.2 What is your primary method of notifying staff and students of a lockdown or other emergency notification?

* PA System
* Two-way radio
* Electronic alert to cell phones or computers
* Other (describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q8.3 When drills were implemented, were they clearly identified as a **drill**? *(i.e., “This is a drill. We are now conducting a lockdown drill.”)*

* Yes
* No

Q8.4 Did your school provide accommodations for students/staff with disabilities during all drills (lockdown, evacuation, etc.)?

* Yes
* No

Display this question if your school DID provide accommodations for students/staff with disabilities.

Q8.5 What types of accommodations were made? *(Select all that apply)*

* Additional drills/trainings/lessons
* Dedicated staff/personal assistance provided by an assigned individual
* One-on-one training/preparation for students with disabilities/504 accommodations
* Prior knowledge of drill to allow for preparation
* Sensory supports (headphones, fidgets, etc.)
* Signs or cue cards to assist with communication
* Social stories/social learning tools
* Specialized equipment (stair lifts, etc.)
* Specialized location or route
* Other (describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9 Training

Q9.1 Does your school participate in the “Handle with Care First Responders-School Trauma Informed Communication System?”

* Yes
* No, I am not aware of this program.
* No, the division does but our school decided not to participate.
* No, not at this time.

Display this question if you are not aware of this program.

Q9.2 Would you like a member of the DCJS team to contact you with information about the Handle with Care First Responders-School Trauma Informed Communication System?

* Yes
* No

Q9.3 Do you feel your school is able to provide sufficient mental health support for students and staff?

* Yes
* No

Display this question if you do NOT feel your school is able to provide sufficient mental health support.

Q9.4 Please select the issues that limit your school’s ability to provide sufficient mental health support to students and staff. *(Select all that apply)*

* Competing priorities
* Lack of accurate knowledge around mental health issues
* Lack of community support
* Lack of personnel
* Limited funding
* Written or unwritten policies
* Other (describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q9.5 Have any of your staff members been trained in Youth Mental Health First Aid?

* Yes (how many) \_\_\_\_\_\_\_\_\_
* No

Display this question if you HAVE any staff members trained in Youth Mental Health First Aid.

Q9.6 Are any of your staff members Youth Mental Health First Aid trainers?

* Yes (how many) \_\_\_\_\_\_\_\_\_
* No

Q9.7 Did your school take any actions, measures, or implement any programs to combat and prevent incidents of antisemitism, anti-religious bigotry, or ethnic violence?

* Yes
* No

Display this question if your school DID take any actions, measures, or implement any programs.

Q9.8 Please describe the actions, measures, or programs implemented.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q9.9 Please select the most needed types of school safety training by your school’s administration/faculty/staff. *(Select all that apply)*

|  |  |
| --- | --- |
| Cyber safety/social media, (Facebook, Snapchat, TikTok, Twitter/X, YouTube, etc.)  | Substance use and vaping  |
| Bullying prevention and intervention  | Suicide prevention, intervention, and postvention  |
| De-escalation and mediation  | Threat assessment team training  |
| Emergency management and crisis response  | Trauma-informed practices  |
| Human trafficking  | Understanding poverty’s effect on learning  |
| Mental health awareness and recognition  | Violence prevention training (including fighting, armed intruder, active shooter, and other school violence)  |
| Peer relations (dating violence, conflict mediation, sexual harassment, etc.)  | Other (describe)  |
| Role of safety and security personnel (SROs and/or SSOs)  | None of the above  |
| Social/emotional interventions and supports  |  |

10 Threat Reporting

Q10.1 THREAT REPORTING AND ASSESSMENT

**The questions in this section should be answered in consultation with a knowledgeable member of your threat assessment team.**

[*Code of Virginia § 22.1-79.4*](https://law.lis.virginia.gov/vacode/title22.1/chapter7/section22.1-79.4/)

Display this question if you do NOT have an SRO working in your building.

Q10.2 In an earlier question you reported you did not have an SRO assigned to your school (or your school is 100% virtual). How did your threat assessment team satisfy the required law enforcement expertise on your threat assessment team?

* SRO from a neighboring school
* Law enforcement from some other source (describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q10.3 In 2023-2024 did your school utilize the [Behavioral Threat Assessment Resource Toolkit for K-12 Virginia Schools](https://www.dcjs.virginia.gov/behavioral-threat-assessment-resource-toolkit-k-12-virginia-schools) to inform **students and/or staff** of how to recognize and report threatening and aberrant or concerning behavior?

* Yes
* No

Display this question if your school DID utilize the Behavioral Threat Assessment Resource Toolkit for K-12 Virginia Schools.

Q10.4 How did your school utilize the Behavioral Threat Assessment Resource Toolkit for K-12 Virginia Schools? *(Select all that apply)*

* Shared resources with instructional staff (all licensed staff, including teachers, school counselors, etc.)
* Shared resources with support staff (custodians, cafeteria workers, bus drivers, secretaries, etc.)
* Utilized school-level videos for students to make them aware of recognizing and reporting concerning, threatening, or aberrant behavior (elementary, middle, and high schools.)
* Utilized the staff video to provide awareness of the threat assessment process for instructional and support staff.
* Utilized the parent video to provide awareness of the threat assessment process for parents and guardians.

Q10.5 In 2023-2024 did your school utilize the [Behavioral Threat Assessment Resource Toolkit for K-12 Virginia Parents](https://www.dcjs.virginia.gov/behavioral-threat-assessment-resource-toolkit-k-12-virginia-parents)to inform **parents** of how to recognize and report threatening and aberrant or concerning behavior?

* Yes
* No

Display this question if you DID utilize the Behavioral Threat Assessment Resource Toolkit for K-12 Virginia Parents.

Q10.6 How did your school utilize the Behavioral Threat Assessment Resource Toolkit for K-12 Virginia Parents? *(Select all that apply)*

* Posted the toolkit on the school website.
* Sent an email to all parents/guardians with the toolkit link.
* Provided a link to the toolkit in the student handbook.
* Held an in-person event and shared the toolkit (Back-to-School Night, PTA/PTO meeting, Principal’s Coffee, stand-alone threat assessment event, etc.)

Q10.7 Is your threat assessment team, along with your school counselor or school psychologist as part of the team, involved with the assessment and action plans in threats of suicide/self-harm?

* Yes
* No

Display this question if your threat assessment team is NOT part of threats of suicide/self-harm.

Q10.8 Since your threat assessment team is not typically involved with threats of suicide/self-harm, who handles these threats? *(Select all that apply)*

* Administrators
* Division representative (i.e., Students Support Specialist, etc.)
* Other counseling services (i.e., life counselor, student support counselor, etc.)
* Outside entity (i.e., community service board, law enforcement, etc.)
* School counselor
* School nurse
* School psychologist/social worker
* SRO
* Other (describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q10.9 To whom has your school provided suicide awareness training? *(Select all that apply)*

* Staff
* Students
* Parents/guardians
* None of the above

Q10.10 Does your school utilize a standard suicide prevention screening tool?

* Yes
* No

Q10.11 Where were the primary threat assessment records (such as *Threat Assessment and Response Reports*) stored during 2023-2024? *(Select all that apply)*

* At the division office (central office)
* File room/vault separate from student cumulative record
* Health or nurse files
* Secure digital database
* With counseling records
* With law enforcement unit records (as allowed by Family Education Rights and Privacy Act)
* With school administrator’s file/threat assessment team
* Other (describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Not applicable (no cases in 2023–2024)

Q10.12 Select the training topics that DCJS could provide, to help improve your threat assessment (TA) process. *(Select all that apply)*

* Case management and record keeping
* Case studies, scenario training (social media, harm to self, harm to others)
* Conducting a threat assessment involving threats of self-harm/suicide
* Conducting threat assessments for unique populations (i.e., students with disabilities, elementary-age students, ESL students, etc.)
* Digital threat assessment
* Information sharing
* Level of threat training, when to conduct a TA (how to respond to various threat levels, when a low-level threat requires a TA)
* Recognition of threatening or aberrant behavior
* Refresher training
* Threat assessment for non-students (i.e., adults, former students, etc.)
* Other (describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None

Q10.13 How does your school identify levels of threat?

* Priority 1-5
* High - Low
* Substantive - Transient
* Other (describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

11 Threat Assessment Numbers

Q11.1 For the next series of questions, we want to know about the assessments conducted by your school's threat assessment team. Report the number of cases regardless of their risk classification.

Q11.2 Approximately, how many threat assessments were conducted in 2023-2024 for the following tasks? *Please answer with a whole number for each type listed. If there were none, enter 0.*

|  |  |
| --- | --- |
| Threat assessments conducted **PRIOR** to any act of violence occurring to prevent a future act of violence. *\*\*\*Numbers entered here will transfer forward to other questions as numbers of threat assessments\*\*\*.* |  |
| Threat assessments conducted as a **DEBRIEF** when an event occurred without precipitating information (no opportunity to conduct threat assessment before the event, ex. a fight breaks out in the cafeteria).:  |  |
| Total (sum of PRIOR and DEBRIEF): |  |

Q11.3 Of ALL the threat assessment(s) conducted by your school in 2023-2024, how were the reports made?

|  |  |
| --- | --- |
| Reported by parent or guardian: |  |
| Reported by staff member: |  |
| Reported by student: |  |
| Found through social media: |  |
| Reported anonymously: |  |
| Total (should equal the sum above in the grey box above): |  |

Display this question if there were ANY assessments conducted PRIOR.

Q11.4 For the number of assessments conducted **PRIOR** to an act of violence, please enter the number of assessments conducted based on the individual (subject) that exhibited the aberrant/concerning behavior or made the threat (if none, enter 0)

|  |  |  |  |
| --- | --- | --- | --- |
|  | Intended target was **OTHERS ONLY** | Intended target was **SELF ONLY** | Intended target was **BOTH SELF & OTHERS** |
| Current student exhibited the behavior or made the threat |  |  |  |
| Former student from your school exhibited the behavior or made the threat |  |  |  |
| Student from another school exhibited the behavior or made the threat |  |  |  |
| Current staff member exhibited the behavior or made the threat |  |  |  |
| Parent/guardian of a student exhibited the behavior or made the threat |  |  |  |
| Anonymous individuals exhibited the behavior or made the threat |  |  |  |
| Other individuals exhibited the behavior or made the threat (not a student, parent, or faculty member) |  |  |  |
| Total (Overall total should match the yellow box in Q11.2.) |  |  |  |

Display this question if any threats were made by current or former STAFF MEMBERS.

Q11.5 Please explain the threats made by current or former staff member(s).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Display this question if any threats were made by PARENTS OR GUARDIANS.

Q11.6 Please explain the threats made by parents or guardians.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Display this question if any threats were made by OTHERS.

Q11.7 You indicated that your school had at least one threat made by “others” *(not a student, parent, or staff)*. Please describe the relationship of this person or these persons, if any, to your school.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Display this question if any threats were made by OTHERS.

Q11.8 Please explain the threats made by the individual(s) considered as "others".

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Display this question if any threats were made ANONYMOUSLY.

Q11.9 Please explain the threats made anonymously.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Display this section if any threat assessments were conducted PRIOR and a CURRENT STUDENT was the subject.

Q11.10 The following questions refer to the threats where the assessment occurred **PRIOR** to any act of violence and a **current student** was the one exhibiting the behavior or making the threat.

Q11.11 How many subjects of the assessment(s) (individuals exhibiting the behavior or making the threat) were of the following genders?

\*Total should match the sum of the orange highlighted boxes above.

|  |  |
| --- | --- |
| Male: |  |
| Female: |  |
| Nonbinary: |  |
| Total (should equal the sum of the orange boxes in Q11.4.): |  |

Q11.12 How many assessments were originally classified (before any case management) at each level of concern (determination level) and how many resulted in an act of violence **after** the assessment was conducted (aka **NOT** averted)?

|  |  |  |
| --- | --- | --- |
|  | Number classified | Number **NOT** averted |
| **Priority 1** (Critical/Imminent): Subject poses an imminent threat of serious violence or harm to self or others. |  |  |
| **Priority 2** (High): Subject poses, or is rapidly developing capability for, a threat of serious violence or harm to self or others. |  |  |
| **Priority 3** (Moderate): Subject does not pose a threat of serious violence or harm though risk cannot be ruled out. |  |  |
| **Priority 4** (Low): Subject does not indicate a threat of violence or harm to self or others; would or may benefit from intervention or assistance. |  |  |
| **Priority 5** (Routine/No Known Concerns): Subject does not indicate a threat of violence or harm to self or others at this time (or at the time of the assessment.) |  |  |
| Total (\***number classified** should match the sum of the orange boxes in Q11.4) |  |  |

12 Priority 1 Cases

Display this section if any PRIORITY 1 threats were NOT AVERTED.

Q12.1 The following questions refer to **Priority 1** threats where, after the assessment, an act of violence took place. If there were none for a particular category, please enter a "0".

Your responses to each question Q12.2 through Q12.14 should include all**Priority 1** threat assessments that were **NOT** averted.

|  |
| --- |
| \*Referring to the assessments represented in the purple box in Q11.12. |

Q12.2 The number of act(s) that were threatened:

|  |  |
| --- | --- |
| Aberrant or concerning behavior |  |
| Bomb/arson |  |
| Cutting/stabbing |  |
| General harm |  |
| Homicide |  |
| Overdose |  |
| Strangulation |  |
| Weapon(s) use |  |
| Other |  |

Display this question if there were OTHER acts.

Q12.3 Explain the "other" type of act(s) threatened.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q12.4 Number of who the intended target(s) was/were?

|  |  |
| --- | --- |
| Self (self-harm) |  |
| Student (not the subject) |  |
| Staff member |  |
| Whole school |  |
| Parent |  |
| Other |  |

Display this question if there were OTHER intended targets.

Q12.5 Explain the "other" intended target(s).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q12.6 Number of steps taken to try to prevent the act(s)?

|  |  |
| --- | --- |
| Alternative education placement or home-based instruction  |  |
| Community Service Board contact  |  |
| Counseling (in school)  |  |
| Counseling (outside of school)  |  |
| De-escalation  |  |
| Discipline consequences given  |  |
| Hospitalization  |  |
| Mental health services recommendation  |  |
| Monitor social media  |  |
| Nurse consultation  |  |
| Parent contact  |  |
| Police (SRO) contact  |  |
| Residential treatment facility  |  |
| Safety plan/Behavior Intervention Plan (BIP)  |  |
| Other  |  |

Display this question if OTHER steps were taken to try to prevent the act(s).

Q12.7 Explain the "other" step(s) taken.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q12.8 Number of acts of violence that occurred after the assessment?

\*Please note that “completed suicide” and “homicide” refer to a loss of life.

|  |  |
| --- | --- |
| Assault  |  |
| Bomb/arson  |  |
| Completed Suicide  |  |
| Cutting/stabbing  |  |
| Fight  |  |
| Homicide  |  |
| Overdose  |  |
| Strangulation/suffocation  |  |
| Weapons use  |  |
| Other  |  |

Display this question if HOMICIDE occurred.

Q12.9 Please explain the homicide(s).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Display this question if a COMPLETED SUICIDE occurred.

Q12.10 Please explain the completed suicide(s).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Display this question if OTHER acts of violence occurred.

Q12.11 Explain the "other" act(s) that occurred after the assessment.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q12.12 Number of targets of the acts of violence that occurred AFTER the assessment?

|  |  |
| --- | --- |
| Self (self-harm)  |  |
| Student (not the subject)  |  |
| Staff member  |  |
| Whole school  |  |
| Parent  |  |
| Other  |  |

Display this question if OTHER targets of the acts of violence occurred AFTER the assessment.

Q12.13 Explain the "other" target(s) of the act that occurred after the assessment.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q12.14 Where did the acts of violence occur?

|  |  |
| --- | --- |
| On school grounds:  |  |
| At a school-sponsored event:  |  |
| Location not related to school:  |  |
| Total: (Should equal the purple box in Q11.12) |  |

13 Priority 2 Cases

Display this section if any PRIORITY 2 threats were NOT AVERTED.

Q13.1 Your responses to each question Q13.2 through Q13.14 should include all **Priority 2** threat assessments that were **NOT** averted. If there were none for a particular category, please enter a "0".

|  |
| --- |
| \*Referring to the assessments represented in the green box in Q11.12. |

Q13.2 The number of act(s) that were threatened:

|  |  |
| --- | --- |
| Aberrant or concerning behavior |  |
| Bomb/arson |  |
| Cutting/stabbing |  |
| General harm |  |
| Homicide |  |
| Overdose |  |
| Strangulation |  |
| Weapon(s) use |  |
| Other |  |

Display this question if there were OTHER acts.

Q13.3 Explain the "other" type of act(s) threatened.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q13.4 Number of who the intended target(s) was/were?

|  |  |
| --- | --- |
| Self (self-harm) |  |
| Student (not the subject) |  |
| Staff member |  |
| Whole school |  |
| Parent |  |
| Other |  |

Display this question if there were OTHER intended targets.

Q13.5 Explain the "other" intended target(s).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q13.6 Number of steps taken to try to prevent the act(s)?

|  |  |
| --- | --- |
| Alternative education placement or home-based instruction  |  |
| Community Service Board contact  |  |
| Counseling (in school)  |  |
| Counseling (outside of school)  |  |
| De-escalation  |  |
| Discipline consequences given  |  |
| Hospitalization  |  |
| Mental health services recommendation  |  |
| Monitor social media  |  |
| Nurse consultation  |  |
| Parent contact  |  |
| Police (SRO) contact  |  |
| Residential treatment facility  |  |
| Safety plan/Behavior Intervention Plan (BIP)  |  |
| Other  |  |

Display this question if OTHER steps were taken to try to prevent the act(s).

Q13.7 Explain the "other" step(s) taken.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q13.8 Number of acts of violence that occurred after the assessment?

\*Please note that “completed suicide” and “homicide” refer to a loss of life.

|  |  |
| --- | --- |
| Assault  |  |
| Bomb/arson  |  |
| Completed suicide  |  |
| Cutting/stabbing  |  |
| Fight  |  |
| Homicide  |  |
| Overdose  |  |
| Strangulation/suffocation  |  |
| Weapons use  |  |
| Other  |  |

Display this question if HOMICIDE occurred.

Q13.9 Please explain the homicide(s).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Display this question if a COMPLETED SUICIDE occurred.

Q13.10 Please explain the completed suicide(s).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Display this question if OTHER acts of violence occurred.

Q13.11 Explain the "other" act(s) that occurred after the assessment.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q13.12 Number of targets of the acts of violence that occurred AFTER the assessment?

|  |  |
| --- | --- |
| Self (self-harm)  |  |
| Student (not the subject)  |  |
| Staff member  |  |
| Whole school  |  |
| Parent  |  |
| Other  |  |

Display this question if OTHER targets of the acts of violence occurred AFTER the assessment.

Q13.13 Explain the "other" target(s) of the act that occurred after the assessment.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q13.14 Where did the acts of violence occur?

|  |  |
| --- | --- |
| On school grounds:  |  |
| At a school-sponsored event:  |  |
| Location not related to school:  |  |
| Total: (should equal the green box in Q11.12) |  |

14 Priority 3-5

Display this section if any threats were classified PRIORITY 3-5.

Q14.1 In how many cases were the following consequences/outcomes/interventions utilized to avert **Priority 3–5 threats**? If there were none for a particular category, please enter a "0".

Referring to the number of threats determined to be Priority 3, 4, or 5, the grey boxes in Q11.12.

|  |  |
| --- | --- |
| Alternative education placement or home-based instruction |  |
| Community Service Board contact  |  |
| Counseling (in school)  |  |
| Counseling (out of school)  |  |
| De-escalation  |  |
| Discipline consequences given  |  |
| Hospitalization  |  |
| Mental health services recommendation  |  |
| Monitor social media  |  |
| Nurse consultation  |  |
| Parent contact  |  |
| Police (SRO) contact  |  |
| Residential treatment facility  |  |
| Safety Plan/Behavior Intervention Plan (BIP)  |  |
| Other  |  |

Display this question if OTHER consequences/outcomes/interventions were utilized.

Q14.2 Please explain the "Other" consequences/outcomes/interventions.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

15 School Safety Audit

Q15.1 **School Safety Audit**

Q15.2 The [*Code of Virginia §*22.1-279.8](https://law.lis.virginia.gov/vacode/title22.1/chapter14/section22.1-279.8/) requires that all schools in Virginia complete an annual safety audit. The audit is a *“written assessment of the safety conditions in each public school to (i)* ***identify*** *and* ***if necessary, develop solutions*** *for* ***physical safety concerns****, including building security issues and (ii)* ***identify and evaluate any patterns of student safety concerns*** *occurring on school property or at school sponsored events. Solutions and responses shall include recommendations for structural adjustments, changes in school safety procedures, and revisions to the school board’s standards for student conduct.*”

Q15.3 Date of most recent Crisis Management Plan update and review (mm/dd/yyyy):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q15.4 Safety Audit Review: The culmination of the School Safety Audit is a review of the data collected for each component.

 Areas to review:

* Safety/crisis management (Data sources such as School Safety Survey, Crisis Management Plan after-action assessments, etc.)
* School climate (Data sources such as the Virginia School Survey of Climate and Working Conditions, Counseling needs assessments, etc.)
* Facility safety (Data sources such as Safety Inspection Checklist or physical assessments of the buildings and grounds, etc.)
* Other data (Data sources such as discipline, attendance, counseling needs assessments, community input, criminal analysis reports, etc.)

Q15.5 Please select the issues and areas of concern or where your school could improve. *(Select all that apply)*

|  |  |  |  |
| --- | --- | --- | --- |
| Absenteeism/tardiness/ skipping  | Disrespectful behavior  | Parent involvement  | Student engagement  |
| Academic integrity  | Doors need repair or upgrades  | Perceptions of safety  | Substance use  |
| Acceptable use policy (computers/internet)  | Drill accommodations for staff/students  | Physical Incidents/fighting  | Suicide/self-harm  |
| Active attack training  | Drill procedures  | Poor or broken lighting  | Supportive/consistent leadership  |
| Aggressive behaviors  | Easy, prohibited roof access  | Relationships  | Threat assessment  |
| Anonymous threat reporting system  | Fencing/gates  | Restrooms  | Tolerance  |
| Behavior management/ student aggression  | Hallways/walkways  | School connectedness  | Traffic design  |
| Bullying/cyberbullying  | High-risk area monitoring  | Security alarm  | Training/professional development  |
| Bus referrals  | Identification badges  | Security of exterior entrances  | Two-way communications  |
| Cafeteria  | In school suspensions  | Security of records  | Uncleanly building  |
| Camera coverage  | Incomplete building repairs  | Signage  | Understanding of the SRO role  |
| Cell phones  | Key/access control  | Social media  | Visitor management system  |
| Classroom disruptions  | Landscaping  | Social-Emotional Learning  | Weapons  |
| Crisis plan development  | Mental health  | SRO training  | Windows need repair or upgrades  |
| Custodial closets and mechanical rooms  | Non-compliance  | SRO/admin partnership  | Work/assignment completion  |
| Destruction of school property  | Out-of-school suspensions  | Staff collegiality  | Other (describe) |

Q15.6 What resources are needed to resolve the issues identified? *(Select all that apply)*

|  |  |
| --- | --- |
| Additional security personnel  | Mental health resources  |
| Additional counseling staff  | Re-keying of doors  |
| Additional teaching staff  | Replacement locks/door repairs  |
| Alternatives to suspension  | Review of jobs, workload, and policies  |
| Building repairs/upgrades  | Security system repairs or upgrades  |
| Cameras/camera system upgrades  | Signage  |
| Clear guidance  | Student training  |
| Community partnerships  | Time  |
| Construction/renovations  | Training/professional development  |
| Fencing/gates  | Visitor management equipment  |
| Funding  | VTSS/PBIS  |
| Improved communications equipment  | Window coverings  |
| Lighting  | Other (describe)  |

Q15.7 Any additional safety-related comments or concerns you would like to share?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

16 End

Q16.1 **You are about to submit your final responses to the 2024 School Safety Survey.**

If you are not ready to submit your responses, click "**Back**".

If you are ready to finish and submit your responses to the survey, click "**Submit**" at the bottom of this page.

You will be taken to a summary of your responses**,** select "**Download PDF**" in the upper right to save or print this summary.

***If you find you need to make corrections to your survey, please contact*** ***safetyaudit@dcjs.virginia.gov******, do NOT submit another survey.***

Be sure to close your browser when done.

If you have other questions about the Virginia School Safety Survey, please contact Nikki Wilcox at 804-786-3923 or nikki.wilcox@dcjs.virginia.gov; Dannie Anderson at 804-786-5763 or dannie.anderson@dcjs.virginia.gov; or James Christian at 804-357-0967 or james.christian@dcjs.virginia.gov.