***Welcome to the 2020 Virginia School Safety Survey***

This is a secure, web-based survey conducted by the Virginia Department of Criminal Justice Services (DCJS) Virginia Center for School and Campus Safety (VCSCS). Submission of this 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 2019-2020 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, there are questions that reference *Code of Virginia* requirements. 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: Nikki Wilcox at 804-786-3923 or nikki.wilcox@dcjs.virginia.gov, Shellie Evers at 804-629-7042 or shellie.evers@dcjs.virginia.gov, 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 pursuant to *Code of Virginia* [§2.2-3705.2](https://law.lis.virginia.gov/vacode/2.2-3705.2/) and [§ 22.1-279.8](https://law.lis.virginia.gov/vacode/22.1-279.8/)[.](http://law.lis.virginia.gov/vacode/title2.2/chapter37/section2.2-3705.2/) 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.

***Please answer the following questions about your school as accurately as possible.***

**I. SCHOOL IDENTIFICATION AND DEMOGRAPHIC INFORMATION**

1. What is the name of your school division? *(select from drop-down list)*

2. What is the *full* name of your school?

***IMPORTANT****: School name must match our database for you to receive credit for the survey. Please* [*use this link*](http://www.dcjs.virginia.gov/surveysupport/schoolaudit/codelookup.cfm) *to find the formal school name, then copy and paste into this box.*

3. What is your school’s ID number?

***IMPORTANT****: ID number must match your school name for you to receive credit for the survey. Please* [*use this link*](http://www.dcjs.virginia.gov/surveysupport/schoolaudit/codelookup.cfm) *to find your school’s ID number, then copy and paste into this box.*

*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:*

4. What is your name?

 (First name/Last name)

5. Are you the school’s current/acting principal?

Yes

No

 *(if 5 = no)*

5a. Please provide the name and email address for your current/acting principal.

(First name/Last name/Email)

*(if 5 = no)*

6. What is your title?

7. What is your email address?

8. Which of the following best describes your school? (*select one*)

 Elementary

 Middle

 High

 Combined Grades

 Primary

 Pre-Kindergarten

 Alternative

 Career/Technical/Vocational

 Charter

 Magnet

 Governor’s

 Special Education

 Correctional Education

 Adult Education

 School for the Deaf and Blind

 Other *(describe)* \_\_\_

9. What grades were taught at your school during 2019-2020? (*select all that apply*)

Pre-Kindergarten

Kindergarten

1st grade

2nd grade

3rd grade

4th grade

5th grade

6th grade

7th grade

8th grade

9th grade

10th grade

11th grade

12th grade

Not applicable

10. What was your fall membership enrollment number on September 30, 2019?  *(enter numeric response)*

**II. SAFETY-RELATED PERSONNEL AND PARTNERSHIPS**

*Mental Health Personnel*

11. What was the number of full time and part time school-based mental health personnel (counselor, psychologist, social worker, substance abuse counselor) who allocated at least 50% of their employed time providing mental health services in 2019-2020?

* *Use full time for those mental health personnel that worked full time at your school and whose primary role (50% or more of their employed time) was to provide counseling services to students.*
* *Use part time for those mental health personnel that worked part time at your school and whose primary role (50% or more of their employed time) was to provide counseling services to students, even if they are employed full time by your division or other agency.*

 *If there were none, enter 0.*

|  |  |  |
| --- | --- | --- |
| **Role** | **Number of Full Time** | **Number of Part Time** |
| School Counselors |  |  |
| School Psychologists |  |  |
| Social Workers |  |  |
| Substance Abuse Counselors |  |  |
| Student Assistance Counselors |  |  |

*School Resource Officers and Certified School Security Officers*

[*§ 9.1-101*](https://law.lis.virginia.gov/vacode/9.1-101/) defines school resource officers and school security officers.

12. Did you have safety/security personnel such as School Resource Officers (SROs), Certified School Security Officers (SSOs), or contracted private security personnel working at your school during the 2019-2020 school year? *(include both full time and part time personnel)*

Yes

No

*(if 12 = yes)*

12a. What type(s) of safety/security personnel were working in your school during the 2019-2020 school year?

|  |  |
| --- | --- |
|  | **Have at your school?** |
| School Resource Officers (SROs) | o Yes o No  |
| Certified School Security Officers (SSOs) | o Yes o No |
| Contracted private security personnel (not SSOs) | o Yes o No |

 *(if 12a SRO = yes)*

 12a. How many SROs were regularly assigned to and working in your school during normal school hours? *(numerical response only)* \_\_\_

 *(if 12a SSO = yes)*

 12a. How many SSOs were regularly assigned to and working in your school during normal school hours? *(numerical response only)* \_\_\_

 *(if 12a private security personnel = yes)*

 12a. How many private security personnel (who are not SSOs) regularly worked at your school during normal school hours? *(numerical response only)* \_\_\_

*(if 12a = SRO)*

School Resource Officer (SRO) questions

12a-1. In a previous question, you indicated that your school had \_(#)\_ SRO(s) working in 2019-2020. Please provide the name, FT/PT status, and email address for each (for up to 5 SROs).

*Include both full time and part time SROs. If an SRO that worked at your school in 2019-2020 is no longer there, please note it in the “SRO email” text box.*

*(Based on the number of SROs reported in Q12a, that number of rows will appear in Q12a-1, for up to 5 SROs.)*

|  |  |  |
| --- | --- | --- |
| SRO name(First name/Last name) | FT/PT status | SRO email |
| FT | PT |
|  | o | o |  |

12a-2. How familiar are you (the principal) with the roles and expectations set out in the MOU between your school division and the local law enforcement agency for the placement of SROs in your school? *(select one)*

Not at all familiar

Slightly familiar

Somewhat familiar

Moderately familiar

Extremely familiar

12a-3. For the most recently assigned SRO at your school, was the principal or assistant principal consulted in some way as part of the selection process?

Yes

No

Don’t know

12a-4. Was training provided to your school’s personnel on the roles and responsibilities of SROs?

Yes

No

Don’t know

12a-5. Please rate each of the following areas related to your school/law enforcement partnership:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Very good** | **Good** | **Acceptable** | **Poor** | **Very poor** |
| Communication from SRO to Administrators | o | o | o | o | o |
| Communication from Administrators to SRO | o | o | o | o | o |
| Role Distinction (mutual understanding of appropriate role and duties of SRO) | o | o | o | o | o |
| Distinction between school rules and laws (mutual understanding about what infractions the SRO should and shouldn’t handle) | o | o | o | o | o |

*(If 12a = SSO)*

Certified School Security Officer (SSO) questions

12a-6. In a previous question, you indicated that your school had \_(#)\_ SSO(s) working in 2019-2020. Please provide the name, FT/PT status, and email address for each.

*Include both full time and part time SSOs, for up to ten (10) SSOs. If an SSO that worked at your school in 2019-2020 is no longer there, please note it in the “SSO email” text box.*

*(Based on the number of SSOs reported in Q12a, that number of rows will appear in Q12a-6, for up to 10 SSOs.)*

|  |  |  |
| --- | --- | --- |
| SSO name(First name/Last name) | FT/PT status | SSO email |
| FT | PT |
|  | o | o |  |

**III. EMERGENCY PLANNING, DRILLS, AND RESPONSE**

*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."*

*Effective July 2019,* [*HB1737*](https://lis.virginia.gov/cgi-bin/legp604.exe?191+sum+HB1737&191+sum+HB1737) *amended* [*§ 22.1-279.8*](https://law.lis.virginia.gov/vacode/title22.1/chapter14/section22.1-279.8/) *D to include first responders in the development and review of school crisis management plans. "Each school board shall ensure that every school that it supervises shall develop a written school crisis, emergency management, and medical emergency response plan, consistent with the definition provided in this section,* ***and shall include the chief law-enforcement officer, the fire chief, the chief of the emergency medical services agency, the executive director of the relevant regional emergency medical services council, and the emergency management official of the locality, or their designees****, in the development of such plans. "*

13. In addition to the legislatively-mandated personnel listed above, who else was actively involved in the development of your school’s crisis management plan? *(select all that apply)*

Administrator

Central office personnel

Parent or community member

School counselor

School nurse

School social worker

SRO

SSO

Student

Teacher

Other

None of the above

14. Did you have to *activate* any portion of your school’s crisis management plan during the 2019-2020 school year due to an *actual* critical event or emergency?

 Yes

 No

*(if 14 = yes)*

14.a Please select all events that occurred causing the activation of your school’s crisis management plan during the 2019-2020 school year:

|  |  |
| --- | --- |
| **Type of Emergency Circumstance(s)** | **Activated CMP** |
| Health related incidents and emergency(ies): |
| Death or serious injury of staff or student | ○ |
| Hazardous materials exposure on or near school property | ○ |
| Influenza/pandemic | ○ |
| Medical emergency on school property | ○ |
| Other health-related incident on or near school property  | ○ |
| Man-Made incidents and emergency(ies): |
| Active threat | ○ |
| Bomb threat | ○ |
| Demonstration/protest on or near school property | ○ |
| Intruder/trespasser/unauthorized persons 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  | ○ |
| Weather or building/power related incident(s) and emergency(ies): |
| Earthquake | ○ |
| Flood | ○ |
| Roof or building collapse | ○ |
| Smoke or fire/explosion | ○ |
| Tornado/hurricane  | ○ |
| Other building-related damage or power outage related emergency(ies)  | ○ |
| Other natural disaster or severe weather | ○ |
| Other |
| Bus/vehicle crash | ○ |
| Incident at another school that affected your school  | ○ |
| Unfounded incident/faulty or false alarm  | ○ |
| Other safety-related incident that affected school and is not listed above | ○ |

S*afety-Related Conditions*

15. Did first responders (police/fire/EMS) have electronic/internet-based access to current floor plans for your school in case they needed to respond to a large-scale security incident at your facility?

Yes

No

16. Did your school conduct any unannounced lockdown drills?

Yes

No

*(if 16 = yes)*

16a. When unannounced lockdown drills were implemented, were they identified as a drill? *(i.e., “This is a drill. We are now conducting a lockdown drill.”)*

Yes

No

17. Did your school provide the option for parents to opt their children out of all lockdown drills?

Yes

No

*(if 17a = yes)*

17a. Were alternative training provisions made for students whose parents opted their child out of lockdown training?

Yes

No

18. Did your school provide the option for staff to opt out of all lockdown drills?

Yes

No

*(if 18 = yes)*

18a. Were alternative training provisions made for staff who opted out of lockdown training?

Yes

No

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

Yes

No

*(if 19 = yes)*

19a. What types of accommodations were made? *(select all that apply)*

Additional drills/trainings

One on one training/preparation for students with disabilities/504 accommodations

Personal assistance provided by an assigned individual

Prior knowledge of drill to allow for preparation

Signs or cue cards to assist with communication

Specialized location

Other *(describe)* \_\_\_

20. Did first responders (police/fire/EMS) have access to the school during a lockdown so they would not have to breach doors or windows to gain access, if necessary?

Yes

No

Don’t know

21. Could school administrators communicate with law enforcement/first responders via radio when inside the school building during an emergency or critical incident, if necessary?

Yes

No

Don’t know

*(if 21 = no)*

### 21a. In question 21, you indicated that school administrators could not communicate with law enforcement/first responders via radio when inside the school building during an emergency or critical incident, if necessary. Why not? What prevents this communication? *(select all that apply)*

Different radio systems/frequencies, not compatible

Division policy prohibits it

Don’t have radio/don’t have working radio

Limitations of radio due to distance or infrastructure

Other

None of the above

*(if 21 = no)*

21b. Since your school is unable to communicate with law enforcement/first responders via radio, what other methods could be used/were used to communicate in an emergency/critical incident? *(select all that apply)*

Phones/cell phones

Walkie talkies

Other *(describe)* \_\_\_\_\_

22. Review the following list of security strategies and select those that were in place at your school during the 2019-2020 school year. (*select all that apply*)

All classrooms had designated safe spaces/hard corners and students/staff were made aware of how they are to be used

All classrooms in the school were able to be locked from inside the classroom

All classrooms in the school were able to be locked from outside the classroom

All classrooms in the school were able to be locked from both inside and outside the classroom

All exterior entrances to the school building or campus were locked during school hours

Classroom windows, including door windows, can be covered to eliminate visibility into classroom

Main entranceof the school building or campus was secured by a controlled electronic access

 system during school hours

School had crisis kits prepared, including medical and emergency plan-specific items

School had a checklist available to assist in obtaining pertinent information during a threatening

 call/communication (e.g., bomb threat)

School had a designated reunification site in case of evacuation or other emergency preventing student pick up at the school

Someone was stationed at the front entrance of the school at all times during school hours to ensure that visitors report to the main office for visitor check in

Staff and students were trained in “run, hide, fight” or “avoid, deny, defend,” or some other recognized response program.

Staff were trained to barricade rooms that cannot be locked from inside

Other

None of the above

**IV. THREAT REPORTING AND ASSESSMENT**

Since 2013, and in accordance with [*§ 22.1-79.4*](https://law.lis.virginia.gov/vacode/22.1-79.4/), threat assessment teams are legislatively-mandated in Virginia for all public schools for grades K – 12. Each division superintendent shall establish, for each school, a threat assessment team that shall include persons with expertise in counseling, instruction, school administration, and law enforcement. Threat assessment teams may be established to serve one or more school as determined by the division superintendent. It is also mandated that each team:

* Provide guidance to students, faculty, and staff regarding recognition of threatening or aberrant behavior that may represent a threat to the community, school, or self;
* Identify members of the school community to whom threatening behavior should be reported; and
* Implement school board policies for the assessment of and intervention with individuals whose behavior poses a threat to the safety of school staff or students.

In addition to requiring the establishment of threat assessment teams*, Code of Virginia* [*§ 22.1-79.4*](https://law.lis.virginia.gov/vacode/22.1-79.4/)also instructs that

*“Each threat assessment team established pursuant to this section shall report quantitative data on its activities according to guidance developed by the Department of Criminal Justice Services.”*

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

Threat Assessment Administration

Threat Assessment Team

*Code of Virginia* [*§ 22.1-79.4*](https://law.lis.virginia.gov/vacode/22.1-79.4/)section *C* states, *“Each division superintendent shall establish, for each school, a threat assessment team that* ***shall include persons with expertise in counseling, instruction, school administration, and law enforcement.*** *Threat assessment teams may be established to serve one or more schools as determined by the division superintendent.”*

23. How many primary/core members did your school’s threat assessment (TA) team have in 2019-2020? *(numerical response only) \_\_\_\_*

24. Approximately, how many threat assessment meetings were held in 2019-2020 for the following tasks? *(if you don’t know, enter 999)*

|  |  |
| --- | --- |
| **Type of meeting** | **Number of meetings held** *(numerical data only)* |
| To triage threats received (at least 2 members) |  |
| To conduct a full threat assessment based on precipitating information (prior to possible event) |  |
| For debrief when event occurred without precipitating information (no opportunity to conduct TA prior to event)  |  |
| For administrative reasons: organization, process discussion, training, or practice  |  |

25. For each of the following types of TAT members, indicate

* the number of TA meetings attended in 2019-2020,
* whether TA-related training was completed within the last 3 years, and
* the type(s) of training completed.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Number TA meetings attended** | **Completed training in last 3 years**(select one) | **Type of training completed** (select all that apply) |
| School administration |  | O Yes O NoO Don’t know | □ DCJS training□ Online Training Video□ Trained by division staff□ Unknown□ None, not trained in last 3 years |
| Mental health counseling |  | O Yes O NoO Don’t know | □ DCJS training□ Online Training Video□ Trained by division staff□ Unknown□ None, not trained in last 3 years |
| Instruction |  | O Yes O NoO Don’t know | □ DCJS training□ Online Training Video□ Trained by division staff□ Unknown□ None, not trained in last 3 years |
| Law enforcement |  | O Yes O NoO Don’t know | □ DCJS training□ Online Training Video□ Trained by division staff□ Unknown□ None, not trained in last 3 years |

*(if 12a ≠ SRO or if 12 = no)*

25a. In question 12a, you indicated that your school does not have an SRO. Where was your school’s TA team’s law enforcement representative from? *(select all that apply)*

Law enforcement representative from police department

Law enforcement representative from sheriff’s office

Law enforcement representative from Virginia State Police

SRO from nearby school

Other *(describe)* \_\_\_

26. In 2019-2020, how did your school inform students about threat assessment teams and their role in the school? *(select all that apply)*

Assembly/classroom

By classroom or small group

Email/text

Other written format (brochure, letter)

School policy

Student handbook/Code of Conduct

Via counseling services

Website/social media

With individual students and/or families

Other

Did not inform

27. In 2019-2020, how did your school inform faculty and staff about threat assessment teams and their role in the school? *(select all that apply)*

Email/text

Faculty/staff meeting

In-service training/professional development

Other written format (brochure, letter)

School policy/procedures manual

Staff/faculty handbook/Code of Conduct

Via instructional video

Website/social media

With individual staff

Other

Did not inform

28. In 2019-2020, how did your school inform parents/guardians about threat assessment teams and their role in the school? *(select all that apply)*

At back to school night

Email/text

Other written format (brochure, letter)

School policy

Student handbook/Code of Conduct

Via counseling services

Website/social media

When concerns arise involving their child

Other

Did not inform

29. What mechanisms were in place to make faculty and staff aware of threat assessment protocols and how to recognize threatening or aberrant behavior? *(select all that apply)*

Division-wide in-service school safety training

Faculty handbook

Information provided at back-to-school meetings

Information provided at other staff meetings

Required online training video (such as, “[K12 Threat Assessment in Virginia Schools](https://www.youtube.com/watch?v=JS7m3RUy9c0)”)

School’s crisis plan

School provided in-service training/professional development

Training provided by outside entity (such as DCJS)

Were made aware as needed

Other *(describe)* \_\_\_\_

None

Threat Reporting

30. Did information your school provided to students and staff about threatening and aberrant behavior include instructions on reporting threats of self-harm and suicide to the threat assessment team?

Yes

No

31. Were threats of suicide/self-harm typically reported to your school’s threat assessment team?

Yes

No

*(if 31 = no)*

31a. Since threats of suicide/self-harm were not typically reported to your school’s threat assessment team, who were they reported to/handled by? *(select all that apply)*

School counselor

School nurse

School psychologist

Other *(describe)* \_\_\_

32. What kind of anonymous report methods were available at your school for reporting threats/aberrant behavior? (Note: in person reporting is not considered anonymous) *(select all that apply)*

Web-based tip line (school-based)

Web-based tip line (provided by division)

Phone-based hotline

Email

Written (i.e., note, comment box)

Other *(describe)* \_\_\_\_\_

None

Threat Assessment Records

33. Where were the primary threat assessment records (such as *Threat Assessment and Response Reports*) stored during 2019-2020? *(select all that apply)*

At the division office (central office)

With law enforcement unit records (as allowed by FERPA)

With school administrator’s file

Other *(describe)* \_\_\_\_

Not applicable (no cases in 2019-2020)

Threat Assessments Conducted in 2019-2020

For the next series of questions, we want to know about the threat assessments conducted by your school’s threat assessment team.

For question 34:

- Report the number of cases regardless of their risk classification

- Use the following definitions:

* **Threatened others only:** *threatened harm, posed harm to, or was perceived as posing harm to someone other than self,* *BUT DID NOT* *threaten suicide or self-harm*
* **Threatened other(s) and self:** *threatened harm, posed harm to, or was perceived as posing harm to someone other than self* *AND* *threatened suicide or self-harm, or was perceived as suicidal or posing harm to self*
* **Threatened self only:** *threatened to commit suicide or self-harm, or was perceived as suicidal or posing harm to self BUT DID NOT threaten others nor were they perceived as a threat to others.*

34. Based on the threat assessment cases conducted at your school in 2019-2020, how many cases involved threats made by persons from each of the following groups?

*Enter the number of threat assessments conducted that involved persons from each of the listed groups and the type of threat that was made. If there were none, enter 0.*

* *If no threat assessment cases involved persons from a listed group or threats of a certain type, enter 0 for number of threat assessment cases conducted.*
* *SUM your responses by type of group (add each row’s entries and provide sum), and*
* *SUM your responses by type of threat (add each column’s entries and provide sum).*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type of Group** | **Threatened other(s) only** | **Threatened self only** | **Threatened both self & other(s)** | **SUM** |
| 1. Student from your school  |  |  |  |  |
| 2. Student not from your school  |  |  |  |  |
| 3. Student formerly from your school  |  |  |  |  |
| 4. Faculty/staff currently employed by your school  |  |  |  |  |
| 5. Faculty/staff formerly employed by your school  |  |  |  |  |
| 6. Parent/guardian of a student  |  |  |  |  |
| 7. Someone else  |  |  |  |  |
| 8. ENTER TOTAL (**SUM** of items 1 – 7) |  |  |  |  |

*(if Q34 line 8 TOTAL SUM = 1 or >, AND the response to the question below is yes, go to p28)*

*(if Q34 line 8 TOTAL SUM = 0, AND the response to the question below is yes, go to p45)*

*In the previous question, Q34, you indicated that a total of \_#\_ threat assessments were conducted by your school in 2019-2020. This is the number you entered in Q34, line 8, SUM.*

Is this number correct?

Yes (if yes is selected, will continue with survey)

No (if no is selected, the following message will appear)

*(if the response to the question above is no, show message below instructing respondent to make corrections)*

*You indicated that the number of threat assessments conducted by your school in 2019-2020 noted above is not correct. Please click on the back button below and correct your entries in question 34.*

*(if Q34 line 8 TOTAL SUM = 1 or >, go to Q35; if = 0, go to Q40)*

35. Of the \_(#)\_\_ threat assessment(s) conducted by your school in 2019-2020, in how many cases did the threat that was made, or a related act, ultimately occur? (include all threat levels: low, medium and high threats) *(if none, enter 0)* \_\_\_\_

*(if Q34 line 8 TOTAL SUM = 1 or >, go to Q36; if = 0, go to Q40)*

36. Of the \_(#)\_\_ threat assessment(s) conducted by your school in 2019 - 2020 , how many initial threat assessments were conducted within the following time intervals of the threat being received by the threat assessment team (TAT)? *(if none, enter 0)*

|  |  |
| --- | --- |
| **Time interval** | **Number of threat assessments conducted**(numerical data only) |
| Conducted immediately after received by TAT |  |
| Conducted within 24 hours of receipt by TAT |  |
| Conducted after 24 hours or more of receipt by TAT |  |

*(The sum of the above responses to each interval should equal the number of all threat assessments conducted.)*

*(if Q34 line 1 SUM = 1, go to Q37; if = 2 or >, go to Q38; if = 0, go to Q39 if SUM of Q34 line 7 = 1 or >, or go to Q40 if SUM of Q34 line 7 = 0)*

*(if Q34 line 1 SUM = 1) FOR SCHOOLS REPORTING 1 STUDENT CASE, ANY TYPE OF THREAT*

37. In the threat assessment case you reported that involved a student from your school:

|  |  |
| --- | --- |
| Was the student recommended to have a clinical assessment conducted by a community-based or private licensed mental health professional (community services board, private provider, etc.)? | ○ yes○ no○ don’t know |
| Did the student undergo clinical assessment conducted by a community-based or private licensed mental health professional (community services board, private provider, etc.) before being permitted to continue at the school?  | ○ yes○ no○ don’t know |
| Was the threat classified at the *highest* threat level *(imminent/high risk, very serious substantive)* at any point in the threat assessment process? | ○ yes○ no |

*(if Q31 line 1 SUM = 2 or >) FOR SCHOOLS REPORTING 2 OR MORE STUDENT CASES, ANY TYPE OF THREAT*

38. Of the \_(#)\_\_ threat assessment cases you reported that involved students from your school:

|  |  |
| --- | --- |
| Were any of the students recommended to have a clinical assessment conducted by a community-based or private licensed mental health professional (community services board, private provider, etc.)? | ○ yes○ no○ don’t know |
| Did any of the students undergo a clinical assessment conducted by a community-based or private licensed mental health professional (community services board, private provider, etc.) before being permitted to continue at the school?  | ○ yes○ no○ don’t know |
| Were any of the threats classified at the *highest* threat level *(imminent/high risk, very serious substantive)* at any point in the threat assessment process? | ○ yes○ no |

*(if 38 item 1 = yes)*

38a. How many of the students that were subjects of the \_(#)\_ threat assessment cases you reported that involved students from your school, were recommended to have a clinical assessment conducted by a community-based or private licensed mental health professional (community services board, private provider, etc.)? *(if none, enter 0) \_\_\_*

*(if 38 item 2 = yes)*

38b. How many of the students that were subjects of the \_(#)\_ threat assessment cases you reported that involved students from your school, underwent a clinical assessment conducted by a community-based or private licensed mental health professional (community services board, private provider, etc.) before being permitted to continue at the school? *(if none, enter 0) \_\_\_*

*(if 38 item 3 = yes)*

38c. In how many of the \_(#)\_ threat assessment cases you reported that involved students from your school, were the threats classified at the *highest* threat level *(imminent/high risk, very serious substantive)* at any point in the threat assessment process? *(if none, enter 0) \_\_\_*

*(Number entered in Q38 a, b, or c, should not be greater than the sum of line 1 in Q34.)*

*If Q37 item 3 = yes, go to Q37a; if = no, go to Q39 if SUM of Q34 line 7 = 1 or >, or go to Q40 if SUM of Q34 line 7 = 0)*

*If Q38c = 1, go to Q37a; if = 2 or >, go to Q38d; if = 0, go to Q39 if SUM of Q34 line 7 = 1 or >, or go to Q40 if SUM of Q34 line 7 = 0)*

*(if Q37 item 3 = yes, or if Q38c = 1)*

37a. In the high threat level case you reported involving a student from your school, did the threat ultimately occur (was carried out or some other act of violence occurred)?

Yes

No

*If Q37a = yes, go to C-1 below; If Q37a = no, go to Q39 if SUM of Q34 line 7 = 1 or >, or go to Q40 if SUM of Q34 line 7 = 0)*

*NOTE: The number of highest threat cases where an act ultimately occurred reported in the following question (38d), should be equal to or less than the number of student threat assessment cases where the threats were classified at the highest threat level at some point in the threat assessment process (as reported in 38c).*

*(if Q38c = 2 or >)*

38d. Of the \_\_#\_\_ cases you reported at the highest threat level involving students from your school in question 38c, in how many cases did the threat or some other act of violence ultimately occur? *(if none, enter 0)*

Number of cases \_\_\_\_

*(The number entered in response to Q38d should not be greater than the number reported in Q38c.)*

*If Q38d if = 1, go to C-1 below; if = 2 or >, go to C-1 on p17; if = 0, go to Q39 if SUM of Q34 line 7 = 1 or >, or go to Q40 if SUM of Q34 line 7 = 0)*

*(if Q37a = yes, or if Q38d = 1)*

*For the case that was carried out, please provide a brief description of what occurred.*

C-1. You indicated that in the high threat level case assessed by your school’s threat assessment team, a serious event ultimately occurred. Please describe:

The type of act that was threatened: \_\_\_

The actual act that took place: \_\_\_

The steps taken, if any, to try to prevent the act: \_\_\_

Was a student from your school the primary initiator of the event? Yes/No *(if no, go to C-3)*

*(if C-1 student from your school = yes)*

C-2. Was this student able to continue attending your school at some time after the event?

Yes

No *(if selected, go to C-3)*

There was more than one student considered primary in the event *(if selected, go to C-3)*

*(if C-2 = yes)*

C-2.1. After what period of time was the student able to continue attending your school? *(select one)*

Immediately

5 school days

10 school days

11-45 school days

More than 45 school days

After alternative school placement *(if “after alt…” was not selected, go to C-3)*

After hospitalization

Other *(describe) \_\_\_\_\_*

*(if C-2.1 “after alternative …” was selected)*

C-2.2. For what period of time was the student assigned to alternative school placement? \_\_\_\_\_

C-3. Is there any other information about this event that you think would help explain the event to us?

Yes

No

*(if YES was selected in C-3, a dialogue box will appear for the written response, then will be directed to Q39 if SUM of Q34 line 7 = 1 or >, or to Q40 if SUM of Q34 line 7 = 0)*

*(if NO was selected in C-3, will be directed to Q39 if SUM of Q34 line 7 = 1 or >, or to Q40 if SUM of Q34 line 7 = 0)*

*(if 38d > 1)*

*In question 38d, you indicated that in \_\_#\_\_ high threat level cases reported, a serious event ultimately occurred. You will be asked to briefly describe each of the events, one case at a time, for up to 10 cases.

If you have more than 10 cases where high level threats were carried out, please describe the 10 most serious cases.*

***Case 1***

C-1. Please describe the events in Case 1:

The type of act that was threatened: \_\_\_

The actual act that took place: \_\_\_

The steps taken, if any, to try to prevent the act: \_\_\_

Was a student from your school the primary initiator of the event? Yes/No *(if no, go to C-3)*

 *(if C-1 student from your school = yes)*

2C-2. Was this student able to continue attending your school at some time after the event?

Yes

No *(if selected, go to C-3)*

There was more than one student considered primary in Case 1. *(if selected, go to C-3)*

*(if C-2 = yes)*

C-2.1. After what period of time was the student in Case 1 able to continue attending your school? *(select one)*

Immediately

5 school days

10 school days

11-45 school days

More than 45 school days

After alternative school placement *(if “after alt…” was not selected, go to C-3)*

After hospitalization

Other *(describe)* \_\_\_

*(if C-2.1 = after alt)*

C-2.2. For what period of time was the student in Case 1 assigned to alternative school placement? \_\_\_\_\_

C-3. Is there any other information about this event that you think would help explain the event to us?

Yes *(if selected, a dialogue box will appear for their response, then will be directed to Case 2)*

No *(if selected, go to Case 2)*

*(if 38d is = or > 2)*

***Case 2***

C-1. Please describe the events in Case 2:

The type of act that was threatened: \_\_\_

The actual act that took place: \_\_\_

The steps taken, if any, to try to prevent the act: \_\_\_

Was a student from your school the primary initiator of the event? Yes/No *(if no, go to C-3)*

*(if C-1 = student from your school = yes)*

C-2. Was this student able to continue attending your school at some time after the event?

Yes

No *(if selected, go to C-3)*

There was more than one student considered primary in Case 2 *(if selected, go to C-3)*

 *(if C-2 = yes)*

C-2.1. After what period of time was the student in Case 2 able to continue attending your school? *(select one)*

Immediately

5 school days

10 school days

11-45 school days

More than 45 school days

After alternative school placement *(if “after alt…” was not selected, go to C-3)*

After hospitalization

Other *(describe)* \_\_\_

*(if C-2.1 = after alt)*

C-2.2. For what period of time was the student in Case 2 assigned to alternative school placement? \_\_\_\_

C-3. Is there any other information about this event that you think would help explain the event to us?

Yes *(if selected, a dialogue box will appear for their response)*

No

*(If No is selected in Case 2 C-3, and if Q38d = 3 or > go to Case 3; if 38d = 2 will go to Q39 if SUM of Q34 line 7 = 1 or >, or go to Q40 if SUM of Q34 line 7 = 0)*

***(Same set of case questions/conditions will be asked if the following criteria are present)***

Case 3 *(if 38d = or > 3 cases)*

Case 4 *(if 38d = or > 4 cases)*

Case 5 *(if 38d = or > 5 cases)*

Case 6 *(if 38d = or > 6 cases)*

Case 7 *(if 38d = or > 7 cases)*

Case 8 *(if 38d = or > 8 cases)*

Case 9 *(if 38d = or > 9 cases)*

Case 10 *(if 38d = or > 10 cases)*

*(if the SUM of Q34 line 7 = 1 or >)*

39. In question 34, where you detailed the types of threats made and by whom, you indicated that your school had a threat assessment case(s) that involved “someone else” (not a student, parent, or faculty). Please describe this/these person’s relationship(s) to your school. \_\_\_\_\_\_\_\_\_\_\_\_\_

40. How did your school monitor social media (i.e. Facebook, Twitter, Snapchat, etc.) to detect and mitigate potential threats and other safety issues? *(select all that apply)*

Someone at the school level was responsible for monitoring (i.e., it was in their job description)

Someone at the division level was responsible for monitoring (i.e., it was in their job description)

We contracted with a third party that scanned/monitored social media for us

Local law enforcement agency monitored and shared appropriate information

We did not have a specific monitoring process

Other *(describe)* \_\_\_\_\_

**V. CONCERNS, TRAINING, AND RESOURCE NEEDS**

Safety-Related Training

41. Did your school’s staff/faculty receive formal training on student mental health issues (Mental Health First Aid, Trauma-Informed Care/Classrooms, substance abuse, etc.)?

Yes

No

*(if 41 = yes)*

41a. Who facilitated the training on student mental health issues? *(select all that apply)*

College/university partner

School or division staff

Virginia Department of Behavioral Health and Developmental Services (including local Community Services Board)

Virginia Department of Criminal Justice Services

Virginia Department of Education

Other *(describe)* \_\_\_\_\_

42. What type(s) of school safety training is most needed by your school’s administration/faculty/staff? *(select all that apply)*

Crisis planning, prevention, mitigation and response (to include school safety drills, bomb threat response,

 crisis response options, crisis intervention and recovery – all hazards)

De-escalation and mediation

Mental health problem awareness and recognition

Peer relations (dating violence, bullying, bystander intervention, conflict mediation, sexual harassment, etc.)

Role of safety and security personnel (SROs and/or SSOs)

Social/emotional interventions and supports for staff

Social/emotional interventions and supports for students

Social media (Facebook, Snapchat, Twitter, YouTube, etc.)

Substance abuse and vaping

Suicide prevention, intervention and postvention

Threat assessment team training

Trauma-informed care

Trauma-informed classrooms

Violence prevention training (including fighting, armed intruder, active shooter, other school violence)

Other *(describe)* \_\_\_

None of the above

43. What were the primary facility safety concerns identified by your school’s most recent safety inspection checklist or other school safety audit component? *(select all that apply)*

Inability to secure classrooms

Lack of designated security personnel

Lack of fencing or other peripheral security

Lack of supervision in one or more classrooms

Multiple building/portable classrooms

Need for controlled access system/front entrance security

Need for more security cameras

Need for radio communication with first responders

Physical dangers from unfunded repairs

Unlocked exterior doors

Unsupervised areas during the school day

Unsupervised areas during after school activities

Other *(describe)* \_\_\_\_

None

44. What were the primary issues affecting your school’s climate and the mental/emotional well-being of your students and staff? *(select all that apply)*

Bullying

Conflicts arising from social media

Counseling personnel tasked with non-mental health-related assignments

Home life/family issues

Lack of available climate improvement training

Lack of available counseling personnel for students

Lack of connection with students

Lack of connection with teachers/staff

Retaining qualified teachers

Stress-related issues

Substance abuse

Unmet mental health needs/limited mental health resources

Other *(describe)* \_\_\_\_

None

45. Although Virginia Code does not currently require schools to have specific pandemic plans, were plans in place that assisted your school’s Covid-19 mitigation, response, and/or recovery?

Yes

No

46. Would pandemic planning and/or training resources be valuable to your school?

Yes

No

*(if 46 = yes)*

46a. What kind of pandemic planning/training resources, specifically? \_\_\_

### 47. Any additional safety related comments or concerns you would like to share?

**You are about to submit your final responses to the 2019-2020 School Safety Survey.**

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

If you are not ready to submit your responses, click "**Back**" to page back through the survey, or click "**Save and Exit**" to save your work in the survey until you are ready to finish and submit your responses.

### Thank you for completing the 2020 Virginia School Safety Survey.

##### Your survey responses were successfully submitted to the Virginia Center for School and Campus Safety at the Department of Criminal Justice Services.

A copy of your survey responses will be made available to your division superintendent through our secure website. If you are unable to print a copy of your survey responses using the instructions below, please contact your superintendent to request a copy of your survey results.

To make a copy of your survey responses for your records, please click on the "view response" button below. A printable version of your survey responses will appear titled, “Response Details.” Print this page using whatever method you typically use to print a webpage, such as: select file/print from your browser tool bar, or right click your mouse, then select "print" or select “save page as,” and then print after saving the page.

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, Shellie Evers at 804-629-7042 or shellie.evers@dcjs.virginia.gov, or James Christian at 804-357-0967 or james.christian@dcjs.virginia.gov.

Please be sure to close this browser window when you are finished.

**Resources:**

[**School Safety Audit Program**](https://www.dcjs.virginia.gov/virginia-center-school-and-campus-safety/virginia-school-safety-audit-program)

[Virginia School Safety Audit Infographic](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/publications/law-enforcement/_11.pdf)

[School Safety Audit Timeline Checklist](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/school_safety_audit_check_list_sept_2019.pdf)

**Crisis and Emergency Planning**

[Critical Incident Response Video](https://www.dcjs.virginia.gov/publication-link/critical-incident-response-video?width=675px&height=500px#content)

[Critical Incident Response for School Faculty and Staff](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/publications/law-enforcement/2019_criticalincidentresponsemanual.pdf)

[School Crisis, Emergency Management and Medical Emergency Response Plan](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/publications/law-enforcement/school-crisis-emergency-management-and-medical-emergency-response-plan_0.pdf)

[School Crisis, Emergency Management and Medical Emergency Response Plan-Quick Guide](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/publications/law-enforcement/school-crisis-emergency-management-and-medical-emergency-response-plan-quick-guide_0.pdf)

[Guidance on Emergency Manager Designee](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/law-enforcement/files/vcscs/guidance-formatted_emergency_manager_-_updated_may_2019.pdf)

[Guidance for School Systems in the Event Victims Arise from an Emergency 2018](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/publications/law-enforcement/_10.pdf)

[Virginia Educator's Drill Guide](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/publications/law-enforcement/virginia-educators-drill-guide_0.pdf)

[Guidance on Required Evacuation/Fire and Lockdown Drills 2016](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/law-enforcement/files/vcscs/guidance-required-drills-fall-2016_0.pdf) (update pending)

[Virginia Schools Bus Driver and Monitor Safety and Security Manual](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/publications/law-enforcement/virginia-schools-bus-driver-and-monitor-safety-and-security-manual_0.pdf)

[Virginia Schools Bus Driver and Monitor Video](https://www.dcjs.virginia.gov/publication-link/virginia-school-bus-driver-and-monitor-video?width=675px&height=500px#content)

[Academic Community Exercise Starter Kit](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/publications/law-enforcement/_13.pdf)

**Threat Assessment**

[Threat Assessment in Virginia Public Schools: Model Policies, Procedures and Guidelines - pdf](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/publications/law-enforcement/threat-assessment-model-policies-procedures-and-guidelinespdf.pdf)

[Threat Assessment in Virginia Public Schools: Model Policies, Procedures and Guidelines - MSWord](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/publications/law-enforcement/threat-assessment-model-policies-procedures-and-guidelinesdocx.docx)

[K-12 Threat Assessment in Virginia: A Prevention Overview for School Staff, Parents, and Community Members](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/publications/law-enforcement/k12-threat-assessment-prevention-overview.pdf)

[K-12 Threat Assessment Video](https://www.dcjs.virginia.gov/publication-link/k12-threat-assessment-video?width=675px&height=500px#content)

[K-12 Threat Assessment Form - Fillable pdf](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/publications/law-enforcement/fillable-threat-assessment-form-2016.pdf)

[K-12 Threat Assessment Form - Fillable MSWord](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/publications/law-enforcement/_0.docx)

[Technical Assistance for Threat Assessment and Management Teams for Virginia Schools and Institutions of Higher Education](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/law-enforcement/files/vcscs/technical-assistance-threat-assessment-and-management-teams-virginia-schools-and-institutions-higher.pdf)

[Threat Management Consultant - Request for Services](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/publications/law-enforcement/request-service-technical-assistance-threat-assessment-and-management-teams.pdf)

**Bullying and School Climate**

[School Climate, Student Engagement and Academic Achievement](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/publications/law-enforcement/_14.pdf)

[Preventing Teen Dating Violence: Interactive Guide on Informing Policy](https://vetoviolence.cdc.gov/apps/datingmatterspolicy/)

[US DOE School Climate and Discipline Packet](http://www2.ed.gov/policy/gen/guid/school-discipline/index.html)

[Suicide and bullying: Issue brief (SPRC)](http://www.sprc.org/library/Suicide_Bullying_Issue_Brief.pdf)

[Bullying: The Relationship Between Bullying and Suicide: What We Know and What it Means for Schools](http://www.cdc.gov/violenceprevention/pdf/bullying-suicide-translation-final-a.pdf)

[Model Policy to Address Bullying in Virginia Schools (DOE)](http://www.doe.virginia.gov/support/prevention/bullying/model_policy_to_address_bullying_in_va_schools.pdf)

[Preventing Youth Suicide - National Association of School Psychologists](http://www.nasponline.org/resources-and-publications/resources/school-safety-and-crisis/preventing-youth-suicide)

**Additional K-12 Resources**

[Juvenile Law Handbook for School Administrators](https://www.dcjs.virginia.gov/sites/dcjs.virginia.gov/files/publications/law-enforcement/_2.pdf)

[U.S. Department of Education Acts on School Safety Report Recommendation to Improve Understanding of Student Privacy Law](https://content.govdelivery.com/accounts/USED/bulletins/22eb76a)