Welcome to the 2017 Virginia School Safety Survey

This is a secure, web-based survey conducted by the Virginia Center for School and Campus Safety (VCSCS). Submission of this survey partially fulfills the Virginia School Safety Audit requirement. (Virginia Code §22.1-279.8) .

While answering the following survey questions, please base your responses on the conditions in your school during the 2016-2017 school year, unless otherwise instructed. You are required to provide a response to each survey question in order to complete the survey.

Should you have any questions or experience technical problems with the survey, contact the VCSCS: Jessica Smith at 804-786-5367 or jessica.smith@dcjs.virginia.gov, James Christian at 804-786-4303 or james.christian@dcjs.virginia.gov, or Donna Michaelis at 804-371-6506 or donna.michaelis@dcjs.virginia.gov .

Questions contained in this survey may elicit responses that are exempt from public release pursuant to Virginia Code Sections 2.2-3705.2 and 22.1-279.8. Each public body is responsible for exercising its discretion in determining whether such exemptions will be invoked. The DCJS Virginia Center for School and Campus Safety will report aggregate survey data for all schools 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* 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* to find the 4-digit 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?

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.
>>> 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	Charter
Middle	Magnet
High	Governor's
Combined Grades	Special Education
Primary	Correctional Education
Pre-Kindergarten	Adult Education
Alternative	School for the Deaf and Blind
Career/Technical/Vocational	Other (describe):

9. What grades were taught at your school during 2016-2017? (*select all that apply*)

Pre-Kindergarten	7th grade
Kindergarten	8th grade
1st grade	9th grade
2nd grade	10th grade
3rd grade	11th grade
4th grade	12th grade
5th grade	Not applicable
6th grade	

10. What was your fall membership enrollment number on September 30, 2016?

   (enter numeric response)

II.   STUDENT SAFETY CONCERNS

Discipline, Crime, and Violence data

Discipline, Crime, and Violence (DCV) offense and incident types reported in Safe Schools Information Resource (SSIR) are coded and grouped into nine offense categories that are aligned according to severity of offense.

11. For each Discipline, Crime, and Violence (DCV) offense category listed, indicate whether the number of occurrences at your school increased, decreased, or stayed the same when compared with the previous (2015-2016) school year.

This questions does not measure the number of occurrences, but instead measures whether there was change, and if so, the type of change.

Use the category "stayed the same" when the number of occurrences was the same as the previous year whether that means that there were occurrences or were no occurrences.

DCV Offense Category	Increased	Decreased	Stayed the Same
Weapons-Related Offenses	○	○	○
Offenses Against Students	○	○	○
Offenses Against Staff	○	○	○
Offenses Against Persons	○	○	○
Alcohol, Tobacco, and Other Drugs	○	○	○
Property Offenses	○	○	○
Disorderly Disruptive Behavior	○	○	○
Technology Offenses	○	○	○
Other Offenses	○	○	○

Mental Health

12. What was the number of full time and part time school-based mental health personnel (counselor, psychologist, social worker, substance abuse counselor) whose primary role was to provide counseling services to students in your school in 2016-2017?

We are interested in the amount of time that mental health personnel are available to the students in your school.

- *Use full time for those mental health personnel working full time at your school.*
- *Use part time for those mental health personnel working part time at your school, even if they are employed full time by your division or other agency.*

	Number in 2016-2017
Full time	
Part time	

III.   SCHOOL SECURITY/SURVEILLANCE/PLANNING

School Crisis/Emergency Management/Medical Response Plan

Virginia Code § 22.1-279.8 describes school crisis and emergency management plans and 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."*

13.   Did you have to *activate* any portion of your school's crisis management plan during the 2016-2017 school year due to an *actual* critical event or emergency?
   Yes
   No

Safety-Related Personnel

14. Does your school offer the DARE (Drug Abuse Resistance Education)/keepin' it REAL curriculum to students?

        Yes

        No

        (if 14 = yes)

        14a. Who teaches the DARE)/keepin' it REAL curriculum in your school? *(select one)*

                SRO assigned to our school

                DARE officer not assigned to our school as an SRO

                Other (describe) ___

15. Did you have safety/security personnel such as School Resource Officers (SROs), School Security Officers (SSOs), or other types of security personnel working at your school during the 2016-2017 school year (include both full time and part time personnel)?

     Yes

     No

        (if 15 = yes)

        15a. Was/were the safety/security personnel working at your school full time, part time, or did your school employ both full-time and part-time? *(Full-time = at your school at all times during each school day; Part-time = at your school only part of the school day or some days)*

                Full time

                Part time

                Used both full time and part time

         (If 15a = FT or both)

        15a-1. What type(s) of safety/security personnel were working full time at your school? *(select all that apply)*

                School Resource Officers (SROs)

                School Security Officers (SSOs)

                Other (describe) _____

         (If 15a = PT or both)

        15a-2. What type(s) of safety/security personnel were working part time at your school? *(select all that apply)*

                School Resource Officers (SROs)

                School Security Officers (SSOs)

                Other (describe) _____

15b. Does your school division have a current memorandum of understanding (MOU) with local law enforcement for the placement of school resource officers (SROs) in your school division?

> Yes
>
> No
>
> Don't know

> *(if 15b = yes)*
>
> 15b-1. How familiar are you with the roles and expectations set out in the MOU? *(select one)*
>
> > Not at all familiar
> >
> > Slightly familiar
> >
> > Somewhat familiar
> >
> > Moderately familiar
> >
> > Extremely familiar

> *(if 15a-1 and/or 15a-2= SSO)*
>
> 15a-3. Please provide the name, email address and law enforcement status for each SSO currently working at your school.
>
> *Include both full time and part time, for up to five (5) SSOs.*

SSO name	SSO email address	Was this SSO a former law enforcement officer?	
		○ Yes	○ No
		○ Yes	○ No
		○ Yes	○ No
		○ Yes	○ No
		○ Yes	○ No

> *(if 15a-1 and/or 15a-2= SRO)*
>
> 15a-4. Please provide the name and email address for each SRO currently working at your school.
>
> *Include both full time and part time, for up to five (5) SROs.*

SRO name	SRO email address

Safety-Related Conditions

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

Yes

No
Don't know

Safety-Related Training

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

    Alternatives to suspension and expulsion
    Crisis planning, prevention and response (to include school safety drills, bomb threat response, crisis response options, crisis intervention and recovery – all hazards)
    De-escalation and mediation
    Gang awareness
    Mental health problem awareness and recognition
    Positive Behavioral Interventions and Support (PBIS)
    Peer relations (dating violence, bullying, bystander intervention, conflict mediation, sexual harassment, etc.)
    Social media (Facebook, Snapchat, Twitter, YouTube, etc.)
    Threat assessment team training
    Trauma-informed care *trauma*
    Violence prevention training (including fighting, armed intruder, active shooter, other school violence)
    Other (describe) _____
    None of the above

IV.   THREAT ASSESSMENT

In addition to requiring the establishment of threat assessment teams, Virginia Code *§ 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.

18. For each of the listed "types of team member" categories, provide the number of team members who served on your school's threat assessment team during 2016-2017, and of those, the number that received threat assessment training in the last 3 years.

(There is no requirement that all positions are included on the team. If there are no team members of a specific category, enter 0.)

Types of Team Members	Number of Team Members	Number of Team Members Trained in Threat Assessment
Assistant principal		
Principal		
School counselor		
School psychologist		

School resource officer (SRO)		
School security officer (SSO)		
School social worker		
Teacher		
Other law enforcement officer (not SRO)		
Other administrator from school/division		
Other		

19. Does your school division have a policy or procedure for the maintenance of threat assessment case records?

    Yes

    No

    Don't know

20. Where was the *Student Threat Assessment and Response Reports* (threat assessment records) stored during 2016-2017? *(select all that apply)*

        In the student's general education file

        In the student's discipline file

        In the student's special education file

        In the student's health file

        With the threat assessment team

        With the school administration

        With the school counselor

        With law enforcement records

        In the school division's central office

        Other (describe) _____

        Not applicable (no cases in 2016-2017)

21. Which of the following anonymous report methods are available for students/parents/staff to report threats or concerning behavior? *(For your school and division, indicate which report methods are available for each, or if none are available.)*

	Comment box	Telephone hotline	Anonymous app	Email tip-line	Other	None of these
In our school	☐	☐	☐	☐	☐	☐
Division-wide	☐	☐	☐	☐	☐	☐

(if 21 "other" is checked)

21a. You indicated that your school and/or division uses another type of anonymous report method that wasn't listed. Please describe and note whether it is used at your school and/or if it used division-wide.

Threat Assessments Conducted in 2016-2017

For the next series of questions, we want to know about the threat assessments conducted by your school's threat assessment team. For questions 22 - 24, please report the number of cases regardless of their risk classification.

22. Based on the threat assessment cases conducted at your school in 2016-2017, how many cases involved threats made by persons from each of the following groups?

Enter the number of threat assessment cases that involved persons from each of the listed groups below. If no threat assessment cases involved persons from a listed group, enter 0 for number of cases conducted.

Type of Group	Number of Threat Assessment Cases Conducted
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	
ENTER TOTAL (sum of items 1 – 7)	

 (If 22 "someone else" > 0)
22a. You indicated that your school had a threat assessment case(s) that involved "someone else." Please describe this/these person(s)'s relationship(s) to the school. _____

Use the following definitions to answer questions 23 and/or 24:
Threatened others only: *threatened to harm someone other than self BUT DID NOT threaten suicide or self-harm.*
Threatened other(s) and self: *threatened to harm someone other than self AND threatened suicide or self-harm.*
Threatened self only: *threatened to commit suicide or self-harm.*

(if Q22 group 1 "student from your school" > 0)
23. In question 22, you indicated that your school conducted ___ threat assessment cases involving students form your school
For each type of threat listed below, indicate the number of threat assessment cases in which a *student from your school* threatened to act in the manner described.

The sum of the number of cases reported in Q23 should equal your response to group 1 reported in Q22 (the number of threat assessment cases involving "students from your school"). If there were no cases for a given type of threat, enter 0.

Type of threat	Number of cases
Threatened other (s) only	
Threatened other(s) and self	

Threatened self only	

(if sum of groups 2 – 7 in Q22 > 0)

24. In question 22, you indicated that your school conducted ____ threat assessment cases that did not involve students form your school

For each type of threat listed below, indicate the number of threat assessment cases in which a person who was NOT a student enrolled in your school in 2016-2017 threatened to act in the manner described.

*The sum of the number of cases reported in Q24 should equal the sum of groups 2 - 7 reported in Q22 (the sum of the threat assessment cases involving persons who were **not** students from your school). If there were no cases for a given type of threat, enter 0.*

Type of threat	Number of cases
Threatened other (s) only	
Threatened other(s) and self	
Threatened self only	

(if 22 >0)

25. Of the ____ threat assessment cases you reported in question 22, how many were classified at the highest threat level *(imminent/high risk, very serious substantive)* at any point in the threat assessment process? _____ *(if none, enter 0)*

- *The number entered in response to Q25 should not be higher than the total reported in Q22.*

(If 25 = 0, and if your school has no SROs or SSOs, skip to end of survey.
If 25 = 0 and your school does have SROs and/or SSOs, skip to section V: SRO/SSO Questions for DOJ)

(if 25=1)

25a. In the high threat level case you reported in question 25, did the threat ultimately occur (was carried out)?
Yes
No

- *The number entered in response to Q25a should not be higher than the number reported in Q25.*

(if 25a = no, and if your school has no SROs or SSOs, skip to end of survey.
If 25a = no and your school does have SROs and/or SSOs, skip to section V: SRO/SSO Questions for DOJ)

(if 25>1)

25b. Of the ____ cases you reported at the highest threat level in question 25, in how many cases did the threat ultimately occur? _____ *(if none, enter 0)*

- *The number entered in response to Q25a should not be higher than the number reported in Q25.*

(if 25b = 0, and if your school has no SROs or SSOs, skip to end of survey.
If 25b = 1, go to Q25a-1.
If 25b = 0 and your school does have SROs and/or SSOs, skip to section V: SRO/SSO Questions for DOJ)

(if 25a = Y or if 25b = 1)

25a-1. You indicated that in the high threat level case reported in question 25, 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, skip to end of survey or to section V: SRO/SSO Questions for DOJ)*

(if 25a-1 item 4 "was a student from your school the primary initiator of the event" = yes)
25a-2. Was this student able to continue attending your school at some time after the event?

Yes

No *(if selected , skip to end of survey or to section V: SRO/SSO Questions for DOJ)*

There was more than one student considered primary in the event. *(if selected, skip to end of survey or to section V: SRO/SSO Questions for DOJ)*

(if 25a-2 = yes)
25a-2.1. After what period of time was the student able to continue attending your school? *(select one)*

> 10 school days
> 11-45 school days
> More than 45 school days
> After alternative school placement *(if selected, skip to end of survey or to section V: SRO/SSO Questions for DOJ)*
> Other (describe) ___

(if 25a-.1 item 4 "after alternative school placement" was selected)
25a-2.2. For what period of time was the student assigned to alternative school placement? _____

Any other information about the event that you think would help explain the event to us: _____

(if 25b > 1)

Case 1
25b-1. You indicated that in ___ high threat level cases reported in question 25, a serious event ultimately occurred. You will be asked to briefly describe each of these events, one case a time. (For up to 10 events.)

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, skip to Case 2)*

 (if 25b-1 = student from your school = yes)

25b-2. Was this student able to continue attending your school at some time after the event?

Yes

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

There was more than one student considered primary in Case 1. *(if selected, skip to Case 2)*

(if 25b-2 = yes)
25b-2.1. After what period of time was the student in Case 1 able to continue attending your school? *(select one)*

    10 school days
    11-45 school days
    More than 45 school days
    After alternative school placement *(if selected, skip to Case 2)*
    Other (describe) ___

(if 25b-.1 = after alt)
25a-2.2. For what period of time was the student in Case 1 assigned to alternative school placement? _____

Any other information about the event(s) that you think would help explain the event to us: ___

(if 25b is = or > 2)
Case 2
25b-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, skip to Case 3 if 25b = or > 3; end survey if 25b = 2 and your school had no SROs or SSOs; if 25b = 2 and your school had SROs and/or SSOs, skip to section V: SRO/SSO Questions for DOJ)*

(if 25b-1 = student from your school = yes)
25b-2. Was this student able to continue attending your school at some time after the event?

Yes

No *(if selected, skip to Case 3 if 25b = or > 3; end survey if 25b = 2 and your school had no SROs or SSOs; if 25b = 2 and your school had SROs and/or SSOs, skip to section V: SRO/SSO Questions for DOJ)*

There was more than one student considered primary in Case 2. *(if selected, skip to Case 3 if 25b = or > 3; end survey if 25b = 2 and your school had no SROs or SSOs; if 25b = 2 and your school had SROs and/or SSOs, skip to section V: SRO/SSO Questions for DOJ)*

(if 25b-2 = yes)
25b-2.1. After what period of time was the student in Case 2 able to continue attending your school? *(select one)*

    10 school days
    11-45 school days

More than 45 school days

After alternative school placement *(if selected, skip to Case 3 if 25b = or > 3; end survey if 25b = 2 and your school had no SROs or SSOs; if 25b = 2 and your school had SROs and/or SSOs, skip to section V: SRO/SSO Questions for DOJ)*

Other (describe) ___

(if 25b-.1 = after alt)

25a-2.2. For what period of time was the student in Case 2 assigned to alternative school placement? ____

Any other information about the event(s) that you think would help explain the event to us: ___

(after completion of Case 2, go to Case 3 if 25b = or > 3; end survey if 25b = 2 and your school had no SROs or SSOs; if 25b = 2 and your school had SROs and/or SSOs, skip to section V: SRO/SSO Questions for DOJ)

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

Case 3 *(if 25b = or > 3 cases)*
Case 4 *(if 25b = or > 4 cases)*
Case 5 *(if 25b = or > 5 cases)*
Case 6 *(if 25b = or > 6 cases)*
Case 7 *(if 25b = or > 7 cases)*
Case 8 *(if 25b = or > 8 cases)*
Case 9 *(if 25b = or > 9 cases)*
Case 10 *(if 25b = or > 10 cases)*

(if Q15a-1 or 15a-2 = SRO or SSO)

V. SRO/SSO Questions for Department of Justice (DOJ) funded study:
An Investigation of School Resource and Safety Programs - Policy and Practice in Virginia

> *The Virginia Department of Criminal Justice Services is partnering with Virginia Tech on an U. S. Department of Justice grant funded study on **An Investigation of School Resource and Safety Programs Policy and Practice in Virginia** in response to the call for applications for the National Institutes of Justice FY 2016 Comprehensive School Safety Initiative (Award No. 2016-CK-BX-0021).*

> *The study is investigating school resource and school safety programs, policy, and practice in Virginia and is likely to greatly improve understanding of current practices in Virginia. Please answer the following questions regarding SROs and/or SSOs assigned to your school.*

You indicated in an earlier school survey questions that your school had a SRO working at the school during the 2016-2017 school year. Please answer a few questions about the SRO program for the NIJ study underway at Virginia Tech.

(if 15a-1 or 15a-2 = SRO)

SRO1. For the most recently assigned SRO at your school, was the principal or assistant principal a part of the selection process?

 Yes
 No
 Other:_____

SRO2. For the most recently assigned SRO at your school, who determined the duties of the job?
(For each listed person/entity, indicate how much they contributed to determining the SRO's job duties.)

	None 1	2	Some 3	4	All 5
Law enforcement agency	○	○	○	○	○
School division or central office administrator	○	○	○	○	○
Principal or assistant principal at your school	○	○	○	○	○
Someone else	○	○	○	○	○

(if SRO2 someone else ≠ 1)
SRO2a. You indicated that someone else was involved in determining the duties for your school's SRO. Please tell us who they are and include their title and agency. _____

SRO3. Think of the formal trainings or workshops you have personally received about the role and duties of a SRO. Who provided this training?

 Local law enforcement agency
 Local school leader
 I had training but I don't know who provided it
 I have not had formal training specifically about the role and duties of a SRO.
 Other: _____

SRO4. How often does the principal or assistant principal typically communicate with the SRO(s) in your school?

Types of meetings/contacts	Frequency of meeting/contact						
	Never	Once a year	Once a month	Once a week	Once a day	Hourly	Don't Know
Individual meetings	○	○	○	○	○	○	○
Staff/group meetings	○	○	○	○	○	○	○
Phone/radio contact	○	○	○	○	○	○	○

SRO5. How often does the local law enforcement agency solicit feedback about the performance of the SROs in your school? *(select one)*
 Never
 Once a year
 Once a month
 Once a week

Please provide us with your perspective on the following items regarding SRO training:

SRO6. Teachers would benefit from more training about the role of the SROs in our school. *(select one)*
    Strongly Agree
    Agree
    Neutral
    Disagree
    Strongly Disagree

SRO7. SROs would benefit from more training on the following topics. *(Select all that apply)*

    Roles and responsibilities of the SRO job
    Establishing effective working relationships with parents
    Teaching children and adolescents
    Cultural diversity
    Child or adolescent development
    Mental health issues in childhood and adolescence
    Information about drugs, alcohol, and addictions
    Counseling/helping skills and techniques
    Bullying
    Child abuse and neglect
    Crisis and emergency management planning
    Dangerous/threatening students
    Victims' rights
    Youth gangs
    Evaluation of the safety/security programs
    Working with students with special needs (e.g. developmental delays, autism, previous trauma)
    Other: ___
    None of the above

You indicated in an earlier school survey questions that your school had a SSO working at the school during the 2016-2017 school year. Please answer a few questions about the SSO program for the NIJ study underway at Virginia Tech.

(if 15a-1 or 15a-2 = SSO)

SSO1. For the most recently assigned SSO at your school, was the principal or assistant principal a part of the selection process?
    Yes
    No
    Other: _____

SSO2. For the most recently assigned SSO at your school, who determined the duties of the job?
(For each listed person/entity, indicate how much they contributed to determining the SSO's job duties.)

	None		**Some**		**All**

	1	2	3	4	5
School division or central office administrator	○	○	○	○	○
Principal or assistant principal at your school	○	○	○	○	○
Someone else	○	○	○	○	○

(if SSO2 someone else ≠ 1)
SSO2a. You indicated that someone else was involved in determining the duties for your school's SSO. Please tell us who they are and include their title and agency. _____

SSO3. Think of the formal trainings or workshops you have personally received about the role and duties of a SSO. Who provided this training?

    Local law enforcement agency
    Local school leader
    I had training but I don't know who provided it.
    I have not had formal training specifically about the role and duties of a SSO.
    Other: _____

SSO4. How often does the principal or assistant principal typically communicate with the SSO(s) in your school?

Types of meetings/contacts	Frequency of meeting/contact						
	Never	**Once a year**	**Once a month**	**Once a week**	**Once a day**	**Hourly**	**Don't Know**
Individual meetings	○	○	○	○	○	○	○
Staff/group meetings	○	○	○	○	○	○	○
Phone/radio contact	○	○	○	○	○	○	○

SSO5. Are the performance evaluations of the SSO(s) in your school done at the school or division level? *(select one)*
    School level
    Division level
    Not applicable
    Other (describe):

Please provide us with your perspective on the following items regarding SSO training:

SSO6. Teachers would benefit from more training about the role of the SSOs in our school. *(select one)*
    Strongly Agree
    Agree
    Neutral
    Disagree
    Strongly Disagree

SSO7. SSOs would benefit from more training on the following topics. *(Select all that apply)*

Roles and responsibilities of the SSO job
Establishing effective working relationships with parents
Teaching children and adolescents
Cultural diversity
Child or adolescent development
Mental health issues in childhood and adolescence
Information about drugs, alcohol, and addictions
Counseling/helping skills and techniques
Bullying
Child abuse and neglect
Crisis and emergency management planning
Dangerous/threatening students
Victims' rights
Youth gangs
Evaluation of the safety/security programs
Working with students with special needs (e.g. developmental delays, autism, previous trauma)
Other: ___
None of the above

Thank you for completing the 2017 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.