

ARLINGTON PUBLIC SCHOOLS
Policy Implementation Procedures
25-1.17 Student Safety - Bullying/Harassment Prevention

Arlington Public Schools strives to develop and maintain a climate of respect within each school. This includes adult modeling of respectful behavior and caring responses to student concerns. APS will implement comprehensive procedures to reduce the incidence of bullying and harassment within the school division. Arlington Public Schools will establish student behavioral expectations that address bullying/harassment; provide ongoing staff and student training; establish procedures for reporting bullying/harassment; and provide consistent consequences when incidents of bullying occur.

Guidelines

Student instruction/awareness. Ongoing intentional instruction will be provided to students K-12 through character education, classroom guidance, health curriculum or other appropriate venues. This instruction will include age-appropriate instruction regarding peaceful resolution of conflicts; laws and policy related to conduct; definitions of bullying/harassment; reporting procedures; the role of bystanders in bully prevention; and strategies for building positive, healthy relationships.

Staff awareness/action. All staff members who observe, suspect or become aware of acts of bullying will intervene immediately. Acts of bullying will be reported to the building administrator. School personnel will receive in-service training on anti-bullying policy to ensure that a consistent approach is adopted on a division-wide basis.

Complaint procedure. All students will be informed of their right to protection against bullying behaviors and the right to file a complaint if they believe they have been the victim of bullying behavior. School administrators are responsible for investigating each complaint, determining if the complaint is legitimate, and taking appropriate corrective action. Any student may initiate a complaint by talking to school staff. All staff will be informed of a student's right to initiate a complaint. Administrators will maintain a written record of reported incidents of bullying, including dates, times, places, witness names, and other information about the incident. Parents/guardians of the victims of bullying and the alleged bully will be notified within two school days of the incident. The confidentiality of all parties will be protected to the extent possible.

Disciplinary actions. Disciplinary actions will be enforced in accordance with APS discipline policies, with consideration given to the seriousness of the incident, prior incidents, and the need to protect the victim and other students. Student victims will be protected against retaliation from the accused. Any attempt of retaliation will be addressed by appropriate disciplinary actions.

Assistance for alleged bullies and victims. Victims of bullying/harassment will be offered counseling services, as appropriate. In addition to disciplinary actions, school staff will offer assistance to students who bully/harass others, including, as appropriate, behavior intervention plans, referrals to multi-disciplinary assistance teams, or referrals to counseling services.

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Notification. Students and parents will be notified by the *Arlington Public Schools Handbook* that bullying behaviors will not be tolerated. School administrators will use announcements, newsletters, faculty meetings, or other appropriate means to inform students, staff and parents/guardians of the prohibition against bullying/harassment and the procedure for reporting complaints. Acts of bullying which constitute a criminal offense will be reported to local law enforcement. Except as may be prohibited by law, administrators will also immediately report any act that may constitute a criminal offense to the parents of any minor student who is the victim of such act.

Evaluation. The Arlington Public Schools will monitor the effectiveness of bullying prevention efforts. Incidents of bullying will be reported through district surveys and disciplinary reports.

References

Code of Virginia, Sections 22.1-279.6, 22.1-208.01, and 22.1-279.3:1
“Student Conduct Policy Guidelines,” Virginia Board of Education
25-1.15 Student Sexual Harassment Policy
25-1.3 Discipline Policy

Bully Incident Form

APS PIP 25-1.17

Date:	Time:														
Name(s) of reporting student(s):															
Name(s) of student(s) who allegedly bullied:															
Description of problem: Date _____ Time _____ Location _____ <u>Describe what happened:</u>															
Witness(es):															
Steps staff member has taken to remedy: <table style="width: 100%; border: none;"><tr><td style="width: 60%;"><input type="checkbox"/> Spoke to student who was alleged victim</td><td>Date:</td></tr><tr><td><input type="checkbox"/> Spoke to student who perpetrated bullying</td><td>Date:</td></tr><tr><td><input type="checkbox"/> Called parent of reporting student (victim)</td><td>Date:</td></tr><tr><td><input type="checkbox"/> Called parent of student who allegedly bullied</td><td>Date:</td></tr><tr><td><input type="checkbox"/> Wrote referral to administrator</td><td>Date:</td></tr><tr><td><input type="checkbox"/> Counseling referral</td><td>Date:</td></tr><tr><td><input type="checkbox"/> Other (please describe):</td><td></td></tr></table>		<input type="checkbox"/> Spoke to student who was alleged victim	Date:	<input type="checkbox"/> Spoke to student who perpetrated bullying	Date:	<input type="checkbox"/> Called parent of reporting student (victim)	Date:	<input type="checkbox"/> Called parent of student who allegedly bullied	Date:	<input type="checkbox"/> Wrote referral to administrator	Date:	<input type="checkbox"/> Counseling referral	Date:	<input type="checkbox"/> Other (please describe):	
<input type="checkbox"/> Spoke to student who was alleged victim	Date:														
<input type="checkbox"/> Spoke to student who perpetrated bullying	Date:														
<input type="checkbox"/> Called parent of reporting student (victim)	Date:														
<input type="checkbox"/> Called parent of student who allegedly bullied	Date:														
<input type="checkbox"/> Wrote referral to administrator	Date:														
<input type="checkbox"/> Counseling referral	Date:														
<input type="checkbox"/> Other (please describe):															
Outcome of investigation/intervention:															

Signature _____ Date: _____

Return completed form to: Pupil Services, APS Department of Student Services, Education Center
1426 North Quincy Street, Arlington, VA 22207