

Shore Educational Collaborative



Bullying Prevention and Intervention Plan

2015-2016

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Bullying Intervention and Prevention Plan

Shore Educational Collaborative is committed to providing our students equal educational opportunities and a safe learning environment free from bullying and cyberbullying, where all school community members treat each other with respect and appreciate the rich diversity in our school and programs. This commitment is an integral part of the Collaborative's comprehensive efforts to promote learning, eliminate all forms of violent, harmful, and disruptive behavior and enable students to achieve their personal and academic potential and become successful citizens in our increasingly diverse society.

We recognize that certain students may be more vulnerable to become targets of bullying, harassment, or teasing based on actual or perceived characteristics, including race, color, religion, ancestry, national origin, sex, socioeconomic status, homelessness, academic status, gender identity or expression, physical appearance, or sensory disability, or by association with a person who has or is perceived to have one or more of these characteristics. The Collaborative will take specific steps to create a safe, supportive environment for vulnerable populations in the school community, and provide all students with the skills, knowledge, and strategies to prevent or respond to bullying, harassment, or teasing. The Collaborative expects that all members of the school community will treat each other in a civil manner and with respect for differences.

Shore Educational Collaborative will not tolerate any unlawful or disruptive behavior, including any form of bullying and cyberbullying in our programs or school-related activities. The Collaborative will promptly investigate all reports and complaints of bullying and cyberbullying and take prompt, effective action to end that behavior and prevent its reoccurrence. Action will include, where appropriate, referral to a law enforcement agency. Shore Educational Collaborative will support this commitment in all aspects of its activities, including its curricula, instructional programs, staff development, extracurricular activities, and parental involvement.

Definitions

“Aggressor” is a student or a member of school staff who engages in bullying, cyberbullying or retaliation towards a student.

“Target” is a student against whom bullying, cyberbullying or retaliation has occurred.

“Bullying” is defined as the repeated use by one or more students of a written, verbal or electronic expression or a physical act or gesture, or any combination thereof, directed at a target that causes physical or emotional harm to the target or damage to the target's property, places the target in reasonable fear of harm to self or of damage to his/her property, creates a hostile environment at school for the target, infringes on the rights of the target at school and materially and substantially disrupts the education process or the orderly operation of a school.

“Cyberbullying” is defined as bullying through the use of technology or electronic devices such as telephones, cell phones, computers and the internet. It includes, but shall not be limited to, transfer of signs, signals, writing, images, sounds, data or intelligence of any nature transmitted in whole or in part by a wire, radio, electromagnetic, photo electronic or photo

optical system, including, but not limited to, electronic mail, internet communications, instant messages or facsimile communications.

“Cyberbullying” shall also include the creation of a web page or blog in which the creator assumes the identity of another person or the knowing impersonation of another person as the author of posted content or messages, if the creation or impersonation creates any of the conditions enumerated in clauses (i) to (v), inclusive, of the definition of bullying. “Cyberbullying” also includes the distribution by electronic means of a communication to more than one person or the posting of material on an electronic medium that may be accessed by one or more persons, if the distribution or posting creates any of the conditions enumerated in clauses (i) to (v) inclusive, of the definition of bullying.

“Retaliation” is defined as any form of intimidation, reprisal or harassment by a current student or former student under the age of 21 directed against a person who reports bullying, provides information during an investigation of bullying, or witnesses or has reliable information about bullying. Retaliation is prohibited. Reports of bullying and retaliation may be made anonymously; provided, however, that no disciplinary action shall be taken against a student solely on the basis of an anonymous report. A student who knowingly makes a false accusation of bullying or retaliation shall be subject to disciplinary action.

“Hostile Environment” is defined as a situation in which bullying causes the school environment to be permeated with intimidation, ridicule, or insult that is sufficiently severe or pervasive to alter the conditions of a student’s education.

“Staff” includes, but is not limited to, educators, administrators, counselors, school nurses, cafeteria workers, custodians, bus drivers, and athletic coaches, advisors to extracurricular activities, support staff, or paraprofessionals.

Prohibition of Bullying, Cyberbullying and Retaliation

Acts of bullying, cyberbullying, and retaliation are prohibited on school grounds, property immediately adjacent to school grounds, at a school sponsored or school related activity, function or program whether on or off school grounds, at a school bus stop, on a school bus or other vehicle owned, leased or used by a school district or school, or through the use of technology or an electronic device owned, leased or used by a school district or school and at a location, activity, function or program that is not school related, or through the use of technology or an electronic device that is not owned, leased or used by a school district or school, if the bullying creates a hostile environment at school for the target, infringes on their rights at school or materially and substantially disrupts the education process or the orderly operation of a school. Nothing contained herein shall require schools to staff any non-school related activities, functions, or programs.

The Development of the Plan

The Collaborative has developed this Plan in consultation with teachers, school staff, paraprofessional support personnel, administrators, community representatives and a local law

enforcement representative. A period of public comment was held prior to adoption of the Plan by first the Operating Committee, (Special Education Administrators from each of the member districts) and then by the Board of Clinical Coordinators, a school committee member from each of the Collaborative's member districts as well as the Executive Clinical Coordinator of Shore Educational Collaborative. This Bullying Prevention and Intervention Plan is a comprehensive approach to addressing bullying and cyberbullying, and the Collaborative is committed to working with students, staff, families, law enforcement agencies, and the community to prevent issues of violence.

The students and their parents/guardians will receive annual notice of the relevant student-related section of the Plan annually. Faculty and staff have been, and will continue to be, trained annually on the Plan. The Clinical Coordinator is responsible for the implementation and oversight of the Plan.

The Collaborative provides all staff with an annual written notice of the Plan by publishing information about it, including sections related to staff duties, in the employee handbook. The Collaborative has posted the Bullying Prevention and Intervention Plan on its website at www.shorecollaborative.org. There is an assigned telephone number (781-349-5726) and an email address (reporttous@shorecollaborative.org) for bullying reporting purposes.

Annual collection of Collaborative data on the prevalence and characteristics of bullying is used to guide on-going local decision-making related to surveillance, prevention, intervention, and professional development.

Planning and Oversight

The Clinical Coordinator or designee of Shore Educational Collaborative is responsible for the following tasks under the Plan:

- ✓ receiving reports on bullying after the Educational Coordinator assigned to the classroom(s) has obtained them from the staff
- ✓ collecting and analyzing Collaborative wide data on bullying to assess the present problem and to measure improved outcomes
- ✓ creating a process for recording and tracking incident reports, and for accessing information related to targets and aggressors
- ✓ planning for the ongoing professional development that is required by the law
- ✓ planning supports that respond to the needs of targets and aggressors
- ✓ choosing and implementing the curricula that the Collaborative will use
- ✓ developing new or revising current policies and protocols under the Plan, including an Internet safety policy, and designating key staff to be in charge of implementation of them
- ✓ amending student and staff handbooks and codes of conduct
- ✓ leading the parent or family engagement efforts and drafting parent information materials
- ✓ reviewing and updating the Plan each year or more frequently if needed

Training and Professional Development

The Collaborative's Plan includes annual training prior to the start of the academic year for all school staff that will include staff duties under the Plan, an overview of the steps that the Clinical Coordinator or designee will follow upon receipt of a report of bullying or retaliation, and an overview of the bullying prevention curricula to be offered at all grades throughout the Collaborative. Staff members hired after the start of the school year are required to participate in school-based training during the school year in which they are hired, unless they can demonstrate participation in an acceptable and comparable program within the last two years.

The Plan will include ongoing professional development in order to establish a common understanding of tools necessary for staff to create a school climate that promotes safety, civil communication, and respect for differences. Professional development will build the skills of staff members to prevent, identify, and respond to bullying. As required by M.G.L. c. 71, § 370, the content of professional development is informed by research and includes information on developmentally and/or age appropriate strategies to prevent bullying; developmentally and/or age appropriate strategies for immediate, effective interventions to stop bullying incidents; information regarding the complex interaction and power differential that can take place between and among an aggressor, target, and witnesses to the bullying; research findings on bullying, including information about specific categories of students who have been shown to be particularly at risk for bullying in the school environment; information on the incidence and nature of cyberbullying; and Internet safety issues as they relate to cyberbullying.

Professional development will address ways to prevent and respond to bullying or retaliation for students with disabilities that must be considered when developing students' Individualized Education Programs (IEPs).

Access to Resources and Services

Identifying Resources

The Collaborative is staffed such that it is able to identify and to provide counseling and other services for targets, aggressors, and their families. The staffing pattern supports the creation of a positive school environment by focusing on early interventions and intensive services. There are no resource and service gaps.

Counseling and Other Services

Referral to Outside Services

Support services are available that are culturally and linguistically appropriate within the Collaborative and member districts. Linkages with community based organizations, including North Suffolk Mental Health, Eliot Community Human Services, Wayside Youth and Family Support Network have already been established given the nature of the students the Collaborative serves. Member district staff and service providers will assist the Collaborative

in developing safety plans for students who have been targets of bullying or retaliation, providing social skills programs to prevent bullying, and offering education and/or intervention services for students exhibiting bullying behaviors. The Collaborative staff is skilled in the development and implementation including, but not limited to, individual behavioral intervention plans, social skills groups, and individually focused curricula. The Collaborative has an established referral protocol for referring students and families to outside services.

Students with Disabilities

As required by M.G.L. c. 71B, § 3, as amended by Chapter 92 of the Acts of 2010, when the IEP Team determines the student has a disability that affects social skills development or the student may participate in or is vulnerable to bullying, harassment, or teasing because of his/her disability, the Team will consider what should be included in the IEP to develop student's skills and proficiencies to avoid and respond to bullying, harassment, or teasing.

Academic and Non-Academic Activities

The Collaborative provides developmentally or age-appropriate instruction on bullying prevention in each appropriate classroom. Instruction includes individual classroom approaches, whole school initiatives, and focused intervention for bullying prevention and social skills development whenever appropriate. The Collaborative's established priorities include bullying prevention curricula that is informed by current research which, among other things, emphasizes the following approaches:

- ✓ social emotional learning curriculum – use of group discussions
- ✓ self-determination, person-centered planning, targeted skill-building
- ✓ using scripts and role plays to develop skills
- ✓ Self-evaluation and strategic solution-focused problem solving
- ✓ empowering students to take action by knowing what to do when they witness other students engaged in acts of bullying or retaliation, including seeking adult assistance
- ✓ helping students understand the dynamics of bullying and cyberbullying, including the underlying power imbalance
- ✓ emphasizing cyber safety and digital citizenship, including safe and appropriate use of electronic communication technologies
- ✓ enhancing students' skills for engaging in healthy relationships and respectful communications
- ✓ engaging students in a safe, supportive school environment that is respectful of diversity and difference

Initiatives will also teach students about the student-related sections of the Bullying Prevention and Intervention Plan. The Clinical Coordinator and Educational Coordinators in collaboration with the mental health clinicians require the Plan be reviewed with students at the onset of each school year and upon the admission of new students.

At least once every four years beginning with the 2015/16 school year, the Collaborative will administer a Department of Elementary and Secondary Education-developed student survey to

assess school climate and the prevalence, nature, and severity of bullying in our school. Additionally, the Collaborative will annually report bullying incident data to the Department.

The Collaborative's general positive behavioral support system is integral to establishing a safe and supportive school environment. This support system includes, but is not limited to, the following:

- ✓ setting clear expectations for students and establishing school and classroom routines
- ✓ creating safe school and classroom environments for all students, including for students with disabilities, lesbian, gay, bisexual, transgender students, and homeless students
- ✓ using appropriate and positive responses and reinforcement, even when students require discipline
- ✓ using positive behavioral supports
- ✓ encouraging adults to develop positive relationships with students
- ✓ modeling, teaching, and rewarding pro-social, healthy, and respectful behaviors
- ✓ using positive approaches to behavioral health, including collaborative problem-solving, conflict resolution training, teamwork, and positive behavioral supports that aid in social and emotional development
- ✓ using the Internet safely
- ✓ supporting students' interest and participation in non-academic and extracurricular activities, particularly in their areas of strength
- ✓

Procedures for Reporting and Responding to Bullying and Retaliation

Reports of bullying or retaliation may be made by staff, students, parents or guardians, or others, and may be oral or written. Oral reports made by or to a staff member are recorded in writing. Staff members are required to report immediately to the Clinical Coordinator or designee any instance of bullying or retaliation the staff member becomes aware of or witnesses. Reports made by students, parents or guardians, or other individuals who are not Collaborative staff members, may be made anonymously. The Collaborative has made a variety of reporting resources available to the school community including, but not limited to, an Incident Report Form and a voice mailbox.

Use of the Shore Educational Collaborative Incident Report Form is not required as a condition of making a report. The Collaborative: 1) includes a copy of the Incident Reporting Form in the beginning of the year packets for students and parents or guardians; 2) makes it available in the school's reception area, the offices of the clinical staff, the school nurses' offices, and other locations determined by the Clinical Coordinator or designee; and 3) posts it on the school's website. The Shore Educational Collaborative Incident Report Form is made available in the most prevalent language(s) of origin of students and parents or guardians.

At the beginning of each school year, the Collaborative provides administrators, staff, students, and parents or guardians, with written notice of its policies for reporting acts of bullying and retaliation. A description of the reporting procedures and resources, including the name and contact information of the Clinical Coordinator or designee, is incorporated in student and staff

handbooks, on the Collaborative's website, and in information about the Plan that is made available to parents or guardians.

Reporting by Staff

A staff member reports immediately to the Clinical Coordinator or designee when he/she witnesses or becomes aware of conduct that may be bullying or retaliation. The requirement to report to the Clinical Coordinator or designee does not limit the authority of the staff member to respond to behavioral or disciplinary incidents consistent with Collaborative policies and procedures for behavior management and discipline.

Reporting by Students, Parents or Guardians, and Others

The Collaborative expects students, parents or guardians, and others who witness or become aware of an instance of bullying or retaliation involving a student to report it to the Clinical Coordinator or designee. Reports may be made anonymously, but no disciplinary action is taken against an alleged aggressor solely on the basis of an anonymous report. Students, parents or guardians, and others may request assistance from a staff member to complete a written report. Students are provided practical, safe, private and age-appropriate ways to report and discuss an incident of bullying with a staff member, or with the Clinical Coordinator or designee.

Responding to a Report of Bullying or Retaliation

Before fully investigating the allegations of bullying or retaliation, the Clinical Coordinator or designee takes steps to assess the need to restore a sense of safety to the alleged target and/or to protect the alleged target from possible further incidents. Responses to promote safety may include, but not be limited to, creating a personal safety plan; pre-determining seating arrangements for the target and/or the aggressor in the classroom, at lunch, during earned/unearned breaks; identifying a staff member who will act as a "safe person" for the target; and altering the aggressor's schedule and access to the target. District representatives are notified in order to contact transportation vendors in the event of a situation that occurs during daily transportation to and from school. The Clinical Coordinator or designee takes additional steps to promote safety during the course of and after the investigation, as necessary.

The Clinical Coordinator or designee has implemented appropriate strategies for protecting from bullying or retaliation a student who has reported bullying or retaliation, a student who has witnessed bullying or retaliation, a student who provides information during an investigation, or a student who has reliable information about a reported act of bullying or retaliation.

Obligations to Notify Others

Notice to Parents or Guardians

Upon determining that bullying or retaliation has occurred, the Clinical Coordinator or designee have and will continue to promptly notify the parents or guardians of the target and the aggressor of this, and of the procedures for responding to it. There may be circumstances in which the Clinical Coordinator or designee contacts parents or guardians prior to any investigation. Notice is consistent with state regulations of 603 CMR 49.00.

Notice to Another School or District

If the reported incident involves students from more than one school district, charter school, non-public school, approved private special education day or residential school, or collaborative school, the Clinical Coordinator or designee first informed of the incident promptly notifies by telephone the Clinical Coordinator or designee of the other school(s) of the incident so that each school may take appropriate action. All communications are in accordance with state and federal privacy laws and regulations, and 603 CMR 49.00.

Notice to Law Enforcement

At any point after receiving a report of bullying or retaliation, including after an investigation, if the Clinical Coordinator or designee has a reasonable basis to believe that criminal charges may be pursued against the aggressor, the Clinical Coordinator notifies the local law enforcement agency. Notice is consistent with the requirements of 603 CMR 49.00 and locally established agreements with the local law enforcement agency. Also, if an incident occurs on school grounds and involves a former student under the age of 21 who is no longer enrolled in school, the Clinical Coordinator or designee contacts the local law enforcement agency if he or she has a reasonable basis to believe that criminal charges may be pursued against the aggressor.

In making this determination, the Clinical Coordinator will, consistent with the Plan and with applicable Collaborative policies and procedures, consult with the local law enforcement personnel, if any, and other individuals the Clinical Coordinator or designee deems appropriate.

Investigation

The Clinical Coordinator or designee investigates promptly all reports of bullying or retaliation and, in doing so, considers all available information known, including the nature of the allegation(s) and the ages of the students involved.

During the investigation the Clinical Coordinator or designee interviews students, staff, witnesses, parents or guardians, and others as necessary. The Clinical Coordinator or designee (or whoever is conducting the investigation) reminds the alleged aggressor, target, and witnesses that retaliation is strictly prohibited and results in disciplinary action.

Interviews may be conducted by the Clinical Coordinator or designee, other staff members as determined by the Clinical Coordinator or designee, and in consultation with the school counselor, as appropriate. To the extent practicable, and given his/her obligation to investigate and address the matter, the Clinical Coordinator or designee maintains confidentiality during the investigative process. The Clinical Coordinator or designee retains a written record of any investigation.

Procedures for investigating reports of bullying and retaliation are consistent with the Collaborative's policies and procedures for investigations. If necessary, the Clinical Coordinator or designee consults with legal counsel about the investigation.

Determinations

The Clinical Coordinator or designee makes a determination based upon all of the facts and circumstances. If, after investigation, bullying or retaliation is substantiated, the Clinical Coordinator or designee takes steps reasonably calculated to prevent recurrence and to ensure that the target is not restricted in participating in school or in benefiting from school activities. The Clinical Coordinator or designee will: 1) determines what remedial action is required, if any, and 2) determines what responsive actions and/or disciplinary action is necessary.

Depending upon the circumstances, the Clinical Coordinator or designee may choose to consult with the students' teacher(s) and/or school counselor, and the target's or aggressor's parents or guardians, to identify any underlying social or emotional issue(s) that may have contributed to the bullying behavior and to assess the level of need for additional social skills development.

The Clinical Coordinator or designee promptly notifies the parents or guardians of the target and the aggressor about the results of the investigation and, if bullying or retaliation is found, what action is being taken to prevent further acts of bullying or retaliation. All notice to parents must comply with applicable state and federal privacy laws and regulations. Because of the legal requirements regarding the confidentiality of student records, the Clinical Coordinator or designee cannot report specific information to the target's parent or guardian about the disciplinary action taken unless it involves a "stay away" order or other directive that the target must be aware of in order to report violations.

The Clinical Coordinator or designee shall inform the parent or guardian of the target about the Department of Elementary and Secondary Education's Problem Resolution System and the process for accessing that system, regardless of the outcome of the bullying determination. (See below.)

Any parent wishing to file a claim/concern or seeking assistance outside of the district may do so with the Department of Elementary and Secondary Education Program Resolution System (PRS). That information can be found at: <http://www.doe.mass.edu/pqa>, emails can be sent to compliance@doe.mass.edu or individuals can call 781-338-3700. Hard copies of the DESE'S Problem Resolution System Intake Information Form are available at the office of the Executive Director of Shore Collaborative.

Responses to Bullying

Upon the Clinical Coordinator or designee determining that bullying or retaliation has occurred, the law requires that the Collaborative use a range of responses that balance the need for accountability with the need to teach appropriate behavior. Skill-building approaches that the Clinical Coordinator or designee may consider include:

- ✓ offering individualized skill-building sessions based on the Collaborative's anti-bullying curricula
- ✓ providing relevant educational activities for individual students or groups of students, in consultation with appropriate school personnel

- ✓ implementing a range of academic and nonacademic positive behavioral supports to help students understand pro-social ways to achieve their goals
- ✓ meeting with parents and guardians to engage parental support and to reinforce the anti-bullying curricula and social skills building activities at home
- ✓ adopting behavioral plans to include a focus on developing specific social skills
- ✓ making a referral for evaluation
- ✓ making a referral to a community service agency

Taking Disciplinary Action

If the Clinical Coordinator or designee decides that disciplinary action is appropriate, the disciplinary action is determined on the basis of facts found by the Clinical Coordinator or designee, including the nature of the conduct, the age of the student(s) involved, and the need to balance accountability with the teaching of appropriate behavior. Discipline is consistent with the Plan, the Collaborative's code of conduct and the federal Individuals with Disabilities Education Improvement Act (IDEA). If the Clinical Coordinator or designee determines that a student knowingly made a false allegation of bullying or retaliation, that student may be subject to disciplinary action.

Promoting Safety for the Target and Others

The Clinical Coordinator or designee considers what adjustments, if any, are needed in the school environment to enhance the target's sense of safety and that of others as well. One strategy that the Clinical Coordinator or designee may use is to increase adult supervision at transition times and in locations where bullying is known to have occurred or is likely to occur. Within a reasonable period of time following the determination and the ordering of remedial and/or disciplinary action, the Clinical Coordinator or designee contacts the target to determine whether there has been a recurrence of the prohibited conduct and whether additional supportive measures are needed. If so, the Clinical Coordinator or designee works with appropriate school staff to implement them immediately.

Collaboration with Families

The Collaborative engages and collaborates with students' families in order to increase our capacity to prevent and respond to bullying. Parents and guardians are informed about the bullying prevention and intervention curricula used by the Collaborative including: (i) how parents and guardians can reinforce the curricula at home and support the Collaborative's plan; (ii) the dynamics of bullying; and (iii) online safety and cyberbullying. Parents and guardians are also notified in writing each year about the student related sections of the Bullying Prevention and Intervention Plan, in the language(s) most prevalent among the parents or guardians. The Collaborative specific approaches to partnering with families take into account age, climate, socio-economic factors, linguistic, and cultural make-up of the students and their parents/guardians.

Parent education and resources

The member districts and/or the Collaborative offer education programs for parents and guardians that are focused on the parental components of the anti-bullying curricula and any social competency curricula used by the district or the Collaborative. The programs are offered in collaboration with the member districts' PTO, PTA, School Councils, Special Education Parent Advisory Council, or similar organizations.

Notification Requirements

Each year the Collaborative informs parents/guardians of enrolled students about the anti-bullying curricula that are being used. This notice includes information about the dynamics of bullying, including cyberbullying and online safety. The Collaborative sends parents written notice each year about the student-related sections of the Plan and the Collaborative's Internet safety policy. All notices and information made available to parents or guardians are in hard copy and electronic formats, and are available in the language(s) most prevalent among parents or guardians. The Collaborative posts the Plan and related information on its website.

Relationship to Other Laws

Consistent with state and federal laws, and the policies of the Collaborative, no person shall be discriminated against in admission to a public school of any town or in obtaining the advantages, privilege and courses of study of such public school on account of race, color, sex, religion, national origin, or sexual orientation. Nothing in the Plan prevents the Collaborative from taking action to remediate discrimination or harassment based on a person's membership in a legally protected category under local, state, or federal law.

In addition, nothing in the Plan is designed or intended to limit the authority of the Collaborative to take disciplinary action or other action under M.G.L. c. 71, §§ 37H or 37H½ and other applicable laws in response to violent, harmful, or disruptive behavior, regardless of whether the Plan covers the behavior.

3. Action Taken:

Loss of Privileges Education on Bullying Suspension Other _____

4. Describe Safety Planning:

5. Follow-Up Interview with Target (Initial/Date When Completed): _____

6. Follow-Up Interview with Aggressor (Initial/Date When Completed): _____

7. Signature of Reporter: _____ Date _____

8. Report Forwarded to Clinical Coordinator on (Date): _____

9. Clinical Coordinator Signature _____ Date _____