

# Harassment Investigation and Intervention Planning

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According to the Office of Civil Rights, (see: 2000 & 2010 OCR Dear Colleague Letters) regardless of a school's name for the behavior (bullying, harassment, hazing, fighting, etc.) when the event(s) indicate civil rights have been abridged, school administrators must look beyond simply disciplining the perpetrator(s) and take action to eliminate the "hostile environment created by the harassment, address its effects, and ensure that it does not recur". The following guidelines and documentation process will help site administrators document their efforts to assist both victim and harasser and demonstrate that the school is not "willingly indifferent" to the harassment. The following sections are in alignment with the OCR guidance letters as well as RTI for behavior principles for externalizing and internalizing behaviors.

Staff completing this form: \_\_\_\_\_

## SECTION 1: Fact Finding

Name of possible victim: \_\_\_\_\_

Name of potential harasser(s): \_\_\_\_\_

Date(s) of possible harassment: \_\_\_\_\_

Who reported the behavior? \_\_\_\_\_ When? \_\_\_\_\_

How was the behavior reported? \_\_\_\_\_

**Behavior being investigated:**

**Person(s) involved in events under investigation:**

Bystanders or observer names: \_\_\_\_\_

Statements from bystanders or observers: \_\_\_\_\_

Potential harasser statements made in interview: \_\_\_\_\_

Possible victim statement in interview: \_\_\_\_\_

**Interview History and Dates:**

Staff interviewing possible victim: \_\_\_\_\_

Staff interviewing potential harassers: \_\_\_\_\_

Staff interviewing harasser's teachers and other staff: \_\_\_\_\_

Staff interviewing victim's teachers and other staff: \_\_\_\_\_

Staff interviewing parents or other stakeholders: \_\_\_\_\_

Who was interviewed? \_\_\_\_\_

**Description of event(s) from interviews:** (location, person(s) present, time of day, etc.)

## DECISION

☐ **Yes** ☐ **No** Harassment was based on a civil rights protected category: sexual harassment, sexual orientation harassment (perceived or acknowledged) or other covered civil rights protections: religion, ethnicity, race, disability (disability can be visible or invisible, based on IEP, 504 plan, other).

- Harassment category: \_\_\_\_\_

Or

☐ **Yes** ☐ **No** Behavior was based on student characteristics other than those listed above, or for other reasons and will be treated as "bullying", "fighting", or other discipline violation.

- Perceived Characteristic (check):

☐ Weight

☐ Other physical characteristics

☐ Skill deficit

☐ Other

- Other reasons (list): \_\_\_\_\_

**IF BEHAVIOR HAS BEEN DETERMINED TO HAVE CIVIL RIGHTS IMPLICATIONS, CONTINUE with the following sections.**

## SECTION 2: Effects of Harassment Requiring Compensatory Actions

### Effect of events on victim's behavior: (Determination: has a hostile environment occurred?)

Examine: Absent or poorly prepared assignments, participation with peers, absenteeism, externalizing behaviors, internalizing behaviors, etc.) **Effects occurred?** ☐ **No** ☐ **Yes**

if yes, what: \_\_\_\_\_

**Effects were reported by:** \_\_\_\_\_

**Extent of effects:** (include duration, intensity, frequency) \_\_\_\_\_

**Are compensatory academic actions required to ameliorate the effects of the harassment?**

☐ **No** ☐ **Yes** Why or why not? \_\_\_\_\_

If yes, describe:

**Provision for make-up work:** (what work, what provision) \_\_\_\_\_

**Additional instruction:** (by whom, what topics, dates, and duration) \_\_\_\_\_

**Are compensatory actions to address social emotional effects required to ameliorate the effects of the harassment?**

☐ **No** ☐ **Yes** Why or why not? \_\_\_\_\_

If yes, describe:

**Provision for service:** (what service, duration, with whom, goals) \_\_\_\_\_

### SECTION 3: FOLLOW-up Actions and Interventions

**Check (√) all that apply and describe:**

- ☐ **None: Rationale:** \_\_\_\_\_
- ☐ **Discipline of harasser:** \_\_\_\_\_
- ☐ **Law enforcement notification of events** *(note: notifying law enforcement alone is not a legally sufficient school administrator action to address or prevent reoccurrence or to demonstrate the school is not "willingly indifferent", (Davis v. Monroe) but may be warranted to determine if laws of been broken, e.g., assault, battery, stalking, terroristic threats, hazing, etc.)*  
**Date of contact:** \_\_\_\_\_ **Badge number of officer:** \_\_\_\_\_
- ☐ **Parent meeting(s)**  
**For victim:** *(With whom, by whom, outcome)* \_\_\_\_\_  
**For harasser:** *(With whom, by whom, outcome)* \_\_\_\_\_
- ☐ **Tier 1: Separation of harasser and victim:** *(describe how, for what duration, who supervises?)*  
 \_\_\_\_\_  
 \_\_\_\_\_
- ☐ **Tier 1: Brief counseling of victim:** *(describe content, what duration, service provider)*  
 \_\_\_\_\_  
 \_\_\_\_\_
- ☐ **Tier 1: Brief counseling of harasser:** *(how frequently, by whom)*  
 \_\_\_\_\_  
 \_\_\_\_\_
- ☐ **Tier 1: Future scheduled conferences with victim and family:** *(how frequently, by whom)*  
 \_\_\_\_\_  
 \_\_\_\_\_
- ☐ **Tier 1: Future scheduled conferences with harasser and family:** *(how frequently, by whom)*  
 \_\_\_\_\_  
 \_\_\_\_\_
- ☐ **Tier 1: Limitation of freedom of movement for harasser during less supervised times** *(yard, hallways, restrooms, etc.) with progression to be earned: (physical nearness to supervising adult, to auditory range of adult to visual range of adult to normalization)*  
**Who supervises:** \_\_\_\_\_ **Date to Begin:** \_\_\_\_\_
- ☐ **Tier 2: Training for harasser on:** \_\_\_\_\_  
**Conducted by:** \_\_\_\_\_ **Duration:** \_\_\_\_\_ **Date to Begin:** \_\_\_\_\_
- ☐ **Tier 2: Training for victim on:** \_\_\_\_\_  
**Conducted by:** \_\_\_\_\_ **Duration:** \_\_\_\_\_ **Date to Begin:** \_\_\_\_\_
- ☐ **Tier 2: Structured daily mentoring:** *(such as Check-in/Check-out, Behavior Education Program)*  
**For Victim: Mentor:** \_\_\_\_\_ **Date to Begin:** \_\_\_\_\_  
**For Harasser: Mentor:** \_\_\_\_\_ **Date to Begin:** \_\_\_\_\_
- ☐ **Tier 2: Behavioral Contract for Harasser:**  
**Who establishes and monitors:** \_\_\_\_\_ **Date to Begin:** \_\_\_\_\_
- ☐ **Tier 2 or 3: Small group or individual Social Skills Training for Victim, including positive peer reporting techniques:**  
**Who conducts:** \_\_\_\_\_ **Date to Begin:** \_\_\_\_\_

- ☐ Tier 3: Individual (do not use small group due to deviant peer contagion effects) Social Skills Training for Harasser:  
Who conducts: \_\_\_\_\_ Date to Begin: \_\_\_\_\_
- ☐ Tier 3: Cognitive Behavioral Therapy, Function-based Behavior Plan, Family Services, or other high intensity direct service provision:  
For Victim: *(include intervention rationale, goals, in school or private service provider, dates, duration, communication methods with other agencies, etc.)*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
For Harasser: *(include intervention rationale, goals, in school or private service, service provider, dates, duration)*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### SECTION 4: Follow-UP during and after harassment interventions to prevent harassment or retaliation against victim, HARASSMENT reporter(s), bystander(s), etc.

- Steps taken to ensure victim and family know how to report future events:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Schedule of follow-up inquiries to determine whether there have been any new/additional incidents or instances of retaliation:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### SECTION 5: DISTRICT and Whole School Actions

Check (√) all that apply and describe:

- ☐ Whole school training to improve recognition of harassment and prompt responding: *(By whom, when, what topics)*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- ☐ Copy of this finding has been sent: By whom: \_\_\_\_\_ Date Sent: \_\_\_\_\_  
To Special Education Director: \_\_\_\_\_  
To 504 Coordinator: \_\_\_\_\_  
Other: *(specify)* \_\_\_\_\_
- ☐ Whole community of stakeholders (parents, community, students, staff) training on how to recognize and promptly report harassment:  
Date(s): \_\_\_\_\_  
Topic(s): \_\_\_\_\_  
Presenter(s): \_\_\_\_\_

- ☐ **Playground/Yard/Bus increased staff supervision:**  
Initiated by: \_\_\_\_\_ Date(s): \_\_\_\_\_  
Description of changes: \_\_\_\_\_  
\_\_\_\_\_
- ☐ **Playground/Yard training of supervising staff:**  
When: \_\_\_\_\_ What topic(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
By whom: \_\_\_\_\_ Date(s): \_\_\_\_\_
- ☐ **Issuing, reissuing written school policy on harassment/bullying and delineation of methods of reporting to:**  
(check all that apply): ☐ Staff ☐ Students ☐ Families  
By whom: \_\_\_\_\_ Date(s): \_\_\_\_\_
- ☐ **Peer conflict resolution systems training for playground/yard peers:**  
Staff Trainers: \_\_\_\_\_ Timeline: \_\_\_\_\_  
Programs to use: \_\_\_\_\_  
\_\_\_\_\_  
By whom: \_\_\_\_\_ Date(s): \_\_\_\_\_