✓ Identify  
✓ Support  
✓ Intervene  
✓ Reconnect

Todd Shirley,  
Chief Operations Officer  
Steve Honn,  
School Safety Coordinator
Forsyth County School Safety 2010

- Code of Conduct
- Discipline Guidelines
- Cameras
- Tribunals
- System ID System
- Drills
- Lockdown Buttons
- Crisis Response Plans
- Visitor Entry System
- System Badges
- SRO’s
- Emergency Telephones
- Cell Phones
- Safety Vests and Cones

Forsyth County School Safety 2019

- Student Advocacy Specialist
- Positive Behavior Interventions and Supports
- Mindset- Partnering with Special Education
- CHAMPS – Resource Officers
- Drivers Education
- Drug Awareness Teaching- Parents / Students
- Internet Safety Parent Education
- Coaching Leadership Program
- Family Foundations Class

The “Stuff” MUST be proactive:
- Cameras
- Visitor Entry
- Lockdown Shades
American Association of Suicidology Data

- One suicide every 11.9 minutes
- One attempt every 29 seconds
- Approximately 129 suicides per day
- 47,173 deaths by suicide in 2017
- Over 1,104,825 suicide attempts in 2015
- 25 attempts for every death by suicide
- 4 female attempts for each male attempt

*2nd leading cause of death among youth ages 10-34 (CDC, 2017)

*In youth ages 15-24, there is an estimated 100-200 suicide attempts for each suicide death (CDC, 2015)
Facilities

- Standardize district procedures for staff-managed visitor check-in/out management and equipment placement.
- Evaluate current buildings for visitor containment modifications; new schools should have double entries.
- Evaluate the placement of security film on exterior doors and windows and privacy shades on fencing.
- Install additional staff badge readers on exterior doors.
- Evaluate video camera systems and explore additional costs for expanding employee access and monitoring.
- Increase lockdown buttons and interior closing/locking doors.
- Standardize district procedures for doors being locked and the use of magnets.
- Increase the number of emergency tourniquets and AED’s in buildings.
- Expand classroom-to-office phone communications.
- Investigate Bi-Directional Amplifiers (BDA) to improve radio communication.

Hire staff to work with high risk students, their families, school/district staff, supporting community/law enforcement agencies and healthcare providers.

Next Steps

- Bond Funding: Recommend reallocation of close to $5 million for Energy Recovery Units (ERUs) in two newer schools to expand district-wide safety projects to approximately $7 million.
- Parent Survey: April 18-25
- Using the Task Force recommendations and feedback from the parent survey, FCS staff will enhance the district’s Strategic Plan by adding a five-year school safety plan initiative to the Operational Excellence goal plan area.
- Continuation of quarterly Task Force meetings.
STUDENT ADVOCACY SPECIALIST
IDENTIFY - INTERVENE - SUPPORT - RECONNECT

POTENTIALLY HARMFUL ACTIONS

STUDENT THREATS TO THEMSELVES
SELF-INJURY. SUICIDAL IDEATION. SUICIDAL COMMENTS.

STUDENT THREATS TO OTHERS
HOMICIDAL THOUGHTS. HOMICIDAL COMMENTS. SCHOOL THREATS.

SIGNS OF FUTURE VIOLENCE
VIOLENT ACTS. SOCIAL, EMOTIONAL, MENTAL DISTURBANCES. WEAPONS OBSESSIONS.

FORSYTH COUNTY SCHOOLS
- ADMINISTRATION
- COUNSELORS
- CRIME STOPPERS
- SOCIAL WORKERS
- STUDENT ADVOCACY SPECIALISTS
- STUDENTS

GOVERNMENT AGENCIES
- COMMUNITY RESOURCES SUPPORTING FAMILIES AND STUDENTS
- CUMMING POLICE DEPARTMENT
- FORSYTH COUNTY DIVISION OF FAMILY AND CHILDREN SERVICES
- FORSYTH COUNTY JUVENILE COURT
- FORSYTH COUNTY SHERIFF’S OFFICE
Diversity of Backgrounds

- 4 Women
  - Missionary Work
  - Peace Corps
  - Minister
  - Special Ed Teacher
  - Social Worker
- Age Range 20’s-50’s
- 2 Men
  - Homeless Shelter Founder
  - School Resource Officer
  - PBIS Coordinator
  - Juvenile Court Case Manager
  - County Homeless Liaison
  - Dean of Discipline
  - Nanny
  - Ga Network for Educational Therapeutic Support
  - CHRIS Kids-Mental Health
  - Hostage Negotiator
  - Non-Profit Founder
Purpose

Student Advocacy Specialist

- Parents
- High School
- Middle School
- Middle School
- Elementary School
- Elementary School
- Graduates
Purpose

- Support the Highest Risk Student
- Maintain Parent Contact and Support
- Friday Team Meetings 2pm-4pm
- Flexible Travel Schedule
- Conduct Medical or Therapeutic Sessions
- Extracurricular Clubs or Coaching
- Hide Mandated Reportable Information
- Break Student / Team Trust
Dialectical Behavior Therapy (DBT) is an approach to therapy that can help you learn to cope with difficult emotions.

DBT originated from the work of psychologist Marsha Linehan, who worked with people living with borderline personality disorder (BPD) or ongoing thoughts of suicide.

Today, it’s still used to treat BPD as well as a range of other conditions, including:
- Eating Disorders
- Self-harm
- Depression
- Substance Abuse Disorders
Grade Breakdown Through 7 Months

FCS: 50,000 students

494 Students Total
Tier 1
Monthly or even quarterly

Tier 2
One to Two times a month

Tier 3
Multiple Weekly

500+ Students - All Tiers

45 Students

29 Students
Our Goal is DBT skills training that will support stronger emotional regulation.

500+ Students in all Tiers

Tier 1
Monthly or even quarterly

Tier 2
One to Two times a month

Tier 3
Multiple Weekly

52 Students
26 Students
Notes from Meetings:

High School:

(Student) returned to school. Came to me 1st thing. Said he was in hospital 4 days and returned home on Friday. Placed on medication

Not feeling better- Stated that they can’t fix this in 4 days but realizes it could take 4-6 weeks before RX help. Explained that he was having suicidal and homicidal thoughts- Angry about people bullying other people-was thinking that he would want to kill them and then kill himself.
Tell me more about when you were hospitalized- why do you think they diagnosed you with PTSD?

Doctor told him that he thought he had PTSD due to the events with his Mom being a drug addict and the other events that took place- while with Mom he lost a lot of weight because he wasn't being fed. Same thing when he left his grandmothers to live with his Dad. Step Mom did not like him and did not feed him. He also lost weight while there before he was hospitalized. Threat to harm himself and possibly others.
Notes from Meetings:

Middle School:
(Student) made threats of suicide to friends-taken to hospital-evaluation completed and she was released recommending counseling- next day she told friends that she only told them what they wanted to hear and that she was going to commit suicide on Tuesday Oct 30.
Notes from Meetings:

Elementary School:

Administrator referred STUDENT to me because yesterday while he walking around the playground he was making a gun with his fingers and pretending to shoot himself in the head. Most of his drawings are of people killing people. While speaking with STUDENT he made the statement “I don’t want to be here anymore.” He stated that he was angry and “I want suicide.” Dad is in another state several weeks/months at a time. For the last three years STUDENT has made suicidal statements all around March 20-23. When speaking with mom the administrator referred her to several counselors for an evaluation. Mom was on board with me meeting STUDENT and welcomed the assistance.
What do the kids say??????
Introduces: A skills-based program supporting families of children with Emotional Dysregulation

Family Foundations

Course Content:

- Education & Research on Emotional Dysregulation & Mental Ill
- Skills training for families based on Dialectical Behavior Therapy
- Relationship Mindfulness Skills
- Effective Communication Skills
- Validation Skills
- Development of a support network
Pain is real. But so is hope.

✓ Questions?

Todd Shirley
tshirley@forsyth.k12.ga.us
770-888-3466 x1

Steve Honn
shonn@forsyth.k12.ga.us
770-888-3466 x3