

## FDRESA FY21 Services

In FY21, FDRESA continued hosting online sessions and began returning back to districts for in-person professional development, technical assistance, observations, and training. From July 1, 2020 - May 24, 2021, FDRESA hosted 499 unique sessions (some repeating), served over 500 schools, 205 LEA's, and 8373 people with 13,078 contact hours. A full copy of the report can be obtained [HERE](#).

### FDRESA Services Summary

Data from Sign-in Sheets

Contact Hours

13,078

People Served

8,373

Unique Session Names

499

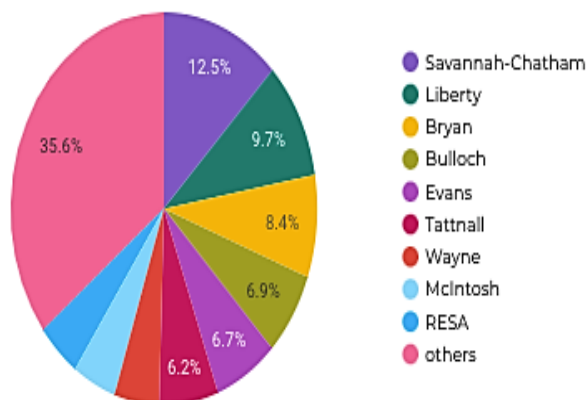
LEA's Served

205

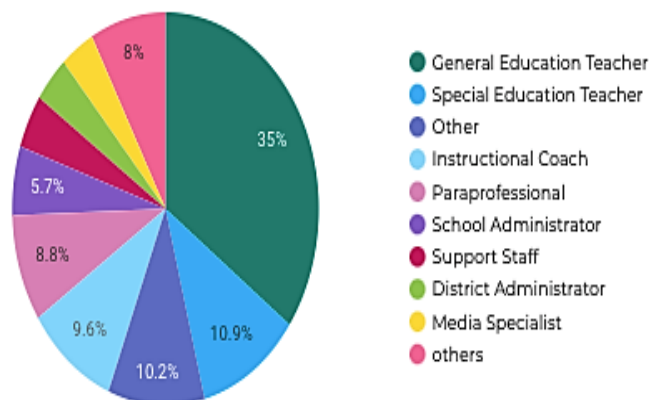
Schools Served

501

### People Served by System



### Positions Served



**Click on the link below for  
upcoming professional  
learning opportunities:**

**[FDRESA Events](#)**

### There are Four Domains that Impact School Climate

**Safety:** referring to the physical and emotional safety of students and the rules and procedures in place to ensure student safety

**Relationships:** student social support from educators and parents, the level of respect students have to others, school and community engagement, and student and parental leadership

**Teaching and Learning:** a positive and professional student-teacher-school relationship, social and emotional skills training, civic education, and positive support for learning

**Institutional Environment:** the physical environment of the school

### School Climate Matters – Self-Assessment Checklist:

**Does Your School provide the following?**

- ☐ Safe and stable environment
- ☐ Clearly defined expectations, procedures, routines (consistent across locations)
- ☐ On-going embedded instruction of expectations, procedures, routines, social emotional skills
- ☐ Daily routines that allows classrooms to build sense of community, foster relationships and experience positive connections
- ☐ Clearly defined ways for students to ask for help
- ☐ Positive greetings and social interactions throughout the day
- ☐ Staff engaged in active supervision across all contexts (scan, move, interact)
- ☐ Clearly defined problem behaviors
- ☐ Routines for Teachers to re-group, re-set, neutralizing routine
- ☐ Teacher connectedness and wellness activities
- ☐ Growth mindset culture for staff with ongoing training, coaching and performance feedback

*Susan Barrett – Director – Center for Social  
Behavior Supports*

*Technical Assistance Director for the Center on PBIS*

## Universal Precautions for School Staff

The Georgia Board of Education Rule #160-1-3-03 requires all schools to adopt routine procedures consistent with the Centers for Disease Control and Prevention's Universal Precautions for handling blood and bodily fluids. The Georgia BOE Rule #160-1-3-03 on communicable disease requires that, based on reasonable medical judgement, the school system shall allow an infected student or employee to remain in his or her educational or employment setting unless he/she currently presents a significant health risk of contagion. Please see your local system's policy that addresses communicable diseases.



## Handwashing and Respiratory Etiquette

Core principle for handwashing and respiratory etiquette: Through ongoing health education units and lessons, teach children proper handwashing and reinforce behaviors, and provide adequate supplies. Ensure that teachers and staff use proper handwashing and respiratory etiquette.

**Teach and reinforce handwashing** with soap and water for at least 20 seconds and increase monitoring to ensure adherence among students, teachers, and staff. If handwashing is not possible, hand sanitizer containing at least 60% alcohol should be used.

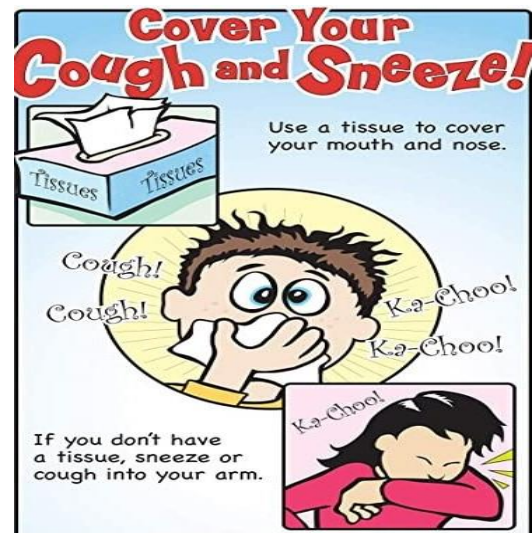
**Encourage students and staff to cover coughs and sneezes** with a tissue when not wearing a mask and immediately wash their hands after blowing their nose, coughing, or sneezing. Some students with disabilities might need assistance with handwashing and respiratory etiquette behaviors.



## UNIVERSAL PRECAUTIONS

1. Use Barrier Protection to prevent skin and mucous membrane contact with blood or other body fluids.
2. Wear gloves to prevent contact with blood, infectious materials, or other potentially contaminated surfaces or items.
3. Wear face protection if blood or bodily fluid droplets may be generated during a procedure.
4. Wear protective clothing if blood or bodily fluid may be splashed during a procedure.
5. Wash hands and skin immediately and thoroughly if contaminated with blood or bodily fluids.
6. Wash hands immediately after gloves are removed.
7. Use care when using or handling sharp instruments and needles. Place used sharps in labeled, puncture resistance containers.
8. If you have sustained an exposure or puncture wound, immediately flush the exposed area and notify your supervisor.

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## BloodBorne Pathogens

Research shows that the risk of getting a significant contagious disease in a school setting is extremely small. The primary concerns regarding bloodborne pathogens are Hepatitis B, Hepatitis C, and HIV. Following standard precautions can help prevent the spread of bloodborne pathogens and other diseases whenever there is a risk of exposure to blood or other body fluids. These "universal precautions" require that all blood and other body fluids be treated as if they are infectious. Precautions include maintaining personal hygiene and using protective equipment, workplace practice controls and proper equipment, cleaning and spill clean-up procedures.



## What is PBIS?

**Positive Behavioral Interventions and Supports (PBIS)** is an evidence based three-tiered framework for improving and integrating all of the data, systems and practices affecting student outcomes every day. It is a way to support everyone – especially students with disabilities – to create the kinds of schools where all students are successful.

PBIS is not a curriculum you purchase or something you learn during a one-day professional development training. It is a commitment to addressing student behavior through systems change. When it is implemented well, students achieve improved social and academic outcomes, schools experience reduced exclusionary discipline practices, and school personnel feel more effective.



### Improved Student Outcomes

academic performance  
(Horner et al., 2009)

social-emotional competence  
(Bradshaw, Waasdorp, & Leaf, 2012)

social & academic outcomes for SWD  
(Lewis, 2017; Tobin, Horner, Vincent, & Swain-Bradway, 2012)

reduced bullying behaviors  
(Ross & Horner, 2009; Waasdorp, Bradshaw, & Leaf, 2012)

decreased rates of student-reported drug/alcohol abuse  
(Bastable, Kittelman, McIntosh, & Hoselton, 2015; Bradshaw et al., 2012)



### Reduced Exclusionary Discipline

office discipline referrals  
(Bradshaw, Mitchell, & Leaf, 2010; Bradshaw et al., 2012; Horner et al., 2009)

suspensions  
(Bradshaw, Mitchell, & Leaf, 2010)

restraint and seclusion  
(Reynolds et al., 2016; Simonsen, Britton, & Young, 2010)



### Improved Teacher Outcomes

perception of teacher efficacy  
(Kelm & McIntosh, 2012; Ross, Ramey, & Horner, 2012)

school organizational health and school climate  
(Bradshaw, Koth, Bevans, Jalongo, & Leaf, 2008; Bradshaw, Koth, Thornton, & Leaf, 2009)

perception of school safety  
(Horner et al., 2009)

## School-Wide Positive Behavior Interventions and Supports

### Georgia Drug Free Public Work Force Act

Obviously having a drug free workplace is important for legal reasons. There are many anti-drug laws that have been passed by the Georgia General Assembly that provide additional reasons to avoid drug abuse. It is possible that you could lose your professional license, your driver's license, your job, and/or your worker's compensation benefits. In an effort to encourage employees to get help for drug abuse problems, the **Georgia Drug Free Public Work Force Act** allows an employee to retain employment while receiving drug abuse treatment according to **specific conditions**. **PRIOR** to an arrest for a drug offense, an employee may notify the Board of Education or superintendent that he/she uses illegal drugs and wants to receive treatment at his/her own expense. The employee is then entitled to maintain employment for up to one year as long as the employee follows the treatment plan prescribed by the treatment provider.

**(Please see your own local policy for additional provisions or restrictions.)**

Employees with CDL's who drive school buses have additional workplace regulations that must be followed. Bus drivers must adhere to the U.S. Department of Transportation Motor Carrier Safety Administration regulations.

Having a drug free workplace sends a clear message that use of alcohol and drugs in the workplace is prohibited. Drug free workplace policies help protect the health and safety of all employees, stakeholders, and the public. Substance abuse also affects the bottom line: it costs you money. Drug users at a minimum consume almost twice the benefits as nonusers, are absent 1.5 times as often, and make more than twice as many workers' compensation claims. Alcohol and other drugs create a poor work environment because drugs keep you from doing your best on the job. The effects can be dangerous to others as well.

The Safe & Drug Free Schools & Communities Act (**SDFSCA**), **20 U.S.3171**, requires all school systems to adopt and implement a program to "prevent the use of illicit drugs and alcohol by students or employees." The federal **Drug Free Workplace Act, 41 U.S.C. Section 702**, requires employees to notify their employer within five days of a conviction of any criminal drug statute for a violation occurring in the workplace. However, the **Georgia Drug Free Public Work Force Act, O.C.G.A. 45-23-1**, requires public employers to suspend an employee for a second offense regardless of where it occurs.

**PLEASE REMEMBER:** It is unlawful to manufacture, distribute, dispense, possess, or use a controlled substance or alcohol in the workplace. This prohibition also includes, but is not limited to, an employee being under the influence of alcohol or controlled substances while on duty. It is the responsibility of each staff member to become familiar with the contents of and to read and abide by his/her system Drug Free Workplace policies and procedures.



## Child Abuse Mandated Reporting

A report of alleged child abuse is made in Georgia every 14 minutes. **Section 19-7-5 of the Official Code of Georgia Annotated**, relating to reporting of child abuse, designated several categories of individuals as mandated reporters. These individuals, "having reasonable cause to believe that a child has been abused, shall report or cause reports of that abuse to be made." All child service organization personnel are mandated reporters. Child service organization personnel means persons employed by or volunteering at a business or an organization, **whether public, private, for profit, not for profit, or voluntary, that provides care, treatment, education, training, supervision, coaching, counseling, recreational programs or shelter to children (O.C.G.A. 19-7-5(b)(5)).** There are four types of child abuse: Neglect, Emotional/Psychological, Physical Abuse, and Sexual Abuse. Mandated reporters only need "reasonable suspicion," not direct evidence to report. When you suspect a child is being maltreated, report your concerns to the designated reporter in your school or to a supervisor. Follow up with your designated reporter to assure that a report is made to child protective services. Remember, in order to make a report or cause a report to be made, mandated reporters only need to have "reasonable suspicion," not direct evidence to report. Reports must be made within 24 hours. **Any person or official required by Georgia law to report suspected cases of child maltreatment and who knowingly and willfully fails to do so, shall be guilty of a misdemeanor.**

**Mandated reporters who report in "good faith" are protected by law, even if the report is not substantiated.**



**If you see suspicious activity, send a photo or note via the app.**



## Helplines for Employees

**The following organizations and resources provide free, confidential assistance to individuals. You may also use your local directories to locate additional local mental health and addictive diseases organizations for assistance.**

**COVID-19 HOTLINE**  
1-844-442-2681

**Georgia COVID-19 Emotional Support Line**  
1-866-399-8938

**SAMHSA's NATIONAL TREATMENT HELPLINE**  
1-800-662-HELP (4357)  
[www.samhsa.gov/find-help/national-helpline](http://www.samhsa.gov/find-help/national-helpline)

**SUICIDE PREVENTION LIFELINE** 1-800-273-TALK (8255)  
[www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)

**DISASTER DISTRESS HELPLINE**  
1-800-985-5990  
[www.samhsa.gov/find-help/disaster-distress-helpline](http://www.samhsa.gov/find-help/disaster-distress-helpline)

**GEORGIA CRISIS & ACCESS LINE** 1-800-715-4225

**ALCOHOLICS ANONYMOUS**  
1-212-870-3400 [www.aa.org/](http://www.aa.org/)

**GEORGIA TOBACCO QUIT LINE**  
1-877-270-7867

**NAR-ANON**  
1-800-477-6291 [www.nar-anon.org](http://www.nar-anon.org)

**PRESCRIPTION DRUG ABUSE PREVENTION**  
<https://stoprxabuseinga.org>

**GEORGIA SCHOOL SAFETY HOTLINE**  
1-877-SAY-STOP

**SUICIDE PREVENTION RESOURCECENTER**  
[www.sprc.org](http://www.sprc.org)

**HUMAN TRAFFICKING HOTLINE INFORMATION**  
1-888-373-7888

**GEORGIA NATIONAL ALLIANCE MENTAL ILLNESS**  
1-770-234-0855 <https://namiga.org>

**NATIONAL TRAUMATIC STRESS NETWORK**  
<https://www.nctsn.org>



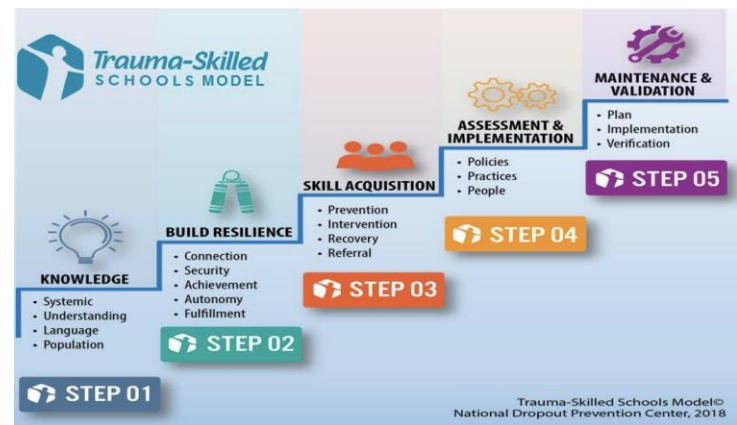


## **TSS Model - Trauma Skilled Schools Model**

The National Dropout Prevention Center presents the TRAUMA-SKILLED SCHOOLS MODEL. First District RESA has certified trainers available to support the TSS Model.

“We must rearrange schools and instruction to meet the essential resiliency needs of trauma-impacted students, and all staff members must become skilled in use of the strategies and interventions that trauma-impacted students sometimes require. Additionally, school leaders must deliberately and continuously assess, maintain, and validate the school’s trauma-skilled status if gains in behaviors and achievement are to be sustained. This work is critical, given what we know about the negative impact of trauma and the positive impact of happiness on learning”.

**-Dr. Bill Daggett, Founder and Chairman Successful Practices Network (SPN)**



## **Restorative Practices**

“As the International Institute for Restorative Practices SaferSanerSchools Whole-School Change Program is launched in more and more schools across the country, we are seeing many positive results from restorative practices implementation. The research graphs in this fact sheet show that these outcomes include significant reductions in misbehavior and punitive discipline in grades K-12. We are also seeing improved teacher-student relationships in classrooms with a high level of restorative practices implementation, and that this improvement tends to narrow the “racial-discipline gap,” a concern in schools nationwide.”

SaferSaner Schools Whole-School Change Through Restorative Practices & International Institute for Restorative Practices



**FDRESA has certified trainers in Restorative Practices to support your needs!**

## **Equity – Going from Awareness to Commitment**

**“ITS NOT ABOUT YOUR FIRST THOUGHT, IT’S ABOUT WHAT YOU DO WITH YOUR SECOND.”**

All of us have personal bias. As educators, we have to challenge our initial thoughts, assumptions, or low expectations of students based on appearance or background. What are you doing to challenge yourself and believe in the potential of every student?

Amie Dean

[www.behaviorqueen.com](http://www.behaviorqueen.com)

### **Demonstrated outcomes with Check & Connect**



#### **Increase In**

- Attendance
- Persistence in school
- Accrual of credits
- School completion rates



#### **Decrease In**

- Truancy
- Tardies
- Behavioral referrals
- Dropout rates

## **Check & Connect**

For over 30 years, Check & Connect (C&C) mentors have helped keep thousands of students on track toward graduation. C&C is the only dropout prevention intervention listed on the IES What Works Clearinghouse found to have positive effects on staying in school. **FDRESA has certified C&C trainers to support your needs.**

**+24%**

24% more C&C students stayed in high school than non-C&C students\*

**+20%**

20% more C&C students completed high school than non-C&C students\*

[Learn More >](#)

\* Sinclair, M. F., Christenson, S. L., & Thurlow, M. L. (2005). Promoting school completion of urban secondary youth with emotional or behavioral disabilities. *Exceptional Children*, 71(4), 465-482.

*First District RESA, 201 West Lee Street, Brooklet, GA 30415; 912-842-5000; [www.fdressa.org](http://www.fdressa.org)*