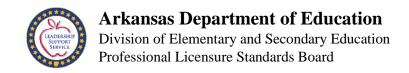
# Arkansas Department of Education Division of Secondary and Elementary of Education Professional Licensure Standards Board



Code of Ethics
24-Hour Standard 1 Report
Information Packet

Revised May 2023



#### **Code of Ethics 24 Hour Standard 1 Report Information Packet**

Act 237 of 2023 amended Ark. Code Ann. § 6-17-428 to add language requiring that within 24 hours of a matter coming to the attention of a public school supervisor, an educator in supervisory role in an Arkansas school shall file an ethics complaint with the Professional Licensure Standards Board if he or she observes, has reasonable cause to suspect, or there is a substantiated allegation that an educator has violated Standard 1 of the Code of Ethics.

Standard 1 of the DESE Rules Governing the Code of Ethics for Arkansas Educators states: *An educator maintains a professional relationship with each student, both inside and outside of the classroom.* 

The Code of Ethics provides the following guidance regarding Standard 1: This standard goes to the core of a professional educator's expected conduct and relationship with all students and transcends criminal behavior or other actions which violate law. The professional relationship with students is such behavior and action which promotes at all times the mental, emotional, and physical health and safety of students. An educator should show respect for and not demean, embarrass, or harass students. An educator should not participate in and should discourage bullying based on such characteristics as race, national origin, color, gender, sexual orientation or identity, age, disability, or religion. "Bullying" means the intentional harassment, intimidation, humiliation, ridicule, defamation, or threat or incitement of violence against a student by a written, verbal, electronic, or physical act that may address an attribute, as defined in Ark. Code Ann. § 6-18-514, of the student and that causes or creates actual or reasonably foreseeable: (a) physical harm to a student or damage to the student's property; (b) substantial interference with a student's education; or (c) a hostile educational environment for one (1) or more students due to the severity, persistence, or pervasiveness of the act. Educators should maintain professional relationships with students while using social networking technology tools. A professional relationship is one where the educator maintains a position of educator/student authority with students even while expressing concern, empathy, and encouragement for students. In that position of authority, an educator may nurture the student's intellectual, physical, emotional, social and civic potential. An educator may display concern and compassion for a student's personal problems and, when appropriate, refer the student for school counseling or other help.

In completing and submitting the 24-Hour Standard 1 Reporting Form, you have taken the first step in the process. The next page of this packet outlines the steps of the process.

Following your investigation, should your district elect not to file an allegation form with our office, please complete and return the attached rationale form included with this packet. Please note that even if you elect not to proceed with filing an allegation form, in certain circumstances, the PLSB may still present a case to the Ethics Subcommittee for authorization of investigation.

# 24 Hour Standard 1 Reporting Form



Within 24 hours of a matter coming to the attention of a public school supervisor, an educator in a supervisory role in an Arkansas school shall file an ethics complaint with the Professional Licensure Standards Board if he or she observes, has reasonable cause to suspect, or there is a substantiated allegation that an educator has violated Standard 1 of the Code of Ethics.

Standard 1: An educator maintains a professional relationship with each student, both in and outside the classroom.

Upon receipt of the 24 -Hour Standard 1 Reporting Form, the PLSB will respond with a confirmation of the receipt of the form and provide additional instructions. The filing district will continue the investigation process by collecting the needed information to file an Allegation of Violation.

The district will collect the needed evidence for the allegation.

If the filing district determines an allegation does not need to be filed and no further action is needed, the district will provide rationale on the attached form for not filing an Allegation of Violation.

The PLSB will:

Validate the Allegation of Violation form; or Review the rationale for not filing the Allegation of Violation.





## **Arkansas Department of Education**

Division of Elementary and Secondary Education Professional Licensure Standards Board

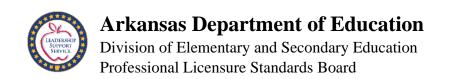
Form: S1-
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### 24-HOUR STANDARD 1 VIOLATION REPORTING FORM

Please use this form only for reporting violations of Standard 1 per Ark. Code Ann. § 6-17-428(p)(2)(B), which requires that

within 24 hours of a matter coming to the attention of a public school supervisor, an educator in a supervisory role in an Arkansas school shall file an ethics complaint if he or she observes, has reasonable cause to suspect, or there is a substantiated allegation that an educator has violated Standard 1 of the Code of Ethics.						
Confidential						
Name of Accused Educator:		Ed	lucator's Position:			
Educator's Address:						
Work Phone:	Cell Phone:		nail:			
Educator's School:		Ph	one:			
School Address:						
School District		Ph	one:			
District Address:						
	Complainant Inf	formation				
Complainant Name:		Email				
Address:						
Daytime Phone:		Cell Phone				
Data of Allaged Incidents	Details of I	ncident Date Notified	l of Incidents			
Date of Alleged Incident:		Date Notified	or incluent:			
Statement of	f Alleged Conduct (If 1	needed, add ad	ditional nages)			
Statement of	Timegea Condact (III	necaca, uaa ua	artional pages)			
I have reviewed and understand the information in this form.						
I understand that I may not file this form anonymously.						
I didenstand that I may not the this form anonymously.						
I hereby swear/affirm that the information on this form is true and correct to the best of my knowledge under penalty of perjury.						
			Complainant Signature	Date		

Email a completed copy of this form to: <a href="mailto:ade.plsb24@ade.arkansas.gov">ade.plsb24@ade.arkansas.gov</a>



Confirmation #:	
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### RATIONALE FOR DECLINING TO FILE ALLEGATION

Please use this form after completing a 24-Hour Standard 1 Reporting Violation and following completion of an investigation of a Standard 1 violation only if your district has decided not to proceed with filing a formal allegation with the PLSB.

Confidential					
Name of Accused Educator:		Educator's Position:			
Educator's Address:					
Work Phone:	Cell Phone:	Email:			
Educator's School:		Phone:			
School Address:					
School District	School District				
District Address:					
	Complainant Information	on			
Name:	Position				
District Address:	Email:				
Daytime Phone:	Cell Pho	ne:			
	Details of Incident				
Date of Alleged Incident:					
Summary of Results of District Investigation, Including Rationale (Please include a detailed rationale for declining to file an allegation form with the PLSB. Please also attach copies of all documentation gathered during your investigation. If additional pages are needed, please attach.)					

Witness Information (Please attach additional pages as needed.)				
Witness Name:	Date of Interview:			
Association with District:	Contact Information: (ex. phone number, email, etc.)			
Brief description of witness involvement or attach witness	s statement:			
W. N	D. Cl.			
Witness Name:	Date of Interview:			
Association with District:	Contact Information: (ex. phone number, email, etc.)			
Brief description of witness involvement or attach witness statement:				
Witness Name	Data of Interviews			
Witness Name:	Date of Interview:			
Association with District:	Contact Information: (ex. phone number, email, etc.)			
Brief description of witness involvement or attach witness statement:				
If you are a mandated reporter who believes suspected child maltreatment has occurred pursuant A.C.A. §12-				
12-501 et. seq., did you report it to the Arkansas State P	*			
No Yes, Date:	Referral #:			
I have reviewed and understand the information in the	nis form.			
I understand that I may not file this form anonymous	sly.			
I hereby swear/affirm that the information on this form is true and correct to the best of my knowledge under penalty of perjury.				
	Complainant Signature Date			
Email a completed copy of this form to: ade.plsb24@ade.arkansas.gov				