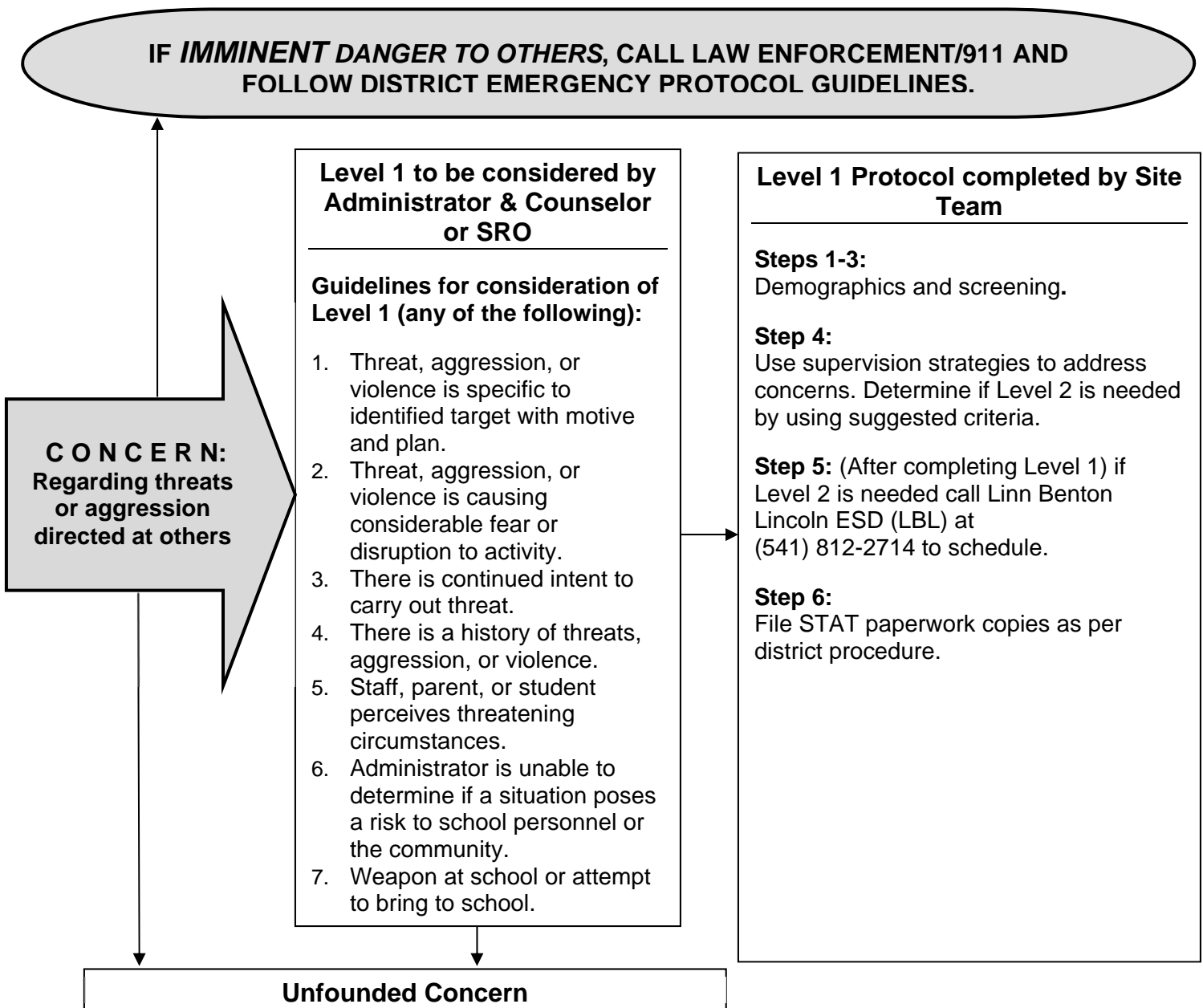


LINN COUNTY STUDENT THREAT ASSESSMENT & MANAGEMENT SYSTEM ~ LEVEL 1 PROTOCOL ~

(VERSION 2017)

This system is designed for use with students who are engaged in circumstances that suggest the potential for aggression or violence directed at other people. It is not designed for use with students who are suicidal, acting out sexually or who are setting fires, unless they are doing so as an act of violence intending severe or lethal injury to others. (If a suicide screening is needed, please follow district protocol).

Consult the flow chart below to determine the course of screening. If a Level 1 Threat Assessment is indicated, proceed with the attached Protocol and step-by-step instructions.



THIS PROTOCOL IS ONLY TO BE USED BY STAFF WHO HAVE BEEN TRAINED THROUGH THE LEVEL 1 SCREENING PROCESS.

The results of this survey do not predict future violence nor are they a foolproof method of assessing an individual's or group's risk of harm to others. This survey is not a checklist that can be quantified. It is a guide designed to assist in the investigation of potential danger (to identify circumstances and variables that may increase risk for potential youth aggression or violence) and to assist the school staff in the development of a management plan. Furthermore as circumstances change, so too does risk potential; therefore, if you are reviewing this survey at a date after the assessment completion, do so while being mindful of supervision, intervention, and the passage of time.

Complete the following survey through the Site Team Investigation using the noted step-by-step instructions.

The Level 1 Companion may be used to further explain each question under step #3.

The Site Team is composed of the following:

- Administrator (Discipline AP or Principal)
- Counselor
- School Resource Officer
- Educators or other people who know the student / students
- LBL
- Parents, if time and circumstances allow / Case Manager if adjudicated or ward of the Court. If parents are unable to attend, complete the Parent Questionnaire through interview.
- Campus Monitor if possible.

Many cases can be managed through a Level 1 Screening with appropriate interventions. The screening usually takes from 20 to 45 minutes and is a way of documenting concerns and management strategies. It is also a way to determine if there is a need to request a more extensive Level 2 Assessment by staff who specialize in Threat Assessment.

LEVEL 1 SCREENING

STEP 1: MAKE SURE ALL STUDENTS / STAFF ARE SAFE

- If necessary take appropriate precautions such as detaining the student and restricting access to coats, backpacks, lockers, etc.

IF IMMEDIATE DANGER EXISTS CALL LAW ENFORCEMENT, AND FOLLOW THE DISTRICT SAFETY GUIDELINES.

- Notification to parent / guardian of identified targeted student(s) as outlined in district policy. (See ORS 339.250, District Policy, Student Threat Assessment System Guide and Glossary.)
- Is law enforcement involved in the investigation or protective response? If so, provide the name of the investigating officer(s) _____ Case Number _____ What were the requests (i.e. student arrested, charged, detained, search of belongings, parent/student interviews, etc.)? _____

STEP 2: COMPLETE THE FOLLOWING INFORMATION:

- The parent / guardian has been notified that this screening is being done.
- The parent / guardian **has not** been notified of this meeting because: _____
- Parent questionnaire completed if parent cannot attend (see Student Threat Assessment System Guide).

SCHOOL: _____ SCHOOL PHONE: _____ TODAY'S DATE: _____

ADMINISTRATOR/CASE MANAGER: _____ DATE OF INCIDENT: _____

STUDENT NAME: _____ DOB: _____

AGE: _____ GRADE: _____ ENROLLMENT DATE: _____

- COPY OF DISTRICT INCIDENT REPORT IS ATTACHED.**

STEP 3: SCREENING – DISCUSS, INVESTIGATE, AND DOCUMENT

Each question is a prompt for exploration of circumstances that may involve the escalation of aggression or violence. Please note concerns by each item or under question 20 (other concerns) Use the *Level 1 Companion* for a complete explanation of each question. **Review the questions below as an outline for a guided conversation investigating the circumstances of potential violence by one or more students.**

Information was gathered from the following sources:

- Cumulative file review, including confidential folder
- Review of discipline records
- Academic-related communication, such as journaling, artwork, etc.
- Student/family criminal history
- Student interview
- Student witness interview
- Parent interview (if not in attendance)
- Teacher questionnaire (if not in attendance)
- Search of belongings
- Search of social media activity
- Other: _____

1. (Circle) threats or dangerous situation using the continuum below. Indicate suggested or threatened behavior as “A”. Indicate acted-out aggressive behavior as “B”.



Describe details of threat or dangerous situation: _____

2. Have there been any communications suggesting a potential attack or act of aggression? (Direct threats, specific references, veiled threats or vague warnings.) No Yes, Describe: _____

3. Are there indications of a plan to harm others or clear intention to harm others? No Yes,

Describe: _____

If so, is it detailed? _____

If so, is it plausible? _____

Are there other attack related behavior (acquire weapons; rehearse attack; schedule attack)?

Describe: _____

4. Are there indications of suicidal ideation, intent, or planning? No Yes, Describe: _____

(If yes, consider Level 1 Suicide assessment noted on page 1 flow chart).

5. Are there indications of a specific ongoing target(s) or a focus of aggressive ideation? No Yes

Describe: _____

6. Are there indications of a weapons choice and availability? No Yes, Describe: _____

7. Are there indications of an unusual or inappropriate interest in acts of violence, previous school attacks or attackers, weaponry or anti-social characters, notorious criminals, murderers, or gangs, law enforcement or military paraphernalia or appearance. Are there any indications of violent revenge fantasize or a desire to be a martyr for a cause/belief system? (historical-or-fictional)? No Yes, Describe: _____

8. Are there indications of a motive or goal for aggressive behavior or a lethal attack?

No Yes, Describe: _____

If a plan, motive or target is not clearly indicated, is the aggression or the violence reactive?

No Yes, explain triggers and agitators: _____

9. Are there indications of hopeless, stressed, overwhelming, victimized or desperate situations (real or perceived)? No Yes, explain: _____

10. Are there indications of capacity or ability to carry out an act of targeted / planned violence?

No Yes, Describe: _____

11. Are beliefs or ideas:

Irrational (paranoid, obsessive, a feature of a disability, unreciprocated romantic obsession)?

No Yes, describe: _____

Socially maladjusted (sees violence as justifiable method of problem solving and accepts consequences)? No Yes, Describe: _____

12. Are actions and behaviors consistent with threatening communications? (If threats are made but lack attack-related behavior, motives or a specific target(s) consistent with that of threat, then risk decreases) No Yes, Explain: _____

13. Are caregivers, peers, and/or staff concerned about potential for violence or aggression?

No Yes, Explain: _____

14. Are there trusting, successful relationships with one or more responsible adults?
 No Yes, Who: _____

15. What are aggravating factors - circumstances, events, or triggers that increase or agitate the likelihood of a violent or aggressive attack? _____

16. What circumstances, events, or inhibitors decrease the likelihood of a violent or aggressive attack? _____

17. Are there indications that peer group reinforces delinquent thinking? No Yes, Explain: _____

What are relationship dynamics (leader, follower, victim, outcast, marginalized, disconnected, bully, etc.) Explain: _____

18. Is there a history of school, behavioral, drug/alcohol or developmental issues? No Yes, Explain: _____

19. Are there mental health issues, or issues that indicate a low reserve of coping strategies and lack emotional resiliency?
 No Yes, Describe: _____

20. Other Concerns: _____

CONSIDER REQUESTING A LEVEL 2 THREAT ASSESSMENT IF:

1. You have clear concerns but are unable to confidently answer questions on this protocol, **and / or**
2. You have confidently answered the questions on this protocol and have safety concerns regarding impulsive or reactive behavior that will likely result in serious or lethal injury or threats of targeted aggression that indicate motive, plan, preparation, or other behavior that suggests the seriousness consideration of an act of targeted aggression. **and / or**
3. You have exhausted your building resources and would like to explore community support to assist you with supervision. **and/or**
4. If student (s) of concern brought a gun to school or attempted to acquire a gun with intent to harm or intimidate others, or has been arrested for firearms related offenses in the community.

After completion of the Level 1 Threat Assessment Screening, and if the Site Team has determined that a Level 2 Assessment is needed, immediately contact **LBL Student and Family Support Services** to begin the process.

Please provide Dispatch with the information requested below so a complete Level 2 team can be assembled in a timely manner.

If a Level 2 Assessment is not requested, move to Step 6 to complete the protocol.

NOTE:

While awaiting the Level 2 assessment, use the student supervision plan (Step 4) to manage the situation and document interim steps taken by Site Team.

INFORMATION NEEDED FOR DISPATCHING A LEVEL 2

1. Is student adjudicated? Yes No

If yes – Name of Probation Officer _____ Phone #: _____

2. A Ward of the Court or other supervision? Yes No

If yes – Name of Caseworker _____ Phone#: _____

3. Other agencies or individuals involved with the student (therapists, doctors, etc.) that should be included with the parent's permission? Yes No

If yes, is there signed consent for exchange of information? Yes No

If yes, please list agencies and individuals: _____

Phone: _____

4. Special Ed. Or 504 involvement, disability codes and current placement? Yes No

If yes, details: _____

5. Is student in self-contained classroom? Yes No

6. Was parent or guardian present at Level 1 survey: Yes No

7. Are parents supportive, constructive and available to be interviewed? Yes No

If yes, what is their contact information: Home Phone: _____ Cell Phone: _____

8. Other information Level 2 team will need for assessment: _____

Sign, send, file and begin supervision as planned.

1. Sign the Protocol
2. LBL Behavior Consultant brings copies to STAT 2 if selected.
3. Bring "Student Threat Assessment and Management System" recommendations

STAT Level 2: Yes date: _____ No

Team Signatures:

Administrator, Plan Supervisor Date

Counselor Date

School Resource Officer Date

Other Date

Other Date

Other Date

Other Date

Other Date

NOTES:

Developed by John Van Dreal at Salem-Keizer Public Schools using the following information: Pynchon and Borum, Assessing Threats of Targeted Group Violence: Contributions from Social Psychology; Reddy, Borum, Berlun, Vossekui, Fein, and Modzeleski, Evaluating Risk for Targeted Violence in Schools: Comparing Risk Assessment, Threat Assessment, and Other Approaches; O'Toole, The School Shooter: A Threat Assessment Perspective; Fein, Vossekui and Holden, Threat Assessment: An Approach to Prevent Targeted Violence; Meloy, Violence Risk and Threat Assessment, Specialized Training Services Publication; De Becker, The Gift of Fear; Johnson, Assessment of Violent and Potentially Violent Youth In the Schools. Calhoun, Hunters and Howlers. Vossekui, Pollack, Bourne, Modzieski, Reddy, and Fein, Threat Assessment in Schools, A Guide to Managing Threatening Situations and to Creating Safe School Climates.

All above reference material can be linked from our web page:
<http://www.salkeiz.k12.or.us/district/risk/manual/ta/ta3.htm>

STUDENT THREAT ASSESSMENT AND MANAGEMENT SYSTEM

These recommendations were generated through the efforts of the Linn County Student Threat Assessment Team (STAT) and are for consideration in the management of threatening or dangerous circumstances involving students. STAT is a consultation team that assesses risk of violence and assists case managers with the application of resources to manage and decrease the possibility of attack, protect potential targets, and support students to develop and employ healthy and safe coping strategies.

STAT Level 1 and 2 – Recommendations

(CHECK IF RECOMMENDED) Name: _____ Date: _____

Next Steps:

- Case will be staffed by Linn County Student Threat Assessment Team (STAT) on (date): _____
- Administrator will request further assessment if risk circumstances escalate. Call: _____
- Continue with Level 1 Student Supervision Plan
- Intended victim warned Parent / Guardian of targeted student notified.
- Plan to protect targeted/victimized student implemented. Consider both physical and psychological safety needs.

Student Options:

- Individual Accountability Plan: No harm contract / Student will self-manage: Describe: _____
- Suicide Assessment initiated on _____ (use District Suicide Protocol.): _____
- Student will identify triggers, agitators and agree to “safe room” or resource of support: _____
- Diversion: _____
- Other: _____

School Options:

- Protective Response initiated by Security Department: _____
- Alert staff and teachers on need-to-know basis: _____
- Review educational plan: _____
- Specialized class / Alternative class or track: _____
- Travel card and time accountability: _____
- Late arrival / Early dismissal: _____
- Entry / Exit check with: _____
- Social skill building programs: _____
- Increase supervision in following settings: _____
- Decrease or eliminate pass time or unsupervised time: _____
- Daily Weekly modification of schedule: _____
- Frequent / random search of backpack/purse, locker, pockets, etc. by school personnel: _____
- Assign identified staff to build trusting relationship through check-in or mentorship: Administrator
 Mentor CDS/ Counselor School Resource Officer Teacher Other: _____
- Provide means by which student may safely report and discuss thoughts or intentions to harm others and receive appropriate intervention: _____
- Identify and further develop activities, relationships or things of value that inhibit possibility of acting out: _____
- Other interventions or supervision strategies that will directly address the triggers and agitators identified through assessment: _____
- Review transportation options _____
- Consider placement change (administrative transfer, Interim Alternative Educational Setting (IAES), expulsion, etc. as per district policy. (District may unilaterally remove student to IAES, but IEP team decides actual placement if student is receiving specialized instruction. See gray box below.)

Refer to school special education or 504 team to consider evaluation. If student has IEP or 504 plan, refer to special education team or 504 team to consider.

- Further evaluation.
- Reviewing goals and placement options. Referral to alternative educational placement.
- Increasing supervision in the following setting
- Home supervision pending further assessment or action.

- Continue to monitor communications and behavior for an escalation of Risk.**
- Other School option: _____
- Monitor social media activity for concerning statements, agitators, triggers, threats, or behavior related to the preparation of an attack.
- Request ROI for medical/mental health provider

Family / Home Options:

- Strategize Safety options / planning: _____
- Increase supervision.
- Parents contacted and will provide following supervision / intervention: _____

- Safety proof home.
- Referral for domestic violence intervention: _____
- Parent training classes. _____
- Other: _____
- Monitor social media activity for concerning statement, agitators, triggers, threats or behavior related to the preparation of an attack,
- Use family social media contact or refer to www.commonssensmedia.org for information on appropriate youth media use.

Community Options:

- Referral to YST.
- Anger management programs: _____
- Mentoring programs: _____
- Notify Probation /Parole officer: _____
- Faith Community Programs: _____
- Foster Positive Community Activities, interests: _____
- Explore grant money assistance for inhibitors or other needs: _____
- Refer to Juvenile Family Support Program. _____
- Referral to substance abuse intervention with: _____
- Review Mental Health evaluation options. Contact: _____
- Review of counseling or therapy options: _____
- Juvenile Dept. supervision and release / safety plan.
- Other: _____

Review: Administration will review the status of this plan. (recommended weekly or bi-weekly and decrease as supervision/intervention needs decrease risk) and revise as needed on

Date