

DETERMINATION OF THREAT LEVEL

Imminent threat High risk threat Moderate risk threat Low risk threat

CASE MANAGEMENT INTERVENTIONS & RESPONSE

Imminent Risk Threat

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| <ul style="list-style-type: none"> <input type="checkbox"/> Notify law enforcement per regulation to contain threat; and consult with Safety and Security <input type="checkbox"/> Mobilize threat assessment team <input type="checkbox"/> Provide direct supervision of subject until removed from campus by law enforcement or parent/guardian. <input type="checkbox"/> Caution the subject about the consequences of carrying out the threat | <ul style="list-style-type: none"> <input type="checkbox"/> Protect and notify intended victim(s) and parents and/or guardians of victim(s) <input type="checkbox"/> Notify subject student's parents and/or guardians <input type="checkbox"/> Notify superintendent or designee <input type="checkbox"/> Follow discipline procedures as per conduct policy | <ul style="list-style-type: none"> <input type="checkbox"/> Refer subject for mental health assessment, <input type="checkbox"/> Notify subject/parents of requirements for re-admission to school <input type="checkbox"/> Develop/monitor safety plan <input type="checkbox"/> Assign team member to monitor subject and intervention/safety plan. |
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High Risk Threat

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| <ul style="list-style-type: none"> <input type="checkbox"/> Notify law enforcement per regulation to contain threat; and consult with Safety and Security <input type="checkbox"/> Mobilize threat assessment team <input type="checkbox"/> Provide direct supervision of subject until removed from campus by law enforcement or parent/guardian. <input type="checkbox"/> Caution the subject about the consequences of carrying out the threat | <ul style="list-style-type: none"> <input type="checkbox"/> Protect and notify intended victim(s) and parents / guardians of victim(s) <input type="checkbox"/> Notify subject student's parents and/or guardians <input type="checkbox"/> Notify superintendent or designee <input type="checkbox"/> Follow discipline procedures as per conduct policy | <ul style="list-style-type: none"> <input type="checkbox"/> Refer subject for mental health assessment, <input type="checkbox"/> Notify subject & parents of requirements for re-admission to school <input type="checkbox"/> Develop/monitor safety plan <input type="checkbox"/> Assign team member to monitor subject and intervention/safety plan. |
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Moderate Risk Threat

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| <ul style="list-style-type: none"> <input type="checkbox"/> Mobilize threat assessment team <input type="checkbox"/> Notify subject & parents and/or guardians <input type="checkbox"/> Provide direct supervision of subject until parents and/or guardians assume control <input type="checkbox"/> Caution the subject about the consequences of carrying out the threat | <ul style="list-style-type: none"> <input type="checkbox"/> Protect and notify intended victim(s) & parents / guardians of victim(s) <input type="checkbox"/> Consult with SRO to assist in monitoring/ supervising subject and determining need for law enforcement action. <input type="checkbox"/> Notify superintendent or designee <input type="checkbox"/> Follow discipline procedures | <ul style="list-style-type: none"> <input type="checkbox"/> If needed, refer subject for mental health assessment <input type="checkbox"/> Assign a team member to monitor subject and status of intervention, as appropriate <input type="checkbox"/> If warranted by findings of mental health assessment, develop/monitor safety plan |
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Low Risk Moderate Risk High Risk/Imminent

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| <ul style="list-style-type: none"> <input type="checkbox"/> Advised RP / Target to consult with threat assessment team, as needed <input type="checkbox"/> Contact subject's parents and/or guardians, if necessary <input type="checkbox"/> Notify intended victim(s) & parents/ guardians, if necessary <input type="checkbox"/> See that perceived threat is resolved through explanation, apology, or making amends | <ul style="list-style-type: none"> <input type="checkbox"/> Consult with Safety and Security specialist and/or SRO, if necessary <input type="checkbox"/> Refer subject for services to resolve problem, if appropriate <input type="checkbox"/> Follow discipline procedures <input type="checkbox"/> Develop behavior intervention plan and/or contract, as appropriate | <ul style="list-style-type: none"> <input type="checkbox"/> Refer for school- or community-based services, as appropriate <input type="checkbox"/> Assign a case manager to monitor subject and status of intervention, as appropriate |
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Print name of Team Member: _____ Date: _____

Signature of Team Signature: _____

Actions with Subject making the threat:

Case Manager / Point of Contact Name:

Alter schedule to minimize contact with threatened target? Yes No

Student Services / Human Resources staff to monitor? Yes No

Name of staff member who will monitor subject:

School-based/ EAP supportive counseling offered? Yes No

Name/position of staff member who will provide counseling to student:

Referral for private or community-based mental health services? Yes No

Consult with any other agency? Yes No

Agency & Name of Contact:

Other actions planned:

Print name of Team Member: _____ Date: _____

Signature of Team Leader: _____

(Signature indicates agreement with identified level of threat and the above actions have been taken.)

PART VII. VERIFICATION OF CASE CLOSURE

This case has been resolved and necessary actions have been taken to provide support or assistance to the subject who made the threat and to any impacted persons.

Signature of team member: _____ Date: _____

Signature of administrator: _____ Date: _____