

WEST ORANGE – COVE CISD

902 W. Park Orange, TX 77630 *Phone: 409.882.500*

SAFE SCHOOLS COMMITTEE

To create a safe school climate and culture, and a collaborative environment around school safety, West Orange-Cove CISD has established a District Safe Schools Committee. This committee consists of district staff, campus staff, community partners, and parents who provide insight to the district on many areas related to safety and security.

Board of Trustees	
Tommy Wilson	Board Trustee
Ruth Hancock	Board Trustee
Demetris Hunter	Board Trustee
District	
Dr. Rickie Harris	Superintendent of Schools
Elvis Rushing	Director of Technology
Manuel Vera	Director of Transportation
Greg Willis	Director of Maintenance
Darryl Hunt	Chief of Police
Dr. Alicia Sigee	Director of Student Services
Shelly Trump	Registered Nurse
Teachers/Staff	
Vickie Oceguera	NELC, Principal
Athena Jefferson	WOS-E, Assistant Principal
Brandon Allison	WOS-M, Assistant Principal
Karl Whitley	WOS-H, Assistant Principal
Amanda Reynolds	NELC
Alayna Jacobs	NELC
Julie Beavers	NELC
Joy Courtier	NELC
Lauren Willis	NELC
Katie Knobloch	NELC
Wendy Gillet	WOS-E
Lindy Bruno	WOS-E
Dawn Fults`	WOS-E
David Post	WOS-H

Russell Bottley	WOS-H
Veronica Gardner	WOS-H
Parent/Community	
Kreshona Armstrong	Parent
Benitris Edwards	Parent
Tiffany Bell	Parent
Tamyra Carter	Parent
Josettee Rubin	Parent
Teniya Redeb-Sparks	Parent
Shinita Fisher	Parent
Stephanie Robinson	Parent
Terrie Salter	Parent

The committee meeting will be three times a year (once per semester and summer).

All meetings will be held at 5:00 pm in the Community Outreach Room, Admin Building.



STUDENT BEHAVIOR THREAT ASSESSMENT AND MANAGEMENT PROTOCOL

Purpose:

Is to analyze behavior and work to prevent possible violent events to enhance the safety of the district. This protocol provides an evidence-based approach to identify students who pose a threat and intervene with appropriate resources and ultimately improve the safety and wellbeing of individuals and facilities. [TEC 37.220][TEC 11.252(3)(B)(i)]

Policy: Student Welfare Crisis Intervention FFB (Legal) and (Local) and Student Welfare Student Assistance Programs/Counseling FFE(Legal).

Definitions:

• A **Threat Assessment Team** is a team that assesses and reports individuals who make threats of violence or exhibit harmful, threatening, or violent behavior and who gathers and analyzes data to determine the level of risk and appropriate intervention. The team serves as a safety net for the community and school by:

1. Conducting a fact-based, investigative approach to determine how likely a person is to carry out a threat of violence.

2. Identifying, assessing, and managing appropriate interventions of individuals who are at risk for violence against themselves and/or others.

3. Guiding students and school employees on recognizing harmful, threatening, or violent behavior that may pose a threat to the community, school, and/or individual.

- When conducting this process with fidelity it leads to a positive and safe school climate. This process is not intended to be punitive or adversarial; rather, it is a way to build trust and situational awareness. [TEC 37.115(f)(1)(a)]
- **Harmful, threatening, or violent behavior** includes behaviors, such as verbal threats, threats of self-harm, bullying, cyberbullying, fighting, the use or possession of a weapon, sexual assault, sexual harassment, dating violence, stalking, or assault, by a student. [TEC 37.115(a)(1)]
- A **threat** is a concerning communication or behavior that indicates that an individual poses a danger to the safety of school staff or students through acts of violence or other behavior that would cause harm to self or others. The threat may be expressed/ communicated behaviorally, orally, visually, in writing, electronically, or through any other means; it is considered a threat regardless of whether it is observed by, or

communicated directly to, the target of the threat or observed by/communicated to a third party and regardless of whether the target of the threat is aware of the threat. [TEC 37.115(a)(1)]

- A **threat assessment** is a fact-based process emphasizing an appraisal of observed (or reasonably observable) behaviors to identify potentially dangerous or violent situations, to assess them, and to manage/address them. [TEC 37.115(f)(1)(b)]
- **Team** means a threat assessment and safe and supportive school team established by the board of trustees of a school district. [TEC 37.115(a)(2)]
- A **low-risk threat** is one in which the individual/situation does not appear to pose a threat of violence or serious harm to self/others, and any exhibited issues/concerns can be resolved easily.
- A moderate risk threat is one in which the person/situation does not appear to pose a threat of violence, or serious harm to self/others, at this time; but exhibits behaviors that indicate a continuing intent and potential for future violence or serious harm to self/others; and/or exhibits other concerning behavior that requires intervention.
- A high-risk threat is one in which the person/situation appears to pose a threat of violence, exhibiting behaviors that indicate both a continuing intent to harm and efforts to acquire the capacity to carry out the plan; may also exhibit other concerning behavior that requires intervention.
- An **imminent threat** exists when the person/situation appears to pose a clear and immediate threat of serious violence toward others that requires containment and action to protect identified or identifiable target(s); may also exhibit other concerning behavior that requires intervention.
- Suicidal Ideation refers to the thoughts one has about taking his or her own life, with some degree of intent. Although a person may experience suicidal thoughts, it <u>does not</u> mean he or she is in imminent danger of committing suicide. However, suicidal ideation is a serious issue that needs to be addressed. There are *two types of suicidal ideation*: active and passive. *Active* suicidal ideation involves a current desire and plans to die. *Passive* may also include a desire to die but is not accompanied by a plan to end one's life.
- Non-Suicidal Self-Injury (NSSI) is the intentional destruction of one's body tissue without suicidal intent and for purposes not socially sanctioned. Common examples include cutting, burning, scratching, banging, or hitting. Because NSSI is typically

associated with emotional and psychiatric distress, and because NSSI increases the risk of suicide, it is crucial to assess and intervene with appropriate resources.

• Manage the threat by implementing problem-solving supports, and if warranted, an intervention and monitoring plan to prevent harm where possible and to reduce/mitigate the impact of the situation. Progress monitoring should also occur.

Teams

District:

Purpose

District-level support for Student Behavior Threat Assessment and Management Team is available and encouraged to address the complex nature of the individual student. The district-level team includes individuals with expertise in education, special education, counseling, behavior management, school administration, mental health and substance abuse, school safety and security, emergency management, and law enforcement. [TEC 37.115(e)]

The campus threat assessment team is encouraged to consult with the district team as needed.

District Student Behavior Threat Assessment and Management Team (DTAT) positions include:

- Director of Maintenance
- Director of Student Services
- Chief of Police School Safety & Security
- Director of Technology
- Director of Transportation
- Director of Communication

Campus:

Purpose

This team will determine if a threat assessment is needed to address threats, or non-typical and dangerous behaviors utilizing the *West Orange - Cove CISD Behavior Threat Assessment Protocol*. This protocol provides an evidence-based approach to identify students who pose a threat and intervene with appropriate resources. The campus threat assessment team is encouraged to consult with the district team as needed.

The Campus Student Behavior Threat Assessment and Management Team (CTAT) is to be multi-disciplinary and must include individuals with expertise in school administration, mental health, instruction, and law enforcement. Involving members from an array of disciplines enhances the team's ability to: [TEC 37.115(d)]

• Identify developing concerns/threats

- Gather information from multiple sources
- Maximize skills and resources to address concerns
- Monitor outcomes
- Communicate within the team and to other community support providers
- Collaborate regarding effective awareness and outcomes
- Coordinate and engage in purposeful planning of actions and interventions to help

mitigate risk and engage the individual(s) of concern onto a more positive pathway. Campus Student Behavior Threat Assessment and Management Teams (CTAT) positions include:

- Administrator Coordinator*
- Nurse
- Counselor
- A teacher who knows the student
- Special education teacher (if needed)
- School police officer
- Others who may contribute to the process such as transportation, custodial staff, cafeteria staff, and aides or support staff
- Community members with information, such as probation officers, social services, or others providing service or knowledge of the student.
- Parents/guardians **DO NOT** participate in the Student Behavior Threat Assessment and Management Team process with the exception of notification, parent interview and development of management plan.

A Threat assessment is required for the following student behaviors:

Verbal threats	Threats of self-harm
Bullying	Cyberbullying
Habitual fighting	Use or possession of a weapon
Sexual assault	Sexual harassment
Dating violence	Stalking

Assault

Note: The focus of TAT is to understand the situation and how best to mitigate safety concerns. It is not the same as a criminal or disciplinary investigative process, nor is it profiling. Profiling involves making generalizations about an individual based on the individual's similarity to high-risk groups; whereas threat assessment is an individualized assessment of the person of concern, considering their particular situation at a particular point in

time. Behavioral threat assessment and management is a deductive, dynamic process that is responsive to the nature and process of the threatening situation (SIGMA Threat Management Associates, 2017).

CTAT Team Roles and Responsibilities

The core CTAT team must include an administrator, at least one school counselor, and law enforcement (for moderate, high, imminent risk situations). Roles and responsibilities for school CTAT teams typically include:

CTAT Coordinator

It is important to identify behavior threat assessment leadership so that faculty and staff know to whom concerns should be reported.

- Ensures the threat assessment process is conducted thoroughly, ethically, legally, and with fidelity.
- Ensures proper documentation is completed and retained according to district guidelines, and federal and state laws.
- Conducts team meetings, delegating tasks for information gathering.
- Ensures follow up and/or monitoring of students as needed.
- A member of the CTAT team may perform duties below and also be assigned as coordinator.

School Administrator

- Consults with team members to screen cases and determine when to conduct an initial screening versus mobilize a full threat assessment inquiry.
- Assists in conducting interviews of subjects, targets, witnesses, teachers, staff, parents, and students.
- Assists in gathering additional information (e.g., school records).
- Determines and enforces disciplinary consequences, if appropriate.
- Ensures that any threat management plan is followed and monitored.
- Works closely with the Director of Communications to respond to community concerns and questions.

School Counselor

• Leads and/or assists in conducting interviews of subjects, targets, witnesses, teachers, staff, parents, students.

- Serves as a liaison with community mental health providers.
- Advises the team on school-based and community interventions and supports, including possible mental health assessments, where appropriate.
- Assists with the next steps and possible referrals.
- May provide interventions and supports.

School Police

- Assists in conducting interviews of subjects, targets, witnesses, teachers, staff, parents, and students.
- Assists with efforts to ensure safety and security.
- Conducts independent criminal investigations, as needed.
- Serves as a liaison with law enforcement, court personnel, juvenile justice, probation, etc.
- Uses discretion to determine the need for welfare checks, weapons checks, and home searches, where permissible.
- Assists with the next steps and possible referrals.

Educators, Coaches, and Mentors

• Individuals who know the person(s) of concern the best and can provide information about the situation.

Persons with expertise in (if situation warrants)

- Human Resources informed on personnel policy and practices, if the case involves staff.
- Legal Counsel.
- Other relevant areas (e.g., special education case manager, behavioral specialist) to serve as ad hoc members.

Others members as team deems appropriate

As needed, the team will also consult with external community support agencies (local mental health authority, juvenile probation, CPS, etc.). West Orange - Cove CISD takes student and staff safety very seriously. Reports of situations that pose a threat to self and/or others and non-typical or dangerous behaviors are usually reported directly from our students and/or staff to their administrators, counselors, or district police officers. Reports may also be presented through Orange County Crime Stoppers, the Mustang Tips, and district law enforcement.

Decision-making authority

The Campus Principal is the Team Leader. The decision making model of the CTAT is a consensus building with each member sharing their respective expertise, ideas, questions,

concerns, and suggestions in an open exchange of information. The CTAT decisions should be viewed as recommendations to the Principal.

Student records and information

The CTAT will adhere to WOCCISD Policy Student Records, FL (Legal) and FL (Local).

Training

All members of the Student Behavior Threat Assessment and Management Team will receive training from ESC 5 or designated trained district personnel.

Reporting

The campus will code all students who receive a full threat assessment in Skyward within ten (10) days of completion of the assessment.

Procedures

A threat is reported:

1. Step 1: Make Sure All Students Are Safe

Appropriately detain the student(s) of concern

Do not allow access to coat, backpack, cell phones, or locker

Implement Standard Response Protocol (SRP)

If there is imminent danger, call the WOCCISD Police

Report threat to The Superintendent of Schools

Protect the target student(s)

- 2. Step 2: Convene and notify the Campus Behavior Threat and Management Assessment Team (CTAT)
 - Complete the Threat Assessment Screening Form
 Decide if the threat is transient (low) and/or substantive (moderate-high)

a). Transient (low) threat:

- 1) Notify parents/guardian
- 2) Resolve case
- 3) Add services as needed

b). Substantive (moderate) threat:

- 1) Take precautions to protect potential victims
- 2) Complete full Threat Assessment
- 3) Notify parents/guardian
- 4) Warn potential victims and parents
- 5) Look for ways to resolve conflict
- 6) Discipline student, when appropriate
- 7) Provide supports, services, and a management plan

c). Substantive (imminent) threat:

- 1) Take precautions to protect potential victims
- 2) Complete full Threat Assessment
- 3) Notify parents/guardian
- 4) Warn potential victims and parents
- 5) Look for ways to resolve conflict
- 6) Refer to counseling or community support
- 7) Develop a safety plan
- 8) Discipline student, when appropriate
- 9) Provide supports, services, and a management plan
- 3. *Step 3*: Implement and monitor the safety plan
- 4. Step 4: Code in Skyward
- 5. Step 5: Share required documentation to staff
- 6. Step 6: Reassess plans as needed
- 7. *Step 7*: Close case when appropriate
- 8. *Step 8*: File all documentation in a secure location. DO NOT file in the cumulative folder.

** Threat assessment does not require referral for special education.

Procedures for Threat Levels Checklist

LOW LEVEL: Risk to target(s), students, staff, and school safety is minimal.					
Threat is vague, indirect, inconsistent, implausible					
Information contained within the threat lacks detail or realism; no "true" threat; student lacks					
developmental understanding					
 Available information suggests that the person is unlikely to carry out the threat or become violent 					
No identified grievances; thought was in passing to a specific circumstance, remorseful					
Supports available and accessible					
Actions (Check actions taken):					
□ Parent/guardian called and briefed about the situation:					
Parent/guardian: Date: Time:					
Student released to: 🛛 parent/guardian 🖾 routine after-school transportation 🖾 Other:					
□ Notified victim/victim's parents (if target identified)					
Date: Time: By whom:					
□ Threat/situation resolved through mediation, restorative conference, and/problem-solving					
process					
□ Assisted with connecting to school and community resources, including follow-up support, if needed.					
Specify action: Develop/revise Intervention and Monitoring Plan Schedule ARD/504 review					
□ Other: □ Refer for evaluation					
Consulted with community provider					
Provided information regarding community resources					
□ Notified building principal of outcome, if he/she was not a member of the assessment					
team					
Followed discipline procedures (if applicable), WOCCISD Student Code of Conduct					
□ Other:					

MODERATE LEVEL: The threat could be carried out but supports are available and students willing to access supports.

- The threat is plausible but lacks specifics.
- No clear indication that the student has taken preparatory steps, although there may be ambiguous or inconclusive references pointing to that possibility.
- Some grievances but do not view the situation as hopeless.
- Moderate or lingering concerns about a student's potential to act violently but willing to access supports. Open to help.

Has at least some protective factors present.

Actions (Check actions taken):

Consulted with law enforcement and/or they participated in the assessment as a team member.

$\Box \mbox{Parent/guardian}$ called and briefed about the situat	tion. Parent/guardian to rep	ort to school or other identified locations.
Parent:	Date:	Time:

□ Secured/removed weapon(s) or item(s) mentioned in the student's plan (involve law enforcement support, as appropriate).

□ Provided direct supervision of student at all times (including restroom).

□ Protect(ed) and notified intended victims(s) and their parents/guardians (if specific individuals were identified).

Notified on: Date: ______ Time: _____ By whom: _____

Notified the school principal and superintendent/designee. Date: _____ Time: _____
By whom: ______

□ Released student to (*do not allow the student to be released to routine after school transportation*):

____ Parent/guardian committed to constant supervision and seeking additional mental health support.

____ Law enforcement/WOCCISD Police took the student into protective custody.

____ Department of Social Services (if warranted due to concerns in the home environment).

□ Developed an *Intervention and Monitoring Plan* involving parents and school and/or community mental health

□ Referred to school and community resources, as identified in the *Intervention and Monitoring Plan*.

□ Followed discipline procedures, per WOCCISD Student Code of Conduct.

□ Other:

□ IMMINENT: Clear and imminent safety risk. NEEDS IMMEDIATE CONTAINMENT via law enforcement intervention or mental health crises. The student has means, method, and desire to execute a plan in the					
short-term if no containment.					
☐ HIGH LEVEL: The threat or situation of concern appears to pose a serious danger to the safety of					
others. Immediate containment is not needed but immediate safety planning is necessary and constant					
supervision is needed.					
 The threat is specific and plausible. There is an identified target or strong indication of a target(s). Information suggests concrete steps have been taken to act on the threat and has means (e.g. acquired or practiced with a weapon, has victim under surveillance). 					
 Information suggests a strong concern about a student's potential to act violently. 					
Strong grievance; intent on violence as the only solution.					
Minimal to no supports; resistive to problem solving/interventions.					
Actions (ALL boxes should be checked):					
NOTIFIED LAW ENFORCEMENT IMMEDIATELY FOR SUPPORT TO CONTAIN THREAT					
Notified on: date: time: by whom:					
□Parent/guardian called and briefed about the situation. Parent/guardian to report immediately to the school or law					
enforcement facility.					
Parent: Date: Time:					
Provided direct supervision of student at all times (including restroom).					
Protect and notify intended victims(s) and their parents/guardians (if an intended target). Notified on: Date: Time: By whom:					
□ Notified school principal and superintendent/designee. Date: Time: By whom:					
□ Release of student:					
If imminent risk, only release student to:					
Law enforcement or WOCCISD Police took the child into protective custody.					
Ambulance transport to hospital requested by: parents, school, or unable to contact parent. If high risk, only release the student to:					
Primary caregivers if agree to provide constant supervision and seek supports (if caregivers refuse to supervise, it rises to imminent risk)					
Department of Social Services (if warranted due to concerns in the home environment or parents refuse to supervise).					
Consider if mental health and/or law enforcement assessment is necessary/required before returning to school.					
□ If the student returns, develop an <i>Intervention and Monitoring Plan</i> involving parents, school, community mental health, and/or law enforcement/WOCCISD Police.					
□ Assign team member(s) to monitor student and ensure <i>Intervention and Monitoring Plan</i> is followed, including follow- up meetings to review progress.					
□ Followed discipline procedures, per WOCCISD Student Code of Conduct.					
□ Prepare a <i>Re-Entry Plan</i> /meeting involving parents, school, law enforcement, and/or community mental health personnel.					
□Other:					

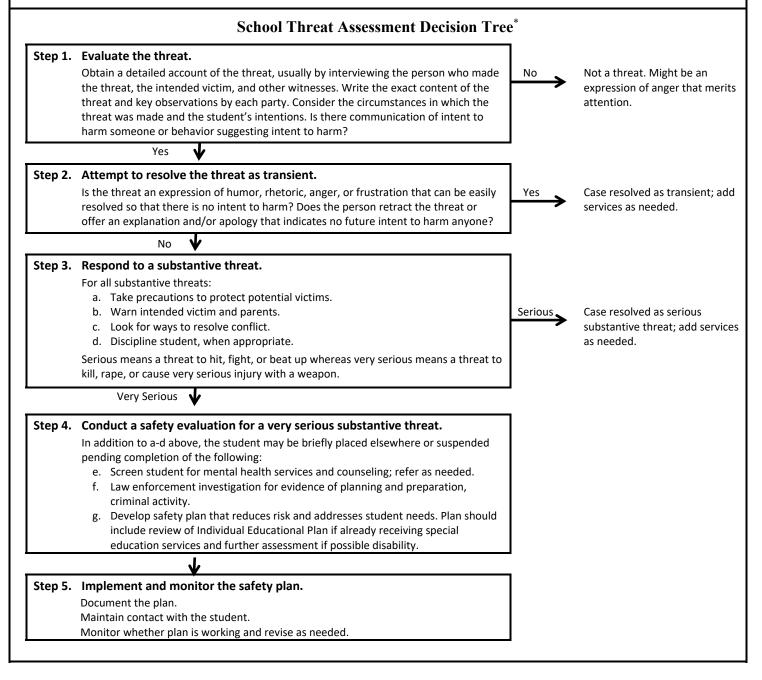
WOCCISD SCREENING and THREAT ASSESSMENT REPORT

Threat Assessment Guidelines

OVERVIEW

A threat is a communication of intent to harm someone that may be spoken, written, gestured, or expressed in some other form, such as via text messaging, email, or other digital means. An expression of intent to harm someone is considered a threat regardless of whether it is communicated to the intended target(s) and regardless of whether the intended target is aware of the threat. Threats may be implied by behavior that an observer would reasonably regard as threatening, planning, or preparing to commit a violent act. When in doubt, treat the communication or behavior as a threat and conduct a threat assessment. Threats that are not easily recognized as harmless (e.g., an obvious joke that worries no one) should be reported to the school administrator or other team members. The administrator or another team member makes a preliminary determination of the seriousness of the threat. The student, targets of the threat, and other witnesses should be interviewed to obtain information using this protocol. A *transien* threat means there is no sustained intent to harm and a *substantive* threat means the intent is present (or not clear) and therefore requires protective action.

A threat assessment is not a crisis response. If there is indication that violence is imminent (e.g., person has a firearm at school or is on the way to school to attack someone), a crisis response is appropriate. Take immediate action such as calling WOCCISSD Police and follow the SRP.



THREAT REPORT

A threat is an expression of intent to harm someone that may be spoken, written, gestured, or communicated in some other form, such as via text message or email. Threats may be explicit or implied, directed at the intended target or communicated to a third party. Behavior that suggests a threat such as weapon carrying, fighting, or menacing actions should be investigated to determine whether a threat is present.

Name of person reporting threat:

Date/time threat reported:

Affiliation of person reporting threat:
Student
Parent
Staff
Other:

Name of person receiving the report:

INCIDENT or BEHAVIOR OF CONCERN

Name of person making threat:	Date/time threat made:		
Affiliation of person making threat: Student Parent Staff Other	Status: Current Former		
Identification: IMale IFemale Age: Grade, if student: School program, if student			
Emergency Contact:	Relationship:		
Home Address:	Phone:		
Location threat occurred: School Building or Grounds School Bus/Other Travel School-Sponsored Activity			
Digital communication such as text or post Dother			

Summary of the incident or threat. What was reported? Include who said or did what to whom. Who else was present?

Sources of Information	Was information reviewed?	Relevant Findings (use additional pages as needed)
Prior threats	□Reviewed □Not applicable □ Not available	
Prior discipline incidents	■Reviewed ■Not applicable ■ Not available	
Academic records	■Reviewed ■Not applicable ■ Not available	
Special education records	■Reviewed ■Not applicable ■ Not available	
Other records	□Reviewed □Not applicable □ Not available	
Records from other schools	■Reviewed ■Not applicable ■ Not available	
Records from outside agencies (e.g., social services or mental health)	■Reviewed ■Not applicable ■ Not available	
Law enforcement records (criminal history, contacts, firearms purchases, etc.)	■Reviewed ■Not applicable ■ Not available	
Employment records (grievances, disciplinary actions, Title IX, etc.)	■Reviewed ■Not applicable ■ Not available	

INTERVIEWS

When a threat is identified, obtain a specific account of the threat by interviewing the student or other person who made the threat, if appropriate to the circumstances. Interview the intended victims, and other witnesses. Write the exact content of the threat and statements by each party. Consider the circumstances in which the threat was made and the threatening individual's intentions.

Name		Refer to prior page for additional identifying information.
Person(s) Conductin		Location, Date of Interview
g Interview		
	estions as a guide to interview the person making the threat. A djust spacing below as needed.	sk other questions as appropriate. Try to use open-ended questions rather than leading
1. Do you k	5 1 0	ou were [place of incident]? (Record person's exact words with quotation marks for key
2. What exa	actly did you say? And what exactly did you do?	
3. What dic	you mean when you said or did that?	
4. How do	you think [person who was threatened] feels about what you sa	id or did? (Probe to see if the subject believes it frightened or intimidated the person.)

6. What are you going to do now? (Ask questions to determine if the subject intends to carry out the threat.)

Target (person who was target of threat) Or Witness (person with relevant information)

If more than one, complete additional forms. If a group targeted, describe how subject identified the group (e.g., "everyone on this bus") and list all individuals.

Target Name		ID #	
Affiliation	□Administrator □Teacher □Staff □Student □Parent/Guardian □Other:	Status	Current Former Grade (if student):
School		Building/ Program	
Emergenc y		Relation	
Contact Home		Phone	
Address Person(s)			
Conductin		Location, Date of	
g Interview		Intervie w	
	estions as a guide to interview the person targeted by the threat. Ask other questions as a target is a minor, record parent under emergency contact. Adjust spacing below as neede		ry to use open-ended questions rather than leading
	now why I want to talk to you? What happened today when you were [place of incident is if possible.)]? (Record pe	rson's exact words with quotation marks for key
statement			
2. What exa	ctly did (subject) say? And what exactly did (subject) do?		
3. What did	you think he or she meant when he or she said or did that? (Does target believe that sub	oject intends to	o carry out the threat?)
4. How do y	you feel about what (subject) said or did?		
5. What was	s the reason (subject) said or did that? (Probe to find out if there is a prior conflict or his	tory to this th	reat.)
6. What are	you going to do now? (Ask questions to determine how target plans to respond to the th	nreat and assis	t in planning a safe and non-provocative response.)
What do	you think he/she will do now?		

KEY OBSERVATIONS

These items can help assess whether a threat is transient or substantive, but must be considered in the broader context of the situation and other known facts. Regard these items as a checklist to make sure you have considered these aspects of the threat, but they are not to be summed or used as a score.

Th	reat is likely to be less serious:	
1.	Subjects admits to threat (statement or behavior).	☐Yes ☐ Partially ☐No ☐Don't know/Not available
2.	Subject has explanation for threat as benign (such as joke or figure of speech).	☐Yes ☐ Partially ☐No ☐Don't know/Not available
3.	Subject admits feeling angry toward target at time of threat.	□Yes □ Partially □No □Don't know/Not available
4.	Subject retracts threat or denies intent to harm.	□Yes □ Partially □No □Don't know/Not available
5.	Subject apologetic or willing to make amends for threat.	□Yes □ Partially □No □Don't know/Not available
6.	Subject willing to resolve threat through conflict resolution or some other means.	□Yes □ Partially □No □Don't know/Not available
Th	rreat is likely to be more serious:	
7.	Subject continues to feel angry toward	□Yes □ Partially □No
	target.	Don't know/Not available
8.	J 1	□Yes □ Partially □No
0	occasion.	Don't know/Not available
9.	Subject has specific plan for carrying out the threat.	□Yes □ Partially □No □Don't know/Not available
10	. Subject engaged in preparation for	Yes Partially No
10.	carrying out the threat.	Don't know/Not available
11.	Subject has prior conflict with target or	\Box Yes \Box Partially \Box No
	other motive.	Don't know/Not available
12.	. Subject is suicidal. (Supplement with	□Yes □ Partially □No
	suicide assessment.)	Don't know/Not available
13.	. Threat involved use of a weapon other	□Yes □ Partially □No
	than a firearm, such as a knife or club.	Don't know/Not available
14	Threat involves use of a firearm.	□Yes □ Partially □No
		Don't know/Not available
15.	Subject has possession of, or ready access	□Yes □ Partially □No
1.	to, a firearm.	Don't know/Not available
16.	. Subject has or sought accomplices or audience for carrying out threat.	□Yes □ Partially □No □Don't know/Not available
		□Yes □ Partially □No
17.	. Threat involves gang conflict.	Don't know/Not available
18.	. Threat involves peers or others who have	\Box Yes \Box Partially \Box No
	encouraged subject in making threat.	Don't know/Not available

THREAT CLASSIFICATION						
Date of initial classification:	□Not a threat	Transient	□Serious Substantive	□Very Serious Substantive		
Date of change in classification, if any:	□Not a threat	□Transient	Serious Substantive	□Very Serious Substantive		
Reason for change:						

OBSERVATIONS SUGGESTING NEED FOR INTERVENTION

This is an optional form used as needed for intervention planning. Here are some factors to consider in identifying possible interventions to assist the subject and reduce risk. These items are not summed or scored. Use the term "partially" as appropriate to the category to mean the condition is moderate or not clearly present.

	<u> </u>		
1.	History of physical violence.	☐Yes ☐ Partially ☐No ☐Don't know/Not available	
2.	History of criminal acts.	☐Yes ☐ Partially ☐No ☐Don't know/Not available	
3.	Preoccupation with violence, violent individuals, or groups that advocate violence.	☐Yes ☐ Partially ☐No ☐Don't know/Not available	
4.	Preoccupation with mass shootings or infamous violent incidents.	□Yes □ Partially □No □Don't know/Not available	
5.	History of intense anger or resentment.	□Yes □ Partially □No □Don't know/Not available	
6.	Has grievance or feels treated unfairly.	□Yes □ Partially □No □Don't know/Not available	
7.	Feels abused, harassed, or bullied.	□Yes □ Partially □No □Don't know/Not available	
8.	History of self-injury or suicide ideation or attempts.	□Yes □ Partially □No □Don't know/Not available	
9.	Has been seriously depressed.	□Yes □ Partially □No □Don't know/Not available	
10.	Experienced serious stressful events or conditions.	□Yes □ Partially □No □Don't know/Not available	
11.	Substance abuse history.	□Yes □ Partially □No □Don't know/Not available	
	History of serious mental illness (symptoms such as delusions or hallucinations).	□Yes □ Partially □No □Don't know/Not available	
13.	Might or does qualify for special education services due to serious emotional/behavioral disturbance.	□Yes □ Partially □No □Don't know/Not available	
14.	Prescribed psychotropic medication.	□Yes □ Partially □No □Don't know/Not available	
	Substantial decline in level of academic or psychosocial adjustment.	□Yes □ Partially □No □Don't know/Not available	
16.	Lacks positive relationships with one or more school staff.	□Yes □ Partially □No □Don't know/Not available	
17.	Lacks supportive family.	□Yes □ Partially □No □Don't know/Not available	
	Lacks positive relationships with peers.	□Yes □ Partially □No □Don't know/Not available	
19.	Other factors that suggest need for intervention.	□Yes □ Partially □No □Don't know/Not available	

Use ad	EAT RESPONSE ditional pages as needed. This is a list of common actions taken in response to a threat. Each case may require a unique set of actions. Add d signature of person taking action if appropriate. Note if action was recommended but for some reason not completed (e.g., parent refusal).
	1. Increased contact/monitoring of subject
	2. Reprimand or warning
	3. Parent conference
	4. Student apology
	 Contacted target of threat, including parent if target is a minor
	6. Counseling (note number of meetings)
	7. Conflict mediation
	8. Schedule change
	9. Transportation change
	10. Mental health assessment
	11. Mental health services in school
	12. Mental health services outside school
	13. Assess need for special education services
	14. Review of Individualized Education Program (IEP) for students already receiving services
	15. 504 plan or modification of 504 plan.
	16. Behavior Support Plan created or modified
	17. In-school time out or suspension
	18. Out-of-school suspension (number days)
	19. Referral for expulsion
	20. Other disciplinary action
	21. Change in school placement (e.g., transfer, homebound instruction)
	22. Services for other persons affected by threat
	23. Law enforcement consulted
	24. Legal actions (e.g., arrest, detentions, charges)
	25. Other actions

CASE	P	LA	N
	_		- - '

MENTAL HEALTH ASSESSMENT

Date

Date

This section can be used to describe the plan for any case and should be completed as Step 5 in cases of a very serious substantive threat.

Case Resolution or Safety Plan

Describe how case was resolved, including any plan for further actions. List persons responsible for each component of plan.

Follow-up or Revision of Plan

Describe current status of plan and any revisions. List persons responsible for each component of revised plan.

A mental health assessment is usually conducted in cases involving a very serious substantive threat. The purpose of the mental health assessment is to maintain the safety and well-being of the student and others. Therefore, the assessment has two objectives:

- 1. *Treatment and referral needs*. Assess the student's present mental state and determine whether there are urgent mental health needs that require attention, such as risk of suicide, psychosis, or rage. Beyond these immediate needs, consider whether there are other treatment, referral, or support needs.
- 2. *Threat reduction*. Gather information on the student's motives and intentions in making the threat in order to understand why the threat was made and identify relevant strategies or interventions that have the potential to reduce the risk of violence.

Subject Interview (Person who made threat or engaged in threatening behavior)

Subject Name	See records and additional information obtained by threat assessment team to supplement this assessment.
Person(s)	Location, Date of Interview
Conductin g	
Interview	

Usually the interview can begin by asking "Do you know why I want to talk to you?" and after the subject has responded, "Let me explain the purpose of our meeting today." Use these questions as a guide to interview the person making the threat. Ask other questions as appropriate. Try to use open-ended questions rather than leading questions. Adjust spacing below as needed.

Review of threat

1. What happened that made others worried that you wanted to harm someone? What exactly did you say or do that made them worried? What did you mean by that?

2. I know you must have had reasons to say (or do) that; can you explain what led up to it?

3. How would you do it? (carry out the threat) (Probe for details of any planning or preparation.) Where did the idea come from?

4. What could happen that would make you want to do it? (carry out the threat)

5. What would happen if you did do it? (review both effects on intended victims and consequences for student)

6. What do you think the school should do in a situation in which a person makes a threat like this?

7. What were you feeling then? How do you feel now?

8. How do you think (the person threatened) felt?

Relationship with intended victim(s)

1. How long have you known this person?

2. What has happened in the past between you and this person?

3. What do you think this person deserves?

4. Do you see any way that things could be improved between you and this person?

Family support

1. Whom do you live with? Are there family members you don't live with? Have there been any changes in the past year?

2. Whom in your home are you close to?

3. How well do your parents/guardians know you?

4. Where do you go after school? Where are your parents/guardians at this time? How much do they keep track of where you are or what you are doing?

5. How strict are your parents/guardians? What do they do if you do something they don't want you to do? When was the last time you got in trouble with them? What was the worst time?

6. How will your parents/guardians react (or how did they react) when they found out about this situation?

Stress and trauma

1. What kinds of things have been going on with you lately? What sorts of things have you worried about?

2. How has your school work been going lately? Are there things you have been worried about with your school work? Other things at school?

3. What is the worst thing that has happened to you lately? Have any other bad things happened? Is there something you regret or wish you could change?

4. Have there been any changes in your family? Has anyone been sick, moved away, or had anything bad happen to them?

5. Do you have any family members in jail or prison?

6. Do you take any medication?

7. Have you been involved in any counseling?

Mood

1. What has your mood been like the past few weeks? Have you felt down or depressed at times? How bad has it been? (Be alert for statements of pessimism and hopelessness that might indicate suicide risk. If there are indications of suicidal thoughts or feelings, there should be a more extensive evaluation of suicide risk. If necessary, develop a plan for protecting the student and making appropriate referrals.)

2. Have you felt nervous or anxious? Irritable or short-tempered? How bad has it been?

3. Have you ever felt like life wasn't worth living? Like maybe you would kill yourself?

4. Have you ever done something to hurt yourself on purpose? Ever cut yourself on purpose?

5. Have you had any problems with your sleep? Appetite? Energy level? Concentration?

6. Have you been taking any medication to help with your mood or for any other reason?

Psychotic symptoms

Ask a few probe questions and follow up if there is any indication of delusions or hallucinations. Phrase questions appropriate to student's age and understanding.

1. Have you had any unusual experiences lately, such as hearing things that others cannot hear or seeing things that others cannot see?

2. Have you felt like someone was out to get you or wanted to harm you? Have you had any other fears that seem strange or out of the ordinary?

3. Do you have any abilities or powers that others do not have, such as ESP or reading minds?

4. Have you felt numb or disconnected from the world, or like you were somehow outside your body?

Note and inquire about any other symptoms of mental disorder.

Weapons

- Ask about any weapons mentioned in the threat. As an example, these questions concern a threat made to stab someone.
- 1. You said that you were going to stab (name of victim). What were you going to stab him with?
- 2. Do you have a knife? What kind of a knife is it? (Or, how would you get a knife?)
- 3. Have you ever had to use a knife with someone? What happened?
- 4. What do you think would happen if you did use a knife with (name of victim)?

Access to firearms

Ask about firearms in all cases, even if no firearm was mentioned. If the threat involved a knife, bomb, or other weapon, ask about that weapon, too. 1. Do you have a gun?

- 2. Are there guns in your home? Have you ever used a gun for hunting or target shooting?
- 3. If you wanted a gun, how would you get one?
- 4. What do you think you might do if you had a gun?
- 5. Have you ever had to use a gun with someone? Have you ever thought about using a gun with someone?

Aggressive behavior

- 1. Do people treat you fairly? Who has been unfair with you lately? When people treat you unfairly, what do you do about it?
- 2. When you get angry, what do you do? Has your temper ever gotten you into trouble?
- 3. Do you get into fights? When was the last time? What happened?
- 4. Have you ever threatened to harm anyone before?
- 5. Have you thought about what it would be like to hurt someone really bad? Have you written any stories or made any drawings that are violent?
- 6. Have you ever set fire to things?
- 7. Have you damaged your own property or someone else's property?
- 8. Have you ever intentionally hurt an animal?

School discipline

1. When was the last time you got into trouble in school? What happened?

2. Have you ever been suspended or expelled?

3. Have your parents ever been called to school because of your behavior?

4. Do you ever cut school or certain classes?

5. Do you feel that the rules at this school are fair? What has been unfair?

Delinquent behavior

1. Have you been in trouble with the law or with police before? What happened?

2. Have you ever gone to juvenile court? What was it about?

3. Have you done things that could have gotten you arrested or in trouble with the law? What was the worst thing? What else?

4. Do you drink beer, wine, or other alcohol? Have you ever? How often do you drink? When was the last time? Tell me about it.

5. Do you smoke marijuana? Have you ever? How often? When was the last time?

6. Have you used any other drugs? How often? When was the last time? Tell me about it.

Exposure to violence

1. Do you see or hear of violence in your neighborhood?

2. Do you know anyone who was shot, stabbed, or beat up real bad?

3. Do people argue much at home? Does anyone get physically aggressive?

4. What kind of movies do like? What kind of video games do you enjoy playing? What are your favorite Internet sites?

5. Ask the student about his/her reactions to any recent acts of violence or to any highly publicized school shootings.

Bullying

Bullying is broadly defined and may include teasing, social exclusion, or other forms of humiliation in addition to physical threats of violence. The student may not use the term "bully," and may be reluctant to admit being the victim of bullying behavior, so be prepared to rephrase questions and probe for victim experiences. 1. Is there anyone who has threatened you recently? Is there anyone who makes you feel afraid? (Ask about sexual threats if appropriate to situation.)

2. Is there anyone who has teased you or picked on you recently? Is there anyone who has beat you up or pushed you around? How about at home?

In response to any positive answer, follow up for more information: How often does it happen? What have you tried to do about it? Did you let any adult know about this, and if so, what happened? Be alert to statements indicating that a bullied student feels like there is no solution to the problem or is contemplating revenge.

Peer relations

- 1. What are your friends like? Have you had any trouble with your friends lately? Who is your best friend?
- 2. How would your friends describe you?

3. Do you have a boyfriend/girlfriend? (Keep in mind that the student might not be heterosexual, and there may be concerns in this area.) How are things going with him/her? Did you have one before? What happened in that relationship?

- 4. Do you have friends who get in trouble?
- 5. Have you ever joined a gang? Been part of a group like a crew, clique, posse, or mob?

6. Do any of your friends know about (refer to threat situation?) What did they say about it? Anyone who feels the same way you do?

Coping

- 1. How do you like to spend your free time?
- 2. What kinds of things do you do well?
- 3. What are your hobbies and interests? What do you enjoy doing?

4. Can you think of a problem you faced in the past that worked out okay? Can you think of a problem that you solved? Can you think of a time when you went to someone about a problem and that person was able to solve it?

5. What are your plans for the future? What would you like to do when you finish school?

6. What could we do that would help with (refer to the problem that led to the threat)?

Parent/Guardian Interview

Parent Name		Relationship to Student		
Person(s)		Location, Date of Interview		
Conductin g				
Interview				
to convey resp understanding student or inc	ly, parents may feel apprehensive, guilty, or defensive when being interviewed about the pect for the parent, starting from the initial contact and throughout the interview. Also, is and helping the parent's child; otherwise, the parent may regard the interview as an involution on parent. Overall, the interviewer should make every effort to engage the e and successful in school.	t should be evident that the interviewer is interested in vestigation designed to uncover evidence of wrongdoing by the		
	ledge of the threat			
1. What do yo	ou (the parent) know about the threat?			
2. Have you h	eard your child (or use child's name) talk about things like this before?			
3. Are you far	niliar with (the intended victim)? (Ask about the child's history with the intended victir	n—previous relationship and interactions.)		
4. (Ask quest	ons to determine if the child has the means to carry out the threat, such as access to fire	arms.)		
	ou planning to do about the threat? (Is the parent willing to work with the school to devels are addressed?)	elop a plan to assure the threat will not be carried out and that the		
School adjus	tmont			
•	nild ever been suspended or expelled from school?			
2. Have you e	ver met with the school (teacher, counselor, principal) about concerns in the past? What	t happened, what was going on, what was the outcome?		
3. Has your cl	nild ever needed special help in school? Ever been retained?			
4. Has your cl	nild ever been tested in school?			
5. How does	/our child like school?			
6. How often	does your child do homework?			
7. What are y	our child's teachers like?			

Family relationships and current stressors

1. Who lives in the home?

2. Are there any important events that have affected your family/child? Ask about any recent or pending changes, such as: Move, divorce/separation, losses

> Financial status, employment changes for parents Others in home involved with court or the law

3. Who does your child share concerns with? Who is he/she close to?

4. How well does he/she get along with parents? Siblings? Type of conflicts, over what, how resolved?

5. How does your child show anger toward you and other family members?

6. What does your child do after school? Who supervises? What time is your child supposed to be home at night?

7. What responsibilities does your child have at home?

8. Does your child follow rules? What are the consequences for not following the rules?

Peer relations and bullying

1. Has your child reported being teased, intimidated, rejected, or bullied in some other way? (If so, what has the parent done in response?)

2. Who are your child's friends? Are you pleased or displeased with your child's choice of friends?

3. How much is the child influenced by peers? Are there any examples of your child doing something to please peers that got him or her into trouble?

Delinquent behavior

1. Has your child been in trouble with the law or with police before? What happened?

2. Has your child ever gone to juvenile court? What was it about?

3. Has your child done things that could have gotten him or her arrested or in trouble with the law? What was the worst thing? What else?

4. Does your child drink beer, wine, or other alcohol?

5. Does your child smoke marijuana?

6. Has your child used any other drugs?

History of aggression

1. How does your child handle frustration?

2. When your child gets angry, what does he/she do?

3. Has your child gotten into fights in the past? When, where, with whom?

4. Has your child's temper ever gotten him/her into trouble?

5. Has your child ever hit you or other family members?

6. Has your child destroyed his or her own things, or someone else's property?

7. Does your child have any pets? Has he/she ever intentionally hurt the pet or some other animal?

Access to weapons

1. Do you have a gun in your home? Does your child have access to firearms through friends, relatives, or some other source?

2. Does your child have access to weapons other than firearms, such as military knives, martial arts weapons or some other kind of weapon?

3. Has your child ever talked about using a weapon to hurt someone? Ever gotten into trouble for using a weapon, carrying a weapon, or threatening someone with a weapon?

4. What can you do to restrict your child's access to weapons?

Exposure to violence

1. Has your child ever been a victim of abuse?

2. Is your child exposed to violence in the neighborhood?

3. Do people argue much at home? Has there been any physical aggression at home?

4. What kinds of movies, video games, internet sites does your child like? Any parent restrictions? Level of supervision? Child's response?

History

1. Ask about any delays in cognitive, motor, language development. How old was your child when he/she started to walk, talk?

2. Has your child ever had a problem with bedwetting? When, how long? Was anything done for this?

3. Has your child ever been hospitalized? Had any serious illnesses?

4. Has your child had any recent medical treatment? Taking any medications? Obtain diagnoses and medications. Ask for a release.

Mental health

1. Does your child have problems paying attention? Does your child follow directions without repetition and reminders? Does your child complete activities on his/her own? Does your child say things without thinking? Surprised by the consequences of his/her actions?

2. What has your child's mood been like the past few weeks?

3. Has your child been unusually nervous or anxious? Irritable or short-tempered? How bad has it been?

4. Has your child had problems with sleep? Appetite? Energy level? Concentration?

5. Has your child ever talked about hurting himself or herself? Have you ever been concerned that he/she might be suicidal?

6. Have there been any times when your child seemed to be hearing things that weren't there? Has he/she said things that didn't make sense or seemed to believe in things that weren't real?

7. Has your child ever seen a counselor or therapist? Ever taken medication for his/her behavior or mood?

8. Has your child had any involvement with other agencies/programs in the community?

Teacher/Staff Interview

leacher/Stan		
Name of Person Interviewed		Relationship to Student
Person(s) Conducting Interview		Location, Date of Interview
Academics		
	ent doing academically? Has there been any change in recent weeks?	
2. What are this stu	dent's verbal skills? How well can he or she express himself/herself in words?	
3. Has this student special education so	been considered for special education or placed in special education? What kinds ervices, ask about the problem behaviors that are regarded as part of his or her disa	of difficulties does the student have? If a student is receiving ability.
Teacher knowledg 1. What do you kno	ge of the threat ow about the threat?	
2. Have you heard	this student talk about things like this before?	
3. What have other	students told you about this incident?	
4. Is there another t	eacher or staff member who might know something about this?	
Student's peer related to the state of the s	ations his student get along with other students?	
2. Who are the stud	lent's friends?	
3. Are there student	ts who do not get along with this student?	
4. Have there been	other conflicts or difficulties with peers?	
5. Has this student	ever complained of being bullied, teased, or treated unfairly by others?	

Depression

1. Have there been any apparent changes in the student's mood, demeanor, or activity level? Seemed withdrawn or apathetic?

2. Has the student expressed any attitudes that could imply depression, such as expressions of hopelessness or futility, inadequacy or shame, self-criticism or worthlessness?

3. Has this student shown an increase in irritability or seemed short-tempered?

Discipline

1. What kinds of discipline problems have you experienced with this student?

2. How does this student respond to being corrected by an adult?

3. What are the student's emotional responses to being disciplined?

Aggression

1. How does this student express anger?

2. Does this student seem to hold a grudge? Seem resentful?

3. Has this student done anything that expresses anger or aggression, or has an aggressive theme in written assignments, drawings, class projects, etc.?

Parents

1. Have you had any contact with this student's parents? What happened?

INTERVENTION & MONITORING PLAN

Student:	Grade:	Age:	DOB:	
School:	Date:			

Check appropriate actions to implement below:

DISCIPLINE MEASURES

Confrontation/warning	Letter of Apology
Behavior Contract	□ Conflict Resolution (Specify):
□ Detention: <i>#</i> of days	Parent Meeting
□ Suspension: # of days □ ISS □ OSS	□ Charges Filed by Law Enforcement (Specify):
□ Alternative to Suspension (Specify):	Code of Conduct Violation:
Expulsion (Length of Expulsion):	□ Other:

MONITORING MEASURES

□ Check in: With Whom:	How	/ Often:	When:
Back up adult:			
Check out: With Whom:			When:
Back up adult:			
Ongoing collaboration between			
How Often: When:		By Whom:	
Parent/guardian will provide inc	reased supervisior	n: Specify:	
□ Ongoing collaboration with age			
Agency Professional:			
How Often: By:	□ phone □ er	nail 🛛 🗆 Other:	
Ongoing collaboration with prob			
Agency Professional:			
How Often:	By: 🗆 phone	🗆 email 🛛 🗆	Other:
Ongoing collaboration with mer	ntal health profession	onal:	
Name of Professional:		_ School Counselo	r:
How Often:	By: 🗆 phone	\Box email \Box Other:	
\Box Items to be Searched: Items:			
By Whom: H	ow Often:	When:	
□ Safety Contract: (BIP)			
□ Whereabouts on campus monit	tored, by whom:		
□ Daily schedule modified: Spec	ify:		
Restrictions: Specify:			

□ Student will be detained, incarcerated, or placed at/by	<u> </u>
No contact agreement: Specify:	
Permission to exchange information obtained:	
□ Name professional/agency:	Date:
□ Name professional/agency:	Date:
□ Name professional/agency:	Date:

SKILL DEVELOPMENT MEASURES:

□ Student will begin: □conflict resolution □anger management □social skills group		
□ Other:		
Provider:	□ at school □ community provider	
□ Counseling provided by community provider		
(clinical psychologist, LPC, LCSW, etc.) *No cost to WOCCISD Parent will be given the ESC 5	being implemented list of providers	
□ Counseling provided by school-based staff		
□ recommended □ being implemented		
Student referred for a special education assessment		
□ Student will be considered for a change in placement: Specify:		
Functional Behavioral Assessment (FBA) will be conducted		
□ Behavior Intervention Plan (BIP) to be developed		

RELATIONSHIP BUILDING MEASURES:

□ Student will seek support from:	
□counselor □mental health □administrator □mentor □other:	
Student will participate in school activities. Specify:	
□ Student will participate community-based program(s).	
Name of program:	
Agency involved:	
Peer Mentoring Program	
Adult Mentor: Name of mentor:	

ADDITIONAL INTERVENTIONS:

Revise IEP	McKinney-Vento/Foster Care referral
□ Intervention team referral	Social Service referral
□ Change in transportation Specify:	□ Revise 504 Plan
Evaluation Specify:	□ Other:

Additional Notes:

Intervention & Monitoring Plan Developed on: Date: _____

Plan Distributed to (list personnel on a need to know basis only):

These shall be qualified school professionals, who will meet regularly with the student and monitor the *Intervention and Supervision Plan*.

Reentry Meeting
Required - Date:
Not Required - Date of Follow-Up Meeting to Review Progress:

Note: documentation from reentry/follow-up meetings should be attached to this form and maintained with the other Threat Assessment records.

Team Member Signatures:

PARENT NOTIFICATION & AGREEMENT - THREAT ASSESSMENT

STUDENT:	
SCHOOL:	GRADE:
PARENT/GUARDIAN:	_DATE:

The parent/guardian of the student noted above has been called into a conference to discuss a threat made by their child. To keep all students safe, the parent/guardian has been advised of the following:

 \Box I have been advised that my child has expressed a substantive threat

□ The threat assessment process and the Intervention and Monitoring Plan to be implemented

have been explained to me/us.

 \Box I have been advised of home safety and the need for supervision

□ I have been given a provider list of available community supports

 \Box I have been advised to seek an evaluation for my child:

□ Immediately □ Within 24 hours □ Other: _____

□ I understand that West Orange-Cove CISD is not financially responsible for community-based evaluation or treatment, but is simply alerting me to this emergency, as they would inform me of any health problem.

 \Box Campus counselor was consulted

□ School disciplinary action (WOCCISD Student Code of Conduct):

□ Law enforcement was contacted:

□ I understand that upon further investigation additional action may be

taken by the school or law enforcement

□ Student requires a re-entry meeting to return to school

 \Box Other:

Agreement: (Note: interventions required to help ensure safety in the school environment may be implemented regardless of agreement)

□ I agree to follow the recommendations of the Student Behavior Threat Assessment and Management Team understanding that fulfilling those recommendations comes at my expense unless otherwise identified through the Intervention and Monitoring Plan.

□ I accept the recommendations of the Student Behavior Threat Assessment and Management

Team with the following exceptions:

 \Box I do not agree to follow the recommendations of the Student Behavior Threat Assessment and Management Team.

Parent or Guardian

Date

Student

Date

Principal

Date

REENTRY OR FOLLOW-UP MEETING

□ RE-ENTRY MEETING □ FOLLOW-UP MEETING TO ASSESS PROGRESS

□ RE-ENTRY/FOLLOW-UP MEETING NOT NEEDED

Student:			
Grade:	Age:	Date of Birth:	
School:		Date of Threat Assessment	:
Today's Date: _			
Attendees:			
Discussion Note	s:		
Next Steps:			
□ Implement or	continue Interventi	ons and Monitoring Plan	
□ Adjust the Int	ervention and Moni	toring Plan	
Discontinue I	ntervention and Mo	nitoring Plan as satisfactory prog	ress has been made. Student will continue
to be supported t	through other means	s (e.g., informal monitoring, 504/1	EP, counseling services), as appropriate
Date of Follow-U	Jp to Review Progre	ss (if applicable):	_
Team Member Si	gnatures:		
(Sign)		(Sign)	(Sign)
(Sign)		(Sign)	(Sign)

	Plan to Protect Targeted or Victimized Student
Stude	ent Name: Student #:
Scho	ol: Grade:
Date:	Date of Incident: Parent Notification Date:
INCIDENT	The following is the plan to protect (student's name)from harm. Attach a copy to Threat Assessment Form and place it in the Confidential folder.
SAFTEY CONCERNS	The safety issues of concern are:
	After meeting with: Administration Counselor District Police
	The following will be implemented:
	() Law Enforcement has been notified.
	() The follow-up letter was sent to parent/guardian Date:
	() The parent/guardian was given a list of community resources
	The student will aid in his/her protection by:
F	The student will receive the following support from the school:
SUPPORT	
UPPOR	
S	The student will receive the following support from the community:
	The student will receive the following support from home:
	The student will receive the following support from district police:

Administrator, Date:

Counselor, Date:

Parent/Guardian, Date:

Student, Da



CRISIS INTERVENTION FORM

Report of Crisis

Student:	DOB:	
School:	Grade:	
Student Referral by:		
Date/Time of Referral:		
Reason for Referral:		
		_
	Date/Time: ns and behaviors of concern (attempts, gestu	res, plan)
Gather additional information regard	ding student's current situation:	
Campus administrator notified:	Date/Time:	
WOCCISD Police notified:	Date/Time:	
Parent/Guardian notified:	Date/Time:	



CRISIS INTERVENTION FORM

Parent/Guardian Risk Notice

Student's Name: I (the parent/legal guardian) have been informed that my child is demonstrating some risk behaviors and may need further assessment to determine the extent of the risk that he/she could attempt to self-harm, completed suicide or injure others. It has been recommended to me to provide 24- hour supervision.

Supervision is defined as:

- Not leaving my child alone and not leaving my child with someone else under the age of 21 years.
- Visual contact of my child at all times to ensure that my child will not harm themselves or others.
- Be aware of anything that could be used to harm themselves or others.
- Securing all prescriptions and over the counter medications, flammable materials, household chemicals, etc. that could be used to harm themselves or others.

Check one option:

() I agree to cooperate and follow through with the school recommendations as noted above.

() I disagree with the recommendations made by the school officials as noted above and take full responsibility for the welfare of my child and any outcome of this crisis.

In having WOCCISD staff release my child into my care, I accept full legal responsibility for my child. I will not hold the school, the staff, or WOCCISD responsible or liable should my child self-harm, attempt, or completion of suicide and/or injury to others. I know that if I need emergency assistance, I can call 911. I also understand that the school is recommending that a community based mental health professional evaluate my child within 24 hours of this date. I further understand that the welfare of children is a shared responsibility and that if no help is sought for a child at risk, that state and federal laws require notification of Child Protective Services for further investigation.

Parent/Guardian Signature

Date

Counselor

Date



CRISIS INTERVENTION FORM

After Care

() The following community- based resources were contacted with parent approval:

- () The parent did not approve of community-based resources being contacted
- () Provided a list of community-based resources to parent
- () The student was released to legal parent/guardian
- () The student will require a re-entry meeting upon returning to school.
- () The student will require a self-care meeting with the counselor upon returning to school.
- () Other:_____

Parent/Guardian Signature

Date

Counselor

Date