

# **Policies and Procedures Manual**

**Student Behavior Consultation Team (SBCT)**

## Foreword

Colleges and universities around the country are becoming more diligent and proactive in providing a safe environment for students, faculty, staff, and visitors to their campuses. The U.S. Department of Education encourages schools and colleges to develop threat assessment programs and teams. These teams should include campus community members and may include non-employee members such as local police and health professionals. Additionally, the Federal Bureau of Investigation supports the development of threat assessment teams in its report, *Mass Victimization: Promising Avenues for Prevention*<sup>1</sup>.

Our university has established the Student Behavior Consultation Team (SBCT) to assist in addressing situations in which students are displaying behaviors that are concerning, disruptive, or threatening in nature and that potentially impede their own or others' ability to function successfully or safely. These policies and procedures are designed to help identify persons whose behavior potentially endangers their own or others' health and safety or is disruptive to the educational or administrative processes of the university.

It is the responsibility of faculty, staff, and students to immediately report any situation that could possibly result in harm to anyone at the university. Any member of the campus community may become aware of an individual or situation that is causing serious anxiety, stress, or fear. It must be noted, however, that behavioral assessment should not be confused with crisis management. A "crisis" may be defined as a situation in which a person may pose an active or immediate risk of violence to self or others. In these cases, Public Safety should be contacted at **585-475-3333** (phone) or **585-205-8333** (text).

<sup>1</sup> Jarvis, John & Scherer, J. Amber. (2015) *Mass Victimization: Promising Avenues for Prevention*. Washington D.C: Federal Bureau of Investigation.

# Glossary of Terms

- **FERPA:** Family Educational Rights and Privacy Act, a federal statute that provides RIT students with privacy and access rights relating to their education records.
- **MAXIENT:** Prior client record management software program designed to help with behavior management on campuses.
- **NABITA Risk Rubric:** Risk assessment tool used by SBCT when discussing a student case. Copy available in [Appendix B](#).
- **PyraMED:** An electronic medical record used by the Student Health, Counseling and Psychological Services and Case Management departments.
- **SIS:** Student information system with student schedule, unofficial transcript, contact information, and other general student academic and demographic information.
- **StarRez:** Current record management software program designed to help with behavior management on RIT campus. Also used for student record system focusing on housing and dining information.
- **Starfish/Early Alerts:** Student success software that can help instructors, advisors, and students communicate about academic concerns in support of student success.
- **Tiger Concern Report:** Online form for RIT campus community to report students of concern to the SBCT. Copy available in [Appendix A](#).
- **Title IX:** A section of the Education Amendments of 1972 in U.S. Law that prohibits any person in the United States from being discriminated against on the basis of sex in seeking access to any educational program or activity receiving federal financial assistance.

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## Team Mission and Vision

The Student Behavior Consultation Team (SBCT) coordinates RIT resources to review and address inappropriate, disruptive, and/or harmful student behavior to recommend collaborative and purposeful interventions aimed at helping students achieve success. In addition, the SBCT assists faculty and staff in addressing instances of student behavior, which may be inappropriate, harmful, or disruptive for the RIT living and learning community.

Other responsibilities of SBCT include making recommendations to the Senior Vice President for Student Affairs regarding students who may need to leave RIT via the RIT Leave of Absence Policy, outreaching to students during student-related crises, and providing educational programming to faculty, staff, and students at RIT regarding on-campus resources and potential off-campus referrals.

Any member of the RIT community (faculty, staff, or students) and external partners, including parents, siblings, alumni, and peers, can contact the SBCT if there are concerns about a student.

### Team Goals:

- Provide the RIT community a simple way to identify a student in need.
- Connect students in need with resources and support services.

## Team Membership

The Student Behavior Consultation Team consists of university personnel with expertise in medical and mental health, law enforcement, academic affairs, and student affairs. **Membership is based on the position and not the individual. The members selected here have regular contact with campus community members in some manner, which will aid in the assessment of the individual, and/or the authority to take the appropriate action, as needed.** A collaborative process to assess concerning behavior will be used in association with the NABITA risk rubric. Depending on the situation, additional personnel with specific areas of specialization or responsibility may be called upon to assist the team. The team may, consistent with applicable laws and policies, consult other individuals as needed, such as a faculty member who has a concern about a student, a roommate, family member, local law enforcement, and/or a manager who has information concerning an employee. The SBCT Co-Chairs will keep senior university officials advised of more serious situations and standard annual reporting data.

Team members are critical to the functioning of the team. They are responsible for completing ongoing training, attending meetings, and assisting with follow-up and intervention as designated by their categories. The SBCT has two levels of membership. These are core and middle circle members.

### Core Members

**Core Members attend every meeting and have full access to the team's electronic records database. If certain core members are unable to attend a meeting, they have designated backups who attend. The departments they represent are crucial to the SBCT's function.**

#### Associate Vice Presidents, Student Affairs:

The AVP's co-chair the team, and one co-chair attends each meeting as organized between the two. The AVP reviews the initial rating with the NaBITA Threat Assessment Tool, ensures team members' attendance, ensures that a risk level is assigned to each case during meetings, and coordinates the selection and implementation of interventions and follow-up for cases.

#### Reporting Responsibilities:

- Brief overview of the incident report (team members should have already read the incident report in Star Rez prior to the meeting).
- Provides the team administrator direction on note-taking and timeline of follow up.

#### Director of Student Conduct:

The Director of Student Conduct attends the team meetings and sends a delegate when unable to attend. The Director consults on cases involving on- and off-campus conduct violations, criminal charges, and academic disruptions. Conduct data and records are partitioned from SBCT records but may be shared with the SBCT when appropriate. The Director also provides representation for the Title IX case management team should an SBCT case need to be transitioned to Title IX.

#### Reporting Responsibilities:

- Brief overview of the incident report (team members should have already read the incident report in Star Rez prior to the meeting).
- Provides the team administrator direction on note-taking and timeline of follow up.

### **Director/Associate Director of University Advising:**

The Director or Associate Director of University Advising attends each meeting. They are the liaison between the academic team and the SBCT sharing pertinent academic information and coordinating communication between the academic team and SBCT.

#### **Reporting Responsibilities:**

- Academic history (e.g., high school and college transcripts, and recent grades from past terms): Are current grades consistent with what should be normally expected? Are there dips in grades with a return to normal? Is there anything about the degree program that impacts the situation?
- Current class attendance, participation, and demeanor: Does the student have any academic alerts? Is the individual attending? Was the person attending, but recently stopped? Does the individual take an active and constructive part in class discussions? Does the individual turn in assignments? What is the regular appearance and hygiene associated with the individual?
- Class disturbances addressed independently by the instructor: Has the instructor had any unreported issues with the individual, either during class or possibly online?
- Primary point of contact with academic advisors, deans, or other representatives in Academic Affairs.

### **Director of Student and Academic Services, NTID:**

The Director of Student and Academic Services, NTID attends each meeting or sends a delegate when unable to attend. They are the liaison between the NTID academic team (which includes both Counselor/Academic Advisors and NTID faculty/staff) and the SBCT sharing pertinent academic information and coordinating communication between the academic team and SBCT.

#### **Reporting Responsibilities:**

- Academic history (e.g., high school and college transcripts, and recent grades from past terms): Are current grades consistent with what should be normally expected? Are there dips in grades with a return to normal? Is there anything about the degree program that impacts the situation?
- Current class attendance, participation, and demeanor: Does the student have any academic alerts? Is the individual attending? Was the person attending but recently stopped? Does the individual take an active and constructive part in class discussions? Does the individual turn in assignments? What is the regular appearance and hygiene associated with the individual?
- Class disturbances addressed independently by the instructor: Has the instructor had any unreported issues with the individual, either during class or possibly online?
- Information relating to the best way in which student communicates and/or receives information.

### **Director of Public Safety:**

The Director of Public Safety (PS) attends each meeting and provides a representative if unable to attend. The Director provides liaison communications with local and federal law enforcement agencies, consults on SBCT cases that have law enforcement elements, and assists with interventions on campus requiring a public safety presence (which may include hospital transports or mental hygiene arrests). The PS representative takes the lead on locating students when their whereabouts are unknown or when other team members have been unable to locate them. The Director also acts as the liaison between SBCT and the Threat Assessment Team.

### **Reporting Responsibilities:**

- Police Contact and Reports: There may be a report with no charges of which only the police department is aware. The individual may be a repeat witness to events; this may bring into question whether the person is actually part of that problem. Has the individual been a recent victim of a crime?
- Social Media: Are posts by the individual dark or concerning? Do they have threatening statements or overtones? Who are the individual's "friends," and what do they post? What groups, activities, etc., does the individual like?
- Access to resources on campus: Has the student been eating on campus? Is there a record of the student swiping in and out of buildings? This information is protected by RIT policy but can be used by SBCT when reasonably necessary to determine general activity on campus for the purpose of ascertaining information about the basic welfare of a student. Notes regarding swipe information are managed in the Star Rez case files and limited only to use by SBCT as outlined here.

### **Associate Director of Clinical Services, Counseling and Psychological Services (CaPS):**

The Associate Director of Counseling and Psychological Services attends each meeting and sends a representative if unable to attend. The Associate Director consults on issues of mental health, crisis, and disruptive/dangerous behavior. They also act as the liaison between SBCT and CaPS clinical staff. Counseling and Psychological Services keep treatment records in PyraMed.

### **Reporting Responsibilities:**

- The CaPS representative may outreach to students (directly or request that of clinical CaPS staff).
- CaPS representatives may share general professional insight.
- May assist by educating the team about certain disorders that present in the individual based on observable behaviors being described by other team members at the meeting.

### **Associate Director of Residence Life:**

The Associate Director of Residence Life attends each meeting or sends a representative if unable to attend. They offer insight into residential life students, after-hours emergencies, and targeted intervention with Resident Advisors (RAs), Graduate Resident Advisor (GRAs) and Resident Coordinators (RCs). The Associate Director keeps Residential Life records in Maxient or Star Rez, and these records are covered under FERPA.

### **Reporting Responsibilities:**

- Incident Reports: Are there any Residence Life incident reports on the individual? Have professional staff or student staff interacted with the individual?
- Room Condition: Does residence life have a vehicle for conducting a room inspection? Is the individual unusually clean? Is the room a health hazard? Are there pictures or posters of concern (e.g., depicting guns, death, or destruction)?
- Roommates' Impression of the individual: Care should be taken in obtaining this information as to not violate FERPA.
- Recent Room Changes: Does the individual have difficulty making friends? Is the individual intentionally creating a roommate conflict to drive others away and get a private room?
- Recent Maintenance Requests: Are there unusual patterns of requests? Is there more than what would be considered normal wear and tear on the room?



### **Case Manager:**

The Case Manager reviews Tiger Concern Reports (TCR), assigns an initial rating (which is then reviewed by SBCT Co-Chair[s]), and (if warranted) performs an initial outreach. The Case Manager also responds to the TCR author(s) to acknowledge receipt of the report and provide a general overview of the next steps. The Case Manager often acts as the liaison between a TCR author and the team. The Case Manager meets with all students returning from SBCT-related Leave of Absence to review on/off-campus resources and provide support through the transition back to campus.

#### **Reporting Responsibilities:**

- Case Management Notes and Interactions: What are the Case Manager's interactions and observations? Have goals been discussed and established with the individual? If so, what is the progress?
- Update team with initial assessment, assigned interventions, and follow up from those interventions.
- In any previous cases, what was the level of assessment using the NaBITA Tool? If a behavioral baseline has been established for this individual, is the currently reported behavior in line with the assessment baseline or not?

### **Administrative Coordinator:**

The Administrative Coordinator supports the team by creating the cases in Star Rez (upon receiving initial Tiger Concern Report and when notified of a public safety report that warrants SBCT review), records the assessment ratings, takes notes during the SBCT weekly meeting, uploads documents into cases and organizes meeting (either in person or via Zoom). The Administrative Coordinator also is responsible for the semester and yearly data reporting.

## **Middle Circle Members**

### **Health Center Director:**

The Health Center Director collaborates with the team on students having medical emergencies, mental health challenges (beyond counseling services), and other health-related concerns. Information in the health center is protected by RIT policies, confidentiality laws, professional licensure, and ethical obligations of the doctors and medical professionals and, when applicable, under FERPA.

### **Psychiatrist:**

The Psychiatrist collaborates with the team on students having mental health challenges (beyond counseling services) and other psychiatric-related concerns. Information in the counseling center is protected by RIT policies, confidentiality laws, professional licensure, and ethical obligations of the doctors and professionals employed there and, when applicable, under FERPA.

### **Director of Disability Services:**

The Director of Disability Services consults and offers guidance on issues of academic, residential, and other accommodations as appropriate for certain cases.

# Team Functioning

## Meetings

The team meets weekly on Thursday afternoons, and additionally on alternative days as needed, during the regular academic term and as needed during break periods. The team most typically meets in the Student Health Center Conference Room in the August Center, in a remote Zoom meeting or alternative location as needed.

Students are referred to the SBCT via the Tiger Concern Report (TCR), Public Safety Reports, or direct outreach to Case Management, Residence Life, Wellness, or other Student Affairs areas. Nearly all reports are received via the TCR or Public Safety.

The Tiger Concern Reports (Appendix A) are managed in the Star Rez system. Anyone, including family, friends and others external to the campus can use the TCR process. At the time of submission, an email copy is sent to the SBCT co-chairs, the Case Management team, Residence Life and Student Conduct representatives. If immediate action is needed by Public Safety or Residence Life, this is initiated without pause. The reporting site does provide a reminder that emergencies should be sent directly to Public Safety or 911, not reported on this form.

**Closing a case prior to Case Management assessment:** A TCR that is misdirected and should be most appropriately managed by another process such as conduct or TIX are reassigned, and the TCR/SBCT case is closed. No further review is needed.

## Initial Case Management Assessment

After being received, the Case Management (CM) team completes an initial assessment of the case based on the NaBiTA Risk Rubric (Appendix B). This is shared with the CM team, SBCT co-chairs, and the Administrative Coordinator, who provides support to the team, and is recorded in Star Rez, and all notes related to this matter are then captured in that record.

**Closing a case after Case Management assessment:** A TCR with an initial CM assessment of D0/1 E 0/1 on the NaBiTA Risk Rubric and confirmed connection to the student will be recommended for closure prior to the full team review. The Administrative Coordinator will close the case; this will show up in the SBCT Closed Cases section of Star Rez. Team members can review any such cases and request to have them opened for full discussion if they have cause, but otherwise, no team discussion will occur.

## Agenda and Pre-Meeting Review/Notes

Cases are then added to the next available SBCT meeting. There is a deadline for each meeting (e.g., Tuesday at noon for the Thursday meeting), and after this time, no new cases are added to the agenda with the exception of cases that rate a D3 or E3 or higher in the initial Case Management Assessment. These high-risk cases will be reviewed at the next meeting regardless of the deadline, but prior notification will be provided to the team whenever possible. Team members will review all students and add appropriate notes or files to the case in Star Rez. These notes might include a history of early alerts from an academic advisor, notes from an RA outreach, or history of door swipes by campus safety. Team members should provide any relevant history or knowledge about the student in advance of the scheduled meeting. CaPS and Student Health will provide information in this forum to the extent permitted under applicable confidentiality obligations but may provide appropriate references as deemed necessary for

the team discussion and/or references to information that may be accessed in the medical record by designated team members but not available to the full SBCT team discussion if they have cause, but otherwise, no team discussion will occur.

## **Standard Weekly Meeting**

In the meeting, each case will be reviewed with a brief summary by Case Management of the student, the initial rating, and any updates, including response to outreach. Other team members can then provide brief summaries of information added to the file prior to the meeting or discuss areas of concern. After this review, the team is asked if the initial CM rating would still apply or if a recommendation for a revised rating is needed. After discussion, the team will finalize a Team Rating. The Administrative Coordinator will capture this rating and any discussion notes in the case file. The team will then review outreach and recommended referrals and determine if a case should be closed or remain open.

### **Closing a case after team review:**

- If the team rating is D2/E2 or lower, the team may opt to close the case.
- If the team rating is D2/E2 or lower, and there are outstanding steps that the team wants to see from the student prior to closure, the case may be left open, but if CM confirms completion of all requirements, the case will be closed. In this situation, the case should be added to the “closure” section of the agenda for the next meeting for team awareness, but no further discussion is needed.

### **Leaving a case open after team review:**

- If there are open or unaddressed concerns or an elevated risk level of D3 or E3, or higher, the team may elect to leave the case open.
- In nearly all situations, cases with a rating of D3 or E3 or higher will remain open. Should SBCT determine to close a case at this level, the notes will clearly reflect the rationale for this decision.
- If a case is to remain open, a determination of when to revisit the case will be made by the team. This could range from a review at the next available meeting up to a month away. This could also be associated with a specific milestone such as the start of classes or post spring break, if that is aligned with a behavioral or risk concern. The Administrative Coordinator will note this recommendation, along with the rationale for this decision, and schedule for review as determined. These cases will be noted on the agenda as follow-ups.

## **Follow-up Cases**

CM or other team members with the deepest knowledge of the case since the previous discussion will provide a history and progress to date and offer a starting point for a new assessment. The team will discuss and determine a revised assessment – to be recorded in Star Rez along with relevant meeting notes. The team will then follow all standard case review steps as in an initial review, including outreach and referrals and determination of next steps for open or closure of case.

## **Team Responsibilities**

The SBCT Team is responsible for:

1. Developing and implementing educational and training programs for all members of the university community with regard to behavioral assessment. This should include publications and promotional materials designed to create awareness, understanding, and participation with the SBCT.

2. Maintaining a current website, which can be easily accessed from the university's home page and other relevant departmental pages. This site should include links to informational and referral sites and instructions for filing a Tiger Concern Report.
3. Receiving, coordinating, and assessing referrals received from faculty, staff, students, and others regarding persons of concern.
4. Coordinating interventions and resource assistance for persons of concern.
5. Providing an annual report to the Senior Vice President for Student Affairs and contributing data and information for the Board of Trustees Critical Incident Dashboard report.

## Budget Considerations

Both SBCT co-chairs manage budgets that are used, in part, to support ongoing technology, professional development, marketing, and training needs of the team, including Maxient, PyraMED, StarRez, and NaBitA membership. All of the departments represented on SBCT also contribute to support individual team members for ongoing training at local/remote, regional, or national conferences and training.

## Team Training

SBCT is dedicated to the continuous improvement of the team through ongoing professional development. The team's training approach is made up of two central tenets. The first is a development of base functional knowledge of team processes, systems and assessments (risk rubric) for all regular and back-up team members. The goal is for the team to develop and maintain a culture of professional, efficient, and effective student-centered evaluation of risk and assignment of outreach and referrals. The second is ongoing learning and dedication to finding new information and building on existing best practices for the core team and campus partners. The second involves campus outreach, marketing, and training for the larger campus community as well as participation in local, regional, or national networks.

## Content Knowledge

SBCT Co-Chairs participate in NaBITA standard training for Behavioral Consultation Teams via regional or national conferences. Other team members also participate in NaBITA offered training as schedules and budgets allow.

Annual training is offered for all team members and back-ups related to the NaBITA Risk Rubric, best practices for Behavioral Consultation Teams, and other related topics.

Team members actively participate in subject-specific training within their areas of expertise. For example, the Student Conduct representatives participate in ongoing training for conduct officers, including conflict resolution, adjudication, law and policy, and title IX topics.

## Community Engagement and Education

SBCT recognizes that educating the community about what to report is one of the most essential aspects of having a successful and effective team.

Marketing occurs primarily through education of the RIT community. Training occurs formally during New Faculty Orientation, New Employee Orientation, Advisors Council, and ad hoc departments/events upon request. The Red Folder is also a resource provided to all faculty/staff members.

## Documentation and Records

Records shall be kept in a manner that ensures appropriate security of the information. SBCT records, as well as the records of certain team members and their departments, that contain the personal information of a student, are generally considered part of a student's educational record under FERPA and shall be treated as confidential in accordance with RIT's FERPA policy and may be shared with team members under one or more exceptions to FERPA. A complete listing of these exceptions can be found in RIT Policy D15.0 and its procedures. Additionally, all records and other personal information shall be maintained and disclosed in accordance with RIT's Privacy Policy, Information Security Policy, and Information Access and Protection Standards.

SBCT keeps historical records (pre-Fall 2022) in the Maxient database, partitioned apart from the student conduct, Title IX, Bias-related, and other records (which are also kept in the Maxient database). All records beginning in the Fall 2022 semester are in the Star Rez database. Records from SBCT meetings are entered primarily by the Administrative Coordinator to ensure consistency in the creation of records. During the week, team members also have access to the Star Rez database to update cases and add files to the database.

Records are kept for seven years in the Maxient and Star Rez databases, unless there is an issue that necessitates that specific notes be kept longer under applicable RIT policy.

Notes should strive to follow these guidelines:

- **Be an Appropriate Length:** Notes should not be too lengthy (generally no more than 300 words or several paragraphs) or overly short (e.g., several sentences). Notes should ideally consist of two to three sentences for each of the three areas mentioned earlier.
- **Be Objective and Fact-Based:** Notes should not contain subjective opinions. Notes should explain the facts as they are presented to the team, describe a risk rating, and outline a plan of action.
- **Not Be Overly Technical or Diagnostic:** SBCT notes should not include diagnoses or coded language. Abbreviations, when used, should be clearly explained so that anyone reading the notes can follow them easily.
- **Leave No Doors Open:** When a significant safety issue is raised in a note (such as a suicide attempt or danger to others), the following note should reference how the issue in the previous note was resolved or what follow-up was conducted. When a door is opened in the note regarding a serious issue, the door should be closed by addressing how the issue was resolved or what the current plan of action is.

When notes are reviewed, staff members should reference the previously described categories and traits to ensure that notes are adhering to best practices.

## Record Requests

All record request for the University are managed via a Record Request process of D.15 Education Records policy ([rit.edu/academicaffairs/policiesmanual/d150](http://rit.edu/academicaffairs/policiesmanual/d150)).

## Threat Assessment Rubrics

The team uses a primary risk rubric to provide research-based, objective categories to drive intervention decisions. All cases are given a numeric risk rating on the NaBITA Threat Assessment Tool of mild, moderate, elevated, severe, or extreme as indicated by a D-Scale and E-Scale rating (e.g., D2/E3).

### NaBITA Threat Assessment Tool

The NaBITA Threat Assessment Tool was created in 2009 and updated in 2014 and 2019 as a broad triage process to rate mental health concerns (e.g., distress, disturbance, and dysregulation/decompensation) and hostility and violence risks (e.g., hardening, contentious debate, action not words, images and coalitions, loss of face to target, threat strategies, limited destructive blows, fragmentation of the enemy, and plunging together into the abyss) and to provide a generalized risk rubric (mild, moderate, elevated, severe, or extreme).

The NaBITA Threat Assessment Tool provides a triage capacity to identify and classify risks over a broad set of concerns. The strength of this triage measure is in its ability to look broadly at a wide variety of risks to guide the intervention decisions of SBCT. Its expansive nature makes the tool not as helpful for the assessment of the specific risks in detail.

NaBITA currently offers other tools, which are not used by SBCT at this time (2021) but will be evaluated for future training and use by the team.

### The Violence Risk Assessment of the Written Word (VRAW<sup>2</sup>)

The VRAW<sup>2</sup> was created in 2015 following an increasing number of cases in which college students shared concerning written communication through social media, creative writing classes, and over email. The VRAW<sup>2</sup> offers five factors (Fixation and Focus, Hierarchical Thematic Content, Action and Time Imperative, Pre-Attack Planning, and Injustice Collecting) that are then scored to provide a mild, moderate, elevated, severe, or extreme level of risk in line with NaBITA Tool.

The VRAW<sup>2</sup> has aided teams in focusing more objectively on the literature related to threat assessment when assessing threatening or concerning writing. While this has been helpful, it is a small subset of the overall type of assessment needed to accurately rate the risk of violence. The VRAW<sup>2</sup> provides teams with better footing when making decisions about intervention related to written concerns, but it lacks a focus on terrorism and extremist thought.

### The Structured Interview for Violence Risk Assessment (SIVRA-35)

The SIVRA-35 was created in 2012 as an expert system. It is a structured set of items useful for those staff and faculty members to use with individuals who may pose a threat to the community. The SIVRA-35 is a guided, structured interview useful for classifying risk into low, moderate, and high categories based on concepts from existing threat and violence risk assessment literature.

The SIVRA-35 was designed to address targeted and strategic violence on college campuses, such as the Virginia Tech massacre and the shootings at Northern Illinois University, Umpqua College, and Santa Monica College, and by enrolled or recently enrolled college students at non-campus locations, such as James Holmes and Jared Loughner.

## **The Radicalization Risk Rubric (R<sup>3</sup>)**

CARE Teams have become increasingly concerned with how to identify the potential for radicalization of students, faculty, and staff. Radicalism and extremism should be viewed on a continuum, from critical or counter-culture thinking to seeing violence as a reasonable pathway to bring about a desired change. The Radicalization Risk Rubric seeks to provide campus teams with an understanding of what to look for to identify and intervene with at-risk individuals who have radical thoughts and behaviors that are escalating to extremist violence and terrorism.



## Team Interventions

SBCT receives reports of concerning behaviors involving students. Once Case Management or SBCT produces a risk rating of mild, moderate, elevated, severe, or extreme, SBCT decides on the type of intervention for the individual that matches the assessment of risk. SBCT will make that recommendation to the appropriate university official. The authority to take the recommended action or implement the intervention rests with the core members' official capacity at the university. Possible actions may include some or all of the following:

1. Recommendations to appropriate university personnel, in line with the interventions associated with the NaBITA Threat Assessment Tool;
2. Recommendations to appropriate university personnel that may include, but are not limited to, referral to the student conduct for actions or sanctions consistent with the Student Code of Conduct when violations of RIT policy have occurred; in addition, SBCT may recommend that a student receive a professional mental health assessment or other actions deemed appropriate;
3. Assignment of appropriate university personnel to the subject of the incident for follow-up and observation through the case management program;
4. Recommendation that the proper authority notify, within FERPA guidelines, the parents, guardians, and/or next-of-kin; and
5. Recommendations to appropriate university personnel regarding conditions of consideration for an individual to return as an active member of the campus community.

## Spectrum of Interventions

Once a level of risk or threat is determined using an assessment tool, SBCT then deploys the intervention techniques and strategies appropriate to that level of risk. For example, one intervention strategy may be interim suspension. On this rubric, interim suspension is only considered at elevated risk situations, recommended at severe risk situations, and mandated for extreme risk situations when it is applicable.

SBCT members deploy responses in a quality-controlled and consistent way. All elevated risk (level 3) cases are eligible for the same set of responses, which differ from the set of eligible interventions in severe risk cases, and so on.

SBCT will determine when members can, should, or must meet with the individual specific to the issues raised in the TCR or other referral to SBCT. This might occur when the SBCT determines that it is safe to do so, when the individual is likely to be forthcoming, when conveying care in person may be persuasive, and when more information is needed.

The following non-exhaustive list describes various possible actions that may be appropriate for each risk level described in the NaBITA Risk Rubric.

### Mild Risk

- Secure Message via the Wellness Portal from Case Management to offer resources, if needed
- Provide guidance and education to referral source
- Connect with offices, support resources who interact with student to enlist as support or to gather more information

## **Moderate Risk**

- Call/Text from Case Management to encourage connection with resources, offer a meeting with Case Management
- Provide guidance and education to referral source
- Connect with offices, support resources who interact with student to enlist as support or to gather more information
- Possible referral to conduct or disability support services
- Access social media and other sources to gather information
- Consider VRAW for cases that have written elements
- CM to notify service providers of report and request outreach

## **Elevated Risk**

- Residence Life check-in (for on-campus residents)
- Consider welfare/safety check
- Provide guidance, support, and safety plan to referral source/stakeholders
- Evaluate parental/guardian emergency notification;
- Coordinate referrals to appropriate resources and provide follow up (i.e. walk to CaPS)
- Likely referral to conduct or disability support services
- Coordinate with Public Safety/Conduct and other departments to mitigate ongoing risk
- Consider needs for records hold when student has temporary separation from school (Leave of Absence, Suspension, etc.)

## **Critical**

- Initiate welfare check
- Evaluate for Mental Hygiene Arrest
- Coordinate with necessary parties (Conduct, Public Safety) to create a plan for safety, suspension, or other interim measures
- Obligatory parental/guardian/emergency contact notification unless contraindicated
- Evaluate need for emergency notification to the community
- Issue mandated assessment once all involved are safe
- Evaluate the need for involuntary/voluntary withdrawal or records hold
- Coordinate with university police and/or local law enforcement
- Provide guidance, support, and safety plan to referral source/stakeholders

## Appendix A: Tiger Concern Report



### Tiger Concern Report

This Tiger Concern Report may be used to share concerns about an RIT student's behavior or health with the Student Behavior Consultation Team (SBCT). Expressing concern shortly after an issue is raised or an incident has occurred can help with early intervention and success.

When completing this form, please be as thorough, specific, and objective, as possible. Tell us why you are concerned about the student. For example, share with us what you have witnessed and/or heard that has made you concerned. Please feel free to include alternate contact information for you, such as a cell phone number or alternate email address. Make sure to include the student's name, as well as any other information that could assist us in identifying the person you are concerned about.

Tiger Concern Reports will be reviewed throughout the day, during regular business hours. We may contact you for additional information. If you have questions or concerns at any time, contact the Associate Vice President for Student Health, Counseling and Wellness/Co-Chair of SBCT at 585-475-7256.

**If you feel that a student or others could be in immediate danger, including yourself, please contact RIT Public Safety immediately at 585-475-3333 or call 911.**

Thank you for sharing your concern!

#### **Background Information**

While none of these fields are required, knowing who you are will make it easy for outreach to you if we have additional questions or information.

[Privacy - Terms](#)

Enable additional features by logging in. ([https://cm.maxient.com/reportingform.php?RochesterInstofTech&layout\\_id=3&promptforauth=true](https://cm.maxient.com/reportingform.php?RochesterInstofTech&layout_id=3&promptforauth=true))

Your full name:

Your position/title:

Your cell number:

Your email address:

Your physical address:

Date of incident (Required):

### **Student I Am Concerned About**

Please provide whatever information you have available.

Name
<input type="text"/>

[Privacy](#) - [Terms](#)

ID Number (if you are faculty/staff and have access)

Student's Cell Number

Email address

Hall/Address

**Concerns (\*Required Information)**

For immediate danger, contact RIT Public Safety immediately at 585-475-3333 or call 911.

I am concerned about this student because: (Required)

**Supporting Documentation**

Photos, video, email, and other supporting documents may be attached below. 5GB maximum total size.

**Attachments require time to upload, so please be patient after submitting this form**

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Submit report

# Appendix B: NaBITA Risk Rubric



## NaBITA Risk Rubric

### D-SCALE

Life Stress and Emotional Health

#### DECOMPENSATING

- ▲ Behavior is severely disruptive, directly impacts others, and is actively dangerous. This may include life-threatening, self-injurious behaviors such as:
  - ▲ Suicidal ideations or attempts, an expressed lethal plan, and/or hospitalization
  - ▲ Extreme self-injury, life-threatening disordered eating, repeated DUIs
  - ▲ Repeated acute alcohol intoxication with medical or law enforcement involvement, chronic substance abuse
  - ▲ Profoundly disturbed, detached view of reality and at risk of grievous injury or death and/or inability to care for themselves (self-care/protection/judgment)
  - ▲ Actual affective, impulsive violence or serious threats of violence such as:
    - ▲ Repeated, severe attacks while intoxicated; brandishing a weapon
    - ▲ Making threats that are concrete, consistent, and plausible
    - ▲ Impulsive stalking behaviors that present a physical danger

#### DETERIORATING

- Destructive actions, screaming or aggressive/harassing communications, rapid/odd speech, extreme isolation, stark decrease in self-care
  - Responding to voices, extremely odd dress, high risk substance abuse; troubling thoughts with paranoid/delusional themes; increasingly medically dangerous binging/purging
  - Suicidal thoughts that are not lethal/imminent or non-life threatening self-injury
- Threats of affective, impulsive, poorly planned, and/or economically driven violence
  - Vague but direct threats or specific but indirect threat; explosive language
  - Stalking behaviors that do not harm, but are disruptive and concerning

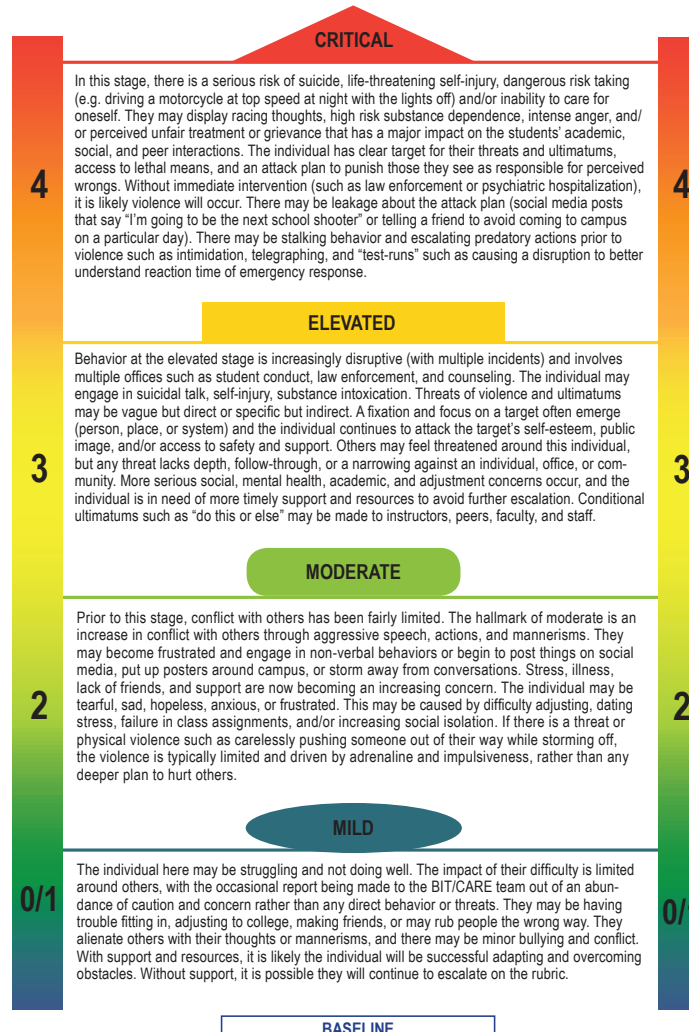
#### DISTRESSED

- Distressed individuals engage in behavior that concerns others, and have an impaired ability to manage their emotions and actions. Possible presence of stressors such as:
  - Managing chronic mental illness, mild substance abuse/misuse, disordered eating
  - Situational stressors that cause disruption in mood, social, or academic areas
  - Difficulty coping/adapting to stressors/trauma; behavior may subside when stressor is removed, or trauma is addressed/processed
- If a threat is present, the threat is vague, indirect, implausible, and lacks detail or focus

#### DEVELOPING

- ◆ Experiencing situational stressors but demonstrating appropriate coping skills
- ◆ Often first contact or referral to the BIT/CARE team, etc.
- ◆ Behavior is appropriate given the circumstances and context
- ◆ No threat made or present

### OVERALL SUMMARY



### E-SCALE

Hostility and Violence to Others

#### EMERGENCE OF VIOLENCE

- ▲ Behavior is moving towards a plan of targeted violence, sense of hopelessness, and/or desperation in the attack plan; locked into an all or nothing mentality
- ▲ Increasing use of military and tactical language; acquisition of costume for attack
- ▲ Clear fixation and focus on an individual target or group; feels justified in actions
- ▲ Attack plan is credible, repeated, and specific; may be shared, may be hidden
- ▲ Increased research on target and attack plan, employing counter-surveillance measures, access to lethal means; there is a sense of imminence to the plan
- ▲ Leakage of attack plan on social media or telling friends and others to avoid locations

#### ELABORATION OF THREAT

- Fixation and focus on a singular individual, group, or department; depersonalization of target, intimidating target to lessen their ability to advocate for safety
- Seeking others to support and empower future threatening action; may find extremists looking to exploit vulnerability; encouraging violence
- Threats and ultimatums may be vague or direct and are motivated by a hardened viewpoint; potential leakage around what should happen to fix grievances and injustices
- There is rarely physical violence here, but rather an escalation in the dangerousness and lethality in the threats; they are more specific, targeted, and repeated

#### ESCALATING BEHAVIORS

- Driven by hardened thoughts or a grievance concerning past wrongs or perceived past wrongs; increasingly adopts a singular, limited perspective
- When frustrated, storms off, disengaged, may create signs or troll on social media
- Argues with others with intent to embarrass, shame, or shut down
- Physical violence, if present, is impulsive, non-lethal, and brief; may seem similar to affective violence, but driven here by a hardened perspective rather than mental health and/or environmental stress

#### EMPOWERING THOUGHTS

- ◆ Passionate and hardened thoughts; typically related to religion, politics, academic status, money/power, social justice, or relationships
- ◆ Rejection of alternative perspectives, critical thinking, empathy, or perspective-taking
- ◆ Narrowing on consumption of news, social media, or friendships; seeking only those who share the same perspective
- ◆ No threats of violence

**INTERVENTION OPTIONS TO ADDRESS RISK  
AS CLASSIFIED**

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AS CLASSIFIED**

**CRITICAL (4)**

- Initiate wellness check/evaluation for involuntary hold or police response for arrest
- Coordinate with necessary parties (student conduct, police, etc.) to create plan for safety, suspension, or other interim measures
- Obligatory parental/guardian/emergency contact notification unless contraindicated
- Evaluate need for emergency notification to community
- Issue mandated assessment once all involved are safe
- Evaluate the need for involuntary/voluntary withdrawal
- Coordinate with university police and/or local law enforcement
- Provide guidance, support, and safety plan to referral source/stakeholders

**ELEVATED (3)**

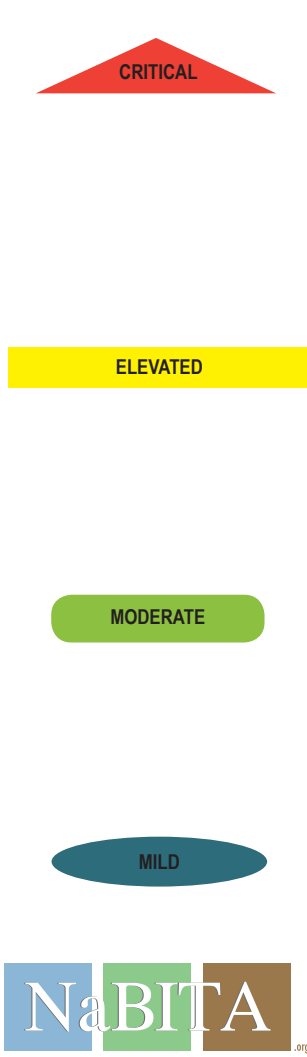
- Consider a welfare/safety check
- Provide guidance, support, and safety plan to referral source/stakeholders
- Deliver follow up and ongoing case management or support services
- Required assessment such as the SIVRA-35, ERIS, HCR-20, WAVR-20 or similar; assess social media posts
- Evaluate parental/guardian/emergency contact notification
- Coordinate referrals to appropriate resources and provide follow-up
- Likely referral to student conduct or disability support services
- Coordinate with university police/campus safety, student conduct, and other departments as necessary to mitigate ongoing risk

**MODERATE (2)**

- Provide guidance and education to referral source
- Reach out to student to encourage a meeting
- Develop and implement case management plan or support services
- Connect with offices, support resources, faculty, etc. who interact with student to enlist as support or to gather more information
- Possible referral to student conduct or disability support services
- Offer referrals to appropriate support resources
- Assess social media and other sources to gather more information
- Consider VRAW<sup>2</sup> for cases that have written elements
- Skill building in social interactions, emotional balance, and empathy; reinforcement of protective factors (social support, opportunities for positive involvement)

**MILD (0/1)**

- No formal intervention; document and monitor over time
- Provide guidance and education to referral source
- Reach out to student to offer a meeting or resources, if needed
- Connect with offices, support resources, faculty, etc. who interact with student to enlist as support or to gather more information



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# Appendix C: Disruptive and Dangerous Behaviors Summary

## Examples of Disruptive Behaviors

- Taking/making calls, texting, using smartphones for social media, etc., during class
- Students' misuse of technology in the classroom. Sneaking text messages from beneath the desk or having a laptop open to Facebook or other social media sites during a lecture
- Frequent interruption of professor while talking and asking non-relevant, off-topic questions
- Inappropriate or overly revealing clothing in the classroom, including extremely sexually provocative clothes, pajamas, or other sleepwear in the classroom
- Crosstalk or carrying on side conversations while the professor is speaking
- Interruptions such as frequent use of the restroom, smoke breaks, etc.
- Poor personal hygiene that leads to a classroom disruption or lack of focus
- Use of alcohol or other substances in class. Attending class while under the influence of alcohol or other drugs
- Entitled or disrespectful talk to professor or other students
- Arguing grades or "grade grubbing" for extra points after the professor requests that the student stop
- Eating or consuming beverages in class without permission (or against the class norms)
- Showing up to class in strange clothing (e.g., dressed in military gear, Halloween costumes when it is not Halloween, etc.)
- Reading magazines, newspapers (yes, they still read them, although usually the campus one), or books, or studying for other classes/doing other homework

## Examples of Dangerous Behaviors

- Racist or otherwise fixated (not just expressed once to press a button) thoughts, such as "Women should be barefoot and pregnant," "Gays are an abomination to God and should be punished," or "Muslims are all terrorists and should be wiped off the earth"
- Bullying behavior focused on students in the classroom
- Direct communicated threat to the professor or another student, such as, "I am going to kick your ass," or "If you say that again, I will end you"
- Prolonged, non-verbal passive-aggressive behavior, such as sitting with arms crossed, glaring or staring at professor, and refusing to speak or respond to questions or directives
- Self-injurious behavior, such as cutting or burning, or exposing previously unexposed self-injuries
- Physical assault, such as pushing, shoving, or punching
- Throwing objects or slamming doors
- Storming out of the classroom when upset
- Conversations that are designed to upset other students, such as descriptions of weapons, killing, or death
- Psychotic, delusional, or rambling speech
- Arrogant or rude talk to the professor or other students
- Objectifying language that depersonalizes the professor or other students



## Examples of Disruptive Behaviors Online

- Student posts non-relevant spam or unrelated personal advertising material in the forum discussion board
- Frequent interruption of the professor's questions, threaded discussion posts with non-relevant comments, or off-topic, personal discussions
- Inappropriate or overly revealing pictures shared with members of the online community through their profile
- Choosing a screen name or profile name that is offensive to others, such as Smokingthedope420@university.edu or assman69@university.edu
- Posting or making comments while drunk or intoxicated. Attending online class discussions or lectures while under the influence of alcohol or other drugs
- Arrogant, entitled, rude, or disrespectful emails or messages to professor or other students
- Arguing grades or "grade grubbing" for extra points after the professor requests that the student stop
- Inciting other students to argue with the professor over grades or other assessment-related expectations

## Examples of Dangerous Behaviors Online

- Racist or otherwise fixated thoughts such as "Gays should be stoned like back in Bible times," "Men should go back to playing football and stop thinking so hard Leave the mental heavy lifting to the ladies in the class," "Muslims and Mormons are cults and should be wiped off the planet," and others posted to the discussion boards to troll for a response or to incite an electronic "riot"
- Bullying and teasing behavior through messages, emails, or online hazing
- Direct communicated threat to the professor or another student, such as, "I am going to kick your ass," or "If you say that again, I will end you"
- Prolonged passive-aggressive behavior, such as constant disagreement with everyone and everything in class, challenging the professor's credentials, and refusing to respond to questions or directives
- Mentioning self-injurious behavior, such as cutting or burning self, or suicidal thoughts or intentions in online posts
- Threats of physical assault such as pushing, shoving or punching
- Threats of online assaults, like hacking a website, sharing personal information, or posting others' pictures online without permission
- Conversations that are designed to upset other students, such as descriptions of weapons, killing, or death
- Psychotic, delusional, or rambling speech in posts
- Arrogant, entitled, rude, or disrespectful messages to the professor or other students
- Objectifying language that depersonalizes the professor or other student

## Appendix D: Annual Confidentiality and Training Agreement

I, \_\_\_\_\_ understand that Rochester Institute of Technology has established the Student Behavior Consultation Team (SBCT) to assist in addressing situations where students are displaying behaviors that are concerning, disruptive, or threatening in nature that could potentially impede their own or others' ability to function successfully or safely. These policies and procedures are designed to help identify persons whose behaviors potentially endanger their own or others' health and safety or are disruptive to the educational or administrative processes of the university.

**Please initial each statement below:**

\_\_\_ I understand the mission, goals, policies, and procedures of SBCT, and agree to participate in meetings and training to the best of my ability.

\_\_\_ I understand that all records associated with the SBCT are subject to FERPA:

*Information from the education records of a student may be disclosed to university officials with a legitimate educational interest. A school official is a person employed by the university in an administrative, supervisory, academic or research, or support staff position (including law enforcement unit personnel and health staff); a person or company with whom the university has contracted, such as an attorney, auditor, or collection agent; or a person or a student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks. A university official has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her professional responsibility.*

\_\_\_ I understand that many of the records are dynamic in nature and may not have been resolved, adjudicated, or otherwise completed at the time that I view them. As such, much care should be taken not to form judgements or use this information in decision-making without first checking with the SBCT co-chairs.

\_\_\_ I understand that none of the SBCT records can be viewed, shared, or discussed with any non-SBCT member due to their dynamic nature.

\_\_\_ I understand that any requests by a non-SBCT member to view or print a SBCT record must be made to, and approved by, the SBCT Co-chairs, as some information may need to be redacted for non-SBCT consumption to comply with FERPA.

Signed (SBCT Member): \_\_\_\_\_

Date: \_\_\_\_\_