**Wood County Schools**

**THREAT ASSESSMENT AND RESPONSE PROTOCOL- Documentation Regarding Danger to Others**

Adapted from the *Guidelines for Responding to Student Threats of Violence (Cornell & Sheras, 2006)*

**IDENTIFY AND EVALUATE THREAT**

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 messaging, email, or other electronic means. An expression of intent to harm someone is considered a threat regardless of whether it is communicated to the intended victim(s) and regardless of whether the intended victim is aware of the threat. This protocol does NOT address threats to damage property, threats made by non-students, fights with no threat, or verbiage such as slurs, insults, or verbal abuse that does not constitute a threat. Threats may be implied or stated in an indirect manner if a recipient would reasonably regard the behavior as a threat. WHEN IN DOUBT, treat the expression as a threat and conduct a threat determination.

The administrator or designee makes a preliminary determination of the seriousness of the threat. The student, recipients of threat, and other witnesses shall be interviewed to obtain a specific account of threat in context. If the threat has not been resolved, fax information to Director of Elementary or Assistant Superintendent (Secondary) at ***304-420-9513*** to begin assessment process.

**Witness Interview**

* What exactly happened when you were (place of incident)?
* What exactly did (Student) say or do?
* What do you think he/she meant when saying or doing that?
* How do you feel about what he/she said or did?
* Why did he/she say or do that?
* Is there anything else you want to tell me today?

**Student Interview**

* Do you know why I wanted to talk with you?
* What happened when you were (place of incident)?
* What exactly did you say? And what exactly did you do?
* What did you mean when you said or did that?
* How do you think he/she feels about what you said or did?
* What was the reason you said or did that?
* What are you going to do now that you have made this threat?
* Is there anything else you wanted to tell me today?

* [Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Drawing Tools tab to change the formatting of the pull quote text box.]
* See that threat is resolved through explanation, apology or making amends
* Contact student’s parents/guardians
* Notify intended victim’s parents/guardians if necessary to prevent further problems
* Consult with safety and security specialist/SRO if appropriate
* Follow discipline procedures
* Develop Action Plan as appropriate
* Notify assistant superintendent or director of elementary and safety coordinator of need to conduct a threat assessment
* Notify student’s parents/guardians
* Protect and notify intended victim and parents/guardians of victim
* Caution the student about the consequences of carrying out the threat
* Provide direct supervision of student until released to parents/guardian
* Initiate school based safety report
* Follow discipline procedure
* Develop Action Plan
* Develop Positive Behavior Intervention Plan/behavior contract
* ***Initiate immediate referral for mental health crisis evaluation if emergency situation***

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* Protect and notify intended victim and parents/guardians of victim
* Notify student’s parents/guardians
* Caution the student about the consequences of carrying out the threat
* Provide direct supervision of student until released to parents/guardians
* Consult with safety coordinator/SRO
* Follow discipline procedures
* Notify assistant superintendent (secondary) or director of elementary of need to conduct a threat assessment
* Develop Action Plan as appropriate
* Refer for conflict resolution or counseling
* Develop Positive Behavior Intervention Plan/behavior contract

**RESPOND TO SERIOUS THREAT**

**Very Serious**

Threat to kill, rape, or inflict severe injury or use weapons

**RESPOND TO VERY SERIOUS THREAT**

**Serious**

A threat to assault

**DETERMINE IF SUBSTANTIVE THREAT IS SERIOUS OR VERY SERIOUS**

**RESPOND TO TRANSIENT THREAT**

**Substantive Threat**

**Factors to consider in judging a threat to be substantive:**

* Specific, plausible details such as a specific victim, time, place, and method
* Threat has been repeated over time or related to multiple persons
* Threat is reported as a plan or planning has taken place
* Recruitment of accomplices or invitation for an audience
* Physical evidence of intent to carry out threat (e.g., lists, drawings, written plan)
* Student’s age and capability of carrying out the threat
* Student’s history of aggressive behavior
* Credibility of student and witness accounts

**Transient Threat**

**Meets one or more of the following:**

* Non-genuine expression or intended as joke or figure of speech
* Non-sustainable intent to harm or temporary anger that is resolved
* Resolved on scene or office (time-limited)
* Conflict is resolved and ends with apology, retraction, or clarification

WHEN IN DOUBT, consider threat as substantive and assess further

**DETERMINE WHETHER THREAT IS CLEARLY TRANSIENT OR SUBSTANTIVE**

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| **Wood County Schools**  **Threat Assessment Checklist** | |
| Name of student of concern:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Parent/Guardian name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Received report of threat: Date/Time \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ From: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date the threat occurred: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Where the threat was made: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Who took the report/title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Is there a history of discipline referrals? \_\_\_\_\_\_\_\_ Is there a history of legal problems away from school?\_\_\_\_\_\_\_  What was reported: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Notified (who):  ⃝ Administrator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_  ⃝ Counselor : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_  ⃝ SRO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Time: \_\_\_\_\_\_\_  ⃝ Student's guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Time: \_\_\_\_\_\_  ⃝ Victim(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Time: \_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_  ⃝ Victim's guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_  ⃝ Other staff: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_ | Early actions:  Search/List anything found of concern:  ⃝ Locker: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⃝ Backpack: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⃝ Purse: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⃝ Lunchbag: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⃝ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Is the student in special education or have a 504 Plan?  If yes, category: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Special ed./504 case manager: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Discipline:  Is the student being suspended?  If yes, list date the student can return to school: \_\_\_\_\_\_\_\_\_\_\_  Total days of suspension this school year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   * ***Follow Manifestation Determination procedures for IEP/504/SAT students who have been suspended more than 10 days*** |
| Does the student have previous/current mental health services? If yes, list provider \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Will the guardian sign a release to permit communication with treatment provider? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  What is the parent/guardian’s response to the threat? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Threat level determined to be:**  ⃝ Transient- follow discipline procedures/ develop action plan as appropriate   * When in doubt, consider threat as substantive and assess further   ⃝ Substantive- Fax Threat Checklist, Student Interview, Witness Interview(s), and any accompanying information such as notes/copy of social media post/etc. to WCS Director of Elementary or Assistant Superintendent (Secondary) at 304-420-9513 | |

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| **Threat Assessment Student Interview Form** | |
| Directions: ***This form should not be completed by the student.*** Use these questions as a guide to interview the student making the threat. Other questions can be asked as appropriate. Use quotation marks to indicate the student’s exact words when possible. | |
| Staff member completing form: | Position: |
| School: | Date form completed: |
| Student Interviewed: | |
| 1. What happened today when you were (place of incident)? (Record student’s exact words for key statements if possible.) | |
| 1. What exactly did you say? And what exactly did you do? | |
| 1. What did you mean when you said or did that? | |
| 1. How do you think (person who was threatened) feels about what you said or did? (Probe to see if the student believes it frightened or intimidated the person.) | |
| 1. What was the reason you said or did that? (Probe to find out if there is a prior conflict or history to this threat.) | |
| 1. What are you going to do now? (Ask questions to determine if the student intends to carry out the threat.) Inquire about access to weapons, if appropriate. | |
| 1. Is there anything else you want to tell me? | |

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| **Threat Assessment Witness Interview Form** | |
| Directions: ***This form should not be completed by the witness.*** Use these questions as a guide to interview witnesses who have direct or indirect knowledge of the threat. Complete separate forms for each witness. Other questions can be asked as appropriate. Use quotation marks to indicate witness’ exact words when possible. | |
| Staff member completing form: | Position: |
| School: | Date form completed: |
| Witness Interviewed: | |
| 1. What exactly did (student who made the threat) say or do? (Record witness’s exact words for key statements if possible.) | |
| 1. What do you think he or she meant when saying or doing that? | |
| 1. How do you feel about what he or she said or did? (Gauge whether the witness feels frightened or intimidated.) Are you concerned that he or she might actually do it? | |
| 1. Why did he or she say or do that? (Find out whether knows of any prior conflict or history behind the threat.) | |
| 1. Is there anything else you want to tell me? | |

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| **Wood County Schools**  **Action/Supervision Plan for Threat to Others** |
| Name of student of concern:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_  Parent/Guardian name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date Plan Developed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Team Members: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Action/Who is responsible:**  **⃝** Visit with the school counselor (include frequency): **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  ⃝ Disciplinary Action Taken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⃝ If suspended, student will return on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⃝ Alert staff on a need to know basis: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⃝ Daily or Weekly check-in with: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⃝ Check-in and Check-out of backpack/coat/other belongings by :  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⃝ Increased supervision in these settings: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⃝ Modify daily schedule by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⃝ Behavior Plan (attach copy) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⃝ Intervention by support staff (counselor/nurse/etc) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⃝ If special ed./504 student, review goals and placement options:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⃝ Review community resources with guardian/student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⃝ Other action: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Plan to Monitor/Modify**  Timeline for review (frequency and dates) ***Must occur within 30 days of plan development***:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Who is responsible for tracking review dates:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ***Fax the completed checklist/Interviews/Action and Supervision Plan to Assistant Superintendent (Secondary) or Director of Elementary Schools at 304-420-9513***  7/2018 |