

THREAT ASSESSMENT AND RESPONSE PROTOCOL[®]

Virginia Student 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 *transient* 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. This form is a guide for conducting a threat assessment, but each case may have unique features that require some modification.

A threat assessment is not a crisis response. If there is indication that violence is imminent (e.g., a 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 911 and follow the school crisis response plan.

School Threat Assessment Decision Tree^{*}

Step 1. Evaluate the threat.

Obtain a detailed account of the threat, usually by interviewing the person who made the threat, the intended victim, and other witnesses. Write the exact content of the threat and key observations by each party. Consider the circumstances in which the threat was made and the student's intentions. Is there communication of intent to harm someone or behavior suggesting intent to harm?

No →

Not a threat. Might be an expression of anger that merits attention.

Yes ↓

Step 2. Attempt to resolve the threat as transient.

Is the threat an expression of humor, rhetoric, anger, or frustration that can be easily resolved so that there is no intent to harm? Does student retract the threat or offer an explanation and/or apology that indicates no future intent to harm anyone.

Yes →

Case resolved as transient; add services as needed.

No ↓

Step 3. Respond to a substantive threat.

For all substantive threats:

- Take precautions to protect potential victims.
- Warn intended victim and parents.
- Look for ways to resolve conflict.
- Discipline student, when appropriate.

Serious means a threat to hit, fight, or beat up whereas very serious means a threat to kill, rape, or cause very serious injury with a weapon.

Serious →

Case resolved as serious substantive threat; add services as needed.

Very Serious ↓

Step 4. Conduct a safety evaluation for a very serious substantive threat.

In addition to a-d above,

- Screen student for mental health services and counseling; refer as needed.
- Law enforcement investigation for evidence of planning and preparation, criminal activity.
- Develop safety plan that reduces risk and addresses student needs. Plan should include review of Individual Educational Plan if already receiving special education services and further assessment if possible disability.



Step 5. Implement and monitor the safety plan.

Document the plan.
Maintain contact with the student.
Monitor whether plan is working and revise as needed.

^{*}This 5-step decision tree is a revision of the original 7-step decision tree that retains the same information and procedures in a more condensed format.

THREAT REPORT	
<p>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.</p> <p>The process is designed for assessment of threats to harm others and is not intended for individuals who have only threatened to harm themselves. Only a small percentage of cases require both threat assessment and suicide assessment, and in those cases, the team should supplement this form with their choice of a standard suicide assessment protocol.</p>	
Name of person reporting threat:	Date/time threat reported:
Affiliation of person reporting threat: <input type="checkbox"/> Student <input type="checkbox"/> Parent <input type="checkbox"/> Staff <input type="checkbox"/> 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: <input type="checkbox"/> Student <input type="checkbox"/> Parent <input type="checkbox"/> Staff <input type="checkbox"/> Other _____	Status: <input type="checkbox"/> Current <input type="checkbox"/> Former
Identification: <input type="checkbox"/> Male <input type="checkbox"/> Female Age: Grade, if student: School program, if student:	
Emergency Contact:	Relationship:
Home Address:	Phone:
Location threat occurred: <input type="checkbox"/> School Building or Grounds <input type="checkbox"/> School Bus/Other Travel <input type="checkbox"/> School-Sponsored Activity <input type="checkbox"/> Digital communication such as text or post <input type="checkbox"/> Other _____	
Summary of the incident or threat. What was reported? Include who said or did what to whom. Who else was present?	

ASSESSMENT FINDINGS (All sources are not needed in most cases.)

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

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 summed or used as a score.

Threat is likely to be less serious:

1. Subject admits to threat (statement or behavior).	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	
2. Subject has explanation for threat as benign (such as joke or figure of speech).	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	
3. Subject admits feeling angry toward target at time of threat.	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	
4. Subject retracts threat or denies intent to harm.	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	
5. Subject apologetic or willing to make amends for threat.	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	
6. Subject willing to resolve threat through conflict resolution or some other means.	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	

Threat is likely to be more serious:

7. Subject continues to feel angry toward target.	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	
8. Subject expressed threat on more than one occasion.	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	
9. Subject has specific plan for carrying out the threat.	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	
10. Subject engaged in preparation for carrying out the threat.	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	
11. Subject has prior conflict with target or other motive.	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	
12. Subject is suicidal. (Supplement with suicide assessment.)	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	
13. Threat involved use of a weapon other than a firearm, such as a knife or club.	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	
14. Threat involves use of a firearm.	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	
15. Subject has possession of, or ready access to, a firearm.	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	
16. Subject has or sought accomplices or audience for carrying out threat.	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	
17. Threat involves gang conflict.	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	
18. Threat involves peers or others who have encouraged subject in making threat.	<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not available	

Other relevant observations

THREAT CLASSIFICATION

Date of initial classification:	<input type="checkbox"/> Not a threat	<input type="checkbox"/> Transient	<input type="checkbox"/> Serious Substantive	<input type="checkbox"/> Very Serious Substantive
Date of change in classification, if any:	<input type="checkbox"/> Not a threat	<input type="checkbox"/> Transient	<input type="checkbox"/> Serious Substantive	<input type="checkbox"/> 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.

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

THREAT RESPONSE

Use additional 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 date and signature of person taking action if appropriate. Note if action was recommended but for some reason not completed (e.g., parent refusal).

<input type="checkbox"/>	1. Increased contact/monitoring of subject	
<input type="checkbox"/>	2. Reprimand or warning	
<input type="checkbox"/>	3. Parent conference	
<input type="checkbox"/>	4. Student apology	
<input type="checkbox"/>	5. Contacted target of threat, including parent if target is a minor	
<input type="checkbox"/>	6. Counseling (note number of meetings)	
<input type="checkbox"/>	7. Conflict mediation	
<input type="checkbox"/>	8. Schedule change	
<input type="checkbox"/>	9. Transportation change	
<input type="checkbox"/>	10. Mental health assessment	
<input type="checkbox"/>	11. Mental health services in school	
<input type="checkbox"/>	12. Mental health services outside school	
<input type="checkbox"/>	13. Assess need for special education services	
<input type="checkbox"/>	14. Review of Individualized Education Program (IEP) for students already receiving services	
<input type="checkbox"/>	15. 504 plan or modification of 504 plan.	
<input type="checkbox"/>	16. Behavior Support Plan created or modified	
<input type="checkbox"/>	17. In-school time out or suspension	
<input type="checkbox"/>	18. Out-of-school suspension (number days)	
<input type="checkbox"/>	19. Referral for expulsion	
<input type="checkbox"/>	20. Other disciplinary action	
<input type="checkbox"/>	21. Change in school placement (e.g., transfer, homebound instruction)	
<input type="checkbox"/>	22. Services for other persons affected by threat	
<input type="checkbox"/>	23. Law enforcement consulted	
<input type="checkbox"/>	24. Legal actions (e.g., arrest, detentions, charges)	
<input type="checkbox"/>	25. Other actions	

CASE PLAN

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

Date

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

Date

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