

Rob Starkey, Director, Academic and Staff Assistance Program

Stacy Vander Velde, Office of Student Support and Judicial Affairs

Paul Harris, Academic Affairs

Joseph Farrow, Police Department

Joanne Zekany, Police Department

Maleah Vidal, Office of the Campus Counsel

Current Team Composition

Core members:

- Stacy Vander Velde OSSJA
- Joanne Zekany UCPD
- Maleah Vidal Campus Counsel
- Rob Starkey ASAP

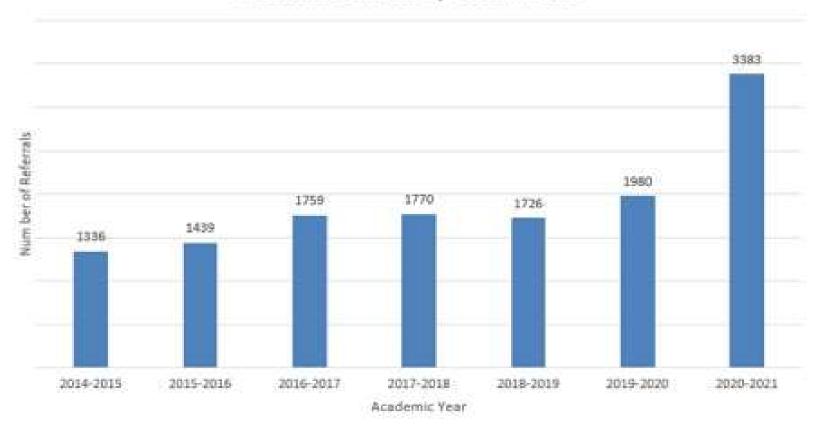
Situational members:

- Paul Harris Academic Affairs
- Julia Johnson ELR
- Ad hoc members: CARE, ISO, SHCS, Departmental/Academic reps, DMS, SDC, SHDS, Grad Studies,
 & OSSJA Case Managers



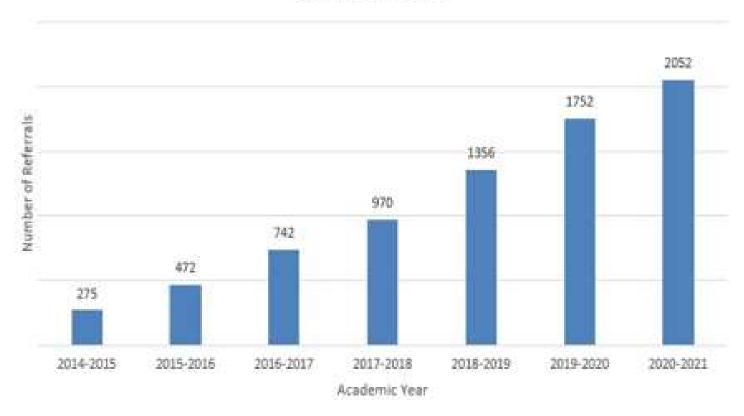
How are our students doing?

All Conduct Referrals by Academic Year

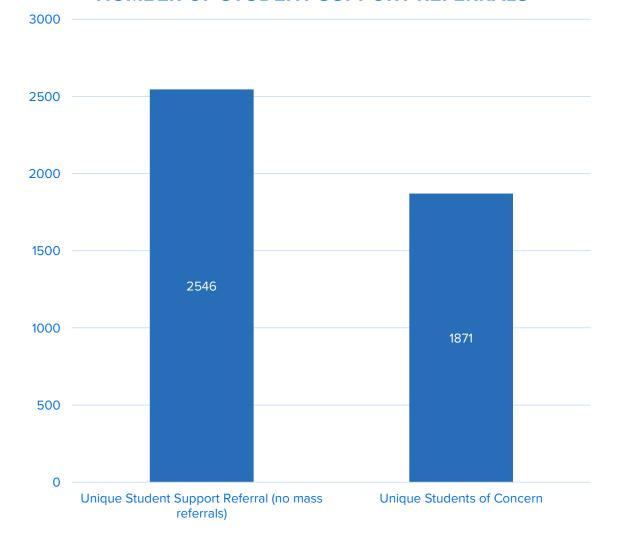


How are our students doing?

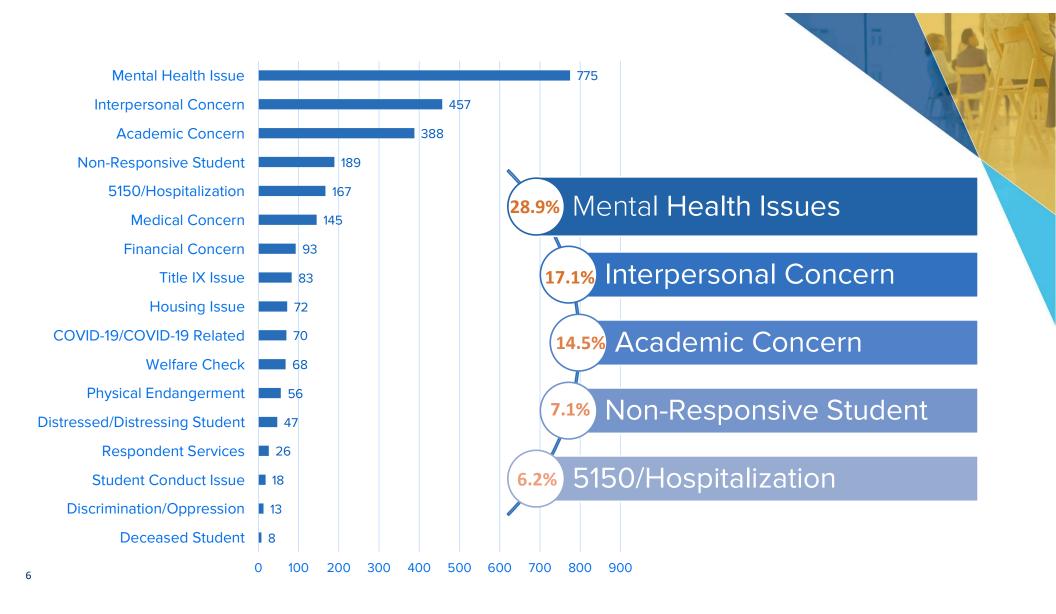
Number of Student Support Referrals by Academic Year



NUMBER OF STUDENT SUPPORT REFERRALS



- •There were 2,546 student support referrals in year 2021-2022
- •1,871 of those are considered as students of concern



Rights and Responsibilities

- Members of the UCD community have the right to work in an environment that promotes fairness, trust, respect, and physical and emotional safety and security.
- Every member of the UCD community shares responsibility for creating and maintaining a civil and respectful workplace, free of threatening or violent behaviors.
- Any employee who is the subject of, or a witness to, suspected workplace violence or abusive conduct should report the incident to the next-in-line supervisor who is not a party to the incident.

Behavioral Intervention Team

- Multidisciplinary, "rapid response team" to evaluate, investigate, and respond to incidents of actual or potential violence that may affect members of the UCD community.
- Function of the BIT is to:

Investigate – Assess – Advise

Behavioral Intervention Team

There is no system or process which accurately predicts and prevents violence.

- Can't predict violence, but threat scenarios can be managed
- Identify risk factors
- Notice and respond to behavior you see or know about
- Make connections to identify, evaluate, respond
- Implement actions to mitigate behaviors
- Monitor for changes

Core actions

- 1. Information gathering
- 2. Contact and engagement
- 3. Provide safety and comfort (Fear management!)
- 4. Stabilization
- 5. Offer practical assistance
- 6. Connect to social support
- 7. Provide education and resources
- 8. Link to services and referrals

Integrative threat assessment model

Making an assessment:

- A. Does the person **pose a threat** of harm, whether to him/herself, to others or both?
- B. If the person does not pose a threat of harm, does the person otherwise show a need for help or intervention?

Recognizing Signs of Distress



Signs

- Absenteeism, tardiness, presenteeism, missing class (welfare checks)
- Decline in engagement in class or workplace
- Disruptive, poor boundaries, aggressiveness, incivility
- Change in mood (excessive emotionality, crying, pressured speech)
- Poor hygiene
- Appears intoxicated
- Different social skills (Asperger's)

Special issue

Social media and the outrage machine

"Incidents of concern"

Common events that should get attention & review:

- Threats
- Violent talk
- Loss of temper
- Bullying
- Bizarre behavior
- Uninvited contact
- Suicidal communication

- Stalking
- Boundary crossing
- Assaults
- Alarming cyber activity
- Property destruction
- Inappropriate weapons talk or bringing to campus
- People are afraid

Recognizing Signs of Potential Violence

- Disgruntled individual who perceives injustice by university
- Moral righteousness belief that organization is not following its rules
- Holding a grudge
- Verbalizes hope for something to happen to the person against whom the individual has the grudge
- Unable to take constructive criticism
- A pattern of blaming
- Feeling of persecution / paranoia
- Socially isolated
- Verbalizes feelings of total helplessness, hopelessness and powerlessness

Two Principal Types of Violence

- *Intended violence* is a planned, premeditated attack on a specific target.
- *Impromptu violence* is an unplanned, usually emotional, violent outburst in reaction to the circumstances of the moment.

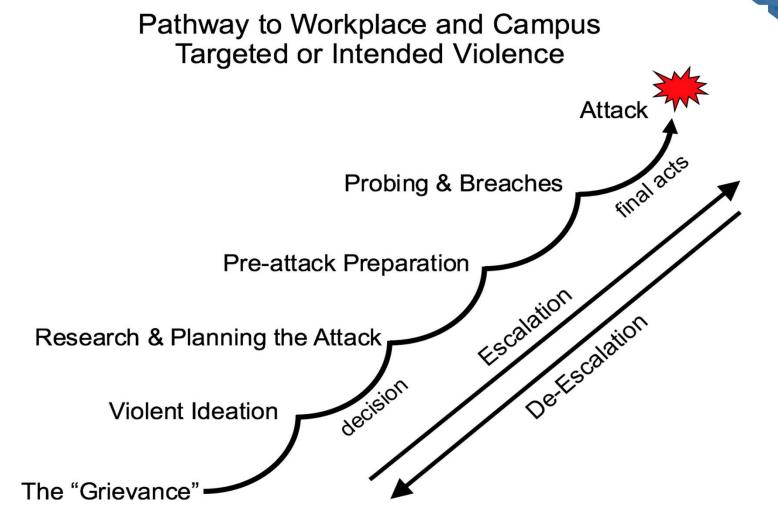
<u>Intended</u> <u>Impromptu</u>

Predatory Affective

Targeted Reactive

Premeditated Unplanned

Purposeful Instinctual



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A practical guide for identifying, assessing and managing individuals of violent intent.

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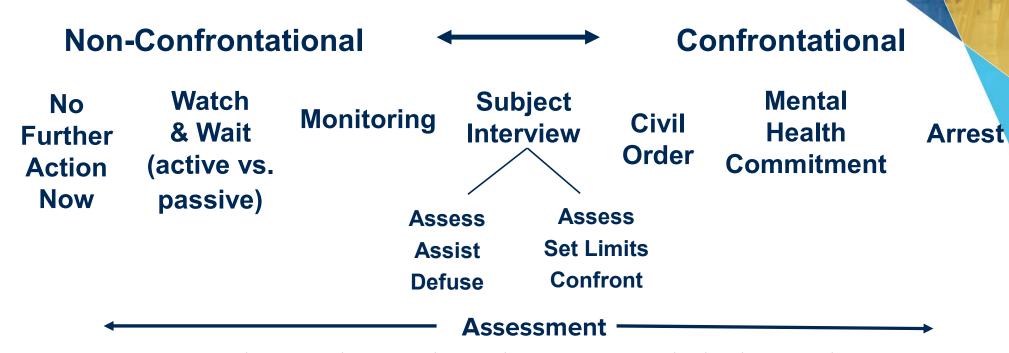
Assessing Threats is Dynamic

- Some risk factors are static
 - · e.g., history of violence, a divorce last year
- Some risk factors are dynamic, in play
 - e.g., anger, access to weapons, substance use
- Some risk factors we can control/influence
 - e.g., how an employee is separated from the organization (potential triggering event)

Thus, assessment data unfold as we intervene and the subject reacts



Range of Intervention Strategies



How is the subject reacting to time and our continuing intervention decisions?

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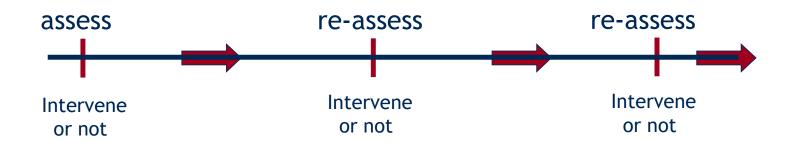
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Police Response (non-emergency)

- Possible outcomes
 - Standby and preserve the peace
 - Field Interview
 - Officer's Report (documentation only)
 - Student Conduct
 - Penal Code 626.6 (a)- 7 day ban
 - Restraining Orders
 - Misdemeanor (most likely citation issued)
 - Felony (arrest) and booked into jail

Assess - Decide - Intervene

Following an individual of interest through time and events



So, I'm concerned about a distressing student... What do I do?

- What are the policies and procedures in your department/campus-wide regarding students of concern?
 - Know/follow established procedures/policies
 - Recommended reporting re: possible harm to self or others—imminent risk
 - Mandatory reporting (Title IX)

Consult

- Seek out consultation/support
 - Co-workers
 - Supervisor
 - Other resources

Refer

- If the student is disclosing a specific issue, and it's clear which office might assist, provide resource/referral information.
- For students who are presenting with multiple and/or complex needs, consider a case management referral.





- Definition: to reduce the level or intensity of
 - Used during potentially dangerous or threatening situations to prevent persons from causing harm to self and/or harm to others.
- In a crisis, de-escalation is abnormal.
 - Normal response: Fight, flight, or freeze.
 - Practice the opposite until it becomes second nature. → You want to appear calm and self-assured.
- Goal of de-escalation: Reduce the level of agitation.
 - Calm the situation down enough for a rational discussion to become possible.



- Set Limits
- Clear expectations for behavior:
 - "You need to ______ (lower your voice, stand back, sit down, etc.). I want to help you but you need to ______."
 - "I need to schedule another time to speak because I am not able to help when you continue to
 ______. Send me an email with your concerns and your availability."
 - If feeling unsafe/threatened, leave & get help if possible; utilize department safety plan(s)
- "Your concern is important, wait here, and I will find someone who can help you."
- If you are concerned about a student harming themselves or others
- Refer student to Urgent Care; escort student if possible/appropriate
- Seek assistance (consultation from SHCS, Case Management, ASAP), consider contacting police for assistance with transport

Contact campus police if needed for assistance

Reminders



- De-escalation does not always work.
 - You can usually tell after 2 or 3 minutes if the de-escalation is starting to work.
 - o If it does seem to be working, continue being patient with the other person, and work together to find a resolution.
 - o If it does not seem to be working, you always have the option to leave and call the police/security; ask another coworker for help; or ask the person to leave.
- Being calm is as contagious as fear and panic.
 - **Strategic visualization**: What are your hot buttons, your personal limits? Develop a plan and practice becoming <u>proactive</u> and not reactive when faced with crises. You will gain more confidence.
 - Use **positive self-talk** (e.g., telling yourself "I can deal with this" or "I know what to do").



- Protects the privacy rights of students by giving them the right to control the disclosure of their "education records."
- An "education record" is any record: 1) Directly related to a student, and 2) Maintained by the University.
 - Campus police records are not education records.
 - Personal observations and conversations are not education records.
- Legitimate educational interest Disclosure of education records is permissible when a University employee
 has a legitimate educational interest (ie, If the record is relevant and necessary to the accomplishment of
 their official University duties).
- Health or safety emergency Disclosure of education records to a third party, including parents, is
 permissible if knowledge is necessary to protect the health or safety of the student or other individuals. The
 threat of harm must be articulable and significant.
- UC Policies: Systemwide policy (<u>PACAOS 130.00</u>) and campus policy (<u>PPM 320-21</u>)

Scenario #1

- A student in your lab, Ralph, attends every office hour you hold. Ralph at first attended the office hour with questions, but you noticed he now attends and "hangs out" without purpose. You've made small talk and mentioned you enjoy Guads Tacos & Beer for food/socialization.
- The next time you're there, Ralph is also present and approaches your group. You make polite conversation, but Ralph does not get the hint and lingers. He starts sending you emails asking personal information including your phone number and what "your type" is. You are beginning to feel uncomfortable around Ralph as he continues to pop up around the Chemistry building and your social dwellings.
- As a student in your CHE 2B lab you cannot avoid him, what would you do?

Scenario #2

- A graduate student in your lab has stopped showing up for group meetings. They feel defeated about their research and have made hints that they are not cut out for this program. They have a strained relationship with the PI, which is not helping their situation. They shared that they feel the PI will retaliate if they try and leave their lab.
- When you run into them at Trader Joe's and they seem disconnected and disheveled. They share that there's no point anymore- in attending classes or group meetings.
- What would you do and say?

Scenario #3

- A student emails you to dispute a grade on their final exam. They
 claim that during Office Hours you showed them how to do a problem
 that when they used that method on the exam they were dinged
 credit. The partial credit means they got a "D" in the class instead of a
 "C."
- The student continues to email you angry tirades about how you cost them their grade. They said they will lose their scholarship and that it is your fault. After telling the student they can no longer contact you, they send an email and tell you, "if I see you on campus you better run the other direction."
- What do you do and say?



- An undergrad student reports to you that the PI she works for has recently been engaging in some concerning behavior but she is worried about saying anything because she is hoping to go to grad school and is concerned about how it might affect her rec letters. She reported that the faculty member has been saying some things recently that make her concerned for her PI's state of mind. The faculty member has shared that he is going through a divorce and that he feels that his research is stuck and has said "what's the point anyway?" There have been other comments that make the student fear that the faculty member is in a really bad state of mind and could even be in danger of hurting himself.
- What steps can you take to support the student? How do you address the concerns about the faculty member's state of mind?



Who To Contact

Questions or concerns of potential threats or concerning behavior – contact:

Students:

OSSJA: 530-752-1128 / ossja@ucdavis.edu

Faculty/Staff/Non-affiliates

UCD Campus ASAP: 530-752-2727

UCD Health ASAP: 916-734-2727

For emergencies or safety issues:

UCD PD Campus Emergency: 911/530-752-1230

Health: 911/916-734-2555

UCD PD Campus Non-Emergency: 530-752-1727

Health: 916-734-2555