

School-Based Behavioral Threat Assessment – Screening Tool

Student Name:	School:	DOB:	Today's Date:
Does the student have an: <input type="checkbox"/> IEP or <input type="checkbox"/> 504 Disability:	Grade:	Identified Gender:	
Date of Incident:	Time:		
Description of Incident that initiated screening:			
Parent/Guardian #1:	Phone:	Parent/Guardian #2:	Phone:
<p>Core threat assessment team members: *At minimum the screening team shall include an administrator and at least one school mental health professional (e.g., school psychologist, school social worker, school counselor, mental health counselor) to complete screening and determine if a full threat assessment is warranted.</p> <p>**Consultation with School Resource Officer (SRO) and other school staff who have knowledge of student should be done.</p>			
NOTE: weapon involvement or threat with specificity & intent, immediately proceed to full assessment with SRO/law enforcement involvement.			

***Core threat assessment team members complete entire screening, using the chart below, before making a decision.** The decision must consider age, developmental level, credibility, and history of concerns regarding the student who made the threat. Credibility of the threat is based on the student's presentation of what happened, whether others feel threatened, and consideration of other information known about this student.

1. Is it an emergency or imminent situation? If yes, call 911/notify SRO If no, to go #2
2. Does it involve any of the following? Sexual Assault, Sexual Harassment, Dating Violence, Stalking, Domestic Violence Assault
If so, also notify Title IX Coordinator.
3. Does the student of concern have a disability with IEP/504 Plan? If yes go to 4a and b
 - 4a. Is the threatening behavior possibly related to characteristics associated with the identifiable disability (per SPED/504)?
 - 4b. Can the threatening behavior be managed under existing IEP/504 Plan?
 If NO, complete screener. If YES, engage SPED/504 representative(s) and complete screener.

Check the level of concern for each factor to guide the team screening decision.
Note: Screeners do not capture every variable. The team may recommend conducting a full Threat Assessment if other variables warrant.

Factors to Consider	No Intent to Harm (no threat made or made a threat but can be resolved or managed through problem-solving process or existing supports)	Possible Intent to Harm - Needs Further Assessment (e.g. "Possible Substantive" = context and meaning support a legitimate safety concern that needs further assessment to more specifically determine level of concern and the actions needed to assure safety)
Type of threat	<input type="checkbox"/> No "true" threat (person on receiving end does not feel threatened; acknowledges threat was in response to a specific situation; and/or perceived as a joke; no intent) <input type="checkbox"/> No threat was made (words/actions expressed were taken from song lyrics, video games, movie, or other sources; no intent)	<input type="checkbox"/> Threat communicated with intent to harm other (verbal, non- verbal, electronic, written, pictures, gestures, social media) <input type="checkbox"/> Person(s) on receiving end is concerned/threat was not perceived as a joke Specify: <input type="checkbox"/> Unable to determine at this time
Target/victim	<input type="checkbox"/> No target/victim <input type="checkbox"/> Target/victim not identified	<input type="checkbox"/> Expressed thoughts of homicide/hurting specific target(s)/victims(s) <input type="checkbox"/> Unable to determine at this time
Threat was	<input type="checkbox"/> Taken out of context (no true threat) <input type="checkbox"/> Impulsive/not planned (e.g. anger/frustration in response to a specific situation/event)	<input type="checkbox"/> Perceived as a serious threat and evidence of forethought/planning Specify: <input type="checkbox"/> Unable to determine at this time
The plan itself	<input type="checkbox"/> No plan <input type="checkbox"/> Words/actions expressed were done in response to an assignment/prompt	<input type="checkbox"/> Plan has potential plausibility. <input type="checkbox"/> Unable to determine at this time
Access to weapons	<input type="checkbox"/> No known access to weapons <input type="checkbox"/> Access to weapons but only under careful supervision of adults, responsible use, no risk factors evident, no plan to harm others	<input type="checkbox"/> Has access to harmful or lethal weapons (e.g., guns) or is known to be trying to gain access and has risk factors of concern Specify: *Access with warning signs, duty to contact law enforcement/SRO. <input type="checkbox"/> Unable to determine at this time
Motive	<input type="checkbox"/> No motive expressed <input type="checkbox"/> Typical conflict and no known reason/motive for student to act on plan	<input type="checkbox"/> Expressed strong motivation/grievances/reasons for the planned violence. Sees violence as desirable/acceptable. Specify: <input type="checkbox"/> Unable to determine at this time
Perceptions	<input type="checkbox"/> No conflict evident. <input type="checkbox"/> Perceives as isolated incident and/or perceives problem solving solutions can be effective	<input type="checkbox"/> A pattern of feeling victimized, bullied, or persecuted and/or perceives solutions to be ineffective or insufficient Specify: <input type="checkbox"/> Unable to determine at this time
	<input type="checkbox"/> No stressors are evident. <input type="checkbox"/> Has hope that stressors can be addressed/resolved; wants to live (no expression of disregard/ending life)	<input type="checkbox"/> Has expressed thoughts of hopelessness, helplessness, desperation, suicidal ideation, and/or disregard for life Specify: *If suicidal ideation must also conduct Suicide Risk Assessment. <input type="checkbox"/> Unable to determine at this time

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Student _____

Developmental factors	<input type="checkbox"/> Student lacks developmental understanding <input type="checkbox"/> Disability impairs social communication and ability to recognize consequences of words, statements, or actions <input type="checkbox"/> Recognizes consequences of words/actions and responded appropriately to the concern/consequences/problem solving	<input type="checkbox"/> Recognizes consequences of words, statements, or actions but lacks appropriate contrition, is indifferent, or doesn't care <input type="checkbox"/> Unable to determine at this time
Management of concerns	<input type="checkbox"/> Student's current behavior is consistent with baseline behaviors and can be managed safely through 504, IEP, behavior plan, or other interventions <input type="checkbox"/> Behavior was rare/isolated occurrence and can be managed effectively through universal supports and problem solving	<input type="checkbox"/> Need or possible need for ongoing monitoring; supports already in place felt to be inadequate to ensure safety at this time <input type="checkbox"/> Unable to determine at this time
Involvement of caregiver(s)	<input type="checkbox"/> Very supportive involvement of caregiver(s); willing to collaborate with school; actively monitor behaviors at home.	<input type="checkbox"/> Caregiver(s) inconsistently involved or needs guidance/support with monitoring; lack of supervision, and/or can be resistive to collaboration with school <input type="checkbox"/> Unable to determine at this time
Connectedness	<input type="checkbox"/> Student identifies with prosocial peer group; adult mentor(s)	<input type="checkbox"/> Lacks connectedness and/or affiliation with prosocial groups and/or adult mentor(s) <input type="checkbox"/> Unable to determine at this time

TEAM DECISION - SCREENING RESULTS:

****If the team does not have enough information to determine no intent to harm, then must proceed to full threat assessment.****

Based upon known and accessible information, the expressed threat is a:

(See Appendix B "School-Based Behavioral Threat Assessment & Management Guidelines for South Carolina K-12 Schools" for additional guidance regarding transient vs substantive threats)

No Intent to Harm: No threat made or statement did not express a lasting intent to harm someone; statement(s) was intended as figure of speech or reflects feelings that dissipate in a short period after reflection. **Can be resolved or managed through problem solving and/or existing supports.** COMPLETE RATIONALE AND FOLLOW-UP STEPS BELOW.

Possible Intent to Harm/Further Assessment Needed: Need to gather additional information to assess situation. Statement expressed a possible continuing intent to harm someone; expressed emotions and possible desire to harm someone that extends beyond the immediate incident when the threat was made; context and meaning indicate possible safety concern. **Additional assessment and supports needed.** COMPLETE RATIONALE AND MOVE TO FULL THREAT ASSESSMENT.

RATIONALE FOR TEAM DECISION: (Must complete this section). Attach additional information if needed.

Follow Up Steps (check all that apply)	Person Responsible for Facilitating Action	Date Completed
<input type="checkbox"/> Possible substantive threat identified – move to full assessment		
<input type="checkbox"/> Conference with student and parent(s)/guardian(s)		
<input type="checkbox"/> Mediation / Restorative conference / Problem-solving process		
<input type="checkbox"/> Schedule IEP review / 504 Plan review		
<input type="checkbox"/> Develop behavior plan and/or safety plan		
<input type="checkbox"/> Revise current behavior plan and/or safety plan		
<input type="checkbox"/> Other		
<input type="checkbox"/> Other		

Screening completed by:

Core Team Members: Administrator: _____ **School Mental Health Professional:** _____

Other Staff: _____ **Other Staff:** _____

Date: _____

DOCUMENTATION:

1. Print, sign, & send copy to (district department who oversees threat assessments).
2. If full threat assessment conducted, enter action taken into appropriate database system.
3. THE SCHOOL SHALL MAINTAIN THE ORIGINAL SCREENER AND ANY SUPPORTING DOCUMENTS IN A SECURE, CONFIDENTIAL LOCATION