Community VTRA Protocol:

Violence Threat Risk Assessment

A Collaborative Response to Assessing the Potential Violence in Children and Youth

A protocol developed by:

St. Clair Catholic District School Board
Lambton Kent District School Board
Conseil scolaire de district des écoles catholiques du Sud-Ouest
in collaboration with
Community agencies
and
Police Services in Chatham-Kent and Sarnia-Lambton

Effective: April 4, 2013

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Table of Contents

APPENDICES

Collaborative Response to Assessing the Potential Violence in Children and Youth

<u>Acknowledgements</u>

I.   RATIONALE

The St. Clair Catholic District School Board, Lambton Kent District School Board, Conseil scolaire de district des écoles catholiques du Sud-Ouest, Chatham-Kent Police Service, Sarnia Police Service, Lambton OPP and their Community Partners are committed to safe schools and communities. The term "partner" in this document is not intended to mean a legal partnership, but rather a collaborative arrangement.

The District School Boards will respond to student (child/youth) behaviours that may pose a potential risk for violence to children/youth, staff and members of the community. A student refers to a child/youth that are of school age. Child/Youth will be used in the remainder of this document. The goal of early intervention by the school boards, community partners, child/youth and families will be to reduce and manage school or community violence and harm to self or others.

This protocol supports collaborative planning among schools, community partners, families, children and youth, to reduce violence and to reflect safe, caring and supportive approaches. It fosters timely sharing of information about a child or youth who poses a risk for violence towards themselves or others. It reflects the process of identifying the signs that a person is moving on a path towards serious violence before a violent act occurs. The protocol promotes supportive and preventive plans being put in place.

The strength of this Partnership between school boards and community partners lies in the multidisciplinary composition of the Community Threat Assessment Team (CTAT). The CTAT members will strive to share and review relevant information, details of threatening circumstances promptly, to collaborate effectively, and to make use of a broad range of expertise in response. This collaborative process will respect an individual's rights to privacy balanced with the safety of the individual and well-being of the community.

Need for Training
This protocol document is not a substitute for training in the field of Violence Threat Risk Assessment (VTRA) and should **not** be used until adequate training is received. The VTRA protocol is intended to be used by multidisciplinary teams trained in the theory and practice of student threat-risk assessment through Level 1 Violence Threat Risk Assessment Training. VTRA – Level 1 should be on-going and include staff working with at-risk children and youth.

Importance of Safe School Culture
School culture/climate is widely acknowledged as being key to creating a safe environment. By placing a strong emphasis on safety, tolerance, communication and programming designed to facilitate social responsibility, an environment is created where violence is less likely to occur, and where systems are in place to allow for early identification of potential problems. It is critical for students themselves to be actively involved in the development of safe school initiatives and programming.

II.   COMMUNITY PARTNERS

The District School Boards are the lead partners in the Community Threat Assessment Protocol for our geographical area of Chatham-Kent and Sarnia-Lambton. Community Partners include the following police services and mental health agencies from across the following two regions:

- **Chatham-Kent**
  Canadian Mental Health Association
  Chatham-Kent Children's Services
  Chatham-Kent Community Health Centres Living
  Chatham-Kent Fire Department
  Chatham-Kent Health Alliance Mental Health and Addictions Program
  Chatham-Kent Police Service
  Chatham-Kent Public Health Unit
  Chatham-Kent Victim Services
  Community Living Chatham-Kent
  Family Service Kent/Services à la famille de Kent
  Ministry of Children and Youth Services – Youth Justice
  Municipality of Chatham-Kent, Recreation Program
  Rain & Shine Behavioural Counselling Service
  Restorative Justice Chatham-Kent
  University of Guelph - Ridgetown Campus
  VON Chatham-Kent Kids' Circle Program
  Western Area Youth Services

- **Sarnia-Lambton**
  Bluewater Health
  Canadian Mental Health Association
  Community Living – Sarnia Lambton
  Family Counselling Centre
  Huron House Boys' Home
  Lambton College
  Ministry of Children and Youth Services – Youth Justice
  Pathways Health Centre for Children
  Sarnia-Lambton Children's Aid Society
  Sarnia-Lambton Rebound
  Sarnia Police Services
  St. Clair Child and Youth Services

III. VISION AND STATEMENT OF PRINCIPLES FOR SAFE SCHOOLS AND COMMUNITIES

All partners will undertake to follow the protocol. We have a shared obligation to take active steps to reduce violence in schools and the community.

The overriding goal is risk reduction and violence prevention to promote the safety of children and youth, parents/guardians, school staff, and community members.

The partners agree to work together toward the common goals of reducing violence, managing threats of violence, and promoting individual, school and community safety. We will do so by proactively sharing information, advice, and support.

The protocol is designed to facilitate communication so that when the Community Threat Assessment Team (CTAT) is activated, appropriate Community Partners and District School Boards may share relevant child/youth information.

As partners, we will work together for the benefit of children, youth, and their parents/guardians by:
- ensuring all efforts are equitable and inclusive
- building working relationships based on mutual respect and trust
- working in ways that promote safe, caring and supportive school environments and practices
- involving children, youth and their families in planning for services and supports - it is important that the support services and interventions extended to the student and family are culturally appropriate and/or accessible within the context of the limitations of the community
- recognizing that each child and youth has unique strengths and needs that should be considered when developing an appropriate service plan
- realizing that working together successfully is a process of learning, listening, and understanding one another
- being patient, trusting and working together to help children and youth become happy, healthy, active, involved, and caring members of the community
- participating in Community Threat Risk Assessment Team meetings
- designating a trained lead contact person and advising community partners of who the lead is their designate and any changes to the lead

As part of the protocol design, District School Boards and Community Partners will commit to:
- ongoing participation in a minimum of four Advisory Meetings per year in the first two years of the protocol
- program review
- participation in CTAT meetings
- designating a lead contact who has been trained
- ongoing staff training

IV. KEY APPROACHES IN THREAT/ RISK ASSESSMENT

Sharing of Relevant Information

All partners will share relevant information to avert or minimize imminent risk of violence to self or others.

Investigative Mind-set

An investigative mind-set is central to successful application of the risk threat assessment process. Threat assessment requires ongoing attentiveness to changes in circumstances or behaviour that may indicate the need for concern or potential response. Personnel who carry out risk threat assessment strive to be both accurate and fair.

Building Capacity

Threat assessment training will be provided to as many school personnel and community partner staff as possible. The Steering Committee, made up of community partners, police and school boards, will take the lead in provision of training.

Program Review

The Community Threat Assessment Protocol will be reviewed by the Community Threat Assessment Protocol Advisory Group a minimum of four times per year in the first two years of the protocol, and once a year following that. This group will be made up of designates from Community Partners, Police Services and District School Boards.

Contact List

The District School Boards will be the lead agencies in application of the protocol. The District School Boards' Superintendents of Safe Schools or designates, will maintain an up-to-date contact list of the Community Threat Assessment Protocol partners, and will distribute a copy of the list to all Community Partners. The Superintendents will designate a lead contact for July and August of each year, and will notify the Community Partners of the names and contact information.

V.   THREAT ASSESSMENT RESPONSE

When a child/youth engages in behaviours or makes threatening comments or gestures that may result in serious injury to self and/or others, the Community Threat Assessment Team (CTAT) will respond in the manner identified in: ***Appendix A — Responding to Threat Making Behaviour: A Staff Guide.***

The Community Threat Assessment Protocol is based on The Canadian Centre for Threat Assessment and Trauma Response's Canadian Model of Violence Threat/Risk Assessment (VTRA). The VTRA follows a three-step process:
Stage 1 Data collection and immediate risk reducing interventions;
Stage 2 Multidisciplinary risk evaluation and
Stage 3 Development and implementation of a comprehensive multidisciplinary intervention

The VTRA reflects scientific research conducted by a number of disciplines including medical and mental health professionals, law enforcement, and specialists in the field of threat management.

Stage 1: Data collection and immediate risk reducing interventions
Stage 1 VTRA Teams must include the following professionals and others as the team or committee deems appropriate
- School Principal and/or designate
- Clinician (School Board designate)
- Police of Jurisdiction
- Other

The initial data collection is often accomplished in one to two hours. It focuses on gathering case specific data using the ***Community Threat Assessment Report Form - Appendix B***.

Note: VTRA cases can be resolved at the Stage I level where the incident proves to either be a moment- in-time bad judgment call by the threat maker that is low risk; information that resulted in the activation of the Stage I Protocol proves to be unsubstantiated; or adequate interventions are able to be put in place under the direction of the school/police team that address the needs of the threat maker, target, etc.

Stage 2: Comprehensive Risk Evaluation
Stage 2 is a "multidisciplinary risk evaluation" which often involves some or all of the following:
- Stage 1 CTAT members
- Mental Health Workers
- Child Protection Workers
- Probation Workers
- Psychologists
- Psychiatrists
- Hospital (ER Units/Mental Health Clinic)
- Other

This second stage is focused on further data collection beyond the initial data obtained by the Stage I Team. The Stage II members, in collaboration with the Stage 1 Team, will complete the formal risk assessment and evaluation. (See ***Appendix A: Responding to Threat Making Behaviour: A Staff Guide***).

Stage 3: Longer Term Treatment Planning -Multidisciplinary Intervention

This stage requires reconvening all the Stage I and/or II team members who are involved in the case at hand for the "**development and implementation of a comprehensive multidisciplinary intervention**" and to pre-determine a follow-up date for case review. The lead agency will be determined by the needs of the child/youth. In complex cases one agency may take the initial lead but after stabilization another may assume the leadership/coordinating role.

The three stages of the VTRA combine all appropriate threat assessment concepts and risk assessment factors. Stage 2 and Stage 3 may be simultaneous. This protocol allows for a comprehensive determination of violence risk posed, and the identification of appropriate interventions. It prevents under-reaction by professionals who may use general violence risk assessment tools as the unilateral measure to determine risk of violence of an at risk child/youth. The three Stages promote understanding that some individuals may not pose a risk for general violence, yet may be moving rapidly on a pathway of violence towards a particular target they consider justifiable.

VI. ACTIVATION OF THE SCHOOL & COMMUNITY THREAT ASSESSMENT TEAMS

The following guidelines are intended to help school and community personnel make the determination of when to activate the VTRA process. To facilitate timely activation of the Community Threat Assessment Team (CTAT), each Community Partner will identify its lead TAT member(s), and provide contact information to the School Boards' Superintendents of Safe Schools. The superintendent or designate will be responsible for calling lead CTAT members who may have information specific to that threat situation.

Immediate Risk Situations
These situations include armed (weapons/device capable of causing serious injury or death) persons inside a building (or periphery) who pose a risk to some target(s) or active shooter scenarios. When immediate risk is identified, **the school lockdown plan must be activated immediately, and 911** called. In these cases immediate police intervention and protection of students and staff is the immediate response – **NOT** Stage 1 VTRA.

Automatic Stage 1 VTRA Activation for:
- Serious violence or violence with intent to harm or kill
- Verbal/written threats to kill self or others ("clear, direct, and plausible")
- Internet website / social networks threats to kill self or others
- Possession of illegal weapons (including replicas)
- Bomb threats (threatening or making and/or detonating explosive devices)
- Fire Setting
- Sexual intimidation or assault
- Gang related intimidation and violence

When a school administrator becomes aware of any behaviour outlined in the **Automatic Stage 1 VTRA Activation** section they will inform the counselling member(s) and the police member of the Stage 1 team who will then collect initial data as per the **Stage 1 Report Form**. School Administrator should notify the Superintendent responsible for both the safe school portfolio in addition to the VTRA team of any behaviour that activates or **should activate** the VTRA protocol promptly. Other team members (School Counsellors, Board staff, Psychologist, Police, Community Counsellor, etc.) must promptly notify their direct supervisors of **any behaviour** that activates or **should activate** the protocol.

Stage I VTRA Team Leadership and Team Activation
In school-based VTRA cases the principal and or their designate (e.g. V.P.) is the team leader in that it is their responsibility to maintain a safe and caring learning environment and therefore their responsibility to activate the protocol when other(s) provide them with information that suggests a child/youth or other has engaged in violent or threat making behaviours. However, once the Stage I team is activated leadership is shared and collaborative as the team decides initial steps that need to be taken for immediate data collection and any immediate risk reducing interventions. School principals are still responsible for disciplinary measures that may need to be addressed and the overall safety of children/youth and staff.

Police are responsible for determining if a parallel investigation focusing on the criminal aspect of the case will go forward in addition to being responsible for public safety concerns. When school administration becomes aware of any risk behaviours, police must be contacted.

Non-School Hour Cases
If information is received by a VTRA member regarding a threat that is **"clear, direct, and plausible"** before or after school hours, police will be called, parent(s) or caregiver(s) will be notified immediately so that they can take steps to inform and protect the target. The VTRA team will be activated if the situation is deemed to have potential to pose ongoing risk to member(s) of the school community.

Threats
Threats may be written, verbal, drawn, posted on internet, gestured and may be:
- Direct
- Indirect
- Conditional
- Veiled

Some threats may not meet the standard of law for criminal charges but do warrant assessment. Prior knowledge may justify VTRA team members in responding to "pre-incident" indicator as the threat may be a part of a "clear and discernible pattern of offending".

Violence
When violence occurs, the following general guidelines can help administrators to determine if the case should be dealt with as a disciplinary matter only or as a violence/threat risk assessment case.

Consult with a VTRA member/immediate supervisor **if:**
- lower baseline violence appears unprovoked
- clear victim and perpetrator dyad with power imbalance (age, size, social power, etc.)
- no intent to harm present
- if the **f**requency, **i**ntensity, **r**ecency (FIR) of the violence denotes an increase in behavioural baseline of the perpetrator(s)

Activate Violence Threat Risk Assessment team and protocol if:
- direct, clear, and plausible threats to kill or seriously injure are communicated
- serious violence occurs
- there is intent to seriously injure the target(s)
- when weapons (knives, guns, replicas, machetes, etc.) are brandished or used in the commission of the offence

VII.   RESPONDING TO THREAT MAKING BEHAVIOURS

Early Elementary Students
Generally most threat-related behaviour exhibited by elementary aged students would fall into the category of "**worrisome behaviour**". If there is a significant increase in baseline behaviour, weapons possession or **clear, direct,** and **plausible** threats, the formal VTRA protocol will still be activated. Simply because a child/youth is elementary age does not mean they cannot pose a risk. CAS should be called as per outlined in "duty to report" procedures.

Child/Youth with Special Needs and VTRA
The multidisciplinary VTRA protocol will not be activated when child/youth with special needs engage in threat-making or aggressive behaviours that are typical to their "baseline". In other words, if their conduct is consistent with their diagnoses and how it has been known to manifest in them then the VTRA Team may not be called upon to conduct an assessment. For instance, some children/youth diagnosed along the Autism Spectrum or Fetal Alcohol Spectrum may have histories of verbal threatening when they are frustrated and make statements such as "I'm going to take a knife and kill you" as part of their typical baseline behaviour. This would not result in the activation of the VTRA Team. If the child/youth with special needs moves beyond their typical baseline and for the first time is caught with a knife in their possession or threatened a target with a knife in their hand, then the VTRA Team would be activated to assist in determining the reason for the increase in baseline and whether or not the child/youth poses a risk to self or others.

Once the VTRA Team is activated the process of data collection and assessment is not modified other than to ensure appropriate interviewing strategies with the child/youth with special needs. Staff members from the school and district level responsible for program planning and service delivery to children and youth with special needs will be consultants to the VTRA Team in these cases.

Good case management with children and youth with special needs means that school officials should already know more about these children and youth than others as program planning requires comprehensive assessment in the first place. This foundational knowledge about the child/youth means that any significant shift in baseline that meets the criteria for the VTRA protocol activation is easily identified. The purpose of the team would be to assist with determining why the increase and then contribute to the intervention planning.

There are times when the child/youth with special needs has had a "slow but steady" increase in the "frequency" and "intensity" of their violent or acting out behaviour. In these cases there may not be a single incident prompting a Stage I Threat Assessment but information may emerge that requires the benefit of all or some of the Stage 2 members. Stage 2 VTRA Team members can include Mental Health, Children's Aid Society, Probation, Hospital ER Units, and others who can be utilized to assist with more general violence risk assessment and intervention planning.

A Note of Caution:
*Sometimes school and community members **may under react to a serious threat** posed by a child/youth with special needs assuming that all of their behaviours are caused by or a result of their diagnoses rather than consider that a child/youth with special needs can move along a pathway of "justification" as well. The same dynamics that can increase the risk of violence in the general student population can also be factors in contributing to the violence potential of the child/youth with special needs independent of their diagnoses.*

Violence Threat Risk Assessment

Threat Assessment Trumps Suspension
In most cases, unless the individual of concern already poses an imminent or obvious safety concern, the Stage 1 team is activated and the Stage 1 REPORT FORM data is collected within a reasonable time frame before a suspension is even considered. A poorly timed suspension is often viewed by high-risk student as the "last straw". It is in this stage that many threat makers decide to finalize a plan to terrorize their school or attack a specific target: this can include homicidal or suicidal acts. The suspension does not "cause" the violence to occur but creates the necessary context for the high-risk student, who is already struggling with suicidal and /or homicidal ideation, to take the final step from planning to action. VTRA may or may not result in a suspension. Threat Risk Assessment is not a disciplinary measure.

Duty to Report
If there is imminent danger an immediate call needs to be made to 911. All staff and students need to be advised that ANY person in a school community having knowledge of high-risk student behaviour or having reasonable grounds to believe there is a potential for high-risk or violent behaviour should promptly report the information to the school administration, agency lead (outside of school hours), or a member of the CTAT. School staffs need to actively counter the "code of silence".

 It is important to teach students that:
- seeking adult support for worrisome behaviour is NOT "ratting" or "snitching"
- seeking an adult when concerned about someone's behaviour is socially responsible for the well-being of everyone

Parent/Guardian Considerations:
- Parents/Guardians of the **threat maker** should be notified at the **earliest opportunity.** Notification should occur after the CTAT has collected enough initial data to confirm that a threat or violent incident has occurred and has determined the current level of violence potential. Notification of parent(s) or guardian(s) activates a collaborative process between home and school to more fully assess the child/youth and collaboratively plan for appropriate intervention when necessary.
- Parents/Guardians of the **target(s)** should be notified at the **earliest opportunity.** If the threat is "clear, direct, and plausible" or the CTAT feels violence may be imminent, notification will occur after the target is secured/protected from potential harm. If the initial threat is **NOT** "clear, direct, and plausible", the CTAT will continue to collect data to determine the level of risk before the parent(s) or guardian(s) are notified.
- The CTAT clinician (psychologist, therapist, counsellor) is responsible for ensuring that the recipient(s), victim(s) or target(s) of the threats are assessed and that services are provided. Circumstances will dictate how far reaching the intervention may be. The CTAT clinician and school administration (in consultation with the Superintendent) will determine if crisis counseling or a crisis response team is needed to re-establish calm.

RESPONDING TO THREAT MAKING BEHAVIOUR: A STAFF GUIDE

Worrisome Behaviours (Investigate Further)	High Risk Behaviours (contact Police)	Immediate Threat Call 911
Include but are not limited to: • Violent content • Drawing pictures • Writing stories/journals • Vague threatening statements • Unusual interest in fire • Significant change in anti-social behaviour • Recurring police involvement • Recurring CAS calls	Include but are not limited to: • Possession of a weapon/ replica • Bomb threat plan • Verbal/written threat to kill/ injure • Internet website threat to kill or injure self/others • Fire setting behaviours • Threatens violence • Sexual intimidation or assault • Gang related intimidation and violence • Any serious behaviour	Include but are not limited to: • Weapon in possession that poses serious threat to self or others • Plan for serious assault • Homicidal/suicidal behaviours that threatens safety • Fire setting • Bomb threat • Serious violence or violence with intent to harm or kill

PRINCIPAL OR AGENCY LEAD INFORMED

Stage 1: **Data collection and immediate risk reducing intervention** • 1-2 hours	**Inform Superintendent Schools / Agency Director** • Appropriately monitor and/or detain the child/youth until police member is present. • Make sure all children/youth are safe. • Determine if threat maker has access to weapon. • Interview all witnesses. • Notify the child/youth's parent(s) or guardian(s) and • superintendents. • Initiate VTRA Stage 1 Threat Assessment Report Form. • Family will be interviewed/ engaged in process. • Review findings with the CTAT. • Decide course of action. • Develop an intervention plan.	**Community Threat Assessment Teams (CTAT)** School Administrator Police Service Lead Agency Lead (as needed or if initiated by Agency)
Stage 2: **Comprehensive multidisciplinary risk evaluation** • Within hours if Stage 1 is high concern • Within days if Stage 1 is medium concern	**Superintendent / Agency Director Consult** • Conduct interviews as required. • Update and complete VTRA Report Form questions (Appendix B). • CTAT reviews findings. • CTAT decides on course of action. • CTAT continues the development on an intervention plan (Appendix C).	**Community TAT** Superintendent or designate Police Agency Lead (as needed or if initiated by Agency) Stage 1 Team
Stage 3 **Longer Term Multidisciplinary Intervention** • Within days • Follow up	• Meet with expanded CTAT. • CTAT develops, implements and monitors a comprehensive multidisciplinary intervention plan and modifies it as appropriate.	**Community TAT** Superintendent or designate Police Agency Lead (as needed or if initiated by Agency) Stage 1 Team

Note: When a community team member determines the need to activate the CTAT, that person will notify his/her designated lead team member, school principal or Superintendent. When C A S is legal guardian, they will be contacted and participate. In addition, CAS will be advised, consulted and where possible will be involved in the CTAT.

Violence Threat/Risk Assessment Intervention and Management

Guidelines for Re-entry into School or Alternative Placement

Once the CTAT has determined through a Stage 1 Assessment that a suspension is necessary, the CTAT will guide the process from initial assessment, to planning interventions to decrease risk, to planning for re-entry into a school where a suspension or alternative program has occurred. This is best accomplished when the CTAT teams outlines, in writing, steps the student, family, school, and others need to follow to ensure an appropriate assessment(s) is conducted prior to re-entry into the school. Following the completion of necessary assessments, the initial CTAT members may work with the student and the parent(s)/ guardian(s) to develop a plan for re-entry that becomes a signed contract by all participants including the student and parent(s)/guardians, if circumstances warrant.

Supportive Services

Each of the CTAT members needs to have the authority within his/her own organization to make immediate decisions with regard to supportive services. It is important to ensure that the support services and interventions extended to the student and family are culturally appropriate and/or accessible within the context of the limitations of the community.

Supporting Targeted or Victimized Students or Staff

The CTAT clinician (psychologist, therapist, counsellor) should be responsible to ensure that the recipients(s) /victim(s) of the student threats/behaviours are assessed and that services are provided as necessary. As the threat may be directed towards one or more students, an entire class, or the school population in general, the circumstances will dictate how far reaching an intervention may be. The CTAT clinician and the school administrator should determine if crisis counselling or a crisis response team is needed to re-establish calm.

Anonymous Threats

Anonymous threats are typically threats to commit a violent act against an individual(s), specific group, or site (i.e. the school). They may be found written on bathroom walls or stalls, spray painted on the side of schools, posted on the Internet, letters left in a conspicuous place (teacher's desk), etc. **As of this writing, there are no known North American cases where an anonymous threat to kill was issued and a homicide occurred on the day the threat stated.** Although anonymous threats may be credible in the world of global terrorism, in the field of school-based child and adolescent violence threat risk assessment, the lack of ownership (authorship) of the threat generally denotes a lack of commitment.

Nevertheless, there are steps that should be followed to:
1. Assess the anonymous threat;
2. Attempt to identify the threat maker;
3. Avoid or minimize the crises/trauma response.

Assessing the Threat

CTAT teams should consider the following in determining the initial level of risk based on the current data (i.e. the language of the threat):

Language of Commitment
1. Amount of detail (location where the violence is to occur, target(s), date and time the violence is to occur, justifications, etc.).
2. Threatened to do what with what ("kill", "murder", "ruin your lives", "shank", "shoot", etc.)?
3. Method of delivery of the threat (who found/received the threat, when did they receive it, where did they receive it, who else did they tell and who else knows about it?).
4. Is the threat clear, direct, plausible?
5. Is there fluidity, cry for help or conspiracy of two or more?

VIII. ROLES & RESPONSIBILITIES

An Investigative Mindset:

"An investigative, skeptical, inquisitive mindset is critical to a successful threat assessment" (Fein, et.al 2002). An investigative mindset is central to successful application of the threat assessment process. Threat assessment requires thoughtful probing, viewing information with healthy skepticism and paying attention to key points about pre-attack behaviours. Persons who carry out threat assessments must strive to be both accurate and fair.

Threat assessors should question the information in front of them continuously. Ideally, there should be credible verification of all essential "facts". Information about a potential attacker's interests, statements, and actions should be corroborated, when possible.

The investigative mindset and perspective also rely on common sense. Threat assessors working to understand a given situation should step back periodically from the individual details of any inquiry or investigation and ask whether information gathered makes sense and supports any hypothesis developed concerning the risk posed by the subject of the threat assessment inquiry. (V. Fein, B. Pollack, R. Modzeleski, 2000)

School Threat Assessment Team
- Principal or Vice Principal will act as the School Threat Assessment Team leader
- complete Series 1-5 of the Community Threat Assessment Report Form without delay
- contact the school superintendent to discuss possible activation and coordination of the CTAT after a child/youth has been determined to pose a medium or high level of concern to other child/youth or staff
- follow up and coordinate intervention/management plans developed by the team, and forward the school threat assessment team documentation and intervention/management plan to the superintendent
- store the intervention/management plan securely
- Guidance counsellor/special education teacher/ student success teacher/ other staff who know the child/youth will assist in data gathering as assigned by the principal
- District School Board Staff will be designated by the superintendent to participate in school threat assessment team

Police Services
- whenever possible a police officer trained in Threat Assessment will be involved in school threat assessment teams for CTAT
- investigate and determine when a crime has been committed, and if charges are appropriate or warranted

Community Partner Staff
- follow internal procedures in support of the VRTA
- determine the lead or designate staff for each agency
- have a trained staff member participate in the CTAT
- participate in completion of the CTAT Report Form questions Series 1-8 (Appendix B)
- participate in a review of school threat assessment team findings
- participate in developing any recommended intervention/management plans/long term plans
- maintain on-going communication

IX. INFORMATION SHARING

The general intent of access to information and protection of privacy legislation is to regulate the collection, use and disclosure of personal information. Wherever, possible and reasonable, consent to disclose personal information should be obtained **(APPENDIX D)**. Valid consent does not exist unless the individual knows what he/she is consenting to, and understands the consequences of the intended disclosure. The individual must be made aware that he/she can withdraw consent at any time by giving written or verbal notice. The District School Boards and Community Partners are committed to the sharing of relevant information to the extent authorized by law.

It is vital to note, however, that **legislation allows the release of personal information if there is imminent threat to health and safety.** To make parent(s)/guardian(s), children/ youth aware of the protocol to be followed in such cases, the District School Boards will communicate the *District School Boards Risk Threat Assessment Fair Notice – Appendix H* to families of all children and youth at the beginning of every school year. (Please see *Appendix H: District School Boards Risk Threat Assessment Fair Notice*.) This notification also will be posted permanently on the District School Boards' websites. *Community partners will provide the Risk Threat Assessment Fair Notice – Appendix H* to parent(s)/guardian(s), children/youth during the intake session. The notification will also be posted permanently on the Community Partners websites.

Green Light	Yellow Light	Red Light
Generally speaking, pursuant to freedom of information and privacy acts, relevant personal information CAN be shared under one or more of the following circumstances:	In any of the following circumstances obtain more information and/or get advice from supervisor or legal counsel.	Information can NEVER be shared under the following circumstances:
- Imminent threat to health and safety / CTAT initiated. - With written consent. - To avert or minimize imminent danger to the health and safety of any person. - To report a child who might need protection under the Child and Family Services Act (See Child Abuse Protocol). - By order of the Court. - To facilitate the rehabilitation of a young person under the Youth Criminal Justice Act.	- Consent is not provided or is refused but where there may be a health or safety issue for any individual or group(s). - To report criminal activity to the police. - To share YCJA records. - Where there is a demand or request to produce information for a legal proceeding. - When a professional code of ethics may limit disclosure. - To cooperate with a police and/or a child protection investigation.	- There is a legislative requirement barring disclosure. - No consent is given and there is no need to know or overriding health/safety concerns, or - Consent is given but there is no need to know or overriding health/safety concern.

Key Points Regarding Information Sharing

- The **Municipal Freedom of Information and Protection of Privacy Act (MFIPPA)** and the **Personal Health Information Protection Act (PHIPA)** provide exceptions for the release of information where there are **imminent risks to health and safety**. MFIPPA notes compelling circumstances affecting the health and safety of an individual..." (Part II, 32(h), MFIPPA). PHIPA notes that "a health information custodian may disclose personal health information about an individual if the custodian believes on reasonable grounds that the disclosure is necessary for the purpose of eliminating or reducing a significant risk of serious bodily harm to a person or group of persons." (2004, c. 3, Sched. A, s. 40(1) PHIPA).

- The **Children's Aid Societies** will endeavour to obtain consent to release information from all of their clients involved in a school or community immediate threat assessment. Disclosure of information without consent may be considered if we believe on reasonable grounds that:

  i) failure to disclose the information relevant to the threat is likely to cause the person or another person physical harm, and
  ii) the need to disclose is urgent.

- **Section 125(6), Youth Criminal Justice Act (YCJA)** enables information in a Youth Criminal Justice Act record to be shared, within the access period, with any professional or other person engaged in the supervision or care of a young person — including the representative of any school board, or school or any other educational or training institution only in limited circumstances. Information may be shared to ensure the safety of staff, child/youth or others, to facilitate rehabilitation/reintegration of the young person, or to ensure compliance with a youth justice court order or any order of the provincial director respecting reintegration leave. Such sharing of information does not require the young person's consent. The recipient of youth justice information is responsible for ensuring compliance with legislated restrictions on its use and disposal under the YCJA s.125 (7). This provision requires that the information must be kept separate from any other record of the young person, that no other person must have access to the information except as authorized under the YCJA or for the purposes of ss.125 (6), and that it must be destroyed when it is no longer needed for the purpose for which it was disclosed.

- The **Occupational Health and Safety Act (OHSA)** S.32.O.5(3) states, "an employer's duty to provide information to a worker under clause 25(2)(a) and a supervisor's duty to advise a worker under clause 27(2)(a) include the duty to provide information, including personal information, related to risk of workplace violence from a person with a history of violent behaviour if, (i) the worker can be expected to encounter that person in the course of his or her work; and (ii) the risk of workplace violence is likely to expose the worker to physical injury."

- **Bill 168 (2009)** An Act to amend the **Occupational Health and Safety Act** with respect to violence and harassment in the workplace and other matters.
  Provision of information
  > (3) An employer's duty to provide information to a worker under clause 25 (2) (a) and a supervisor's duty to advise a worker under clause 27 (2) (a) include the duty to provide information, including personal information, related to a risk of workplace violence from a person with a history of violent behaviour if,
  > (a) the worker can be expected to encounter that person in the course of his or her work; and

(b) the risk of workplace violence is likely to expose the worker to physical injury.
Limit on disclosure
(4) No employer or supervisor shall disclose more personal information in the circumstances described in subsection (3) than is reasonably necessary to protect the worker from physical injury.

- **Education Act – provisions regarding sharing of information**
Reporting to the principal
300.2 (1) An employee of a board who becomes aware that a pupil of a school of the board may have engaged in an activity described in subsection 306 (1) or 310 (1) shall report to the principal of the school about the matter. 2009, c. 17, s. 1; 2012, c. 5, s. 8 (1).
Same
(2) An employee shall report to the principal as soon as reasonably possible or, if a different time period is specified by the policies or guidelines, within that time period. 2012, c. 5, s. 8 (2).
Principal's duty to investigate
(3) A principal shall investigate any matter reported under subsection (1). 2012, c. 5, s. 8 (2).
Informing reporter
(4) After investigating a matter reported under subsection (1), the principal shall communicate the results of the investigation to,
(a) if the matter was reported by a teacher, that teacher; or
(b) if the matter was reported by an employee who is not a teacher, that employee unless, in the principal's opinion, it would not be appropriate to do so. 2012, c. 5, s. 8 (2).
Same
(5) The principal shall not disclose more personal information under subsection (4) than is reasonably necessary for the purpose of communicating the results of the investigation. 2012, c. 5, s. 8 (2).
Notice to parent or guardian
300.3 (1) Subject to subsections (2) and (3), if the principal of a school believes that a pupil of the school has been harmed as a result of an activity described in subsection 306 (1) or 310 (1), the principal shall, as soon as reasonably possible, notify,
(a) the parent or guardian of the pupil who the principal believes has been harmed; and
(b) the parent or guardian of any pupil of the school who the principal believes has engaged in the activity that resulted in the harm. 2012, c. 5, s. 9 (1).
Same
(2) A principal shall not, without the pupil's consent, notify a parent or guardian of a pupil who is,
(a) 18 years or older; or
(b) 16 or 17 years old and has withdrawn from parental control. 2009, c. 17, s. 1.
Same
(3) A principal shall not notify a parent or guardian of a pupil if in the opinion of the principal doing so would put the pupil at risk of harm from a parent or guardian of the pupil, such that the notification is not in the pupil's best interests. 2009, c. 17, s. 1.
Same
(4) When notifying a parent or guardian of a pupil under clause (1) (a), the principal shall disclose,
(a) the nature of the activity that resulted in harm to the pupil;
(b) the nature of the harm to the pupil;
(c) the steps taken to protect the pupil's safety, including the nature of any disciplinary measures taken in response to the activity; and
(d) the supports that will be provided for the pupil in response to the harm that resulted from the activity. 2012, c. 5, s. 9 (2).

Same

(5) When notifying a parent or guardian of a pupil under clause (1) (a), the principal shall not disclose the name of or any other identifying or personal information about a pupil who engaged in the activity that resulted in the harm, except in so far as is necessary to comply with subsection (4). 2009, c. 17, s. 1; 2012, c. 5, s. 9 (3).

Same

(6) When notifying a parent or guardian of a pupil under clause (1) (b), the principal shall disclose,

(a) the nature of the activity that resulted in harm to the other pupil;

(b) the nature of the harm to the other pupil;

(c) the nature of any disciplinary measures taken in response to the activity; and

(d) the supports that will be provided for the pupil in response to his or her engagement in the activity. 2012, c. 5, s. 9 (4).

Same

(7) When notifying a parent or guardian of a pupil under clause (1) (b), the principal shall not disclose the name of or any other identifying or personal information about a pupil who has been harmed as a result of the activity, except in so far as is necessary to comply with subsection (6). 2012, c. 5, s. 9 (4).

X. COMMUNICATIONS

Media

As part of the threat assessment process, the District School Boards and police services involved in the assessment may decide to develop congruent media releases, if needed, to address safety concerns. Any such releases will not violate confidentiality. In the case of a criminal investigation, police will be the lead regarding media releases. Whenever possible, media releases will be provided to affected Community Partners in advance of release to the media.

Parent / Guardian /Staff / Children/Youth

At the beginning of each school year, the District School Boards will send to parent(s)/guardian(s), staff and Community Partners the Risk Threat Assessment Fair Notice Letter (please see Appendix H), which outlines for parents/guardians and children/youth the threat assessment process. Additional communications tools, such as brochures and inclusion of information in child/youth agendas and on the School Boards' websites, also will be used. Community Partners will give parent(s)/guardian(s) the Community Partners Fair Notice Letter (please see Appendix H) during the intake process. This letter will be posted on the community partners' websites.

Intra-Agency

Internal District School Board and Community Partner communication regarding the protocol will be the responsibility of each party to the protocol.

Documentation

The Community Threat Assessment Report Form will be the written documentation of the CTAT meetings. Minutes taken in these meetings regarding the community threat risk assessment, and the resulting shared information, are highly confidential. Only information required for the assessment can be shared, and only with the CTAT involved in the particular **(threat)** assessment. The information cannot be redistributed or exchanged except for the purposes of the assessment itself. A copy of the Risk Threat Assessment Summary Form (**Appendix C**) will be distributed to each community partner involved with child/youth's intervention plan. The official report will be stored in a confidential file in the office of the superintendent responsible for the affected school(s). CTAT minutes will be stored in a confidential file in the principal's office and copied to the school superintendent. Minutes of a CTAT should **not be stored in the OSR**. **Documentation will be maintained in compliance with legal requirements with respect to disclosure**. Additional information may be added as appropriate for implementation and monitoring.

Original files and documentation associated with a Threat Risk Assessment, including CTAT minutes pertaining to the file will be stored at Family Service Kent in the office of the KIDS Team Coordinator at 770 Richmond St., Chatham, ON N7M 5J5 for the children/youth in Chatham-Kent. For children/youth in Sarnia-Lambton, the original documentation will be stored at Family Counselling Centre, in the office of the STARRting Point Coordinator, at 1086 Modeland Rd., Bldg. 2nd Floor, Sarnia, ON N7S 6L2.

APPENDICES

APPENDIX A: Responding to Threat Making Behaviour: Staff Guide

APPENDIX B: Community Threat Assessment Report

APPENDIX C: Threat/Risk Assessment Summary Form

APPENDIX D: Threat Assessment Parent Consent Form

APPENDIX E: Threat/Risk Assessment Administrators Checklist

APPENDIX F: Board Team: Parent/Caregiver/Student Interview Form

APPENDIX G: Definitions

APPENDIX H: District School Boards: Threat/Risk Assessment Parent/Guardian notification and Fair Notice

APPENDIX I: LAMTON COUNTY'S HIGH RISK YOUTH SUICIDE RECOGNITION AND PREVENTION PROTOCOL

APPENDIX J: Partners Names and Logos

SIGNATORIES TO THE PROTOCOL

APPENDIX A: RESPONDING TO THREAT MAKING BEHAVIOUR: STAFF GUIDE

Worrisome Behaviours (Investigate Further)	High Risk Behaviours (contact Police)	Immediate Threat Call 911
Include but are not limited to: • Violent content • Drawing pictures • Writing stories/journals • Vague threatening statements • Unusual interest in fire • Significant change in anti-social behaviour • Recurring police involvement • Recurring CAS calls	Include but are not limited to: • Possession of a weapon/ replica • Bomb threat plan • Verbal/written threat to kill/ injure • Internet website threat to kill or injure self/others • Fire setting behaviours • Threatens violence • Sexual intimidation or assault • Gang related intimidation and violence • Any serious behaviour	Include but are not limited to: • Weapon in possession that poses serious threat to self or others • Plan for serious assault • Homicidal/suicidal behaviours that threatens safety • Fire setting • Bomb threat • Serious violence or violence with intent to harm or kill

PRINCIPAL OR AGENCY LEAD INFORMED

Stage 1: Data collection and immediate risk reducing intervention • 1-2 hours	Inform Superintendent / Agency Director • Appropriately monitor and/or detain the child/youth until police member is present. • Make sure all children/youth are safe. • Determine if threat maker has access to weapon. • Interview all witnesses. • Notify the child/youth's parent(s) or guardian(s) and • superintendents. • Initiate VTRA Stage 1 Threat Assessment Report Form. • Family will be interviewed/ engaged in process. • Review findings with the CTAT. • Decide course of action. • Develop an intervention plan.	**Community Threat Assessment Teams (CTAT)** School Administrator Police Service Lead Agency Lead (as needed or if initiated by Agency)
Stage 2: Comprehensive multidisciplinary risk evaluation • Within hours if Stage 1 is high concern • Within days if Stage 1 is medium concern	Superintendent / Agency Director Consult • Conduct interviews as required. • Update and complete VTRA Report Form questions (Appendix B). • CTAT reviews findings. • CTAT decides on course of action. • CTAT continues the development on an intervention plan (Appendix C).	**Community TAT** Superintendent or designate Police Agency Lead (as needed or if initiated by Agency) Stage 1 Team
Stage 3 Longer Term Multidisciplinary Intervention • Within days • Follow up	• Meet with expanded CTAT. • CTAT develops, implements and monitors a comprehensive multidisciplinary intervention plan and modifies it as appropriate.	**Community TAT** Superintendent or designate Police Agency Lead (as needed or if initiated by Agency) Stage 1 Team

Note: When a community team member determines the need to activate the CTAT, that person will notify his/her designated lead team member, school principal or Superintendent. CAS will be contacted and participate when legal guardian. In addition, CAS will be advised, consulted and where possible will be involved in the CTAT.

APPENDIX B: COMMUNITY THREAT ASSESSMENT REPORT FORM

STAGE I VTRA REPORT FORM			
Violence / Threat Making Behaviours examples: (addressed in this protocol but not limited to) • Serious violence with intent to harm or kill • Verbal /written threats to kill self and/or others **(Clear, Direct and Plausible)** • Internet/ blogs/ MSN/ and other social media - threats to kill others • Possession of weapons (including replicas) • Fire setting • Sexual intimidation or assault • Gang related intimidation and violence			
Child/Youth		School	
Date of Birth		Student Number	
Grade			
Age		Parent/ Guardian Names	
DATE OF REPORT			
Date of Incident			

If there is imminent danger CALL 911

Step 1: Make Sure All Students Are Safe and Call Police Member for the CTAT
➢ Appropriately monitor and/or detain the child/youth or concern until the police member of the team is present
➢ Do not allow access to coats, backpacks, desks or lockers

Step 2: Determine if the threat maker has access to the means (knives, guns, etc.).

Step 3: Interview witnesses including all participants directly and indirectly involved.

Step 4: Notify the child/youth's parent(s) or guardian(s)   Parent/Guardian Notified _____

Step 5: Initiate the VTRA Data Collection.
The following warning signs are offered to guide the threat assessment process. The purpose of this process is to determine whether a student **poses a threat** to the safety of others and/or themselves.

➢ Does the child/youth appear to have the resources, intent, and motivation to carry out the threat?
➢ Is there evidence of attack-related behaviours that suggest movement from thought to violent action?
➢ Document and discuss all warning signs that apply.

Immediate Data may be obtained from multiple sources including

- **Reporter(s)**
- **Target(s)**
- **Witnesses**
- **Teachers and other school staff (secretaries, teacher assistants, bus drivers, etc.)**
- **Friends, classmates, acquaintances**
- **Parent(s)/guardian(s)/caregiver(s) (Call both Parents)**
- **Current and previous school records (Call the sending school)**
- **Police Check**
- **Check the student(s) locker, desk, backpack, recent text books/assignments binders, cars, etc. for data consistent with the threat making or threat-related behaviour**
- **Check/Search or question parent(s)/guardian(s)/caregiver(s) about the student(s) bedroom etc.**
- **Activities: internet histories, diaries, notebooks**
- **Other**

Threat Assessment Hypothesis:

- ➢ **CRY for Help**
- ➢ **Conspiracy of 2 or more**
- ➢ **Fluidity**

Immediate Data – may be obtained from multiple sources including:	
Reporter(s)	
Target(s)	
Witnesses	
Teachers and other school staff (secretaries, educational assistants, bus drivers, etc.)	
Friends, classmates, acquaintances	
Parent(s)/Guardian(s) (call both parents)	
Current and previous school records (call the sending school)	

Police Involvement	
Check the child/youth's locker, desk, backpack, recent textbooks, assignments, binders, etc.	
Establish if there is a vehicle on site (contact police)	
Question parent(s)/guardian(s) about the child/youth's bedroom	
Activities: internet histories, cell phone, face book, videos, music, books, movies, free time activities, etc.	

OTHER AGENICES: as per the formal signed protocol, other agency partners may be involved in the initial CTAT process as consultants to the school/police team and sources of initial data relevant to the case at hand, such as past or current involvement with other agencies that once they are informed of the initial school/police data may release necessary information or physically join the team.

Children's Aid Society – record check relevant to the case at hand	
Mental Health Agencies – record check relevant to the case at hand	
Youth Probation – record check relevant to the case at hand	
Others:	

Series 1 Questions: The Incident
When did the incident happen and when?
How did it come to the interviewer's attention? (Give details)
What was the specific language of the threat, detail of the weapon or gesture made?

Was there stated:
   o   **J**ustification for the threat?
   o   **M**eans to carry out the threat?
   o   **C**onsequences weighed out (I don't care if I live or die)?
   o   **C**onditions that could lower the level of risk (unless you take the Facebook post down I will stick my knife in your throat)?

Who was present and under what circumstances did the incident occur?
What was the motivation or perceived cause of the incident?
What was the response of the target (of present) at the time of the incident? Did they add or detract from Justification Process?
What was the response of others who were present at the time of the incident? Did they add or detract from the Justification Process?
Series 2 Questions: Attack Related Behaviours
Has the child/youth sought out information consistent with their threat-making or threat-related behaviour?
Have there been any communications suggesting ideas or intentions to attack a target currently or in the past?

Has the child/youth attempted to gain access to weapons or do they have access to weapons they have threatened to use?
Have they developed a **plan** and how general or specific is it (time, date, identified target selection, site selection, journal or justifications, maps, floor plans)?
Has the child/youth been engaging in suspicious behaviours (e.g. inordinate interest in alarm systems, sprinkler systems, video surveillance in school or elsewhere, schedules and location of police, etc.)?
Have they engaged in rehearsal behaviour or fascination with violent electronic media, including possessing or exposing fake but realistic looking weapons, air rifles, pistols, or engaged in fire setting?
Are there any other items of attack related materials in their lockers (e.g. hit lists, student schedules and/or teacher schedules, etc.), backpacks, car trunk, etc. at the school or bedroom at home (shed, garage, etc.)?
Have others been forewarned of a pending attack or told not to come to school because "something big is going to happen"?
NOTE: After the completion of Series Questions 1 & 2 a Threat/Risk Assessment Summary Form including an Intervention Plan (Appendix C) can be developed as the CTAT continues its investigation by completing Series Questions 3-8.
Series 3 Questions: Threat Maker Typology
Do they appear to be more: (Descriptions found in Appendix G: Definitions)   • Traditional Predominately Behavioural Type?   • Traditional Predominately Cognitive Type?   • Mixed-Type?   • Non-Traditional?

Does the threat-maker have a history of violence or threat of violence? If yes, what is their past:
- HTS – History of Human Target Selection
- SS – History of Site Selection
- F – Frequency of Violence or Threats
- I – Intensity of Violence or Threats
- R – Recency

In the case at hand, what is their current
- HTS – History Target Selection
- SS – Site Selection

Does it denote a significant increase in **baseline** behaviour?

Does the child/youth have a history of depression or suicidal thinking?

Is there a mental health diagnosis or evidence of a mental health diagnosis that may be a risk enhancing factor in the case at hand?

Is there evidence of fluidity (for definition see Appendix G: Definitions) in their writings, drawings, verbalizations?

Does the threat-maker use drugs or alcohol? Is there evidence it is a risk enhancing factor in the case at hand?

Series 4 Questions: The Target Typology

In some cases the Target is a higher risk for violence than the threat-maker with the most common case being where the Threat-Maker is the victim of bullying and the Target is the Bully.

Does the **target** have a history of violence or threats of violence?

If yes, what is the **f**requency, **i**ntensity and **r**ecency (FIR) of the violence?
What has been their past human target selection (have they been engaged in bullying behaviour)?
What has been their past site selection?
Is there evidence the target has instigated the current situation?
Series 5 Questions: Peer Dynamics
Who does the threat-maker associate with?
• Who are their peers?
• Do they belong to a peer group?
• What activities at school does the threat-maker participate in with their peer group?
What role does the threat-maker take on in their peer group (e.g. leader, co-leader, follower, etc.)?
Is there a difference between the threat-maker's individual baseline behaviour and their peer group baseline behaviour?
Is there a peer who could assist with the plan or obtain weapons for the necessary attack?

Are there others involved in the incident that may have intentionally or unintentionally be contributing to the justification process?

Series 6 Questions: Empty Vessel
Does the child/youth of concern have a healthy relationship with a mature adult?
Does the child/youth have **inordinate knowledge** versus **general knowledge** or interest in violent events, themes or incidents, including school-based attacks?
How have they responded to prior violent incidents (local, national, etc.)?
What type of violent games, movies, books, music, internet searches, does the child/youth fill themselves with?
Is there evidence that what they are filling themselves with is influencing their behaviour? (**imitators vs innovators)**
What related themes are present in their writings, drawings, comments, etc.?
Is there evidence of fluidity and/or religiosity?
What important adult connection(s) could be utilized to stabilize the current situation?

Series 7 Questions: Contextual Factors
Has the threat-maker experienced a recent loss, such as a death of a family member/friend; recent break-up; rejection by a peer or peer group; cut from a sports team; received rejection notice from a college or university etc.?

Have their parents just divorced or separated?
Are they victims of child abuse and has the abuse been dormant but resurfaced at this time?
Are they being initiated into a gang and is it voluntary or forced recruitment?
Have they recently had an argument or fight with a parent/guardian or someone close to them?
Have they been recently charged with an offense or suspended or expelled from school?
Is the place where they have been suspended to likely to increase or decrease their level of risk?
What is the threat-maker's relationship with their teachers/administration/support staff?
What is the relationship of the threat-maker's family with teachers/administration/support staff?
What is the threat-maker's general achievement level in school? What is their attendance record? Has this changed recently?
Series 8 Questions: Family Dynamics
How many homes does the child/youth reside in (shared custody, parents, guardians, grandparents, etc.)?
Is the child/youth connected to a healthy, mature adult in the home?

Who all lives in the home? (full and part-time) Has anyone entered or left the home who may be influencing level of risk?
Who seems to be in charge of the family and how often are they around?
Has the student engaged in violence or threats of violence towards their siblings or parent(s)/guardian(s)? If so, what form of violence and to whom including **f**requency, **i**ntensity and **r**ecency?
What is the historical baseline at home? What is the current baseline at home? If there evidence of evolution at home?
Are parent(s)/guardian(s) concerned for their own safety or the safety of their children or others?
Does the child/youth's level of risk (at home, school, in the community) cycle according to who is in the home? (e.g. the child/youth is low risk when the father is home but high risk when the father travels for work?
Does the child/youth have a history of trauma? Including car accidents, falls, exposed to violence, abuse, etc.?
Has the child /youth been diagnosed with a DSM IV (medical, social, developmental) diagnosis?
Is there a history of mental health disorders in the family?
Is there a history of drug or alcohol abuse in the family?

Genogram

APPENDIX C: THREAT/RISK ASSESSMENT SUMMARY FORM

Student:		School:	
DOB:	Student Number:		Age:
Parents Names:		Date of Incident:	

The purpose of this process is to determine whether or not a student poses a risk/threat to the safety of others or themselves. The Level of Concern is listed below:

Note: A copy of the Summary Form will be distributed to each community partner involved with child/youth(s) intervention plan, and a copy will be sent to/kept on file with the Superintendent.

☐ *Low Level of Concern*
Risk to target/s, student/s, staff, and school safety is minimal
- *Threat is vague and indirect*
- *Information contained within the threat is inconsistent, implausible or lacks detail, threat lacks realism*
- *Available information suggest that the person is unlikely to carry out the treat or become violent*
- *Typical baseline behaviour*

☐ *Medium Level of Concern*
The threat could be carried out, although it may not appear entirely realistic. Violent action is possible
- *Threat is more plausible and concrete than a low level threat. Wording in the threat and information gathered suggests that some thought has been given to how the threat will be carried out (i.e. Possible place and time).*
- *No clear indication that the child/youth of concern has taken preparatory steps (i.e. weapon seeking), although there may be an ambiguous or inconclusive references point to that possibility. There may be a specific statement seeking to convey that the threat is not empty " I'm Serious"*
- *Moderate or lingering concerns about the child/youth's potential to act violently*
- *Increase in baseline behaviour*

☐ *High Level of Concern*
The threat or situation of concern appears to pose an imminent and serious danger to the safety of others
- *Threat is specific and plausible. There is an identified target. Child/youth has the capacity to act on the threat*
- *Information suggests concrete steps have been taken toward acting on threat. For example, information indicates that the child/youth has acquired or practiced with a weapon or has had a victim under surveillance*
- *Information suggests strong concern about the child/youth's potential to act violently*
- *Significant increase in baseline behaviour*

Intervention Plan

- ☐ Intended victim warned and / or parents or guardians notified
- ☐ Suicide assessment initiated on :_____by _____
- ☐ Contract not to harm self or other created (attach)
- ☐ Alert staff and teachers on a need to know basis
- ☐ Disciplinary action taken
- ☐ Alternative setting / long term suspension or expulsion program
- ☐ Intervention by Board and School Staff
- ☐ Identify precipitating/ aggravating circumstances and develop Intervention Plan
- ☐ Drug and/or Alcohol Intervention with :_____
- ☐ If Special Education Student, review IEP goals and placement options
- ☐ Review Community based resources and interventions with parents/guardians
- ☐ Obtain consent to share information with Community Partners such as counsellors and therapists

To be completed at re-entry meeting with school, student, and parents:

- ☐ Daily or __x's Weekly check-in with (title/name)
- ☐ Backpack, coat and other belongings check-in and check-out by:_____
- ☐ Late Arrival and/or Early Dismissal
- ☐ Modify Daily Schedule by:
- ☐ Behaviour Management / Safety Plan (attach copy to this Threat Assessment)
- ☐ Increased Supervision in the following settings:

Parent/ Guardians

- ☐ Parents will provide the following supervision and/or intervention:
- ☐ Parents will:

Threat Assessment Team Members

Principal	Community Partner
Vice Principal	Police Services
Teacher	CAS
Board Personnel	Other
Date of Meeting:	**Follow up Meeting within 30 Days:**

I have reviewed this intervention plan	
Parent/ Guardian's Name	Signature:
Date:	

Develop a Stage I Intervention Plan and Determine if Stage II Risk Evaluation and Longer Term Treatment Planning is Required

Use the following Intervention Plan to address all concerns identified during the Stage I Assessment.

Stage I Intervention Plan (attach additional pages as needed)	
Disciplinary action taken:	
Intended victim warned and/or parents or guardians notified.	
Suicide assessment initiated on:	By:
Contract not to harm self or others created (please attach).	
Alert staff and teachers on a need-to-know basis.	
Daily or Weekly check-in with (Title/Name):	
Travel card to hold accountable for whereabouts and on-time arrival to destinations.	
Backpack, coat, and other belongings check-in and check-out by:	
Late Arrival and/or Early Dismissal.	
Increased supervision in these settings:	

Modify daily schedule by:
Behaviour plan (attach a copy to this Threat Assessment)
Identify precipitating/aggravating circumstances, and intervene to alleviate tension. Describe:
Drug and/or alcohol intervention with:
Referral to IEP team to consider possible Special Education Assessment.
If Special Education student, review IEP goals and placement options.
Review community-based resources and interventions with parents or caretakers.
Obtain permission to share information with community partners such as counselors and therapists (See District Release of information Form)
Other action:

PARENT/GUARDIANS (attach additional pages as needed)
Parents will provide the following supervision and/or intervention:
Parents will:

Monitor this Intervention Plan regularly and modify it as appropriate.

VTRA Team Members	Date: Signature:
Principal or Vice-Principal	**Date:** **Signature:**
Clinician	**Date:** **Signature:**
School Liaison Officer (Police)	**Date:** **Signature:**
Other	**Date:** **Signature:**
Other	**Date:** **Signature:**

APPENDIX D: THREAT ASSESSMENT PARENT CONSENT FORM

PERMISSION TO SHARE INFORMATION CHECKLIST – Chatham-Kent

Parents/Guardians: _____ Date: _____

Once parents/guardians have been notified of the situation and the Threat Assessment, complete the checklist below to obtain information from school boards, agencies/services involved with the student in the past and at present.

Conseil scolaire de district des écoles catholiques du Sud-Ouest
Lambton Kent District School Board
St. Clair Catholic District School Board
Canadian Mental Health Association
Chatham-Kent Children's Services   _____
Chatham-Kent Children's Services - CAS
Chatham-Kent Community Health Centre
Chatham-Kent Fire Department
Chatham-Kent Health Alliance   _____
Chatham-Kent Health Alliance – Mental Health & Addictions Program
Chatham-Kent Police Service
Chatham-Kent Women's Centre
Children's Treatment Centre of Chatham-Kent
Community Living Chatham-Kent
Community Living Wallaceburg
Delaware First Nation   _____
Erie St. Clair Community Care Access Centre
Family Service Kent – KIDS Team
MCYS – Youth Justice
Rain & Shine Behavioural Counselling Centre
Restorative Justice Chatham-Kent
Western Area Youth Services
Other:

_____

By consenting to the release of information, I am giving permission to these school boards/agencies to share written or verbal information through the Community Threat Assessment Team.

Parents/Guardians gave **verbal permission** for the school boards/agencies checked ____ Date: _____

I (parent/guardian) _____ give permission for the school boards/agencies
that have been checked to share information for _____.

_____   _____
                     Signature   Date

APPENDIX D: THREAT ASSESSMENT PARENT CONSENT FORM

PERMISSION TO SHARE INFORMATION CHECKLIST – Sarnia-Lambton

Parents/Guardians: _____   Date: _____

Once parents/guardians have been notified of the situation and the Threat Assessment, complete the checklist below to obtain information from school boards, agencies/services involved with the student in the past and at present.

Conseil scolaire de district des écoles catholiques du Sud-Ouest
Lambton Kent District School Board
St. Clair Catholic District School Board
Bluewater Health _____
Canadian Mental Health Association
Community Living Sarnia
Erie St. Clair Community Care Access Centre
Family Counselling Centre
Huron House Boys' Home
MCYS – Youth Justice
OPP – Lambton Detachment
Pathways Health Centre for Children
Sarnia-Lambton Children's Aid Society
Sarnia-Lambton Rebound
Sarnia Police Service
St. Clair Child and Youth Services
STARRting Point
Walpole Island First Nation _____
Other:
_____

By consenting to the release of information, I am giving permission to these school boards/agencies to share written or verbal information through the Community Threat Assessment Team.

Parents/Guardians gave **verbal permission** for the school boards/agencies checked ____   Date: _____

I (parent/guardian) _____ give permission for the school boards/agencies

that have been checked to share information for _____.

_____   _____
                    Signature   Date

APPENDIX E: THREAT/RISK ASSESSMENT ADMINISTRATOR CHECKLIST

APPENDIX F: BOARD TEAM: PARENT/CAREGIVER/STUDENT INTERVIEW FORM

Student Name:		Date of Birth:	
		Relation to Student	

Family Dynamics

- Family Composition
- Current living/custody arrangements
- Relationship with siblings/parent
- Other significant relationships
- Privacy/supervision (e.g. computer in bedroom, etc.)
- CAS involvement

Medical Development Concerns:

- Prenatal/delivery complications
- Developmental milestones
- Previous/pending assessments/diagnoses
- Medications (prescribed by who/when/ for what/ effectiveness)
- Hospitalizations/ head injury with loss of consciousness
- Seizures
- Trauma
- Suicidal ideation/ attempts
- Sleeping / Eating

Interests:

- Books/ Movies / Music
- Videos games
- Internet searches
- Free time / evening activities

School:

- Family relationship with school
- Student's relationships with teachers/ administration/ support staff
- Attendance
- General Achievement

Peer Group

- Who does person associate with
- What activities at school does the student participate in with peer group

Questions Related to the Current Situation:

- Access to weapons / materials
- Indicators (drawings, comments, general concerns)

Other Worrisome Behaviours

- Fire-setting, Cruelty to animals, etc.
- General school and community behaviour

Police Contact:
• Previous Contact
• When:
• Occurrences:

Family History
• Learning
• Mental Health
• Drug / Alcohol Abuse
• Trauma
• Police Involvement

Additional Comments:

Completed By:	**Date:**

APPENDIX G: DEFINITIONS

Child/Youth
Child/Youth refers to all children and youth under the age of 18.

Empty Vessels
A person who is not connected to a healthy mature adult will search for people or things to identify with. A person who feels empty will try to fill themselves with something. In VTRA the question is, "What are they filling themselves up with?".

Fluidity
Is also referred to as psychological shifting. It refers to the way a person can move from thoughts of homicide to thoughts of suicide. If the team does not consider the likelihood of fluidity, their evaluation of the risk could be in adequate. The child/youth may pose a considerable risk to themselves or others depending on where they are on the homicide/suicide continuum.

Frequency/Intensity
Frequency and intensity are among the factors to be tracked when a change in baseline behaviour is noted. An increase in the number of threats or the strength of the threats indicates evolution and suggests that the risk is increasing.

High Risk Behaviours
Defined as behaviours that express intent to do harm or act out violently against someone or something. High risk behaviours include but are not limited to: interest in violent content, unusual interest in fire/fire setting, escalation of physical aggression, significant change in anti-social behaviour, unusual interest in and/or possession of weapon/replica of a weapon, bomb threat, internet threat to kill and/or injury to self and/or others. The In-School TAT should be activated and after consultation with the school supervisor and Supervisor of Safe Schools may lead to the activation of the CTAT.

> **Note:** Do not be deceived when traditional risk behaviours do not exist. There is no profile or checklist for the high risk child/youth. Some child/youth who actually pose a threat display very few traits of the traditional high risk child/youth. Identify when homicidal and suicidal domains exist together. This is critical to the development of a response to the incident, including the creation of a child/youth support plan.
> The School TAT may be activated by the school principal. When this occurs, the school principal will notify the school superintendent and the Superintendent. The CTAT may be activated by the superintendent as a result of the School TAT intervention plan.

Imitators versus Innovators
Most threat-makers are imitators not innovators. They learn about and then imitate other violent offenders.

Immediate Threat
In the case of immediate threat, staff will **CALL 911** and then contact the school administration/designate. The school will contact the Superintendent who will then activate the CTAT.

In-School Threat Assessment Team

A team of trained school based professionals (e.g. principals, vice principals) trained to assess a threat to child/youth safety by a child/youth or group of children/youth. District staff i.e. School Supervisor and Educational Services Administration will be consulted and will participate in the school based risk/ threat assessment process.

Lockdown – Hold and Secure

There are immediate risk situations where the threat maker has already left school property to possibly obtain the means to carry out an attack at school where the school may need to go into lockdown or Hold and Secure. In these circumstances the case-at-hand may be deemed a "Threat/Risk Management (rather than "assessment") Case until otherwise determined by the VTRA members.

Risk Assessment

The process of determining if a child/youth of concern may pose a risk to some unknown target or targets at some unknown period of time.

School Board Community Threat Assessment Team CTAT

When a school based team has assessed that a child/youth(s) poses a threat to child/youth/ staff safety the principal will contact the Board Superintendent to request that the Threat Assessment Team be activated.

Threat

Defined as any expression of intent to do harm or act out violently against someone or something. Threats may be spoken, written, drawn, posted on the internet (MSN, Facebook) or made by gesture only. Threats may be direct, indirect, conditional or veiled.

Threat Assessment

Is the process of determining if a threat maker (someone who utters, writes, emails etc. a threat to kill a target or targets) actually poses a risk to the target they have threatened.

Threat Making Behaviours

Defined as any action that an individual, who in any manner knowingly utters, conveys, or causes any person to receive a threat.

Typologies

Traditional High Risk Youth, Predominately Behavioural Type
- Primarily act out in the behavioural domain
- High-risk behaviours are observable to others
- Exhibit the violent characteristics presented in the DSM-IV's description of Conduct Disorder
- Have come to the attention of school or police due to their history of violence
- Most cases, adults are aware of the high-risk behaviours
- In some cases, only the peers are aware of the high-risk behaviours
- Often have a history of childhood trauma
- Trauma has often not been treated and/or treatment has been unsuccessful
- Well defended against the emotional pain
- High levels of justification. Combined with instrumental violence – result in comparatively good control over emotions during a violent episode
- Do not want to get caught
- Okay with violent behaviour, but understand that society would consequence such behaviours
- Can delay violence and threats of violence
- Blame others and society for failing them
- May act out violently in front of adults if they do not respect them or if they want to intimidate the adult(s)
- Human target selection is usually one specific target at a time, unless the youth is part of an organized gang
- Site selection is usually a site of opportunity and/or a strategically selected site, rather than an emotionally based site

Traditional High Risk Youth, Predominately Cognitive Type
- Primarily act out in the cognitive domain
- High-risk behaviours are typically observable only to their targets and those they allow to witness
- Exhibit many of the violent characteristics in the DSM- IV's description of Conduct Disorder
- In most cases, peers are aware of the youth's high risk behaviour and in some cases, adults are aware
- They have not come to the attention of schools, police or other authorities – they are skilled in avoiding detection
- At times, only the families are aware of and are the recipients of the violence
- Can have a history of childhood trauma. However, the majority have no discernible childhood trauma
- Primarily engage in instrumental violence where violence is used to get something they want
- High levels of justification and cognitive ability, combined with instrumental violence, results in good control over their emotions while committing the violent act
- Very good control over emotions during a violent episode
- Do not want to get caught
- Can and do delay violence and threats of violence if necessary
- Human target selection is usually one specific person
- Site selection is based on opportunity and/or strategically selected but it is not based on emotion

Mixed Type High Risk Youth
- Primarily engage in affective violence
- Experience strong emotions directed toward the target and physiological arousal that, once activated, results in out-of-control behaviour
- Highly emotional and prone to outbursts of anger
- Seem to have a short fuse
- Exhibit many of the violent characteristics presented in the DSM – IV's description of Conduct Disorder, or the related characteristics of Oppositional Defiance Disorder
- Usually come to the attention of school, police or other authorities because of a history of violence
- In most cases, adults and adolescents familiar with the youth are aware of the Mixed Type's volatile temperament
- Some may be emotionally closed in the school context, avoiding detection; violent behaviours are occurring in other non-school settings
- Often have a history of childhood trauma
- Trauma has not been treated and/or treatment has been unsuccessful, and they may not see themselves as having been abused
- Aware of how emotionally intense they are
- Intense feelings of justification for the violence and threats
- Often have regrets in the aftermath
- Regularly experience periods of overwhelming emotional pain
- Can be viewed as emotionally dilated and can experience a flood of intense emotions in quick succession
- Have "free-flowing hostility" that keeps them 'primed' to act out using violence, aggression, and threats of violence as typical aspects of functioning
- Little or no control over emotions during a violent episode
- Emotions often result in clear instances of "leakage"
- Affective nature of violence can result in a homicidal plan being carried out prematurely and against a different target if contextual factors present themselves
- Generally do not care if they get caught during a violent incident
- After, they may feel intense feelings of regret, but the intense feelings of anger may turn inward-crying, calling themselves stupid, or wishing to die
- Due to their high levels of justification, they may be inducted into using instrumental violence when influenced by a powerful peer or group
- Very difficult to delay violence and threats of violence
- Pattern of "needing" to experience the physiological release of the violent ideation
- Human target selection for violence can be a specific target or multiple targets, such as emotionally based random school shootings
- Site selection is usually due to emotional fusion with the site if they feel the site is the cause of the emotion
- In other cases, site is irrelevant and the human target is the only consideration

Non-Traditional High Risk Youth
- Primarily act out in the cognitive domain
- Do not exhibit any of the violent characteristics presented in the DSM – IV's description of Conduct Disorder
- Only come to the attention of school, police or other authorities after they have committed a serious violent act
- In most cases, adults and adolescents are not fully aware of the youth's high-risk status
- In some cases, peers may be aware as the youth have communicated their plans for violence
- Often have a history of childhood trauma
- Trauma has not been treated and/or the treatment has not been successful, but they are aware they were abused
- This contributes to their feelings of justification for violence
- When acts out violently for the first time, it is often a homicidal act due to the building up of significant emotional pain
- Engage exclusively in affectively motivated violence
- Comparatively good control over emotions during the days leading up to the violent episode but the violent episode itself is often emotionally charged
- May appear instrumental during the crime and then exhibit profound remorse and/or trauma after the fact
- Process leading up to the violent act is often lengthy and painful
- Most of the planning and justification occurs in the cognitive domain
- Want to get caught – are not okay with their plans for violence
- If initial cries for help are not answered, feelings of justification may intensify
- Delay violence for as long as they can
- As justifications intensify, they become more influenced by context
- Human target selection can be a specific target, random targets, a particular site, or a combination of both
- Most likely to write hit lists, post web pages, write stories with violent themes
- Site selection is usually due to emotional fusion with the area
- May abandon specific human targets as the site becomes more important than who will be killed

Unit Categorization of Risk

Low Level of Concern: Risk to target/s, child/youth/s, staff, and school safety is minimal. **"Low"** categorization of risk does not imply "no risk", but indicates *the individual* is at little risk for violence, and monitoring of the matter may be appropriate. Implement the Intervention Plan *(Most children/youth can be managed at school with interventions)*.

- Threat is vague and indirect
- Information contained within the threat is inconsistent, implausible or lacks detail, threat lacks realism
- Available information suggest that the person is unlikely to carry out the treat or become violent
- Typical *baseline* behaviour

Medium Level of Concern: The threat could be carried out, although it may not appear entirely realistic. Violent action is possible. **"Moderate"** categorization of risk indicates *the individual* is at an elevated risk for violence, and those measures currently in place or further measures, including monitoring, are required in an effort to manage the individual's future risk.

- Threat is more plausible and concrete than a low level threat. Wording in the threat and information gathered suggests that some thought has been given to how the threat will be carried out (i.e. possible place and time).
- No clear indication that the child/youth of concern has taken preparatory steps (i.e. weapon seeking), although there may be an ambiguous or inconclusive references point to that possibility. There may be a specific statement seeking to convey that the threat is not empty "I'm Serious"
- Moderate or lingering concerns about the child/youth's potential to act violently
- Increase in *baseline* behaviour.

High Level of Concern: The threat or situation of concern appears to pose an imminent and serious danger to the safety of others. **"High"** categorization of risk indicates *the individual* is at high or imminent risk for violence, and immediate intervention is required to prevent an act of violence from occurring.

- Threat is specific and plausible. There is an identified target. Child/youth has the capacity to act on the threat
- Information suggests concrete steps have been taken toward acting on threat. For example, information indicates that the child/youth has acquired or practiced with a weapon or has had a victim under surveillance
- Information suggests strong concern about the child/youth's potential to act violently
- Significant increase in *baseline* behaviour.

Violence

Violence is a continuing process of thoughts and behaviours that is dependent on the interaction between a **person**who is inclined to violence; a **stimulus** that causes the violence; and **a setting** that allows for violence or does nothing to prevent a violent act from occurring. Violence is **dynamic** and multidimensional. It is a process that is developed over time.

Worrisome Behaviour

Defined as those behaviours that cause concern and may indicate that a child/youth is moving toward a greater risk of violent behaviour. Worrisome behaviours include but are not limited to: drawing pictures that contain violence, stories/journal writings that contain violence, making vague/generalized statements about violence towards others that do not constitute a threat. Worrisome behaviours may be an early warning sign of the development of more serious high risk behaviours. All worrisome behaviours should be addressed. These situations may involve activation of the In-School TAT and consultation with Educational Services.

APPENDIX H: DISTRICT SCHOOL BOARDS: THREAT/RISK ASSESSMENT PARENT/GUARDIAN NOTIFICATION AND FAIR NOTICE

The **(Name of DISTRICT SCHOOL BOARD**) is committed to providing safe learning environments for all students, staff, school visitors and community members. Most often, when a student behaves inappropriately, principals will employ progressive discipline strategies to help a student take responsibility for their actions, learn from their mistakes, and make better choices in the future.

In more extreme cases however, when a student's behaviour poses a potential threat to their own or others' well-being, the Community Violence Threat Risk Assessment Protocol (VTRA) supports principals in taking further steps to safeguard everyone.

The VTRA protocol outlines how a school responds immediately to threatening incidents including but not limited to: possession of a weapon or replica weapon, bomb threat or plan, verbal or written (including electronic) threats to harm oneself or others, other threats of violence, and fire setting.

The initial response team is likely to include the Principal / Vice-Principal, police, and board staff. Should conditions warrant, a Community Threat Assessment Team will be convened. This community team includes representatives of community agencies who work with school boards to keep our schools safe, such as local police and children's mental health organizations.

Parents and guardians will be notified if their child will be discussed through the Community Violence Threat Risk Assessment Protocol. If parents/guardians cannot be reached, or if they choose not to provide consent, but a concern for safety still exists due to threatening behaviour, the threat assessment may still proceed. Personal information shared throughout this process will respect and balance each individual's right to privacy with the need to ensure the safety of all.

As always, student safety is our first priority. This notification is being provided via avenues such as school newsletters, and school and board web sites as fair notice to parents and guardians of the existence of the VTRA Protocol and its application if situations warrant. If you have any questions regarding the **(APPROPRIATE DISTRICT SCHOOL BOARD)** Community Violence Risk Threat Assessment Protocol, please contact your school principal as the first step.

Community Partners Threat/Risk Assessment Notification and Fair Notice

A copy of the following letter will be given to the parents/guardians of all children and youth during the intake process. A copy of the notice will be found on the individual agencies websites.

Date:

Dear Parents/Guardians:

The **(APPROPRIATE COMMUNITY AGENCY PARTNER**) is committed to ensuring a safe community. In extreme cases when a child's behaviour poses a potential threat to their own or others' well-being, the Community Violence Threat Risk Assessment Protocol (VTRA) agencies will take further steps to safeguard everyone.

The VTRA protocol outlines how **(APPROPRIATE COMMUNITY AGENCY PARTNER)** along with other community partners will respond immediately to threatening incidents including but not limited to: possession of a weapon or replica weapon, bomb threat or plan, verbal or written (including electronic) threats to harm oneself or others, other threats of violence, and fire setting.

The initial response team is likely to include School personnel and the police but should conditions warrant, a Community Threat Assessment Team will be convened. This community team includes representatives of schools, and community agencies including **(APPROPRIATE COMMUNITY AGENCY PARTNER)**, who work with us to keep our schools safe, and community safe.

Parents and guardians will be notified if their child will be discussed through the Community Violence Threat Risk Assessment Protocol. If parents/guardians cannot be reached, or if they choose not to provide consent, but a concern for safety still exists due to threatening behaviour, the threat assessment may still proceed. Personal information shared throughout this process will respect and balance each individual's right to privacy with the need to ensure the safety of all.

As always, a child's safety is our first priority. This information will be discussed during your orientation, and will be provided on our website. If you have any questions regarding the Community Violence Risk Threat Assessment Protocol, please speak with your **(APPROPRIATE COMMUNITY AGENCY PARTNER)** worker.

APPENDIX I: LAMBTON COUNTY'S HIGH RISK YOUTH SUICIDE RECOGNITION AND PREVENTION PROTOCOL SUMMARY

The identification of the young person as being at Urgent Risk of suicide by 1ˢᵗ Responder

↓

Immediate safety plan is implemented by 1ˢᵗ Responder

↓

Within 5 days 1ˢᵗ Responder convenes a community case conference of key Persons/agencies involved with the young person.

↓

Key functions of a community case conference are:
- *Confirm identification of an urgent risk of suicide case,*
- *Identify community case manager,*
- *Review the safety plan,*
- *Develop community treatment plan including roles and responsibilities of key players,*
- *Determine frequency and type of inter-agency contact to review progress of the treatment plan, and*
- *Determine when the young person is no longer at risk of suicide.*

↓

Key functions of a community case manager are:
- *Establishes appropriate communication linkages with key players,*
- *Chairs community case conferences,*
- *Obtains consents to obtain/release information to facilitate inter-agency communication,*
- *Distributes information and recommendations from each case conference to key players,*
- *Takes lead in monitoring treatment plan progress,*
- *Convenes case conferences to address any problems or make changes to treatment plan,*
- *Forwards non-identifying demographic information to the STARRting Point Service Coordinator and keeps Service Coordinator informed of the status of the case every six months or less,*
- *Refers case to the Community Team, if necessary, for review.*

APPENDIX J: CHATHAM-KENT PARTNERS NAMES AND LOGOS

Conseil scolaire de district des écoles Catholiques du Sud-Ouest

Lambton Kent District School Board

St. Clair Catholic District School Board

Canadian Mental Health Association

Chatham-Kent Children's Services

Chatham-Kent Community Health Centres

Chatham-Kent Fire Department

Chatham-Kent Health Alliance Mental Health & Addictions Program

Chatham-Kent Police Service

Chatham-Kent Public Health Unit

APPENDIX J: CHATHAM-KENT PARTNERS NAMES AND LOGOS

 Chatham-Kent Victim Services

 Community Living Chatham-Kent

 Family Service Kent/Services à la famille de Kent

 MCYS - Youth Justice Servcies Division

 Recreation Programs

 Rain & Shine Behavioural Counselling Services Ltd.

 Restorative Justice Chatham-Kent
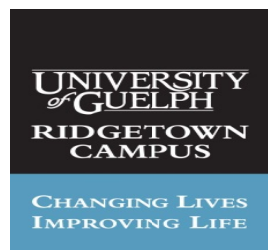
 University of Guelph – Ridgetown Campus

 VON Chatham-Kent Kids' Circle Program

 Western Area Youth Services

APPENDIX J: SARNIA-LAMBTON PARTNERS NAMES AND LOGOS

**Conseil scolaire de district des écoles
Catholiques du Sud-Ouest**

**Lambton Kent District School
Board**

**St. Clair Catholic District School
Board**

Bluewater Health

**Canadian Mental Health
Association**

**Community Living Sarnia-
Lambton**

Family Counselling Centre

**Huron House Boys' Home
Youth Services of Lambton
County Inc.**

Lambton College

**MCYS - Youth Justice Servcies
Division**

APPENDIX J: SARNIA-LAMBTON PARTNERS NAMES AND LOGOS

Pathways Health Centre for Children

Sarnia-Lambton Rebound

Sarnia-Lambton Children's Aid Society

Sarnia Police Services

St. Clair Child and Youth Service

SIGNATORIES TO THE PROTOCOL
Chatham-Kent

Joseph Picard, Directeur general
Conseil scolaire de district des écoles
Catholiques du Sud-Ouest

April 4, 2013

Jim Costello, Director of Education
Lambton Kent District School Board

April 4, 2013

Paul Wubben, Director of Education
St. Clair Catholic District School Board

April 4, 2013

Alan Stevenson, CEO
Canadian Mental Health Association

April 4, 2013

Mike Stephens, CEO
Chatham-Kent Children's Services

April 4, 2013

Kristen Williams, CEO
Chatham-Kent Community Health Centres

April 4, 2013

Robert Crawford, Fire Chief
Chatham-Kent Fire Department

April 4, 2013

SIGNATORIES TO THE PROTOCOL
Chatham-Kent

Paula Reaume-Zimmer, Integrated Director of Operations
Chatham-Kent Health Alliance
Mental Health and Addictions Program

April 4, 2013

Dennis Poole, Chief of Police
Chatham-Kent Police Service

April 4, 2013

Dr. W. David Colby, Medical Officer of Health
Chatham-Kent Public Health Unit

April 4, 2013

Pamela Fasullo, Executive Director
Chatham-Kent Victim Services

April 4, 2013

Lu-Ann Cowell, Executive Director
Community Living Chatham-Kent

April 4, 2013

Brad Davis, Executive Director
Family Service Kent/Services à la famille de Kent

April 4, 2013

Connie Tatomir, Probation Manager
MCYS - Youth Justice Services Division
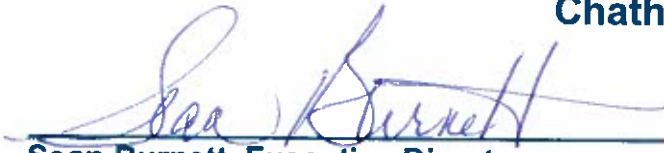
April 4, 2013

Ann Robinson, Manager, Recreation Programs
Manager, Recreation Programs

April 4, 2013

SIGNATORIES TO THE PROTOCOL
Chatham-Kent

_____

Sean Burnett, Executive Director
Rain & Shine Behavioural Counselling Services Ltd.

April 4, 2013

_____

Cecily Coppola, Executive Director
Restorative Justice Chatham-Kent

April 4, 2013

_____

Ken McEwan, Interim Director
University of Guelph – Ridgetown Campus

April 4, 2013

_____

Nicole Hunter, District Manager of Operations
& Client Services
VON Chatham-Kent Kids' Circle Program

April 4, 2013
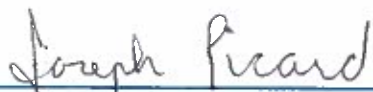
_____

Brenda Hall, Executive Director
Western Area Youth Services

April 4, 2013

SIGNATORIES TO THE PROTOCOL
Sarnia-Lambton

Joseph Picard, Directeur general
Conseil scolaire de district des écoles
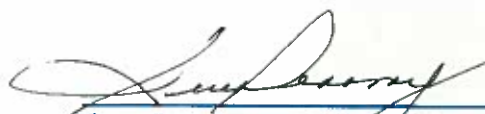**Catholiques du Sud-Ouest**

April 4, 2013

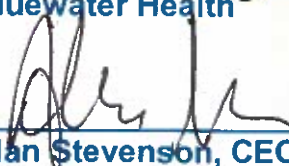**Jim Costello, Director of Education**
Lambton Kent District School Board

April 4, 2013

Paul Wubben, Director of Educaiton
St. Clair Catholic District School Board

April 4, 2013

Sue Denomy, President and CEO
Bluewater Health

April 4, 2013

Alan Stevenson, CEO
Canadian Mental Health Association

April 4, 2013

Carrie McEachran, Director, Respite Services
Community Living Sarnia-Lambton

April 4, 2013

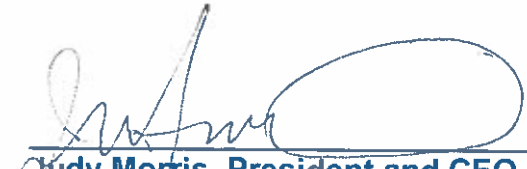**Don Pitt, Executive Director**
Family Counselling Centre

April 4, 2013

Ken Akers, Executive Director
Huron House Boys' Home
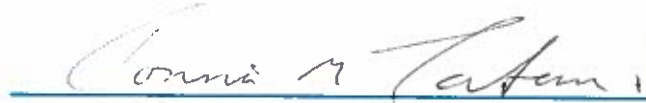**Youth Services of Lambton County Inc.**

April 4, 2013

SIGNATORIES TO THE PROTOCOL
Sarnia-Lambton

Judy Morris, President and CEO
Lambton College

April 4, 2013

Connie Tatomir, Probation Manager
MCYS - Youth Justice Servcies Division

April 4, 2013

Jenny Greensmith, Executive Director
Pathways Health Centre for Children

April 4, 2013

Teri Thomas-Vanos, Executive Director
Sarnia-Lambton Rebound

April 4, 2013

Dawn Flegel, Executive Director
Sarnia-Lambton Children's Aid Society

April 4, 2013

Phil Nelson, Chief of Police
Sarnia Police Services

April 4, 2013

Rick Shield, Executive Director
St. Clair Child and Youth Services

April 4, 2013