These procedures have been established to determine the general operations of the CARE Team, what and how a referral is made, and the actions and recommendations deemed appropriate. These procedures have been established based on recommendations of best practices from NABITA.

**CARE Mission:**
The California State University, Chico Campus Assessment, Response and Education (CARE) Team is dedicated to promoting the safety and wellness of the Chico State campus community by addressing situations where students are displaying behaviors that are disruptive, threatening, or concerning in nature and potentially impede their own or others ability to function successfully or safely.

**CARE Team Vision:**
- To intervene early and provide support and response to students displaying varying levels of disruptive, disturbed, distressed and/or deregulated behaviors
- To respond with care and respect
- To assess the potential for violent or self-harming behaviors while avoiding stigmatizing mental health issues and stereotype-based profiling
- To adhere to a formalized protocol for referral, assessment, communication, coordination and intervention
- To balance student confidentiality and privacy with university need-to-know and emergency communication needs
- To engage faculty, staff and students and staff in effective response with respect to disruptive and/or distressed students

**Role on Campus:**
The CARE Team is not tasked with responding to emergencies. If this is an emergency and you are in need of immediate assistance contact University Police at 898-5959.

The Purpose of the CARE Team is to function as a disciplinary at-risk behavioral assessment and support system, focused on early intervention, as well as threat assessment. The team tracks red flags over time, detecting patterns, trends, and disturbances in individual or group behavior. The team receives reports of disruptive, problematic or concerning behavior or misconduct (from co-workers, community members, friends, colleagues, etc.), conducts an investigation, performs a threat assessment, and determines the best mechanisms for support, intervention, warning/notification and response. The team then deploys its resources and resources of the community and coordinates follow-up.
Scope and Authority:
When CARE Team determines that a case is appropriate for its involvement, the referral
administrative unit, department or persons who may have a relationship with the case
shall coordinate their actions with the CARE Team. The CARE Team is not designed to
usurp the authority of other departments or persons or serve as a substitute for
classroom management issues. CARE Team is empowered to take necessary action that
is consistent with University policy and applicable law. (See Appendix C)

CARE Team Responsibilities:
In order to fulfill its purpose, the CARE Team accepts the following responsibilities:

- Receive, review, and catalogue information about concerns regarding student
  behavior
- Perform initial assessment of risk and refer cases to offices and officials as
  needed for additional assessment
- Define a plan/response to address the needs of both the student and the safety
  of the community
- Implement the response with the intent to de-escalate a potential crisis, reduce
  or remove threats, and attend to the needs of the individual who is
  demonstrating disturbed and/or disturbing behavior.
- Make recommendations to university officials on appropriate actions consistent
  with university policies and procedures
- Engage in ongoing refinement of Team procedures and protocols to foster
  optimal CARE Team functioning and interface with the University community
- Coordinate case management, support and resources to facilitate CARE Team
  recommendations

CARE Team membership:
The CARE team consists of university personnel with expertise in law enforcement, threat
assessment, medical and mental health knowledge, university operations, conduct, Title
IX, disability and reasonable accommodations, and student affairs.
The CARE team members are appointed by the Vice President of Student Affairs, and
include:

- Chief Medical Officer, Student Health Services
- Counselor, Counseling and Wellness Center,
- Director, Academic Advising
- Dean of Students
- Lieutenant, University Police Department
- Detective, University Police Department
- Associate Director, Housing and Food Services
- Case Manager*, Student Health Center
- Title IX Deputy, Student Judicial Affairs
Ad Hoc Members- depending on the circumstances of CARE referrals, other members of the campus community may be asked to consult with the CARE Team

Role of the Case Manager*:
The Case Manager from the Student Health Center will take the lead on most cases that require follow up and coordination of services. In cases with a referral to the Counseling Center is recommended, the Case Manager will be assigned to be the liaison with the Counseling Center in order to mitigate issues with communication silos.

Making Reports to the CARE Team:
Multiple reporting mechanisms are in place at Chico State for identifying and reporting threatening behavior or concerns.

1. Immediate Danger-call 911 or University Police Department at X5911, or use the emergency Blue Light Phones on campus.
2. Threats or concerns that are troubling but do not require immediate response, report to the CARE Team.

(Appendix A: Recognizing Distress; Appendix B: When to Make a Report)

Referrals to the CARE Team can be made by calling any CARE Team member. The list of members is located on the CARE website [www.csuchico.edu/CARE](http://www.csuchico.edu/CARE) or by emailing CARE at [CARE@csuchico.edu](mailto:CARE@csuchico.edu).

Providing as much information as possible is essential!
- Students name and ID number (if known).
- Brief factual description of the incident or behavior.
- Direct quotes whenever possible.
- Where and when the incident or behavior occurred.
- Names and contact information of witnesses.
- Your name, position and complete contact information.
- Include all emails or other information you have.
- Always save voice recordings, text messages and emails on the device that received them.

REPORTING ADVISORY
Please note: If information contained in the attached report includes a possible violation of Title IX (Campus policies regarding Discrimination, Harassment and Retaliation, including Sexual Misconduct), you are still obligated to report this information to the Title IX Coordinator or a Deputy Title IX Coordinator.

Contact information for the Title IX Coordinator and other Deputies is available online at [www.csuchico.edu/title-ix/contacts/shtml](http://www.csuchico.edu/title-ix/contacts/shtml).
Information regarding campus Title IX policies and procedures can be found online at http://www.csuchico.edu/title-ix/index.shtml.

Meeting Schedule/Process:
CARE meets once each Wednesday two hours during the semester and as needed during the summer. The Chair of CARE Team established the meeting schedule for the academic year prior to the start of the fall semester. A meeting outline is used to manage the team meetings. The meeting outline follows:

- Pull up data base
- Set the table *
- Take roll of members
- Review all elevated/high risk prior cases
- Review cases marked for follow up
- Triage new cases
- Training topic (if scheduled)

*The chair provides a folder to each CARE member which includes the meeting outline, NABITA rubric and supplemental questionnaire/flowchart, the Violence Risk Assessment of Written Word (VRAW) and the Structured Interview for Violence Risk Assessment (SIVRA), and training schedule.

If a situation arises between scheduled meetings that warrants an immediate evaluation and response, the Chair of the CARE Team will convene an emergency response meeting.

Team Case Staffing Procedure:
When a report is received that does not require an immediately response, it will be shared at the next CARE meeting. If the report requires an immediate response, an emergency CARE Team will convene. All deliberations of CARE will remain confidential. When a report is forwarded to CARE Team, the members meet in closed session to discuss, investigate, assess, and determine an action plan, including:

- Identify person of concern
- Determine if the situation presents an immediate danger. If yes, then contact law enforcement or other appropriate community resources will be made immediately
- A review of the CARE database for past issues
- Assess whether there are other leakages across campus
- Review of the student’s disciplinary record
- Determine if the student has a known disability and if so, provide reasonable accommodation throughout the CARE and potential conduct process
• Gather enough information necessary to evaluate the threat or concern. If necessary, others may be interviewed to gather additional information.
• Assess the level of threat using a risk assessment rubric adapted from the National Behavioral Intervention Team Association (NaBITA)
• Continue a full inquiry of the behavior and make appropriate assessments.
• Formulate an action plan, involving other offices and staff and resources as appropriate
• Implement the plan
• Continue to monitor the plan, if necessary
• Document assessment and decisions using the CARE Data Base

NOTE: It may be determined by the chair or other team members that the person of concern should be evaluated by the SIRVA-35 assessment tool. It must be noted that these assessments are tools to assist the team in making an informed recommendation to the appropriate authority and are not intended to be the decision-maker.

Feedback Loops
• Reporters need to be reassured that the CARE team is taking prompt, appropriate, and competent action.
• After a report has been made, each individual making a report will receive a simple (even automated) message from the CARE team.
• A member of the CARE team will be assigned to following up with reports, and should let the reporter(s) know when the CARE has engaged/concluded its action, even if only by a form email.

Notice of Student Absences:
If it is assessed that the individual's presence on campus or participation in University activities may threaten campus health or safety, or significantly disrupt University activities or functions, immediate steps will be taken to protect the campus community.

If a student is absent due to pending conduct or suspension (either interim or as part of a resolution agreement; either for conduct or CARE), a notice will be sent to all current instructors, the Dean of their respective colleges, as well as UPD. Additionally, a registration hold is placed on the student record preventing the student from adding/registering for courses. When the student's issue is resolved and SJA and/or the CARE team determine that the student can return to class, a notice will be sent to the same instructors, Dean and UPD, and the hold will be lifted. This communication is allowed in accordance with the flexibility afforded in FERPA balanced with the university's obligations for privacy with respect to student conduct records and potential HIPPA issues.

When a student will be absent due to a medical crisis, Academic Advising will send instructors the general absence notification.
Outcomes:
The main goal of CARE Team is to intervene early to provide support and/or referral as needed. Outcomes may include the following:

- Interventions and referrals to other staff, departments and resources on campus
- Referral to Student Judicial Affairs for conduct
- Referral to outside law enforcement agencies or officials
- Referral to community mental health assessment
- Voluntary withdrawal
- Continue monitoring, referral and follow up (“watch and consult”) as needed.

Facilitated Withdraw:
If a student is hospitalized or otherwise unavailable to make a request for a withdrawal or Planned Educational Leave (PEL), the CARE team will request that the Director of Academic Advising, working with the Registrar’s office, initiate a withdrawal with either phone or email correspondence with the student. In rare circumstances, the Dean of Students and Director of Academic Advising may agree to initiate a withdrawal based on a family member’s request, if that request is accompanied by appropriate medical or other documentation substantiating an ongoing significant absence. Facilitated withdrawals are done as an accommodation and to assist the student maintain the integrity of their academic record. Facilitated withdrawals are documented as part of the CARE plan.

Data Collection, Storage and Security of CARE Records:
CARE Team records are confidential. Reports and referrals will be handled discreetly to protect both the student who has been reported and the person filing the report. Records are maintained in a secure server with permissions limited to CARE Team members. The following data is collected on each case:

- Date of discussion
- CARE members present
- Student’s name
- Student’s ID #
- CARE team member presenting case
- Reporting party
- Notice to reporting party?
- Previous CARE case?
- Other known campus affiliations (i.e. EOP, ARC)
- Presenting issue
- Other relevant/known history
- CARE plan
- Case management assigned
- Follow up (if necessary)
- Risk/threat assessment level
Making notes in the CARE data base is limited to the Chair.

CARE records are retained and destroyed in accordance with CSU policy.

**Education and Training:**
Chico State understands that by creating the CARE team, there is an accompanying responsibility to inform and educate the university community. For this CARE team to be effective, the university community must be aware of the CARE team, the need and purpose for intervention, the procedure for filing a report, and how to contact members of the team with concerns or comments.

The CARE team will provide campus wide informational meetings that will be incorporated into faculty and staff trainings and new employee and student orientation. In addition, the CARE team will provide an overview of the program, listing of team members, and instructions on what and how to report by way of the institutional announcement protocols for both employees and students. The CARE team will conduct information session for the following groups on an annual basis:

- Council of Academic Deans
- Academic Senate
- New Faculty Orientation
- Academic Chairs
- Residential Life staff
- Student Life and Leadership
- Associated Student Academic Senate

The Team will conduct informational sessions for any group who requests it.

The CARE team will be convened for annual debriefing and review of cases, outcomes and protocols. Additionally, the CARE team will participate in annual training in one or more of the following areas: campus risk assessment, mental health, Title IX, or other areas the team identifies necessary for professional development.

**Annual Review and Report:**
The CARE team will provide the Vice President of Student Affairs with an annual review and report during the regular cycle of Student Affairs Division annual assessment.

**References:**

Appendix A: Recognizing Distress

Everyone can feel distressed or upset at one time or another. The following lists warning signs which, when present over a period of time, suggest a more significant level of distress. We suggest that you do not focus on one item or a specific set of items, instead if you observe these behaviors in an individual and it is concerning to you, refer the incident/individual to the CARE Team for follow up and assessment.

Marked Change in Academic/Work Performance or Behavior
- Change in classroom/work performance such as a drop in grades or productivity
- Deterioration in quality of work and preparation
- Excessive or repeated absences or tardiness
- Missed or late assignments or appointments
- Erratic or disorganized participation or performance
- Avoiding participation or excessively anxious when called upon in class or meetings
- Dominating discussions
- Disruptive behavior during class or meetings

Unusual or Dramatic Shifts in Behavior or Appearance
- Dramatic change in energy level, positive or negative
- Dramatic changes in weight, lost or gained
- Persistent sadness and/or frequent tearfulness
- Lethargic, falling asleep in class or at their desk
- Hyperactivity, very rapid speech, or inflated sense of self
- Exaggerated emotional response that is obviously inappropriate to the situation
- Deterioration in personal hygiene or dress
- Strange or bizarre behavior indicating loss of contact with reality
- Incoherent speech or writing
- Inability to focus their eyes when having a conversation
- Obvious alcohol or drug abuse or intoxication
- Noticeable cuts, bruises or bandages
- Excessive dependency on you or other individuals
- Social isolation from friends, family and/or classmates or roommates

Interpersonal Behavior
- Lacks social connections or friends
- Exhibits social withdrawal and/or isolation
- Is frequently angry, exhibits loss of temper on a daily basis
- Is verbally hostile, combative or abusive
- Fails to acknowledge or consider the feelings or thoughts of others
- Consistently shows lack of respect for the property of others
- Demonstrates intolerance for differences and/or prejudicial attitudes
- Expresses frequent feelings of rejection or being alone
- Reports having been previously victimized or bullied
• Reports being currently picked on or persecuted

**Reported Life Stressors**

• Problems with roommates, family, or romantic partners
• Disruption in their support system(s)
• Experiencing the death of a significant other (including a pet)
• Experiencing a physical or sexual assault
• Experiencing discrimination based on gender, race, religion, ethnicity, sexual orientation, or disabilities
• Experiencing legal difficulties
• Any problem or situation, whether real or imagined, that is experienced as a loss, disappointment, failure, humiliation, or other stressor (job, finances, housing, relationships, etc.)

**References to Suicide, Homicide or Death**

• Essays or projects that express themes of hopelessness, isolation, rage or despair
• Expressed feelings of helplessness or inability to cope
• Verbal or written references to, or threats of, suicide
• Verbal or written references to, or threats of, destructive or assaultive behavior or homicide

**Other Behavior**

• Expresses frustration in inappropriate ways
• Acts impulsively, often without considering consequences
• Shows Increased risk-taking
• Is fascinated with weapons (guns, knives, etc.) and/or death
• Is involved in physical fights, pushing or shoving
• Commits acts of vandalism or destruction of property
• Expresses violence or themes of violence in writings or drawings
• Verbalizes threats of violence or plans for hurting people or causing damage to property
• Has a history of discipline problems or frequent run-ins with authority
• Has a history of violent and/or aggressive behavior

This information adapted from resources of CSU San Bernardino CARE, CSU Long Beach CARES, and Cal Poly Pomona. Thank you for collaboration as a CSU system to help protect our students.
Appendix B: When to Make a Report

Contact the CARE team when any individual displays or communicates behavior that causes you concerns. Trust your instincts, and ask for help if you have concerns. It is much better to over-report a concern than to ignore a situation or incident assuming it is isolated or unimportant. From mental health concerns to threats of violence the multidisciplinary team responds to all referrals in a thoughtful, professional, and considerate manner. Please, don't wait until the situation deteriorates; instead seek advice early.

You may have concern and should refer to the CARE Team if the individual:

- Exhibits an abrupt change in performance, behavior or appearance;
- Demonstrates a pattern of absences from class or activities;
- Engages in bizarre behavior or seems to be disconnected from reality;
- Is disruptive and does not follow direction to stop when instructed to do so;
- Has inappropriate boundaries: Asks for help in dealing with personal issues that are out of your role as a student, faculty or staff member;
- Exhibits or reports drug/alcohol abuse;
- Has engaged in behavior that causes you or others to be concerned for safety (e.g. yelling, intimidation, name-calling);
- Creates a hostile environment in class (others stop attending because of the behavior);
- Threatens to harm him/herself or others;
- Writes about committing violent acts;
- Is consistently angry or depressed.
- Whenever you wonder, "Should I" about a situation. If you feel uncomfortable filling out a referral, then at least call or e-mail for a consultation.

REPORTING ADVISORY

Please note: If information contained in the attached report includes a possible violation of Title IX (Campus policies regarding Discrimination, Harassment and Retaliation, including Sexual Misconduct), you are still obligated to report this information to the Title IX Coordinator or a Deputy Title IX Coordinator.

Contact information for the Title IX Coordinator and other Deputies is available online at www.csuchico.edu/title-ix/contacts/shtml.

Information regarding campus Title IX policies and procedures can be found online at http://www.csuchico.edu/title-ix/index.shtml.
Appendix C: Relevant Campus Policies:

Sexual Assault and Sexual Violence
http://www.csuchico.edu/up/personal_safety/sexual_assault.shtml
http://www.csuchico.edu/safeplace/sexual-assault/index.shtml

Sexual Harassment, Sexual Assaults and Domestic Violence (Title IX)
http://www.csuchico.edu/title-ix/index.shtml

Campus Policy on Campus Behavior and Violence Prevention:
http://www.csuchico.edu/prs/EMs/2012/12-025.shtml

Voluntary withdrawal
http://www.csuchico.edu/sro/registration/withdraw.shtml

Medical Leave of absence/leave for “serious and compelling”
http://www.csuchico.edu/sro/forms/withdraw.shtml

Student Code of Conduct – Title V
http://www.csuchico.edu/sjd/_assets/docs/policies/Title%20Five.pdf

Student Rights and Responsibilities:
http://www.csuchico.edu/prs/EMs/2008/08-040.shtml