NABITA

CARE Team K-12 Policies & Procedures Manual

Edited by:

Makenzie Schiemann, M.S.
Vice President, TNG Case Management Initiatives

Allison Frost
Former Associate Consultant, TNG

Adapted from the NABITA CARE Manual K-12 Version

Contributors

Brian Van Brunt, Ed.D.
Partner, TNG
President, NABITA

W. Scott Lewis, JD
Partner, TNG, LLC
Co-founder & Past President, NABITA

Aaron Chip Reese, Ed.D.
Associate Vice President for Student Affairs Columbus State University

Amy Murphy, Ph.D.
Assistant Professor, Angelo State University

Laura Ulmer, Ph.D.
Director of Student Conduct & Academic Integrity, Old Dominion University
David J. Denino, LPC, NCC
Director Emeritus of Counseling, Southern Connecticut State University

Carolyn Reinach Wolf, J.D.
Executive Partner, Director, Mental Health Law Practice at Abrams Fensterman

Josh E. Gunn, Ph.D.
Director, Counseling & Psychological Services, Kennesaw State University

Dave Wilson
Mental Health and Wellbeing Manager University of Cumbria

Authors' Note

NABITA has written extensively on Behavioral Intervention Teams (BITs), behavioral crisis response, and threat assessment. Over time, we have found that many teams struggle to develop a policies and procedures manual. Guidelines can be labor-intensive to create, and BITs are often pulled to more pressing assessment and intervention needs which prevent them from investing the time and effort necessary to create a comprehensive guiding document.

NABITA published the first version of the CARE Manual in 2017, after Aaron "Chip" Reese, NABITA's Associate Executive Director and Dean of Students at Columbus State University at the time recognized that he was frequently sharing his team's manual as a guide for other schools and that an official NABITA template might benefit the field. Now, in 2020, we are revisiting the original CARE Manual and updating it to reflect the standards of practice outlined in NABITA's 2019 Standards for Behavioral Intervention Teams, the 2019 updated NABITA Risk Rubric, and other shifts in the field. Subsequently, as behavioral intervention progresses with rapid team development in K-12 settings, it is only fitting that we adapt the manual template for these professionals.

Due to the diversity of school and district environments, there will likely be pieces of this template that you will find very useful, as well as sections that may not be applicable. Additionally, this manual is written with schools in the United States in mind but can easily be adapted for those in other countries. Reference to localized laws and cultural customs can easily be adapted for your specific needs. We offer this resource in an editable format that will allow you to easily adaptthe text and create a customized document for your own team. Throughout the manual, we include explanatory or educational text to help instruct your team on some of the manual elements, or on best practices to consider. These pieces of text appear in bold italics and should be deleted from the manual.

You may also notice the use of the term "CARE" rather than "BIT" throughout the manual. Nationally, BIT and CARE are the most common names for teams which proactively identify and manage risk in schools. In the K-12 setting, CARE frequently stands for Community Assessment Response and Education. CARE evokes a sense of community and offers some clarity in terms of advertising, which is why we chose its use for this manual.

Foreword

Schools around the country are becoming more diligent and proactive in providing a safe environment for students, teachers, staff, and visitors to their institutions. To support this effort, it is recommended that individual schools or districts establish a behavioral intervention team (BIT) or CARE team to engage in caring, preventive, and early intervention with community members whose behavior is disruptive, concerning, or threatening.[1,2,3] BITs or CARE teams are small groups of appointed school officials who meet regularly to collect and review concerning information about at-risk community members and develop intervention plans to assist them.[4] The BIT is tasked with intake of referrals from the community, reviewing them to determine the level of risk or concern, and then developing action plans to address the risk.[5,6,7]

Our school has established the CARE team to assist in addressing situations in which students, teachers, or staff are displaying behaviors that are concerning, disruptive, or threatening in nature and that potentially impede their own or others' ability to function successfully or safely. These policies and procedures are designed to help identify persons whose behavior potentially endangers their own or others' health and safety or is disruptive to the educational or administrative processes of the school.

It is the responsibility of teachers, staff, and students to immediately refer any situation that could possibly result in harm to anyone at the school. Any member of the school community may become aware of a person of concern or situation that is causing serious anxiety, stress, or fear. It must be noted, however, that behavioral assessment should not be confused with crisis management. A "crisis" may be defined as a situation in which a person may pose an active or immediate risk of violence to self or others. In these cases, local law enforcement should be contacted at xxx-xxx-xxxx.

[1] Sokolow, B. A., Lewis, W. S., Schuster, S., & Swinton, D. S. (2014). The Book on BIT (2nd ed.). (B. Van Brunt, Ed.) Berwyn, PA: National Association of Behavioral Intervention Teams (NABITA).

[2] National Threat Assessment Center. (2018). Enhancing School Safety Using a Threat Assessment Model: An Operational Guide for Preventing School Violence. U.S. Secret Service, Department of Homeland Security.

[3] Federal Commission on School Safety (2018). Final Report on the Federal Commission on School Safety. Retrieved from: www2.ed.gov/documents/school-safety/school-safety-report.pdf

[4] NABITA Advisory Board. (2018). NABITA Standards for Behavioral Intervention Teams. A Publication of the National Behavioral Intervention Team Association (www.NABITA.org). NABITA Standards

[5] Van Brunt, B., Schiemann, M., Pescara-Kovach, L., Murphy, A., & Halligan-Avery, E. (2018). Standards for Behavioral Intervention Teams. Journal of Campus Behavioral Intervention (J-BIT), 6, 29-41.

[6] Sokolow, B. A., Lewis, W. S., Schuster, S., & Swinton, D. S. (2014). The Book on BIT (2nd ed.). (B. Van Brunt, Ed.) Berwyn, PA: National Association of Behavioral Intervention Teams (NABITA).

[7] Federal Commission on School Safety (2018). Final Report on the Federal Commission on School Safety. Retrieved from: www2.ed.gov/documents/school-safety/school-safety-report.pdf

Table of Contents

Team Mission & Scope

Mission Statement: The CARE team is a school-(or district-)wide team of appointed administrators, staff, and teachers responsible for identifying, assessing, and responding to concerns and/or disruptive behaviors by students, teachers/staff, and community members who struggle academically, emotionally, or psychologically, or who present a risk to the health or safety of the school or its constituents.

Team Goals:
- Provide a safe and supportive physical and emotional environment for members of the school community.
- Identify, assess, and intervene with individuals who are struggling or who demonstrate concerning or threatening behavior.
- Provide support and resources to community members who are concerned for another individual.

Team Responsibilities:
1. Developing and implementing educational and training programs for all members of the school community regarding behavioral assessment. This should include publications and promotional materials designed to create awareness and understanding of the CARE team and what to refer, as well as in-person trainings to develop deeper knowledge on how to identify, support, and refer a student of concern.

2. Maintaining a current website, which can be easily accessed from the school's home page. This site should include links to informational and referral sites and instructions for making a referral to the CARE team.

3. Receiving, coordinating, and assessing referrals received from teachers, staff, students, and others regarding individuals of concern

4. Coordinating interventions and resource assistance for individuals of concern

5. Assisting the disciplinary staff in reviewing students who have disciplinary records or were suspended or expelled from a previous school

6. Providing an annual report to the district superintendent and/or Board of Education

Team Membership

The CARE team consists of school, and potentially district, personnel with expertise in educational administration, childhood/adolescent development, mental and physical health, student discipline, and law enforcement/school safety. Membership on the CARE team represents an ongoing commitment to the mission of the CARE team. Team members are critical to the functioning of the team. They are responsible for completing ongoing training, attending meetings, and assisting with follow-up and intervention as designated by their membership category. The CARE team has four levels of membership: core, inner circle, middle circle, and outer circle.

The positions and titles at your school may vary slightly, but NABITA's Standards of Practice, along with the NABITA survey, indicate that members with the types of roles described below are most effective for the CARE team.

CORE MEMBERS

Core members attend every CARE team meeting and have full access to the team's electronic record-keeping database. As core members, they represent their departments and have authority to make independent decisions within their areas of responsibility. If a core member is unable to attend a meeting, they have designated backups who attend in their place. The areas they represent are crucial to the CARE team's ability to gather data, accurately assess risk, and deploy effective interventions. Many core members keep records in their own areas and can share this information with the team through the Family Educational Rights and Privacy Act's emergency exception clause[8] or when a school official has legitimate educational interest.[9] The school or district psychologist or licensed mental health clinician operates under state confidentiality laws for their records and information sharing.

The following individuals are considered core members:

Principal: The principal chairs the team and attends all meetings. If the principal is unable to attend, a vice or assistant principal attends the meeting. The principal organizes and disseminates the agenda, performs a cursory rating with the NABITA Threat Assessment Tool, ensures team members' attendance, ensures that a risk level is assigned to each case during meetings, and coordinates the selection and implementation of interventions and follow-up for cases. The principal also ensures appropriate and complete records are maintained in the electronic recordkeeping database.

---

[8] In some situations, school administrators may determine that it is necessary to disclose personal identifying information (PII) from a student's education records to appropriate parties to address a health or safety emergency. FERPA's health or safety emergency provision permits such disclosures when the disclosure is necessary to protect the health or safety of a student or other individuals. See 34 CFR § 99.31(a)(10) and 99.36, *http://familypolicy.ed.gov/content/when-it-permissible-utilize-ferpa's-health-or-safety-emergency-exception-disclosures.*

[9] In some instances, the CARE team chair may share personal identifying information (PII) with a faculty or staff member when this knowledge may be beneficial to the student in academic and social settings, which is educational in nature. See 34 CFR § 99.31(a)(1). It may, however, be necessary for this shared record to be a disciplinary record. See *https://ed.gov/policy/gen/guid/fpco/ferpa/index.html.*

Information Sharing and Meeting Participation Responsibilities:
- Brief overview of the referral (team members should have already read the CARE team referral in the electronic database prior to the meeting)
- Any history with the principal's office
- Any involvement in, engagement in, or difficulty with school-related extracurricular activities such as athletic teams, student government or groups, etc.
- Large community issues: trends on social media, contact from parents, news outlets, etc.
- Any known financial or basic needs concerns

Disciplinary Representative: The representative for student discipline – often a vice or assistant principal – attends the team meetings and sends a trained proxy when unable to attend. The disciplinary representative consults on cases involving disciplinary violations, criminal charges, and academic disruptions. Disciplinary records are protected under FERPA and shared with the CARE team by the disciplinary representative under the legitimate educational interest clause of FERPA.

Information Sharing and Meeting Participation Responsibilities:
- Discipline history including previous allegations/violations and outcomes, etc.
- Discipline history from other schools or criminal history information, as available

School Resource Officer (SRO)/Local Law Enforcement Representative: The school resource officer (SRO) attends each meeting. If the SRO is unable to attend, sending a trained proxy is ideal. Otherwise, the SRO should review the agenda that is sent out prior to the meeting and relay any updates or additional information to the Chair of the team. The SRO serves as a liaison with local and federal law enforcement agencies, consults on CARE team cases that have criminal or law enforcement elements, contributes to the assessment of risk for referrals, and assists with interventions at school requiring a police presence.

Information Sharing and Meeting Participation Responsibilities:
- Criminal history, as available and lawful to share
- Law enforcement contact and reports with individual as any involved party (e.g., alleged victim, witness, perpetrator, etc.)
- Concealed carry permits or registered weapons information
- Social media check, looking for concerning or threatening posts

Mental Health Representative: The mental health representative may be a school/district psychologist, licensed mental health clinician, or other clinical resource. This member attends each meeting and sends a trained proxy if unable to attend. The mental health representative receives information from the CARE team to inform the services delivered by counseling resources and to ensure collaborative communication. Additionally, they consult on issues of mental health, crisis, and disruptive/dangerous behavior for cases discussed by the team. The

mental health representative keeps privileged mental health treatment records in the appropriate recordkeeping system, in accordance with state and school regulations. These records are protected by state confidentiality law, and information is only shared with the CARE team when a student's parent or guardian (or a student in very special circumstances) gives permission through a specific release of information or the expanded informed consent document. Exceptions to confidentiality law include danger to self and others on a need-to-know basis.

Information Sharing and Meeting Participation Responsibilities:
- Check for records or history with the school/district mental health resources and share relevant information with the team when a release of information or expanded informed consent is in place
- Consult on general issues related to mental health issues, risk assessment, and development of interventions

INNER CIRCLE MEMBERS

Inner circle members should attend every meeting, but when they cannot attend, they do not have a trained backup to attend in their place. Inner circle members represent key areas within the school or district that have frequent contact with students, are likely to be involved in either case updates or interventions for the majority of CARE cases, and can provide valuable insights to the team. Inner circle members have access to the electronic record keeping system for CARE cases.

Teacher/Academic Representative: This individual often serves as the primary contact in working with teachers, teacher's aids, academic guidance counselors, and other academic resources. The academic representative also provides information related to academic history and performance as well as insight into the academic experience. If this person is unable to attend a meeting, reports or other useful information should be sent to the CARE team chair.

Information Sharing and Meeting Participation Responsibilities:
- Academic transcript and history including any deviations from the student's traditional performance, incomplete grades, missing credits, etc.
- Information or notes from academic counseling
- Updates from current teachers, advisors, etc.

Case Manager: The case manager position may exist for teams with robust resources. This member manages a caseload assigned by the CARE team chair. The case manager participates in the team meeting by discussing case updates, assisting in assessing risk level, and is often the main point of contact for interventions. If this person is unable to attend a meeting, reports or other useful information should be sent to the CARE team chair. The case manager keeps records within the same database utilized by the CARE team. These records are FERPA-protected and visible to all members of the core and inner circles.

Information Sharing and Meeting Participation Responsibilities:
- Case management notes, risk assessments, and interactions
- Updates on referrals and other support connections

Special Education/Disability Services Representative or ADA/504 Official: The special education representative consults and offers guidance on issues of academic and other accommodations. If this person is unable to attend a meeting, reports or other useful information should be sent to the CARE team chair. Records regarding Individual Education Plans (IEPs) and other disability information are protected under FERPA and exist in the appropriate database or other recordkeeping system.

Information Sharing and Meeting Participation Responsibilities:
- History and current status of accommodations offered and usage of accommodations
- Consultation related to disability issues and accommodations

Human Resources Representative: The human resources (HR) representative provides information related to reports concerning teachers or staff members. Depending on the need for privacy, the HR representative may work with a subset of the CARE team to assess and develop intervention strategies for teachers or staff in distress.

Information Sharing and Meeting Participation Responsibilities:
- Employment Records
- Prior history of employee discipline or other difficulties, including resolutions
- Update from current supervisor
- Consult regarding support and resources available to employees

School Nurse/Health Representative: The school nurse collaborates with the team on students having medical emergencies, mental health challenges (beyond counseling services), and other health-related concerns. Information from this department is protected by state confidentiality law based on the licensure of the nurses/practitioners employed there and under HIPAA, but only if billed for insurance purposes. Information is only shared with the CARE team when the student gives permission through a specific release of information or if the information falls under the HIPAA emergency exception.

Information Sharing and Meeting Participation Responsibilities:
- Updates on current medical challenges and treatment recommendations
- Assistance connecting with treatment options both in school and the broader community
- General insights and consultation on medical and health related issues

MIDDLE CIRCLE MEMBERS

Middle circle members serve the CARE team in a consultant capacity. They are invited in for cases that relate to their specific functional areas and do not attend meetings regularly. To facilitate awareness of CARE team cases and prompt their attendance at the meeting, middle circle members are sent the agenda in advance of the meeting so that they can check the list of names for individuals that have overlap with their respective areas. When in attendance at the CARE meeting, they only attend the portion of the meeting where the case related to their area is discussed. They do not have access to the electronic record keeping database but are a common source of referrals to the team given their interactions with referred individuals.

- **General Counsel:** The general counsel attends meetings when an issue presents a legal concern for which the general counsel's expertise is essential. Counsel who attend should maintain a consultative role and support the mission and policies of the CARE team.

- **Title IX Coordinator:** The Title IX coordinator attends the meeting when there is a Title IX matter that overlaps in a way that is useful for both the Title IX coordinator and the CARE team to discuss. Records for Title IX are kept separate and confidential from the CARE team and the Title IX coordinator does not have access to the CARE database.

- **Athletics:** Athletics staff, including but not limited to coaches, trainers, and administrative staff, can provide information about the student's performance on the athletic team, any concerning behavior or medical issues noticed by athletics staff, and can often serve as helpful sources of support for deploying interventions and resources.

OUTER CIRCLE MEMBERS

Outer circle members do not attend meetings or have access to the database. These team members function as the primary sources of referrals to the team, and they may also be asked to check in with individuals referred to the team, speak with them directly about any challenges, and assist in interventions when they have an established relationship with, and can be a source of support for, the individual. Those with more frequent contact with school community members such as office staff, student group advisors, etc. may receive additional training on non-clinical suicide assessment, recognizing distress and mental health issues, and how to connect individuals with the CARE team or other supports.

- **Operational Staff (janitorial, food service, etc.)**

- **Club/Student Group Officers and Mentors**

- **After-School Programming Staff/Volunteers**