

Violence Threat Risk Assessment (VTRA)

SITE-SPECIFIC SCREENING

“The Better the Data, the Better the Assessment”



Data Collection & Decisions Making



**NORTH AMERICAN CENTER
FOR THREAT ASSESSMENT
AND TRAUMA RESPONSE**



CTIP
CENTER FOR TRAUMA
INFORMED PRACTICES

SITE-SPECIFIC SCREENING

Remember: Before involving multi-agency partners consider the following:

Three Primary Hypotheses:

One: Is it a conscious or unconscious “Cry for Help”?

Two: Conspiracy of two or more! Who else knows about it? Who else is involved?

Three: Is there any evidence of fluidity?

Site-Specific RTO team members should consult with each other **before** determining whether or not to activate the protocol. Below is a general criterion for determining if the case is “Worrisome Behavior” or requires formal RTO Protocol activation.

Is the threat “clear, direct and plausible”?

“Clear”: Words are important so what was actually stated, written, posted etc.? Is there evidence they were personally escalated (increase in Baseline) and / or meant to instill fear in a target(s)? It may be worrisome if someone says “I swear revenge is coming” but as a standalone statement there is no clarity. “I’m gonna get my brother’s knife and stick it in your gut” is clear.

“Direct”: Was the threat making or threat-related behavior delivered in a way that suggests it was meant as a conscious or unconscious cry for help? Was it delivered with language of commitment and clarity to the target or someone who the threat maker believes will communicate to the target? Someone who believes they are privately mumbling to themselves “I swear I’ll kill him” may simply be saying it as a colloquialism venting frustration.

“Plausible”: While the first two variables in the jingle “clear, direct and plausible” bring some focus to the case, the single most important variable is plausibility. An individual threatening to call down a Martin UFO to vaporize us all is not a plausible threat. An elementary student threatening his teacher that he is going to drive “a Sherman Tank through this school” may be clear and direct but it is certainly not plausible. One individual threatening another individual that “I’m gonna beat your brains in with a lead pipe” is generally plausible.

PBA'S **(PLAUSIBILITY – BASELINE - ATTACK RELATED BEHAVIORS)**

Plausibility is the single most important variable in determining whether or not the verbal/written threat should be taken seriously enough to screen the case for an RTO.

But

Baseline Behavior is the single most important variable in the RTO process to determine if the IOC is on a pathway to act out violently. This is because serious violence is an evolutionary process and any significant increase or shift in baseline denotes evolution!

Caution: Even with training in VTRA™ and the RTO process, some professionals continue to underreact to cases because they say “That’s just JD, he is always that way!” or “That’s Jaz, she always says stuff like that!” without really considering the elements of Baseline Behavior which include: History of Human Target Selection, History of Site Selection, Frequency of Past Violence, Intensity of Past Violence and Recency of Past Violence etc.

And

Attack-Related Behaviors are the single most important questions in the RTO Form (i.e. Is there any evidence the threat maker has engaged in behaviors consistent with their threat) that denotes the IOC is moving from thought to action.

Remember:

- ➔ “If the Site-Specific RTO team is struggling with whether or not to activate the protocol, you already answered your question! Better safe than sorry, do it!”
- ➔ If the IOC is not known to the team or new to the program or community then establishing baseline may be impossible at the screening phase. Thus, plausibility alone will justify the activation of the RTO protocol.

Initial Data Collection:

How did the threat come to your attention? A good interview with the “Reporter” lays the foundation for the speed and breadth of the initial data. Remember that when one person comes on their own to report they are often “elected” by a larger peer group, so after obtaining the information they wanted to share, you must ask them: “Who else knows about this?” “Who else is concerned?” Questions for the Reporter (and others who will be interviewed) may include:

1. Who is the reporter(s)?
2. Where did the incident happen & when?
3. How did it come to the Reporter’s attention?
 - ➔ What was the specific language of the threat, detail of the weapon brandished, or gesture made?
4. Was there stated:
 - ➔ **Justification** for the threat?
 - ➔ **Means** to carry out the threat?
 - ➔ **Consequences** weighed out (I don’t care if I live or die!)?
 - ➔ **Conditions** that could lower the level of risk (unless you take that Twitter post down I will stick my knife in your throat!)?
5. Who was present & under what circumstance did the incident occur?
6. What was the motivation or perceived cause of the incident?
7. What was the response of the target (if present) at the time of the incident? ***Did they add to or detract from the Justification Process?***
8. What was the response of others who were present at the time of the incident? ***Did they add to or detract from the Justification Process?***

Remember:

In programs where we already have relationships with students, subjects, clients, patients, and know their overall baseline behavior then all elements of the **PBA** should be present at a Moderate to High Level of Concern before activating the RTO Protocol. In cases where the student, subject, client is not known (or little is known) by the Site-Specific Team than “plausibility” alone will activate the formal RTO Micro Evaluation.

Immediate Sources of Data Collection:**Possible Sources for Initial Screening Interviews:**

<input type="checkbox"/> Reporter(s): Re-interview if necessary	<input type="checkbox"/> Target(s)
<input type="checkbox"/> Witnesses	<input type="checkbox"/> The IOC
<input type="checkbox"/> Co-Conspirators	<input type="checkbox"/> Parents/caregivers (Call/Contact both)
<input type="checkbox"/> Friends, Co-Workers, Acquaintances	<input type="checkbox"/> Teachers and other school staff (secretaries, teacher assistants, bus drivers, etc.)

NOTE: If a case moves from screening to an RTO Micro Assessment, some or all sources from the initial screening may need to be re-interviewed.

Sources For Hard Data Collection:

<input type="checkbox"/> Locker	<input type="checkbox"/> Backpack
<input type="checkbox"/> *Bedroom Dynamic	<input type="checkbox"/> Digital Footprint
<input type="checkbox"/> Writings, Drawings, Artwork, etc.	<input type="checkbox"/> Desk(s)
<input type="checkbox"/> Vehicle	<input type="checkbox"/> School Assignments
<input type="checkbox"/> Current and <i>previous</i> employment/school records	<input type="checkbox"/> Online Journals (School)
<input type="checkbox"/> Other:	<input type="checkbox"/> Other:

* Consider questions or hypotheses about whether or not there may be a bedroom dynamic.

DATA – DECISION SCREENING GUIDE

IF:

↳ All three **PBA's** are present (Plausibility, Shift in Baseline and Evidence of Attack-Related behaviors):

Then: Consider first if this is an **Immediate Risk Situation** and a **911** call to police is required for safety or public safety reasons. If this is the case, once immediate risk reducing interventions are taken by police, or are in place, begin the **RTO Micro Assessment**.

If it is not an Immediate Risk Situation, then activate the **RTO Micro Assessment** now and contact appropriate protocol partner agency RTO leads.

Note: Most RTO cases do NOT require a **911** call

IF:

↳ Plausibility and Shift in Baseline are Present but there is **NO** Evidence of Attack-Related Behaviors:

Then: Activate the **RTO Site-Specific Screening**. Once there is data that denotes the IOC may be a moderate risk for violence or higher, contact appropriate protocol partner multi-agency RTO leads.

IF:

↳ Threat is Plausible but **NO** Shift in Baseline and **NO** Attack-Related Behaviors:

Then: Consider if the IOC is an individual with special needs and the threat-related behavior is both consistent with their diagnosis and how it is known to manifest in them. If this is the case then there is no need to conduct an RTO. However, if the IOC is new to the system (e.g. just moved across the country) and the team has no current history of baseline then a plausible threat alone will activate **RTO Site-Specific Micro Assessment**. Once there is data that denotes the IOC may be a moderate risk for violence, contact appropriate protocol partner agency RTO leads.

IF:

↳ A threat is not plausible and there is no known attack-related behaviors but is a significant shift in baseline:

Then: Activate the **RTO Site-Specific Screening**.

For example, a student, first time ever, angrily points their fingers in a gun shape and "shoots" at their teacher and then turns to their classmates and angrily does the same before running out of the classroom.

Remember:

- ↳ If PBA's **Do Not** require multi-agency activation of the protocol at this time, continue with screening. If it **Does** require multi-agency activation, default directly to Stage One VTRA.
- ↳ VTRA is meant to be helpful, not hurtful.