

Who CAREs?

An Overview of Sage's CARE Team | Responding to Students in Need

Russell Sage College Coffee Hour
October 5, 2022

Updated: 01/19/2023



CARE Team Membership

CARE Administrative Team: Tawana Davis, Stacy Gonzalez, Sharon Murray

Members: Amanda Bastiani (Title IX); Grace Giancola (Residence Life); Daniel Merges and Pamela Strassberg (Counseling Services); Ashley Busby & Ray Rodriguez (Student Success); Bob Sears, Chuck McDonald & Don Richards (Public Safety)

MISSION



CARE stands for **C**ampus **A**ssessment, **R**esponse and **E**ducation.

The campus **CARE Team** engages in **proactive** and **collaborative** approaches to identify, assess, and mitigate risks associated with students, faculty, staff, and visitors **exhibiting concerning behaviors or thoughts**.

By partnering with members of the community, the CARE Team strives to promote individual student, faculty, and staff **wellbeing** and success while prioritizing **community safety**.

CARE Report Statistics

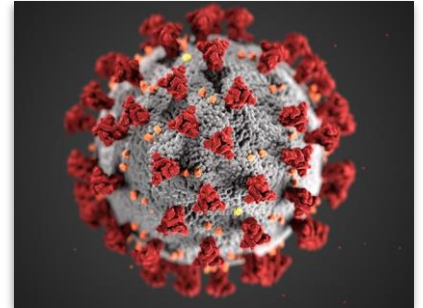
- **Fall 2020:** 115 Reports for 85 different students
 - Average of 7.67 reports per week
- **Spring 2021:** 118 Reports for 96 different students
 - Average of 7.87 reports per week
- **Fall 2021:** 110 Reports for 92 different students
 - Average of 7.33 reports per week
- **Spring 2022:** 115 Reports for 89 different students
 - Average of 7.67 reports per week

Fall 2022

- 189 reports for 142 different students
- Average: 12.6 reports per week

Commonly Reported Behaviors

- Academic Concern/Stress
- Depressed/Persistent Sadness/Crying
- Excessive Anxiety
- Suicidal Ideation/Self-Harm
- Unexplained Absences
(after multiple contact attempts)



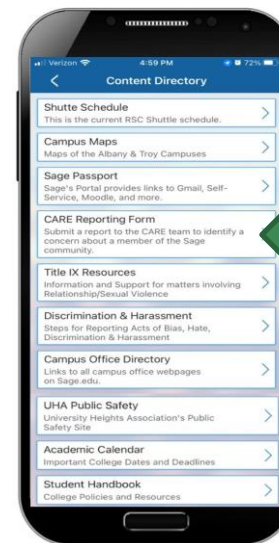
The Reporting Process: Your Role

Submitting a CARE Report

- **WHO** - Any member of the Sage community can submit a report
- **WHEN** - If you have concerns about a student and you have exhausted your own resources
 - * **Emergencies should ALWAYS be reported to Public Safety (518-244-3177) and NOT as a CARE report ***

Submitting a CARE Report

- **WHY:** Share information and dispatch others who may be in a position to connect the dots and provide appropriate student support and response. * **No one should be working in isolation.** *
- **WHERE:** CARE Reports are submitted online through our Google Form
- Link to the form is available at: [Sage.edu/CARE](https://sage.edu/CARE)
- Link is also accessible in the Content Directory of the Rave Guardian mobile safety app.



SCAN ME

Submitting a CARE Report



In This Section

CARE Team

File a Report

Policy Violations

- At [Sage.edu/CARE](https://sage.edu/CARE), click on “**File a Report**” in the Right Menu Bar
- At the next page, scroll to the bottom and click on the link for “**Submit a report to our CARE team**” to get to the Google form.

If you wish to report concerning behavior on the part of a student which does not rise to the level of misconduct, or a student who has been observed struggling academically, please: [submit a report to our CARE Team](#).

Submitting a CARE Report



Care Team Behavioral Report Form

Reporter Information

Person filing report: Prof. Samar T. Pantz **Position/Title:** Archeology Professor
Phone Number: 518-555-1212 **Email:** pantzs@sage.edu

Incident Information

Date of Incident: 2/10/2022 **Time of Incident:** 9:00:00 AM
Building: Gurley Hall (Troy) **Room/Location:** 201

Individuals Involved

First Name	Last Name	Sage ID	Email
Sally	Sage	0126547	sages@sage.edu

Incident Description

This student missed several classes in a row and when I reached out to check in with her she let me know that she recently experienced a death in her family and she is currently having a hard time getting out of bed to go to class. She indicated that she used to be on medication for depression, but she has not been able to get an appointment with her doctor for several months and she is not sure how to access services on campus.

The student seems really overwhelmed and I am worried she won't be able to complete the semester if she doesn't get support soon.

Specific Concerning Behaviors: Academic Concern/Stress, Depressed/Persistent Sadness/Unexplained Crying,

Other Offices Contacted: Dean of Students

Submitted Electronically on: 2/11/2022 12:51:45

Your CARE Report Has Been Received



care@sage.edu

to me

Tue, Feb 1, 11:42 AM



Dear Stacy Gonzalez,

Thank you for submitting a CARE report regarding Sally Sage. Here's what happens next:

Within the next 24 hours, members of our CARE Triage Team will assess your report and develop a plan for intervening with the student regarding the concerns you identified.

Within the next 72 hours, a member of the CARE team will connect with the student and address the behaviors of concern.

The CARE team meets every Thursday during the academic year and reviews all active cases to assess the needs of the student, intervention strategies, and next steps. You likely will not receive any specific details regarding the follow up with the student of concern, but if you have any additional information to share you can provide that to CARE@sage.edu or submit another report if another significant incident occurs.

As a reminder, any concerns about a student's immediate health and safety should be directed to the Public Safety office at 518-244-3177.

Thank you again for helping to support our students by connecting them with resources that will assist them in their academic and personal success here at Sage.

* Upon submitting a report, a confirmation email will be sent to the reporter and a PDF of the report will be emailed to the triage team.

CARE Team Response

Case Evaluation

- CARE Report is emailed immediately to all CARE Team members
- CARE Team Administrators assesses risk and assigns initial intervention(s) within one business day.
- Use of NABITA Risk Rubric to assess risk level and identify appropriate response.

NABITA* Threat Assessment Tool

* **NABITA** is the National Association for Behavioral Intervention & Threat Assessment
<https://www.nabita.org/>

MENTAL & BEHAVIORAL HEALTH, "THE D-SCALE"

DYSREGULATION/MEDICALLY DISABLED*

- ▲ Suicidal
- ▲ Para-suicidal (extreme cutting, eating disorders)
- ▲ Individuals engaging in risk taking behaviors (e.g. substance abusing)
- ▲ Hostile, aggressive, relationally abusive
- ▲ Individuals deficient in skills that regulate emotion, cognition, self, behavior and relationships

DISTURBANCE

- Behaviorally disruptive, unusual and/or bizarre acting
- Destructive, apparently harmful to others
- Substance abusing

DISTRESS

- Emotionally troubled
- Individuals impacted by situational stressors and traumatic events
- May be psychiatrically symptomatic

GENERALIZED RISK

EXTREME

SEVERE

ELEVATED

MODERATE

MILD

NINE LEVELS OF AGGRESSION

9

LOSE/LOSE ATTACK

8

WIN/LOSE ATTACK

7

LIMITED DESTRUCTIVE BLOWS

6

THREAT STRATEGIES

5

FORCED LOSS OF FACE

4

IMAGE DESTRUCTION

3

ACTIONS VS. WORDS

2

HARMFUL DEBATE

1

HARDENING

CRISIS
PHASE

ESCALATION
PHASE

TRIGGER
PHASE

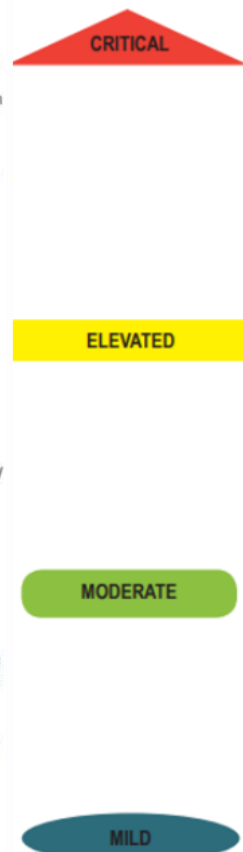
**Medically Disabled is a clinical term, as in a psychotic break.
It is not the same as "disabled" under federal law.*

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NABITA recommends specific responses related to assessed risk level.

- Most of our cases can be evaluated using **NABITA's D-Scale** (Life Stress and Emotional Health)
- NABITA's E-Scale** is used to evaluate safety risks (Hostility and Violence to Others)
- Loop **Public Safety** in EARLY when we have concerns about safety.

<p>DECOMPENSATING</p> <ul style="list-style-type: none"> ▲ Behavior is severely disruptive, directly impacts others, and is actively dangerous. This may include life-threatening, self-injurious behaviors such as: <ul style="list-style-type: none"> ▲ Suicidal ideations or attempts, an expressed lethal plan, and/or hospitalization ▲ Extreme self-injury, life-threatening disordered eating, repeated DUIs ▲ Repeated acute alcohol intoxication with medical or law enforcement involvement, chronic substance abuse ▲ Profoundly disturbed, detached view of reality and at risk of grievous injury or death and/or inability to care for themselves (self-care/protection/judgment) ▲ Actual affective, impulsive violence or serious threats of violence such as: <ul style="list-style-type: none"> ▲ Repeated, severe attacks while intoxicated; brandishing a weapon ▲ Making threats that are concrete, consistent, and plausible ▲ Impulsive stalking behaviors that present a physical danger 	
<p>DETERIORATING</p> <ul style="list-style-type: none"> ■ Destructive actions, screaming or aggressive/harassing communications, rapid/odd speech, extreme isolation, stark decrease in self-care ■ Responding to voices, extremely odd dress, high risk substance abuse; troubling thoughts with paranoid/delusional themes; increasingly medically dangerous bingeing/purging ■ Suicidal thoughts that are not lethal/imminent or non-life threatening self-injury ■ Threats of affective, impulsive, poorly planned, and/or economically driven violence ■ Vague but direct threats or specific but indirect threat; explosive language ■ Stalking behaviors that do not harm, but are disruptive and concerning 	
<p>DISTRESSED</p> <ul style="list-style-type: none"> ● Distressed individuals engage in behavior that concerns others, and have an impaired ability to manage their emotions and actions. Possible presence of stressors such as: <ul style="list-style-type: none"> ● Managing chronic mental illness, mild substance abuse/misuse, disordered eating ● Situational stressors that cause disruption in mood, social, or academic areas ● Difficulty coping/adapting to stressors/trauma; behavior may subside when stressor is removed, or trauma is addressed/processed ● If a threat is present, the threat is vague, indirect, implausible, and lacks detail or focus 	
<p>DEVELOPING</p> <ul style="list-style-type: none"> ◆ Experiencing situational stressors but demonstrating appropriate coping skills ◆ Often first contact or referral to the BIT/CARE team, etc. ◆ Behavior is appropriate given the circumstances and context ◆ No threat made or present 	



<p>CRITICAL (4)</p> <ul style="list-style-type: none"> Initiate wellness check/evaluation for involuntary hold or police response for arrest Coordinate with necessary parties (student conduct, police, etc.) to create plan for safety, suspension, or other interim measures Obligatory parental/guardian/emergency contact notification unless contraindicated Evaluate need for emergency notification to community Issue mandated assessment once all involved are safe Evaluate the need for involuntary/voluntary withdrawal Coordinate with university police and/or local law enforcement Provide guidance, support, and safety plan to referral source/stakeholders 	
<p>ELEVATED (3)</p> <ul style="list-style-type: none"> Consider a welfare/safety check Provide guidance, support, and safety plan to referral source/stakeholders Deliver follow up and ongoing case management or support services Required assessment such as the SIVRA-35, ERIS, HCR-20, WAVR-20 or similar; assess social media posts Evaluate parental/guardian/emergency contact notification Coordinate referrals to appropriate resources and provide follow-up Likely referral to student conduct or disability support services Coordinate with university police/campus safety, student conduct, and other departments as necessary to mitigate ongoing risk 	
<p>MODERATE (2)</p> <ul style="list-style-type: none"> Provide guidance and education to referral source Reach out to student to encourage a meeting Develop and implement case management plan or support services Connect with offices, support resources, faculty, etc. who interact with student to enlist as support or to gather more information Possible referral to student conduct or disability support services Offer referrals to appropriate support resources Assess social media and other sources to gather more information Consider VRAW² for cases that have written elements Skill building in social interactions, emotional balance, and empathy; reinforcement of protective factors (social support, opportunities for positive involvement) 	
<p>MILD (0/1)</p> <ul style="list-style-type: none"> No formal intervention; document and monitor over time Provide guidance and education to referral source Reach out to student to offer a meeting or resources, if needed Connect with offices, support resources, faculty, etc. who interact with student to enlist as support or to gather more information 	

CARE TEAM MEETINGS



- **Members of the CARE Team meet weekly on Thursday mornings.**
 - Review new reports submitted in the past week.
 - Determine risk ratings assign team member(s) to initiate interventions
 - Review previous cases, assess the status of interventions and follow-ups
 - Gather information from those around the table to ensure we have a full understanding and picture of the needs and concerns for each student
 - Review any new reports from Residence Life, Public Safety, and Beacon to determine if additional reports or action are needed.
 - Provide opportunities for training with outside guests, table top exercises, etc.

Case Resolution

- Typically, cases are resolved by the CARE team when students are connected with appropriate resources and/or immediate safety risks have been addressed.
- Note: We can't fix everything, and a referral to the CARE team may not always result in resolution.



Guiding Principles

- Do not share/show CARE reports to the student.
- Maintain Confidentiality
- Offer students resources — particularly if they are looking for confidentiality, but respect student choices.
- Think **inclusively!** There can be many reasons for behavior/actions that require acquisitions of new knowledge, open mindedness and support.
 - Welcome working with persons of all ethnically/racially minoritized, international, LGBTQIA+, and disability communities as well as diverse gender identities, socioeconomic backgrounds, religions, and political beliefs.
- Collaborate with others; make personal referrals.
- Acknowledge that each case is different.

Frequently Asked Questions

How do I know when it is appropriate to submit a report?



- If you're "on the fence" about submitting a CARE report, you can always do so and let us sort it out.
 - If your concerns are primarily related to academic performance, submit a Beacon Report.
-

What if I think this is an emergency?



- If you believe a student's behavior poses an imminent risk of harm to themselves or others, **do not file a CARE report.**
 - Instead, **call Public Safety** immediately (518-244-3177) so that emergency responders can be dispatched to assist the student.
-

Can I intervene when I notice an issue with a student or should I always refer the case to the CARE team first?



- Yes! It can be really powerful for you to reach out to a student you are concerned about as you most likely have already cultivated a relationship with the student.
 - If you are comfortable providing the initial point of contact, please still file a CARE report so that we can have a record of concerns and coordinate services, if needed.
-

Is it OK to let the student know I filed a CARE report?



- Yes! More often than not, students are relieved to know that someone was concerned for their well-being.
 - This could be a good way for you to connect with the struggling student and help support them through a tough time.
-

What if the behavior continues? Should I submit a new CARE report?



- While the CARE team works in close partnership with students to connect them with resources on campus, the truth is, some of these students will need ongoing monitoring from our group.
 - If you don't see a change in behavior or the problematic behavior returns, **please let us know** so we can develop a new intervention strategy for the student of concern.
-

Will I find out what the CARE team response is regarding my report?



- Yes and no. We are limited in the details we can provide for privacy reasons.
 - You should receive email confirmation when your report is submitted and you may receive a follow-up email seeking additional information from you.
-

Sample Scenarios

CARE Case Study 1



- “Ezra” is a student in your course who failed a quiz and missed two classes in a row, which is not typical for him. He told a faculty member that he had been stressed over a personal issue back home, which is located 4 hours away. He has not responded to the professor.
- What are the steps you would take?
- **Possible Responses from the CARE Team**
 - RA Room Check or Outreach from AD of Res Life
 - Student Success Outreach
 - Connection with Wellness Services
 - Intervention from Deans of Students

CARE Case Study 2



- You saw “Jordan” in Buchman at lunchtime sitting with a classmate. Later that day, you received an email from that classmate saying that Jordan posted “ I hate my Life,” “I can’t take this anymore,” and “I don’t want to wake up” on social media.
- What would you do?
- **Possible Immediate Responses from Public Safety/On Call Staff**
 - RA Room Check or Outreach from On Call Staff
 - Possible Connection with Mobile Crisis
- **Follow up from the CARE Team**
 - Connection with Wellness Services
 - Intervention from Deans of Students

Consider some of your recent encounters with students...



- Were there occasions when you were prompted to submit a CARE report?
 - Were there occasions when you were unsure about next steps and think perhaps you should have reported something?
-

Important Reminders

Campus Resources for Referrals



- **Accessibility Services** | Accessibility_Services@sage.edu
- **Deans of Students** | 518-244-2207 | deanofstudents@sage.edu
Alb: Sharon Murray murras2@sage.edu | Try: Stacy Gonzalez gonzas@sage.edu
- **Public Safety** | 518-244-3177 | Bob Sears bsears@universityheights.org
Alb: Chuck McDonald mcdonc@universityheights.org | Try: Don Richards richad3@sage.edu
- **Residence Life** | Grace Giancola | residencelife@sage.edu
- **Student Success** | Can link to Advising, Academic Support, HEOP, Success Coaches
Ashley Busby busbya@sage.edu | Ray Rodriguez rodrr7@sage.edu
- **Title IX** | Amanda Bastiani | titleix@sage.edu
- **Wellness Centers*** | Tawana Davis | Alb: 518-292-1917 Try: 518-244-2261
albanywellnesscenter@sage.edu | troywellnesscenter@sage.edu

Reporting Tools

- Behavioral Concerns: [Submit a CARE Report](#)
 - Accessible through [Sage.edu/care](https://sage.edu/care)
 - Link in **Rave Guardian App's** Content Directory
- Academic Concerns: [Submit a Beacon Report](#)
 - Accessible through the [Sage Portal](#)
- Emergency: **Call Public Safety**
518-244-3177



Any Questions?