## Sample Threat Assessment and Management Forms

The following pages provide sample forms to help schools document information related to all aspects of threat cases, from initial report/intake, triage, assessment, initial case management, case updates and case closure. Note that schools are NOT required to use these forms. Rather, they are provided as a resource to support schools in their efforts to identify, assess and manage potential threats to the school and its members.

All the forms are also available on the DCJS website at:

[www.dcjs.virginia.gov/virginia-center-school-and-campus-safety/threat-assessment-virginia](https://www.dcjs.virginia.gov/virginia-center-school-and-campus-safety/threat-assessment-virginia)

The forms are available for use in a downloadable PDF format to be used as they are, or in a WORD format.

School threat assessment teams are encouraged to download the forms, edit them to meet their policies and procedures, and use them as best meets their needs. Teams may use all, some, or none of these forms and may edit them to meet local needs.

### Overview of Threat Assessment and Management Forms

##### Part I: Intake for Initial Report Concerned

This form is to document initial reports. The first page is to document the incident/concern that occurred. The items about the incident are intended to gain a full understanding of what occurred and if there are any obligations for further notifications.

The next two pages are to document the persons involved in the potential case, i.e., the subject(s), target(s)/others impacted, and witnesses. If necessary, use additional copies to document information about additional persons involved.

##### Part II: Triage

This form has three pages. The first is for documenting standard record checks. Note these items should be updated to reflect the record sources and access of the school’s threat assessment team. The second page is a summary checklist of key issues for consideration of need for further assessment or intervention. The purpose of the triage is to determine if there is need for further review and action by the full team or if the concern can be reasonably resolved at triage or by referral to existing resources. The third page is for documentation of any required notifications, additional information, and the findings of the triage process.

##### Part III: Threat Assessment

There are two pages for this form which provides key areas for inquiry regarding each of the STEP domains, and a checklist of key factors that will inform assessment and case management considerations. The key areas and items reflect the content of the Guidelines for Threat Assessment in this *Guide.* This form may also be used to update key areas/information during ongoing case reviews.

**Part IV: Initial Case Management Plan**

This form uses the STEP framework to outline the case management plan. The teams should identify tasks, team members responsible for overseeing completion of the tasks, and a date/time the task is due for update to the team.

**Part V: Case Update**

Like the initial Case Management form, this uses the STEP framework for modification to the case management plan, including both updates such as new information or outcomes of prior action items, and new or ongoing tasks for each of the domains. The teams should identify tasks, team members responsible for overseeing completion of the tasks, and a date/time the task is due for update to the team. This form can be used to document each review of the case.

**Part V: Case Closure**

Teams may use this form to document a thorough, diligent and deliberate review of the case to ensure that any concerns using the STEP framework have been sufficiently addressed, to the point that the case is stable at a Routine/No Known Concern or Low Level of Concern.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **THREAT ASSESSMENT & MANAGEMENT FORM** | | | | | | | |
| **PART I: INTAKE for INITIAL REPORT OF CONCERN** | | | | | | | |
| **Date Reported:** |  | **Day of Week:**  Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday | | | | | **Time:**  AM  PM |
| **Taken by:** |  | | **School:** |  | **Position:** |  | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **REPORTING PARTY:** | | | | | |
| **Name:** |  | Unknown | | **ID #:** |  |
| **Affiliation:** | Administrator  Teacher  Staff  Student  Parent/Guardian  Contractor  Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  None/Unknown | | | **Status:** | Current  Former   Prospective  Grade:\_\_\_\_\_\_\_\_\_\_(if student) |
| **School:** |  | | **Building/Program:** | |  |
| **Home Address:** |  | | **Phone:** | |  |
| **INCIDENT:** | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date Occurred:** |  | **Day of Week:**  Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday | | | | | | | | **Time:**  AM  PM | | |
| **Location:** | School Property [ In School Building  School Grounds]  School Bus  School Sponsored Activity  Other: | | | | | | | | | | | |
| **School:** |  | | | | | **Building/Program:** | | |  | | | |
| **Address:** |  | | | | | | **City:** | |  | | **State:** |  |
| **Concern Types:** | Harm to Others  Abduction  Stalking  Bullying  Suicidal/Self-Harm  Aberrant Communication/Behavior  Assault [ Physical  Sexual)  Bomb/Arson  Weapon  Harassment  Mental Health  Disruptive / Suspicious Behavior | | | | | | | | | | | |
| **Nature:** | Act  Threat  Concern | | **Modes:** | | In Person  Phone  Text  Email  Letter  Social Media  Internet   Other : | | | | | | | |
| **Persons(s) injured:**  Yes  No  Unknown | | | **Persons(s) require medical attention?**  Yes  No  Unknown | | | | | | | | | |
| **Weapon involved:**  Yes  No  Unknown | | | **Type of Weapon:**  Firearm[ Rifle/Shotgun  Pistol]  Edged  Explosive  Other: | | | | | | | | | |
| **Weapon referenced:**  Yes  No  Unknown | | | **Type of Weapon:**  Firearm[ Rifle/Shotgun  Pistol]  Edged  Explosive  Other: | | | | | | | | | |
| **Law Enforcement Involved:**  Yes  No  Unknown | | | | **Agency:** | | | | **Arrest/Custody of Subject:**  Yes  No  Unknown | | | | |
| **Details of the incident/nature of concerns. Note what occurred, who was involved, where and when, if others were impacted or harmed, etc.**  **If threats/concerning statements were communicated, provide direct quotes where possible, using quotation marks to indicate direct quotes. Attach original communications if available.** | | | | | | | | | | | | |
| **Threat Assessment and Management Case Form — © Deisinger (2019); Licensed to Virginia Public Schools** | | | | | | | | | | | | |

*Threat Assessment and Management Case Form — © Deisinger (2019); Licensed to Virginia Public Schools*

|  |
| --- |
| **PART I: INTAKE for INITIAL REPORT OF CONCERN – PERSONS INVOLVED** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **SUBJECT (1) Engaging in threatening, aberrant or concerning behavior:** | | | | | |
| **Name:** |  | Unknown | | **ID #:** |  |
| **Affiliation:** | Administrator  Teacher  Staff  Student  Parent/Guardian  Contractor  Other:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  None/Unknown | | | **Status:** | Current  Former  Prospective  Grade:      \_\_\_\_\_\_\_\_\_(if student) |
| **School:** |  | | **Relationship  to Target:** | |  |
| **Emergency Contact:** |  | | **Relationship:** | | Parent  Spouse/Partner   Guardian  Other: |
| **Home Address:** |  | | **Phone:** | |  |
| **SUBJECT (2) Engaging in threatening, aberrant or concerning behavior:** | | | | | |
| **Name:** |  | Unknown | |  |  |
| **Affiliation:** | Administrator  Teacher  Staff  Student  Parent/Guardian  Contractor  Other:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  None/Unknown | | | **Status:** | Current  Former  Prospective  Grade:      \_\_\_\_\_\_\_\_\_(if student) |
| **School:** |  | | **Relationship  to Target:** | |  |
| **Emergency Contact:** |  | | **Relationship:** | | Parent  Spouse/Partner   Guardian  Other: |
| **Home Address:** |  | | **Phone:** | |  |
| **Note: If more than two subjects of concern in this incident, attach additional copies of this page with subject’s information.** | | | | | |
| **TARGET (1):** | | | | | |
| **Name:** |  | Unknown | |  |  |
| **Affiliation:** | Administrator  Teacher  Staff  Student  Parent/Guardian  Contractor  Other:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  None/Unknown | | | **Status:** | Current  Former  Prospective  Grade:      \_\_\_\_\_\_\_\_\_(if student) |
| **School:** |  | | **Relationship  to Subject:** | |  |
| **Emergency Contact:** |  | | **Relationship:** | | Parent  Spouse/Partner   Guardian  Other: |
| **Home Address:** |  | | **Phone:** | |  |
| **TARGET (2):** | | | | | |
| **Name:** |  | Unknown | |  |  |
| **Affiliation:** | Administrator  Teacher  Staff  Student  Parent/Guardian  Contractor  Other:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  None/Unknown | | | **Status:** | Current  Former  Prospective  Grade:      \_\_\_\_\_\_\_\_\_(if student) |
| **School:** |  | | **Relationship  to Subject:** | |  |
| **Emergency Contact:** |  | | **Relationship:** | | Parent  Spouse/Partner   Guardian  Other: |
| **Home Address:** |  | | **Phone:** | |  |
| **Note: If more than two targets in this incident, attach additional copies of this page with target’s information.** | | | | | |

|  |
| --- |
| **PART I: INTAKE for INITIAL REPORT OF CONCERN – PERSONS INVOLVED**  *Threat Assessment and Management Case Form — © Deisinger (2019); Licensed to Virginia Public Schools* |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Witness (1):** | | | | | |
| **Name:** |  | Unknown | |  |  |
| **Affiliation:** | Administrator  Teacher  Staff  Student  Parent/Guardian  Contractor  Other:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  None/Unknown | | | **Status:** | Current  Former  Prospective  Grade:      \_\_\_\_\_\_\_\_\_(if student) |
| **School:** |  | | **Relationship  to Subject:** | |  |
| **Emergency Contact:** |  | | **Relationship:** | | Parent  Spouse/Partner   Guardian  Other: |
| **Home Address:** |  | | **Phone:** | |  |
| **Witness Interview** | | | | | |
|  | | | | | |
| **Witness (2):** | | | | | |
| **Name:** |  | Unknown | |  |  |
| **Affiliation:** | Administrator  Teacher  Staff  Student  Parent/Guardian  Contractor  Other:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  None/Unknown | | | **Status:** | Current  Former  Prospective  Grade:      \_\_\_\_\_\_\_\_\_(if student) |
| **School:** |  | | **Relationship  to Subject:** | |  |
| **Emergency Contact:** |  | | **Relationship:** | | Parent  Spouse/Partner   Guardian  Other: |
| **Home Address:** |  | | **Phone:** | |  |
| **Witness Interview** | | | | | |
|  | | | | | |
| **Note: If more than two witnesses in this incident, attach additional copies of this page.** | | | | | |

|  |  |
| --- | --- |
| **Regarding:** | **Case:** |
| **PART II: TRIAGE – RECORDS CHECKS** | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **RECORDS CHECKS (ALL):** | **Checked** NS=Not Significant NA=Not Applicable | | **Notes about Significant findings:** | |
| Photo | Yes  NS/NA | |  | |
| Threat Assessment Team history | Yes  NS/NA | |  | |
| Criminal history | Yes  NS/NA | |  | |
| Driver license information | Yes  NS/NA | |  | |
| Vehicle/Parking information | Yes  NS/NA | |  | |
| SRO/SSO contacts | Yes  NS/NA | |  | |
| Local Law Enforcement contacts | Yes  NS/NA | |  | |
| Other Law Enforcement contacts | Yes  NS/NA | |  | |
| Protective/No Contact Orders | Yes  NS/NA | |  | |
| No Trespass Notice | Yes  NS/NA | |  | |
| Concealed weapons permit | Yes  NS/NA | |  | |
| Weapons purchase permit | Yes  NS/NA | |  | |
| Social media | Yes  NS/NA | |  | |
| Online Search | Yes  NS/NA | |  | |
| Other: | Yes  NS/NA | |  | |
| **RECORDS CHECKS: School Staff** |  | |  | |
| Disciplinary actions | Yes  NS/NA | |  | |
| Grievances filed | Yes  NS/NA | |  | |
| Title IX actions | Yes  NS/NA | |  | |
| Application | Yes  NS/NA | |  | |
| Other: | Yes  NS/NA | |  | |
| **RECORDS CHECKS: Students** |  | |  | |
| Class schedule | Yes  NS/NA | |  | |
| Academic standing/progress | Yes  NS/NA | |  | |
| IEP/504 | Yes  NS/NA | |  | |
| Transfer records | Yes  NS/NA | |  | |
| Conduct/Discipline | Yes  NS/NA | |  | |
| Title IX actions | Yes  NS/NA | |  | |
| Other: | Yes  NS/NA | |  | |
| **OTHER RECORDS CHECKS:** | |  |  |  |

|  |
| --- |
|  |
| **Note: Complete a record check form for each subject and target.** |

|  |  |  |
| --- | --- | --- |
| **Subject:**  *Threat Assessment and Management Case Form — © Deisinger (2019); Licensed to Virginia Public Schools* | | **Case:** |
| **PART II: TRIAGE INQUIRY SUMMARY SHEET** |  |  |
| **SUBJECT** |  | Notes: |
| Behavior(s) causing concern/impacting others | Yes  No  Unknown |  |
| Concerning or Aberrant Communications | Yes  No  Unknown |  |
| Directly communicated threats | Yes  No  Unknown |  |
| Leakage: grievances, ideation/intent, planning, preparations, targets | Yes  No  Unknown |  |
| Identified grievances/motives for violence | Yes  No  Unknown |  |
| Fixation on grievances, targets, violent resolution, etc. | Yes  No  Unknown |  |
| Interest or Identification with perpetrators, grievances, or violent acts | Yes  No  Unknown |  |
| History of violence or novel aggression | Yes  No  Unknown |  |
| Last resort behaviors: Desperation, imperative, diminished alternatives | Yes  No  Unknown |  |
| Pathway behaviors – Planning | Yes  No  Unknown |  |
| Pathway behaviors – Preparing: means, methods, opportunity, proximity | Yes  No  Unknown |  |
| Stalking/unwanted contact, communication, or pursuit | Yes  No  Unknown |  |
| Energy bursts/changes in pattern(s) of disruptive/concerning behavior(s) | Yes  No  Unknown |  |
| Last Resort behaviors/JACA | Yes  No  Unknown |  |
| Despondency, despair, isolation, and/or suicidality | Yes  No  Unknown |  |
| Significant cognitive, emotional, or psychological concerns | Yes  No  Unknown |  |
| Significant or multiple stressors/difficulty coping | Yes  No  Unknown |  |
| Lack of inhibitors/stabilizers to prevent violence | Yes  No  Unknown |  |
| Other: | Yes  No  Unknown |  |
| Comments: | | |
| **TARGET / OTHERS** |  | Notes |
| Identified targets (person/proxy, place, program, process, philosophy) | Yes  No  Unknown |  |
| Fearful of harm | Yes  No  Unknown |  |
| Protective actions/responding as if subject poses a safety concern | Yes  No  Unknown |  |
| Vulnerability: e.g., consistent routine, low situational awareness | Yes  No  Unknown |  |
| Need for assistance | Yes  No  Unknown |  |
| Other: | Yes  No  Unknown |  |
| Comments: | | |
| **ENVIRONMENT** |  | Notes |
| Organizational climate concerns: e.g., bullying, bias, poor conflict mgmt. | Yes  No  Unknown |  |
| Systemic/procedural | Yes  No  Unknown |  |
| Report latency/failure | Yes  No  Unknown |  |
| Bullying/bias | Yes  No  Unknown |  |
| Lack of support, guidance, or resources | Yes  No  Unknown |  |
| Adverse social influences | Yes  No  Unknown |  |
| High rates of violence, harassment, disruption, stress | Yes  No  Unknown |  |
| Disproportionate rate/severity of concerns | Yes  No  Unknown |  |
| Other: | Yes  No  Unknown |  |
| Comments: | | |
| **PRECIPITATING EVENTS** |  | Notes |
| Impending loss, failure | Yes  No  Unknown |  |
| Key dates/events | Yes  No  Unknown |  |
| Triggers/reminders | Yes  No  Unknown |  |
| Views intervention negatively | Yes  No  Unknown |  |
| Contagion influence | Yes  No  Unknown |  |
| Return from separation | Yes  No  Unknown |  |
| Other: | Yes  No  Unknown |  |
| Comments: | | |

*Threat Assessment and Management Case Form — © Deisinger (2019); Licensed to Virginia Public Schools*

|  |  |  |
| --- | --- | --- |
| **Subject:** |  | **Case:** |
| **NOTIFICATIONS** | **Reason** | **Notes** |
| Superintendent/Designee | Student poses High/Imminent threat to self/others  Other |  |
| Principal | High/imminent threat  Crime  Other |  |
| Law Enforcement | High/imminent threat  Crime  Other |  |
| Parent/Guardian | Student poses High/Imminent threat to self/others  Other |  |
| Other: | Yes  No |  |
| Other: | Yes  No |  |

**NOTES:**

|  |
| --- |
|  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CASE PRIORITY LEVEL:** | | | | | | |  |  | |
| **Critical/Imminent** | **High** | | **Moderate** | | **Low** | | | | **Routine/None** |
| **TRIAGE RECOMMENDATION:** | | | | | |  | | **BTAM CASE #** | |
| No identified Concerns:  **Close case** | | Non-TAT Concerns:  **Referral(s)** | | Unknown/On-going Threat:  **Initiate TAT Case** | |  | |  | |

**TRIAGE COMPLETED BY:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| Name |  | Position |  | Signature |  | Date |
|  |  |  |  |  |  |  |
| Name |  | Position |  | Signature |  | Date |

*Threat Assessment and Management Case Form — © Deisinger (2019); Licensed to Virginia Public Schools*

|  |  |
| --- | --- |
| **Subject:** | **Case:** |
| **PART III: THREAT ASSESSMENT KEY AREAS FOR INQUIRY** |  |

|  |  |  |
| --- | --- | --- |
| **SUBJECT Key Areas for Inquiry** |  | **Key Factors** |

|  |  |
| --- | --- |
| **Is subject engaging in behaviors causing concern?**  Yes  No  Unknown **Concerns about nature, pattern, context, or change in frequency or intensity?**  Yes  No  Unknown | Others significantly impacted  Patterned occurrence continues  Changes in behavior/pattern |
| **Is subject engaging in concerning, aberrant & threatening communications?**  Yes  No  Unknown **Indicating grievances, ideation, intent, planning, preparation, or targets?**  Yes  No  Unknown | Directly Communicated Threats  Leakage  Multiple communication modes  Intent to engage in violence  Warning others |
| **Subject expressed motives and/or grievances with intended violence/harm?**   Yes  No  Unknown | Immersion  **Fixation?**  Grievances  Targets/sources  Violence |
| **Has the subject shown inappropriate interest in violence?**  Yes  No  Unknown | **Identification?**  Incidents or perpetrators  Grievances of perpetrators  Weapons/tactics  Notoriety or fame  Violent Ideology |
| **Does subject have (or developing) the capacity to engage in violence?**   Yes  No  Unknown | Violence Hx  Novel Aggression  Pathway behaviors?  Planning & research  Preparations  Surveillance, stalking, rehearsal  Energy Burst behaviors  Rapid Escalation/Imminence |
| **Subject experiencing/expressing hopelessness, desperation, and/or despair?**  Yes  No  Unknown | Last resort behaviors  JACA behaviors?  Justification  Alternatives (lack of)  Consequences  Martyrdom  Ability  Legacy token |
| **Subject’s behavior indicates need for intervention/support services?**  Yes  No  Unknown  *Threat Assessment and Management Case Form — © Deisinger (2019); Licensed to Virginia Public Schools* | Depressed mood  Hallucinations  Delusions  Extreme wariness/distrust  Martyrdom  Pervasive maladaptive behavior  Untreated symptoms of MI  Poor treatment compliance |
| **Does subject have protective factors or stabilizers that inhibit violence?**  Yes  No  Unknown  **Subject has positive, trusting, sustained relationship with positive figure?**  Yes  No  Unknown  Views violence as unacceptable, immoral:  Yes  No  Unknown  Accepts responsibility for actions:  Yes  No  Unknown  Demonstrates remorse for inappropriate behavior:  Yes  No  Unknown  Respects reasonable limits and expectations:  Yes  No  Unknown  Uses socially sanctioned means of addressing grievances:  Yes  No  Unknown  Values life, job, relationships, freedom:  Yes  No  Unknown  Fears loss of reputation, job, freedom, life:  Yes  No  Unknown  Maintains, uses, and builds effective coping skills:  Yes  No  Unknown  Treatment access, compliance, engagement:  Yes  No  Unknown | Few/no protective factors  Protective failures diminishing  Loss of key support |
| **Subject:** | | **Case:** |
| **TARGET Key Areas for Inquiry** | | **Key Factors** |
| **Are targets vulnerable, concerned, or impacted by subject’s behavior?**  Yes  No  Unknown | | Significant impact/fear  Significant impart/fear  Availability, access, proximity  Vulnerability  Few protective/coping skills  Need for assistance |
| **ENVIRONMENTAL/SYSTEMIC Key Areas for Inquiry** | |  |
| **Are there Environmental/Systemic factors that are impacting the situation?**  Yes  No  Unknown | | School climate: bullying, bias  Systemic/procedural  Report latency/failure  Poor Conflict management  Unfair treatment  Inadequate resources  Adverse influences |
| **PRECIPITATING EVENTS Key Areas for Inquiry** | |  |
| **Are there Precipitating Events that may impact situation?**  Yes  No  Unknown | | Impending loss, failure, injustice  Key dates/events  Triggers/reminders  Views intervention as injustice  Contagion influence  Return from separation |
| **PROCESS INTEGRITY Key Areas for Inquiry** | |  |
| **Are there concerns with consistency, credibility, or bias in information?**  Yes  No  Unknown | | Poor credibility of subject  Poor credibility of sources  Inconsistency between sources  Significant gaps/unknowns |
| **Other Relevant Information:** | |  |

*Threat Assessment and Management Case Form — © Deisinger (2019); Licensed to Virginia Public Schools*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CURRENT CASE PRIORITY LEVEL:** | | | | | |  |  | |
| **Critical/Imminent** | **High** | | **Moderate** | **Low** | | | | **Routine / None** |
| **Case Status:** | | | | | | | | |
| No identified Concerns: **Close case** | | Non-TAT Concerns: **Referral(s)** | | | On-going Threat: **Sustain TAT Case** | | | |

**REFERRALS:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | | | | |
| **ASSESSMENT COMPLETED BY:** | |  | |  | |  | |  | |  | |
|  | |  | |  | |  | |  | |  | |  | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| Name |  | Position |  | Signature |  | Date |
|  |  |  |  |  |  |  |
| Name |  | Position |  | Signature |  | Date |
|  |  |  |  |  |  |  |
| Name |  | Position |  | Signature |  | Date |
|  |  |  |  |  |  |  |
| Name |  | Position |  | Signature |  | Date |

*Threat Assessment and Management Case Form — © Deisinger (2019); Licensed to Virginia Public Schools*

|  |  |  |
| --- | --- | --- |
| **Subject:** | **Case:** | |
| **PART IV: INITIAL CASE MANAGEMENT PLAN** | | |
| **INTERVENTION/TASK** | **RESPONSIBLE PERSON** | **DATE DUE** |
| **Subject Interventions** |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Target Interventions** |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Environment Interventions** |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **INTERVENTION/TASK** | | **RESPONSIBLE PERSON** | | | **DATE DUE** |
| **Precipitating Events (Monitoring/Interventions)** | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
| **Date for Next Review:** | | | | | |
| Print name of Team Leader: |  | | Date: |  | |
|  |  | |  |  | |
| Signature of Team Leader: |  | |  |  | |
|  |  | |  |  | |

*Threat Assessment and Management Case Form — © Deisinger (2019); Licensed to Virginia Public Schools*

|  |  |  |
| --- | --- | --- |
| **Subject:** | **Case:** | |
| **PART V: CASE UPDATE (to be updated regularly while case is active)** | | |
| **INTERVENTION/TASK** | | |
| **Subject** | | |
| **Updates:** | **Source** | |
|  |  | |
|  |  | |
|  |  | |
|  |  | |
|  |  | |
|  |  | |
|  |  | |
| **Interventions** | **Responsible Person** | **DUE** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Target Interventions** | | |
| **Updates:** | **Source** | |
|  |  | |
|  |  | |
|  |  | |
|  |  | |
|  |  | |
|  |  | |
| **Interventions** | **Responsible Person** | **Due** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **Environment Interventions** | | |
| **Updates:** | **Source** | |
|  |  | |
|  |  | |
|  |  | |
|  |  | |
| **Interventions** | **Responsible Person** | **Due** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

*Threat Assessment and Management Case Form — © Deisinger (2019); Licensed to Virginia Public Schools*

|  |  |  |
| --- | --- | --- |
| **Subject:** | **Case:** | |
| **Precipitating Events (Monitoring/Interventions)** | | |
| **Updates:** | **Source** | |
|  |  | |
|  |  | |
|  |  | |
|  |  | |
| **Interventions** | **Responsible Person** | **Due** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Comments** | | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CURRENT CASE PRIORITY LEVEL:** | | | | | |  |  | | | |
| **Critical/Imminent** | **High** | | **Moderate** | | **Low** | | | **Routine / None** | | |
| **Case Status:** | | | | | | | | | | **Date for Review:** |
| No identified Concerns: **Close case** | | Non-TAT Concerns: **Referral(s)** | | On-going Threat: **Sustain TAT Case** | | | | |  |  |

**REFERRALS:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | |
| **Update COMPLETED BY:** |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| Name |  | Position |  | Signature |  | Date |
|  |  |  |  |  |  |  |
| Name |  | Position |  | Signature |  | Date |
|  |  |  |  |  |  |  |
| Name |  | Position |  | Signature |  | Date |
|  |  |  |  |  |  |  |
| Name |  | Position |  | Signature |  | Date |

*Threat Assessment and Management Case Form — © Deisinger (2019); Licensed to Virginia Public Schools*

|  |  |
| --- | --- |
| **Subject:** | **Case:** |
| **PART VI: CASE CLOSURE** | |

**The Threat Assessment Team has completed necessary interventions and actions regarding this case.**

**The Level of Concern for this case is currently Routine/None or Low.**

**If at a Low Level of Concern, remaining issues or tasks are being adequately addressed and monitored by relevant resources within the school or community at this time.**

**Any relevant referrals have been made and those resources are engaged as needed.**

**The full Threat Assessment Team has reviewed and concurred with all the following regarding the domains of assessment and intervention:**

**SUBJECT:**

**The subject is not known to be engaging in any behaviors that:**

Is posing a threat of violence, harm, or significant disruption to self or others, or

May reasonably pose a threat of violence, harm, or significant disruption to self or others, or

Indicate a need for assistance or intervention.

**TARGET/Others:**

**Targets or others are not known to:**

Have any significant ongoing concerns regarding their safety regarding this case

Be engaging in any behaviors that place them at risk regarding this case

Have any significant ongoing or further need for assistance or intervention.

**ENVIRONMENT/SYSTEMIC CONCERNS:**

**There are no known:**

Environmental / systemic concerns significantly impacting this case currently.

Environmental / systemic concerns that are reasonably likely to occur that would significantly impact upon this case, OR

**PRECIPITATING EVENTS:**

**There are no known:**

Precipitating Events that are significantly impacting this case currently.

Precipitating Events that are reasonably likely to occur that would significantly impact upon this case.

|  |
| --- |
| **THERE ARE NO FURTHER IDENTIFIABLE ACTION STEPS. THIS CASE HAS BEEN RESOLVED AND IS CLOSED** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| Name |  | Position |  | Signature |  | Date |
|  |  |  |  |  |  |  |
| Name |  | Position |  | Signature |  | Date |
|  |  |  |  |  |  |  |
| Name |  | Position |  | Signature |  | Date |
|  |  |  |  |  |  |  |
| Name |  | Position |  | Signature |  | Date |

*Threat Assessment and Management Case Form — © Deisinger (2019); Licensed to Virginia Public Schools*