

Behavioral Intervention Team Manual

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Marshall University Resources

The Office of Student Conduct

marshall.edu/student-conduct
304-696-2495
martil@marshall.edu

Office of Public Safety (MUPD)

marshall.edu/mupd
304-696-4357

Disability Services

marshall.edu/disability
304-696-2467
wyant2@marshall.edu

Women's Center

marshall.edu/wcenter
304-696-3338
wcenter@marshall.edu

The Wellness Center

marshall.edu/wellness
304-696-4103
shep@marshall.edu

Student Health Services

marshall.edu/studenthealth
304-691-1100

The College Program for Students with Autism Spectrum Disorder

marshall.edu/collegeprogram
304-696-2332
fuller26@marshall.edu

LGBTQ+ Office

marshall.edu/lgbtq
304-696-6623
polk4@marshall.edu

The Office of Advocacy and Support

marshall.edu/student-affairs/advocacy
304-696-2284
miller138@marshall.edu

Housing and Residence Life

marshall.edu/housing
304-696-6766
housing@marshall.edu

The Counseling Center

marshall.edu/counseling
304-696-3111
counselingcenter@marshall.edu

Introduction

The Behavioral Intervention Team (BIT) is designed to assist faculty, staff, and administration with students facing high levels of distress in their lives and those with behavior problems. The Behavioral Intervention Team is not an administrative, treatment or disciplinary body. It does not adjudicate, discipline, or impose sanctions against any member of the campus. In an effort to respond to the safety needs of the campus, Marshall University has established the Behavioral Intervention Team.

The Behavioral Intervention Plan was developed in accordance with the National Association of Behavioral Intervention and Threat Assessment (NABITA) model.

What is BIT?

BIT will assist in helping keep the university community safe and connect distressed students to available support services and present various seminars to students that have been disciplined through the student judicial process. BIT primary goal seeks to act preventively versus reactionary to students in distress.

What does BIT do?

- Provide consultation and support to members of the university community in assisting individuals who display concerning or disruptive behaviors;
- Respond to reports; gather information to assess situations involving individuals who display concerning or disruptive behaviors; engage reported individuals in a process aimed at correcting the disturbing behavior;
- Recommend appropriate intervention strategies;
- Connect individuals with available campus and community resources;
- Monitor ongoing behavior of individuals who have displayed disruptive or concerning behavior.

The committee is not intended to address random conduct matters that occur in the classroom but a consistent behavior problem/pattern that is noticeable in a student.

BIT Members

BIT consists of a team of professionals from several university units including:

- Director of Student Conduct
- Chief of University Police
- Director of the Counseling Center
- Assistant Deans of Students
- Associate Dean of Undergraduate Studies
- Director and Associate Director of Housing and Residence Life
- Director of First Year Residence Halls
- Associate Athletic Director

A designee of the above may serve if a representative is absent or unavailable. The specific composition of the BIT depends on the nature of the behavior problem that is being addressed. Additional members from the campus community may be included in the BIT meetings as needed.

Meetings

The Behavioral Intervention Team meets bi-weekly to address reported behaviors and intervention on campus. The team also focuses on developing situations and topics related to concerning behaviors and appropriate intervention. These discussions include trends and patterns in reported behavior, best practices in intervention, and available resources. Additional meetings are held as needed to assess, intervene, and monitor concerns brought to the attention of the BIT.

Potential Outcomes of BIT Reports

As a result of a report and assessment, the BIT may:

- Recommend no action, pending further observation
- Assist faculty or staff in developing a plan of action
- Refer student to existing on-campus support resources
- Refer student to appropriate community resources
- Make recommendations consistent with college policies and procedures

Assistance and Consultation to the University Community

While interacting with individuals across the university, faculty, staff, and students may be confronted with situations in which an individual is disruptive or displays behavior that may be intimidating or threatening to others. A person may also behave in ways that signal other kinds of distress, such as tearfulness or withdrawal and isolation. The Behavioral Intervention Team is designed to assist in these situations by responding to reports with information gathering, assessment, consultation, and referral to resources. The BIT relies on the participation of the entire University community in its mission of preventing violence and responding to individuals in need of assistance.

Appendices A and B provides guidelines for faculty and staff in responding to inappropriate student behavior and for reaching out to distressed/difficult students. While these guidelines provide general information and guiding principles, the BIT is available for in depth consultation about any troubling situation.

Reporting Process

The overall goal of the Behavior Intervention Plan is to promote a safe environment for all students, faculty, staff, and administration and to focus on student learning and student development. By encouraging all members of the campus community to report behaviors that are concerning; BIT will be able to reach out to intervene, provide support and connect them with resources that can assist them. As such, BIT asks that the campus community report concerning “red flag” behaviors.

A “red flag behavior” is a questionable, suspicious or inappropriate behavior that may be presented through an individual’s appearance, spoken or written words, or specific actions. Examples of “red flag behaviors” include:

- Behavior(s) which regularly interfere with classroom environment or management
- Notable change in academic performance – poor or inconsistent preparation
- Notable change in behavior or appearance
- Impairment of thoughts – verbally or in writing
- Aggressive behaviors toward others; inability to set limits or re-direct focus
- Poor decision making and coping skills
- Inappropriate or strange behavior
- Low frustration of tolerance
- Overreaction to circumstances
- Lack of resiliency
- Writings and comments endorsing violence; unusual interest in violence
- Indirect or direct threats in writings or verbalizations
- Lack of empathy and concern for others; inability to care
- Anger management problems
- Threats to others
- Appearance of being overly nervous, tense or tearful
- Expression of suicidal thoughts or feelings of hopelessness
- Withdrawal and isolation
- Appears to have an alcohol or drug use or dependency

BIT Incident Report

The Incident Report (See Appendix E) is designed to enable faculty, staff and students to voluntarily report “red flag behaviors” that may raise concerns and incidents of misconduct at Marshall University. An incident, in this context, is an event that does not warrant immediate intervention. In the event of an emergency that requires immediate intervention please call Marshall University Police at 304-696-4357.

The Incident Report will provide a mechanism for responding to individual incidents and will document patterns of disruptive behavior. It will also provide aggregate data on the nature and frequency of disruptions at Marshall University. This report provides a standardized method for recording observations of troublesome behaviors and for alerting staff of potential concerns.

There is also a Behavioral Intervention Incident Report Form at www.marshall.edu/bit. In accordance with the Marshall University Student Code of Conduct, information provided in the Behavior Intervention Team Incident Report Form may also be considered in determining appropriate disciplinary action through the Office of Student Conduct.

Assessment

While there is no single set of warning signs that will reliably predict behavior or campus violence, the assessment process looks for behavioral evidence that someone is planning or preparing to act out inappropriately or carry out some type of threat. Assessment will attempt to distinguish between threatening and non-threatening cases in order to ensure the safety of the distressed person and any others potentially involved as well as to resolve concerns that initiated the inappropriate behavior.

Assessment assists in early identification of situations that may pose a threat to others, creates a baseline of information against which to assess future behavior, and provides a means for implementing interventions to increase the likelihood of a positive and safe resolution.

Information Gathering

Once an Incident Report has been received by BIT, the team implements the assessment process. The most appropriate time to include the individual in the process will be considered on a case-by-case basis.

In general, BIT will gather preliminary information regarding the concern and then a team member may interview the referred person as part of the initial assessment process. The interview will provide the opportunity for the individual to share their concerns about the situation and ask for needed assistance in solving it. Information collected in this initial interview will be helpful in determining appropriate intervention strategies.

This process may include any of the following data gathering processes:

- Interviews with all available parties with information about the situation
- Interview with the person alleged to have displayed inappropriate/concerning behavior
- Assessment by Student Counseling, mental health professional/drug or alcohol professional
- Interview with any identified potential targets of inappropriate/concerning behavior
- Contacting a student's parents or family member
- Review of a student's academic and disciplinary history
- Implementation of the Threat Assessment Checklist (Appendix F) and other threat assessment models appropriate to the situation.

Levels of Risk

Based on all data gathered, BIT utilizes the following information to determine the level of risk that the behavior/situation poses to the individual and to others.

- **Mild Risk** – There is no serious threat to the person of concern or others. At this level, any concerns between individuals can generally be resolved by addressing the conflict or dispute between the parties involved. Counseling and follow-up support may be recommended. Generally, in this situation, the individual can acknowledge the inappropriateness of the behavior and engage in behavior to make amends with the other party. These individuals may be experiencing mental health or substance abuse problems, but their conduct is not generally in violation of the University's Student Code of Conduct.
- **Moderate Risk** – At this level, there may be a threat to self or others that could be carried out, although there is no evidence that the person has taken preparatory steps. These individuals may be experiencing mental health or substance abuse problems and displaying disruptive behaviors.
- **Extreme Risk** – At this level, there appears to be an imminent and serious danger to the safety of the person of concern or others. It appears that specific steps have been taken or will be taken to carry out a plan to harm.

Intervention Strategies

Based on the behavior displayed by the individual and the assessment by the Behavioral Intervention Team, the BIT may make any of the following recommendations for intervention. Recommendations are made in consultation with the appropriate university department or administrator who takes any final action.

- **Mediation/Guidance** – For behaviors that do not violate the University Student Code of Conduct, the BIT and/or the Vice President of Student Affairs (VPSA) (or their designee, henceforth) may intervene to provide guidance, support and mediation of disputes, and resolve situations and prevent escalation.
- **Referral to University and/or Community Resources** – The BIT may refer an individual to the Counseling Center for services, and/or connection with other appropriate university and community resources.
- **Voluntary Withdrawal from Classes** – Based on discussion with a counselor or member of the BIT, a student may choose to temporarily take time away from the university to deal with other concerns. The student may re-enter the university during any future semester, in accordance with Marshall University policy.
- **Referral to Disciplinary Process** – The BIT will make this referral to the Office of Student Conduct when it is determined that a student's behavior may be in violation of the University Student Code of Conduct.
- **Immediate Interim Suspension** – The BIT may recommend to the VPSA that students determined to be at high risk for danger to self or others be temporarily barred from the university based on imminent safety concerns. Other measures may be imposed as needed.
- **Criminal Charges** – Individuals who have engaged in behavior that may be in violation of local, state, or federal law may be referred for criminal prosecution. University Police will ensure that a comprehensive investigation is conducted and determine whether probable cause exists for the filing of criminal charges.
- **Follow-Up and Monitoring** – In addition to any of the specific intervention strategies described previously, the BIT will determine a plan for follow-up monitoring of concerning behavior. This may include checking with faculty and staff regarding student behavior and periodic meetings between the individual and a BIT member.
- **Involuntary Administrative Withdrawal of Students** – Marshall University cares deeply about the health, well-being, and overall success of all members of the University community. However, there are circumstances in which Marshall University may need to remove a student to preserve their health and safety and/or the health and safety of the community, as described below.
 - *Criteria for Involuntary Withdrawal:* Marshall University may require the withdrawal of a student when:
 - There is a reasonable basis to believe, based on a case-by-case, objective assessment of the student's behavior and other relevant information, that the student's medical, psychological, or substance-related condition, after reasonable attempts at accommodation, if appropriate, have failed, prevents the student from safely and/or effectively participating in the University's academic programs and/or the residential life of the campus; or
 - There is a reasonable basis to believe, based on a case-by-case, objective assessment of the student's behavior and other relevant information, that as a result of the student's medical, psychological, or substance-related condition, after reasonable attempts at accommodation, if appropriate, have failed, the

student has threatened, or poses a significant risk of threatening, the health or safety of others; or causes or threatens to cause property damage; or engages in behavior that is unduly disruptive of others in the Marshall University community. (Behavior that is “unduly disruptive” includes, but is not limited to, conduct that interferes with, or poses a significant risk of interference with, the emotional or physical well-being of others and/or the academic, residential, extracurricular, or social activities of others.)

- Prior to the withdrawal, the student will be required to sign a release authorizing the disclosure of the student’s medical and/or other information with the student’s physician, mental health providers, family, or others having a legitimate need to know. In addition, a medical evaluation by a health professional chosen by the University may be required (See below). The results of the evaluation will be shared with the student, the Director of Counseling Services, University General Counsel, and the Vice President of Student Affairs (VPSA) (or their designee, henceforth).
- *Evaluation by a Health Professional* – The VPSA will review the medical information from the student’s health care provider(s) to address whether the student meets the standard for involuntary withdrawal. If additional medical information is required to render a decision, the VPSA will select an appropriate health professional to evaluate the student and notify the student of the time and place of the evaluation.
 - The health professional will be asked to determine if the student meets the standard for involuntary medical withdrawal and prepare a report for the VPSA to summarize the professional’s opinion.
 - When the health professional meets with the student, the student will be informed that the results of the evaluation will be made available to the student, the Director of Counseling Services, and the VPSA.
 - The health professional will submit a written report of the evaluation to the VPSA and a copy shall be provided to the student. The report may include recommendations for further consideration (e.g., withdrawal, treatment, a behavioral contract, or a lighter academic load). The recommendations are not binding.
- *Rendering a Decision*
 - The VPSA will consider all relevant information, including, but not limited to:
 - The medical information provided by the student
 - The written report by the health professional requested by the VPSA (if applicable)
 - A recommendation from the Behavioral Intervention Team (if applicable)
 - Other individuals as appropriate (e.g., medical professionals, college officials, public safety, family members, etc.)
 - A written submission by the student if the student so chooses
 - The VPSA will also consider, if appropriate, whether there are reasonable accommodations that would effectively mitigate the risk of harm (to self or others) or property damage and would allow the student to effectively participate in the University’s academic programs and/or the residential life, as applicable.
 - If the VPSA determines from the information available that the student does not meet the criteria for involuntary medical withdrawal, this process will be terminated. The student will be notified in writing. The VPSA may decide to take

other appropriate actions, including referring the matter to the Office of Student Conduct for disciplinary action.

- If the VPSA determines that the student meets the standard for involuntary medical withdrawal based on the information available, the student will be notified in writing of the withdrawal decision. Students shall be given an opportunity to speak with the VPSA within the five (5) business days of delivery of the VPSA's withdrawal decision. The decision may be appealed following the procedures in the next section.
- Students who are involuntarily withdrawn under this policy may also be subject to the normal disciplinary processes if their conduct violates Student Rights and Responsibilities. If disciplinary action is pending, the matter must be resolved either before or immediately upon the student's return after readmission. Graduate students who are involuntarily withdrawn are exempt from the continuous enrollment requirement until their return. The time limit to earn a graduate degree is not automatically extended.
- *Appeal*
 - Within six business days from delivery of the VPSA's written decision, the student may appeal in writing to the VPSA. The appeal must include the grounds for the appeal and any supporting evidence. Within ten business days of receiving the appeal, the VPSA will inform the student of the decision in writing. The VPSA's decision is final and not subject to further review.
- *Readmission*
 - Students who are involuntarily withdrawn from the University must submit a written request to the VPSA for readmission at least six (6) weeks prior to the start of the semester for which they would like to return. This request should include the following documentation:
 - Written Return Plan
 - a description of the student's understanding of the problem that led to the involuntary withdrawal and how those circumstances have been addressed during the leave;
 - evidence of the student's willingness to engage in continuing treatment and follow-up care, if applicable
 - an indication of what resources and support the student will use to prevent the problem(s) from recurring; and
 - sufficient evidence to demonstrate that the threat or conduct of concern has been addressed and that the student is ready and able, with or without reasonable accommodation, to return to the University and adhere to all University policies.
 - Relevant Medical Information
 - a recommendation for readmission and supporting documentation from the student's treating health care provider (e.g. physician, psychiatrist, and/or licensed counselor) that they are able to return and participate fully in academic life (with or without reasonable accommodation);
 - information regarding recommendations for continued treatment or follow-up care from health care provider;

- evidence that the student has complied with treatment recommendations that were made during the medical withdrawal;
 - recommendations from the health care provider for any necessary accommodations, if applicable; and
 - a signed release authorizing the disclosure of the student's medical and/or other information between the student's physician, mental health providers, family, the VPSA or others having a legitimate need to know. The University may also require the student to submit an independent medical evaluation performed by a health care provider selected by the University and/or that the student provide additional information necessary to determine whether the student should be readmitted at that time.
- All medical documentation submitted on behalf of the student must be on letterhead and provided from the health care provider directly to the VPSA. Medical documentation provided by an international health care provider must be from a health care provider approved by the US Consulate.
 - Decisions on readmission requests are made on a case-by-case basis, so the University may require different information than that described above as deemed appropriate and necessary in a particular case.
 - The VPSA will consider the student's request for readmission after receiving the supporting information described above, as well as any other information that the student wishes to submit. In considering the request, the VPSA, in consultation with other staff, will determine whether there is sufficient basis to establish the following:
 - The medical condition that led to the student's withdrawal has been adequately addressed and/or managed such that the student is qualified to safely and/or effectively participate in the academic and or residential life of the University (with or without reasonable accommodation)
 - The student no longer poses a threat to the health or safety of others or to property or poses a threat of undue disruption to members of the college community.
- *Reasonable deviations from these procedures may be necessary in special circumstances.*

Feedback to Referring Individual

The BIT may provide feedback to the referring individual to inform them of resolution of the situation and any ongoing follow-up in which they may need to be involved. All feedback regarding students will be in accordance with FERPA (Family Education Rights and Privacy Act) guidelines.

Record Keeping

All records of the Behavioral Intervention Team will be stored in a confidential database in the Office of Student Conduct.

Appendices

Appendix A – Responding to Student Misconduct: Guidelines for Faculty & Staff

Marshall University recognizes the important role faculty and staff members have in setting the educational tone of their classrooms and living learning environments. Setting clear guidelines for behavior and following clear protocols for classroom disruption can go a long way toward ensuring a safe and productive learning environment. In addition, the BIT is a resource for dealing with concerning or problematic behavior.

Tips for Preventing Misconduct in the Classroom

Set clear standards for behavior in your classroom. Just as faculty members determine academic standards and evaluate student performance according to those standards, it is recommended that faculty members determine and clearly communicate social conduct standards for their classroom (no chatting in class, reading newspapers, sleeping, using cell phones, etc.). For courses with online components, it is recommended that expectations regarding electronic communications be included. Provide specific information in the syllabus regarding your classroom expectations in addition to a reference to the Student Code of Conduct. Taking these steps not only sends a message to potentially disruptive students but also communicates to all other students that you will ensure a classroom environment free from disruption.

Recommendations for Responding to Misconduct in the Classroom

Please note that progression through these steps depends upon the level and repetition of misconduct. Ideally, most incidents of misconduct will be remedied at Step 1 or Step 2.

1. Provide an oral warning to student at the time that inappropriate behavior occurs. Consider reminding the entire class regarding your expectations.
2. Talk to the student individually after class or ask them to schedule a meeting with you. If you are not able to talk with the student individually prior to the next class period, you may contact the student by phone, e-mail, or letter. During the discussion with the student, clarify your expectations for classroom conduct and seek the student's cooperation in meeting those expectations. Indicate that further incidents may result in the student being asked to leave class and that if such response is necessary, a report will also be submitted to the Office of Student Conduct for further disciplinary action. DOCUMENT all information relevant to the student's misconduct. You may wish to file a behavior concern and fill out a behavior report form for those behaviors that raises "red flags" beyond ordinary classroom disruptions. NOTE: Step 1 and 2 may both occur during a single class period if a student fails to correct the behavior after being warned by the instructor.

If the oral warning does not remedy the situation and the inappropriate behavior continues:

3. If the behavior persists beyond the oral warning or is so disruptive that immediate action is necessary, ask the student to leave the class for the remainder of the class period. If the student refuses to leave the class, call Marshall University Police 304-696-4357. If necessary, temporarily adjourn until the police arrive. If continued exclusion from the class is deemed necessary by the instructor, a conference between the instructor, Department Chair, and student must be held as

soon as possible to determine if further action is warranted. DOCUMENT all relevant information. Provide a copy of the documentation to the Department Chair and to the Office of Student Conduct. File a report of the incident or concern with the Office of Student Conduct.

4. Upon receipt of the behavior report form, the BIT will investigate the incident and make recommendations. In addition to review by the Behavioral Intervention Team, the investigation may include meetings with the student, faculty member, and Department Chair. The faculty member and Department Chair will be informed of the results of the investigation. If disciplinary action is to be taken, a student has the right to a formal hearing on the charges and actions through the Office of Student Conduct.

Meeting with an Angry or Potentially Threatening Student

Do not meet alone with a student whom you feel may be a threat to your personal safety. Instead of asking to meet after class, schedule a specific appointment so that you have time to prepare for the meeting. You may call a member of the Behavioral Intervention Team for consultation or assistance prior to the meeting.

Alert and confer with your Department Chair and/or colleagues as to when the student will be meeting with you and ask one of them to either be on standby or to join in the meeting.

A Note on Due Process

To be in compliance with a student's right to due process regarding disciplinary actions, it is important that the university:

- Provide information describing the nature of the misconduct including information on what section of the Student Code of Conduct the student has violated;
- Provide the student a reasonable opportunity to correct the behavior;
- Provide a procedure to appeal the assessment of the conduct and any disciplinary actions taken.
- Student Code of Conduct: The Student Code of Conduct is designed to clarify expectations for student conduct on campus (academic and social). Faculty and staff should be aware of the Student Code of Conduct and feel comfortable referring to it. The Code is available online at www.marshall.edu/student-conduct

Appendix B – Responding to Students in Distress: Guidelines for Faculty and Staff

The college years can be very stressful for many. In the contemporary climate of competition and pressure, some students adequately cope with these stresses, but others find that stress becomes unmanageable and interferes with learning. The Marshall University faculty and staff play an especially important role in being aware of and responsive to students who may appear to be having challenges. You have an important relationship with each of your students: this relationship can be a powerful vehicle that you can use to encourage someone to seek help. At the same time, without mental health training, many may feel unprepared to address signs of distress or problematic behavior in their students. The following is intended to provide helpful guidelines for dealing with such situations. In addition, the Behavioral Intervention Team welcomes your questions on any issues regarding behavior that concerns you. Please contact the Office of Student Conduct at 304-696-2495 or martil@marshall.edu.

Students in Distress

All of us experience problems and usually it takes only a short time to recover and develop a more positive attitude and the ability to cope with whatever situation has presented itself. Sometimes however, the problem persists, and we begin to see signs of ongoing distress and poor coping. These signs may include the following:

- Drop in grades or performance
- Excessive procrastination
- Disappearance from class or regular activities
- Excessive weight gain or loss
- Withdrawal and isolative behavior
- Focus on suicide or harmful behaviors
- Neglect of appearance or hygiene
- Strange or bizarrely inappropriate behavior
- Inappropriate dependency
- Impaired speech or disjointed thoughts
- Unstable mood, including depression, irritability, anxiety, tearfulness

These behaviors may be related to ongoing depression or anxiety and may be due to problems in relationships, past trauma, addictions, eating disorders, grief and loss, etc.

In any emergency situation, call Marshall University Police at 304-696-4357.

What to Do

When you observe behavior that points to ongoing distress, addressing it with the student can go a long way toward supporting and encouraging the person to get the help they need. Don't assume that someone else in the student's life will intervene. You are always welcome to contact the BIT or the Office of Student Conduct about your concerns before you meet with your student. Student Conduct can assess the appropriate referral needed for the student.

If appropriate, talking with your student in private about what is upsetting to them may help them feel comfortable and more open with you. Be direct about your concerns, focusing on the student's behavior and your concerns for their welfare. Listen to the student's concerns while acknowledging the limits on your ability to help. You must also be aware of your own comfort level. Some faculty and staff members might feel very comfortable talking with a student about the loss of a loved one or some other distressing situation. Others panic at the sight of tears and don't know what to do to be helpful. Know your own boundaries and refer to the Counseling Center when necessary. Let your student know that additional help is available through the Counseling Center.

Referring to the Counseling Center

When one of your students shares difficulties that are beyond your ability to help, or when a student's behavior suggests serious emotional problems, it may be best to refer the student to the Counseling Center.

Let your student know that you are concerned about their welfare, but that the problem is beyond your field of expertise. Indicate that counseling may help them deal with the situation more effectively. Finally, suggest an initial meeting with a counselor to see if it may be useful. You can't force a student to seek help, but your expression of concern can be a powerful influence on your student's choice.

Sometimes simply giving someone a name to call is sufficient; at other times, making a call to the Counseling Center while you are meeting with a student is effective. If you aren't sure that the student will follow through, you may want to call and arrange a meeting with a counselor, walking the student to the counselor for the first time. Your goal is to ensure that the student and the counselor make contact.

You may walk your student to the Counseling Center at any time during regular business hours. While your student is with you encourage them to make an appointment by calling the Counseling Center at 304-696-3111.

Referring to the BIT

You may feel that talking with and encouraging a distressed student provides the boost that the student needs. You may find that a student is grateful to know about services in the Counseling Center. You may find that the student follows through on your referral and you observe a positive change in them. On the other hand, you may encounter situations that continue to concern you: where students are not responsive to your concern, the behavior persists or escalates, and your own internal "red flags" are raised. In any of these situations, contact the BIT (www.marshall.edu/bit). The BIT is here to assist you in these problematic situations or in situations where you are uncertain.

When you observe behavior that points to ongoing distress, addressing it with the individual can go a long way toward supporting and encouraging the person to get the help they need. Don't assume that someone else in the person's life will intervene. You are always welcome to contact the BIT or the Office of Student Conduct about your concerns before you talk with the individual. The Office of Advocacy and Support may also be able to link the individual with other on-campus services.

Appendix C – Complying with FERPA

The Family Education Rights and Privacy Act, otherwise known as FERPA, provides students' rights of access to their education records and ensures that such records will not be disclosed to others without their prior written consent. Implicit in FERPA is the high value students are entitled to place both on their private education records and upon their freedom to choose when to make public their own records. FERPA protection, however, is not absolute.

Recently enacted changes to FERPA give University officials greater flexibility in releasing student information in the case of a health and safety emergency. The changes to FERPA clarify disclosures in a health and safety emergency, removing strict construction of this exception, and allowing disclosure if there is an articulable and significant threat to the health or safety of a student or other individual(s). In health and safety emergencies, FERPA permits sharing of information amongst university officials and with outside entities in order to protect the health or safety of the student or other individuals. Since the BIT is responsible for identifying, responding to, and supporting at risk students, please be advised that health and safety emergencies may require disclosure of student education records to protect the health or safety of the student or other individuals.

Please know that student privacy is a high priority of the BIT. Records and proceedings of the BIT are kept confidential and shared only on a "need to know" basis in a manner that is consistent with FERPA and University policy and procedures. These changes also require the University to record information concerning the circumstance of the emergency and list of State and local educational authorities and Federal officials and agencies that may make further disclosure of the student's education record without consent.

Appendix D – Victims of Alcohol or Drug Related Crime

Even though certain individuals may not be the person using alcohol or drugs, or violating the law, they can certainly be a victim of an alcohol or drug-related crime. In fact, millions of people each year are victims of alcohol or drug related crime, including millions of young people.

- Each year, more than 600,000 students between the ages of 18 and 24 are assaulted by another student who has been drinking.
- 95% of all violent crime on college campuses involves the use of alcohol by the assailant, victim or both.
- 90% of acquaintance rape and sexual assault on college campuses involves the use of alcohol by the assailant, victim or both.
- Every day, 36 people die, and approximately 700 are injured, in motor vehicle crashes that involve an alcohol-impaired driver. Drinking and drugged driving is the number one cause of death, injury and disability of young people under the age of 21.

Frequent Types of Drug Abuse on College Campuses

According to the U.S. Department of Education, 35% of the new freshmen population will comprise the bulk of new drug users and potential drug abusers on college campuses. 43% of the overall college student body has either tried or is currently addicted to at least one of the top ten drugs found on college campus. The accessibility alone makes it much easier to experiment with a variety of controlled substances. Listed below are the most common drugs used on college campuses and their effects.

1. Alcohol, also referred to as liquor, booze, wine and beer, is the widest controlled substance used on college campuses. The most prominent effect of alcohol is dependency, and according to national statistics, 15% of college freshmen are alcoholics or enrolled in an AA program ending their freshman year. The symptoms of alcohol intoxication include but are not limited to slurred speech, blurred vision, awkwardness or loss of coordination, poor judgment and highly volatile behavior.
2. Today, stimulants or uppers are both abundant and widely used among college students and are probably of the most volatile of the drugs available on college campuses. Most college students who abuse stimulants do it to avoid sleep and study for long periods of time, but other reasons can include increased energy, heightened sexual stimulation and to lose weight. Some side effects of stimulates include increased heart rate, irritability, insomnia, psychosis, paranoia, loss of appetite and migraines. More severe conditions associated with prolonged use of stimulants include strokes, convulsions, muscle tremors and heart attacks to name a few. Here are four common stimulants used at college: Amphetamines, aka uppers, speed, bumble bees, black beauties, and pep pills can be taken orally, injected, snorted or smoked.
3. Methamphetamine is taken orally, snorted, injected or smoked. It is also sometimes referred to as: meth, crystal, crank, fire, ice, croak, crypto, glass and white cross.
4. Ecstasy or herbal ecstasy is considered a sexual stimulant and is commonly found at "raves" or large trance dance parties and taken in pill form. It's also known on the streets as: XDC, Xphoria, X, Rave energy, or cloud 9, herbal X, sex-stacy and Adam.
5. Cocaine, crack, codeine and V are all either, snorted, smoked, injected or taken orally. Cocaine, or crack, has also been known to be mixed among other drugs, such as marijuana, to create a substance called a "Primo". Other names for cocaine or crack include crank, snow and nose candy.
6. Hallucinogens, such as LSD, PCP and mushrooms, are all controlled substances. Most hallucinogens can be taken orally, snorted, smoked and even drunk in tea. Students abusing

hallucinogens will display signs of very low motor function including but not limited to: droopy eyes, constant smacking of the lips, maintaining a sluggish gait and frequently nodding off. Additionally, students report that they have frequent out of body experiences on the drug and often experience extreme panic attacks.

7. Marijuana, which is also referred to by nicknames such as chronic, blunt, weed, bud, Mary Jane, or herb, is considered to be the second most widely used drug on college campuses. Aside from alcohol, nearly 65% of student drug abusers smoke or otherwise imbibe in marijuana. Marijuana can be mixed with other controlled substances also commonly used on college campus. For example, dipping the marijuana joint into PCP creates, what is called on the streets, a "A lovely" or "lovely joint". Commonly, marijuana is known to increase appetite causing what many refer to as the "munchies". Additionally, students may have blood shot eyes, dry mouth, loss of coordination and short-term memory loss, just to name a few of the attending symptoms.

Appendix E – BIT Incident Report

To submit a BIT report, go to <https://www.marshall.edu/bit/> and click “Report to BIT”

You will be asked to submit thorough information including the following:

- Report Type – Academic Concern, Medical Concern, Mental Health Issue, or Physical Endangerment.
- Reporter’s Information – It’s important you provide your information so the BIT can follow-up with you as necessary.
- Time, Date, and Location
- Complaint Against – This is where you will identify the individual you are submitting the report about. You’ll also have an option to list Other Individuals who are involved.
- Description – It’s important to be as thorough as possible. This will allow the BIT to address a concern more efficiently. This is a great place to list out a timeline of events, effects of the events, and what your concerns are.
- Upload Files – Here you can upload supporting documentation. This may be an email thread, a picture, a video, etc.

Once you’ve submitted your report, make sure to check your MU Email in the following week in case the BIT needs to reach out for more information. If you have any questions or additions to your report after you’ve submitted it, please call the Office of Student Conduct at 304-696-6422. You can also email the Director of Student Conduct, Lisa Martin, at marstil@marshall.edu.

Appendix F – Helping a Distressed Colleague

A coworker is often first to observe signs of distress or trouble. Be aware of the following indicators of distress. Early recognition, intervention and referral are keys to getting someone help. Look for patterns or changes in behavior, not just isolated symptoms.

When to Be Concerned

- Dramatic changes in personal hygiene, work performance or social behavior
- Isolation or withdrawal, alienating members of their support systems
- Excessive fatigue/sleep disturbance
- Intoxication, hangovers or smelling of alcohol
- Disoriented or seeming “out of it”
- Garbled, tangential, disconnected or slurred speech

Signs and Symptoms of Distress

- Self-disclosure of personal distress, such as family problems or financial difficulties, or talk of grief or suicide
- Unusual/disproportional emotional response to events
- Colleagues expressing fear, concern or worry about a coworker
- Irritability or unusual apathy

Safety Risk Indicators

- Unprovoked anger, hostility or aggressive behavior
- Physical violence (shoving, grabbing, assault)
- Implying or making a direct threat to harm self or others
- Stalking or harassing behavior
- Making threats via email, text or phone
- Extreme anxiety or panic
- Talk of guns or other dangerous, violent topics

What You Can Do

If you find yourself worried or alarmed about an employee who is troubled or distressed, you have resources:

- Contact Human Resources or Ombudsman
- Submit a BIT Report
- Speak with your supervisor or manager

Appendix G – Threat Assessment Checklist

This checklist is designed to be used by the BIT in assessing risks for potential violence by a student who has made a threat (verbally or in writing) or whose actions are suspicious enough that a reasonable person might believe that the student may be prone to violence. This checklist will be used in conjunction with other assessment and intervention tools.

Observed or Known Behaviors

- Has access to weapons
- Appears to have fascination with weapons or explosives
- Is knowledgeable about or has used weapons
- Has history of bringing weapons to school
- Has made recent threats to act out violently
- Has provided evidence of making plans to act out violently, named a specific target for violence
- History of arrests/ convictions for violent acts
- Identifies contingencies that would provoke an act
- Is brooding over an event in which he/she was perceived to be unfairly treated
- Expresses unreasonable feelings of being persecuted by others
- Has experienced a recent life stressor or event
- Appears to be a loner and reveals having no close friends
- Has a history of being bullied or teased
- Does not show concern for legal or personal consequences
- Appears to lack appropriate empathy or remorse
- Has threatening and/or loud speech/ disorganized speech
- Is observed as maintaining prolonged stares
- Is observed with signs of agitation (pacing, clenched fists, etc.)
- Reveals feelings of depression, hopelessness, despair
- Refuses to communicate
- Known to abuse alcohol or to use illicit drugs
- Constantly blames others and refuses to take responsibility
- Identifies with offenders, praises other school violence events
- Engaged in property damage
- Other students/staff/faculty are afraid of this student
- Says they have no options or there is no way out for them
- Appears suicidal
- Prior suicide attempts and self-infliction of injuries
- History of obsessively following or stalking others
- Has thought insertion, someone putting thoughts into their head
- Auditory, command or visual hallucinations
- Diminished self-care (dirty, disheveled, poor hygiene)
- Psychiatric disorder diagnosis
- Gang membership

Behavioral Intervention Team Assessment

- High Risk
- Medium Risk
- Low Risk

References

Behavioral Intervention Team Model. (n.d.). Central Pennsylvania's Community College.
<https://www.hacc.edu/BIT/index.cfm>

Employees in Distress Guide. (2016). University of California, Los Angeles.
<https://ucla.app.box.com/v/emp-in-distress>

University of Arkansas at Pine Bluff. (n.d.). *Behavior Intervention Plan Manual.*
<https://www.uapb.edu/sites/www/Uploads/Student-Life/Behavioral%20Intervention%20Manual.pdf>