

CARES Team

Kaua'i Community College
Spring 2024 Convocation Break Out Session

What is the CARES Team?

- Campus, Assessment, Response, Education and Safety (CARES)
 - Established in Fall 2021
 - Chair- No'eau Keopuhiwa
 - Vice Chair- Isaiah Ka'auwai
- Our college's version of a Behavioral Intervention Team (BIT)
 - BIT(s) were established on many colleges after the Virginia Tech Shooting
- However the team can help with much more...

Mission Statement

The Kauaʻi Community College CARES Team takes a multidisciplinary approach to proactively and collaboratively identifying and assessing students experiencing academic, emotional, and psychological challenges by providing holistic support services. The team provides early intervention and management of situations that may pose a threat to the safety and well-being of our campus community.

CARES Team Membership

- The multidisciplinary team is comprised of representatives from the following:
 - VCSA
 - Title IX Coordinator
 - Case Manager
 - Student Affairs Counselor Representative
 - Campus Security Representative
 - Campus CCMT PIO (Public Information Officer)
 - Mental Health and Wellness
 - Human Resources Director
 - Instructional and Non-Instructional Faculty Representatives
 - OCET/Non-Credit
 - IT
 - Student Life Coordinator

The CARES Process

01 Identify person of concern

02 Gather information and investigate

03 Assess information and situation

04 Manage the person or situation



UNIVERSITY of HAWAII*
KAUAI
COMMUNITY COLLEGE

Ke Kulanui Kaiāulu o Kauaʻi

- UHCC Nondiscrimination Statement
- Kauaʻi Community College is committed to providing all students with equitable access to its programs and services. For disability accommodations, contact our Disabilities Services
- Drug-Free and Alcohol-Free Workplace Policies
- We are Tobacco Free Campus

KAUAI COMMUNITY COLLEGE

[Our Mission Statement](#)

[Campus Map](#)

[College Policies](#)

[Consumer Information and Disclosure](#)

[Cost of Attendance](#)

[General Catalog](#)

[HEERF Report](#)

[LGBTQ+](#)

[Strategic Plan 2023-2029](#)

[Title IX \(Sex Discrimination and Sexual Misconduct\)](#)

[Veterans](#)

INSTITUTIONAL EFFECTIVENESS

[Accreditation](#)

[Grant Development](#)

[Institutional Effectiveness](#)

[Institutional Research](#)

[Marketing & Outreach](#)

[Prior Learning Assessment \(PLA\)](#)

[Program Review APRU & CPR](#)

[University Center](#)

ADDITIONAL RESOURCES

[Alumni](#)

[Campus Safety](#)

[Evacuation Areas](#)

[Job Opportunities](#)

[Report a Person of Concern](#)

[Report a person of concern - Hale Malama - Mental Health Support Services](#)

[Title III Grants](#)

[UH Community Colleges](#)

[UH Foundation](#)

[UH System](#)

Not sure if you need to submit or just prefer to “talk story”?

Let’s talk about it (In Person)

One Stop Center

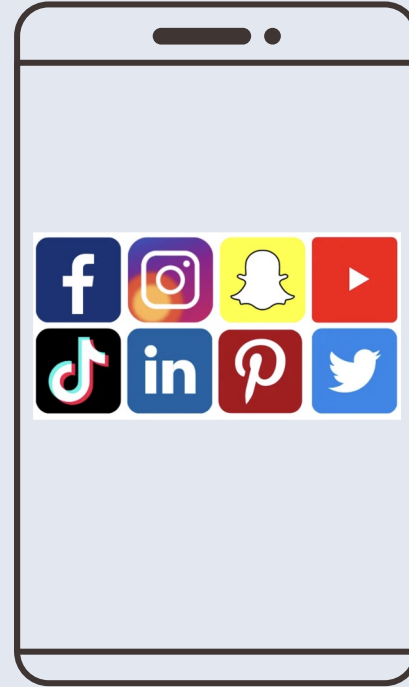
- No’eau Keopuhiwa
- Isaiah Ka’auwai

Library (Hale Mālama)

- LaRise Nebre
- Brian Kohatsu
- Jie Shen

Gathering Information

- CARES Report
- Social Media Platforms
- Public Records
- Student's Transcript
- Emails to campus
 - FERPA Violations?



How do we assess?

National Association for Behavioral
Intervention and Threat Assessment
(NaBITA) Risk Rubric

Behavioral Threat Assessment and
Management (BTAM)

NABITA Risk Rubric

D-SCALE

Life Stress and Emotional Health

DECOMPENSATING

- ▲ Behavior is severely disruptive, directly impacts others, and is actively dangerous. This may include life-threatening, self-injurious behaviors such as:
 - ▲ 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:
 - ▲ Repeated, severe attacks while intoxicated, brandishing a weapon
 - ▲ Making threats that are concrete, consistent, and plausible
 - ▲ Impulsive stalking behaviors that present a physical danger

DETERIORATING

- 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 cause physical harm, but are disruptive and concerning

DISTRESSED

- 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:
 - 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

DEVELOPING

- ◆ 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

↑ TRAJECTORY?

OVERALL SUMMARY

CRITICAL

In this stage, there is a serious risk of suicide, life-threatening self-injury, dangerous risk taking (e.g. driving a motorcycle at top speed at night with the lights off) and/or inability to care for oneself. They may display racing thoughts, high risk substance dependence, intense anger, and/or perceived unfair treatment or grievance that has a major impact on the students' academic, social, and peer interactions. The individual has clear target for their threats and ultimatums, access to lethal means, and an attack plan to punish those they see as responsible for perceived wrongs. Without immediate intervention (such as law enforcement or psychiatric hospitalization), it is likely violence will occur. There may be leakage about the attack plan (social media posts that say "I'm going to be the next school shooter" or telling a friend to avoid coming to campus on a particular day). There may be stalking behavior and escalating predatory actions prior to violence such as intimidation, telegraphing, and "test-runs" such as causing a disruption to better understand reaction time of emergency response.

ELEVATED

Behavior at the elevated stage is increasingly disruptive (with multiple incidents) and involves multiple offices such as student conduct, law enforcement, and counseling. The individual may engage in suicidal talk, self-injury, substance intoxication. Threats of violence and ultimatums may be vague but direct or specific but indirect. A fixation and focus on a target often emerge (person, place, or system) and the individual continues to attack the target's self-esteem, public image, and/or access to safety and support. Others may feel threatened around this individual, but any threat lacks depth, follow-through, or a narrowing against an individual, office, or community. More serious social, mental health, academic, and adjustment concerns occur, and the individual is in need of more timely support and resources to avoid further escalation. Conditional ultimatums such as "do this or else" may be made to instructors, peers, faculty, and staff.

MODERATE

Prior to this stage, conflict with others has been fairly limited. The hallmark of moderate is an increase in conflict with others through aggressive speech, actions, and mannerisms. They may become frustrated and engage in non-verbal behaviors or begin to post things on social media, put up posters around campus, or storm away from conversations. Stress, illness, lack of friends, and support are now becoming an increasing concern. The individual may be fearful, sad, hopeless, anxious, or frustrated. This may be caused by difficulty adjusting, dating stress, failure in class assignments, and/or increasing social isolation. If there is a threat or physical violence such as carelessly pushing someone out of their way while storming off, the violence is typically limited and driven by adrenaline and impulsiveness, rather than any deeper plan to hurt others.

MILD

The individual here may be struggling and not doing well. The impact of their difficulty is limited around others, with the occasional report being made to the BIT/CARE team out of an abundance of caution and concern rather than any direct behavior or threats. They may be having trouble fitting in, adjusting to college, making friends, or may rub people the wrong way. They alienate others with their thoughts or mannerisms, and there may be minor bullying and conflict. With support and resources, it is likely the individual will be successful adapting and overcoming obstacles. Without support, it is possible they will continue to escalate on the rubric.

BASELINE



E-SCALE

Hostility and Violence to Others

EMERGENCE OF VIOLENCE

- ▲ Behavior is moving towards a plan of targeted violence, sense of hopelessness, and/or desperation in the attack plan; locked into an all or nothing mentality
- ▲ Increasing use of military and tactical language; acquisition of costume for attack
- ▲ Clear fixation and focus on an individual target or group; feels justified in actions
- ▲ Attack plan is credible, repeated, and specific; may be shared, may be hidden
- ▲ Increased research on target and attack plan, employing counter-surveillance measures, access to lethal means; there is a sense of imminence to the plan
- ▲ Leakage of attack plan on social media or telling friends and others to avoid locations

ELABORATION OF THREAT

- Fixation and focus on a singular individual, group, or department; depersonalization of target, intimidating target to lessen their ability to advocate for safety
- Seeking others to support and empower future threatening action; may find extremists looking to exploit vulnerability, encouraging violence
- Threats and ultimatums may be vague or direct and are motivated by a hardened viewpoint; potential leakage around what should happen to fix grievances and injustices
- There is rarely physical violence here, but rather an escalation in the dangerousness and lethality in the threats, they are more specific, targeted, and repeated

ESCALATING BEHAVIORS

- Driven by hardened thoughts or a grievance concerning past wrongs or perceived past wrongs; increasingly adopts a singular, limited perspective
- When frustrated, storms off, disengaged, may create signs or troll on social media
- Argues with others with intent to embarrass, shame, or shut down
- Physical violence, if present, is impulsive, non-lethal, and brief; may seem similar to affective violence, but driven here by a hardened perspective rather than mental health and/or environmental stress

EMPOWERING THOUGHTS

- ◆ Passionate and hardened thoughts; typically related to religion, politics, academic status, money/power, social justice, or relationships
- ◆ Rejection of alternative perspectives, critical thinking, empathy, or perspective-taking
- ◆ Narrowing on consumption of news, social media, or friendships; seeking only those who share the same perspective
- ◆ No threats of violence

↑ TRAJECTORY?

Managing the situation

- Person of concern is receptive to the support given and changes are made/noticed
- Person of concern is not receptive to the support and behavior continues
 - What does this look like and what can you do?
 - Baseline behavior
 - Your norm vs. my norm
 - Disruptive behavior
- The report does not have enough information so it is stored as a FYI or “breadcrumb”

**Majority of the time, the person submitting
the report will only get a confirmation
message from the team stating that you
received the report, it is unlikely that the team
will communicate what happened next**

...so let's talk about this

Common Misconceptions

- I was not informed if someone reached out to the student and assumed nothing happens because things like this happened before
- The student is still here and I don't know why
- This person still acts the same way, submitting was a waste of time
- The college only cares about the student, they are not concerned with my safety or sanity
- I don't want to submit because I don't want to get that person in trouble
- I just think that person had a bad day, I didn't want to rat her out

**Mahalo for helping us
create a safe space for
everyone to thrive!**