

CU Anschutz FaST and C.A.R.E. Teams

Toolbox Series Video Transcript

My name is Allen Abbott. I'm an organizational development consultant inside Central HR and the CU Anschutz medical campus.

And I'm pleased to present our speakers for today starting with Jan Gascoigne.

she earned her PhD in curriculum and instruction with an emphasis in health education from Kent State.

And she is a master certified health Education specialist.

She currently serves as the Associate Vice Chancellor for Student Affairs at CU Anschutz and is associate professor in the Colorado School of Public Health. As associate vice chancellor she oversees portfolios of student engagement student health promotion case Management the Care Team Phenix Center Student Government and collaborates closely with all of the schools colleges and programs on the CU Anschutz campus to co-create an exceptional student experience.

Prior to her role as Associate Vice Chancellor Doctor Gascoigne served as the associate Dean for Student Affairs in the Colorado School of Public Health and taught the foundations in public health and practicum courses. Previously she served as the Director of Health Promotion at the Bacchus Network a national nonprofit that promotes health and safety for college students.

She authored and led centers for Disease Control and Prevention grants focused on the elimination of tobacco use the prevention of HIV and the reduction of alcohol abuse in the college age populations. Then we have Adrienne Howarth Moore

she is the associate vice chancellor of human resources and chief human resource officer for the University of Colorado

Colorado Anschutz Medical Campus. Beginning way back in June of 2023.

Along with me she holds a bachelor's degree in nursing from UT Austin as well as an MBA from Texas Women's University.

She's a licensed registered nurse and a former certified occupational health case manager and Certified Occupational health Nurse specialist. Prior to joining CU Anschutz

she served as Associate Vice President and Chief Human Resources officer for the University of Texas at Austin.

In that role she oversaw 70 HR staff members and program serving 20000 employees

including talent management learning and development benefits employee assistance faculty and staff

Occupational Health and Wellness program.

Adrienne's experience includes a unique and extensive clinical background with areas of focus such as health and welfare benefits plan design

retirement programs workers compensation diversity equity and inclusion

work anti-discrimination practices workplace safety and threat assessment

expertise and labor and employment and privacy laws.

And finally bringing up the rear. Chief Randy Repola.

Chief Randy is the associate vice chancellor and chief of police for the CU Anschutz Medical Campus.

The police department is comprised of four divisions Police services electronic Security and Emergency Management and Preparedness and Support services.

Chief Randy has been at CU Anschutz for six years and served five years with CU Boulder Police Department as Deputy Chief of Police.

The chief has a B.S. in economics and an MBA both from Colorado State University which we will not hold against him.

Please help me in welcoming these three talented and dedicated professionals as they help us learn more about the CU Anschutz behavioral risk and threat assessment teams.

Thank you very much Alan. And thank you all of you for joining us.

We are just so excited that you're here despite the fact that it's the first day of food trucks being back on campus.

So you are truly a dedicated community.

just as a point of order I do want to just acknowledge that the content that we're going to be discussing today can be upsetting for individuals depending on your background and your experience. So just please know that we take that seriously.

And we recognize that although as practitioners in this work sometimes we will introduce bits of humor and different kinds of examples. just because it

helps to add some levity to a very serious topic that can be upsetting to some.

also wanted to just mention as a point of order when we get to our question section we will happily answer questions as time permits.

But if you have a question that is special and unique to your circumstance we would request that you not ask it in this public forum to protect privacy that instead you would reach out to us separately following the presentation.

and that questions remain kind of more at large based questions so that we can protect your privacy.

So with that I want to go ahead and get started in our topic which is our behavioral intervention teams specifically our care team and our fast team.

But before we do that I do want to go ahead and just ask Chief Repola to come up and just share with you some of our overarching safety provisions that we're doing every day on our campus.

Chief. Thank you Adrienne and thank you all for being here.

For those of you that are in zoom land I'm not sure where the camera is.

Good to see you.

And well we're going to talk a lot about with behavioral and mental teams.

What they do is threat assessment from a campus perspective.

We're trying to manage or mitigate threat on a daily basis.

Some of the the variables or the resources that we use to do that. Number one is we have a dedicated police department 24/7 we have a support

services team that's managing a dispatch and alarm monitoring location 24/7.

And then we have police officers available to respond anywhere on campus at any time of the day. So we're very proactive and providing resources to our campus to respond to identify and address either issues of concern or on occasion a threat.

Similarly or maybe to complement that we have access control buildings. We've been in an access controlled environment since about the time that the pandemic hit.

what are we now? A little over four years ago. And then coming out of the pandemic we found that we experienced reduction in certain certain sorts of property crime by having our buildings or most of our buildings as access controlled.

And of course there are many locations. While the building might be badge access it doesn't prevent other users from getting into the building but it does limit the ability of someone who maybe has ill will or some other adverse intentions from getting into the buildings.

So we continue to stick with the very I would say proactive access control posture in order to mitigate the access to the buildings. And then the last piece that we don't necessarily do but through collaboration with university communications they are always monitoring social media.

a lot of their the primary role for their social media monitoring is just capturing references to CU Anschutz in social media and then the news.

It also has helped us at times to identify issues of concern that pop up on social media.

When that happens they notify us. And then ultimately whether it's through social media or a police report if something involves a student faculty or staff member that indicates an issue of concern with that person we then send reports to the two teams that you're gonna hear about here shortly. it may be a matter of just sending the report over to the care team or the fast team or it could be at two in the morning on a Friday that there's an issue of concern that we'll call people wake them up and begin the process. You'll hear a little bit more about this morning. So we thought it was worthwhile sharing that.

While we'll talk a lot about threat assessment

We try to position the campus so that we can manage threats or manage issues of concerns more proactively.

Adrienne back to you. Thank you chief.

And I'm actually going to ask Jan to come up and join me. We're going to do a little bit of a tag team here.

And kind of just the beginning of this presentation is just to kind of articulate the two teams that we have on our campus that have a primary responsibility of thinking about threat and threat assessment.

And so those teams include our fast team which has a primary focus of our faculty staff postdoc resident fellow or unaffiliated individuals.

So when I say unaffiliated meaning they have no relationship to the university that we're aware of that for whatever reason they may be targeting a member of our university community or the university itself. And then we have our care team which has a primary focus of students. So Jan what about the care team? So thanks.

Thanks everyone for being here. So our care team really we have it. And it serves as a mechanism really to coordinate and communicate across our campus.

As you all know we're siloed somewhat into schools and different departments.

But in order to do this work well we need a hub and a place for all of this work to fall into so that we can really understand where and what is happening with a distressed student or a student who is exhibiting disturbing behavior and has a potential to really threaten the well-being and safety of campus and or their own.

If we're worried about students who maybe have suicide ideation or something like that.

It also is a chance for us to really take the university's resources and really focus our students and their efforts around student success health and well-being and being proactive ensuring that we identify if a student struggling or in trouble and we get to them as soon as possible because our goal here and our mission is to get students right back into the classroom and into their academics and moving forward and thriving.

And I'll pass it over to Adrienne to describe why we have the HR team the past team.

So so much of what Jan just shared is also relevant for the employee community.

But there are some unique differences. And so that's why our team and we're going to talk about our team make up in just a little bit.

But that's why it's important to have two teams that have shared disciplines.

But there are differences that are unique to the employment setting.

There's different kinds of interventions that are available to employee populations that may or may not be the same for student population.

And so we want to have specialists on each of those teams that understand the audiences that they're serving.

And so one of the things I always just like to point out because especially you see it in the news and media when we do have tragedies that occur in educational settings whether it's K through 12 or it's higher education is there's an emphasis on this was a campus event.

And what I always try to explain is those campus events are also workplaces.

It may be a third grade teacher. Yes.

That is a school that is for the student experience their educational setting.

But for that third grade teacher that's the workplace.

And so that's kind of the balance and why we have two different teams so that we can focus in those ways.

So when we think about our team makeup you can see the fast team is a little bit skinnier.

And so we include members from our HR organization our School of Medicine.

We have a psychiatrist that sits on our team. We have university legal counsel.

We have the Office of Equity and then we also have university police.

Jan what about your team? And so what I also would share is oftentimes you know our campus people intermix.

So we have students that are also working here or students that might have a situation with the faculty or a staff.

So although we're separate teams we also have some crossover.

And where we see that crossover on these teams is with the university Council.

So the legal team is the same person who's on the fast team is on the care team.

And also with our police we have our police department representatives that share the information so that we have those consistencies.

If we have a situation that you know maybe starts with an employee but has a student involved or likewise if there's a it's primary person is a student but there might be a faculty and staff and our team is a little bit bigger.

We really try to collaborate across the schools.

So we have an identified dean of students from one of the school that serves for 2 to 3 years and then that rotates around the schools.

We have our case managers that are housed in our Office of Student Affairs.

We have the university police we have a representative from student and resident mental health and that representative is someone who is assigned to work with our group but is not someone who is teaching students.

Because one of the things we also want to make sure is that the.

Place that we have for people to come doesn't have any crisscross of duties.

So a student wouldn't walk into a classroom and then have been at a care team with the person who might be teaching them.

we have university council. any other campus partner that might make sense?

we might have a student that's a veteran so we might have veteran and military student services there. so we really try to understand.

Or we might have a student that has a disability and the accommodation is part of how we need to think about our wraparound for that student.

We have the Office of Equity. and then we also have that when the student comes to a case management or a care report we also work with the dean in that college or school so that they also know what's going on and can help us navigate what's happening with the student and also what's happening with their academic their courses or their clinical rotations.

And how do we make this as seamless as possible as well as make sure that we're keeping everyone safe in the situation? Thank you Jan. So in terms of training.

And so this is just something that's again when you do this work

I don't think any of us when we were growing up said we want to grow up and be threat assessment professionals.

Right. It's just not something that you tend to think about from your career trajectory.

So it's really something that based on your area of expertise multidisciplinary approach is definitely considered the best practice.

And I think we just articulated that when you saw the teams make up. So we're including multiple different disciplines in our teams.

But we want to make sure that everybody has a level set and a solid foundation in threat assessment principles.

And so for both teams we really do focus on an organization called NaBITA.

And so all of our team members go through NaBITA foundational training.

And then from there based on their area of expertise they may do deeper dives.

And NaBITA has additional trainings that do that. And so we rely on the NaBITA tool.

We rely on looking at the sharp assessment for sexual I'm sorry for stalking and harassment cases especially in the social media realm which that can occur.

And then we have regular interaction with our local and national experts in these fields.

So depending on the case or circumstance we may pull in those external resources.

So as Jan mentioned we can really do a holistic and a wraparound service for that particular case.

I'm going to ask Jan to just kind of go through a little bit with that in the NaBITTA risk rubric looks like.

And so this risk scale is one of the things that both of our teams use. So as we get a care report for a student as you get a report in the fast team we start to take a look at what's happening and where might that person lie on the scale. And what that does is allow us to do what's the baseline behavior or what's happening baseline.

And then as we work with the student we may see their behavior escalate or we may say see it stay the same.

And then as reports come in if we continue to get reports we have an idea of where that person is.

And so we're really looking at two areas. One is life stress and environmental health.

That's on the D scale. And you can see the different levels as they go up. Some of the different rubric pieces help us determine are they really at a lower level.

It's developing. Something's happening. What resources can we get them to all the way to decompensated.

And when that gets at that level we really are doing some different things.

And then you'll also see on the E scale which is a scale that that determines violence levels.

We're looking at both of those to determine where they are.

And we have a mild moderate elevated and critical area.

And so the care team is watching these the case managers and the student and is watching these as well.

And we really encourage and want as many reports as we can because it helps us pinpoint and think about who that student is and what their behavior is and where we're at in the scale.

And then what are the best ways that we can support that student and the people around them?

And one thing I just want to mention about this scale in particular is that this is not a predictive model.

This is a tool for assessment and the assessment is good for the day the assessment is done. Because the very next day new information may come in that may adjust that assessment and result in different interventions.

And so we as threat assessment professionals never want to say that we can assess the situation and predict what the outcome will be.

Instead we're looking at what are those indicators.

Let's create some interventions that are appropriate based on where they are.

And we will continue to adjust our interventions as we're working through the case.

So I'm going to turn it over to Jan here for the next several slides.

And she's going to take a little bit deeper dive into the care team and its function.

So the first thing I want to say about the care team and we get this as a question quite a bit is will the student get in trouble?

So the care team and our case management is not designed to be punitive. It really is designed to identify when students are struggling and where they might need help.

And so our spectrum of care really starts with case managers and really assessing what's going on with the student.

And then if the behavior is escalating in any way where there's a threat to campus or a threat of individual harm that's when will go to the care team. So we have a lot in front of the care team.

But one of the things we want to talk about is you know this is an example of one of the school shootings.

And one of the things that that folks said when they went back and reviewed what happened at parkland is they said at least 30 people had knowledge of Cruise's troubling behavior before the shooting that they did not report and they had information that they reported but it was not acted upon.

So one of the things we really want to encourage everybody is if you have a concern about a students faculty staff postdoc any of them we would like for you to reach out.

And that means either submit a report or if you're like I'm not sure if it's like we need a report please pick up the phone and call us because we want to identify where someone's struggling and then really make sure that we're helping them.

And again I want to focus on it's not punitive when a student gets reported to the care team.

This is about identifying someone that is struggling and making sure that we wraparound and provide support.

And so how we have our care team set up is kind of like an air traffic controller

in that we have folks who identify a student that's struggling.

It comes into our care report. So when you submit a care report it comes into our case management team.

And Carl Johnson who's our assistant vice chancellor of student affairs and our dean of students it comes in to his team himself and his team. There are five of us that get that report via email.

And when we get that report we know who's going to identify who is going to reach out to that student.

And we really typically try to reach out to that student you know within the next couple hours.

If we get it we say that the report is we're available from 8 to 5.

To be honest with you once we get that report it pings us.

So if we get it at midnight like the chief said we will take a look at it and say oh this person needs some help immediately.

If they do we're going to you know once we see it we're going to go and get them help.

But 8 to 5 is really what we say. If you have somebody who is in a very you know high level of risk or threat we would ask that you call 911 but we are monitoring those case reports all the time.

So just so you know they're not they don't sit there very long because there's about 5 or 6 of us.

So even if someone's on vacation someone else is going to see it. But once that report comes in and we take a look at it and we meet as a care team we start to think about what's going on with this person what kind of response support might they need?

These offices that are the little planes flying out our disability our title nine or human resources.

We don't have residence life.

But is there an apartment complex close by where they are our legal our academic support our counseling support and we start to identify what are the resources students need and then how do we get them connected to those resources.

We really think about our work as a continuum of care.

And so we think about our student who's in the middle.

And our student might be isolated and and not actually have any support from anyone.

That's a student we are concerned about. We make sure that they're connected in some way.

So a student could report themselves. And we do actually have students that report themselves and submit a care report for themselves.

They also are surrounded by their peers and their family and their close friends or their roommates.

And those are folks that also may submit a report and say hey I'm worried about my roommate.

Here's something that happened.

we have our faculty our staff our PI our lab folks who often submit reports and we may get reports from each one of these layers. and then we have a campus wide community.

We may have a student that acts out in the library and we get an email from the report from the library.

So we look at all of these areas we reach out to folks and do care team presentations all the time because we want people to know submit a report so that we can start to identify what the behavior is because there may be a student who is failing in a classroom. Acting out in the library and at home. I'm not getting along with roommates so there's a lot of little points of information then that help us figure out what the next step is.

Our care team is tied with our Office of Student outreach and support. And I've been talking about our case managers a lot because that's really where we begin when we are thinking about how we best support students.

We have 4.5 case managers on our campus and they do a lot of work around campus wide education awareness.

So training our faculty and staff on how do you identify a student that may be struggling what are first steps that you can take and then how does case management work.

So we demystify what's happening. And then we work on wraparound services.

So the student comes in we can really figure out they're failing the class. But we might find out as our case managers talk to them that they're food insecure.

We have a food pantry. Or they might have gotten in a car wreck last week or lost their laptop or it got stolen and they're scared and don't know what to do because they don't have the money to figure out how to move forward.

So we have an emergency fund that can support students.

they may be struggling in the classroom and may need more academic advising or they may have a disability where they need an accommodation but they've been afraid to ask for it.

So we really with the case managers sit one on one with students and try to understand what's happening and get them the resources we need. Our case managers also serve as student advocate.

So if we have a student that has an issue within the school they may go with the student to a professionalism or to a conduct meeting or to a meeting with a faculty or to a meeting in the labs if there's some kind of disagreement happening there.

So our goal is always to de-escalate and reach students at the beginning points of this so we can start to work it out and open those lines of communication so it doesn't escalate.

We also do faculty consultation so that we have faculty say at home

I have a student in my class or a student who is in a clinical rotation and there's something just not right or I'm worried about this.

Can I have a consultation with a case manager to talk with them about what's going on and to get guidance of the best way to support the student?

We do ongoing monitoring of the student cases.

So once we have a student in our case management they're assigned a case manager who sticks with them and who touches base.

If students say hey I'm doing good I'm back on track. We may still touch base in three months and say hey I'm just checking in.

How's it going? If we have a student that's still escalated we might have more weekly check ins or biweekly again on a case by case basis.

But once a student is assigned a case manager we really have that person stick with them so that we can ensure that that student succeeds.

We also do our case managers do a ton of conflict coaching.

So as you can imagine and as I'm sure you experience to there's situations where students disagree with another student.

They disagree with the faculty member they disagree with their PIs.

And we do a whole presentation actually on generations and how disagreements sometimes pop up because we have different generations on campus and we have different expertise on campus and our students come with sometimes awkward ways of asking curious questions that sometimes offend faculty.

But neither side really wanted that to happen.

And so we can de-escalate and do some coaching around what's really going on here and help people have conversations.

We want to do that. And then we also have restorative justice practices.

Again depending on the situation of what happened these are all preliminary things that we do to try to de-escalate situations so they don't rise to the level of an individual having suicidal ideation and or to a threat to campus or a campus community.

And then our care team is really we call the care team.

We have a meeting scheduled for every Thursday.

But we call the care team when we really think there's someone who poses a safety risk to themselves or to others.

And that care team meets either on that Thursday.

And to be quite honest if we get a report and we're worried about somebody that care team is probably going to meet within an hour so that we can figure out what's happening what's the plan who's going to contact the student?

Do we need to have the students stay off campus for a day until we talk to them and understand what's happening?

So it it has a weekly meeting but it also is something we will call depending on the situation. And the regular meetings we don't always meet because quite frankly we have really good partnerships with our case managers with the schools with the PIs.

And often we catch students way earlier than any threat type of behavior.

And we're working with them before that happens. And like I said we may have ad hoc meetings because of an urgent case.

We also have maxent which is where it's a secure case management reporting system. So that is where the case the care report will come into and then we will document the rubric that we showed you a little bit earlier where where that students risk is.

And then our case managers will also document the conversations they've had of faculty.

Send us an email or their roommate send us an email.

We have a whole case file so that we can ensure that we're really paying attention to what's happening with the students.

We can also talk about here's the things we've tried to support that student. And then we can come up with other further ideas as needed.

and as we described earlier we utilize the NaBITA threat assessment rubric. and then we develop that intervention plan really based on every individual situation and we develop it in collaboration with the schools.

So there is it's not it doesn't come into a vacuum and nobody knows what's happening. We work hand in hand with the deans of students in the schools and the faculty and I want to put an asterisk there as sometimes people want to know like every detail of what's happening.

That's not something we can share.

But we are working hand in hand with the deans of students to ensure that we're making some we're making plan that also matches the academics that need to happen or the clinical rotations that need to happen or if a

student needs to take a leave because they're not going to be able to meet that.

We want to make that as seamless as possible.

but what we always say is if you submit a report you're going to get an email back that says thank you we've received it.

And we do have a number of people monitoring those.

And if at the end of the day you're like I wonder what happened or I don't feel like I know what's happening.

You can always give a call to our office. and we can say hey we're working on it.

But there are you know some privacy things that we have to keep.

So we're happy to receive a call if you want to check up on something.

But we can't guarantee you'll get a lot more information than we're working on it.

Or we have a plan or a solution that's moving forward.

our care team intervention tools. Like I said we really rely heavily on our case managers and outreach.

Each student also has an emergency contact within their student record.

And so if something escalates we can't find a student.

We don't know where they are. We haven't heard from them. They're not showing up for class.

typically what will happen is we'll send an email to the student and say hey we've been trying to contact you for whatever amount of time.

If we don't hear from you by 5 p.m. today we're going to call your emergency contact.

And I will tell you 99.9% of the time someone calls and like I'm okay I got it. and they're dealing with something else but but we will call the emergency contact or we will call a welfare check if we're concerned and can't get ahold of somebody. We have our crisis intervention team and then we have very strong partnerships with the school's college and programs and faculty and staff that work with them.

We also have outside threat assessment folks who can help us.

So we if we're really concerned about someone's behavior we will reach out to one of these outside groups here the Aurora response team. I always get it wrong but they've been amazing.

And what we're able to do with them or a private consultation is we can send them our students of the behaviors that we're seeing what's happening the interventions that we've taken and then they as an outside perspective can tell us yes these are the right things.

Or I would add this or you know here's an area that if you see it escalate like this this is what we'd like you to do.

So they've been amazing resources for us.

And we're really lucky to have them as partners.

And then we continue with the ongoing case management our case management. our counseling center is through the Department of Psychiatry but we try to do an open conversation with them if the students will sign and allow us to be part of that.

and then you know at the very extreme if we really need to we work with the police and we can do an exclusion from campus.

And really what I will say is on the student side what we mainly see are if it escalates at all to this level is really around self-harm.

We see very little of anything that is really threat to the campus and both of them obviously are extremely important.

But in terms of campus safety it is typically more around self-harm than anything toward our campus.

So I'm going to pass it over. are we taking questions or till the end?

We'll take questions at the end and I'll pass it over to Adrienne to give an overview of the fast team.

Thank you. Jan. And so. Fast team.

So we talked a little bit earlier about the distinction between a campus environment and a workplace environment.

In our setting as a university we are both. And so when we think about the type of workplace violent situations that can occur in the workplace there's actually some models that talk about these. And kind of there's types one through four. And we see all of these kinds of situations that can occur on a campus as large and vast as we are.

So for example when we think about type one which is where there's an external individual who has no legitimate relationship to our campus and yet they may be seeking to cause harm such as a robbery.

Well we have individuals on our campus that accept cash. So you know tuition exchanges money.

And so we have cash handling on our campus in a variety of locations. And so these are the types of risks that we're assessing on an ongoing basis.

We can have type two type three and type four.

I'm going to talk a little bit about type four because that's the type of situation where the individual is external.

They have no legitimate relationship to the university. And yet they do have a connection to a member of our community.

And And this is especially the case when we think about domestic violence and interpersonal violence and how it can spill over into the workplace.

So for me I'm really keen in this area of study and training because I had a personal incident where very early in my career

I was responsible for providing emergency services to a very large organization.

I was a certified first responder in addition to my role as a nurse and I was radioed because I carried a radio at that time had a backpack emergency backpack and I was radio that there was someone down in the parking lot.

And when I responded it was a shooting incident.

And although I had seen multiple individuals die in my nursing career it was still very jarring in a work setting to experience that situation.

And unfortunately it was two coworkers.

They were married they were having a lot of challenges and the victim was attempting to leave the relationship.

When a victim is attempting to leave a relationship that is the highest risk opportunity in that situation.

And this individual had sought resources. She was given two weeks off with pay so that she could make arrangements to relocate to a safe location.

She had already relocated her children.

However she came back to campus because the campus had a credit union and that's where her money was and she needed to withdraw funds.

Her partner was waiting for her knowing she would need to withdraw those funds.

And that's where the incident occurred is in our credit union parking lot on our campus.

So I from that experience that's how I got really heavily involved.

And in the workplace situation when we're talking about employees.

Workplace violence is very often tied to domestic and interpersonal violence.

And so as Jan described that self-harm may be one of the larger areas of work on the care team.

I will tell you that interpersonal and domestic violence tends to be the area of focus for the fast team.

So it's not that we don't have self-harm we do. But our kind of our highest risk in volume of cases tends to be in this interpersonal violence area. So we have a continuum of incivility that we refer to.

And so these are the types of behaviors that as Jan mentioned we're not expecting you to leave this presentation today feeling equipped that you can be making these assessments.

Instead we want you to walk away from here if for nothing else to just know that if something makes you uncomfortable report it.

Because there is a continuum. And so it's okay if your report does not result in triggering the care team or the fast team but instead someone from the care team or fast team because it's multi-disciplinary will appropriately refer that concern to an area on campus that can help mitigate those worries.

And so again that's what we want you to focus on is there's a continuum of concerns that may be occurring with students or with employees.

But if you feel unsettled about it go ahead and make the report.

Don't worry about overreporting. We will help you walk through that and we will help get that individual to the resources that they need.

So thinking about our intervention tools some of them are very similar to the ones that you saw with the care team but some of them are uniquely different. And so we kind of have them staged in different areas.

So one of them is managerial. Sometimes the reports that we receive again don't rise to the level of an actual fast threat assessment case.

Nonetheless they are disturbing and they're concerning in the workplace.

And so the approach may be managerial that we're going to coach the supervisors and the managers of the department about how we can go ahead and ensure that those Behaviors don't continue in the workplace because they're disruptive and it can occur from something as simple as a

coaching session with the employee all the way to something as significant as removing them from the workplace for an administrative leave for further investigation or actual separation from the university.

When it comes to discipline I know Jan really emphasized that the care team is not punitive.

It's not a disciplinary body. I will share with you.

The same is true for the fast team. The fast team itself does not determine discipline. However there are workplace policies and codes of conduct and so some of the behaviors reported to the fast team may have their own investigation that results in the identification of a violation of a campus policy.

And the bodies responsible for determining discipline will be notified.

And they will individually assess that situation and they will determine disciplinary action.

But we will still partner closely with them because when you issue disciplinary action that in itself can be a triggering event.

And we want to make sure that we have thought through how that message will be delivered so that we can ensure that we're doing it in a thoughtful way and in a way that is de escalatory rather than escalatory.

So we also have behavioral and mental health interventions for our faculty and staff.

So we have a lot of resources on our campus that we want to refer people to.

Jan mentioned some of them on the student side and some of those very same resources apply for staff and faculty.

We may do a referral to our employee assistance program for counseling at no cost.

We may talk to an employee about leave of absence options both through the FMLA which is federal and through the new FAML I program.

And that FAML I program in particular has provisions for safety planning for individuals experiencing domestic or interpersonal violence.

So you don't have to be quote ill in order to use FAML I.

If there is a safety sensitive situation FAML I is applicable and we can help walk a client through that.

And then there's also law and civil enforcement procedures. Again CUPD is a wonderful partner on our teams.

And so as we're continuing to assess the case and as new information comes in we may have determined initially that the only action is monitoring.

But as we're monitoring and we're now maybe in month three or month four maybe the behaviors have escalated maybe the volume or the number of emails has increased. Maybe the content of those emails or text messages or social media posts have changed.

And so our CUPD team is able to help us determine we may have just triggered a now a criminal case and then they can work on that side.

So what are some of the key takeaways from our presentation? I just wanted to touch on a little bit about some of the limitations.

We mentioned earlier that threat assessment does not predict the future.

So we really are thinking about what can we do to mitigate risk.

But we're constantly assessing and monitoring and adapting our approach because we don't want to assume that because everything was fine last month that it continues to be fine this month.

So that's why we will monitor cases in some cases for years especially on the employee side where we may have someone that's with us that again I'm just going to use the example of domestic violence in a marriage or in a relationship a partnership where children are involved even though you may have separated yourself legally and from a housing perspective you may continue to have a shared relationship with that individual as long as there's children or minors.

And so we may be monitoring a case for ten years because of the risks that are involved. So that's going to be one of those limitations. As Randy mentioned earlier chief Rapola we can value privacy and we do our best to only share on a need to know basis but we cannot guarantee confidentiality. There are some reports that we receive that we have obligations to report and so we are always trying to make sure that we're informing our reporters and our audience of those limitations so that they're aware of what we're required to report and what we can keep private or confidential.

And then another factor is not all troubling situations are actionable.

And so this kind of speaks a little bit to what Jan mentioned about sometimes you may be a reporter and you maybe haven't heard something back.

And so you're thinking to yourself is something being done?

So first there's that privacy perspective we may not be able to share back with you all the information.

But there's the other situation where once we've assessed it it may not be actionable in the sense that something can be troubling but it it can be protected speech.

And so the fact that they're saying it they may be allowed to say it.

Now again we're going to assess to determine if there's any campus policy that's been violated. And we may be able to take action from a campus policy perspective but especially if this is an outside individual that is sending disturbing or disruptive emails text messages or social media posts they have a right to free speech.

And unless it triggers certain things such as direct threat behavior or harassing behavior it may be that our action is to monitor.

And that can be unsettling for somebody who's reported the concern.

So you are not alone. As we mentioned earlier we are not expecting you to be in the role of making the assessment or determination.

But what we are asking you to do is to help be our eyes and ears.

You are seeing the students in their student setting.

You are seeing your coworkers in the work setting. And so as you see and hear things.

Remember if it makes you have concern if it puts that little prickle up your neck please report it.

We want to partner with you and help make sure that we get the resources that are needed to support those individuals and to help them de-escalate or address the situation appropriately.

So in summary, we're not asking you to be the expert. We want you to be aware and feel empowered to report any concerns. Our teams are here to support you and ensure that we are creating a safe and supportive environment for everyone in our campus community.

Thank you for your attention today. We will now open the floor for questions.

Yeah. I was curious about your relationships with some of the local police departments.

I'm thinking like something happens off campus or outside of regular hours, and it has the potential to bleed, maybe onto campus somehow.

How do you guys know about that? Or even the other way around?

You've already been involved with somebody on campus, and then something happens off campus.

How do you guys make sure that you're coordinating so that they know that you guys are already involved?

So probably the easier of the two is when something happens here and they live off campus.

We become aware of it actually. Maybe the more common occurrence is a concern about, a community member off campus.

Maybe it's their welfare.

So if it's not within our jurisdiction and our officers have jurisdiction, what basically was the, the Fitzsimmons campus at one time?

We'll take the initial report.

We'll reach out to that other agency, and let them know what we're experiencing or what's been reported to us, and ask them to make contact.

A lot of times it's a welfare check if it's criminal in nature, we'll more than likely try to connect the reporting party, the individual that's come to us and shared a concern that maybe it's harassment or stalking to connect them with that other agency because they're going to pick up, the criminal investigation to go forward.

99.9% of the time, we're still going to document it, because then we'll share it with either the care team

If it's a student; fast team if it's a faculty or staff member.

The other thing that we do have the ability, if it rises to the level of criminal investigation,

we can use state and federal databases to find out what else the individuals have been involved in.

And we use that information.

Again, none of it is predictive, but it's another piece of the puzzle to give us an idea of what other what's the context?

What other factors are of concern? One other thing that we have, as we have for the students, something called tell us help, which is 24 over seven counseling so our students can call in or text in and speak with a counselor. So if a student, in Virginia or anywhere else, actually it's international.

So if a student calls in and is talking to somebody in Virginia and they determine that, that student's at risk for self-harm or something with the campus, their first contact is through our dispatch office here.

They also will do a geo map and have a welfare check happen, in the specific area of where that student is.

So it's another resource that we have available. Yeah.

And just the last little follow on to that. You know, we have definitely had cases where we've had to work with other jurisdictions.

And as chief said, I just can't compliment his team enough where we have had that outside individual, the person who's not affiliated with the university may not even reside in the Denver area.

They may in fact be sending harassing or concerning messaging from out of state.

And so our CUPD professionals, we've had them reach out to the jurisdictions where the concern may be originating to help inform them.

So as chief mentioned, just to see, is there any additional context that that local, law enforcement agency may have that will help inform our decisions?

Let me first just say thank you. This was very helpful. My question is if there is a potential offsite threat to security or safety in one of the campus buildings.

What happens? And is it communicated?

There might be follow up questions, depending on how you answered the first part of my question.

So something from off campus, or an individual that poses a threat to the safety of an individual or facility on campus?

Yes. As an example, being accessing a building that is badged secure.

They're able to get into the building and get on the elevators and.

Yes. Yeah. So, so so when I mentioned that we have access controlled buildings, it's one obstacle, but it is not like a safe.

So, our, our policy is if it's an access control building, only an individual who's unaffiliated, finds their way in there.

We'll contact and in some cases they're just lost.

At other times, if they're not supposed to be in, then they're causing problems. We make them aware of the fact that they're trespassing.

We'll remove them depending on the nature of their behavior in the building.

We may move immediately to an exclusion order in a municipal or county setting.

That's a no trespass, which says, okay, you've been put on notice that you are not allowed in here.

If you come back your subject to citation or arrest.

As far as communicating that, to the campus.

We don't send out a message of that nature.

In fact. So some of my team members are here. There are certain situations that rise to the level of a notification to campus.

Those are called the Clery crimes. But a trespass would not rise to that level unless their behavior was stalking or they were something that rose to

the level that it creates an immediate, imminent risk of bodily injury or serious bodily injury.

Then we would do we would do messaging, probably campus wide.

We have tried at times to do building specific messaging.

The systems are not, always 100% reliable.

So if there's an imminent threat, it goes campus wide. In fact, it goes to everyone who's, registered for our C.U. alerts.

And then we will we'll use the exclusions and citations.

We've actually gone to the level. We had a recent example a week or two ago where the individual didn't comply with the warning, came back.

We were simply going to cite them with a summons.

They were so uncooperative that we determined the safest thing for campus.

And for this person to get the message across is that they go to the city jail for booking and release, on a summons.

We try not to escalate it if it's not necessary, but if they're not going to get the message and this person was there twice, we'll go as far as we can using the criminal justice system. Did I cover everything?

I kind of rambled. Yes. Yes you did. My follow up would be after that situation was handled because.

I guess I'm speaking kind of, um. It's secretive because it's recently happened.

What is the follow up to where the incident happened to those that were part of the situation as far as communication?

Follow up? To feel at ease. So for example.

That person feels comfortable. Because now. It's, a threat.

It's unsettling. It's still unnerving. To say the least.

And it would probably depend on, we would usually look to management from that area, what they're comfortable with.

We've had some incidents where we've done multiple meetings with team members on a floor.

Based on how extensive. If we had a stalking case last fall that led to multiple meetings with different, staff members because of the concern to include the targeted individuals. We'll also, under certain circumstances, if we have information on individual, that might create a problem if we have photos and in fact, if they are currently or formally affiliated with this campus.

We'll have a photo from the badging office. We'll share that with the information that indicates that they pose a safety risk.

Now, we're also very cautious about doing that. If their behavior was simply just a nuisance and doesn't rise to the level of criminal behavior.

Putting out that kind of message with the police department label on it tends to indicate that they're guilty or they're accused of something.

And and there's some behavior we've talked about that the great the current euphemism is it's awful but lawful.

We have to put up with some behavior or speech that we would all agree is not appropriate.

But doesn't doesn't cross that line for the campus and exclusion.

If we can show that it disrupts our either academic research or patient mission, that's when we'll issue, an exclusion or trespass order.

And in that particular case that we had, I think it was one of the research buildings,

we arrested them that afternoon because they didn't get the message the first time. One last thing.

So in response to after the fact, should I.

Should we go back to management as far as precaution.

Because now the concern is they can get in the building and they can get in the elevator and come back a second time.

Who's to say that it doesn't happen in a future with someone else?

How can we let the entire, communicate to the entire building that everyone safety, that maybe, you know, no tailgating and those things work for getting the building.

But getting on the elevator? You may need to still regenerate.

Who responsibility would that be to really remind employees, hey, they don't have a badge?

Maybe. Excuse me. Why are you on? And you do some help going somewhere or, you know, you know? It could be done with the different teams.

If you haven't noticed, there's signs on every building that ask everyone to badge in.

And tailgating has been a been a problem. In fact, in that particular case, some some of the research buildings, you can't just you need a badge in a building, you need a badge to get to a floor.

If they're tailgating, they're just going to follow. And and everyone has a different comfort level with, with a challenging an individual that's not wearing a badge or campus policies that you wear your badge visible. You can also use it from more of a wayfinding, user friendly perspective. Like I see you don't have a badge can help you find where you're headed. And when they fumble and they're not clear. There is no such thing as crying wolf on this campus. You call our dispatch center 724-4444, area code 303 or from a campus phone, it's just 44444.

And we will send an officer or a security officer. Some of the buildings we didn't talk about the the clinical buildings.

Some have open doors in most cases, for example, the Health Sciences building, school of dental Medicine, we have uniformed security officers there. And one of their jobs is not necessarily to challenge everyone, but to watch for people who may not necessarily be in the right building or not belong in the building.

Offer to help them. And in the Fitzsimmons is building, facilities, has a receptionist there.

There's a sign at the front door says check in. But we need to continue to educate people that look, the no tailgating isn't meant to be rude is to prevent that one time where it creates a problem on the floor.

And even if they have no ill intent, that is unsettling.

And we'd like to create a work environment where people are very comfortable coming to work.

So sharing that information, sharing the tailgating as much as possible But we also do. We also do some, programing like on active armor.

We've actually moved away from the run hide fight being the sole focus for, that prevention training to preventing targeted violence.

A lot of what the two different, threat assessment teams do, talk about that kind of behavior.

And we talk about the pathway to violence and those sorts of things. That would be an indication of a potential for harm.

And in most cases, that's harm to others. So we do that every other month.

We also provide lunch, if anyone's interested. And talk through what that looks like and what sorts of behaviors you should report.

The bottom line I think what you probably heard today is if it doesn't look right to you and makes you uncomfortable, call us.

And then if it's a sort of, a scenario that requires a referral to the fast team, or the care team we'll document it and we'll forward it to them.

It was another question. Thanks again for this terrific presentation.

Are individuals able to report to either the care or fast team anonymously, or do you have to selfdisclose.

So when you submit the care team, it can be anonymous.

We also, like the folks if you say, who you are because we'd like to reach out and go, what's going on?

But there is a checkbox to that. We, you don't wouldn't be identified to the student.

And oftentimes we really invite the faculty to say, hey, I'm worried about you.

I'm going to make a referral to the care team as more of a proactive I care about you, and this is a place that can help you.

But yes, we would. We would like to know who you are just so we can have that conversation with you, but we don't.

We also would not tell a student if you ask us not to.

It can be an anonymous for the student. Thank you. Yeah, and the same would be true on the staff faculty side.

I always do just like to point out, though, as as Jan just mentioned, if you're willing to say who you are, we really can do a better job at the assessment, because if it's anonymous and we have any questions, we're not able to get those answered because it was anonymous.

And so that's where sometimes the information may come in.

And we're logging that report, but we're not able to take any action if the report was deficient in some key critical information.

And so again, we would just like to encourage you, if possible to report it where we can get back with you, that we will absolutely take anonymous reports.

I just wanted to call out, because we're getting ready to wrap up that I just wanted to call out something that,

I know is important to chief's area. How many of you currently have the Safe Zone app downloaded on your mobile phone?

Great. I see some hands, so I would really love it.

Like that's an action item. If you guys can take away from today's presentation is to download that app.

Because that really is a wonderful way.

If you do need to make a report easily, you can do that through the app, and most especially if you are needing urgent response.

And I can just be kind of a little testimonial. When I was brand new here, I was only on campus, I think one month.

And this was very embarrassing. And I did call chief and let him know that I was embarrassed.

But I had downloaded the app, right? And I was playing around with the buttons to see how it all worked, and I accidentally hit the emergency button.

And then I immediately called the police and I said, oh, my gosh, I'm so sorry. It's me dumb new person.

You know, I'm good. I'm fine. Well, like within minutes, two wonderful officers came to my office.

They came right to the location. Like, right.

So the geolocation worked and they were like, we received your call, but we just wanted to check to make sure, because, you know, sometimes you can have somebody there that is, in fact, telling you to call to say it's okay and it's not really okay.

And so I just appreciated that so much as a new employee. So I just want to give that little testimonial and that shout out the app is great.

So if you don't have it, download it. I think we're at time, but I know that there may be some questions lingering.

Please go ahead and submit those questions and our learning and development team will catalog them.

And then we will still respond to them. and get back to you.

So thank you so much for your time. Have a great afternoon.