**NaBITA THREAT ASSESSMENT TOOL**

**HARM TO SELF**
MENTAL & BEHAVIORAL HEALTH, "THE D-SCALE"

**DYSREGULATION/DECOMPENSATION**
- Acutely suicidal (thoughts, feelings, expressed intentions and ideations)
- Para-suicidal (extreme self-injurious behavior, eating disorder, personality disorder) at life-threatening levels
- Engaging in risk-taking behaviors (e.g., substance abusing)
- Hostile, aggressive, relationally abusive
- Deficient in skills that regulate emotion, cognition, self, behavior and relationships
- Profoundly disturbed, detached view of reality
- Unable to care for themselves (poor self-care/ protection/judgment)
- At risk of grievous injury or death without intent to self-harm
- Often seen in psychotic breaks

**DISTURBANCE**
- Increasingly disruptive or concerning behavior, unusual and/or bizarre acting
- May be destructive, apparently harmful or threatening to others
- Substance misuse and abuse; self-medication; erratic medication compliance

**DISTRESS**
- Emotionally troubled (e.g., depressed, manic, unstable)
- Individuals impacted by situational stressors and traumatic events that cause disruption or concern
  - May be psychiatrically symptomatic if not coping/adapting to stressors/trauma
  - Behavior may subside when stressor is removed or trauma is addressed/processed

**OVERALL & GENERALIZED RISK RUBRIC**

- **EXTREME**
  - 9 PLUNGING TOGETHER INTO THE ABYSS
  - 8 FRAGMENTATION OF THE ENEMY
  - 7 LIMITED DESTRUCTIVE BLOWS

- **SEVERE**
  - 6 STRATEGIES OF THREAT
  - 5 LOSS OF FACE

- **ELEVATED**
  - 4 IMAGES AND COALITIONS
  - 3 ACTIONS NOT WORDS

- **MODERATE**
  - 2 DEBATE AND CONTENTIOUS ARGUMENTS
  - 1 HARDENING

**HARM TO OTHERS**
NINE LEVELS OF HOSTILITY AND VIOLENCE

**BASELINE**

Trajectory?

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### Classifying Risk

<table>
<thead>
<tr>
<th>MILD RISK</th>
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| • Disruptive or concerning behavior  
  • May or may not show signs of distress  
  • No threat made or present | • More involved or repeated disruption. Behavior more concerning. Likely distressed or low-level disturbance  
  • Possible threat made or perceived  
  • Threat is vague and indirect  
  • Information about threat or threat itself is inconsistent, implausible or lacks detail  
  • Threat lacks realism  
  • Content of threat suggests threatener is unlikely to carry it out | • Seriously disruptive incident(s)  
  • Exhibiting clear distress, more likely disturbance  
  • Threat made or present  
  • Threat is vague and indirect, but may be repeated or shared with multiple reporters  
  • Information about threat or threat itself is inconsistent, implausible or lacks detail  
  • Threat lacks realism, or is repeated with variations  
  • Content of threat suggests threatener is unlikely to carry it out | • Disturbed or advancing to dysregulation  
  • Threat made or present  
  • Threat is vague, but direct, or specific but indirect  
  • Likely to be repeated or shared with multiple reporters  
  • Information about threat or threat itself is consistent, plausible or includes increasing detail of a plan (time, place, etc.)  
  • Threat likely to be repeated with consistency (may try to convince listener they are serious)  
  • Content of threat suggests threatener may carry it out. | • Dysregulated (way off baseline) or medically disabled  
  • Threat made or present  
  • Threat is concrete (specific or direct)  
  • Likely to be repeated or shared with multiple reporters  
  • Information about threat or threat itself is consistent, plausible or includes specific detail of a plan (time, place, etc.), often with steps already taken  
  • Threat may be repeated with consistency  
  • Content of threat suggests threatener will carry it out (reference to weapons, means, target) |

### Intervention Tools to Address Risk as Classified

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| • Meeting/soft referral by reporter  
  • Behavioral contract or treatment plan with student or employee (if at all, only for low-level concerns)  
  • Student conduct or HR response  
  • Evaluate for disability services and/or medical referral  
  • Conflict management, mediation, problem-solving | • Meeting/soft referral by reporter  
  • Behavioral contract or treatment plan with student (if at all, only for low-level concerns)  
  • Student conduct or HR response  
  • Evaluate for disability services and/or medical referral  
  • Conflict management, mediation (not if physical/violent), problem-solving | • Meeting/mandated referral by reporter  
  • Evaluate parental/guardian notification  
  • Obtain and assess medical/educational and other records  
  • Consider interim suspension if applicable  
  • Evaluate for disability services and/or medical referral  
  • Consider referral or mandated assessment  
  • SIVRA-35 or other violence risk assessment | • Possible confrontation by reporter  
  • Parental/guardian notification obligatory unless contraindicated  
  • Evaluate emergency notification to others (FERPA/HIPAA/Clergy)  
  • No behavioral contracts  
  • Recommend interim suspension or paid/unpaid leave  
  • Possible liaison with local police to compare red flags  
  • Deploy mandated assessment  
  • Evaluate for medical/psychological transport  
  • Evaluate for custodial hold  
  • Consider voluntary/involuntary medical withdrawal  
  • Direct threat eligible  
  • Law enforcement response  
  • Consider eligibility for involuntary commitment  
  • SIVRA-35 or other violence risk assessment | • Possible confrontation by reporter  
  • Parental/guardian notification obligatory unless contraindicated  
  • Evaluate emergency notification to others  
  • No behavioral contracts  
  • Interim suspension or paid/unpaid leave if applicable  
  • Possible liaison with local police to compare red flags  
  • Too serious for mandated assessment  
  • Evaluate for medical/psychological transport  
  • Evaluate for custodial hold  
  • Initiate voluntary/involuntary medical withdrawal  
  • Law enforcement response  
  • Consider eligibility for involuntary commitment |