What does this mean for me?

A Practical Application of How to Collaborate with Behavioral Intervention Teams

Technical Difficulties?

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About The Program

• Expand upon your knowledge of behavioral intervention teams and identify ways in which you can integrate best practices into your daily work.
• Provide practical application examples and discussion from both the campus-based and the HQ professional’s perspectives.
• Outline a collaborative functioning and process of the BIT to address concerning student behavior.
• Explore the role of fraternity and sorority professionals on the BIT.

Overview of Presentation

• Review the structure, purpose and membership of Ball State’s BIT (example from one institution)
  – Practical examples of how BIT functions at Ball State
  – Now What - Considerations for BIT involvement
  – How fraternity and sorority life staff on campus can advocate for BIT involvement
Overview of Presentation

• Review the recently developed Mental Health Response Procedures of Delta Gamma (example from one HQ)
  – Background and context of how this came to be
  – Overview of the process the group utilized
  – Sharing the outcomes, including how we collaborate with university BITs and utilize a custom threat assessment rubric.
Ball State’s BIT

- **Purpose** - to advance a supportive and caring response to students in distress. We only focus on students of concern; risk of threat to self and others
- Renamed Behavioral Intervention Team (BIT) effective this fall 2014 (CIRT – Critical Incident Response Team)
- Group was established in 2002 (Before the VA Tech Shooting in 2007)
- Meets weekly (Fridays) for 1 hour during academic year and biweekly during the summer months

Who are we – Membership

- **Student Affairs**
  - Student Conduct
  - Title IX
  - Greek Life
  - Student Life
  - Disability Services
  - Housing and Residence Life
  - University Police Department
- Counseling Center
- Health Center
- Multicultural Center
- **Academic Affairs**
  - Office of the Provost
  - Online and Distance Education
  - Rinker Center for International Programs
BIT Referrals (How we get reports)

- Online
- Call
- Email
- In-person
- BIT members
- Faculty
- Staff
- University Police
- Students
- Parents/Family

What we do

- Serve as the central point of contact for reviewing reports of concerning student behavior
- Analyze information received (patterns, trends, recurrence)
- Assess risk of threat to self and others (NaBITA Threat Assessment Tool)
- Determine appropriate intervention and act accordingly
- Monitor ongoing behavior of individuals who have displayed disruptive or concerning behavior
We Also...

- Develop a culture of reporting and educate the campus community about behaviors of concern
- Support individuals with appropriate campus and community resources
- Establish networks with campus and community resources to maximize the effectiveness of interventions
- Provide support to faculty, staff, and students who are assisting students who present concerning or disruptive behavior
- Assess long-term success of individual interventions recommended by the BIT

Role of BIT members

- Source of information and insight
- Contribute to assessment of risk based on information available to the team
- Help determine the appropriate intervention
- Intervene as needed
- Continue to monitor students and provide updates to BIT
- Student success advocates... care for all students
Examples of BIT at work

• “Living in Fear”
  - Sorority member
  - Multiple incidents of threat to self
  - Concern for individual and group
  - Intervention and support for individual and group
  - Support for staff

• “Creepy” Guy
  - Pursuit of relationships with sorority members
  - Lack of appropriate reporting and use of campus resources
  - Effect of social media
  - Incident De-escalation – education
  - Perpetrator intervention
  - Title IX implications

Now What

• Does your institution have a BIT, CARE or Threat Assessment Teams (TAT) and what is the purpose?
• Who convenes the team?
• How has/can/will the BIT, CARE or TAT provide support to fraternity and sorority life staff?
• Does your institution have employee reporting requirements regarding student reports of threat to self and threat to others?
• Is there a defined role for fraternity and sorority life professionals?
Making a case for BIT membership

- Do your research – NaBITA Standards
- Talk with your supervisor – you will need an advocate
- Meet with BIT convener – you will want to understand the context of your institution
- Consider what level of membership may be most appropriate; core, inner, middle, and outer
- Define and articulate how membership may be value adding to the team: fraternity and sorority life staff possess relevant skill, knowledge, and experiences
- Consider how to relate request for membership consideration to unique institutional needs, values, and national trends
- Risk assessment, management, and intervention
- Access to students and student information - people of influence, intervention, education

#AdvanceU

Delta Gamma Fraternity

Mental Health Response Procedures & Collaboration with BITs
Background & Context

• Increase in significant mental health concerns within chapters
  – Multiple suicide attempts in chapter housing, etc.
• Volunteers were seeking “what to do” and going directly to our General Counsel.
  – She is an attorney, not a mental health professional.
• We knew we need to think about this intentionally and have the right people “at the table”.

Process

• Assembled an interdisciplinary Working Group
  – Overview of representatives
• Outlined Key Objectives in the Working Group Charter
  – Overview of key objectives, reflective of call structure.
• Met via teleconference from June-October 2017
  – Calls occurred every other week, on average.
  – Final proposal endorsed Oct. 2017
The Outcome

• Four overarching recommendations pertaining to:
  – Our responsibility
  – Housing implications
  – Reporting to Emergency Contacts
  – Reporting to BITs

Our Rubric

• The right column remains the exact same as the NaBITA rubric
• The middle column includes examples that align
• The left column outlines the Delta Gamma response procedures.
Our Rubric

- The right column remains the exact same as the NaBITA rubric.
- The middle column includes examples that align.
- The left column outlines the Delta Gamma response procedures.

<table>
<thead>
<tr>
<th>ELEVATED RISK</th>
<th>SEVERE RISK</th>
<th>EXTREME RISK</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Seriously disruptive incident(s)</td>
<td>• Disturbed or advancing to</td>
<td>• Dysregulated (way off baseline)</td>
</tr>
<tr>
<td>• Establishing clear dangers, more</td>
<td>• Threat made or present.</td>
<td>or medically disabled.</td>
</tr>
<tr>
<td>likely disturbance.</td>
<td>• Threat is concrete (specific</td>
<td></td>
</tr>
<tr>
<td>• Threat made or present.</td>
<td>or directed).</td>
<td></td>
</tr>
<tr>
<td>• Threat is vague, but direct, or</td>
<td>• Likely to be repeated or shared</td>
<td></td>
</tr>
<tr>
<td>specific but indirect.</td>
<td>with multiple reporters.</td>
<td></td>
</tr>
<tr>
<td>• Information about threat or threat</td>
<td>• Information about threat or</td>
<td></td>
</tr>
<tr>
<td>itself is consistent, plausible or</td>
<td>threat itself is consistent, plausible or</td>
<td></td>
</tr>
<tr>
<td>includes increasing detail of a plan</td>
<td>includes increasing detail of a plan</td>
<td></td>
</tr>
<tr>
<td>• Threat likely to be replicated</td>
<td></td>
<td></td>
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</tbody>
</table>

period of time without sleep.
<table>
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</tr>
</thead>
<tbody>
<tr>
<td>• Roommates and friends are</td>
<td>• Engages in self-harm or</td>
<td>• Roommates and friends are</td>
</tr>
<tr>
<td>vocal about their concerns for</td>
<td>cutting behaviors with increasing</td>
<td>actively seeking assistance with</td>
</tr>
<tr>
<td>the member’s well-being.</td>
<td>severity.</td>
<td>how to help the member’s safety</td>
</tr>
<tr>
<td>• Does not seem to care about</td>
<td></td>
<td>and wellbeing.</td>
</tr>
<tr>
<td>academic, personal, or chapter</td>
<td>• Make non-complaint comments</td>
<td>• Member is BIA from academic,</td>
</tr>
<tr>
<td>responsibilities.</td>
<td>about giving her belongings away</td>
<td>personal, or chapter</td>
</tr>
<tr>
<td>• Pours or drug or alcohol</td>
<td>and begins shutting down social</td>
<td>responsibilities.</td>
</tr>
<tr>
<td>use of prescriptions medication</td>
<td>media accounts.</td>
<td></td>
</tr>
<tr>
<td>without prescription.</td>
<td>• Make comments about not</td>
<td>• Constant misuse/abuse of drugs</td>
</tr>
<tr>
<td>• Exhibiting signs of disordered eating behaviors.</td>
<td>wanting to live or examples of how</td>
<td>and alcohol.</td>
</tr>
<tr>
<td>• Exhibiting minor changes in physical appearance or self-care (e.g. sleeping, bathing, grooming).</td>
<td>they would take their own life.</td>
<td>• Begin giving her belongings</td>
</tr>
<tr>
<td>• Engages in self-harm or cutting</td>
<td>• Make comments like, “If I can’t go</td>
<td>away or openly discusses who will</td>
</tr>
<tr>
<td>behaviors but is behaving “normally” otherwise.</td>
<td>to the date party next week, I’m</td>
<td>get certain possessions.</td>
</tr>
<tr>
<td>• Prior suicide attempt.</td>
<td>going to hurt someone.”</td>
<td>• Recent/current suicide attempt.</td>
</tr>
<tr>
<td>• Extreme overreaction/float tone and/or harsh language to whom you think are “normal”.</td>
<td>• Make comments like, “No one would care if I died.”</td>
<td>• Make comments like, “I wouldn’t</td>
</tr>
<tr>
<td>• Make comments like, “I wish we could run over pedestrians. I hate waiting for them.”</td>
<td></td>
<td>care if I died”, or “I hope I never</td>
</tr>
<tr>
<td>• Make comments like, “What’s the point? Life doesn’t matter anyway.”</td>
<td></td>
<td>wake up.”</td>
</tr>
</tbody>
</table>

Adapted from the NaBITA’s Threat Assessment Tool, The NaBITA Group, LLC, 2014 ©
Questions & Answers

Thank you for participating