

Wisconsin School Threat Assessment and Management Protocol (WSTAMP)—Inquiry

*NOTE: Wis. Stat. § 175.32(2): Any person who is a mandatory reporter under the child abuse statute, such as a nurse, a medical or mental health professional, a social worker, a school teacher, a school administrator, a school counselor, or any other school employee, or a police or law enforcement officer, is required to report, as described below, if that person, in good faith, believes that there is a serious and imminent threat to the health or safety of a student, school employee or the public, based on a threat regarding violence in or targeted against a school made by an individual seen in the course of the mandatory reporter's professional duties. The same applies to a member of the clergy unless the member of the clergy receives the information regarding the threat privately where, under the circumstances of the religion or tradition, the communication is expected to be kept private.

Wis. Stat. § 175.32(3): To "report" means, by telephone or in person, to immediately inform a law enforcement agency of the reasons why the reporter believes there is a serious and imminent threat to the health or safety of a student or school employee or the public.

Wis. Stat. § 175.32(5): Anyone who fails to report as required by law may be fined no more than \$1000 or imprisoned for no more than 6 months or both.

Triage, Inquiry, Assessment and Case Management are all part of the BTAM process. The WSTAMP Process Flowchart specifies each step in the process.

The BTAM Inquiry process guides trained BTAM team members through the investigative steps of gathering information, determining the level of concern for a specific individual, and determining next steps. The guiding questions below are in line with existing research and BTAM best practices.

The BTAM process is case specific. Some cases may proceed to the full Assessment process, and others may result in the development of a management plan for a student of concern at the Inquiry phase. All cases must be monitored over time. New information or failure to comply with the case specific management plan may result in plan adjustments or in the initiation of a new Triage/ Inquiry/ Assessment process.

Student Name:
Grade:
DOB/Age:
Date/Time Triage Form Completed:
Date/Time of Inquiry Meeting:
Team members in attendance:
1. Information about the Incident/Behavior of Concern
Describe the concerning behavior or give a fact-based account of the incident.

		If there is additional information to aid in understanding the context, please state it here:
. N	-	Goal/Identified Grievance (Check all that apply)
		What was the motivation or goal for the student engaging in the concerning or threatening behavior that was reported?
		□ Perceived injustice
		□ Feels victimized
		☐ Desires/ruminates about/seeks revenge
		☐ Externalizes responsibility for own actions
		☐ Attention, recognition, notoriety
		☐ Wish to solve a problem otherwise seen as unbearable
		☐ A desire to die or be killed
		 Recent stressors (loss of status, shame, humiliation, recent break up, financial, loss of significant relationship)
		☐ Pending crisis or change in circumstances
		☐ Emotional/Reactive response
		 Call attention to a cause or extremist ideologies (i.e., incel movement, misogyny, white supremacy, anti-Semitic)
		☐ Unknown
		□ Other
	>	Supporting information:

3. Focus or Target of Harm/Concerning Behavior (Check all that apply)

NOTE: If it is determined there is a specific target, the BTAM team should make any safety notifications as soon as this information is learned.

	>	Target
		☐ Specifically named individual(s)
		☐ Specific social group (i.e., jocks, stoners, a specific person's friend group)
		☐ School sanctioned groups or clubs
		□ Property
		☐ Event (i.e., homecoming, prom, graduation)
		Generalized threat
		□ None known
		- None known
	~	Add any specific information below
4.		ing Communications (Check all that apply)
	>	Has there been any communications suggesting ideas, planning, or intent to
		harm self or others?
		☐ Recent communications about violence/threat
		 Escalating frequency of concerning communication
		☐ Pattern of concerning communications
		☐ Final/desperate language
	>	Explain:
5.	Concorr	sing Interests (Check all that apply)
Э.		ning Interests (Check all that apply) → Subject has shown unusual/concerning interest in the following:
	•	☐ Weapons/Weapon seeking behavior
		 Violent topics (i.e., movies, acts of terrorism, assassinations, animal cruelty, torture, death)
		☐ Violence demonstrated in school reports, projects, drawings, diagrams
		☐ Incidents of previous mass violence (e.g., terrorism, workplace violence,
		mass murderers, terror groups, etc.)
		☐ Extremist groups/ideology (misogyny, white supremacy, domestic, etc.)
		Other

	Expl:	ain:
6.	Capacity/Mea	ans to Carry Out Targeted Violence (Check all that apply)
	Access	s to Weapons (e.g., firearms, explosives, bladed weapons, vehicles)
		Could possess a (specify)
		In possession of (specify)
		Posted weapons on social media/technology
		Practice/training experience
		Online researching
		Unknown
	> Elab	orate details (e.g., where is weapon stored, how do they have access, how
	c <u>oul</u>	d they obtain the weapons)
_		
7.		stability and Concerning Behavior (Check all that apply)
		Acute emotional problems that interfere with daily functioning
		Pervasive maladaptive behavior
		History of non-compliance with limits and boundaries
		Size/intensity of response does not match apparent size/intensity of the
		problem
		Undertreated for apparent mental health need
		Poor treatment compliance (explain reason for non-compliance below
		(e.g., money, insurance issues, general refusal)
		Current or History of suicidal ideation, threat, or attempt
		Limited/poor coping (i.e., unhealthy conflict resolution, poor distress
		tolerance, low tolerance for change, unable to withstand real or
		perceived slights, rejections, or offenses)
		AODA Concerns (use/abuse/addiction)
		Evidence of planning act of targeted violence
		Ability to accept responsibility for actions
		Poor social skills

	> E	xplain:
8.	Social and	Home Life Factors (Check all that apply)
		☐ Peers avoid the student
		☐ Limited peer relationships
		☐ History as aggressor or victim of bullying/harassment
		☐ Lack of healthy/prosocial peer support
		☐ Parent has little control/under responds to problem behavior
		□ Parent endorses the individual's concerning activities
		□ Student has limited restrictions/supervision at home
		□ Significant home stressors
	≻ A	dditional Information:
	[
9.	Protective	Factors/Stabilizers/Mitigators (Check all that apply)
		☐ Has trusting relationship with at least one responsible adult
		☐ Has supportive relationship with at least one prosocial peer
		☐ Supportive family (at least one person that supports intervention, sets
		reasonable limits, provides healthy structure, positive influence,
		accountability for actions.)
		$\hfill \Box$ Healthy social supports (peers, significant other, extracurricular activities,
		employment, community activities)
		□ Positive coping mechanisms/skills
		☐ Access or receptiveness to help/receiving services in the community
		☐ Future goals
	> A	dditional Information:
	F A	dultional information.

10. Options to resolve grievance/concern (Check all that apply)				
Problem solving options/considerations				
 Student is willing to apologize/make amends 				
)	Explain:			
[Student is willing to consider other options/accept help			
;	Explain:			
11. Summary o	f additional Sources of information considered. (All sources not required).			
Sum	nmary of information gathered from any of the below listed sources			
_	=			
L	Information obtained from Teacher(s)/School Staff			
	☐ Information obtained from Subject			
[☐ Information obtained from Parent			
L.				
	Information obtained from Witness(es) of concerning behavior			

	☐ Information obtained from Peer(s)			
	Information obtained from Other Sources (i.e., record review, IEP review discipline reports, attendance records, open source/social media, plain view observations (desk, locker, backpack, car, etc.), and IT violations of school device.			
ADMI	NISTRATIVE/TEAM RECOMMENDATION:			
	DTE: If there is uncertainty about the level of concern the individual poses, advance to the sessment to gather additional information.			
П	Inquiry Ends/Develop Intervention and Support Plan for Safety			
	Based on the known information, the individual appears to pose <u>no/low level of</u> <u>concern</u> at this time. The team has determined the identified issues/needs can be			
	addressed within existing structures and will proceed to develop an Intervention and			
	Support Plan for Safety.			
	Advance to Full Threat Assessment			
	Based on known information, the individual appears to pose medium or high level of			
	concern at this time. The team determined a Full Threat Assessment should be			

OTHER DOCUMENTATION:

the Threat Assessment protocol.

If any of the following steps were taken as part of emergency operations, document date and other specific information below.

completed. Assign roles for additional tasks and set timeline to reconvene. Complete

Duty to warn
Consult Law Enforcement
Develop Plan to Protect a Targeted Person
Completed Suicide Risk Assessment

By signing this document, the team member acknowledges participation in the Threat Assessment Inquiry Process.

Name	Title	Signature	Date

NOTE: Once threat assessment inquiry process is complete, develop an individualized Intervention and Support Plan for Safety for student.