

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, or other life-threatening risky behavior
 - ▲ Profoundly disturbed, detached view of reality and at risk of grievous injury or death. Lack of ability to regulate emotion, cognition, self, behavior, and relationships
 - ▲ Actual affective impulsive violence or serious threats of violence such as:
 - ▲ Repeated severe attacks on others or an attack with weapon such as a pencil
 - ▲ Extreme aggression such as beating or non-consensual choking
 - ▲ 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
 - Responding to voices, extremely odd behavior, engagement in high risk behavior (ex: alcohol, drug, sex); troubling thoughts with paranoid/delusional themes; increasingly medically dangerous bingeing/purging
- Suicidal thoughts that are not lethal/imminent or non-life-threatening self-injury
- Engaging in, or victim of, repetitive verbal aggression, social aggression, cyberaggression, or bullying behaviors such as public humiliation or embarrassment, spreading rumors/lies to cause harm, demeaning words or actions, etc.
- New aggressive behavior against others not seen before, escalation in behaviors, harming animals outside of hunting or survival
- Threats of affective, impulsive, poorly-planned, and/or emotionally-driven violence
 - Vague but direct threats or specific but indirect threats; explosive language
 - Stalking behaviors that do not harm, but are disruptive and concerning
 - Minor damage to property of school or others, theft of property
 - Threatening to fight others
 - Limited physical aggression (pinching, slapping, shoving, or kicking)

DISTRESSED

- Behavior that concerns others or an impaired ability to manage emotions and actions. Possible presence of stressors such as:
 - Managing mental illness, disordered eating, bed wetting, poor parental supervision, poor attendance or involvement at school, etc.
 - Engaging in, or victim of, limited bullying behaviors, verbal aggression, social aggression, or cyberaggression such as purposeful exclusion, teasing, or name-calling. Student has difficulty making friends or interacting socially or difficulty defending self
 - Difficulty coping/adapting to situational stressors, parental conflict, housing/food instability, death in the family. 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
- ◆ Behavior is appropriate given the student's age, circumstances, and context
- ◆ No threat made or present

OVERALL SUMMARY



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, possibly developing schematics or detailed floorplans, 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
- ▲ Killing of animals outside of hunting, displaying kills, practicing skills to cause lethal harm

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; extremist peers or adults may exploit vulnerability and move them toward action; encouraging violence; further isolation and/or group forming
- Use of graffiti or other artistic, divisive writings or projects that can be seen as approach behaviors (with narrowing focusing to real life people or place they have connection)
- Harming or intimidating animals or those seen as "less than" as practice
- Threats and ultimatums may be vague or direct, but are motivated by a definitely 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
- Increased isolation from others; or joining a group with shared marginalization within the community (outsiders)
- Writing in class assignments that highlights violence or negative themes that is incongruent with the assignments
- When frustrated, storms off, disengages, may create signs or troll on social media
- Frequent interruptions during class as they are vocal about their point of view
- Argues with others with intent to embarrass, shame, or shut-down
- Drawing or doodling violent themes or scenes that are shared more directly with others for a reaction
- 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 (ex: throwing cell phone on ground or slamming lockers while storming off)
- Engages in and/or is victim of verbal, social, or cyber aggression such as exclusion,

EMPOWERING THOUGHTS

- ◆ Passionate and hardened thoughts; typically related to religion, politics, academic progress, money/power, social justice, sports involvement, or relationships; may echo parents' beliefs
- ◆ Expression of differences with others outside of normal, developmental thoughts and behaviors
- ◆ Drawing or doodling violent themes or scenes without specific reference to someone or somplace in their life
- ◆ 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?

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K-12 STUDENT INTERVENTIONS

CRITICAL (4)

- Perform wellness check/initiate evaluation for involuntary hold/initiate suicide protocols
- Contact parent/emergency contact
- Communicate process of assessment and action planning with parent/guardian
- Coordinate w/necessary parties (school resource officer, local law enforcement, FUSION center, discipline, legal and/or threat consult, etc.) to create plan for safety, response, interventions, suspension, etc.
- Coordinate transitions at beginning and end of in-school or out-of-school suspensions.
- Evaluate need for emergency notification to school community or to specific, impacted parties
- Initiate mandated assessment once immediate safety has been established
- Connect with off-campus resources as appropriate such as: case manager, child protective services, juvenile justice department, etc.
- Provide guidance, support, and safety planning to impacted parties, such as teachers and other students

ELEVATED (3)

- Evaluate the need to establish immediate safety through welfare/safety check with in-house counseling staff or SRO
- Initiate suicide or bullying protocols as appropriate
- Meet with student and parent/guardian to engage in assessment and action planning
- Deliver follow-up and ongoing services to support student both within and outside the school community
- Determine the need for mandated assessment (SIVRA-35, psychological assessment, other violence risk assessment)
- Coordinate referrals for counseling, mental health treatment, student discipline process, disability assessment/services, other support resources
- Coordinate transitions at beginning and end of in-school or out-of-school suspensions
- Connect with off-campus resources as appropriate, such as case manager, child protective services, juvenile justice department, etc.
- Coordinate with school resource officer, local law enforcement, etc. to discuss plan for safety, community, response, etc.
- Coordinate with IEP process

MODERATE (2)

- Provide guidance and education to a referral source for care (community therapist, in-school referral to guidance or school counseling)
- Bring student in for an individualized meeting to identify a safety plan in coordination with the student and/or parent/guardian. Should include discussion of reducing trigger events, building protective factors and be reviewed and adjusted regularly for effectiveness
- Coordinate care and/or make referrals to reduce silos among classroom, student discipline, counseling, social services, mental health treatment, and off-campus law enforcement
- Engage and establish rapport with parent/guardian as a partner to create transparency and educate them about the process
- Develop student support and comprehensive and holistic behavior intervention plan (separate from IEP)
- Refer for student discipline process and/or behavior management process; address emerging behaviors under an academic disruption or student discipline policy
- Engage in skill building related to social and emotional learning, conflict management, interpersonal conflict resolution, problem-solving
- Evaluate for referral for disability/accessibility assessment and coordinate with IEP processes
- Continually assess the effectiveness of interventions or other academic/learning plans
- Initiate bullying protocols as appropriate

MILD (0/1)

- Possibly no direct action
- Provide guidance and education to referral source
- Reach out to student for a meeting to assess situation and determine needs
- Connect with teachers, school support resources, etc., to either enlist as a support or to gather more information
- Provide resources to student as appropriate

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