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CARE from a Distance: Modifications to the Traditional BIT for Online and Remote Learners

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Abstract

Threat assessment and intervention occur in context and depend much on the environment, both physical and social. As colleges and universities expand their learning milieu to include remote and online learning, the practice of threat assessment and intervention must also be adapted. At a large, nonprofit, private university where 70 percent of instruction is delivered online, unique challenges and opportunities exist for Behavioral Intervention Team practice, student intervention, and community engagement. Specifically, modifications can be made to team meeting structure and medium, student intervention methods, threat assessment data gathering, and community outreach and education efforts. The writers have found remote operation of a Behavioral Intervention Team to be efficient and effective anecdotally during the first year of implementation. The following case study discusses this progress and recommendations for other teams.

Introduction

Although a relatively new functional unit within higher education, Behavioral Intervention Teams are no different than most academic and administrative departments of the university in their reliance on co-location and in-person meetings. This is true not only for team meetings but also for team member interactions with students and colleagues in completing threat assessments and interventions. However, the landscape of higher education is shifting with regards to student demographics, generational factors, technological advancement/adoption, and governmental/accreditation pressures, all of which have created both the opportunity and pressure for online and distance learning models at the university level. The growing populations of offsite learners and their distance from classrooms and program offices reduce neither the need for risk assessment and intervention nor the responsibility for a university to care for the campus community, however distributed it may be.

In this paper, we will discuss the first year of implementation for a multi-site, remotely operated Behavioral Intervention Team and recommendations for other teams based on our experiences. At our large, private, nonprofit university, where 70 percent of the instruction occurs online and 30 percent of onsite instruction occurs at small satellite campuses, the operation of the Campus Assessment Response and Evaluation (CARE) Team required the adaptation of business processes without compromising the essential components of risk assessment and intervention. These modifications can be categorized into: a) team meeting structure, b) threat assessment data gathering, c) student intervention methods, and d) community outreach and education efforts. The examples and recommendations that follow were dependent on our own university structure, resources, geographic footprint, student population, and many more factors, which should be considered by readers before amending their own university procedure and policy.

It is important to note throughout the paper, language may shift regarding communication, which takes place at a distance. The terms “online,” “remote,” and “distance” all refer to the need for communication in the absence of co-location. Much of this communication already takes place in predominantly onsite campuses by email and phone. However, as teams push more communication into the online space and integrate technology solutions aimed at increasing the intimacy of communication across greater distances, the need for staff training and competency building also increases. Similarly, we use the term “CARE Team” as synonymous with Behavioral Intervention Team or Threat Assessment Team.

Team Meeting Structure

As universities have expanded to include large single campuses, satellite campus models, and an increasing number of remote employees and online students, the need for remote meeting options has increased (Allen & Seaman, 2013). Like all tools used in higher education, the recommendations here are bound by the unique needs of an institution and the capabilities of the tool on hand. Remote meeting software and hardware vary widely in their features, quality, and accessibility. While most staff and faculty rely solely on communication tools available through institutional purchasing or licensing, existing tools may need to be augmented or replaced to allow for truly productive meeting communication. For example, Zoom or Skype, which may function well on a personal laptop, may need to be supplemented with additional hardware such as a large screen television and fisheye camera. These expenses and changes are crucial to the team function and should be addressed prior to the initiation of remote meetings to prevent team member disengagement and confusion.

Another consideration is the individual versus group need for remote meeting options. The team may be largely meeting in person with a single individual needing to participate remotely. The technology requirements for a hybrid remote meeting vary from that in which all participants are remote, so it is important for the chair to weigh, plan for, and discuss these options with the team. A crucial requirement is the full participation of every team member, as with onsite BIT meetings. However, in a hybrid meeting situation, we have observed remote team members interacting less over time unless the chair actively works to engage the remote participants. This is partly a function of the quality of the communication solution chosen (e.g., how effectively can the remote staff participate in the social space?) and a function of the expectations set by the chair. It is recommended that the chair choose a reliable and high-touch meeting solution for all team members and discuss expectations for participation prior to the start of remote meetings to prevent disengagement. The chosen solution should work well not only by regular attendees, but also for inner and outer circle members who may be less acquainted with CARE business operations. Thus, such teams should use an institutionally provided or approved solution for remote meetings, which is likely familiar to all members of the university.

Another consideration important for remote CARE Teams is documentation and the sharing of information. In a traditional setting, the sharing of information can be via hard copy or verbal communication. However, in a remote or hybrid remote setting, information sharing should be prioritized before meetings. This is consistent with NaBITA recommendations (Van Brunt, 2016) for

CARE Teams regardless of meeting solution, though it becomes even more important as the team begins working remotely and loses the ability for seamless verbal communication. Some of the social pressures (e.g., direct eye contact or intimacy of closeness) that motivate team members to be productive and engaged participants are no longer present during remote meetings. However, these limitations can be overcome by the chair by limiting discussion to pertinent facts and points of disagreement, while also allowing for a natural flow of conversation and ideas. This balance is necessary in onsite teams and even more important in remote teams. Overall, CARE Team chairs will need to understand the technological necessities as well as adhere to strict meeting guidelines (and hold the team accountable to the same) to successfully allow for remote team operations.

Threat Assessment Data Gathering

Though the overall process of threat assessment remains the same for online and distance programs (i.e., 1) gather data, 2) use a rubric for analysis, and 3) deploy the appropriate intervention) (Van Brunt, 2018), the methodology for data gathering continues to evolve. Technology continues to aid this process of data gathering for multi-site and online programs. Some key areas and technologies to be discussed in this section include online referral systems, learning management systems (LMSs), customer relationship management (CRM) systems, social media, telephone, and e-mail.

Not every institution was designed with integrated information technology (IT) systems useful for this kind of distributed work. Many online programs and distance education services grew out of necessity and were added to pre-existing traditional institutions. It is important to identify what IT systems exist in your institution and what the culture is in terms of fully utilizing these systems. CARE Teams that can work closely with IT leadership can expedite process development for using existing systems to support data collection.

CARE Teams at multi-site and online institutions will benefit from procuring one of the leading fully online, referral systems designed for this work. Similar to the centralized communication managed at an aircraft control tower, multi-site and online CARE Teams must centralize referral communication to be successful. Voicemails or e-mails that sit in one person's office can delay critical data gathering, inhibiting a timely response. Additionally, communication that is not well documented or shared appropriately may create gaps or redundancy in CARE Team interventions. The ability of CARE Teams to collect referrals and approach each case holistically aid them in developing appropriate and timely interventions. Online referral systems also empower administrative offices and faculty members, who benefit from these communication channels when needed.

Learning management systems are online software applications that allow for online course delivery. Institutions that use an LMS for online or hybrid course delivery have visibility into student behavior (data) that may not necessarily be captured on campus. Login information, discussion posts, and written assignments with time stamps can be collected through LMSs. This data can contribute to timelines, show patterns in student behavior, and collect exact written statements by students. As CARE Teams work to observe holistic student behavior in context, this can be valuable data worth gathering for the analysis phase of Behavioral Intervention Teams' work. LMSs are limited to the student, classmates, and faculty interactions.

Similar to LMSs, customer relationship management (CRM) systems are used by administrators and staff to document student communication, grades, transcripts, and financial aid. CRMs differ from LMSs in that CRMs are used by the administration for tracking communication and record keeping that is specific to enrollment, registration, and graduation. There are many pieces of data stored in CRMs when it comes to threat assessment. A key piece of data within CRMs is grade point average (GPA) trajectory. If there are inconsistent grade patterns, this information may illuminate scenarios that could be creating additional stress for students. For students at risk of being dropped for failing to maintain satisfactory academic progress, this stress may be a contributing factor to observable behavior. Additionally, financial stressors can be illuminated through data captured in a student's financial aid package. The visibility of student debt, shortfalls or delays in financial aid awards are additional pieces of information within CRMs that could be useful for behavioral intervention inquiries.

From an advisor perspective, these tools can illustrate frequency and topics of discussion between administrators and students. Data that shows a student has never been in communication with the institution is just as valuable as data that shows the student contacted multiple offices many times in the same day. Visibility into the range of student interactions, financial standing, and academic progress contributes to the holistic picture of a student's needs and is valuable data captured in your institution's CRM.

Institutions need to determine their own policies and procedures when reviewing publicly posted student information on social media. While one institution may never look into the online postings of its students, another may find it useful to explore the publicly posted views, beliefs, and behavior of a student who has been referred to your CARE Team. Data available through public social media channels can provide a valuable perspective of the

individual you are seeking to serve. Recognizing that CARE Teams exist to support your students, faculty, and staff, it may be useful to obtain publicly available information when gathering data to assess a threat.

Telephone systems can enhance your CARE Team's communication. Depending on the complexity of your online programs and services, your institution may have the capacity to route and block incoming calls. Though these efforts are not necessarily a data solution, they allow for centralized communication from a student of concern to be directed to the appropriate CARE Team member. This will allow your team to work directly with the student and continue to collect valuable information. Blocking a student's number completely is not recommended. As CARE Teams work to gather as much information as possible, a completely blocked phone number will cut off that source of information.

Preventing a student from creating mayhem by calling dozens of offices at your institution is also a positive outcome of rerouting their number. Telephone systems have the capacity to collect frequency data. Information such as the number of calls per day, the duration of each call, and call destinations can show patterns in student behavior. Depending on your phone system, some calls can be recorded for quality assurance purposes. The ability of a CARE Team to review actual statements, tone, and the context of a conversation can be valuable pieces of data collected through your telephone system.

The information provided from students of concern via email can be informative if viewed through the appropriate lens, such as NaBITA's Violence Risk Assessment of Written Word (VRAW²), (Van Brunt, 2019). Using objective tools like this can provide data often overlooked or misinterpreted. Additionally, e-mail can provide more information than the content of the communication. Internet Protocol (IP) addresses contained within e-mails can inform CARE Teams of the geographic location from which e-mails were sent (Geobytes, 2019). For students making threats to others, geography-based data can illustrate proximity of the threat. If an out-of-state student e-mailed threatening or concerning information to your institution from an IP address that is in the same zip code as the target, this additional data can escalate the response and affect the rating of severity for the threat.

Beyond the technology and tools available to provide threat assessment data, the best collection resources are the students, faculty, and staff who are interacting within your community. The referral and software systems will only assist to the degree that they are used by the people at your institution. Information and

knowledge about an individual of concern only helps your CARE Team if that information is documented and shared. Training and developing an institutional culture of reporting can be the most challenging tasks in terms of data gathering. As multi-site and online teams work to develop the processes and procedures for centralizing communication for consistent responses, they must rely on the people throughout their community to relay and assist in the data collection process.

Student Intervention Methods

When considering student intervention and the necessity of remote meeting options, the opportunity and need for intervention can shift. Standards for communication, social norms for campus versus community support, and the appropriate staff/faculty member intervention points change with campus structure and learning models (HEMHA, 2013). For instance, whereas previously the team may have recommended a no-contact order for a student who has demonstrated a moderate threat towards a peer, the same intervention may be unnecessary in an online class where students are hundreds of miles from one another. Or perhaps the no-contact order becomes specific to a particular type of communication rather than physical location, and the issue will likely be transferred to the Office of Student Conduct due to the lack of credible physical threat. This determination will be dependent on the scope of responsibility both for your CARE Team and the Office of Student Conduct, however (i.e., who responds to issues of harassment where targeting and escalation of threat is not a concern?).

Our CARE Team regularly appoints either a team member or another university official with an existing relationship to meet with a student of concern for initial coaching. Only CARE Team members complete more intensive interventions, such as ongoing educational counseling or threat assessment. These meetings need to be conducted via videoconference whenever possible (as opposed to by phone). The establishment of rapport, data gathering, and intervention can vary depending on communication medium, and it is important to know the benefits and limitations of a particular medium prior to conducting the meeting. For instance, meeting remotely allows students to attend meetings from their home, which may also create opportunities for family members, roommates, or other companions to be present during the meetings.

Whereas teams may not have previously established rules regarding meeting attendance, there is a need to set expectations with all parties ahead of time when it comes to remote meetings (similar to conversations or educational information provided to participants in a Title IX investigation). Specifically, our current rules

and expectations for meetings mirror the recommendations from NaBITA (Van Brunt, n.d.). Additional rules specific for remote meetings include the availability of video-conferencing (rather than telephone alone) when necessary for threat assessment, returning documents via e-mail or secure document transfer software, and identity verification when speaking with new students remotely.

In addition to ground rules and policies for remote meetings and interventions, establishing rapport becomes more challenging yet remains important. It is necessary to be flexible and to think creatively about how rapport can be built with each remote student. With a student body that is mostly online, it is helpful to consider the following:

- Flexibility is key with how and when students can contact university staff members. Many remote students work and have family responsibilities, and some even live in different time zones or countries. Providing options for phone, video conference, email, and text message communications can encourage engagement from students who wouldn't otherwise respond. Staff must be willing to adapt their schedules so that students can communicate at times that are reasonable for them. Obviously, this is not always possible, and depending on a student's risk level, it may not be appropriate to wait for a time when it is convenient for the student, and in these circumstances, professional discretion is needed.
- The second thing to keep in mind is creativity. Since students are not meeting face to face with staff members, much of the non-verbal context and communication (i.e., body language, appearance, office setting, etc.) is missing. Thus, it is crucial that the team work to immediately establish rapport and respect during meetings. To that end, the necessary information should be on the referral form and/or in the student information systems. While staff members should remain vigilant for feelings of paranoia or a perceived invasion of privacy, it can also be very helpful to rely on student data. Even little things can be helpful, such as understanding where a student lives or what program they are completing. For example, if a staff member learns that a student grew up in the same state that the staff member is from, this can be used to establish rapport because talking about certain places, foods, or using certain words can help show commonality. Alternatively, a staff member may have visited the student's hometown before and can mention what they enjoyed about their visit. Staff members having access to and demonstrating their knowledge of students' information can be essential for

rapport building and establishing trust during the first few minutes of a phone call or other remote meeting option where nonverbal communication and other queues dependent on co-location are absent.

- Using a team member's experiences and strengths can also help with rapport building. Students tend to trust people who they feel understand them. Let's say that a student is experiencing homelessness; a team member who has previously worked or volunteered at a shelter can be a great person to talk with them. The student will feel more comfortable telling this staff member about their housing history and what they have experienced because the student will feel understood. Research shows that people who feel understood feel more satisfaction with life, so working to find the right team member to help a student feel understood has deep significance to their academic journey (Lun, Kesebir, & Oishi, 2008). The selected staff member should share their skillset or past experiences to help open the conversations. Saying something like "I received a referral that you disclosed that you are experiencing homelessness right now; before we talk about this more, I wanted to let you know that I used to work at a homeless shelter for a few years before this job. I hope this makes you feel more comfortable sharing with me." As with all on-site students, taking an individualized approach is key because remote students will not have the benefit of seeing facial expressions or office decorations to make them feel connected or welcome.

Community Outreach and Education

When working with students, email goes a long way in helping faculty and staff members have a more personal touch. One way to create an inclusive environment for remote students, staff, and faculty is to offer trainings in-person, as well as via a video conferencing platform. For these trainings, focusing on "identification of concerning behavior and how to support students involved in critical incidents" can be beneficial to all university members (Ulmer, 2018). In addition to these topics, the team should look at what is frequently seen in the referrals received and create additional training opportunities based on those areas (Schiemann & Morgan, 2017). When offering these trainings in person and remotely, have one staff member serve as the moderator for people online so remote participants feel included because their opinions are still voiced to the larger group.

If there is room in the budget to travel to other campuses once a year to meet and train new staff, that is encouraged, because remote employees sometimes struggle with feelings of isolation (Mulki, Bardhi, Lassk, & Nanavaty-Dahl, 2009). People who meet a

team member in person versus other via methods will be more likely to refer students. However, traveling to other campuses is not always possible, in which case video teleconferencing software could be used so that at least people can see who is speaking.

Another way to conduct outreach remotely is to create short videos on different topics that interest staff and faculty, such as the training videos made available through NaBITA. These can be incorporated into the onboarding process for various staff and faculty positions, and be accompanied by brief quizzes at the end to ensure engagement. While the information that staff and faculty learn is great, another benefit is that they are seeing team members' faces and hearing their voices, which will be helpful when they refer a student, as they know exactly who will be following up.

As stated earlier, putting a human touch behind technology outreach and education is important, including pictures and stories in e-mails, trainings, and videos, so that people feel more of a direct connection to the information being relayed. Also, providing anonymous, de-identified quotes from students about their experience with staff and the team as a whole can be helpful when training staff and faculty or building greater community engagement.

A big concern commonly discussed amongst staff and faculty is how to deal with students if they are upset that they were referred. Focus on these concerns in trainings, by providing quotes from students so faculty and staff can see that most students are receptive and thankful that someone cared. This can be an encouragement for staff and faculty and help them feel more comfortable moving forward. Another way to make faculty feel comfortable is by setting aside time to individually call those who are not located on your campus. This gives them a platform to ask questions and learn more about what your team does in a one-on-one setting, and will encourage more early communication about students of concern because they now know who they will be speaking with.

Finally, an important aspect to outreach and education is building trust with the community of referrers. If policy is that the team will respond to referrals within 48 business hours, the team needs to do that 100 percent of the time. If the team informs people that they will get an e-mail once their referral has been received and follow-up has occurred, that needs to happen for every referral.

If a staff or faculty member submits a referral and does not hear from the team as promised, they may not refer again in the future, and they may even tell their colleagues about their experience.

Being a team that is known for its attention to detail and follow through is essential for gaining university buy-in, as this will cultivate good impressions of the team across the university, and colleagues might encourage one another to reach out because of the great experience they had.

Conclusion

As we have discussed, remote operation and management of a Behavioral Intervention Team can be achieved by making intentional modifications to the normal business process of more traditional teams. Specifically, we have made changes to: a) team meeting structure, b) threat assessment data gathering, c) student intervention methods, and d) community outreach and education efforts. In our recent experience, remote team operation is most often dependent on the team chair's proficiency in and the institutional availability of technological tools for communication and documentation.

Still important are team engagement, student intervention variations, remote threat assessment skills/tools, and the ability to provide training and outreach effectively via remote meeting options. With intentionality and preparation, teams can successfully provide care from a distance. Future inquiry will include student outcomes data and long-term team dynamics as our remote team progresses.

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