

2020-2021

Collaboration

Assessment

Response

Evaluation

YEAR-END REVIEW



Lander University
CARE TEAM

**Completed May 2021*



Special Acknowledgements

Lander’s CARE Team was completely revamped in summer 2019 to become better in line with best practice standards. The following key players have been instrumental regarding the progress made during the 2019-2020 academic year.

CORE CARE Team Members

- Dr. Boyd Yarbrough.....Vice President for Student Affairs, Ex-officio Member
- Tracy Clifton.....Assistant Vice President for Student Affairs
- Kim Shannon.....Executive Director of Wellness and Holistic Support
- Ebonee Dendy.....Director of CARE and Advocacy
- Greg Allen.....Lander University Police Department, Chief of Police
- Jalysa Green.....Director of Student Conduct and Community Standards
- Zach Helms.....Director of Housing and Residence Life
- Dr. David Mash.....Associate Director of Library Services, Jackson Library
- London Thomas.....Director of Human Resources

CORE Group Back-Up and INNER Circle CARE Team Members

- Matthew Gilstrap.....Executive Director of Student Life and Engagement
- Cindy Dysart.....Executive Director, Family Liaison
- Erin Nodine.....Associate Director of Athletics
- Jennifer Mathis.....Executive Director of Admissions
- Adam Garrett.....Assistant Director of Human Resources
- Megan McCartney.....Assistant Director of Housing and Residence Life
- Ayrn Gilstrap.....Assistant Director of Student Conduct/Community Standards



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Academic Year-End Data

There were a total of 419 referrals submitted to the CARE Team during the 2020-2021 academic year. Three hundred twenty-one (321) of these referrals represented unique students, while 45 individuals received two (2) or more referrals. Referrals received increased 33% when compared to the 2019-2020 academic year.

Patterns and Trends

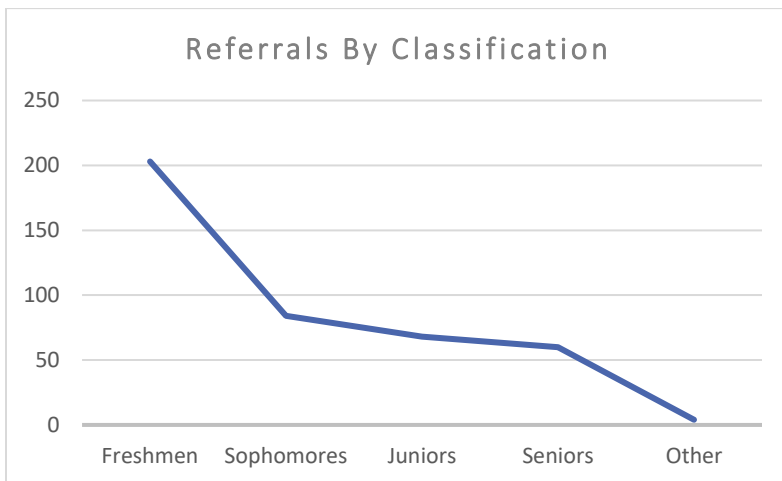
By reviewing patterns and trends, the Team can determine what specific target groups may benefit from additional outreach and/or education. (*Reference CARE Team goals for 2021-2022.*)

Classification

Categorized by classification, the below chart summarizes the total number of referrals received during the 2020-2021 academic year. Other than the increase in total referrals received, the classification percentages were very much in line with the 2019-2020 data.

Classification	Total Referrals
Freshman	203
Graduate	1
Junior	68
Second Degree	3
Senior	60
Sophomore	84
Grand Total	419

Freshman students were the population with the highest number of CARE referrals (48%), followed by Sophomores (20%), Juniors (16%), Seniors (16%), Second Degree students (1%), and Graduate student (<1%).



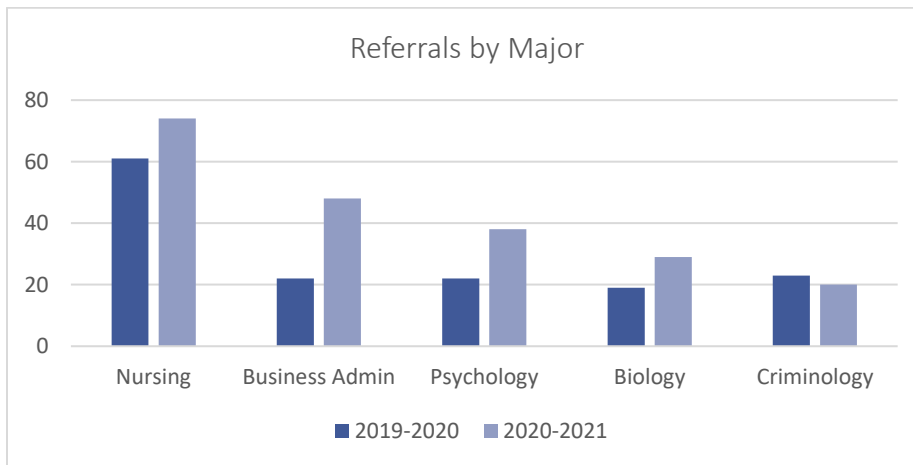
Academic Major

Nursing students represented 18% of the overall referrals received during the 2020-2021 academic year. Business Administration majors represented 11% of total referrals received. Psychology majors represented 9% of total referrals received.

Academic Major	Total Referrals
Art Major	1
Biology	29
Business Administration	48
Chemistry	7
Chemistry Educ, Secondary Cert	2
Computer Infor Syst (Dual Eng)	1
Computer Information Systems	6
Criminology	20
Early Childhood Education	20
Elementary Education	13
English	14
English (Secondary Certif)	4
Environmental Science	5
Exercise Science	15
Fine Art	1
Graphic and Interactive Media	4
History	11
History (Secondary Certif)	13
Human Services (BS)	4
Interdisciplinary Studies	2
Mass Comm and Media Studies	9
Mathematics	1
Mathematics (Dual Engin)	3
Media and Communication	8
Music	3
Music (K -12 Certification)	6
Nursing	74
Physical Educ (K-12 Certif)	2
Political Science	8
Psychology	38
Sociology	4
Spanish	1
Special Education	15
Undecided/General Education	3
Undeclared/Non-degree	5

Academic Major	Total Referrals
Visual Art	1
Visual Art (MFA)	1
Visual Arts	15
Visual Arts (K-12 Certif)	2
Grand Total	419

Nursing, Business Administration, Psychology, Criminology, and Biology majors have had the greatest number of referrals for two (2) consecutive years.

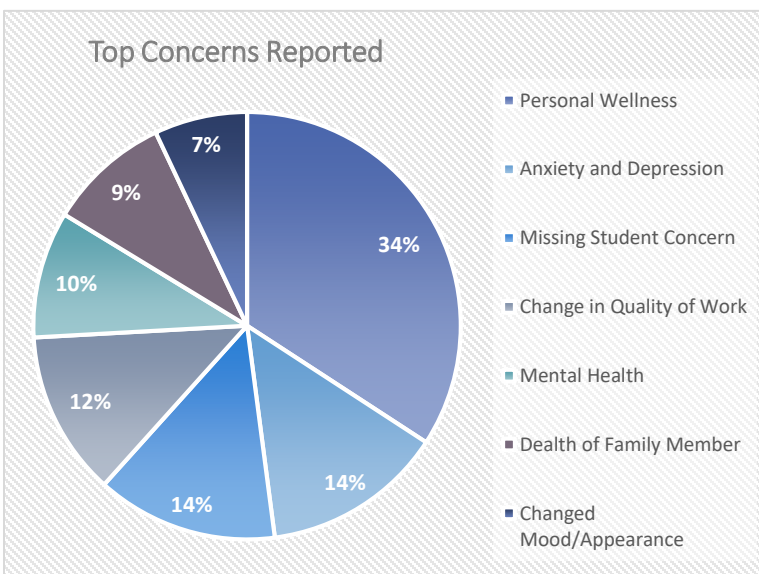


Nature of Concerns/Issues

General personal wellness, depression/anxiety, and mental health concerns represented the vast majority of referrals received. Missing student concerns also represented a significant percentage of total referrals. (Missing student concerns were primarily determined to be associated with students' lack of motivation in the classroom rather than the result of a legitimate health/safety concern. Outreach was initiated to determine students were physically safe and to evaluate if any other presenting circumstances were apparent. The Academic Success Center was also notified in the event academic-related guidance was necessary.) The 2020-2021 category of concern data is comparable to data collected in 2019-2020.

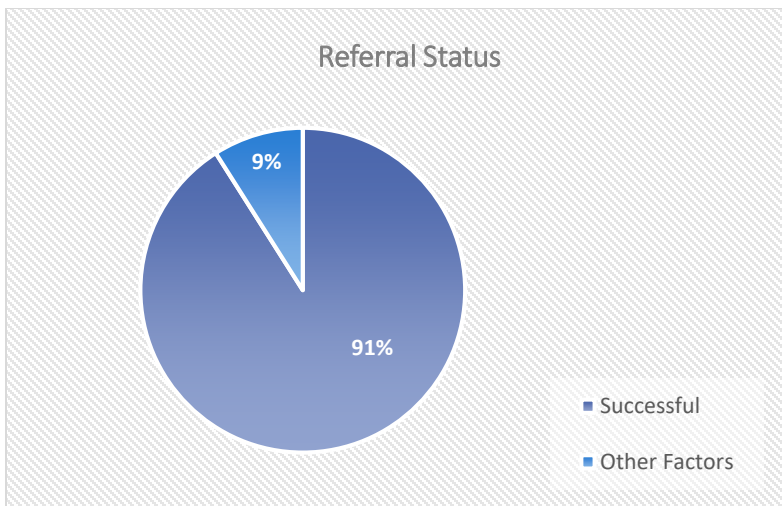
Category of Concern	Total Referrals
Academic Concern	26
Anxiety and/or Depression	43
Behavioral Concern	1
Change in Student's Quality of Work	39
Changed Mood/Appearance	22
Concerning or Other Unusual Behavior	8
Dating Violence	1
Death of Family Member	29

Category of Concern	Total Referrals
Death of Fellow Student	3
Death of Non-Student/Other	4
Displays Anger or Negative Emotions Inappropriately	3
Disturbing Written Material or Class Discussion	4
Domestic Violence	1
Engages in Disruptive/Disorderly Behavior (in the classroom)	1
Financial Issue	5
Harassment	1
Injury/Illness - Hospital	3
Injury/Illness, Other	6
Mental Health Concern	30
Missing Student Concern	43
Multiple Class Absences	7
Personal Hygiene Issues	1
Personal Wellness	107
Physical Health Concern	4
Sexual Assault	6
Sexual Harassment	1
Social Adjustment/Involvement	2
Substance Use Concern	8
Suicidal Tendencies or Self-injurious Behavior	7
Threat to Oneself	3
Grand Total	419



Measure of Success

A measure of the Team’s success in terms of applied interventions was accomplished by utilizing milestones in Maxient. By connecting individuals with the resources needed to provide support, the goal is for interventions to result in at least one of the following over time: reduction in risk score, no additional referrals, or other observable, positive outcomes. Three hundred and forty-four (344) referrals were tagged as “successful case closure.” The remaining 35 cases were tagged as “case closure other.” The case closure other category typically reflects those students that are no longer enrolled, students that are being fully case managed by another department/area, or other circumstances that prevented the Team from being able to place a face value on the interventions offered. 91% of cases during the 2020-2021 academic year were closed as successful.



**Note: The number of milestones reflected does not equal the total number of referrals received by the Team (N=419). At the time data was pulled for the creation of this report, there were still active cases being tracked with no identified outcome to date.*

Community Outreach

The Team again made many strides in terms of community outreach. (This likely contributed to the significant increase in the number of referrals received by the Team.) Efforts should be ongoing and continually prioritized. (*Reference Team goals for 2021-2022.*)

Blackboard Training for New Students

During the 2020-2021 academic year, all incoming students were provided information about the CARE Team via an online Blackboard training platform. Since all new students are required to complete training specific to sex/gender based misconduct, other pertinent information, aside from VAWA requirements, was included in the training to ensure incoming students were familiar with other essential functions, resources, and opportunities for assistance. The training provided new students with information regarding the CARE Team and its purpose, as well as an overview of relevant behaviors and how to report concerning matters to the Team (1187 students trained).



New Employees (Faculty and Staff)

Effective summer 2020, a CARE Team module was added to the onboarding training for all newly-hired employees. The training provides an overview of the Team itself, its purpose, the types of behaviors to report, how to report, and what to expect following the submission of a referral.

Faculty/Staff Email Outreach

Detailed instructions regarding the types of behaviors to report and how to report were sent out via the faculty/staff list serve in August 2020. In conjunction with the Academic Success Center, a draft announcement has been created for 2021-2022. This announcement will be issued to all faculty/staff at the beginning of the Fall and Spring semesters.

Resident Assistants

Resident Assistants were provided education/training about the CARE Team and its purpose in May 2020. The information presented discussed the various types of behaviors to report, how to report, and specifics about how RAs can provide essential feedback to the Team.

Orientation Leaders

Orientation Leaders for the 2020-2021 academic year were provided information about the CARE Team, its purpose, and what/how to report via a virtual training held in April 2020.

Condolence Card Campaign

To emphasize the Team's support of students that have lost a loved one, a condolence card campaign was launched during the Spring 2021 semester. This initiative will continue moving forward. (The Team plans to expand similar outreach efforts to those experiencing a variety of difficulties.) Cards were personal delivered to each impacted student's residence and included contact information for the CARE Team and Wellness Center.

Meditation Program

The CARE Team hosted two meditation programs on April 19th and 21st. The purpose of these events were to afford students with an opportunity to unwind and distress prior to final exams. Students also had the chance to interact with CARE Team members in a positive, informal manner.

Communication with Employees Following a Referral

The Team continued to email employees upon submission of a referral. The purpose of this outreach was to ensure employees knew their respective referrals had been received, as well as provide a point of contact in the event additional information became available.

Team Professional Development

CARE Team professional development opportunities for 2020-2021 are detailed below.

Opening Year Training

CARE Team members participated in a workshop on August 4, 2020. The topics covered may be referenced below.

1. Introduction
2. Around the BIT Table: Feeling Threatened V Being Threatened (VIDEO)
 - a. Thoughts?
 - b. Reflection to Lander's Community
3. Zeke Dillinger - Case Study
 - a. Initial Report
 - b. Additional Sources
 - c. Key Investigative Questions
4. Wrap Up
 - a. Meetings for Fall 2020
 - i. Day and Time
 - ii. Location
 - b. Expectations for Upcoming Semester
 - c. Final Thoughts/Questions

Covid Rage

CARE Team members participated in a NaBITA facilitated webinar on September 21, 2020. (CARE Team members met in-person). The topics covered may be referenced below.

- A review of concerning incidents occurring in the Covid climate.
- Differences between affective violence and predatory/mission-oriented violence.
- Identifying risk factors prior to escalation.
- Identifying ways to engage in crisis de-escalation for affective violence.
- Ways to develop rapport and finding common areas of agreement and set clear expectations around classroom expectations.
- Discuss the importance of having a consistent, evidenced-bases process to address expectations around behavior.
- Importance of sharing mission-oriented/targeted behavior to the campus BIT/CARE teams.

South Carolina Law Enforcement Division (SLED)

SLED leadership working within the behavioral analysis unit provided training to CARE Team members and various representatives of the President's Cabinet, Wellness Center, Human Resources, and University Police on May 3, 2021. (CARE Team members and other campus constituents met in person.) Topics included the following: FERPA/HIPAA and cross-sharing of information, research and identifying issues, law enforcement's role in threat assessment, attributes of concern, workplace violence, and administrative response.



The Structured Interview for Violence Risk Assessment (SIVRA-35)

The SIVRA-35 was created in 2012 as an expert system. It is a structured set of items useful for those staff and faculty that work in higher education to use with individuals who may pose a threat to the community. The SIVRA-35 is a guided structured interview useful for classifying risk into low, moderate, and high categories based on the threat and violence risk assessment literature. The SIVRA-35 was designed to address targeted and strategic violence occurring more frequently on college campuses (i.e. Virginia Tech massacre, Northern Illinois University shooting, Umpqua College shooting and Santa Monica College). **Five Team members have been trained to administer the SIVRA-35 accordingly.** Additional members were not trained to administer the SIVRA-35 during the 2020-2021 academic year. This will be a goal for the upcoming academic year since there will be a few structural changes made to the Team's membership.

Team Progress/Enhancements

The below information highlights enhancements that were implemented or further enhanced by the Team during the 2020-2021 academic year.

Tabletop Exercises and Other Trainings

Tabletop exercises establish clear preparedness objectives and increase critical thinking among Team members regarding potential situations/incidents. Adequate time for Team tabletops exercises was not set aside during the 2019-2020 academic year. This year, tabletop exercises were executed during both the Fall and Spring semesters. Tabletops were facilitated on the following dates: August 4th, December 9th, and May 5th. The Covid Rage webinar also allowed Team members an opportunity to think strategically based on specified scenarios. To ensure Team members remain current in the field, additional trainings methods were also provided (*see Team Professional Development*).

Intentionality

Team members continued to be empowered to provide input based on their knowledge, skillsets, and/or expertise. Focus remained on tangible interventions/resolutions, as opposed to standard documentation review. To increase the likelihood of a positive outcome, Team members frequently identified other employees that had an established rapport with the person of concern (POC). The Team operated high-level with regard to collaborative responses. Conscious efforts were consistently made to ensure individuals were connected with the resources that could provide them with the specific support needed. This frequently required a streamlined coordination of services. Since there are instances when obtaining feedback/general observations are beneficial, particularly when seeking to better understand an individual's needs, CARE Team members continued to seek out information from Resident Assistants, faculty, and staff. Further, nurturing the referral sources by creating an open line of communication remained a top priority. Although the information provided to referral sources did not disclose sensitive or confidential information, referral sources were consistently sent updates to let them know their referral had been received. Additionally, referral sources were provided with a staff point of contact for any impending updates, as applicable/appropriate. While most referrals received during the 2020-2021 academic year landed on the *Mild* rating of the rubric, NaBITA risk scores continued to be consistently recorded in Maxient. Team interventions were based on the risk score and corresponding recommendations.

Emergency Removals

With the implementation of the 2020 Title IX regulations, a process for emergency removals became a function of the Team. Policy states that Lander University can act to remove a student respondent entirely or partially from its educational program or activities on an emergency basis when an individualized safety and risk analysis has determined that an immediate threat to the physical health or safety of any student or other individual justifies removal. Emergency removals are based solely on an individualized safety and risk analysis rather than a finding on the allegations. Excluding the Title IX Coordinator, various members of the Team served in this capacity. Team members reviewed history of the respondent, as applicable, in addition to other presenting circumstances to evaluate risk. Recommendations were then made to the Vice President for Student Affairs. In all cases in which an emergency removal was imposed, the individual was given notice of the action and the option to request a meeting with the Vice President for Student Affairs or other appropriate official(s) prior to such action/removal being imposed, or as soon thereafter as reasonably possible, to show cause why the action/removal should not be implemented or should be modified. Such meetings are not intended to be a hearing on the merits of the allegation(s), but rather is an administrative process intended to determine solely whether the emergency removal is appropriate. Following an emergency removal, the larger Team identified means of support that could be provided to all impacted parties.

Post Hospitalization Follow-Up

Following a mental health-related hospitalization, the Executive Director of Wellness and Holistic Support oversees the implementation of CARE Plans for students. There were several noted situations in which students failed to be responsive upon their hospitalization discharge. The Executive Director immediately identified this as presenting concern, and with input from various Team members, adjusted procedures accordingly. Enhancements included editing the verbiage of notification letters so expectations were more clearly defined and coordinating a more robust, streamlined response for welfare checks and/or any other necessary actions. *{At the year-end meeting on May 19, 2021, the Executive Director for Wellness and Holistic Support shared she feels there is still much room for improvement with post hospitalization follow-up. Wellness staff will brainstorm other means of process improvement over the summer. Updates to follow.}*

Team Presence

While the Team's marketing strategies should consistently remain a key focus, further enhancements were made in 2020-2021.

- The Team placed a greater focus on branding. Various marketing items were ordered for tabling events and other programs. The Team's logo is prominently displayed on promotional materials such as in-house brochures, educational fliers, condolence cards, and tablecloths.
- The Director of CARE and Advocacy implemented CARE Chirps. Bird houses will be displayed in various areas throughout campus that contain positive/uplifting messages. If any member of the campus community is having challenging day, they can reach into the birdhouse and pull out an envelope for words of encouragement. Contact information for the Team and the Team logo is prominently displayed.
- The Team's website was fully developed and posted. The website contains information about the Team, its purpose, and the types of behaviors to report. Various campus resources, FAQs, and testimonials are also highlighted.

<https://www.lander.edu/student-life/care-team>

<https://www.lander.edu/student-life/care-team/care-faqs>

<https://www.lander.edu/student-life/care-team/resources>

Student Outreach Coordinator

As Team referrals significantly increased, Team members expressed concern about being able to provide persons of concern with the individualized support services needed to be successful. The Vice President for Student Affairs and the administration supported an FTE adjustment for a previously vacated Student Affairs position. The purpose of this role is to positively impact the retention and graduation of students by providing support and ensuring students are appropriately connected to various campus resources. In consultation with the CARE Team and the Director of CARE and Advocacy, the Student Outreach Coordinator will assist with case management for at-risk students; investigate referrals, as necessary; identify barriers for success; consult with faculty; facilitate meetings with students of concern; assist with coordination of services; and appropriately track and monitor the progress of those referred. Interviews have been completed and the Team hopes to have a staff member in place by June 1, 2021.

CARE Team Goals for 2021-2022

Community Outreach

Community outreach is the foundation by which the Team will accomplish its mission. While many additional enhancements were implemented during the 2020-2021 academic year, developing and enhancing community education remains a top priority. Outreach goals for the 2021-2022 academic year are as follows.

- **Meet stakeholders where they are** - Continue to brainstorm with faculty, staff, and students about effective ways to promote the Team. Establish a student/student outreach initiative. (Identify persons of concern that may benefit from student/student outreach. *Note: Confidential information will not be shared with those students charged with facilitating outreach.*) Create streamlined process build watch lists in Maxient. This will allow the Team to identify student involvement/affiliation and may assist with information gathering and strengthening connections with persons of concern.
- **Enhance Team visibility** – Offer an increased number of tabling events/programs.
- **Increase communication/reporting options** – Develop *See Something/Say Something Campaign* (possibly develop large posters to place around campus with a generated QR Code for ease of access to the Team). Research app options. A self-reporting mechanism will be developed and implemented.
- **Expand community-wide education** – Initiate partnership with LUX production Team to develop CARE-related content. Explore opportunities for CARE to partner with LINK.
- **Data-driven outreach/education** – The Team should brainstorm opportunities for education and outreach based on the 2020-2021 patterns and trends. Since Freshmen are close to 50% of the referral base, the Director of LINK will be added to the CARE Team for the 2021-2022 academic year. This will provide a more efficient way to communicate/partner with LINK instructors, which will ideally enhance the probability of positive outcomes. Designated Team members should brainstorm with Department Chairs or Deans, specifically in academic areas where referrals were significant, to identify potential partnership opportunities and/or proactive interventions. *{During the year-end review meeting held on May 19, 2021, participating Team members discussed how to minimize the number of missing student concerns submitted. Tracy and Ebonee will work to create a form for this purpose. This new form will be linked within the current Welfare Concern/CARE report form and will include guidance regarding measures that can be taken before a student is deemed missing by the reporter. Additional*

training materials will be developed to share with reporters that appear to need further guidance. Tracy followed up with Brian Hamm and Kelly Proctor to inquire about attendance tracking in Banner. Tracy asked if the CARE Team could obtain access, as applicable. Updates to follow.

Dual Enrollment

Since the number of dual enrollment students have increased, the Team discussed the need for streamlined processes/response protocols geared toward this student population. There were two (2) total referrals that involved dual enrollment students during the 2020-2021 academic year. One (1) case involved a hospitalization with imminent concerns present. The Team should make recommendations and present to the VPSA and VPEM for feedback. *{During the year-end review meeting held on May 19, 2021, participating Team members discussed that Shelby should manage Mild-Moderate cases for dual enrollment students due to her established connections with high school administrators. Information should still be reported to the Team for tracking purposes. The Team discussed how to best manage higher risk cases. Jennifer and Tracy will follow-up with other counterparts to see how they are addressing similar issues involving dual enrollment students. FERPA considerations were also discussed. All participants agreed the Team needed more information on how FERPA applies to this student population. After more information is obtained, a meeting will be scheduled with Tracy, Shelby, Kim, Ebonee, and Jennifer. Updates to follow.}*

Proactive Research, Preparation, Participation, and Follow-Up Documentation

In terms of documentation review, Team members appeared fully prepared for meetings. Proactive research and follow-up documentation needs additional improvement. Due to the increased number of referrals received during the 2020-2021 academic year, this proved challenging. The following measures should be implemented/continued in 2021-2022 to promote increased, high-level functioning.

- Team members should continue to review the agenda in advance of Team meetings, preferably a minimum of two (2) times per week. *{During the year-end review meeting held on May 19, 2021, participating Team members discussed continually emphasizing to Team members that participation is an on-going, active process that requires diligence and follow through by all Team members. In addition to a review and roles and responsibilities among Team members, this will be further emphasized and discussed at the opening year training.}*
- Team members should continue to review the agenda in advance and jot down updates and other known information about persons of concern.
- Currently, the deadline date field in Maxient is utilized to identify the date of the Care Team Staffing. Alternatively, this field could be used to specifically tag new referrals. This way, Team members would be better prompted to proactively seek out background information on newly identified persons of concern.
- If a Team member is assigned a follow-up task, this will be reflected in the notes section of the case file/agenda. Team members should document in the notes section in advance of the next staffing date.
- Increased usage of pings to communicate specifically assigned tasks.
- The Team Operations manual, which references Team member roles and corresponding expectations, should be reviewed annually.
- The Team averaged between 40-60 open cases per week. It is sometimes difficult to measure minimal v/s critical until some background research has been completed. Without compromising the health and safety of persons of concern, the Team should brainstorm effective ways to minimize the numbers of referrals staffed before the full



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Team each week. *{During the year-end review meeting held on May 19, 2021, participating Team members discussed utilizing pings and providing a deadline for Team members to provide input so an informed determination can be made. This system will only be implemented for cases deemed mild with no known contributing factors at the time of the initial referral. The Chair, Director of CARE and Advocacy, and the Executive Director of Wellness and Holistic Support will review research/documentation provided by Team members before making a judgment call about whether the issue needs to be staffed/managed by the full Team.}*

Case Closure Documentation

Prior to closing any case, documentation of why the Team felt comfortable in doing so should be detailed. This will ensure there is a thoughtful approach to case closure.

Increased Usage of Milestones

While milestones were used to measure the overall effectiveness of the Team's interventions, the Team did not consistently utilize milestones each time a case was staffed. As long as a case remains open, the Team should consistently reevaluate the individual's risk score. Ensuring this information is tagged during each staffing will allow the Team a more efficient way to measure one's progress/escalation overtime.

**Reference Team CORE Q-10 scores on the following page.*

2020-2021 CORE-Q10 Results

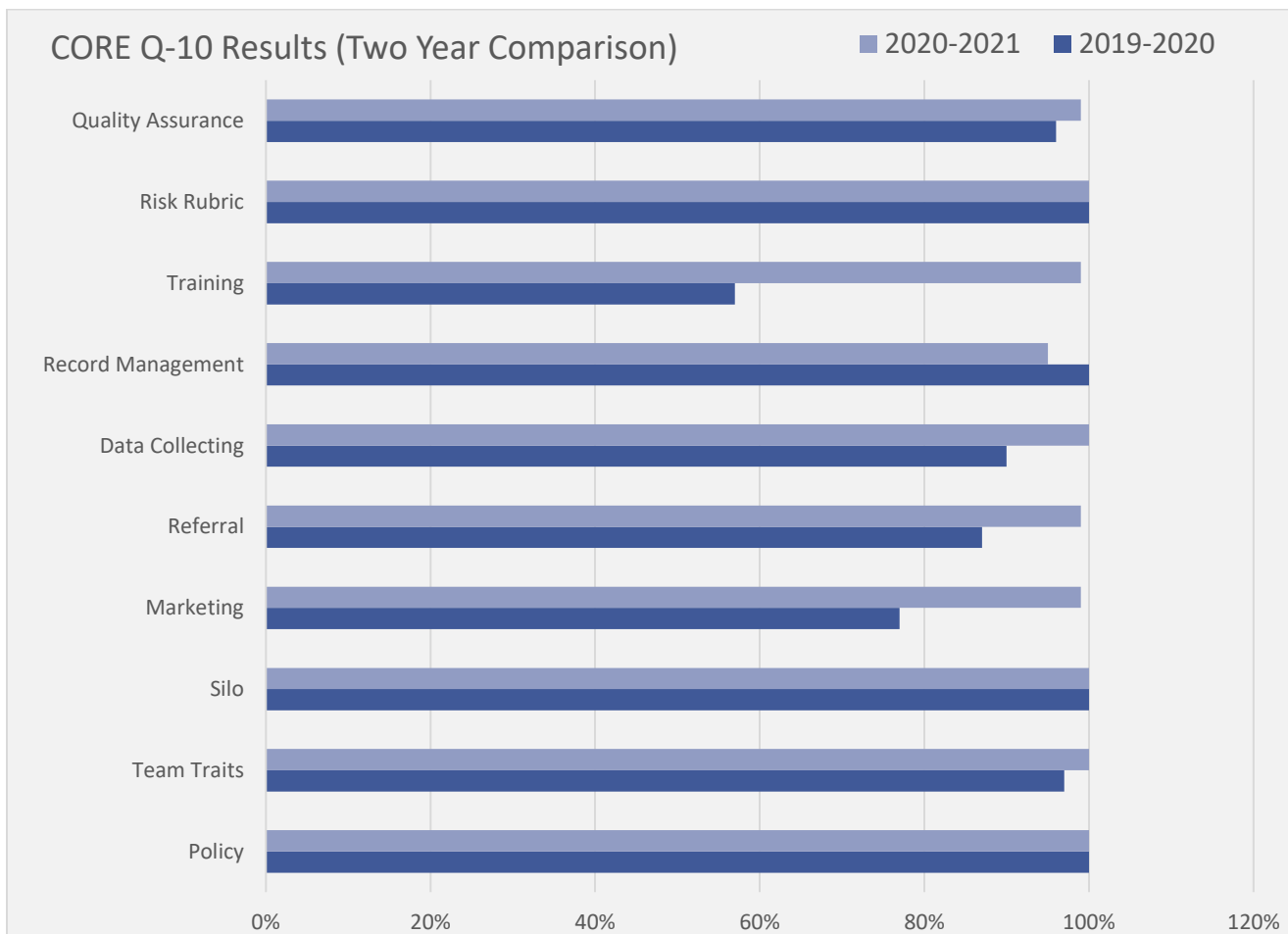
Team members were asked to complete the CORE-Q10 analysis for the year-end review. Scores of all participating team members were averaged to obtain scores within each corresponding category. The 2020-2021 scores and percentages of perceived efficiency are reference below.

Core Quality	Policy	Team Traits	Silo	Marketing	Referral	Data Collecting	Record Management	Training	Risk Rubric	Quality Assurance
Score	0	0	0	.25	.33	0	.94	.146	0	.125
Possible	50	30	12	26	24	20	20	14	18	24
%	100	100	100	99	99	100	95	99	100	99

0= yes, 1= in progress, 2= not present

**The percentage is calculated by: 1- (score/possible)*

For comparative purposes, the 2019-2020 and 2020-2021 CORE-Q10 data are referenced below.





320 Stanley Avenue, Greenwood, SC 29649