Yorkton and Area Community Threat Assessment and Support Protocol (CTASP)
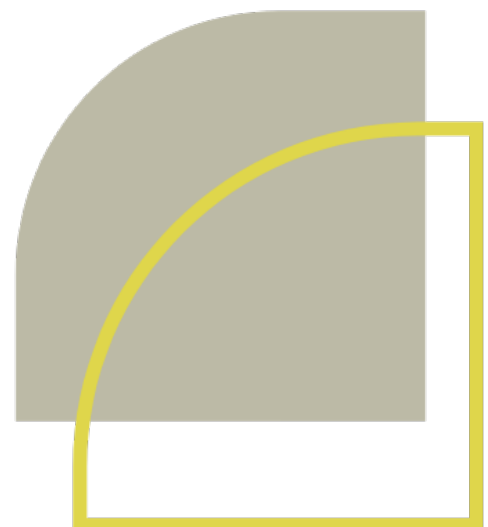
Re-signed March, 2023

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Yorkton and Area CTASP

Yorkton and Area Community Threat Assessment and Support Protocol (CTASP)

Updated March 2023

The Yorkton and Area CTASP is a Multi-Disciplinary Partnership Committed to:

- Early intervention;
- Violence prevention;
- High-risk assessments;
- Interventions and supports; and
- Creating and maintaining internal processes and practices consistent to the model, in accordance with other CTASP partners.

Our shared goal is safer schools and communities.

This Community Threat Assessment and Support Protocol (CTASP) reflects the work of J. Kevin Cameron, Executive Director of the North American Centre for Threat Assessment and Trauma Response, the Yukon Threat Assessment Program (Y - TAP) and, the Alberta Children and Youth Initiative.

Appreciation is expressed to Saskatoon Public School Division for sharing their expertise and for the original development of this document, which has been updated to reflect our Yorkton area community partners. The original Community Threat Assessment and Support Protocol was signed in September 2013.

Inquiries about this CTASP document can be referred to the Good Spirit School Division (Shaune Beatty, Superintendents of Schools), Christ the Teacher Catholic Schools (Chad Holinaty, Superintendent of Schools) or Parkland College (Brittany Frick, Chair, Teaching & Learning).

Introduction of Assessment of Risk to Others (ARTO)

This updated version of the **VTRA™** Model is leading the way in trauma-informed and multi-stakeholder practice, as it relates to violence prevention and intervention. The VTRA model—with associated training and protocol—is here to stay, but the practical application will now be referred to as the **Assessment of Risk to Others (ARTO).**

It is a softer use of language, when communicating with non-professionals who are involved with a case of an Individual of Concern (IOC) who was reported to have made a threat to family members, coworkers, peers, or others. As such, the shortened acronym **ARTO** will be used throughout this document.

As well, the VTRA protocol, practice, and **ARTO** process has been strengthened by ongoing collaboration with individuals, professionals, and programs that represent the diversity of the world around us. The **ARTO** process works well in conjunction with the **Traumatic Event Systems (TES)** Model because the "Fields of Violence Threat Risk Assessment and Crisis/Trauma Response are inseparably connected" (J. Kevin Cameron, 2001).
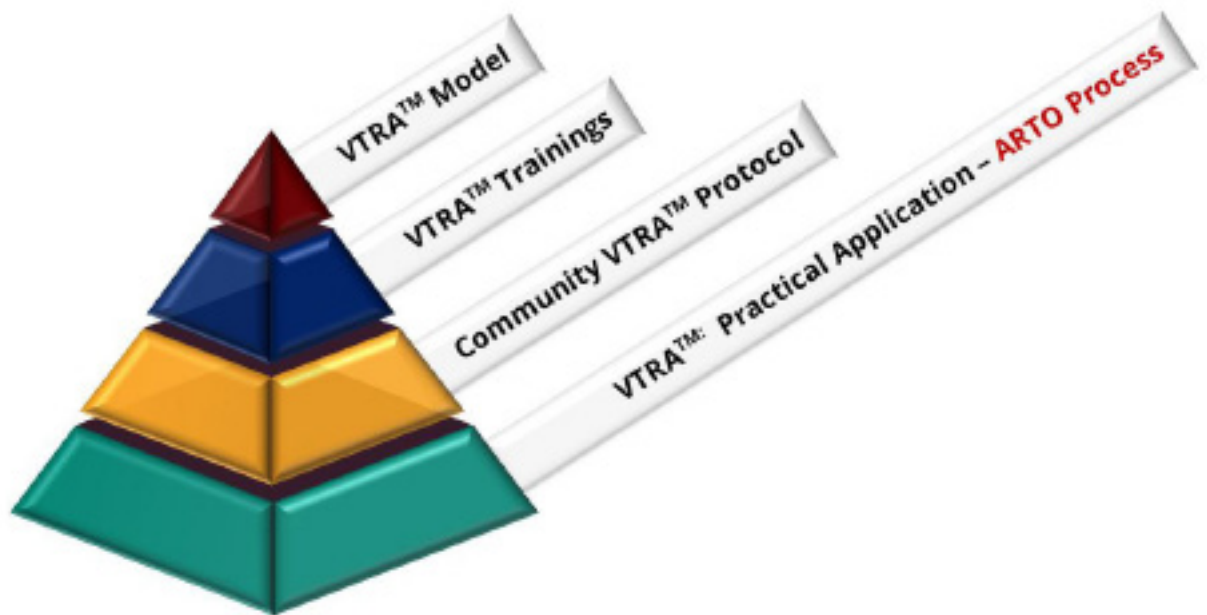
Too often, there is a self-perpetuating, circular dynamic referred to as the "Trauma-Violence Continuum, which denotes that serious violence can beget trauma, but trauma, in and of itself, can also beget serious violence: especially undiagnosed or untreated trauma" (J. Kevin Cameron & Dr. Marleen Wong, 2012).

The Assessment of Risk to Others **(ARTO)** process can be applied to a **Micro Assessment of Risk** related to a single **Individual of Concern (IOC)** and the target(s) they have threatened. It can also be applied to a **Macro Assessment of Risk** towards other targets beyond those that drew the team's attention, including if the Individual of Concern **(IOC)** poses a risk to their family, school, work, community, and beyond. Larger societal dynamics, including systemic racism and marginalization, are also formally considered realities addressed openly by Assessment of Risk to Others **(ARTO)** team members.

Introduction of Assessment of Risk to Others (ARTO)

continued...

ARTO is a Trauma-Informed AND Equity and Inclusion-Guided Practice

The Assessment of Risk to Others **(ARTO)** process is meant to be multi-disciplinary. In conjunction with the **VTRA Protocol**, it is meant to be a regional multi-agency practice to address all forms of violence potential, where there must be access to helping professionals like social work and psychology (clinicians), as well as criminal justice, health, mental health, educational institutions, as well as other agency leaders, organizations and government.

As a trauma-informed and equity-inclusion guided practice, **ARTO Teams** are trained to consider the role of trauma in individuals. This is accomplished by utilizing considerations from the **Adverse Childhood Experiences (ACEs)** studies. **ARTO Teams** are also trained to consider the role of trauma in human systems (families, workplaces, communities, societies, etc.), and considering if both individual and systems dynamics are con-verging in a current **ARTO** assessment.

The Assessment of Risk to Others **(ARTO)** process is a professional practice that requires training in the **1) VTRA** model, **2) VTRA** protocol development, and **3) ARTO** case applications.

It ethically requires every professional and agency to "see ourselves as we are seen" (J. Kevin Cameron, 2019) by those we are serving, in order to minimize bias and achieve the highest levels of data-driven assessments.

The foundation of the VTRA model and Assessment of Risk to Others (ARTO) practice is to foster:

Personal insight into ourselves: how race, religion, gender, culture, sexual and gender diversity, etc., are experienced by the individuals and systems we are interacting with and attempting to support

Program evaluation of our own models, systems, and practices with an expectation of the same from other **VTRA** protocol partners

Empowerment of the Individual of Concern **(IOC)** and their family (caregivers) to limit pathologizing and work within their beliefs with a case-specific standard of reasonable expectations for the safety and growth of self and others

Trauma-informed and least intrusive interventions

A Collaborative Response to Assessing and Responding to Violence Potential

The core and community partners (as listed on page 5) are committed to making our schools and communities safe. All partners will respond to behaviours exhibited by a individual of concern that may pose a potential risk for violence to students, clients, staff, and members of the community. The term "partner" in this document is not intended to mean a legal partnership, but rather a collaborative arrangement.

The CTASP demonstrates our commitment to creating safe learning and work environments in our community for individuals of all ages and abilities.

This protocol supports collaborative planning among community partners to reduce violence and reflects safe, caring, and restorative approaches. It fosters timely sharing of information about individuals who pose a risk of violence towards themselves or others. The protocol promotes the development of supportive and preventive plans.

The strength of community partnership lies in the multidisciplinary composition of the CTASP team. The CTASP team will strive to share details of the threatening situation or evidence promptly, to collaborate effectively, and to make use of a broad range of expertise.

This collaborative process will respect the individual's rights to privacy and the safety of all, to the fullest extent possible.

Core Partners

Core Partners are expected to attend Yorkton and Area CTASP meetings that occur about once per month between September and June. These meetings support the following actions:
- manage and revisit the protocol to keep it current and responsive to the ever-changing needs and dynamics of the community.
- observe the commitments, strategies, and practices outlined in the protocol
- commit to training staff members in Level One and Two VTRA
- research, identify, plan, and participate in appropriate training for employees from both Core and Community Partners
- and support all CTASP partners in any VTRA cases as needed

Core partners include the following agencies and organizations:

Christ the Teacher Catholic Schools
includes schools in Yorkton, Melville, and Theodore

Good Spirit School Division
includes schools in Yorkton, Melville, Calder, Canora, Churchbridge, Esterhazy, Grayson, Langenburg, Invermay, Kamsack, Pelly, Norquay, Preeceville, Saltcoats, Springside, Stockholm, and Sturgis

Parkland College (Suncrest College as of June 2023)
includes colleges in Fort Qu'Appelle, Melville, Yorkton, Esterhazy, Canora, and Kamsack.

Royal Canadian Mounted Police (RCMP):
includes the Yorkton, Melville, Canora, Esterhazy, Kamsack, and Preeceville detachments

Saskatchewan Health Authority:
Yorkton Mental Health Centre

Yorkton Tribal Council

*Agencies and organizations interested in becoming Core Members must be approved by existing CTASP Core Members.

Community Partners

Community Partners are invited to attend monthly meetings and include the following agencies and organizations. Community Partners have signed on to the CTASP Protocol, and they recognize and support the protocol as an integral component in supporting for safe communities, schools, and organizations. These agencies are not responsible for the management of the protocol nor the information and documentation on behalf of other organizations.

Each agency will differ in membership and participation. Each agency will:

- recognize and support the VTRA processes within the community
- commit to training members in at least Level One VTRA,
- and may participate alongside core membership in VTRA cases as required

Community partners include the following agencies and organizations:

Big Brothers and Big Sisters

Bruno's Place

City of Melville

City of Yorkton

East Central Newcomer Welcome Center Inc.

Good Spirit Housing Authority

Government of Saskatchewan:
Ministry of Corrections and Policing and Public Safety
- Community Corrections
Ministry of Social Services
- Child & Family Programs
- Community Living Service Delivery

Melville Fire and Rescue

Parkland Regional Library

SaskAbilities:
includes Yorkton and Southeast Region

Society for the Involvement of Good Neighbours

Yorkton Fire Protective Services

Additional community partners will be invited to join as training occurs. This will allow the protocol to expand and reflect a comprehensive community commitment to early intervention measures and responses to behaviour that pose a potential threat to students, staff, and community members.

After multiple re-signings, the "Yorkton and Area CTASP experience" has noted that its success is built on the foundation of collaboration and key partnerships. The Protocol was implemented in the past with a focus on child and adolescent cases first, but it has seen success and applicability to all forms of threat making and violence including adult cases.

Vision

All partners are accountable to the protocol purpose and have a shared obligation to actively take steps to prevent violence.

In situations where data suggests a child, youth, or adult may pose a significant risk to themselves or others, the partners agree to work together for the common goal of violence prevention, threat management, and safety planning by sharing information, advice, and support that assists in the reduction of risk.

The partners will work together for the benefit of any individual of concern (children, youth, or adults) who come within the scope of this protocol to:

Build collaborative working relationships based on mutual respect and trust.

Work in ways that promote safe, caring, and restorative practices for schools, protocol partners, and the community as a whole.

Prioritize the need for promotion, prevention, and intervention strategies that demonstrate effectiveness in providing coordinated and integrated supports/services for the individual of concern and as appropriate, their families.

With children and youth, involve families in planning for services and supports.

Recognize that each individual of concern has unique strengths and needs that should be considered when developing supports, interventions, and services.

Realize that working together successfully requires persistence and is a process of learning, listening, and understanding one another.

Ensure the Fair Notice of policies and procedures regarding Violence Threat Risk Assessment (VTRA) is provided to all protocol partner staff and the student, patient, subject, or client served.

Centre for Trauma Informed Practices (CTIP) is committed to being a learning organization that adapts to the contextual needs of our professional and community partners.

The protocol is designed to enhance communication between all partners. It is incumbent upon the partners to share necessary information that may initiate or facilitate a VTRA process.

Determining when to Activate the VTRA Protocol

There are a wide range of behaviours that are of concern in some families, workplaces, schools, and communities. It is sometimes difficult, however, to determine whether or not to activate a formal Violence Threat Risk Assessment (VTRA) process. The following guidelines are intended to help Protocol Partners make this determination. It is important to carefully consider each and every individual incident to ensure the most appropriate response.

Immediate Risk Situations:

These situations include armed (e.g. gun, knife, explosives or other device/weapon capable of causing serious injury or death) intruders inside the building or on the periphery, who may pose a risk to some target or targets (i.e. active shooter scenarios). When immediate risk is identified, lockdown plans should be activated immediately, followed by a call to 911. In these cases, a threat is unfolding and the matter is one of immediate police intervention and protective Site-Specific response; not Stage One VTRA.

Most targeted workplace and school shootings are over in a matter of minutes, usually before police arrive. It is vital that every worksite have a plan which everyone understands, drills have been conducted and everyone knows what to do. In these situations, every additional second we can manufacture, to slow a perpetrator down, can save lives. A Site-Specific lockdown plan which is understood by everyone and practiced on a regular basis will save lives. The importance of having lockdown plans in place, can't be overstated. The fact that a solid lockdown plan exists, in itself, may serve as a deterrent to an individual who may be contemplating an act of targeted violence in a work or school setting. Also, having an established and practiced lockdown plan in place greatly assists in reducing stress, modeling calmness, and minimizing the traumatizing of the individuals within the system the threat occurs. The RCMP Safe Plan is the standard for practice in all jurisdictions policed by the Royal Canadian Mounted Police.

Having a Site Specific Lockdown Plan Will:

- save lives
- reduce stress
- model calmness
- minimize trauma
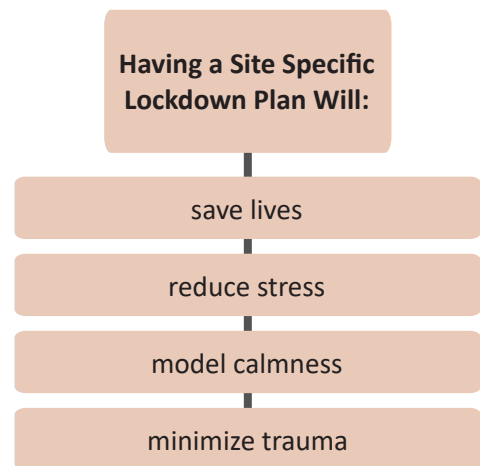
In situations like the above, where a possible threat was present but violence has not occurred (e.g. the individual of concern was found to have a weapon or replica but didn't use it), the VTRA Protocol will not be immediately activated. Instead this will be a police matter (criminal and public safety) and the subject will generally be taken into custody, remanded, and initial evaluations will be conducted within the criminal justice system.

However, prior to release the VTRA Protocol should be activated where the VTRA Lead for the Police of Jurisdiction in consultation with the appropriate Protocol Partners determines current level of risk or if a data-driven Threat Risk Assessment has been conducted internally, informs the VTRA Team about current level of risk and steps the Team can take to assist with Threat/Risk Management if necessary.

Determining when to Activate the VTRA Protocol

continued...

> **Note of Caution:**
> Sometimes stand alone Risk Assessments done by a single evaluator as well as Hospital Emergency Room assessments and others are not comprehensive data-driven assessment but more 'limited scope assessments' focused on acute level of risk. Without data from the appropriate VTRA Protocol Partners even the most skilled threat assessor may under react to a case that is actually high risk. We have consistently said that:
>
> *"A single evaluator can use the best violence risk assessment tool (or checklist) out there, but no risk assessment tool is worth squat unless you have good data to put into it. And a multi-disciplinary VTRA Team can collect more data and in a more timely fashion that any one professional can trying to do it on their own."*

Thresholds for VTRA Protocol activation addressed in this protocol include, but are not limited to:

- Serious violence or violence with intent to harm or kill
- Verbal/written threats to kill others ("clear, direct, and plausible")
- The use of technology (e.g. computer, mobile phone) to communicate threats to
- harm/kill others or cause serious property damage (e.g. "burn this office down")
- Possession of weapons (including replicas)
- Bomb threats (making and/or detonating explosive devices)

- Fire setting
- Sexual intimidation or assault
- Chronic, pervasive, targeted bullying and/or harassment
- Gang related intimidation and violence
- Hate incidents motivated by factors including, but not limited to: race, culture, religion,
- and/or sexual or gender diversity

Non-Work Hour Cases

If information is received by a VTRA team member regarding serious violence, weapons possession or a threat that is "clear, direct, and plausible" during non-work hours for Protocol Partners, police will be called and steps will be taken to assess the individual of concern as well as notify and protect the target(s) as required. Site-Specific VTRA team members and police will determine if team members need to assist beyond regular work hours or if the non-police aspect of the case can wait until regular work hours.

However, the VTRA team will be activated if the case at hand is deemed to be high risk. Open communication between Site-Specific VTRA Leads and police is essential. So is information sharing between patrol or general duty police officers and specialized police units such as mobile crisis units and school resource/liaison officers regarding non-work hour cases. Many evening or weekend incidents occur that continue to escalate into the workplace/school and many workplace/school incidents occur that escalate into the community the next day. This has proven especially useful in:

- Gang related cases
- Relational violence
- Family violence
- Workplace violence

- Work-site retaliations (current/former employees, customers, etc.)
- Sporting event retaliations
- Weekend school, college, and university party retaliations

Key Approaches in Violence Threat Risk Assessment

1 **Sharing of Relevant Information**

The sharing of information is carried out by any of the team members, on a proactive basis, to avert or minimize imminent danger that affects the health and safety of any person. Information is shared on a confidential basis and is to be used solely for the purpose of assessment or for actions directly related to or flowing from the assessment.
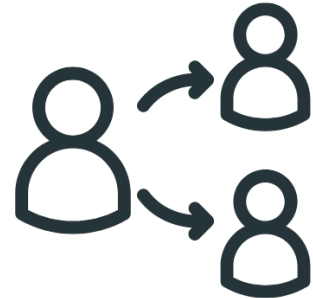
2 **Investigative Mind-Set**

This is central to the successful application of the violence threat risk assessment process. Threat assessment requires thoughtful probing, viewing information with professional objectivity, and paying attention to key points about worrisome behaviours. Personnel who carry out violence threat risk assessments must strive to be both accurate and fair.

Components of an investigative mind-set include:
• Open probing questions;
• Healthy skepticism;
• Attention to worrisome behaviours;
• Verification of facts, actions corroborated; and
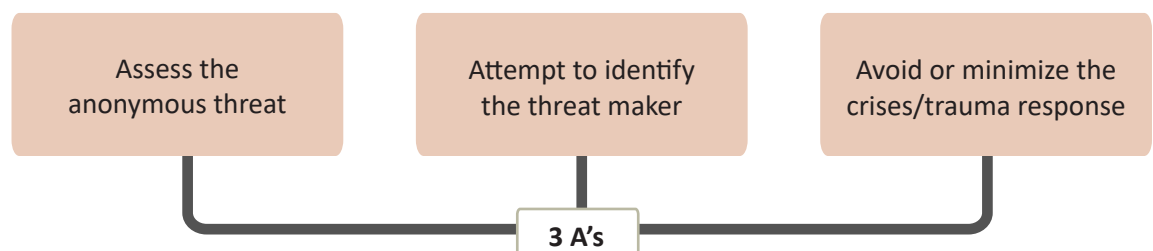• Ensuring that information is accurate.

When determining if a threat maker actually poses a risk to the person/target, consideration should be given to the following:
• Is the threat clear, direct, and plausible?
• Is the threat emotionally charged?
• What are the precipitating and contextual factors?

3 **Anonymous Threats: Assessment and Intervention**

Anonymous threats are typically threats to commit a violent act against an individual(s), specific group, or site (i.e. workplace, school). They may be found written on bathroom walls or stalls, spray painted on the side of a building, posted on the internet, letters left in a conspicuous place (i.e. staffroom table, desk) etc.

Although anonymous threats may be credible in the world of global terrorism, in the field of school and workplace VTRA, the lack of ownership (authorship) of the threat generally denotes a lack of commitment. Nevertheless, there are steps that should be followed to:

Assess the anonymous threat	Attempt to identify the threat maker	Avoid or minimize the crises/trauma response

3 A's

Key Approaches in Violence Threat Risk Assessment

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1. Assess the anonymous threat

VTRA teams should consider the following in determining the initial level of risk based on the current data (i.e. the language of the threat).

Language of Commitment:
• Amount of detail
• Threatened to do what with what?
• Method of delivery of the threat
• Is the threat clear, direct, plausible, and consistent?

2. Attempt to identify the threat maker

In many cases the author is never found but steps that can be taken to identify who the author(s) are:
• Handwriting analysis.
• Word usage (phrases and expressions that that may be unique to a particular person or group of people [street gang, club, sports team, etc.]).
• Spelling (errors or modifications unique to an individual or group).

Contra-indicators:
Some authors will switch gender and try to lead the reader to believe they are male (or female) when they are not or pretend to be someone else as a setup.

Some individuals who write anonymous "hit lists" embed their own names in the list of identified targets.

Some individuals who report having found the anonymous threat are either the author or know who the author is.

4 **Building Capacity**

The VTRA protocol is intended to be used by multidisciplinary teams trained in "Level One and Level Two Violence Threat Risk Assessment". This protocol is not a substitute for training in the field of Violence Threat Risk Assessment and should not be used until adequate training is received. The Centre for Trauma Informed Practices (CTIP) training program in VTRA is currently a four-day training initiative. Level One and Level Two are both two-day trainings.

CTIP VTRA Training

Level 1

VTRA Protocol

Level 2

VTRA Protocol
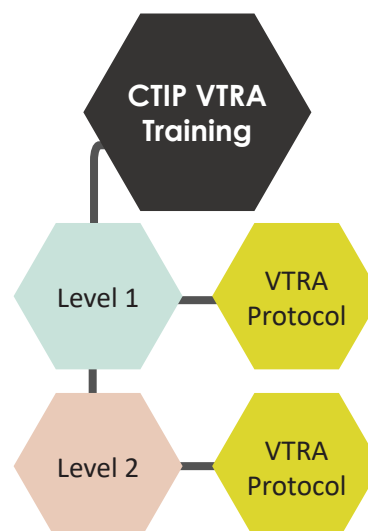
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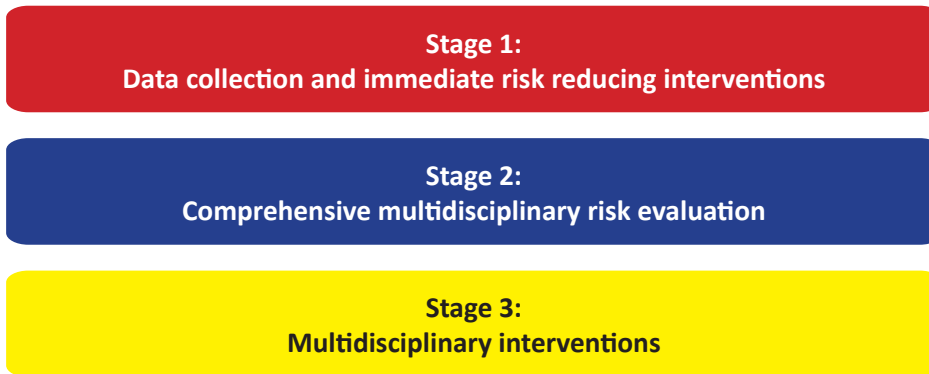
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5 **VTRA Management Committee**

The VTRA Management Committee is comprised of a minimum of 1 manager/program lead from all signed partners. The role of the committee is:

- Develop and maintain a current list of all employees and volunteers within protocol agencies (organizations) who are Level One and Level Two VTRA trained.
- Develop and maintain a current list of the VTRA Lead(s) for each protocol partner.
- Make any modifications to the written protocol.

- Review VTRA practice by having one or two cases presented to the sub-committee that highlights successes, challenges, and lessons learned.
- Determine when additional training is required.
- Serve as the management representation for assisting front line staff in navigation of the protocol and concerns when working with partners signed to the protocol.

VTRA Model

This protocol is based on The Center For Trauma Informed Practices (CTIP) Model of Violence Threat Risk Assessment (VTRA). The VTRA follows a three-step process:

> **Stage 1:**
> **Data collection and immediate risk reducing interventions**

> **Stage 2:**
> **Comprehensive multidisciplinary risk evaluation**

> **Stage 3:**
> **Multidisciplinary interventions**

VTRA combines all appropriate threat assessment concepts and risk assessment factors. This protocol allows for a comprehensive determination of violence risk and threat posed and the identification of appropriate interventions. It prevents under-reaction by professionals who may use general violence risk assessment tools as the unilateral measure to determine risk of violence of an individual. The three stage approach promotes understanding that some individuals may not pose a risk for general violence, yet may be moving rapidly on a pathway of violence toward a particular target they consider justifiable.

During data collection and risk reducing interventions VTRA team members should ensure attention to fluidity. **Fluidity** is the understanding that individuals may move between threats to harm others and a threat to harm themselves. Fluidity is an important consideration because the first hypothesis of VTRA is that a threat is a cry for help.

Stage 1 — Data collection and immediate risk reducing interventions

Report Form is the primary guide for data collection and interviewing. Stage One is generally referred to as "data collection and immediate risk reducing interventions" performed at a minimum by the Site-Specific VTRA Team and the police of jurisdiction. This initial data collection is often accomplished in one to two hours. The Stage One Report Form is the primary guide for data collection and interviewing.

- **Step 1:** Incident Screening – Plausibility-Baseline-Attack Related Behaviours (PBA).
- **Step 2:** Site-Specific VTRA Team activation (Data Collection and Consolidation).
- **Step 3:** Immediate Risk Reducing Plan developed and implemented.

That said, the VTRA Team conducting Stage One rapidly collects data related to the specific incident that resulted in protocol activation in the first place in order to determine if the threat maker really poses a risk to the target. If the threat maker really poses a risk to the target, then the team needs to stabilize the threat maker, protect the target, and take any other reasonable steps to manage the current situation. Stage One must be done once a team member becomes aware of any information that meets the criteria for protocol activation. Most data collected at this stage is called **Case Specific Data (CSD).**

VTRA Model

But in cases that prove to be truly moderate to high risk at the Stage One level there are often longer standing variables (risk enhancers) that have weakened the person to the point of posing a risk of serious violence such as childhood trauma, drug or alcohol abuse, early caregiver disruption, etc. This means that at some later point (one to two days following completion of the Stage One VTRA) we will also initiate a Stage Two VTRA.

Basic Categorization of Risk for Stage One VTRA;

Low Level of Concern:

"Low" categorization of risk does not imply "no risk", but indicates the individual is at little risk for violence, and monitoring of the matter may be appropriate.
- Threat is vague and indirect.
- Categorization of low risk does not imply "no risk" but indicates the individual is at little risk for violence.
- Information contained within the threat is inconsistent, implausible or lacks detail; threat lacks realism.
- Available information suggests that the person is unlikely to carry out the threat or become violent.
- Within the general range for typical baseline behaviour for the individual of concern in question.
- Monitoring of the matter may be appropriate.
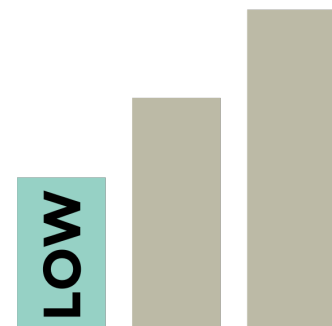
Moderate Level of Concern:

"Moderate" categorization of risk indicates the individual is at an elevated risk for violence, and those measures currently in place or further measures, including monitoring, are required in an effort to manage the individual's future risk.
- Threat is more plausible and concrete than a low-level threat. Wording in the threat and information gathered suggests that some thought has been given to how the threat will be carried out (e.g., possible place and time).
- No clear indication that the individual of concern has taken preparatory steps (e.g., weapon, seeking), although there may be an ambiguous or inconclusive reference pointing to that possibility. There may be a specific statement seeking to convey that the threat is not empty: "I'm serious!"
- A moderate or lingering concern about the individual's potential to act violently.
- Increase in baseline behaviour.
- Categorization of risk indicates the individual is at an elevated risk for violence, and those measures currently in place or further measures, including monitoring, are required in an effort to manage the individual's future risk.

VTRA Model

High Level of Concern:

"High" categorization of risk indicates the individual is at high
or imminent risk for violence, and immediate intervention is
required to prevent an act of violence from occurring.

- Threat is specific and plausible. There is an identified target.
  Individual has the capacity to act on the threat.
- Information suggests concrete steps have been taken toward
  acting on threat. For example, information indicates that the
  individual has acquired or practiced with a weapon or has
  had a victim under surveillance.
- Information suggests strong concern about the individual's
  potential to act violently.
- Significant increase in baseline behaviour.
- Categorization of risk indicates the individual is at a high or
  imminent risk for violence.
- Immediate intervention is required to prevent an act of
  violence from occurring.

HIGH
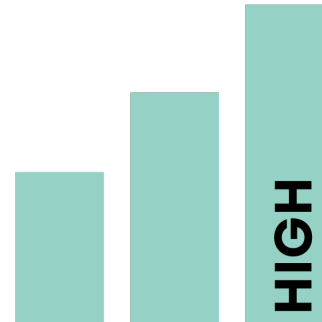
Stage 2 | **Comprehensive Multidisciplinary Risk Evaluation**

Note: Professionals leading the Stage Two process must be trained in Level Two VTRA.

- **Step 4:** Community Protocol Activation (Further Data Collected – Risk Assessment).

Stage Two is generally referred to as "Specialized risk evaluation" which often involves VTRA team
members or partners using their specialized training and skill to more fully assess confirmed risk
enhancers and explore hypothesized risk enhancers. As such, much of Stage Two VTRA is the assessment
of more statistically derived traditional risk enhancers that give insight into the overall functioning of
the Individual of concern. It assists in targeting areas that may need to be addressed strategically and
therapeutically, not just to lower the level of risk contextually, but to result in "lasting gains" where
stabilization is both maintained and the cognitive, emotional, and behavioural baselines are reduced
over time.

Some or all of the following may take a further lead in Stage Two VTRA:

Police-based threat assessment units	Psychiatry	Pediatrics
Mental Health	Child Protection	Youth Protection	Others

VTRA Model

Many protocol regions across the country have anywhere from ten to thirty (or more) agencies that are trained and signed-off partners to the Community VTRA Protocol. However, the disparity in those numbers means that in some regions key professionals who should be part of the formal VTRA Team are not yet trained. These agencies are referred to as "external agencies" meaning they are professionals or agencies who are not VTRA trained and not signed protocol partners.

While the VTRA Team understands that the untrained partner/agency is in essence part of the Stage Two VTRA process, it is more useful to communicate with these "external agencies" in their own professional language during the referral process. Education about VTRA can occur for them at a later time.

Stage 3 — Multidisciplinary Interventions

- **Step Five:** Longer-Term Multi-Disciplinary Intervention Plan developed and maintained.
- **Step Six:** Follow-up – Continue to monitor, evaluate, and/or revise intervention plan as needed (30-60-90-day follow-up as needed).

From the moment the VTRA Protocol is activated there is ongoing data collection, assessment, and "intervention". Intervention plans must be established, implemented, and evaluated for both Stage One and Stage Two VTRA's. When the team identifies that the person who threatened to use a knife actually has a knife, then removing the weapon is an immediate risk-reducing "intervention". However, removing the weapon does not prevent them from obtaining a knife again at a later date. As such, the intervention planning goes beyond access to the means (short term) and instead works to decrease the likelihood that the individual of concern will return to the point of even wanting to use a knife to harm someone in the future (long term).

As Stage Two VTRA nears completion it should be evident as to what the primary risk enhancers are and therefore who is the logical VTRA lead for the remainder of the case. Many team members present during the early stages of the case may no longer be needed but are available as an original team (agency) member if needed again. The VTRA team does not abandon the lead(s)! However, the goal of successful intervention is that fewer and fewer resources are needed to support the individual of concern (and/or their families etc.) as time goes on.

In essence, good intervention planning occurs when there is ongoing collaboration in cases considered as a complex case by the VTRA Team members. By definition:
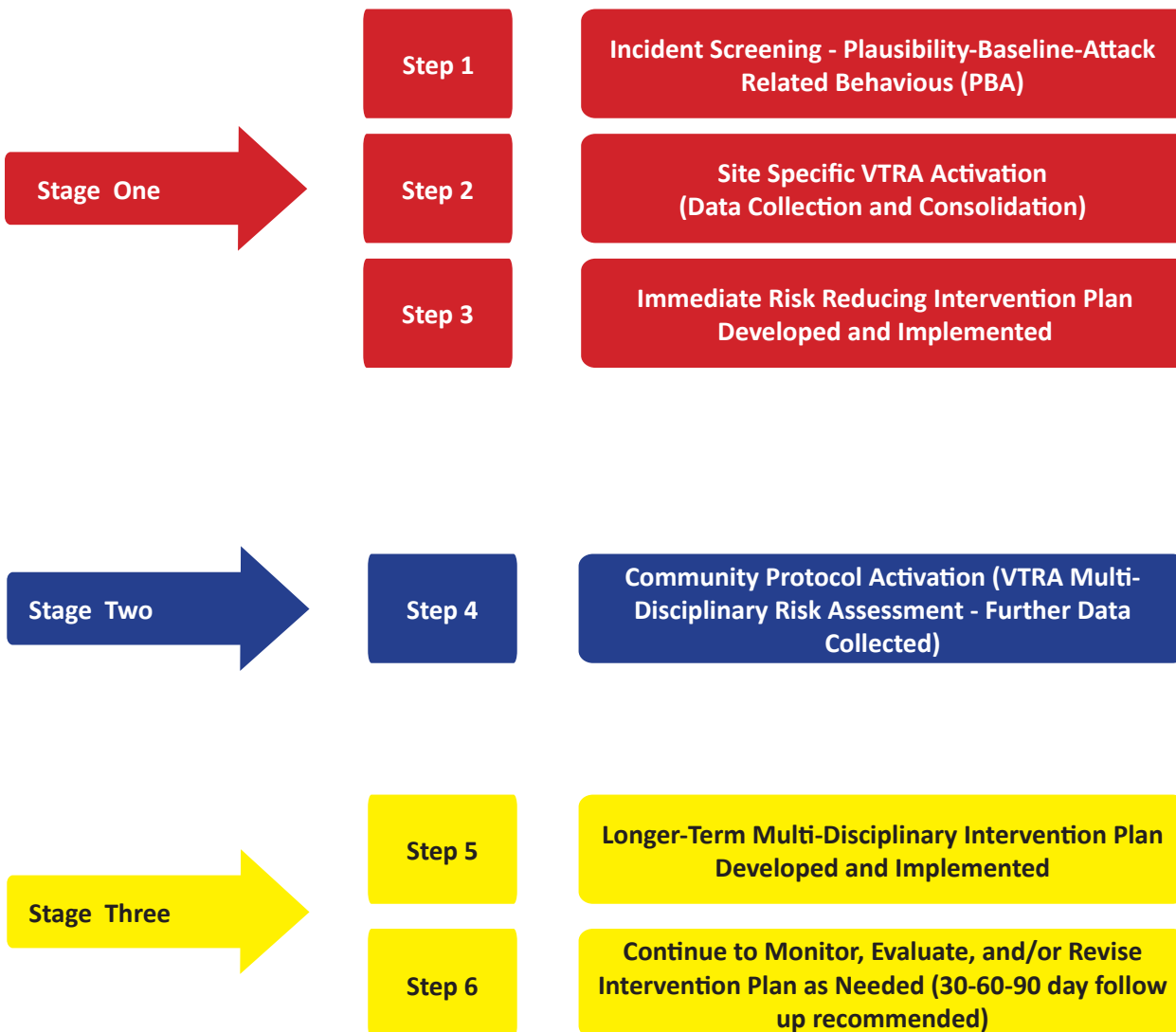
"Any case that has at least two or more significant risk enhancing variables that requires at least two or more different VTRA partners to remain involved in order to lower the level of risk and obtain lasting gains is a **complex case**".

Cases that reach this level of intervention planning should place a special emphasize on predetermined follow-up meetings where all related VTRA team members come together personally or via telephone conference etc. to report and review the current state of the case. Sometimes data is obtained in these meetings that confirms the interventions are working or that follow through did not occur when the individual of concern claimed it did. Thirty day (30); ninety day (90) and even one-year follow-ups have assisted tremendously with ensuring a high-risk case does not "fall through the cracks".
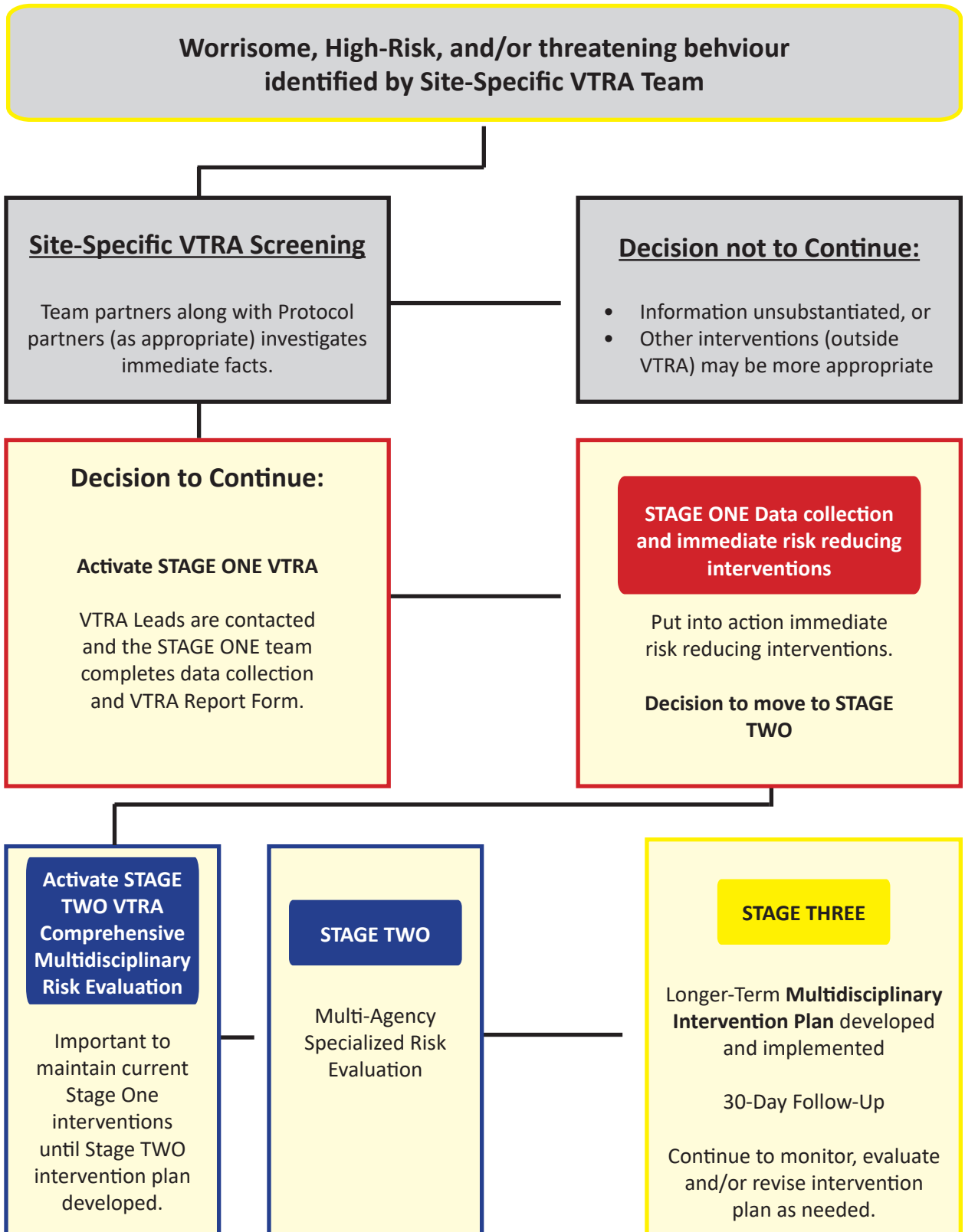
VTRA Model

A model focusing on three distinct yet seamless stages, and six key steps that incorporates a multi-disciplinary team approach.

Stage One →

Step 1	Incident Screening - Plausibility-Baseline-Attack Related Behaviours (PBA)
Step 2	Site Specific VTRA Activation (Data Collection and Consolidation)
Step 3	Immediate Risk Reducing Intervention Plan Developed and Implemented

Stage Two →

Step 4	Community Protocol Activation (VTRA Multi-Disciplinary Risk Assessment - Further Data Collected)

Stage Three →

Step 5	Longer-Term Multi-Disciplinary Intervention Plan Developed and Implemented
Step 6	Continue to Monitor, Evaluate, and/or Revise Intervention Plan as Needed (30-60-90 day follow up recommended)

VTRA Response Flow Chart

Worrisome, High-Risk, and/or threatening behviour identified by Site-Specific VTRA Team

Site-Specific VTRA Screening

Team partners along with Protocol partners (as appropriate) investigates immediate facts.

Decision not to Continue:

- Information unsubstantiated, or
- Other interventions (outside VTRA) may be more appropriate

Decision to Continue:

Activate STAGE ONE VTRA

VTRA Leads are contacted and the STAGE ONE team completes data collection and VTRA Report Form.

STAGE ONE Data collection and immediate risk reducing interventions

Put into action immediate risk reducing interventions.

Decision to move to STAGE TWO

Activate STAGE TWO VTRA Comprehensive Multidisciplinary Risk Evaluation

Important to maintain current Stage One interventions until Stage TWO intervention plan developed.

STAGE TWO

Multi-Agency Specialized Risk Evaluation

STAGE THREE

Longer-Term **Multidisciplinary Intervention Plan** developed and implemented

30-Day Follow-Up

Continue to monitor, evaluate and/or revise intervention plan as needed.

Sharing of Information

> **Wherever possible and reasonable, consent to disclose personal information should be obtained.**

The general intent of access to information and protection of privacy legislation is to regulate the collection, storage, use, and disclosure of personal information. (Note: When the term "personal information" is used in this document, this includes personal health information.)

Informed consent does not exist unless the individual knows what he/she is consenting to, and understands the limits of confidentiality regarding the disclosure. The individual must be made aware that he/she can withdraw consent at any time by giving written or verbal notice. Community partners are committed to the sharing of relevant information to the extent authorized by law.

The presumption is that all information shared by partners about individuals and families is personal information and should be treated with a high level of confidentiality. Once sharing of information has occurred each partner who receives the information will be responsible for ensuring appropriate storage, use, and disclosure of such information in accordance with the laws, regulations, policies, and procedures applying to that partner. Each partner will be responsible for the education of personnel in this regard.

It is vital to note that legislation allows the release of personal information if there is imminent threat to health or safety. To make the public aware, community partners are recommended to share a Fair Notice Letter with the stakeholders it serves.

When to Share Information

Green Light	Yellow Light	Red Light
Generally speaking, and subject to the guidelines of LAFOIP, relevant personal information CAN be shared under one or more of the following circumstances:	In any of the following circumstances, obtain more information and receive direction from a supervisor:	Information can NEVER be shared under any of the following circumstance:
With written consent (use Youth Criminal Justice Act [YCJA]); To avert or minimize imminent danger to the health and safety of any person; To report a child who might need protection under the Child and Family Services Act; By order of the Court; To support the rehabilitation of a young person under the Youth Criminal Justice Act; To ensure the safety of students and/or staff under the YCJA; To cooperate with a police and/or a child protection investigation.	Where consent is not provided or is refused but where there may be a health or safety issue for any individual or group(s); When asked about a report of criminal activity given to the police; When asked to share YCJA information from records, where there is a demand or request to produce information for a legal proceeding; When a professional code of ethics may limit disclosure.	There is a legislative requirement barring disclosure; No consent is given and there is no need to know or overriding health/ safety concerns; Consent is given but there is no need to know nor overriding health/safety concerns.

Sharing Information: Legislation and Case Law
Each partner involved in an assessment will be responsible for determining the threshold for sharing information with other partners. Each partner will be responsible for ensuring compliance with applicable legislation.

When to Share Information

Who (organization)	Is disclosing what	To whom
Local Authority Freedom of Information and Protection of Privacy Act (LAFOIP)		
Local authorities, including municipal and local governments, school authorities, and anyone acting on their behalf (employee as defined in Act)	**Personal information** that: • is in the possession or under the control of a local authority	Can be **shared with**: • anyone, where necessary to protect the mental or physical health or safety of any individual

Scan here for more information on the **Local Authority Freedom of Information and Protection of Privacy Act (LAFOIP)**

Who (organization)	Is disclosing what	To whom
Health Information Protection Act (HIPA)		
Health information custodians (trustee), including Saskatchewan Heath Services, physicians and other regulated or defined health care providers and anyone acting on their behalf (affiliate as defined in Act)	**Health information** that: • is in the custody or control of the trustee	Can be **shared with**: • anyone, where the trustee believes, on reasonable grounds, that the disclosure will avoid or minimize a danger to the helath or safety of any person

Scan here for more information on the **Health Information Protection Act (HIPA)**

Who (organization)	Is disclosing what	To whom
Freedom of Information and Protection of Privacy Act (FOIP)		
Public bodies, including municipal and provincial government ministries, school authorities, and anyone acting on their behalf (employee as defined in Act) and agencies in Saskatchewan including Child and Family Services and the Ministry of Justice.	**Personal information** that: • is in the possession or under the control of a provincial authority	Can be **shared with**: • anyone, when the public interest in disclosure clealry outweighs any invasion of privacy • anyone, when disclosure would clearly benefit the individual to whom the information relates

Scan here for more information on the **Freedom of Information and Protection of Privacy Act (FOIP)**

When to Share Information

continued...

Who (organization)	Is disclosing what	To whom
Youth Criminal Justice Act (YCJA)		
Information in a **Youth Criminal Justice Act record,** within the access period	**Personal information** that: • can ensure the safety of staff, students, or others • can facilitate rehabilitation/reintegration of the young person • can ensure compliance with a young justice court order or any oder of the provincial director respecting reintegration leave	Can be **shared with**: • any professional or other person engaged in the supervision or care of a young person • representatives of school divisions, schools, or any other educational or training institution only in limited circumstances *such sharing of information does not require the young person's consent
		• the recipient of youth justice information is responsible for ensuring compliance with legislated restrictions in use, storage and disposal under the YCJA ss. 126 (7). • this provision requires that the information must be kept separate from any other record of the young person • no other person must have access to the information except as authorized under the YCJA or for the purpose of ss. 125 (6) • information must be destroyed when it is no longer needed for the purpose for which it was disclosed

Scan here for more information on the **Youth Criminal Justice Act (YCJA)**

Yorkton and Area CTASP

When to Share Information

continued...

Who (organization)	Is disclosing what	To whom
Child and Family Services Act		
In Child and Family Services, information is gathered under the mandate of **The Child and Family Services Act** and **The Adoption Act.** The minister, a director or an officer may disclose or communicate information in any form that minister of director considers appropriate.	**Personal information** that: • that the Ministry is given that had been gathered through other legislative mandates such as Health Information, Criminal Code investigations, etc.	Can be **shared with**: • the guardian, parent, or foster parent of that child • the child to whom the information relates

Scan here for more information on the **Child and Family Services Act**

Who (organization)	Is disclosing what	To whom
Supreme Court Decision: R. V. M. (M. R.), (1998) 35. C. R. 398		
The Supreme Court of Canada (1998) has established legal precedent by ruling (in R. vs M (M. R))	**Personal information** that: • protects the greater student population supersedes the individual rights of the students	Can be **shared with**: • school officials that must be able to act quickly and effectively to ensure the safety of the students to prevent serious violations of the school rules
Reference: Cameron, K. (2018) Community Protocol for Violence Threat Risk Assessment (VTRA) and Intervention (10th Edition)		

Scan here for more information on the **Supreme Court Decision: R. V. M. (M. R.), (1998) 35. C. R. 398**

Documentation

The Stage 1 Violence Threat Risk Assessment Report Form (See Appendix A) is completed by the Threat Assessment Team (TAT) or CTASP member lead and serves as the official written record of the meeting called to discuss identified behaviour and to determine follow up plans or interventions. The written report and/or information from the meeting may be shared with community partners.

If the plan requires further action outside of the originating CTASP partner, the appropriate organization may receive a copy of the original report. In such instances, it is essential that all organizations make reasonable efforts to ensure that their protocols for the sharing, storage, and retention of this information and report are consistent with the following principles:

- At the minimum, partner organizations should ensure their personnel follow all requirements of any privacy legislation which may pertain to their agency;
- Information written and reported must be kept confidential and is intended to be shared with others on a "need to know" basis only;
- Information is shared only for the purpose for which it was created; and
- The written report is stored securely and retained only for the length of time required for the purpose for which it was created.

Community partners must ensure that policies and/or procedures are in place to protect the confidentiality of all information received by the organization and its employees through the assessment process. Community partners should take steps to ensure that all employees involved in the assessment process have a clear understanding of the requirements for confidentiality and of the consequences for breaches of confidentiality. There should be appropriate enforcement by the community partners of their policies and procedures regarding confidentiality.

Requests to amend information or requests for access to information will be addressed in accordance with the legislation applying to the agency to whom the request is made.

External Communications

As part of the threat assessment process, protocol members will consult with one another and their agencies to coordinate any public messages via the media. The VTRA Management Committee will keep each partner informed of any threats or safety concerns that warrant notification.

Suicide as a Special Consideration

When Site-Specific professionals are dealing with a situation where an individual is of concern because of suicidal ideation they are required to follow their existing protocols for suicide risk assessment. Protocol Partners are responsible for having personnel who are trained in suicide risk assessment and intervention.

VTRA should be activated in cases where one or more suicides are likely to have a ripple effect or large impact on the community. Those trained in suicide risk assessment should also be VTRA trained and be open to the possibility that the individual being assessed may be fluid. The third formal hypothesis in the Stage One VTRA process is: "Is there any evidence of fluidity?"

As well, whenever there is evidence of a suicide pact or evidence that there is a peer dynamic or a "puppet master" in the background trying to drive them to kill themselves, the VTRA Protocol is activated. Therefore, the VTRA Protocol should only be used as part of a case with suicidal ideation when there is evidence of:

Fluidity	Suicide Pact	Conspiracy of two or more (Puppet Master)	Multiple Suicides or Attempts in Quick Succession in a Community

Worrisome Behaviours

Worrisome behaviours are "grey area" cases. This would include instances where a individual of concern may be engaging in behaviours such as drawing pictures, writing stories (and posting or presenting them), or making vague statements that do not, of themselves, constitute "uttering threats" as defined by law but are causing concern because of violent, sexual, or other concerning content. The primary standard for assessing these types of cases is "the closer to reality, the more concerned we become." In other words, when a individual of concern draws mythical creatures engaging in scenes of brutal violence we do not assume the author poses a risk as mythical creatures are not real. But if someone puts a picture of a "stick" man choking a woman and leaves it on the coffee table in the staff room prior to a female co-worker walking in, that would be "worrisome."

Worrisome Behaviour cases are for Site-Specific VTRA team members to discuss internally and do not result in activation of the Community Protocol because it does not cross a clear line. Yet, it is appropriate for the Site-Specific VTRA Lead to consult with their Police VTRA Lead even from a consultation perspective of "what do you think about this Facebook posting?" Independent of the Site-Specific VTRA Lead, the Police member may do their own background check and if they determine the individual of concern targeted and stalked a female employee in a different work setting in a different province prior to this current situation, further inquiry will now begin.

In many cases, following up on "Worrisome Behaviours" results in good early intervention measures. There are also cases where "a little data leads to a lot" and what seems like a minor case can quickly evolve to the formal activation of the VTRA team.

Children Under 12 Years of Age:
If there is a significant increase/shift in baseline behaviour, weapons possession or clear, direct, and plausible threats, the formal VTRA protocol will still be activated. Nevertheless, when younger children engage in violent or threat-related behaviours, developmental, and exceptionality issues need to be taken into consideration. Generally speaking, most threat related behaviour exhibited by young children would fall into the category of "worrisome behaviours". However, just because a child is under 12 years of age does not mean they cannot pose a risk. A 7-year old who threatens for the first time "I'm gonna set you on fire" to a peer they have been harassing for some time is worthy of VTRA Screening.

Parent/Caregiver Roles in VTRA

Parent (Caregiver) Notification – Person(s) of Concern:
Note: This section is primarily focused on children and youth under 18 years of age. However, there are adult VTRA cases where parents, caregivers, legal guardians, siblings, spouses (partners), and others associated with the individual of concern have been contacted due to concerns regarding risk to self or others.

Parent(s) or caregiver(s) are an essential part of the assessment process as they are necessary sources of insight and data regarding the "bedroom dynamic", "An increase or shift in baseline", and other contextual factors that may be either "risk-reducing or risk-enhancing". As such, notification of parent(s) or caregiver(s) is meant to activate a collaborative process between home and the VTRA Team to more fully assess the young individual of concern and collaboratively plan for appropriate intervention where necessary.

Therefore, parent(s) or caregiver(s) of a young person under the age of 18, or who is still under the guardianship of an adult, should be notified at the "earliest opportunity". Specifically, notification should occur after the VTRA team has collected enough initial data to confirm that a Stage One VTRA should be activated. Depending on the initial level of risk or evolving dynamics of a particular case parent/caregiver notification may be delayed. Common reasons include:

1. Child protection issues that emerge early on in the data collection process. In these situations, that part of the case will be the domain of Child Protection.
2. Parent/Caregiver poses a potential risk of violence to the Site where the VTRA was activated. In these situations, the police will take the lead of notification.
3. Where multiple young people of concern (and others) are believed to be part of a conspiracy of two or more and therefore the timing (correlation) of notifying multiple parents/caregivers must be done strategically so as not to escalate a complex peer dynamic.

Parent (Caregiver) Notification – Target(s):
Note: This section is primarily focused on children and youth under 18 years of age. However, there are adult VTRA cases where parents, caregivers, legal guardians, siblings, spouses (partners) and others have been contacted due to concerns regarding the trauma response of the target. This may include hyper or hypo arousal of the target that may be impairing their current judgment.

As a primary purpose of the Community VTRA Protocol is violence prevention, identifying, protecting, and supporting the target(s) of the threat is a priority as well. Therefore, parent(s) or caregiver(s) of a young person under the age of 18, or who is still under the guardianship of an adult, should be notified at the "earliest opportunity".

Often the target and his/her parent(s) or caregiver(s) are fearful or traumatized by the situation; therefore, notification should be done with skill, tact, and planning. A plan should be made for possible emotional supports the family may need. As such, if the threat is "clear, direct, and plausible" or the VTRA team feels violence may be imminent (if the case is unfolding during school hours and the target is present at school), notification will occur after the target is secured/protected from potential harm. If the initial threat is not "clear, direct, and plausible", the VTRA team will continue to collect data to determine the level of risk before the parent(s) or caregiver(s) are notified: this is to prevent unnecessarily traumatizing individuals when no risk is present.

Parent/Caregiver Roles in VTRA

continued...

Taking the time to do a proper initial assessment can prevent some of the extreme overreactions that have occurred in several low risk cases across this country. There are also times when a case may first appear as high-risk but quickly prove to be a minor non-threat related situation.

However, there are also cases where notification may be delayed, such as:

1. Long standing dynamics between two conflicting families that are likely to result in further threats and/or violence once notification occurs. These situations would be seen as "threat management" cases.
2. The parent/caregiver is highly likely to escalate the situation by overreacting before the VTRA Team can conduct all necessary initial interviews and take protective steps for the target(s).
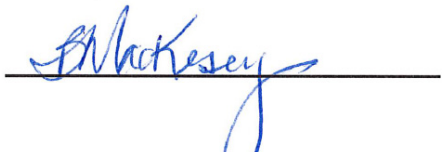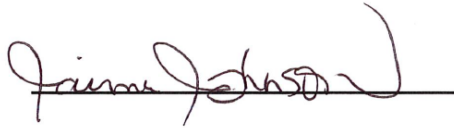
DWIGHT GUY
Board Chair
Christ the Teacher Catholic Schools
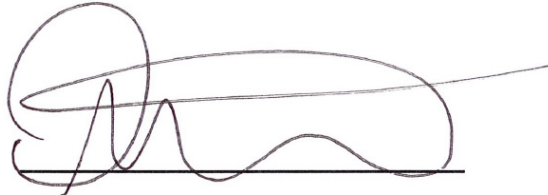
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Director of Education
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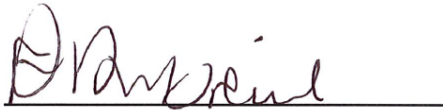
JAIME JOHNSON
Board Chair
Good Spirit School Division

QUINTIN ROBERTSON
Director of Education/CEO
Good Spirit School Division
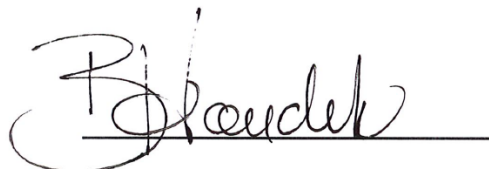
ALISON DUBRIEL
President/CEO
Parkland College

SGT. BURTON JONES
S Sgt. South District 'F' Division
RCMP

BRITTON HOUDEK
South East Director
Saskatchewan Health Authority
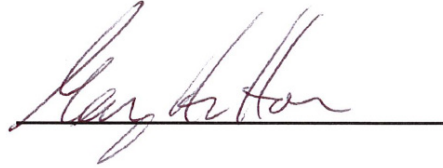
TERRI-ANN LEPOWICK
Tribal Justice Unit Director
Yorkton Tribal Council - Justice Unit
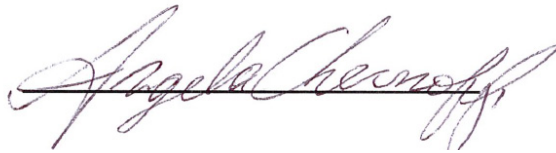
Community Partners

Signed on March 29, 2023
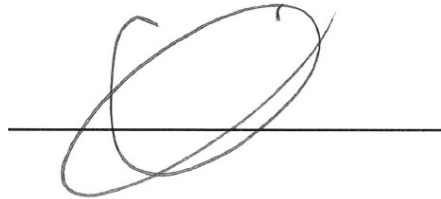
GARY HUTTON
Board President
Big Brothers Big Sisters
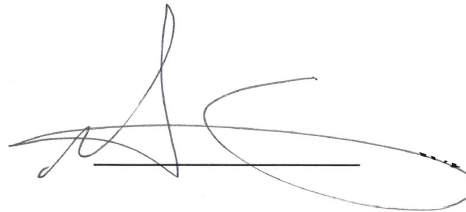
ANGELA CHERNOFF
Coordinator
Bruno's Place

WALTER STREELASKY
Mayor of Melville
City of Melville
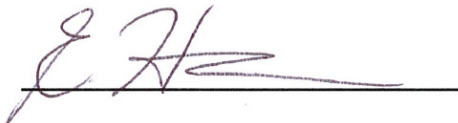
MITCH HIPPSLEY
Mayor of Yorkton
City of Yorkton
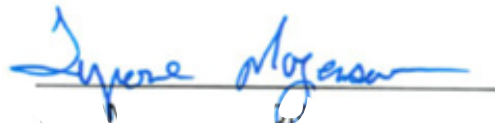
EDITH MONTESCLAROS
Executive Director
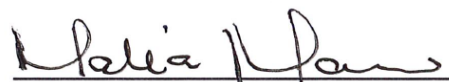**East Central Newcomer
Welcome Centre Inc.**

ERIN HUSER
General Manager
Good Spirit Housing Authority

TYRONE MOGENSON
Fire Chief
Melville Fire and Rescue

MALIA MANN
Director of Operations
**Ministry of Corrections & Policing
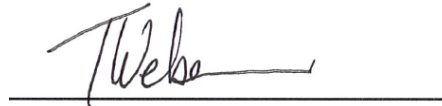and Public Safety**
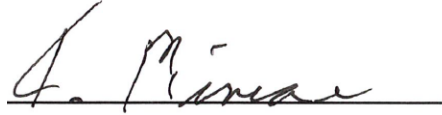
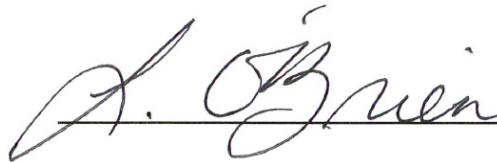# Community Partners

Signed on March 29, 2023

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KIMBERLY MINEAU
Manager, Service Delivery
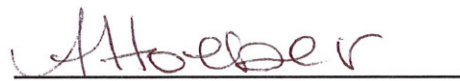Child & Family Programs
Ministry of Social Services

Government
of
Saskatchewan

TERESA WEBER
Supervisor, SE Region
Community Living Service Delivery
Ministry of Social Services

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of
Saskatchewan
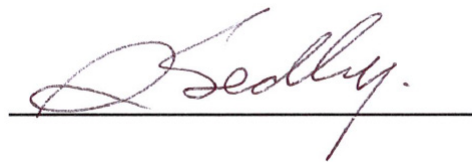
LAURA O'BRIEN
Chair
Parkland Regional Library

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ALEKS HOEBER
Regional Director
SaskAbilities

SaskAbilities

ANDREW SEDLEY
Executive Director
**Society for the Involvement of
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TREVOR MORRISSEY
Fire Chief
Yorkton Fire Protective Services

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