



POLICY NUMBER: 5.0

SUBJECT: Threat Management and Safety Intervention

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## I. PURPOSE

This Policy establishes a process for reporting and reviewing violent behavior and threats to physical safety, which potentially or actually pose a risk to persons on campus or in University programs, and other conduct that substantially disrupts University operations.

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## II. REFERENCES

- A. Southern Utah University Policy 5.61 *Abusive Conduct*
  - B. Southern Utah University Policy 6.22 *Faculty Due Process*
  - C. Southern Utah University Policy 11.2 *Student Conduct Code*
  - D. [Utah Code § 53B-2-106 Duties and responsibilities of the president of a degree-granting institution of higher education -- Approval by board of trustees](#)
  - E. [Utah Code § 53B-3-101 et seq. Enforcement of Regulations at Institutions](#)
  - F. [Utah Code § 76-8-701 et seq. Offenses Against the Administration of Government, Colleges and Universities](#)
  - G. [Utah Code § 78B-7-101 et seq. Protective Orders and Stalking Injunctions](#)
  - H. [Utah State Board of Higher Education Policy R220 Delegation of Responsibilities to the President and Board of Trustees](#)
  - I. [Utah State Board of Higher Education Policy R251 Campus Speakers](#)
  - J. [Utah State Board of Higher Education Policy R253 Campus Discipline](#)
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## III. DEFINITIONS

- A. **Employee:** A person employed by Southern Utah University.
- B. **Faculty:** See SUU Policy 6.0 *Definition of Faculty*.
- C. **Respondent:** The person reported to have engaged in conduct prohibited by this Policy.

D. **Student:** See SUU Policy 11.2 *Student Conduct Code*.

E. **Visitor:** A person who has a reasonable basis and expectation to be on campus or in University programs or activities but who is not an Employee or Student in the relevant context.

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#### IV. POLICY

##### A. Scope of Policy

1. This Policy prohibits threats to physical safety, violent conduct, and conduct that otherwise substantially disrupts University operations. It sets out the process to address reported conduct that is prohibited, as set out in Section IV.B., below. This Policy applies to all conduct regardless of where it occurs to the extent it poses a risk to University property, operations, or to persons on University property or in University programs and activities.
  2. Abusive conduct is distinct from conduct prohibited under this Policy, and is addressed in SUU Policy 5.61. In the event of any conflict, this Policy shall control and supersede to address threats, violent behavior, and substantially disruptive conduct.
  3. Conduct prohibited by this Policy may also be prohibited by other University Policy. As such, applicable University administrators may review conduct under one or more policies, either simultaneously or sequentially, as determined by the University administrators responsible to implement those policies.
    - a. If reported conduct involves a potential violation of SUU Policies 5.27 or 5.60, the Director, Equal Opportunity and Clery Compliance Office, shall determine in what order and to what extent the University will implement the relevant policies.
    - b. Likewise, the designated decision-maker under this Policy may implement temporary risk management measures under this Policy while conduct is evaluated under this and/or other policies.
  4. Since University conduct processes are entirely separate from criminal or civil litigation, legal outcomes do not affect the University processes nor will pending criminal or civil litigation stop or delay those processes.
- B. Prohibited Conduct. The University prohibits Students, Employees, and Visitors from engaging in threats to physical safety, violent conduct, and conduct that substantially disrupts University operations. Such conduct is subject to sanctions and/or risk management measures.

### C. Reporting Required

1. University Employees are required to report threats to physical safety, violent conduct and conduct that substantially disrupts University operations of which they learn about through, or is in any way related to, their job duties. Employees shall make the report in person, over email, or through other designated reporting form to the applicable Chair of the applicable Behavioral Assessment Team.
2. Reporting Protection Order. Each Employee and/or Student who receives a protective or restraining order (may be referred to as a cohabitant protective order, dating violence protective order, sexual violence protective order, or civil stalking injunction) that lists University-owned or -leased premises as a protected area, or otherwise prohibits the Employee or Student from being within a certain proximity or near another University Employee, Student, or Visitor, is required to provide a copy of such order to the Dean of Students (for orders binding Student) and/or the Director of Human Resources (for orders pertaining to all others), as well as the SUU Police Department.
3. Multiple Reporting Obligations. University Employees may have reporting obligations under multiple policies, including this Policy. For example, in the case of a reported sexual assault, an Employee may have obligations to report under this Policy, SUU Policy 5.27, and SUU Policy related to Clery Reporting. Who is required to report varies based on Policy and law. Employees who are required to report must fulfill *all* reporting obligations. And even if an Employee or other person is not required to report, all persons are strongly encouraged to report concerning behavior that potentially poses a physical safety risk to the University or persons on its property or in its programs.

### D. Team Membership

1. The Behavioral Assessment Teams are chaired by:
  - a. Dean of Student or designee (when reported conduct is by a Student).
  - b. Director, Human Resources or designee (when reported conduct is by an Employee).
  - c. Executive Director, Enterprise Risk Management (when reported conduct is by a Visitor).
2. Other standing Team members for all Teams include representatives from:
  - a. University Police.
  - b. Counseling and Psychological Services.

- c. Office of Legal Affairs, as legal advisor to the Team.
3. Depending on the circumstances, the Team members may also include situational members:
  - a. Provost's Office (for matters related to Faculty).
  - b. University Housing (for matters impacting University Housing).
  - c. Office of Equal Opportunity and Clery Compliance (for matters relating to discrimination, harassment and sexual assault or otherwise involving Clery Reportable Crimes [as defined in the Clery Policy]).
  - d. Recreation and Wellness.
  - e. Faculty or members of the appropriate academic department administrators, as needed.
  - f. Other University Employees with knowledge of related circumstances that the Chair determines could assist the Team in evaluating the risk.

E. Team Assessment, Referrals and Decisions.

1. Upon receipt of a report of threat to physical safety, violent conduct, or substantially disruptive conduct, the Chair makes an initial assessment to determine whether the applicable Team should convene. If based on information available to the Chair, the Chair determines that the conduct meets one or more of the types of prohibited conduct, the Chair will convene the team.
2. If the report of conduct **by a Student** warrants further review, the Chair promptly convenes Student Behavioral Assessment Team (BAT).
  - a. The Team gathers to share relevant information and assess the existence, if any, and risks presented and potential risk mitigation measures.
  - b. If the Chair of the Team, after receiving input from other Team members, determines that reported conduct, if true, is a threat to physical safety, violent behavior, or substantially disruptive conduct, then the Chair shares the Team's assessment, including sources, reported facts, level of risk if the reported conduct is true and potential risk mitigation measures--all as applicable--with the appropriate administrator (if not part of the BAT Team) to process under applicable Policy.

- c. Generally, these matters are referred for processing under SUU Policy 11.2, but other policies also may apply. The processes may run simultaneously or sequentially and the review may be conducted for different purposes as set out in those policies. Other applicable policies may include, but are not limited to, SUU Policy 5.27, Policy 5.60, employment policies related to Student Employees (when applicable) or the housing residential contract.
    - d. In cases where a Student's threatening, violent, or substantially disruptive behavior is related to a reasonably known diagnosable health condition, voluntary and involuntary withdrawal Policy and/or protocols also may apply. The Dean of Students or designee shall make that determination when applicable.
3. If the report of conduct **by an Employee** warrants further review, the Chair promptly convenes the Employee Behavioral Assessment Team.
  - a. The Team gathers to share relevant information and assess the existence, if any, of the risks and potential risk mitigation measures.
  - b. If the Team concludes that reported conduct, if true, is a threat, violent behavior, or substantially disruptive conduct, then the Supervisor of the Employee-Respondent and the Chair of the Team gather any additional relevant information needed.
  - c. The Supervisor and Chair then meet with the Respondent-Employee to present the relevant information (giving notice) and providing an opportunity to respond. They also provide the Respondent with information about this Policy, as needed.
  - d. After the meeting and taking into consideration all available relevant information including the Respondent-Employee's response, the Supervisor, in consultation with the Chair, determines whether the Employee-Respondent violated this Policy and if so, what sanctions and/or risk management measures are imposed on the Employee-Respondent.
    - i. The decision is in writing with corresponding reasoning.
    - ii. The Supervisor sends the written decision to the Respondent-Employee as the decision of the University, and such other University officials with a need to know.

- e. In the event that a Faculty member will be suspended, terminated, or the decision will materially alter the Faculty-Respondent's job duties and/or access to campus based on a violation of this Policy, that Faculty-Respondent may grieve the decision to the Faculty Review Board in accordance with the processes in SUU Policy 6.22, Faculty Due Process. All other decisions of the Supervisor are final decisions on behalf of the University.
  - i. The Faculty-Respondent's Notice of Appeal will serve as the Petition for the purposes of SUU Policy 6.22. The Notice of Appeal must meet all of the requirements of a Petition listed in SUU Policy 6.22.
  - ii. The Team Assessment and decision by the Supervisor under this Policy will serve as the Preliminary Investigation or fact-finding as required in SUU Policy 6.22.
  
- f. In the event that a non-Faculty Employee (determined based on primary scope of duties) will be suspended, terminated, or have their employment terminated or suspended or access to campus materially altered based on a violation of this Policy, that Employee-Respondent may grieve a decision in accordance with the processes listed below. All other decisions of the Supervisor are final decisions on behalf of the University.
  - i. An Employee may request an appeal of the Supervisor's decision by filing a Notice of Appeal with the Cabinet level Vice President (or equivalent) who oversees the Respondent-Employee's department or division.
    - A. The Notice of Appeal must state the basis for appeal and any supporting facts and evidence.
    - B. The Notice of Appeal must be submitted no later than five (5) days following receipt of the Supervisor's written decision.
  - ii. Any sanctions or risk management measures imposed by the Supervisor's decision will be implemented and remain in effect during the pendency of the Appeal.
  - iii. Appeals are not a separate assessment of the facts, and Appeals are not granted on the basis of disagreement with the written

decision. A Respondent-Employee may Appeal a decision based only on one or more of the following:

- A. There was a denial of adequate and fair due process that resulted in a material error;
  - B. The sanction and/or risk management measure imposed was not appropriate for the violation(s) which the Employee was found to have committed; or
  - C. There is new evidence or information that was not reasonably available at the assessment or decision which is reasonably likely to materially affect the outcome of the decision.
- iv. The Vice President may affirm the decision of the Supervisor, send the matter back for reassessment, or amend the findings and/or sanctions or risk management measures.
- A. The Vice President will provide to the Respondent-Employee a written decision on the appeal within a reasonable timeframe, with an effort to provide it within seven (7) days of receipt of the Notice of Appeal.
- v. The decision of the Vice President is the final decision of the University and not subject to appeal.
4. If the report of conduct **by a Visitor** warrants further review, the Chair convenes the Visitor Behavioral Assessment Team. This Team follows the same process as set out above for Employees, but the Chair is accompanied by the Supervisor over the applicable primary area of the University to which the potential risk is posed. The decision by that Supervisor is the final decision of the University.
5. Notwithstanding the foregoing, if the reported conduct necessitates immediate risk management measures such that the Supervisor and/or Chair, as applicable, cannot first meet with the Respondent, the Supervisor and/or Chair, as applicable, may implement those risk management measures on a temporary basis and provide the Respondent with notice and an opportunity to respond to the allegations as soon as practicable.

- F. **Criteria when Assessing Risk.** When assessing the risk, the Team conducts an individualized assessment, considering the reported facts and the following non-exhaustive list of factors (among others):
1. Whether the reported conduct, if true, is a threat to physical safety, violent conduct, or conduct that substantially disrupts University operations;
  2. The nature, duration, and severity of the reported conduct;
  3. The probability that potential injury and/or harm will occur within the University's control;
  4. Whether the person substantially impeded the educational process or functions of other members of the University community;
  5. Whether the circumstances suggest an increased risk that the person will commit an additional act of violence/disruption;
  6. Whether the person has a history of violence or disruption (conviction history, previous school discipline, etc.);
  7. Whether the person is alleged to have made threats of further violence against the person(s) impacted or any other individual;
  8. Whether the act of violence was committed by more than one person;
  9. Whether the circumstances suggest there is increased risk of future acts of violence under similar circumstances;
  10. Whether there was use of a weapon or drugs given; and
  11. The age of the person who allegedly experienced the conduct.
- G. **Due Process.** Under any of the above processes, no determination is made about whether the person has engaged in threats, violent behavior or substantially disruptive conduct until that person receives notice and an opportunity to be heard in accordance with the applicable Policy, either under this Policy or other applicable Policy, as set out above. Provided however, as set out above and in other applicable Policy, the University retains authority to implement temporary risk management measures and provide due process as soon as practicable thereafter.

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V. RELEVANT FORMS/LINKS

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VI. QUESTIONS/RESPONSIBLE OFFICE

The responsible offices for this Policy are the Provost's Office, Student Affairs, and the Vice President for Administration and Finance, as applicable. For questions about this Policy, contact the Dean of Students, Director of Human Resources, or the Executive Director of Risk Management, Compliance, and Safety, as applicable.

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VII. POLICY ADOPTION AND AMENDMENT DATES

**Date Approved:** October 18, 2021 [Temporary authorization until February 15, 2022]

**Amended:** N/A