# Campus Climate Committee

The Campus Climate Committee (C3) at Missouri State University plays a crucial role in fostering an inclusive, safe, and responsive campus community. Its mission to uphold the university's Inclusivity Principles is especially relevant in light of the recent offensive and racially charged text messages that have targeted African American, Black, Hispanic, and LGBTQIA+ communities. These events underscore the urgency of the committee's work, and its responsibilities in addressing these issues will require focused, strategic, and collaborative efforts across various levels of the university.



# Key responsibilities of the C3 to the current crisis

#### a) Addressing the Offensive Messages

The C3's first responsibility is to review and respond to the offensive messages targeting marginalized communities. Given the severity of the situation, this requires a multi-faceted approach:

#### Immediate Assessment:

- The C3 must collaborate with the university's administration, campus safety, and legal counsel to investigate the source(s) of the messages and identify the individuals responsible.

  Transparency in the process will be essential to maintaining trust within the university community.
- Immediate campus-wide communication should be issued, condemning the messages and assuring the community that the university is taking steps to address the situation. This communication should also provide details on the resources available to those impacted (e.g., counseling services, advocacy groups).



# Key responsibilities of the c3 to the current crisis

#### b) Enhanced Communication Strategies

To effectively convey expectations and strategic responses, the C3 must prioritize clear, consistent, and inclusive communication:

#### . Clarity of Intent:

As part of its efforts to communicate the university's stance, the C3 will work with the Administrative Council to issue clear and unambiguous statements about the university's zero-tolerance policy toward hate speech and discrimination. This communication should not only address the specific incident but also reaffirm the broader commitment to inclusivity and safety.

\*Additional responsibilities TBD.





# HIGHER LEARNING COMMISSION (HLC) OVERVIEW/PRIMER FOR THE UNIVERSITY COUNCIL

December 2024

Facilitated by John Jasinski and Tammy Jahnke



# **SLATE OF ITEMS**

- What HLC is all about
- Missouri State University facts
- Outcomes from last visit and follow-up
- Reporting requirements and required approvals
- > Criteria
- > Your role, questions

How old is the word accredit?

How old is the HLC?

When was Missouri State first accredited?

When was Missouri State last accredited?

## TRIVIA TIME!

### WHAT IS HLC?

- Independent corporation
- One of seven regional accreditors in the U.S. and serves 19 states
- Accredits degree-granting post-secondary educational institutions
- Accredits institutions as whole
- Part of the program integrity triad or three areas of oversight for U.S. higher education that operate independently: Federal government, state in which the institution is located and the regional accrediting agency

# Q AND A WITH THE UC

What does HLC do?

Why does Missouri State need to be accredited?

How does HLC do what it does?

# Q AND A WITH THE UC

- Does Missouri State have a mission?
- What is it and how do you use it in your current position?
- Does the university have policies it must follow? How do you ensure you and others follow them?
- How do we ensure we have the resources in teaching and learning needed for student success?
- Do we have a long-range strategic plan? How does is it used on campus, in your office?

### MISSOURI STATE UNIVERSITY – THE FACTS

March 30 and 31, 2026

> is our next comprehensive evaluation with a site visit ...

> ... reaffirmation of accreditation is the desired goal

### MISSOURI STATE UNIVERSITY – THE FACTS

- Missouri State has been continuously accredited since 1915
- We are required to undergo comprehensive evaluations every 10 years – our last visit was 2015
- We are part of the "open pathway" for the reaffirmation of accreditation
- The open pathway requires a "quality initiative project" (QIP) and an assurance argument with evidence across five criterion (now four)
- ➤ A 4-year assurance review is completed based on an updated assurance argument with evidence ours occurred in 2020
- Our last QIP project started in 2022 and a report will be submitted in summer 2025

# 2015 SITE VISIT OUTCOMES/FOLLOW-UPS AND 2020 ASSURANCE ARGUMENT UPDATE

- Reaffirmation of accreditation
- ✓ All criteria and core components were met (choices met, met with concerns, not met)
- ✓ Recommendations were all addressed (mission; integrity; teaching and learning assessment; resources, planning, institutional effectiveness)
- ✓ See <u>website</u>

# **OUR ANNUAL REPORTING REQUIREMENTS**

IPEDS information (BOG question: what is IPEDS?)

Examples: Accredited programs, percentage of pell eligible students, student headcount, faculty headcount, administrative headcount, # of degrees and certificates awarded, additional locations

Financial information

Examples: Audit results, composite financial index (CFI)

# OUR OTHER REPORTING REQUIREMENTS AND REQUIRED APPROVALS

#### > Additional sites

- Multilocation visit to Brazil, Virginia (Defense and Strategic Studies, DSS) and Cassville conducted; report received 2018
- Multilocation visit to Neosho, Waynesville and Lebanon conducted; report received 2024

Quality Improvement Project: Assessment of Student Learning in Graduate and Professional Doctorate Programs – accepted March 21, 2022

# OUR OTHER REPORTING REQUIREMENTS AND REQUIRED APPROVALS

- > New programs
  - Doctor of Defense and Strategic Studies approved July 27, 2020
  - Doctor of Occupation Therapy approved and stipulations changed July 15, 2022
  - Doctor of Psychology approved October 6, 2022
  - Doctor of Education in Leadership, Learning, and Educational Change approved April 23, 2024

# WHAT SORTS OF TOPICS WOULD YOU EXPECT TO SEE IN THE HLC CRITERIA?

### THE FOUR "NEW" CRITERION (APPROVED JUNE 2024)

1) Mission (1a through 1c)

2) Integrity: Ethical and Responsible Conduct (2a through 2e)

3) Teaching and Learning for Student Success (3a through 3g)

4) Sustainability: Institutional Effectiveness Resources and Planning (4a through 4c)

# WHAT IS YOUR ROLE IN THE PROCESS?

- Ensure we produce a report and prep the campus to gain reaffirmation of accreditation!
- Review small sections of written responses/evidence files over the next 18 months
- Meet with the visiting team as requested

# WHERE ARE WE TODAY?

HLC Oversight Team continues its work from inception in 2024

Drafts of Criterion 1 and 2 are posted on the website for your review and comments; include input from embedded conversations and updates to 2020 report

Oversight Team is currently working on drafting Criterion 3 so that we can seek input from various constituencies across campus early in 2025; goal is to have a complete draft for review and comments by late spring 2025

Website – How do I find it?

# WHAT KINDS OF QUESTIONS MIGHT THE HLC PEER REVIEWERS ASK OF YOU?

# OTHER ITEMS WE COULD DISCUSS

- > Campus process
- > Evidence files
- Typical questions a team may ask any faculty/staff/ student
- Exit report and process thereafter

# FURTHER QUESTIONS/DISCUSSION



# Missouri State University

# Putting Together the Puzzle Pieces



### Missouri State's Behavioral Intervention Team

• Missouri State's Behavioral Intervention Team is here to provide a proactive and supportive resource for the identification, assessment and intervention of problematic behavior that raises concerns within the University Community.



BEHAVIORAL INTERVENTION TEAM



# Missouri State's Behavioral Intervention Team

#### Team Composition

- Dean of Students (Chair)
- Director of Student Conduct
- Faculty/Academic Appointee
- Associate Director, University Safety
- Director of the Counseling Center
- Associate Director of Residence Life, Housing, and Dining Services
- Associate General Counsel
- Case Management Team
- Supervisor, Police Substation
- AVP, Student Success
- Director, Magers



## WHAT HAPPENS AFTER A REFERRAL



#### **Gather Data**

Once the BIT receives the referral, we will begin collecting any additional information to put together the pieces of the puzzle.



#### **Assess Concern**

In order to determine how to best intervene and support the student, the BIT reviews the data collected to assess the level of concern, risk, or threat.



#### **Deploy Interventions**

Based on the level of concern, risk or threat, the BIT will deploy interventions such as a meeting with the individual, case management services and offering various resources.



# What is Being Referred to BIT?

#### Mental Health Concerns

- Suicidal ideation/threats
- Substance abuse
- Depression
- Anxiety
- Disoriented thinking/expression
- General
- Eating or body image concerns
- Chronic Stress

#### Academic Concerns

- General difficulties
- Excessive class absenteeism
- Classroom disruption

#### Behavioral Concerns

- Hygiene
- Disruption
- Threatening words or actions
- Social isolation

#### Informational

- Death of family/friend
- Interpersonal conflicts/issues
- Financial problems
- Traumatic event

#### Medical Concerns

- Hospitalization
- General major/minor illness or injury
- Including explained absences



## HOW TO MAKE A REFERRAL

#### Low-Medium Risk

- If there is not an immediate concern for safety or response, make a referral by:
  - Preferred method:
    - Online Referral Form:

https://cm.maxient.com/reportingform.php?MissouriStateUniv

- Emailing the Dean of Students at deanofstudentsoffice@missouristate.edu
- Calling the Dean of Students at 417-836-5527

### High Risk

- If there is a concern for safety (themes of or direct statement of, self-harm, suicide, or harm to others, seems out of touch with reality, displays delusional or aggressive behavior, etc.) get immediate help by: Calling 911 and Campus Safety at 417-836-5509
- Once you've gotten immediate help, make a referral to the team



#### DECOMPENSATING

- Behavior is severely disruptive, directly impacts others, and is actively dangerous. This may include life-threatening, self-injurious behaviors such as:
  - Suicidal ideations or attempts, an expressed lethal plan, and/or hospitalization
  - ▲ Extreme self-injury, life-threatening disordered eating, repeated DUIs
  - Repeated acute alcohol intoxication with medical or law enforcement involvement, chronic substance abuse
  - Profoundly disturbed, detached view of reality and at risk of grievous injury or death and/or inability to care for themselves (self-care/protection/judgment)
  - ▲ Actual affective, impulsive violence or serious threats of violence such as:
    - Repeated, severe attacks while intoxicated; brandishing a weapon
    - Making threats that are concrete, consistent, and plausible
    - Impulsive stalking behaviors that present a physical danger

#### DETERIORATING

- Destructive actions, screaming or aggressive/harassing communications, rapid/ odd speech, extreme isolation, stark decrease in self-care
  - Responding to voices, extremely odd dress, high risk substance abuse;
     troubling thoughts with paranoid/delusional themes; increasingly medically dangerous binging/purging
  - Suicidal thoughts that are not lethal/imminent or non-life threatening self-injury
- Threats of affective, impulsive, poorly planned, and/or economically driven violence
  - Vague but direct threats or specific but indirect threat; explosive language
  - Stalking behaviors that do not harm, but are disruptive and concerning

#### DISTRESSED

- Distressed individuals engage in behavior that concerns others, and have an impaired ability to manage their emotions and actions. Possible presence of stressors such as:
  - Managing chronic mental illness, mild substance abuse/misuse, disordered eating
  - Situational stressors that cause disruption in mood, social, or academic areas
  - Difficulty coping/adapting to stressors/trauma; behavior may subside when stressor is removed, or trauma is addressed/processed
- If a threat is present, the threat is vague, indirect, implausible, and lacks detail or focus

#### DEVELOPING

- · Experiencing situational stressors but demonstrating appropriate coping skills
- · Often first contact or referral to the BIT/CARE team, etc.
- · Behavior is appropriate given the circumstances and context
- No threat made or present

#### CRITICAL

In this stage, there is a serious risk of suicide, life-threatening self-injury, dangerous risk taking (e.g. driving a motorcycle at top speed at night with the lights off) and/or inability to care for oneself. They may display racing thoughts, high risk substance dependence, intense anger, and/or perceived unfair treatment or grievance that has a major impact on the students' academic, social, and peer interactions. The individual has clear target for their threats and ultimatums, access to lethal means, and an attack plan to punish those they see as responsible for perceived wrongs. Without immediate intervention (such as law enforcement or psychiatric hospitalization), it is likely violence will occur. There may be leakage about the attack plan (social media posts that say "I'm going to be the next school shooter" or telling a friend to avoid coming to campus on a particular day). There may be stalking behavior and escalating predatory actions prior to violence such as intimidation, telegraphing, and "test-runs" such as causing a disruption to better understand reaction time of emergency response.

#### ELEVATED

Behavior at the elevated stage is increasingly disruptive (with multiple incidents) and involves multiple offices such as student conduct, law enforcement, and counseling. The individual may engage in suicidal falk, self-injury, substance intoxication. Threats of violence and ultimatums may be vague but direct or specific but indirect. A fixation and focus on a target often emerge (person, place, or system) and the individual continues to attack the target's self-esteem, public image, and/or access to safety and support. Others may feel threatened around this individual, but any threat lacks depth, follow-through, or a narrowing against an individual, office, or community. More serious social, mental health, academic, and adjustment concerns occur, and the individual is in need of more timely support and resources to avoid further escalation. Conditional ultimatums such as "do this or else" may be made to instructors, peers, faculty, and staff.

#### MODERATE

Prior to this stage, conflict with others has been fairly limited. The hallmark of moderate is an increase in conflict with others through aggressive speech, actions, and mannerisms. They may become frustrated and engage in non-verbal behaviors or begin to post things on social media, put up posters around campus, or storm away from conversations. Stress, illness, lack of friends, and support are now becoming an increasing concern. The individual may be tearful, sad, hopeless, anxious, or frustrated. This may be caused by difficulty adjusting, dating stress, failure in class assignments, and/or increasing social isolation. If there is a threat or physical violence such as carelessly pushing someone out of their way while storming off, the violence is typically limited and driven by adrenaline and impulsiveness, rather than any deeper plan to hurt others.

#### MILD

The individual here may be struggling and not doing well. The impact of their difficulty is limited around others, with the occasional report being made to the BIT/CARE team out of an abundance of caution and concern rather than any direct behavior or threats. They may be having trouble fitting in, adjusting to college, making friends, or may rub people the wrong way. They alienate others with their thoughts or mannerisms, and there may be minor bullying and conflict. With support and resources, it is likely the individual will be successful adapting and overcoming obstacles. Without support, it is possible they will continue to escalate on the rubric.

#### EMERGENCE OF VIOLENCE

- Behavior is moving towards a plan of targeted violence, sense of hopelessness, and/or desperation in the attack plan; locked into an all or nothing mentality
- Increasing use of military and tactical language; acquisition of costume for attack
- ▲ Clear fixation and focus on an individual target or group; feels justified in actions
- Attack plan is credible, repeated, and specific; may be shared, may be hidden
- Increased research on target and attack plan, employing counter-surveillance measures, access to lethal means; there is a sense of imminence to the plan
- Leakage of attack plan on social media or telling friends and others to avoid locations

#### **ELABORATION OF THREAT**

- Fixation and focus on a singular individual, group, or department; depersonalization of target, intimidating target to lessen their ability to advocate for safety
- Seeking others to support and empower future threatening action; may find extremists looking to exploit vulnerability; encouraging violence
- Threats and ultimatums may be vague or direct and are motivated by a hardened viewpoint; potential leakage around what should happen to fix grievances and injustices
- There is rarely physical violence here, but rather an escalation in the dangerousness and lethality in the threats; they are more specific, targeted, and repeated

#### **ESCALATING BEHAVIORS**

- Driven by hardened thoughts or a grievance concerning past wrongs or perceived past wrongs; increasingly adopts a singular, limited perspective
- When frustrated, storms off, disengaged, may create signs or troll on social media
- Argues with others with intent to embarrass, shame, or shut down
- Physical violence, if present, is impulsive, non-lethal, and brief; may seem similar to affective violence, but driven here by a hardened perspective rather than mental health and/or environmental stress

#### **EMPOWERING THOUGHTS**

- Passionate and hardened thoughts; typically related to religion, politics, academic status, money/power, social justice, or relationships
- Rejection of alternative perspectives, critical thinking, empathy, or perspectivetaking
- Narrowing on consumption of news, social media, or friendships; seeking only those who share the same perspective
- No threats of violence

TRAJECTORY?

#### TRAJECTORY?

# Common Interventions

- 1 Meeting with student to discuss referral/ potential further case management services
- 2 Referral to counseling or disability resource center
- Referral to other support resources (Title IX, Health Services, Bear Pantry, Financial Aid, etc.)
- 4 Referral to a Success Coach
- 5 Communication with emergency contact
- 6 Wellness/ Safety check
- 7 Email to faculty



# Missouri State's Behavioral Intervention Team

https://cm.maxient.com/reportingform.php?MissouriStateUniv

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