



# LEE COLLEGE CARES TEAM

## 2024/25 ANNUAL REPORT

Rosemary Coffman, Chair



# LEE COLLEGE CARES TEAM ANNUAL REPORT

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# Lee College CARES Team Annual Report

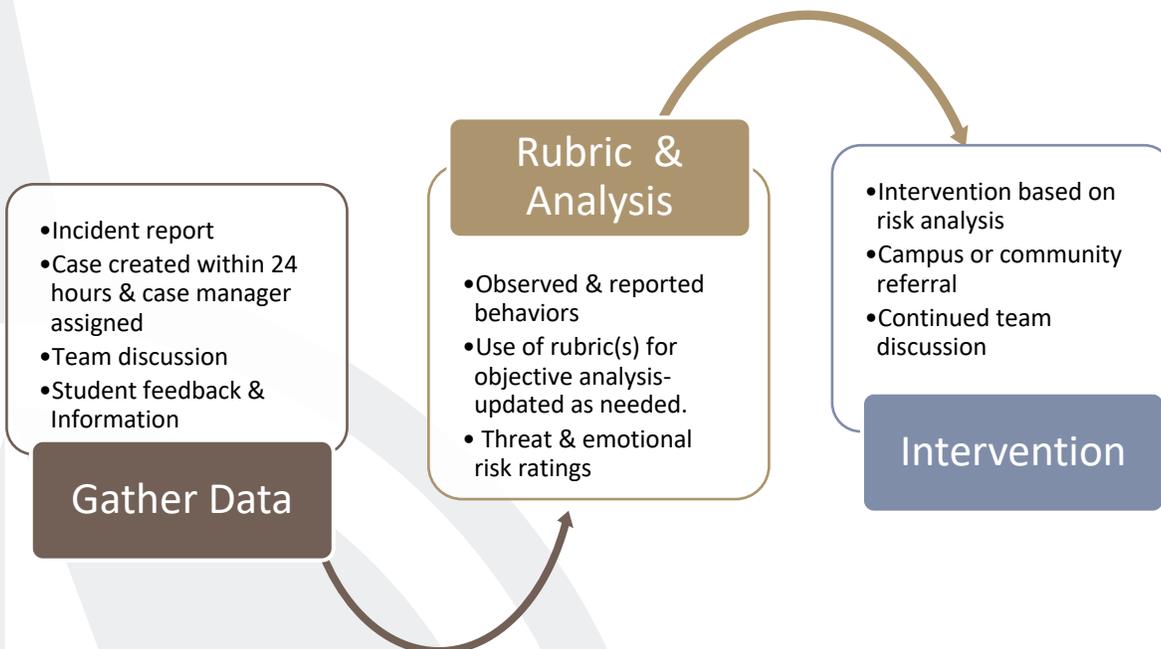
## Introduction

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According to the National Association for Behavioral Intervention and Threat Assessment (NABITA), behavioral intervention teams are small groups of college officials who meet regularly to collect and review information about at-risk community members and develop intervention plans to assist them. The Team receives referrals of concerning or disruptive behaviors and determines the best way to support and intervene. The team then deploys its resources and coordinates follow-up. ([www.nabita.org](http://www.nabita.org))

The Lee College CARES Team was created in spring 2017. Currently, the Core Team consists of representation from, advising, disability services, conduct, security, admissions, basic needs, mental health services, and dual credit. From the very beginning, the goal of the team was to create a culture of reporting to provide support to those in need.

The following graphic represents the process of the Lee College CARES Team which follows NABITA guidelines to gather data, analyze the information through the use of standardized rubrics, and provide interventions.



## Mission Statement

According to NABITA, the mission statement of a behavioral information team provides guidance in assuring activities and the overall goals of the Team meet the needs of the College.

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### *Lee College Mission Statement*

*The Lee College CARES Team is dedicated to a proactive, coordinated, and planned approach to the identification, prevention, assessment, management, and reduction of interpersonal and behavioral threats to the safety and well-being of the Lee College community. The Core Team meets regularly to review referrals brought forward by faculty, staff, and students, regarding behaviors that can be concerning, disruptive, or threatening — behaviors that potentially impede their own or others' ability to function successfully or safely.*

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As part of the mission statement, the following are overall goals of the Lee College CARES Team:

- provide a safe physical environment for members of the campus community;
- provide a safe emotional environment for the campus community; and
- promote support for Lee College's faculty and staff.

## Year-End Report

This report represents the sixth annual report and serves as a snapshot and institutional record of the Lee College CARES Team's functionality for the academic year 2024/25. The report provides a summary of the referrals with insight into trends and also serves as a means to review the strengths and areas of needed improvement for the Team. Finally, it includes the Team's Goals for the upcoming year.

## Application of NABITA Standards

The NABITA Standards Framework (Appendix A) is a recognized best practice structure to provide proven strategies and processes for behavioral intervention teams in the areas of structure, processes, and quality assurance.

The purpose of the Standards framework is to ensure that the Team is guided by best practices that promote a safe, effective, and efficient means to deliver services in the following ways:

- to enhance the quality of services provided to the College, to include students, faculty, and staff;
- to advocate for students' rights so that they may be successful, have access to resources, and be appropriately included in decision-making that affects their own health and wellbeing;
- to encourage campus-wide participation in the development, refinement, and integration of best practices and standards for the CARES Team services; and
- to establish a framework that fosters continual research, professional development, and practice that will further the profession for caring practitioners.

## 2024/25 CARES Core Team

The Lee College CARES Core Team was established with a permanent chair in November 2016. Since the beginning, the goal was to create a culture of reporting for the campus.

The Core Team is divided into two groups—those who serve as case managers and those providing support to the case managers and the process. The chart below lists the Core Team members for the 2024/25 academic year, their position at the College, and their role with the Team.

### Core Team Membership

Member	Position	Role
<b>Dr. Rosemary Coffman</b> (Member since 2016)	Executive Director, Student Success and Wellbeing	Chair Case Manager
<b>Jose Martinez</b> (Member since 2022)	Title IX Coordinator	Case Manager Backup to the Chair
<b>K-leigh Villanueva</b> (Member since 2016)	Academic Counselor, Access Center	Case Manager
<b>Marylou Ortuvia</b> (Member since 2022)	Academic Counselor, Advising and Transfer Program	Case Manager
<b>Sterling LaBoo</b> (Member since 2024)	Director, SAMHSA Suicide Prevention Grant	Case Manager
<b>Ofelia Ferman</b> (Member since 2025)	Advisor, Dual Credit	Case Manager (Dual Credit Students)
<b>Kelli Forde Spiers</b> (Member since 2020)	AVP Student Success and Belonging	Core Team Cabinet Representative
<b>Linda Torrez-Mann, LPC-S, LCDC</b> (Member since 2020)	Mental Health Therapist	Core Team Advisor for Mental Health Issues
<b>Dr. Carl Husband</b> (Member since 2019)	Registrar	Core Team
<b>Corporal Henry Collette</b> (Member since 2024)	Security Officer, Commissioned	Core Team Primary Representative for Security
<b>Chief Eric Williams</b> (Member since 2024)	Chief of Security	Core Team Back-up Representative for Security
<b>Dr. Scott Bennett</b> (Member since 2023)	AVP, Student Services / Chief Conduct Officer	Core Team

Changes in Core Team membership or roles for this year include the following.

- Jose Martinez now serves as backup to the chair, responding to reports and leading meetings when the chair is not available.
- Felipe Leal, a core team member since 2019, stepped down from the core team but remains on the advisory team.
- Ofelia Ferman is a new case manager for dual credit students, joining the team in the June 2025. She will start her case management duties in the 2025/26 academic year.
- Security is now represented by Corporal Henry Collette as the primary representative and Chief Eric Williams as the secondary security representative. Zola Montana, the previous representative for security, retired from the College.

### Meeting Schedule

The Core Team meets weekly during the fall and spring semesters to discuss open cases and other students of concern. When appropriate and necessary, the meeting is available via WebEx for members unable to attend in person.

For this past academic year, the Team met a total of 35 times with each meeting lasting for 60 – 90 minutes. As an ongoing practice, an agenda is prepared by the chair and distributed to Core Team members two business days prior to each meeting. If there is no meeting for the week, the Team receives an update of open cases. Utilizing Maxient, members are able to view current student cases via an established query. This year, the weekly meetings changed from Mondays to Thursdays (2 – 3:30 pm).

### Team Training / Professional Development

The National Association of Behavioral Intervention and Threat Assessment (NABITA) is the national organization that provides information for best practices for behavioral intervention teams. According to NABITA Standards (Appendix A), it is imperative that the Core Team engage in ongoing professional development on topics concerning Team functions and processes, risk assessments, and other knowledge and skills relating to services and interventions to students.

Through our active membership with NABITA, Core Team members have access to training and a variety of resources. The following are the current NABITA Certifications held by Core Team members for the 2024/25 Academic Year.

CERTIFICATION	CORE TEAM MEMBER
BIT Standards and Best Practices	Sterling LaBoo, Dr. Rosemary Coffman, Marylou Ortuvia
Structured Interview for Violence Risk Assessment (SIVRA)	Kelli Forde Spiers, K-leigh Villanueva, Rosemary Coffman
Non-Clinical Assessment of Suicide	Sterling LaBoo, K-leigh Villanueva, Jessica Henry, Marylou Ortuvia
Violence Risk Assessment of the Written Word (VRAWW)	K-leigh Villanueva
Threat Assessment (D-Prep)	Jessica Haney
Case Management Standards and Best Practices	K-leigh Villanueva

In addition to current certifications, Core Team members participated in professional development supporting their role on the CARES Team. These included conferences, webinars, and trainings in the following areas:

- Mental health / suicide prevention
- Working and supporting undocumented students
- Support for basic needs
- Supporting students with disabilities
- Updates / support with using Maxient case management software

Lunch and Learn Sessions - To provide additional information and support outside of the weekly meetings, “Lunch and Learn” sessions were implemented in the Spring 2023 semester. Topics are chosen to assist case managers increase knowledge within specific areas and resources. For this academic year, the following topics were offered through this training:

- Maxient and the CARES Team Process (October 2024)
- Baytown Housing Authority (November 2024)
- Reporting Child Abuse (March 2025)
- The Harris Center for Mental Health and IDD – Services and New App (April 2025)

Core Team Retreats - Retreats for the Core Team serve to promote a strong Team while providing an opportunity to reinforce the purpose and annual goals of the Team. For this academic year, a half day retreat was held in the fall and a full day retreat in the summer. The agendas for both can be found in Appendix B.

- Fall Retreat / Planning Meeting – October 7, 2024 - This meeting included a review of the 2023/24 Annual Report with goals for the upcoming academic year.
- Spring Retreat / June 10, 2025 – This meeting included review of the suicide screening protocol and responding to students who score high risk for suicide, a snapshot of referrals for the year (to date), an update and discussion of the Team’s goals, a tabletop exercise, and a review of the newly created student feedback survey.

### **Update to Case Management Protocols**

The following represents changes in protocols to the CARES Team process for this year.

- Due to the high number of referrals, adjustments were made to process cases more efficiently.
  - For weekly meetings, only new cases and those cases with risk levels determined to be at moderate or higher were discussed.
  - At times, referrals to the CARES Team can be handled by a single support area. For these referrals, the case is created and handed off to the appropriate office or service. This may include referrals to the mental health therapist, Access Center, or the Student Resource and Advocacy Center. The cases are closed with the resolution type “Closed – Referred to Other Department.” Should the student need additional services, the case is re-opened.

## Campus Engagement and Marketing

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The Lee College CARES Team recognizes the importance of educating and engaging the campus community on when and how to refer students to the CARES Team. With various and ongoing marketing strategies, the College receives information on an ongoing basis. The mission and processes of the Team are shared with the campus community in a variety of ways.

### Dedicated Website

The dedicated website ([www.lee.edu/cares-team](http://www.lee.edu/cares-team)) provides information on Core Team membership, how to report to the Team, examples of behaviors to report, frequently asked questions, and a link to mental health resources. The website also includes the CARES Team Annual Report.

### Advocacy Through CARES Advisory Team

Established in the fall 2019 semester, the CARES Advisory Team consists of individuals in key positions, serving as advocates for the CARES Team process. Membership includes representation from student services, instruction, veteran services, advising, faculty, clerical staff, and workforce education (Appendix C). The Advisory Team meets once each fall and spring semester.

### Additional Outreach Initiatives and Activities

For this academic year, outreach activities included the following:

- As part of promoting TimelyCare, the demo account for the app was shared with a number of departments to increase the use of the service. Presentations included information on the CARES Team process.
- Information on the CARES Team process is included in the New Student Orientation slides, providing information on the process to all first-time Lee College students.
- Additional presentations include the following:
  - Convocation Presentations
    - A presentation to all faculty was made at the spring 2025 convocation: Supporting Faculty: What, When, & How to Respond to Concerning Behaviors
    - A presentation open to the campus community was held during the Fall 2025 Convocation which included a demonstration of a CARES Team meeting.
    - Information on the CARES Team process is included in the presentations to adjunct instructors during convocation week.
  - A presentation was made to the Learning Hub tutors and supplemental Instructors.

## 2024/25 CARES Team Student Referrals

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Each year, the CARES Team receives student referrals from the campus community through an online reporting form ([www.lee.edu/go/bit-referral](http://www.lee.edu/go/bit-referral)). For the 2024/25 academic year, there were 114 student referrals.

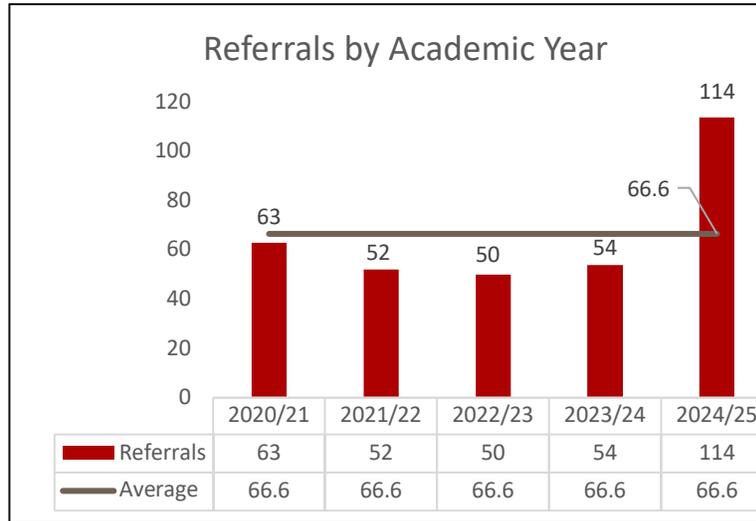
While the goal is to provide support to all referrals, there are incidences in which the student is non-responsive. For this year, 84% of the referrals received some level of support. There were 13.2% referrals (15 students) who were non-responsive after several contact attempts. A small percentage (2.6% or 3 students) were noted as “information only,” typically students of concern discussed by Core Team members.

The information in this report includes the following:

- demographic characteristics of those referred to the CARES Team;
- information on who is referring students to the CARES Team (i.e., faculty, non-faculty, students);
- semester comparisons of the number of referrals and comparisons from previous years; and
- types of concerns and issues of students referred; and
- Interventions or types of support provided to those referred.

### Demographic Data

As noted above, there were 114 students referred to the CARES Team for the 2024/25 academic year. The average age was 28.6 years, ranging from 15 to 59 years of age. Of these referrals, 80% were female. Over 95% of the referrals were credit students and 5.6% were dual credit students. There was one non-credit student referred.



### Comparison with Previous Years

The chart below outlines the number of referrals by academic year for the past five years.

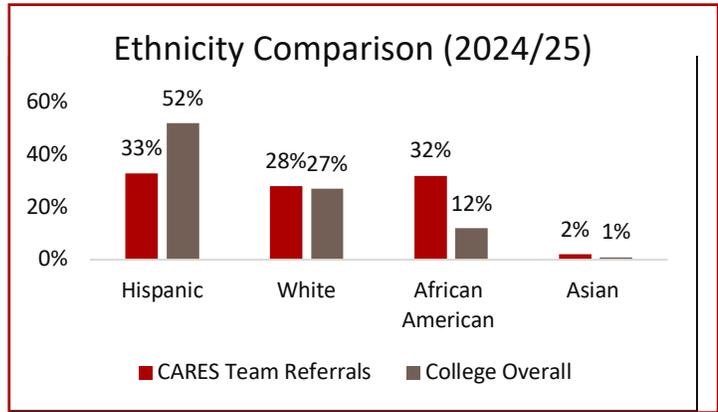
In reviewing past referrals, averages and percentages allow a comparison from the past five years.

- As noted, there were 114 referrals for the 2024/25 academic year, representing an all-time high. Before this year, the number of referrals ranged between 50 and 63 students.
- Women have consistently been referred more than men. This year, the referral of men was the lowest for the five-year comparison, with only 20%.
- Age has been consistent across the years with the average age of 28
- In terms of the type of students, credit students are referred the most when compared to dual credit and workforce students.

	Number of Referrals	Females	Avg Age	Credit	White	African American	Hispanic	Asian
2020/21	63	74.6%	29	95.2%	36.5%	20.7%	41.2%	0%
2021/22	52	71.2%	28	90.1%	19.2%	30.8%	34.6%	1.9%
2022/23	50	76.0%	27	92.0%	34.0%	28.0%	36.0%	2.0%
2023/24	54	64.8%	27	94.4%	26.4%	37.0%	25.9%	1.9%
2024/25	114	79.8%	29	89.5%	28.1%	31.6%	32.5%	.09%
5-Year Average	66.6	73.3%	28	92.24%	28.84%	29.62%	34.04%	1.0%

## Ethnicity

This chart provides a comparison between the ethnicity of the students referred to the CARES Team and the overall Lee College ethnicity. Hispanic Students were underrepresented at 33% of the referrals compared to the College’s overall population of 52%. African American students were over represented with 32% of the referrals, compared to the College’s 12% of students identifying as African American.

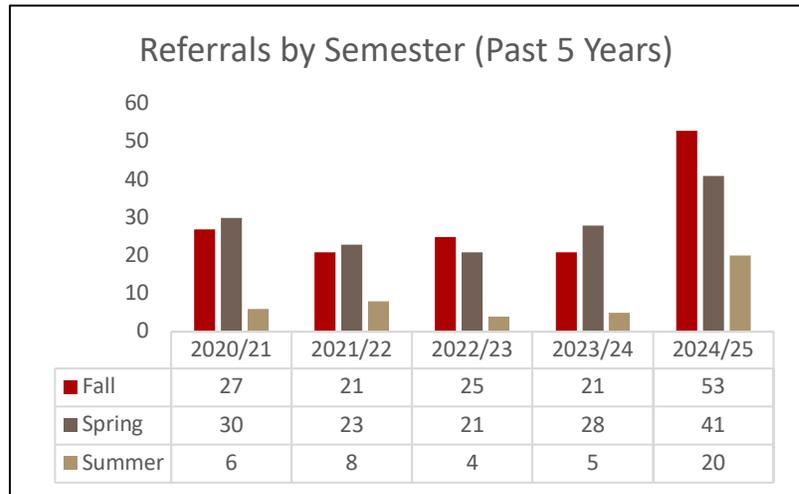


## Referrals by Semester

The chart depicts the number of referrals by semester for the past five years.

Notable for this year:

- The percentage of referrals for the fall semester 2025 (46.5%) was higher than the five-year average of 44%.
- Compared to past years, there were more summer referrals representing 17.5% of the year with the five-year average being under 13%.



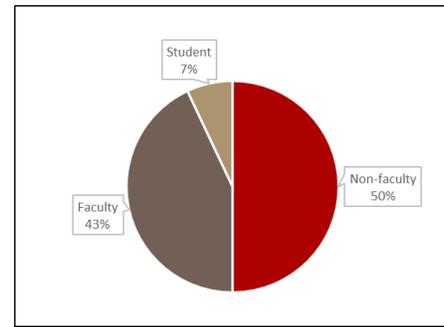
## Use of Objective Risk Ratings

All students referred to the CARES Team are reviewed with NABITA’s objective risk rating rubric. This occurs at the initial case creation with ratings updated as the case progresses. Ratings are provided on both the Life Stress and Emotional Health (D-Scale) and the risk of Hostility and Violence Towards Others (E-Scale). In consideration of both scales, an overall risk rating is determined for each student (i.e., Mild, Moderate, Elevated, or Critical).

The use of an objective risk ratings is essential in the Team process as it allows the Team to determine the urgency of the situation and appropriate interventions. Risk ratings provide the following:

- Bias Mitigation – By using objective indicators of risk, the CARES team can mitigate potential bias.
- Risk Management – An objective rubric helps the Team manage their own risk by providing consistency and objectivity.
- Mitigate Under or Over Reacting – By accurately assessing risk, the Team is more likely to respond with appropriate interventions.
- Streamlined Processes – The use of the rubric provides the Team with shared language and processes to make meetings more efficient.

Risk Ratings for 2024/25 Academic Year – For this academic year, over 96% of the cases were initially rated as mild or moderate. There were 3 cases (2.6%) rated as elevated and one case (less than 1% of all cases) rated as critical. For most, the risk rating improved prior to the closing of the case. For the 2024/25 academic year, 72% of the cases were closed with the overall rating of Mild. The chart below provides the number of cases by risk rating at case creation and at the closing of the case.



RISK RATING	RISK RATING AT CASE CREATION	RISK RATING AT CASE CLOSING
<b>Critical</b>	1	1
<b>Elevated</b>	3	1
<b>Moderate</b>	75	30
<b>Mild</b>	36	83

### Referral Sources

Referral Sources are individuals who refer a student to the CARES Team which includes staff, faculty, and students. Teaching faculty have historically referred more students than staff. For this academic year, however, non-faculty submitted more referrals than faculty.

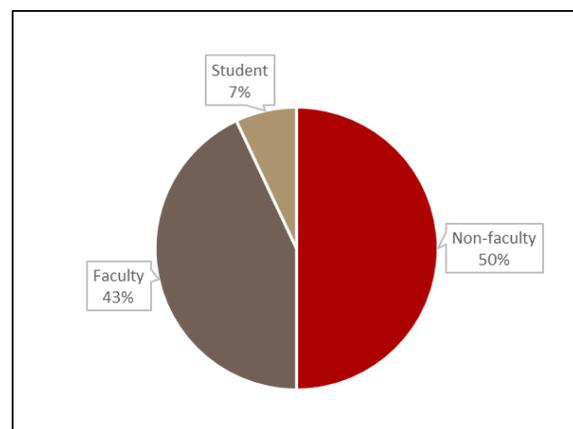
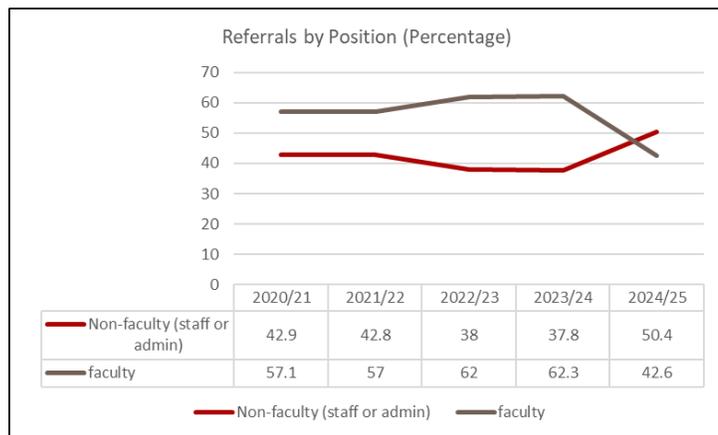
Beginning this year, referrals from students were accepted. Eight students submitting referrals—four referred other students and four referred themselves (self-referrals). The chart of referral sources compares the three categories of referrals.

### New Categories of Referral Sources for 2025/26 -

As discussed, referral sources are categorized as faculty, non-faculty, and students. Based on a review of referrals from the current year, categories are now expanded to better reflect and document who is completing the CARES Team form to identify students needing support. The goal is to understand who is referring and to find gaps.

For future reports, the following categories for referral sources will be reported.

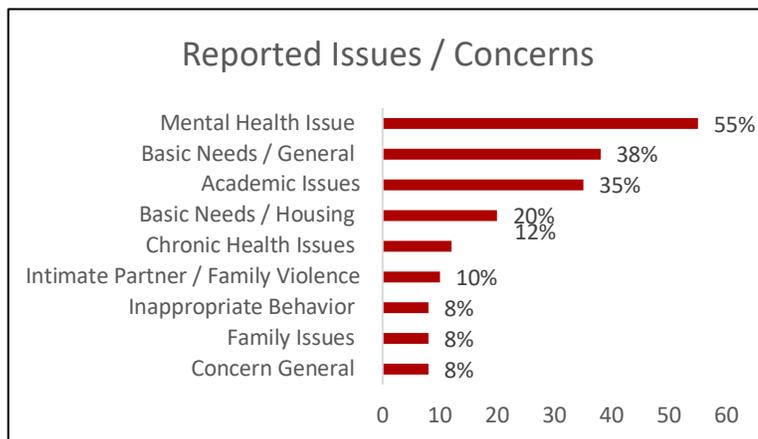
- Administrative – Academic Advisors
- Administrator Other (non-exempt administrative positions)
- Student - Self-Referral
- Student – Students Referring Other Students



## Types of Concerns Reported

Concerns are the presenting issues which prompted the referral to the CARES Team. For this report, there are nine types of documented issues. Often, students are referred with more than one issue with over 40% of the referrals having two or three concerns identified. For this year, there were 195 incidences of the nine concerns.

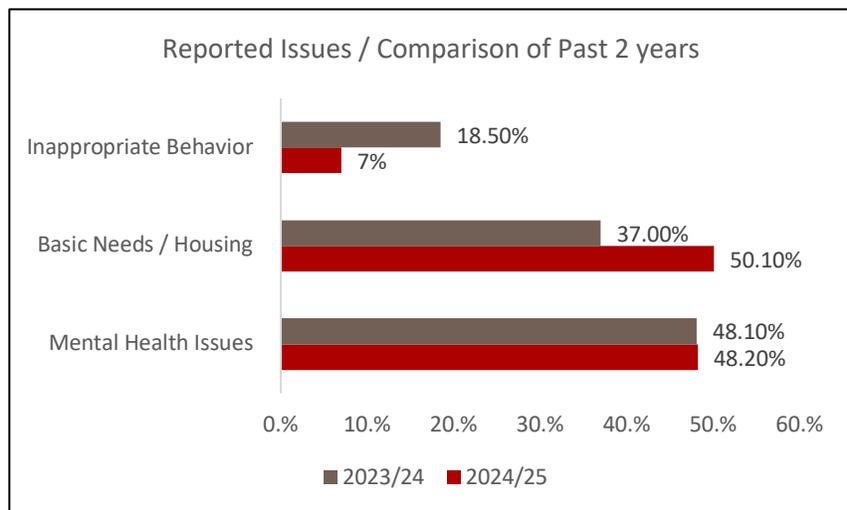
- Over 48% reported needing help with mental health issues or concerns. This included general mental health support, support due to grief or loss, and suicidal ideation.
- Of the referrals, 33.3% reported needing resources related to basic needs.



As an ongoing process, reported concerns of those referred are reviewed and updated to better reflect concerns of Lee College students. This year, the following changes are noted:

- Housing insecurity is now captured outside of the “basic needs” issue. This year, 17.5% of the referrals indicated issues with housing on the referral form.
- Academic Issues was added as a category.

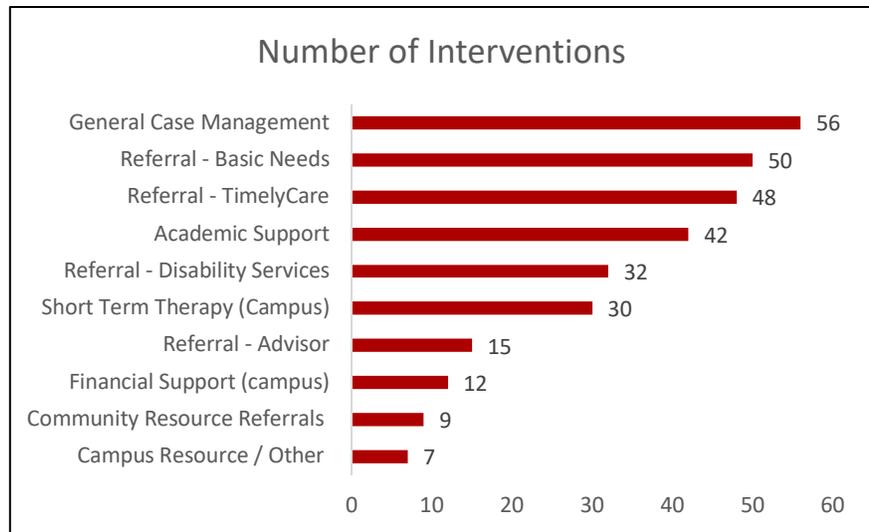
Using percentages, a comparison can be made on the types of concerns reported comparing the 2024/25 academic year with the previous year. Mental health concerns remained stable compared to last year. There was an increase in issues related to basic needs compared to last year. There were fewer students referred to the CARES team for specific behavior issues (aggression, boundary issues, etc.),



## Interventions Provided

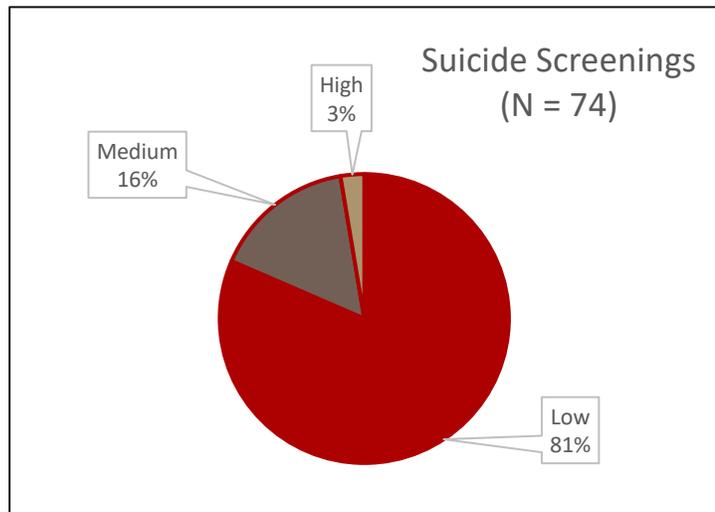
Interventions are the types of support provided to students referred to the CARES Team and include referrals to campus or community resources. The chart below gives an overview of interventions provided for the 2024/25 academic year. The majority receive more than one type of intervention with a total of 360 instances of support provided to the 114 students referred. The most common intervention was General Case Management, provided to 49% of the referrals.

As with concerns, the list of interventions is reviewed each year and updated as needed. In June 2025, an update was made regarding students referred to the Student Resource and Advocacy Center. To better capture specific services received, case managers can document the specific area or service available in the SRAC to include the food market, transportation support, emergency aid, childcare assistance, and support in applying for SNAP benefits. Future reports will include these details.



### Suicide Screenings

In partnership with the College’s SAMHSA Suicide Prevention grant, case managers facilitated a short suicide screening for referrals as part of the intake meeting. For this academic year, there were 74 screenings completed. Of these, over 81% were rated as low level of risk. Students who were rated at medium or high risk were provided the appropriate support based on our CARES Team protocols.



## Measuring Satisfaction and Team Effectiveness

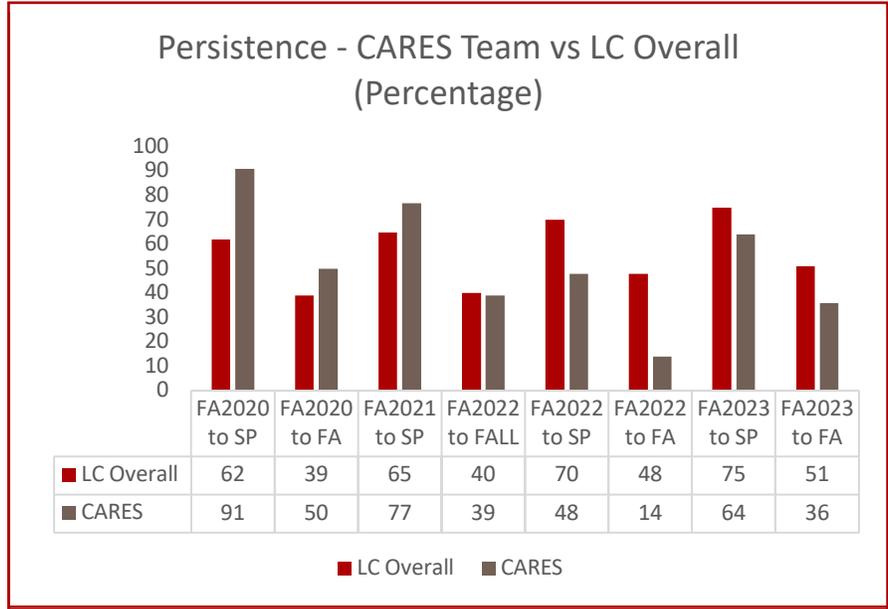
### CARES Team Effectiveness Using Persistence Data

First initiated as a Team goal, persistence data is now gathered each year to compare persistence of those students who were supported by the CARES Team compared to the overall persistence of the college.

The comparison chart shows the percentage of students who persisted by semester. For all students, fall to fall persistence was lower than fall to spring persistence. The chart provides the comparison for the past four years (i.e., Fall 2020 through Fall 2023) looking at the fall to spring and fall to fall retention for each year. Since the Fall 2022 semester, the persistence rate for students served by the CARES Team was lower than the overall persistence rate. Compared to the Fall-to-Fall retention from 2022, the CARES persistence rate rebounded for the Fall 2023 semester—more typical with previous years. The Team will continue to review persistence as one of many indicators of the Team’s effectiveness.

## NABITA Standards Self-Assessment Tool

The NABITA Standards Self-Assessment Tool (SSAT) is provided by NABITA to complement the 2023 NABITA Industry Standards (Appendix A) and allows the identification of areas of strengths and opportunities for improvements. The SSAT reviews 21 standards across three elements (Structural, Process, and Quality Assurance). An overall score provides a general assessment with a possible final team rating of Deficient, Needs Improvement, Proficient, or Exemplary. The Lee College CARES Team has utilized the SSAT as an annual evaluation of the Team’s processes since 2021.



In June 2025, the Core Team met to review the SSAT and provide feedback on the scoring. The total score for this review was 194.85 points out of a possible 220 points. With no ratings below proficient, the overall rating is exemplary. This is an increase from a score of 189.45 from last year. Appendix D outlines the scoring of all elements for this year’s review.

Based on this review, the following processes were updated to coincide with best practices:

- a student feedback survey was created and will be implemented for the 2025/26 academic year;
- the creation of a strategic training plan will be implemented and is included in the Team’s goals; and
- the documentation of risk ratings is now part of the annual report.

### Strengths / Accomplishments for the 2024/25 Academic year

The following are noted accomplishments for the year and ongoing strengths of the CARES Team. Based on feedback from the Core Team, the following strengths were noted:

- Ongoing updates to Maxient for case management support
- Our collaboration as a team
- A record number of referrals to the CARES Team with modifications to the process to adjust for the higher numbers

## 2024/25 Goals and Goal Progress

The Lee College CARES Team continues to work toward its mission to promote the wellbeing and safety of the Lee College campus community. The following goals and strategies provide a continuation of improvements based on the NABITA standards and the current practices of the Lee College Team. Each year, the Team reviews the previous year’s goals, noting progress and areas in need of continued improvement with updated strategies and objectives.

In June 2025, the Team reviewed the 2024/25 goals with the following updates:

- One goal (Increase ease in referral process to help increase referrals to the CARES Team) was noted as complete. Objectives were met which included allowing anonymous reporting and allowing students to report.
- Two of the goals are continuing with new objectives.
  - In measuring the satisfaction/effectives of the Team, a student survey is being implemented and the Team is reviewing other surveys to be administered on a determined schedule.
  - With the final year of the SAMSHA Suicide Prevention Grant, an objective is included to create a continuation plan to assure support and ongoing education.
- There are two new goals for the 2025/26 academic year
  - There will be the creation and implementation of a strategic marketing plan to better support the promotion of the CARES Team. This includes the creation of a Red Folder, a resource for faculty and staff. The goal also includes imbedding the CARES Team process in the onboarding of new employees.
  - To assure the knowledge and skills of the core team, a new goal was created to develop and implement a standardized training plan. This would include identifying the essential skills and assuring that training is available to align with those identified.

The charts below provide information on meeting the identified objectives for the goals for the 2024/25 academic year. One goal was marked as complete; two goals were determined to be ongoing with new objectives, and there are two goals that are new for the 2025/26 academic year.

### 2024/2025 - Completed Goal

INCREASE EASE IN REFERRAL PROCESS TO HELP INCREASE REFERRALS TO THE CARES TEAM
2023/24 – Goal established with measurable objectives
2024/25 – Goal complete
<p>2023/24 – Goal Established</p> <p>Based on statements from the 2023 staff survey, there is a need to make the process of referring students easier to find and complete. The following objectives will provide greater access to the referral process to increase the number of students referred and receiving services. The following are strategies and objectives:</p> <ul style="list-style-type: none"> <li>• Objective 1 - Add the CARES Team referral link to either the Blackboard page and/or the PeopleSoft class roll. With further investigation, we were not able to accomplish this goal based on restrictions from the IT process.</li> <li>• Objective 2 – (goal ongoing) - Present information to student groups who may refer other students to include the Student Government Association and Peer Mentors. This goal is ongoing and will continue in the 2024/25 academic year. Information has been updated on the student flyer to provide information on how students may refer. Also, information the CARES Team was added to the New Student Orientation for all first time to Lee College Students.</li> </ul> <p>2024 /25 – Goal Ongoing - Broaden the reach of the CARES Team support</p> <ul style="list-style-type: none"> <li>• Objective 1 – support the ability of students being able to refer other students (or self-referrals) by providing information to all students (emails) and to specific student groups (peer mentors, student assistants, student clubs and organizations). This objective is complete with students now able to self-refer or refer other students.</li> <li>• Objective 2 – update Moxient to support anonymous reporting. This objective was met with</li> </ul>

### Goal 1 –CREATE A PLAN TO MEASURE THE SATISFACTION AND/OR EFFECTIVENESS OF THE CARES TEAM PROCESS

2019 – 2023 - Updated goal and strategies with measurable objectives with progress toward goal

2023/24 – Progress toward goal with updated measurable objectives.

2024/25 – Updated Goal with ongoing objectives

2025/26 – Updated Goal with new objectives

Original Goal (Established in 2019) - Review methods to measure the satisfaction or effectiveness of the intervention. Create a process for feedback (survey) for those employees who refer to students to the BIT.

2019/20 - For the first time, a standardized list of interventions was established and utilized for all referrals which is necessary in looking at the satisfaction and effectiveness of the interventions. The Goal continued for subsequent years with the objectives noted each year.

2020/21 – Measuring satisfaction / Effectiveness of Team

- Objective 1 - Create a survey for feedback of those who refer to the BIT. The goal was met with the creation of the survey. Results can be found in the 2020 End of Year Report.
- Objective 2 – Investigate possible methods of measuring the satisfaction and effectiveness of the interventions. Possibly look at grades and/or gpa. The goal was met – received data from college; received feedback and suggestions from NABITA.

2022/23 - Develop holistic assessment plan with measurable objectives for evaluation of the Team. This may include assessing referred students, assessing all employees (those that did refer and those who did not), assessing CARES Team (at retreat). This process may include both subjective and objective measures.

- Objective 1 – A survey of the campus was completed with results in the end of year report.
- Objective 2 – A review of persistence was completed, comparing students who received services through CARES with all students.

The Goal was met, and a plan was developed which included both a survey of the campus and the evaluation of data for persistence of students participating in the CARES Team process. Both the survey and data evaluation were completed during this academic year.

2023/24 – Goal ongoing

- Objective 1 – Add annual review of persistence to be included in the Handbook and continue and report in the end of year report. This goal was met with the persistence data reported in the annual report. The objective will be added to the ongoing processes within the handbook.
- Objective 2 – evaluate student satisfaction for those who participated in the CARES Team process. No progress made on this goal.

2024/25 – Goal ongoing

- Objective - In order to get feedback on student satisfaction, a questionnaire will be established and administered to students who participated in the CARES Team Process for the previous year. This goal was met with the development of the student satisfaction survey.

2025/26 – Goal Ongoing

- Objective 1 - Deploy student feedback survey. This will be evaluated at mid-year for adjustments if needed.
- Objective 2 - Determine protocol and schedule for surveys to 1) all faculty and staff and 2) referral sources. This includes the review of previous surveys for possible updates.

## GOAL 2

### INCREASE SUPPORT AND EDUCATION REGARDING SERVING STUDENTS WITH SUICIDAL IDEATION.

2024/25 – Goal established with measurable objectives

2026/26 – Ongoing with new objectives

With the implementation of the SAMHSA Suicide Prevention Grant and based on the number of students expressing suicidal ideation, the CARES Team will address the issue through this goal.

- Objective 1 – Review and update the protocol for completing a suicide screening for all students referred to include the possible integration of NABITA’s Non-Clinical Suicide Screening Tool. This objective is complete. The current suicide screening was reviewed with clarification on working with students at high risk. It was determined that the NAS will be used as resource but we will continue to use the shorter screening for all referrals.
- Objective 2 – Develop a campus-wide plan on how to respond to suicidal students on campus. This objective is complete. The final draft will be added to the CARES Team handbook and shared out as a reference.

2025/26 –

Objective - For the final year of SAMHSA Suicide Prevention grant, create sustainability plan for continuation of campus support

- This will be developed by the SAMHSA Suicide Prevention grant director, using the CARES Team for feedback and support.

#### 2025/26 - New Goals

## GOAL 3 – NEW (2025/26)

### SUPPORT PROMOTION OF CARES TEAM TO THE CAMPUS

2025/26 – Goal established with measurable outcomes

Through a variety of methods, there will be an ongoing and strategic plan for marketing the CARES Team to the Campus Community

- Objective 1 – Create and implement a strategic marketing plan
- Objective 2 – Create and disseminate a “Red Folder” as a resource for faculty and staff
- Objective 3 – Include the CARES Team process in the onboarding of new employees.

## GOAL 4 – NEW (2025/26)

### CONTINUOUS PROFESSIONAL DEVELOPMENT PLAN FOR CARES CORE TEAM

2025/26 – Goal established with measurable outcomes

To assure the knowledge and skills of the Core Team, specific training and professional development is needed at both the Team level and at the individual level. This would include certification training (through NABITA) and other workshops and training offered through NABITA and other resources (such as D-Prep).

- Objective - Develop Training Plan for the Team
  - Work with Core Team to determine what knowledge and skills are needed to support individual roles and the effectiveness of the Team.
  - Determine or create training that would align with the identified knowledge and skills.
  - Create a multi-year matrix of training requirements that are updated as certifications expire and/or new Core Team members join the CARES Team.

## Conclusion

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The Lee College CARES Team continues to refine and improve on practices to meet the needs of the College and to recognize improvements needed to serve the Lee College community and the needs of our students. Since 2019, this Annual Report continues to provide a mechanism to capture the overall work of the Team while providing a systematic means to discover opportunities for improvement. As with previous reports, comparisons and trends provide information to support the Team's direction.

The 2024/25 Academic Year represented a record number of referrals. The Team continues to promote the CARES Team process while assuring the processes are efficient to handle larger number of referrals. The goals for the upcoming year continue to support the campus and the Core Team based on best standards.

With the dedication of the Core Team, continued referrals from the campus community, and support from the College, the Lee College CARES Team will continue to grow and expand to assist students in successfully completing their academic goals.

## Appendices

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### PART I STRUCTURAL ELEMENTS



#### **Standard 1** Team Authority and Scope

The team has a mission statement, statement of scope, and the authority to fulfill its institutional charge.



#### **Standard 2** Prevention vs. Threat Assessment

Institutions have one integrated team that addresses early intervention cases as well as threat assessment cases.



#### **Standard 3** Team Name

The team's name accurately communicates the function of the team within the context of the institutional community.



#### **Standard 4** Team Leadership

The team chair brings the team together and keeps discussions productive and focused while maintaining a long-term view of team development and education.



#### **Standard 5** Team Membership

The team is comprised of at least five, but no more than ten, designated school officials.



#### **Standard 6** Team Training

Team members engage in regular, ongoing BIT training to increase confidence, build competence, and foster team development.



#### **Standard 7** Information Sharing

Team members share information according to BIT standard operating procedures and comply with FERPA/privacy/confidentiality requirements (as applicable) when accessing and sharing information.



#### **Standard 8** Team Budget

The team has an established budget sufficient to meet these standards, the ongoing needs of the team, and the community it serves.



#### **Standard 9** Community Education and Marketing

The team educates its community about bystander engagement, recognizing leakage, and making referrals. The team markets its function/services through advertising campaigns, websites, logos, and other promotional materials.



#### **Standard 10** Procedure Manual

The team has a written procedure manual that supports an objective, consistent, and evidence-based functionality.

To read the full 2023 NABITA Standards for Behavioral Intervention Teams whitepaper, please visit [NABITA.org/2023Standards](https://NABITA.org/2023Standards)

## PART 2 PROCESS ELEMENTS



### Standard 11 Referral Receipt and Review

The team has a process for receiving, reviewing, and triaging all referrals.



### Standard 12 Meeting Operations

The team holds meetings at regular intervals, following an agenda and established process for facilitating team meetings.



### Standard 13 Objective Risk Rubric

The team uses an evidence-based, objective risk rubric to assess every referral.



### Standard 14 Psychological, Threat, and Violence Risk Assessments

The team uses objective, evidence-based tools to conduct violence risk, threat, and psychological assessments as part of its overall approach to prevention and intervention.



### Standard 15 Interventions

The team clearly defines its actions and interventions for each risk level on the BIT's objective risk rubric.



### Standard 16 Case Management

The team invests in case management as a process, often as a role/position, that provides flexible, need-based support for individuals to address referral concerns, connect with resources, and improve overall wellness.



### Standard 17 Case Review

The team regularly uses a written and formalized case review protocol to determine and document the need to keep a case active, to engage in case monitoring, or to move a case to inactive/closed status.



### Standard 18 Recordkeeping

The team uses an electronic data management system to keep records of all referrals and cases.

## PART 3 QUALITY ASSURANCE AND ASSESSMENT



### Standard 19 End of Semester and Year Reports

The team collects data to analyze trends or patterns, publishes its findings in semester or annual reports, and adjusts resources, marketing, and/or training in accordance with its findings.



### Standard 20 Team Audit

The team regularly assesses its structure and processes to ensure it is functioning effectively and is in alignment with best practices.



### Standard 21 Program Effectiveness

The team deploys various research methods to assess the team's effectiveness in meeting goals and outcomes.

To read the full 2023 NABITA Standards for Behavioral Intervention Teams whitepaper, please visit [NABITA.org/2023Standards](https://www.nabita.org/2023Standards)

## Appendix B– Core Team Retreat Agendas

# AGENDA

## Lee College CARES Team – Fall Planning Meeting

*October 7, 2024 / Sterling Municipal Library*

12:30	<b><i>Lunch/Welcome</i></b>	Kahoot – Lee College Trivia Post-It Notes Exercise
1:00	<b><i>Review of Open Cases</i></b>	Open cases / Review of those moderate or higher
1:30	<b><i>Updates &amp; Reminders</i></b>	Fall 2024 Events End of Year Report / Snapshot of 23/24 academic year
2:00	<b><i>Updates from Case Management Summit</i></b>	Jose, K-leigh, Marylou, Sterling Supporting students – “flowchart”
2:30	<b><i>Break</i></b>	
2:45	<b><i>Protocol Updates</i></b>	Change in Incident Report Protocols for Review Team Resources
3:15	<b><i>Review of 24/25 Goals</i></b>	Goal 1 – Student Satisfaction Goal 2 – Student Referrals Goal 3 – Suicide Protocol
14:15	<b><i>Wrap-Up / Adjourn</i></b>	

## Agenda - Lee College CARES Team Summer Retreat Cedar Silos Venue - June 10, 2025 / 9 am – 4 pm

9 am	<b>Breakfast</b>	Explore the facility and enjoy a light breakfast
10 am	<b>Welcome</b>	Welcome, Purpose, and Agenda Review Meet our New Core Team Members: A Kahoot game Feedback Activity
10:30 am	<b>Review of Open Cases</b>	Open cases / Review of those moderate or higher
11 am	<b>A Year in Review 2024/25</b>	Happenings and Updates Referral statistics
11:15 am	<b>2024/25 Goals</b>	Goal 1 – Increase referrals (complete!) Goal 2 – (Sterling) Increase support / education students with suicidal ideation <ul style="list-style-type: none"> <li>• Review of suicide screening form</li> <li>• Review of draft protocol</li> </ul> Goal 3 – (Jessica) Measure the satisfaction and/or effectiveness of the CARES Team. <ul style="list-style-type: none"> <li>• Review of student satisfaction survey</li> <li>• How and when do we give to students?</li> </ul>
12 pm	<b>Working Lunch</b>	Team Resource information (One-Drive, NABITA, D-Prep)
12:30 pm	<b>Team Member Updates</b>	Team and Life updates / Good news, changes, new initiatives to share
12:30 pm	<b>Tabletop Exercise</b>	Jose Jamie: Identify, Assess, and Intervene
1:15 pm	<b>Standards Self-Assessment Tool</b>	2024/25 Results Strengths and Possible Improvements
2:00 pm	<b>Break</b>	
2:15 pm	<b>2025/26 Initiatives</b>	Red Folder Initiative Student Support Advocate New Goals for 2025/26?
3:00pm	<b>Review of Feedback &amp; Next Steps</b>	Marylou Review of Post-It Notes / Next Steps
3:45 pm	<b>Adjourn &amp; Clean-Up</b>	Thank you and Clean Up

## Appendix C – CARES Advisory Team Membership

Name	Position
<b>Brenda Garcia</b>	Parent Coordinator, Student Resource and Advocacy Center
<b>Daniel Christie</b>	Specialist, Information Service / Administrative Assembly Representative
<b>Felipe Leal</b>	Director, Financial Aid
<b>Fran Parent</b>	Executive Director, Construction Technologies / McNair Campus Representative
<b>Georgeanne Ward</b>	Faculty, English / Faculty Assembly Representative
<b>Giovanna Corona</b>	Student / Administrative Assistant
<b>Hugo Gonzalez</b>	Manager, Learning Support Services
<b>Jessica Thompson Falla</b>	Faculty, Learning Frameworks
<b>Jo Greathouse</b>	Executive Director, Campus Engagement and Belonging
<b>Jordan Salazar</b>	Director, Dual Credit
<b>Karen Guthmiller</b>	Faculty, Kinesiology
<b>Dr. Laura Lane Worley</b>	Institutional Effectiveness, Liberty County Education Center
<b>Maria Sierra</b>	Advisor, General Studies
<b>Michael Pounds</b>	Manager, Student Engagement and First Year Experience
<b>Patrick Bravo</b>	Faculty, Instrumentation
<b>Paula Lee</b>	Administrator, Learning Management System
<b>Reo Cummings</b>	Project Director, TRIO Student Support Services Grant
<b>Roy Wood</b>	Security Officer, Commissioned
<b>Sandy Basquez</b>	Executive Administrative Specialist, Office of the Provost
<b>Therrick Lockette</b>	Technical Career Navigator
<b>Thomas Quinn</b>	Manager, Emergency and Safety Operations
<b>Tiffany Winchester</b>	Coordinator, Veterans Center

## Appendix D– NABITA Standards Self-Assessment Tool (2024/25)

The NABITA Standards Self-Assessment Tool (SSAT) is provided by NABITA as a compliment to the 2023 NABITA Industry Standards (Appendix A). The tool allows a means of determining areas of strengths and opportunities for improvements. The SSAT reviews the 21 standards across three elements (Structural, Process, and Quality Assurance). An overall score provides a general assessment with the findings of Deficient, Needs Improvements, Proficient, or Exemplary.

### Part 1 – Structural Elements

	Description	Possible Points	LC Score	Score Range	Notes
1	Team Authority and Scope	10	9	Exemplary	Need to clearly document how the mission statement is connected to the mission of the college
2	Prevention vs. Threat Assessment	10	9	Exemplary	Only one team; review practice of “this does not rise to the level of the BIT”
3	Team Name	10	9	Exemplary	Continue to encourage more reporting of all concerning behaviors
4	Team Leadership	20	20	Exemplary	The team is diverse; Administrative regulations includes membership and some job descriptions (not all) include the CARES Team membership; exceeds the 10 members
5	Team Membership	10	8.25	Proficient	The team is diverse; job descriptions do not include the CARES Team membership; exceeds the 10 members
6	Team Training	10	8	Proficient	While team training is documented, there is no plan and funding is limited.
7	Information Sharing	10	10	Exemplary	The team shares information according to procedures and complies with FERPA. Handbook outline how information is shared.
8	Team Budget	10	9	Exemplary	While the team has an established budget, funding for professional development is not funded through the budget per college standards.
9	Community Education and Marketing	10	7	Proficient	The team educates the community about the team processes and encourages referrals. Cultural competency training is included in individual training (not team) and there is a need for a strategic marketing plan.
10	Procedural Manual	10	9.6	Exemplary	A written procedural manual is updated annually. There needs to be more detail on how the team operationalizes each standard of practice for a BIT.

## Part 2 – Process Elements

	Description	Possible Points	LC Score	Score Range	Notes
11	Referral Receipt and Review	10	9.5	Exemplary	Using Maxient, the team has a process for receiving, reviewing and triaging all referrals, allowing for students to refer and anonymous referrals. Team is sent notification with each referral prior to meetings for review.
12	Meeting Operations	10	9.5	Exemplary	The team holds meetings at regular intervals, follows an agenda and has an established process for facilitating team meetings. Weak protocol for calling emergency meetings.
13	Objective Risk Rubric	10	9.5	Exemplary	A risk rating is reviewed for each open case at each meeting and documented in Maxient. Need for more consistency in documenting rationale
14	Psychological, Threat, and Violence Risk Assessments	10	8	Proficient	The team has formalized procedures to determine when, how, and who will conduct mandated assessments. Need to review procedure to establish immediate safety by assessing the credibility of a specific threat and have a better understanding of the use of mandatory psychological assessments.
15	Interventions	10	9	Exemplary	The Team clearly defines its actions and interventions for each risk level but need to ensure consistency among case managers (i.e., how the intervention ties to the risk level)
16	Case Management	10	10	Exemplary	The team invests in case management as a process that provides flexible, need-based support for individuals to address concerns.
17	Case Review	10	7	Proficient	The team uses a written and formalized case review protocol to determine the need to keep the case active. For monitored students, there is not monitoring plan
18	Recordkeeping	10	10	Proficient	Using Maxient, the team keeps records of all referrals and cases; all team members have access; avoiding diagnostic or judgmental language and aligns with FERPA and institutional procedures.

### Part 3 – Quality Assurance and Assessment Elements

	Description	Possible Points	LC Score	Score Range	Notes
19	End of Semester and Year Reports	10	8	Proficient	The report is shared publicly through our website. Need to include gaps in team training, documentation of percentage of cases by risk rating. There needs to be a more conscious effort in adjusting the resources, marketing, and training based on the report.
20	Team Audit	10	8.5	Proficient	The team regularly assess its structure and processes. We have annual goals and conduct the SSAT on an annual basis. Student satisfaction survey will be implemented for 2025/26. We need to document how information from audit is used for future planning and decision making.
21	Program Effectiveness	10	7	Proficient	With the use of research methods to determine the team’s effectiveness in meeting goals and outcomes, we do not document risk level (start and end) and there is a need for more satisfaction surveys

The total score for this review was 194.85 points out of a possible 220 points. With no ratings below proficient, the overall level of proficiency is exemplary. This is an increase from a score of 189.45 from last year.

BIT operations in this area exemplify the standards of practice identified by NABITA. Moving forward, the Team will work on strengthening areas marked as proficient—identifying ways to sustain this level of performance.

## Part 2 – Process Elements

	Description	Possible Points	LC Score	Score Range	Notes
11	Referral Receipt and Review	10	9.5	Exemplary	Using Maxient, the team has a process for receiving, reviewing and triaging all referrals, allowing for students to refer and anonymous referrals. Team is sent notification with each referral prior to meetings for review.
12	Meeting Operations	10	9.5	Exemplary	The team holds meetings at regular intervals, follows an agenda and has an established process for facilitating team meetings. Weak protocol for calling emergency meetings.
13	Objective Risk Rubric	10	9.5	Exemplary	A risk rating is reviewed for each open case at each meeting and documented in Maxient. Need for more consistency in documenting rationale
14	Psychological, Threat, and Violence Risk Assessments	10	8	Proficient	The team has formalized procedures to determine when, how, and who will conduct mandated assessments. Need to review procedure to establish immediate safety by assessing the credibility of a specific threat and have a better understanding of the use of mandatory psychological assessments.
15	Interventions	10	9	Exemplary	The Team clearly defines its actions and interventions for each risk level but need to ensure consistency among case managers (i.e., how the intervention ties to the risk level)
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18	Recordkeeping	10	10	Proficient	Using Maxient, the team keeps records of all referrals and cases; all team members have access; avoiding diagnostic or judgmental language and aligns with FERPA and institutional procedures.

