

## THREAT OF VIOLENCE (TOV) GRID

Level	Indicators	Client's Behavior	Clinician should....
<b>1</b>	Threat of violence is assessed, <b>but no indicators are apparent</b> at this time.	<ul style="list-style-type: none"> <li>No indicators</li> </ul>	<ul style="list-style-type: none"> <li>Take no TOV-related action beyond normal counseling.</li> <li>Document "<i>no indicators apparent at this time</i>" in <i>Progress Notes</i>.</li> </ul>
<b>2</b>	<p>Possible <b>threat is mentioned, but no current danger exists.</b></p> <ul style="list-style-type: none"> <li>No current thought</li> <li>No current plan</li> <li>No history of gestures</li> <li>No substance abuse/dependence.</li> <li>No history of psychiatric/neurological illness</li> </ul>	<ul style="list-style-type: none"> <li>Isolated occurrence of rough physical contact, no life-threatening, not likely to recur.</li> <li>Occasional thoughts of self-injury or injury to others, but no prior gestures or attempts.</li> </ul>	<ul style="list-style-type: none"> <li>Carefully document progress, noting the rationale for assessing that no current danger exists.</li> <li>Follow up as clinically appropriate as ongoing part of counseling.</li> <li>Document in <i>Progress Notes</i>.</li> </ul>
<b>3</b>	<p><b>Threat has been made. A possibility of violent action exists.</b></p> <ul style="list-style-type: none"> <li>Applies to suspicion/report of child abuse and/or elder abuse.</li> </ul>	<ul style="list-style-type: none"> <li>Recent threats toward self or others, but clinician assesses risk as not imminent. No history of action on threats; no specific victim is named or identified.</li> <li>Some thoughts of self-injury or injury to others, but no history or gestures or attempts.</li> <li>No definite plan or intention.</li> <li>No history of substance abuse or psychiatric/neurological illness.</li> </ul>	<ul style="list-style-type: none"> <li>If suspicion/report of child/elder abuse, notify authorities as required by applicable law.</li> <li>Determine if exception to confidentiality exists (including disclosure to an employer). If disclosure is needed without an <i>authorization to disclose information</i>, treat the TOV as a Level 5.</li> <li>Continue to update documentation in <i>Progress Notes</i> until TOV de-escalates to a Level 2.</li> <li>Mark case to designate it as a high risk case.</li> <li>Follow up with the client as clinically appropriate and consult with EAP Consultant as necessary.</li> <li>Notify:</li> </ul>

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			<ul style="list-style-type: none"> <li>• <b>Magellan EAP Consultant assigned to the case.</b> <i>After business hours</i>, you may contact a Magellan care manager by calling the customer-specific 800 line, or the St. Louis Care Management Center, EAP care line (1-800-888-2273).</li> <li>• <b>USPS EAP:</b> Contact the referring care manager. If you do not have his or her direct number, call the St. Louis Care Management Center, EAP care line (1-800-888-2273).</li> <li>• <b>FOH (Federal Occupational Health) EAP:</b> 1-800-222-0364.</li> </ul>
<p>4</p>	<p><b>Active threat of violence exists. Action needs to be taken to closely monitor client and to attempt to diminish the potential for violence.</b></p> <ul style="list-style-type: none"> <li>• History supports client’s capability of carrying out threat.</li> </ul>	<ul style="list-style-type: none"> <li>• Actively verbalizing generalized threat toward self or others. No specific names, plans or time frames are mentioned.</li> <li>• Circumstances exist that could provoke violent behavior.</li> <li>• History of violent behavior/psychiatric illness.</li> <li>• Prior suicide gestures and/or family history of suicide.</li> <li>• Client has impaired judgment or diminished capacity due to intoxication, drug effect, disorientation, thought disorder, etc.</li> <li>• Limited support systems.</li> </ul>	<ul style="list-style-type: none"> <li>• Seek client’s consent to involve others as appropriate (supervisor/manager, etc.).</li> <li>• Treat the TOV as a Level 5 if an exception to confidentiality (including disclosure to an employer) without an <i>authorization to disclose information</i> exists.</li> <li>• Document High Risk /TOV form threat, your actions/response, and that consultation has occurred with a Magellan EAP Consultant with whom you discussed the case. Continue to update documentation until TOV de-escalates to a Level 2.</li> <li>• Mark case to designate it as a high risk case.</li> <li>• Follow up with the client as clinically appropriate and consult with EAP Consultant</li> </ul>

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		<ul style="list-style-type: none"> <li>• Poor impulse control.</li> </ul>	<p>as necessary.</p> <ul style="list-style-type: none"> <li>• Notify:             <ul style="list-style-type: none"> <li>• <b>Magellan EAP Consultant assigned to the case.</b> <i>After business hours</i>, you may contact a Magellan care manager by calling the customer-specific 800 line, or the St. Louis Care Management Center, EAP care line (1-800-888-2273).</li> <li>• <b>USPS EAP:</b> Contact referring care manager. If you do not have his or her direct number, call the St. Louis Care Management Center, EAP care line (1-800-888-2273).</li> <li>• <b>FOH EAP:</b> 1-800-222-0364.</li> </ul> </li> </ul>
<p>5</p>	<p><b>Client is dangerous to self and/or others. Violence is likely to occur if preventive action is not taken, or it appears necessary to disclose information without a signed release.</b></p>	<ul style="list-style-type: none"> <li>• A specific threat and plan have been made. Factors indicate it may be necessary to warn a potential victim.</li> <li>• Client has history of violence or psychiatric illness.</li> <li>• Client has made prior suicidal gestures and/or has a family history of suicide.</li> <li>• Client has diminished capacity for judgment due to intoxication, drug effect, disorientation, thought disorder, etc.</li> <li>• Client needs to be physically restrained to avoid violence.</li> </ul>	<ul style="list-style-type: none"> <li>• Assess the immediacy of the danger. If you determine that the danger is <b>...IMMEDIATE</b> (no time for consultation), notify police and potential victim(s) as required or permitted by applicable state law. After warning, proceed as outlined below.             <ul style="list-style-type: none"> <li>• <b>...NOT IMMEDIATE</b> (there is time for consultation), consult with:                 <ul style="list-style-type: none"> <li>• <b>EAP Consultant assigned to the case.</b> <i>After business hours</i>, contact care manager by calling the customer-specific 800 line, or the St. Louis Care Management Center, EAP care line (1-800-888-2273).</li> <li>• <b>USPS EAP:</b> Contact referring care manager. If you do not have his or her direct number, call the St. Louis Care Management Center,</li> </ul> </li> </ul> </li> </ul>

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			<p>EAP care line (1-800-888-2273).</p> <ul style="list-style-type: none"> <li>• <b>FOH EAP:</b> 1-800-222-0364.</li> </ul> <p>Take appropriate protective action. Appropriate protective action may include, but is not limited to, the following:</p> <ul style="list-style-type: none"> <li>• Notify police, potential victim[s], family protective services, etc., as appropriate and permitted/required by applicable state law.</li> <li>• Notify work site if there is IMMEDIATE danger of injury at the work site. Consider all channels of communication access, such as supervisor, security, medical department, etc., and refer to company-specific protocols where available.</li> <li>• Arrange to have client evaluated for hospitalizing when appropriate, accessing benefits as needed.</li> <li>• Arrange to have client physically restrained and/or arrested as needed.</li> <li>• Continue to update documentation in <i>Progress Notes</i> until TOV de-escalates to a Level 2. Mark record to designate it as a high risk case.</li> <li>• Follow up with client, EAP Consultant, and document contacts on <i>Progress Notes</i>. (When TOV has de-escalated to a Level 2, indicate this on <i>Progress Notes</i>).</li> </ul>
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