

### Part One – Testing for AER Comprehension

*Use the following three scenarios for informally running through F2 discussions and looking for AER consensus*

*Discuss what aided their decisions, risk factors, who would be involved, etc.*

**Remind the room (or preferably, poll the room) to re-confirm the elements of AER.**

- Significant Interest at Stake
  - Probability of Harm occurring
  - Significant Intensity of the harm
  - Multi-Disciplinary Nature of the Risk
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#### **AER Test Item 1: (Tabled by City Police)**

Non-Identified – Female Youth

Recently was as reported to Police as a missing person by her guardian. She is living with her grandmother. Was located by police 2 hours after being reported missing during a routine traffic stop and returned to her grandmother. When patrol dropped the girl off, the grandmother expressed to patrol that she is at a loss on dealing with this child, that she is missing school and that she has a poor attitude at home.

Two weeks prior to being reported missing, she was located unconscious in a park, intoxicated and taken to hospital by ambulance for treatment.

Also currently is listed as the victim of an ongoing investigation for sexual abuse by her stepfather. When she told her mother about the abuse, her mother disregarded the information and has told police that she believes her daughter has made up the story. During the police interview, the mother indicated that she was moving to Toronto and would not be taking her daughter.

**AER? \*YES**

**What are you seeing as risks?**

*Missing, Housing, Alcohol misuse, Parent Child Conflict, Truancy, Victimization-Sexual,*

**Who should be involved?**

*Victim Services, Police, Child and Family, Education, Addictions*

**AER Test Item 2: (Tabled by Education)**

Non-Identified – Female Child

Attends class regularly, but seems withdrawn, mother attends school functions and has recently had a baby. School is concerned because they have spoken to the child and she said that her mom and dad are getting a divorce and that she is sad. Further to this, the child asked a friend to share her lunch last week because her mom had not sent a lunch. The school has requested that mom attend the school to talk about the lack of interest in friends and fun activities, but the mother canceled the appointment. The school is concerned that there are mental health issues with the mother (possibly due to the divorce or postpartum) and has not been able to reach the dad.

**AER?** \*No

**What makes you lean in that direction?**

*What are you seeing, not seeing?*

**AER Test Item 3 (Tabled by Education)**

Non-Identified – Male Youth

Truant from school 80% of the time. The school has attended the residence on 3 occasions to speak with his mother because she will not answer the phone. She looks out the window but will not come to the door. His father died 2 years ago. He has been involved in bullying another student at school when he attends.

The school has heard from other students that he started a garbage bin on fire at the mall several weeks ago. This incident was in the news and his involvement has become common knowledge amongst the student body.

**AER?** \*Yes

**What are you seeing as risks?**

**Who should be involved?**

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## **Part Two – Sample Scenarios to Execute in a Mock Table Setting**

*The following three situations are to be presented in a Table setting, simulating an actual Situation Table meeting and discussion, including F2 read-ins, RTD data entry of all tombstone columns, AER decisions, F3 identification of agencies, and most evident risk factors. The mock full-Table meeting is to be followed in Part Three by brief discussion (for learning purposes) of potential F4 strategies for those that reach F4.*

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### **Situation #1 - Education Filter 2 (One Mentor to Serve in this Role)**

#### **New Situation Number Assigned in RTD**

Male youth

Truant from school for a 3-month period. The school has worked with the youth and involved a mentor to address the issues to no avail. A school representative visited home on several occasions. Contact with the youth and/or parent was limited and became increasingly difficult (1-visit with parent and youth, 3-visits with youth only, and all attempts since to connect via telephone unsuccessful – no answer/no voicemail). Eventually, the single parent admitted to the school representative that the youth's behaviour has become unmanageable. The parent shared that the youth's whereabouts were often unknown (away 3-4 days at a time) and that when he was home, he displayed aggressive behaviour toward parent and older siblings. Mom has found drug paraphernalia in his room, and says he is hanging around some older and troubled kids and often comes home intoxicated but doesn't smell of alcohol. Mom was obviously having trouble supervising the youth, and admits to have given up at times. Mom is unemployed and struggling to keep food in the fridge and make ends meet and is often not at home.

1. **AER ?** Yes

*Chair will move to identify the situation and pause for agency recognition.*

Subject :Joe Smith (22JAN2007) 14yrs

Mom : Sandra Smith (14Feb1985) 36yrs

2. **Current or Past Connections:** *After a pause, the chair would check in on agencies in attendance for any recognition*

*(New information to introduce, simulating this recognition phase)*

- *Police Advise Joe has recently become involved with the Police Service and is hanging around some well-known bad guys, has not been charged.*
- *Child & Family Services has history, but file closed.*

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- *Social Services – income assistance is currently involved with the family.*
- 3. **Situation Type** – *Individual (The majority of risk pertains to Joe. Mom can also get assistance from those involved)*
- 4. **Evident Risk Factors** - Truant - Drug abuse/use by person – Poverty - Missing person (not reported) - Physical Violence – perpetrator - Parent child conflict - Negative peers, basic needs.
- 5. **Who Should Lead** – Education
- 6. **Assisting Agencies** - Addictions – Social Services – Police

*Situation 2021-001 is entered fully in the RTD and further discussion will be deferred to Filter 4*

### **Situation #2 – Tabled by Mental Health/Crisis Intervention**

#### **New Situation Number Assigned in RTD**

Adult Female

The Crisis Intervention Team responded to a Mental Health call last evening involving an adult female in distress and causing a disturbance in a public area. Once they located and connected with the female, they learned she was new to the community and has a small apartment she shares with a friend. She had gotten into a public verbal fight with her boyfriend and he had left the scene. Since her move, she has yet to connect with a local practitioner. She disclosed she has a mental health disorder and no longer has access to obtain her medications. This was her first encounter with local police.

(if asked, there is **no reason** to believe DV or any physical harm from the boyfriend)

1. **AER ?** No

The Crisis Team is well suited to connect her to a local practitioner for the MH needs, and possibly make a referral to Social Services if income is an issue. This situation will not move past F2.

*The table will record the appropriate data sets and rejection toggle for 2021-002 in the RTD.*

**Situation #3 – Tabled by The Women's Shelter****New Situation Number Assigned in RTD****Adult Female**

The Women & Children's Shelter are currently trying to assist an adult female who has had many contacts with our residential services and with our outreach services over the past few years and is currently homeless. Both of her children are in Child Welfare care. She is currently using drugs and is on the Methadone program. She does not have access to adequate housing and is living in a tent city with fall coming on. She has been physically threatened by her ex and by other men who are currently living in the tent city. She is negatively affected by people around her who are using alcohol, she has exhibited anti-social, negative behavior and has been the victim of domestic and other assault, theft, and sexual assault. There are suspected mental health concerns and negative peer involvement. Despite being an adult, there is parent-child conflict with her mother and step-father and there are physical health concerns (evident oral decay) and nutritional deficits. She has been both the perpetrator and the victim of physical violence and she has witnessed sexual violence. She is currently unemployed and on Social Assistance so poverty is a definite and continuing issue.

**1. AER ? Yes**

*Chair will move to identify the situation and then pause for agency recognition.*

Name: Sally SMITH d:11MAR89 32yrs

**2. Current or Past Connections:** After pause for recognition and check in with Agencies looking at data or calling the office, we learn...

- *Child Welfare* – acknowledges situation with mother & her children, will be involved.
- (Table Question: Do we need to name the children? Answer: NO Not currently working with mother)
- *Social Services* – have a file, haven't seen her for some time.
- *Police* – long history and calls for service confirming much of the situation, can add a recent complaint of a disturbance with Sally and another male arguing downtown, as well as 2 missing person reports in the last year. Not under any judicial sanctions.

3. **Situation Type** - Individual
4. **Evident Risk Factors** – Housing, Drug abuse, Victimization, Physical Violence-perpetrator/victim, Anti-Social Behavior, Physical Health, Negative Peers, Missing Person-History, Sexual Violence-witness, Social Environment
5. **Who Should Lead?** (*Room to determine, most often, Women's Shelter suggested*)
6. **Assisting Agencies** – Housing, Womens' Shelter, Addictions, Police, Child Welfare, Social Assistance, Health, Mental Health (Others? – Victim Services, Community Based and/or Faith Based groups)

*Situation 2021-003 will be fully recorded in RTD and further discussion will be deferred to Filter 4*

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### **Part Three – Simulating Filter 4 Meetings**

In real Table practice, Filter 4 meetings occur following the conclusion of the general meeting and once all participants not included in the F4's have left. The smaller subgroups of intervention teams will typically grab a corner of the room, another office if available and begin their Situation F4 that would include:

- Sharing any further information relevant to the situation
- Providing insight on what their agency could offer
- Come up with a holistic plan to address all the risk factors and how the team will execute (when, how, where, etc.)

#### **For Exercise Purposes:**

Using 2021-001 and 2021-003, with the appropriate agency representatives leading the on-screen discussion, and with the balance of the Table members observing for learning purposes, the assigned agencies will simulate gathering with each scenario's information and along with the CM's, will help to guide a brief discussion through the F4 meetings and any possible strategies.

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