



Universal Screening

An Introduction to Universal Social and Emotional Screening within a Multi-tiered System of Supports

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Housekeeping

- Poll
- Screen Review/Orientation
- Tech Support

Overview

Introduction to Universal social and emotional screening within a multi-tiered system of support

Objectives

1. Increased knowledge and understanding of the value and function of universal screening within a comprehensive multi-tiered system of social and emotional supports
2. Increased knowledge and understanding of considerations to selection and implementation of standardized social and emotional universal screening measure and procedures

Poll

- What data are your teams using to identify students in need of additional supports?
 - Extant data
 - EWS
 - Teacher referral
 - Teacher nomination procedure
 - **Standardized universal screening measure and procedure**

Description of the problem

Approximately one in five students has a diagnosable disorder or mental health problem

- Despite being common problems experienced by students, internalizing behavior problems are more likely to go unnoticed by educators

(Bradshaw, Buckley, & Jalongo, 2008; Costello et al., 2003; Costello, Egger, & Angold, 2005; Merikangas et al., 2010)

Schools lack systems for providing comprehensive, coordinated social and emotional supports within a prevention framework

(Adelman & Taylor, 2008; Farmer & Farmer, 1999; Rones & Hoagwood, 2000)

Increased risk for students with emotional and behavioral problems:

- Absenteeism
- Suspension, expulsion, and absenteeism
- Restraint/seclusion or other punitive strategies
- Disproportionate poor outcomes
- Unaddressed learning problems
- Poor performance in class
- Social isolation
- Multiple ODRs
- Safety issues (e.g., suicide, drugs, gangs, abuse/trauma)
- Neglect (basic necessities missing or insufficient)

Social and emotional supports and interventions within a MTSS can reduce risks and teach social and emotional skills and create environments that support student wellbeing and positive academic outcomes

(Bradshaw et al., 2008; Doll, Spies, & Champion, 2012; Durlak et al., 2011; Greenberg, Domitrovich, & Bumbarger, 2000; Hoagwood et al., 2007; Kutash, Duchnowski, & Green, 2011; McIntosh et al., 2008; Masten et al., 2005; Payton et al., 2008; Suldo, Gormley, DuPaul, & Anderson-Butcher, 2014)

“Screening, as part of a coordinated and comprehensive school mental health program, complements the mission of schools, identifies youth in need, links them to effective services, and contributes to positive educational outcomes valued by families, schools, and communities.”

(Weist, Rubin, Moore, Adelsheim, & Wrobel, 2007)

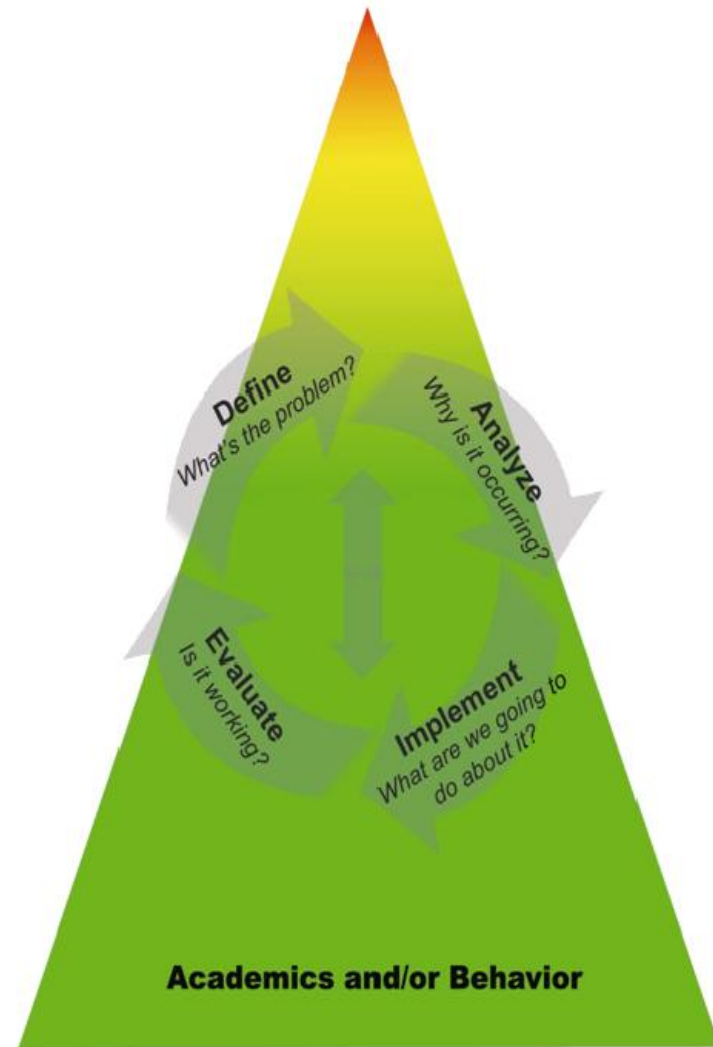
Universal screening procedures are designed to:

- be administered to **all** students
- identify students who are at risk of future academic, behavioral, or emotional problems
- provide data regarding the degree to which programs are meeting the needs of students at the classroom, grade, school, and district levels

(Albers & Kettler, 2014; Kettler, Glover, Albers, & Feeney-Kettler, 2014)

Types of assessments within a comprehensive MTSS:

- Diagnostic
- Progress Monitoring
- Screening
- Evaluation



Screening can be:

Proactive

- Helps to integrate academic & behavior interventions
- Informs need and intervention
- Enhances social and emotional interventions
- Prevents *future* problems (academic, substance abuse, mental illness)

Cost-efficient

- Less expensive than more intensive assessment and intervention

Identify students who are typically under identified

- Students who are experiencing internalizing problems, but not being disruptive and/or experiencing academic difficulties

Objective

- Help address disproportionality issues (mediate bias)
- Helps provide varying viewpoints, information across multiple locations

Assumptions

- **Universal screening should be integrated into a MTSS**
 - Resources are allocated (time, expertise, personnel) according to student need
 - Systems to support implementation are established
 - Data-based problem solving and decision-making guide the process
 - Decision-rules
 - Matched to the context and students
- **Universal screening should be accompanied by clearly defined objectives including services and what to screen for**
 - Indicators valued by school staff, families, and students
- **Universal screening should be aligned with policies and procedures**
 - School, district, state, federal
- **Better data earlier (universal screening) in the process will facilitate effective intervention**
 - Prevention and remediation

Common concerns

- Consent
- Confidentiality
- State and Federal Regulations
- Insufficient data and assessment systems
- Lack of resources to support identified need
- Overidentification (false positives)
- Liability
- Cost
- Low agreement between student, teacher, and parent ratings

The “BIG” questions:

Which students are in need of additional supports and which students are not?

How well are Tier 1 (universal) interventions supporting *all* of our students?

Universal screening approaches should:

- Be appropriate
 - Matched with needs and interventions, aligned with constructs of interest, supported theoretically and empirically
- Be usable
 - Feasible, acceptable, cost versus benefit
- Be technically adequate
 - Reliable, valid
- Have utility
 - Contribute to a desirable outcome

(Glover and Albers, 2007; Good & Jefferson, 1998; Hayes, Nelson, & Jarrett, 1987; Messick, 1999)

Key Informants

Teachers

Youth (Self)

Parents

Screening Approaches

- Broadband: assesses several domains
- Narrowband: assess a specific domain
- **Multiple-gate: different measure used at each stage**
 - **Multi-method**
 - **Best practice**

(Albers & Kettler, 2014; Merrell,2008)

Other sources of data:

- Office referrals, OSS, ISS
- Minors or Teacher-Managed
- Attendance
- Tardies (school and/or class)
- Academic data
- Lost instructional time (e.g., any time out of room)
- 'Visits' outside the classroom (Nurse, Guidance, etc.)
- Early Warning Systems data
- Teacher nomination

Assessment Schedule

	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
School Demographics										
*Student Demographics	X	X	X			X		X		X
Student Outcome Academic Measures										
Report Card (MS/HS) *GPA *Course Failures			X			X		X		X
Student Outcome Behavior Measures										
*SRSS - Screener		X			X				X	
Discipline *ODR			X			X		X		X
Attendance (Tardies/ Unexcused Absences)			X			X				X
Referrals										
SPED and S-TEAM			X			X			X	
Program Measures <i>For Consented Teachers Only</i>										
*Social Validity (PIRS)	X					X				X
*SET/Treatment Integrity (TI) Interval						X				
*TI -Observations								X		

Characteristics of Screening

Easily & quickly performed

Affordable

Technically adequate

Valid across groups

Produce valued outcomes

Technical Adequacy

Norms

- Standards of comparison

Validity

- How much a test is measuring what it is intended to measure

Reliability

- Consistency in measurement

*It is important to have someone (e.g., school psychologist) on the team who has psychometric and test development knowledge to assist the team with these considerations

Treatment utility : the degree to which an assessment method contributes to positive treatment outcomes

(Hayes, Nelson, & Jarrett, 1987)

It's a balance

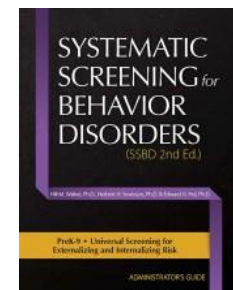
PRO	CON
> strength to identify all individuals <u>with</u> a problem	> false positives AND > assessments for those who don't have the disorder
> strength to identify all individuals <u>without</u> a problem	> false negatives and increased risk associated with missed cases and untreated problems

Examples of Standardized Screening Tools

- BESS: BASC 2- Behavioral and Emotional Screening System*
- SRSS: Student Risk Screening Scale
- SSBD: Systematic Screening for Behavior Disorders-2nd Ed.*
- SSIS: Social Skills Improvement System*
- Strengths and Difficulties Questionnaire
- BIMAS Questionnaire*

*Commercial data-management system available

This list is not exhaustive.



The following are examples of no-cost instruments

Strengths and Difficulties Questionnaire

(Goodman, 1997)

	Not True	Somewhat True	Certainly True
Considerate of other people's feelings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restless, overactive, cannot stay still for long	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Often complains of headaches, stomach-aches or sickness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shares readily with other children, for example toys, treats, pencils	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Often loses temper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rather solitary, prefers to play alone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Generally well behaved, usually does what adults request	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Many worries or often seems worried	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Student Risk Screening Scale

(Drummond, 1994)

Student Risk Screening Scale (SRSS; Drummond, 1994)

District:
School:
Teacher:
Date:

Directions: Each classroom teacher will fill in the names of the students in alphabetical order (use additional sheets of this Scale as needed). Rate all of the students on each behavior using the following scale: 0=Never, 1=Occasionally, 2=Sometimes, 3=Frequently. At the bottom of page 2, please summarize the number and percent of students in each risk category.

The total scores range from 0 to 21, forming three risk categories:
(L) Low Risk (0 to 3) (M) Moderate Risk (4 to 8) (H) High Risk (9 to 21)

Student Name	Stealing	Lie, Cheat, Sneak	Behavior Problem	Peer Rejection	Low Academic Achievement	Negative Attitude	Aggressive Behavior	Total (0-21)	Risk (circle)
1.									L M H
2.									L M H
3.									L M H
4.									L M H
5.									L M H
6.									L M H
7.									L M H
8.									L M H
9.									L M H
10.									L M H
11.									L M H
12.									L M H
13.									L M H

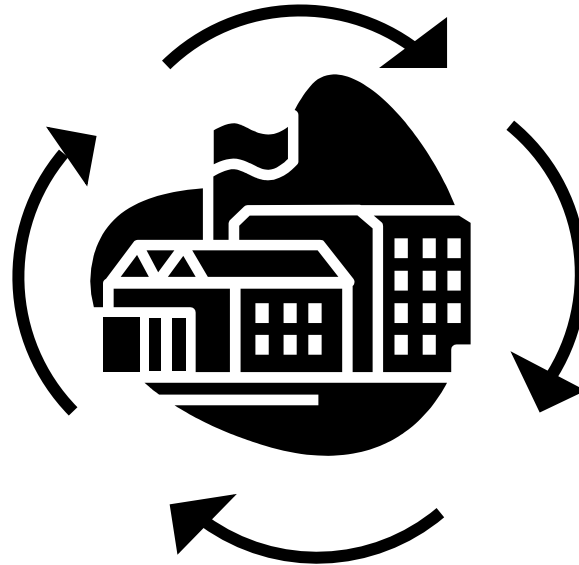
Data-Based Problem Solving using Universal Screening Data

Step 1: Problem Identification

What's the problem?

Step 4: Evaluation

Is it working?



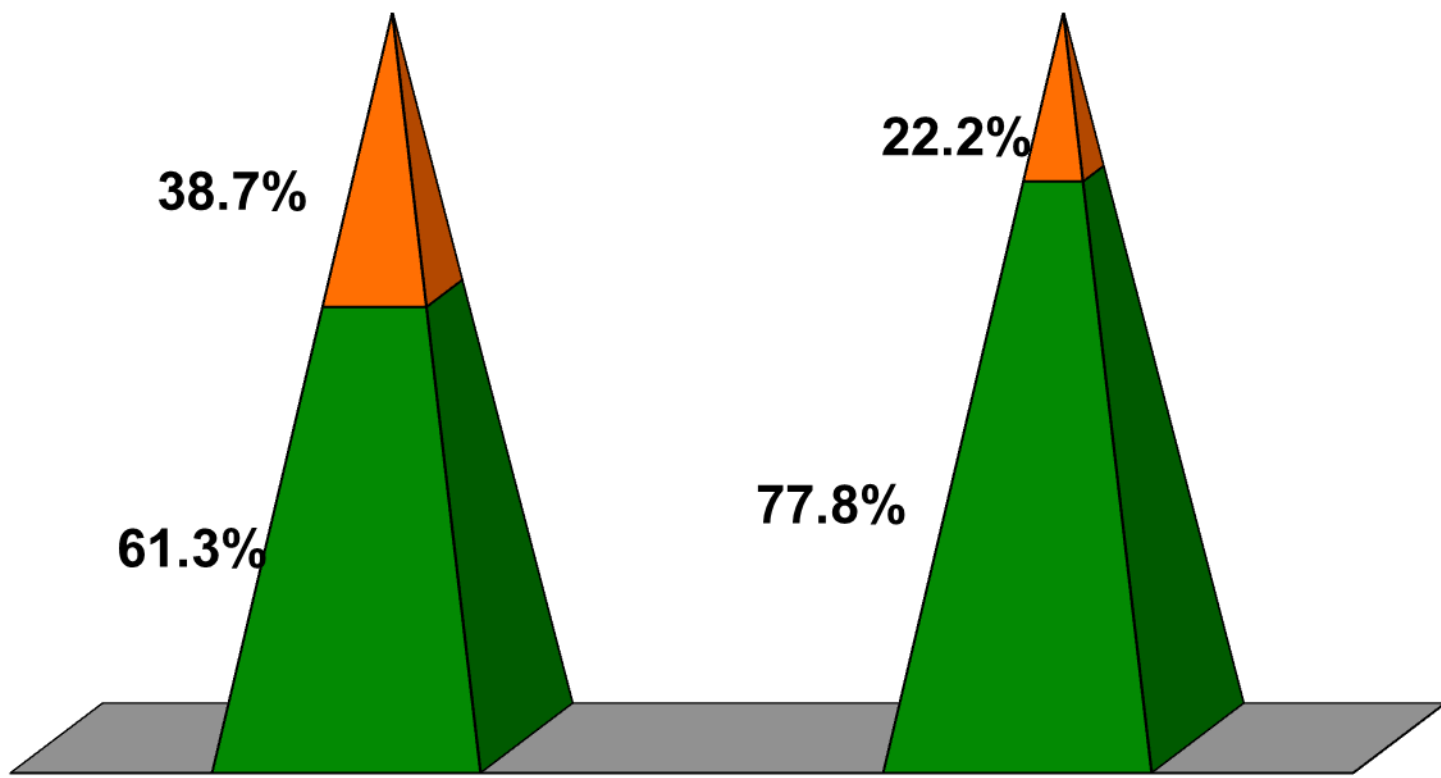
Step 2: Problem Analysis

Why is it occurring?

Step 3: Intervention Design

What are we going to do about it?

Example: School-wide Screening Data



Fall

Spring

■ At-Risk ■ Not At-Risk

Implementation of a screening system into your MTSS is *a process*.

Planning and development include:

- Obtaining district, staff, and family buy-in
- Allocating resources
- Defining roles and responsibilities
- Addressing ethical and legal/liability considerations (e.g., parental consent and youth assent; communication; confidentiality)
- Selection of the right standardized screener(s) for your school
- Training and professional development (administration, data analyses, decision-making, intervention selection, decision-rules)
- Developing/expanding your data systems
- Identifying and coordinating resources necessary to support students in need of additional intervention
- Identifying and coordinating resources necessary to improve Tier 1 supports

Poll

- Has your district/school been or considered implementing a universal social-emotional screening system?
- If no, after today's introduction, do you plan to share this information with your district?
- What additional information or resources would you need from us?

Poll

How many of your districts are interested in additional support from the PBS project to implement a standardized screening system?

Thank You

We appreciate your interest and participation!

Upcoming Online Chat

PBS Alignment to Teacher Evaluation

- Tuesday, November 4th 2014
- 3:00 – 4:00 pm EST
- 2:00 – 3:00 pm CST

<http://usf.adobeconnect.com/openta/>

Contact Information and PBIS Resources

FLPBS Project

- Phone: (813) 974-6440
- Fax: (813) 974-6115
- E-mail: flpbs@fmhi.usf.edu
- Website: <http://flpbs.fmhi.usf.edu>
- www.facebook.com/flpbs



OSEP TA Center on PBIS

- Website: www.pbis.org



Association on PBS

- Website: www.apbs.org



Resources: Books

- Kettler, R. J., Glover, T. A., Albers, C. A., & Feeney-Kettler, K. A. (2014). *Universal screening in educational settings: Evidence-based decision making for schools*. Washington DC: American Psychological Association.
- Lane, K. L., Menzies, H. M., Oakes, W. P., & Kalberg, J. R. (2013). *Systematic screenings of behavior to support instruction: From preschool to high school*. New York: Guilford Press.