Universal Screening – Systematic Screening to Shape Instruction: Lessons Learned & Practicalities

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Operational Definition

Systematic screening for behavior is a proactive procedure for detecting students who may require supports beyond primary (Tier 1) prevention efforts at the earliest signs of concern. Systematic screening involves several key features (Lane & Walker, 2015):

- Universal: all students attending a school are screened
- Repeated: fall, winter, and spring each year
- Proactive: used to examine overall level of students’ performance (e.g., internalizing and externalizing behaviors; by district, school, grade, and class levels) and inform decisions about appropriate supports for students with relevant secondary (Tier 2) and tertiary (Tier 3) needs
- Psychometrically sound: reliable and valid for the intended population

Rationale

Point prevalence estimates suggest about 20% of students experience emotional or behavioral disorders (EBD), which includes externalizing (e.g., aggressive, noncompliant) and internalizing (e.g., shy, anxious, socially withdrawn; Forness et al., 2012) behaviors. Furthermore, evidence indicates 46% of adults experience an EBD in their lifetime with a median age of onset of approximately 14 years (Forness et al., 2012). However, students with EBD account for less than 1% of the total population of students receiving special education services. Early detection is more likely to lead to intervention efforts provided at the earliest possible juncture (Gresham, 2007;
Walker et al., 2014). Often, regularly collected schoolwide data sources such as office discipline referrals (ODRs) are used to identify students with or at risk for EBD. Yet, ODR data are highly unlikely to detect students with internalizing concerns as this group of students are less likely to engage in behaviors that call attention to themselves and disrupt instruction (McIntosh et al., 2009). Therefore, systematic screening for behavior is a necessary step in identifying students at the first sign of concern to detect both major disorders of childhood: externalizing and internalizing behaviors.

Procedures

Once a school or district has decided to move forward with screening, creating a district-university partnership or accessing technical assistance can help ensure success. However, if such partnerships are not available, several key questions can guide decision making. For example, Lane, Menzies, Oakes, and Kalberg (2012) suggest considering the following questions:

- What are the grade spans (or combination of grade spans) you are working with: preschool, elementary, middle, or high school?
- What types of behavior patterns are you concerned about (e.g., externalizing and/or internalizing, prosocial skills, motivation)?
- Are you interested in accessing information from multiple informants, meaning are you interested in screening tools that can be completed by people other than teachers such as parents and or students themselves (keeping in mind additional permissions will be necessary for parent and/or student-completed screening tools)?
- What resources are available to invest in screening? Are you seeking a free access tool? Or do you have financial resources to invest in commercially available tools? What personnel will be given the responsibility for screening preparations, summarizing data, and ensuring educators have access to data for decision making? For teacher-completed screening tools, how much teacher time can be devoted to completion (e.g., 15 minutes? 30 minutes?) and using data to shape instruction?
- Are you looking for a screening tool that is part of a family of tools including assessment tools and intervention resources such as the Systematic Screening for Behavior Disorders (2nd edition; Walker, Severson, & Feil, 2014), the Social Skills Improvement System (Gresham & Elliott, 2008), and the Behavioral and Emotional Screening Scale (Kamphaus & Reynolds, 2015)?
- How reliable and valid are screeners of interest for your particular population (e.g., locale, gender)?
- What are your state, district, and local policies surrounding systematic screening?
In optimal conditions, district leaders would collaborate with school-site leaders to use these and other questions to explore available tools (see ci3t.org/screening). Then, after narrowing the options to 2-3 screening tools, many districts contact publishers or test developers, read the available literature, and connect with other district leaders engaged in screening to learn more about the tools they are exploring. Here the goals are to explore psychometric issues (reliability and validity) as well as social validity (e.g., social significance of the goals, social acceptability of the procedures, and the social importance of outcomes; Wolf, 1978). Then district leaders can provide professional learning and adequately resource the selection and installation of systematic screening three times each year as a regular school practice (Oakes et al., 2017).

After the screening tool is selected, district leaders would carefully review the available resources such as technical manuals, installation guides, and available coaching guides and professional learning materials to support installation. Although specific details vary according to the tool selected, taking the time to prepare is important to ensure procedural integrity. Moreover, the goal is to make certain preparation, administration, scoring, data sharing, and decision making efforts happened as intended. For example, procedures will need to be in place to make certain all students (general education as well as those who receive special education services) are screened three times per year as part of regular school practices. Generally, the first time-point occurs 4-6 weeks after the school year starts, the second before winter break, and the third time-point occurs 4-6 weeks before the end of the school year.

It is important to remember, in optimal conditions systematic screening for internalizing and externalizing issues occurs within a tiered system of support. It would not be wise to screen without a plan to intervene. Fortunately, many schools across the country are in the process of adopting tiered systems of support that include plans for primary (Tier 1) prevention for all, as well as secondary (Tier 2) interventions for some, and tertiary (Tier 3) interventions for a few. In optimal conditions, each level of support is comprised of evidence-based strategies, practices, and programs. Screening data are analyzed in conjunction with other data sources to inform decision making (e.g., office discipline referrals, attendance, and academic screening data as well as treatment integrity data). For example, it would be unwise to begin screening to connect students to Tier 2 and Tier 3 supports without knowing if Tier 1 efforts are being implemented as designed (treatment integrity). We would not want to inform a parent that their child is in need of additional support at Tier 2 or Tier 3 if we are uncertain as to whether or not the student had access to Tier 1. Fortunately, there are volumes written about how to use screening data within tiered systems to accurately connect students to relevant supports (e.g., Lane, Menzies, Oakes, & Kalberg, 2019; McIntosh & Goodman, 2016), including several well-sourced, high quality websites such as pbis.org, ci3t.org, miblisi.org, and intensiveintervention.org.

There are a few common errors in screening. One of the more frequent errors in screening is excluding students who receive special education services. Remember, screening data are used in multiple ways including examining the overall level of risk in each building, and monitoring the level of risk over time as prevention and intervention
systems are put into place. All students should be screened. Second, sometimes leaders omit the winter time point and screen only in fall and spring. Recall, these data are used to shape instruction – including determining responsiveness to Tier 1 efforts. If the winter time point is omitted, then the opportunity is missed to shape instruction when students return from winter break. Third, sometimes people misunderstand the timing of screening. We do not wait to see a student struggling and then screen; we screen to detect the first signs of concern and then shape Tier 1 practices and connect students to supports.

**Specific Implementation Example**

In this section, we offer a hypothetical illustration of screening at the elementary level, based on lessons learned from a six-year district partnership.

In one district, all elementary schools implemented a comprehensive, integrated, three-tiered model of prevention. These schools’ models include evidence-based supports across three tiers to promote students’ academic, behavioral, and social success. As part of their integrated approach, schools implemented School-wide Positive Behavior Interventions and Supports (SW-PBIS) and Positive Action (https://www.positiveaction.net) while also addressing students’ academic needs. In addition to benchmarking academic performance three times a year using AIMSweb, the district leaders conducted behavior screening three times per year – fall, winter, and spring – using the Student Risk Screening Scale – Internalizing and Externalizing (SRSS-IE; Drummond, 1994; Lane & Menzies, 2009).

After the fall screening time point, the leadership teams reviewed screening data at multiple levels including school-wide, within each grade-level, and for each class. The leadership team at one school noticed many students (>20%) in second grade demonstrated moderate risk for externalizing behaviors. After reviewing implementation data regarding primary (Tier 1) prevention (i.e., treatment integrity, or the degree to Tier 1 was in place as planned) the leadership team determined Tier 1 was implemented with fidelity and Tier 2 supports were needed. This team worked with second grade teachers to select Tier 2 interventions from the Secondary (Tier 2) Intervention Grids included in their Implementation Manual (see Lane et al., 2018). These teachers then collaborated to design and implement Direct Behavior Ratings (DBR; see https://dbr.education.uconn.edu/), an evidence-based Tier 2 assessment tool and intervention, for these students.

Additionally, the school leadership team examined attendance, and reading and math screening data to ensure the students had access to instruction and the current instructional level was appropriate. Next, they worked with the school counselor to collect some additional information regarding the behavioral and social needs of students demonstrating the highest risk for externalizing behaviors on the SRSS-IE. After receiving parental permission (given this support would not be provided to all students in the school), the counselor asked the
teacher and parents of each student to complete the Social Skills Improvement System (SSIS; Gresham & Elliott, 2008) rating scales identifying specific strengths and areas of need. Using this information, the counselor planned social skill interventions provided to small groups of students over the course of several weeks. The counselor shared lesson objectives with each student’s teacher, and assisted in the creation of DBR scales reflecting specific behaviors targeted such as showing respect to peers.

After the winter screening time point, the leadership team collaborated with teachers and the school counselor to review DBR progress monitoring data and the most recent screening scores. Multiple data sources indicated notable improvement in the behavior of several students. Specifically, these students no longer met the criteria for DBR specified in their school’s Secondary (Tier 2) Intervention Grid (i.e., low risk for externalizing). Teachers decided to continue monitoring these students’ behavior using the DBR, but to fade DBR intervention components (e.g., greater levels of pre-correction and brief check-ins to discuss ratings) and continued with Tier 1 social skill instruction without this extra support.

However, one student’s progress monitoring data did not show expected improvement; furthermore, winter screening scores indicated the highest level of risk for externalizing behaviors. The leadership team used these data to determine a Tier 3 intervention was warranted. The school psychologist (a member of the school-site leadership team) collaborated with the student’s parents and teachers in designing and implementing a Functional Assessment-based Intervention (FABI; Umbreit et al., 2007).

This illustration demonstrates how behavior screening data provide a clear, objective basis for identifying students who may need support beyond Tier 1. Furthermore, it highlights the importance of data-based decision-making and collaboration to ensure the needs of all students are met.

Frequently Asked Questions

Q: How does my district or school select a universal screening tool?

A: Utilizing a universal screening tool allows schools and districts to identify students who may need supports beyond Tier 1 efforts. There are a number of screening tools available. The selection of a specific tool and how to implement it requires thoughtful consideration and planning from a leadership team. The National Implementation Network offers the Hexagon Discussion and Analysis Tool to guide teams to evaluate new and existing practices. This tool may be considered and leveraged to identify the best screening tool and implementation process for a school and district. The selection process includes a discussion on program and implementation indicators. The following six domains are discussed and rated to make recommendations: evidence, usability, supports, need, fit, and capacity. Additional information can be found at the National Center Implementation Network website https://nirn.fpg.unc.edu/resources/hexagon-exploration-tool. In addition, there are free access resources available on websites such as www.pbis.org, ci3t.org, and miblisi.org.
Q: How do we initially implement the screening tool selected?

A: Once the selected screening tool has been vetted and adopted, the next step is to build district structures to support the infrastructure for installation – including professional learning on data collection, data management, and data-informed decision making. Depending on the screening tool selection, begin by reviewing available resources such as technical manuals, installation guides, available coaching guides and professional learning materials to support installation. In addition, review content provided on reputable websites (see resources) to ensure key decisions are made before launching. For example, district and school leadership teams select the screening period (e.g., the time of day that teachers will screen students in their class – often homeroom students in elementary schools, and a specific period when all students are assigned to a class for middle and high school such as fourth hour). We recommend teachers come together to screen when schools are initially installing the practice. This allows school leaders to monitor correct administration of the screening tool, answer questions, and check that data are saved securely. While teachers are in the same room for screening support, it is important screenings be done independently by teachers according to the screening technical guidance. Once these and other decisions are made, develop protocols to support high procedural integrity (see ci3t.org/screening for sample protocols). Additionally, a review of resources is needed as school systems prepare for screening. A point person is selected to take responsibility for high fidelity implementation of screening procedures as well as data use.

Q: What are some of the key logistical considerations involved in sustaining screening practices over time?

A: Some key suggestions for sustaining screening practices include:

- Establish clear procedures and protocols so building-level point people can access the information necessary to support procedural fidelity of screening.
- Provide professional learning to building-level point people to empower them to lead screening in their building.
- Select screening windows for conducting each of the three time points (fall, winter and spring). Add these dates to the district- and school-level assessment schedule and make sure information is shared with all stakeholders (e.g., school leaders, educators, and families).
- Develop timelines and procedures for the collection of screening data using a secure method. Some tools have online completion, scoring, and reporting. Other free access tools may require efforts to create the screening tool within existing data collection structures.
- Develop clear guidelines regarding data security and access. Specifically, data need to be secure and only those needing access to data to provide instructional programming should have access.
- Conduct regular tests at each administration to ensure the system works as intended prior to each screening window.
• Determine which district- and school-site leaders will take responsibility for high fidelity use of the adopted tool and procedures.
• Provide professional learning opportunities on screening (e.g., purpose, administration and use of screening data).
• Establish plans for communication with families.

Q: What type of professional learning is needed to support our faculty and staff in completing and interpreting systematic screenings?

A: It will be important to ensure educators involved in all aspects of screening receive appropriate professional learning to understand not only how to launch systematic screening efforts, but how to sustain and refine practices over time. Building stakeholders’ expertise can be accomplished with the use of a range of professional learning offerings including webinars, on-line modules, instructional videos, and coaching. Once screening practices are installed, provide professional learning and coaching so that teachers can efficiently and effectively use data to make instructional decisions across all three tiers. Many school leadership teams also disaggregate data at various levels (e.g. school, classroom) which can be a productive way to determine how to target resources. Further, leadership teams may also want to monitor any disparities based on gender, ethnicity, race, age, or ability. Then school practices and professional learning can be targeted to reduce disparities.

Q: How are the data collected used to shape instruction?

A: Screening data can be aggregated in a number of ways to examine students’ overall level of performance for the district, school levels (preschool, elementary, middle, and high schools), individual schools, and classes. Total scores can also be analyzed at the student level (and in conjunction with other data) to connect students with relevant secondary (Tier 2) and tertiary (Tier 3) supports. Consider the hypothetical illustration demonstration of how to use data to inform movement between tiers, ensuring treatment integrity and social validity are assessed at each level. Additionally, end of the year data can be used to support transitions between grade and school levels. See resources listed below to learn more about how to use screening data to shape instruction.

Q: What are good “best practices” around screening?

A: When conducting screenings, it is important to not only understand and follow procedures specified in the technical assistance manuals, but also to follow state and local laws with respect to systematic...
screening. For example, for universal screenings such as vision, hearing and reading, are informational letters to your parent community, with the option to “opt out”, sufficient? Are there plans in place for making certain that parents understand the value of screening (e.g., connecting their children to supports at the first sign of concern) and potential unintended consequences of not screening (e.g., overlooking a child who may benefit from additional assistance)?

**Q:** How much student time is required to conduct screenings?

**A:** The screening described in this RDQ refers to teacher-completed screening tools, which do not require student time away from instruction. Teachers are most often those who complete the screeners based on their observations and experiences with each student. The amount of teacher time to complete different screeners varies. We strongly encourage teachers be given dedicated time to complete the screening tools (e.g., during regularly schedule faculty meetings). Calendaring the screening administration and providing times communicates the importance of these data as well as respect for teachers’ time. Also, keep in mind the logistics such as a location to gather with sufficient technology, a time when all teachers can attend, and sufficient support personnel for teachers to have questions answered efficiently. Building screening into regular school practice can help promote the collection and use of screening data.

**Resources**

- Ci3T District Decision Making Guide
- https://intensiveintervention.org
- https://needs2.education.uconn.edu/
- https://nirn.fpg.unc.edu/resources/hexagon-exploration-tool
References


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