PBIS Forum 17 Practice Brief:
Use of Screeners for Identifying Additional Support

The use of universal screening instruments to get information about student academic, emotional, behavioral, or social needs is a valuable practice within school-wide multi-tiered systems of support (Bruhn, Woods-Groves, Huddle, 2014; Eklund, Kilgus, von der Embse, Broadmore, & Tanner, 2017; Oakes, Lane, & Ennis, 2016). Universal behavior screening allows for the early identification of students who may need additional behavior support, including those exhibiting both externalizing and internalizing patterns of problem behavior (Eklund et al, 2017; Kilgus & Eklund, 2016; Oakes et al, 2016). Rather than relying only on teacher nomination or examination of existing school data (e.g, attendance, grades), which are both a reaction to existing problem behavior and more likely to identify students with externalizing problem behavior, systematic universal screening is a proactive practice, decreasing the likelihood schools will overlook a student in need of support or intervention (Bruhn et al, 2014).

Preparing for Systematic Screening

As schools and districts plan for the incorporation of universal screening as part of their multi-tiered system of support, it is important for teams to understand how to plan for and make decisions from the data collected through the screening instrument. For districts and schools considering adding a universal screening process to their system of support, Missouri School-wide Positive Behavior Support has a planning tool available for teams to use as a guide (MO SW-PBS Tier II/Tier III, 2017). The *Universal Screening Considerations* document is included in the resources section of this brief.

As part of the process of assessing the school's ability to respond to the screening data with the adequate level of support, schools can estimate their projected capacity for intervention by completing a simple projection table (MO SW-PBS, 2017). The goal is to have effective universal supports in place to sufficiently support approximately 80% of the students, and provide the environment to support the success of students who require targeted or intensive support as they learn and practice new skills.

Total Student Enrollment		Our Numbers		Our Numbers
	80%			
	10%		15%	
_____	1%		5%	

At _____(School Name)_____, the student population is _____ students. Based on the expected percentages in tiered intervention, _____ students, or 80%, will use expected behaviors when the school implements Tier I Universal practices with fidelity. Approximately _____ – _____ students, or 10-15%, may need additional support, or Tier II Intervention, to reliably perform expected behaviors. Finally, it is possible that _____ – _____ students, or 1-5%, may need the most intensive level of support, a Tier III Behavior Intervention Plan, over the course of the school year.

(MO SW-PBS Tier II/Tier III workbook, 2017)

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Using existing school-wide data, such as attendance rate, percentages of students with 0-1 ODRs, assessment data, grades, and other collected information, the school can determine the current overall response to their Tier I universal system. The schools will then have the information to compare their school's *base rate*, or the proportion of students in the school who exhibit emotional or behavioral risk, to the expected base rates in the tiered intervention model, and calculate their school's *serviceable base rate*, or the amount of students identified as at risk who could reasonably be served in a small group or individual intervention with the current resources available in the school (Kilgus & Eklund, 2016). The school's current resources could include personnel, curriculum, materials, scheduling flexibility, team stability, and other factors supporting implementation of practices.

When teams are prepared for implementation with the necessary information, they are more likely to be accurate in their decision to use screening when effective supports are in place at Tier I, adequately plan for the efficient and effective use of resources, and accurately provide the needed level of support for students with results indicating risk (Kilgus & Eklund, 2016).

Using the information about the current base rate and the calculated serviceable base rate allows the school team to determine whether the time is right to consider adding a systematic screening process, or if a focus on intensifying universal supports to better support the students is a better use of resources. It is inefficient and unlikely to be sustainable for schools to serve 30-40% or more of their students in intervention (Dowdy, Furlong, Raines, Bovery, Kauffman, Kamphaus, Dever, Price, & Murdock, 2015; Kilgus & Eklund, 2016). Schools can still use information from a screening instrument in the planning and provision of robust universal supports, but should keep the information about their serviceable base rate in mind.

Choosing the Appropriate Screening Instrument

There are several valid and reliable screening instruments available commercially or for free that schools should review to choose the one best suited for their context and purpose (Oakes et al, 2016). Screening tools are designed to be used with different age groups (early childhood through adult), can include self-rating, teacher rating, parent rating, or a combination of these, and can be administered with paper and pencil, through a specific software package, or via the internet. All of these different features are important for teams to take into consideration to ensure they are choosing the tool with the best fit for their school.

The Ohio Department of Education, in partnership with Miami University's Center for School-Based Mental Health Programs, and the Ohio Mental Health Network for School Success, has developed a *Mental Health, Social-Emotional, and Behavioral Screening and Evaluation Compendium (2nd Ed)* with helpful information for schools and districts to use as a reference when selecting the appropriate screening tool. A link to this compendium is available in the resources at the end of this brief.

Using the Screening Data for Decision Making

When the data from the universal screening instrument has been collected and analyzed, schools can plan for the appropriate response. Using the information about the school's projected capacity and serviceable base rate, the team can identify how school-wide, class-wide, and individual supports can be provided. The following graphic from Kilgus & Eklund (2016) can be used as a decision-making guide for teams.

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Figure 1. *Graphical Depiction of the Newly Proposed Universal Screening Procedural Framework*
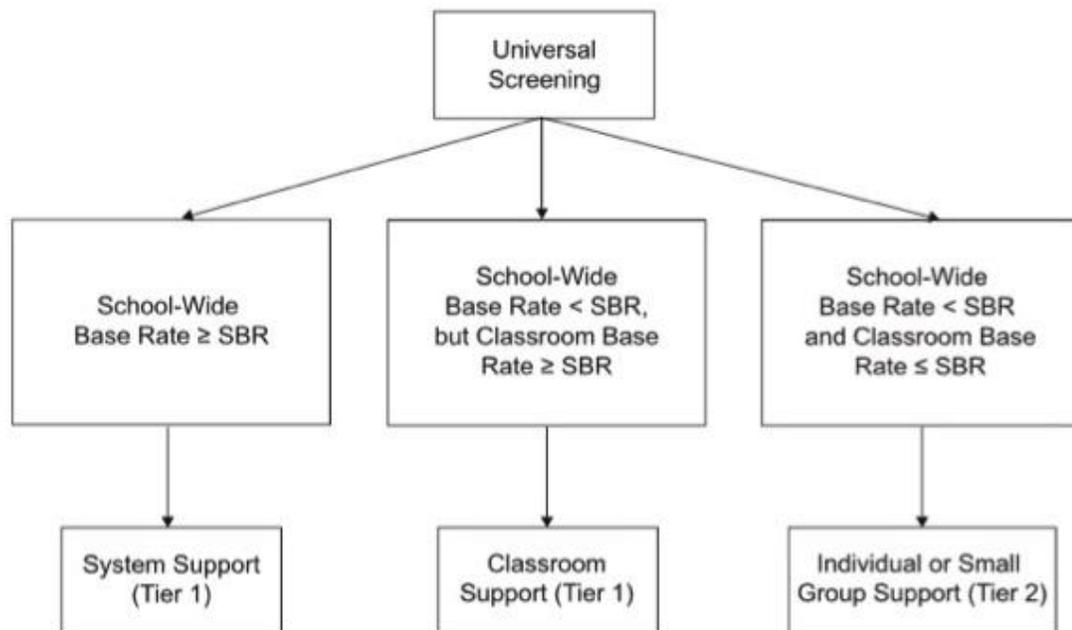
Note. SBR = serviceable base rate.

(Kilgus & Eklund, 2016, Figure 1, p. 127)

School-wide Base Rate ≥ Serviceable Base Rate (SBR)

If the screening results indicate the proportion of students exhibiting emotional or behavioral risk is higher than the previously calculated school serviceable base rate, the team should focus on strengthening supports at the Tier I universal level (Kilgus & Eklund, 2016). The team needs to consider whether expectations and rules are taught and practiced sufficiently for students to perform them fluently and with performance feedback (recognition of success, re-teaching when errors develop), whether all staff have had adequate training and feedback on implementation of Tier I supports to be implementing with fidelity, and whether the team is using data to monitor outcomes and respond accordingly. In addition, the school may use the information to incorporate social-emotional learning more prominently in their school-wide efforts, engage in ongoing professional learning about positive mental health and development, and focus their efforts more specifically to the areas of need indicated by the data (Dowdy et al, 2015; Kilgus & Eklund, 2016).

School-wide Base Rate < SBR, but Classroom Base Rate ≥ SBR

The screening results may indicate elevated risk rates are concentrated in particular classrooms or grade levels rather than distributed school wide, yet they still represent more students than can practically be served in small group or individual intervention (Kilgus & Eklund, 2016). In this case, the team would want to look more closely at the classrooms with elevated risk to determine whether intensified class-wide supports, such as increased teaching, practicing, and feedback in following expectations, or specific social skills teaching, such as Social Skills Intervention System Classwide Intervention Program (SSIS-CIP) or other research-based

support, is needed or if additional support for the teacher or environment is required (Elliott & Gresham, 2007). Practices such as Tootling, Positive Peer Reporting, or Class-Wide Function-related Intervention Teams (CW-FIT) would be helpful in these classrooms as well (MO SW-PBS Tier II Workbook, 2017; Wills, Kamps). The team could provide resources to intensify class-wide supports in these rooms, while considering Tier II interventions for students in classrooms with base rates below the predetermined serviceable base rate (Kilgus & Eklund, 2016).

School-wide Base Rate < SBR, and Classroom Base Rate < SBR

When the school-wide base rate and the classroom base rate are both less than the predetermined serviceable base rate, indicating Tier I supports are effective for meeting the needs of the majority of the students, the team will consider small group and individual interventions (Kilgus & Eklund, 2016). Choices for small group interventions could include Check-In, Check-Out (CICO), Social Skills Intervention Groups (SSIG), Self-Monitoring, or other age, context, and function appropriate research-based intervention (MO SW-PBS, 2017). For students needing intensive individualized support, schools could plan to conduct a Functional Behavior Assessment (FBA) in order to design an appropriate Behavior Intervention Plan (BIP).

Frequently asked questions

Q: Once a universal screening instrument is chosen, what can a school/district do to best prepare for administration?
A: From practical experience, more reliable results are garnered when schools/districts invest in providing quality professional development around the instrument. While this will vary based upon instrument and context, it is suggested the following be provided: a rationale for the process (the why); an overview of the instrument, including operationally defining each of the questions asked (the what); and how the results from the process will be used (the how). This is applicable for all stakeholders that will be accessed as a result of the process.

Q: How often should a school/district engage in the universal screening process?
A: Frequency will vary by screening instrument and school's context and purpose for screening; accessing the research brief for the screening instrument will provide guidance with how that tool has been/should be utilized. If no specific guidance is provided, practitioners often engage in the screening process at least two times throughout the school year. Often, the first administration take place approximately six weeks into the school year. Some schools choose to complete a second administration approximately four weeks after the start of second semester. Practical application dictates that schools/districts find a balance between intensity/demands on staff and stakeholders to gather the data and the overall usability of the results. It is important that each administration results in schools/districts meaningfully utilizing the data that is collected.

Q: How do schools use the data that comes from the universal screening process?
A: Due to the subjective nature of most screening instruments, it is best to couple the process with other metrics that provide an overall picture of students who are identified as demonstrating at-risk or high-risk behaviors. While a student would not be harmed by receiving the additional services resulting from a small group or individual interventions, it is important to note that placing all students into such interventions based solely on the results of a universal screening tool could result in overtaxing your systems. Missouri Schoolwide Positive Behavior Support suggests that schools create a multi-prong gating process that determines data decision rules that guide placement into small group or individual interventions.

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Q: Do you have to inform guardians that you'll be engaging in a universal screening process?
A: It is best practice that schools and other educational authorities are engaging in due diligence to make sure that they are informing guardians. While informing should be a mandatory practice, requiring guardian consent is not mandatory as long as every student who is screened can access school supports as part of their multi-tiered systems of support. Missouri Schoolwide Positive Behavior Supports suggests that schools/districts adhere to and mimic local policies like academic or health screening; as such, many schools/districts may design an opt-out consent process for guardians to choose.

Resources

MO SW-PBS - http://pbismissouri.org
  ● Access Tier I, II, and III workbooks
  ● Create a free account to access virtual modules
  ● Universal Screening Considerations guide: 3.3 Universal Screening Considerations

Project Aware Ohio/Ohio PBIS Network
  ● School-Wide Universal Screening for Behavioral and Mental Health Issues: Implementation Guidance https://education.ohio.gov/getattachment/Topics/Other-Resources/School-Safety/Building-Better-Learning-Environments/PBIS-Resources/Project-AWARE-Ohio/Project-AWARE-Ohio-Statewide-Resources/Screening-Guidance-Document-Final.pdf

Ohio Department of Education
  ● Mental Health, Social-emotional, And Behavioral Screening And Evaluation Compendium (2nd Ed) https://education.ohio.gov/getattachment/Topics/Other-Resources/School-Safety/Building-Better-Learning-Environments/PBIS-Resources/Tier-II-Tier-III-and-Behavioral-Health/Mental-Health-Social-and-Emotional-Screening-and-Evaluation-Compendium-with-bookmarks.pdf

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